OPENING REMARKS: Although three-quarters of American medical schools offer some sort of humanities coursework or course content, much of this instruction remains tangential and peripheral to mainstream medical education. If we are ever to make a case for full integration of humanities in at least certain aspects of medical training, we must be able to demonstrate the outcomes-based efficacy of this teaching approach. Partly this is so for pragmatic and strategic reasons. Curricular time is precious, and to justify regular inclusion of humanities coursework will require more than goodwill; it will require evidence. But there are more important reasons for examining outcomes related to teaching the humanities. Even within the field itself, serious questions have been raised regarding exactly how and why exposure to the humanities makes one a better doctor. We take it as an article of faith that learner empathy and understanding improve after reading a poem or story, but what are the mechanisms by which this transformation occurs? How do such attitudes and insights translate into interactions with patients? And do the patients themselves perceive such doctors as more compassionate, more competent, more anything? The enormous challenge before us is to reexamine an entire body of knowledge that does not arise out of an empirical, scientific tradition (ie., the humanities) to figure out what kinds of methodologies and tools are most appropriate toward assessing its effects in the domain of medical education. This clearly is no easy task. However, it is not a sacrilegious undertaking. Indeed, we will truly be able to advance scholarship in the area of medical humanities by asking such questions, and more importantly, seeking their answers.

HUMANITIES EVALUATION RESEARCH: I will briefly describe three evaluation projects in the area of medical humanities undertaken to assess the effect of exposure to the humanities on medical students. The first project uses a combined qualitative/quantitative methodology in a quasi-experimental design to evaluate changes in perceived empathy in a self-selected group of medical students participating in a literature and medicine elective, as well as general effects of the class on learners. The second project is an empirical study of language patterns in student point-of-view writing in response to a literary stimulus that seeks to correlate use of positive emotion, negative emotion, and cognitive analysis with outcomes of professionalism and communication skills. The third project assesses changes in student attitudes toward perceptions of professional usefulness of the humanities in learners' future professional lives as a result of participating in both a literature-based discussion session and a required creative project. All three projects seek to understand more precisely on what dimensions learners may change as a result of studying the humanities.