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Lamon, E. W.; Whitten, H. D.; Lidin, Bodil; and Fudenberg, H. H., "IgM-Induced Tumor Cell Cytotoxicity Mediated by Normal Thymocytes" (1975). *MUSC Faculty Journal Articles*. 62. https://medica-musc.researchcommons.org/facarticles/62

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More than Words: Applying the Discipline of Literary Creative Writing to the Practice of Reflective Writing in Health Care Education

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Published online: 16 July 2010 © Springer Science+Business Media, LLC 2010

Abstract This paper examines definitions and uses of reflective and creative writing in health care education classrooms and professional development settings. A review of articles related to writing in health care reveals that when teaching narrative competence is the goal, creative writing may produce the best outcomes. Ultimately, the paper describes the importance of defining *literary creative writing* as a distinct form of writing and recommends scholars interested in using literary creative writing to teach narrative competence study pedagogy of the field.

Keywords Writing · Reflective writing · Creative writing · Narrative competence

Introduction

Rita Charon has argued that patients suffer at the hands of health care providers who cannot "follow a narrative thread; who cannot adopt an alien perspective; who become unreliable narrators of other people's stories; who are deaf to voice and image; and who do not always include in their regard human motives, yearnings, symbols, and the fellowship born of a common language.¹" Health care writing courses, seminars, and workshops require students to complete pieces of *reflective writing* or *creative writing* under the umbrellas of narrative medicine, literature and medicine, and/or medical humanities. While the literature regarding the use of writing in health care education contains a number of articles about the value of writing to students and professionals, the distinction between reflective and creative writing is not elucidated, and the two terms are often conflated, which begs a question: Are reflective writing and creative writing used as interchangeable terms in health care education, and should they be? This paper compares various ways reflective writing and creative writing and implemented in health care education. Ultimately,

¹J.D. Engel et al., *Narrative in health care*. (New York: Radcliffe Medical PR, 2008), 167.

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Comparing reflective and creative writing

Reflective writing in health care education is either explicitly or implicitly defined as writing that requires one to reflect on a personal experience for the purpose of self-awareness and/or professional growth. Types of reflective writing include personal essays, journal entries, and free writing, but some teachers include poetry and fiction and other writing exercises in the category as well. Goals and objectives typically associated with reflective writing revolve around making meaning of clinical encounters, processing experiences, and improving introspection and self-awareness. In addition, a common theme among reflective writing articles is the creation of community. For example, White identified 1) facilitating discussion and 2) improving interaction among students and between students and faculty as anticipated outcomes of a reflective writing study among fourth-year medical students completing rotations in surgery.² Kind, Everett, and Ottolini asked third-year medical students to write reflective essays on doctor-patient interactions as a means of improving students' ability to connect with patients and families.³ Similarly, Westmoreland et al. used reflective writing to improve Indiana University School of Medicine students' attitudes toward geriatric patients.⁴ In this study, reflective writing was believed to have transformative powers with the potential to change behavior. This focus on behavior, connection, and growth implies the main purpose of assigning reflective writing is to allow students and professionals to express themselves actively and to evaluate and share their experiences.

In contrast to reflective writing, creative writing is sometimes described in the literature as involving an expectation that students will develop critical reading and literary writing skills *in addition to* expressing themselves. While creative writing might begin as reflection, through revision and editing, writers pay attention to craft. For example, in "Why Should Medical Students Be Writing Poems?" Rafael Campo suggests that the writing of poetry involves a love of language, citing imagery, metaphor, and musicality among the admirable qualities in poems produced by students. Campo recognizes that poetry involves a "formal acumen," which writing for the sheer sake of reflecting may not require.⁵ A writing workshop at Yale planned by Reisman, Hansen, and Rastegar along with physician-writer Abraham Verghese also stressed attention to writing craft, focusing on the quality of student writing instead of the content.⁶ The residents in the class were given instruction in character and plot development, effective use of language, and methods of engaging readers. Participants were encouraged to produce nuanced, publishable pieces

² J. White, "The Use of Reflective Writing in Exploring Student Experiences in Surgery," *Journal of Surgical Education* 7:1 (2008): 519.

³ T. Kind, V.R. Everett, and M. Ottolini, "Learning to Connect: Students' Reflections on doctor-patient interactions," *Patient Education and Counseling* 75 (2009): 149.

⁴ G.R. Westmoreland et al., "Improving Medical Student Attitudes Toward Older Patients Through a 'Council of Elders' and Reflective Writing Experience," *Journal of the American Geriatric Society* 57 (2009): 315.

⁵ R. Campo, "Why Should Medical Students Be Writing Poems?" *Journal of Medical Humanities* 27 (2006): 254.

⁶ A. Reisman, H. Hansen, and A. Rastegar, "The Craft of Writing: A Physician-Writer's Workshop for Resident Physicians," *Journal of General Internal Medicine* 21 (2006): 1109.

rather than simply to describe an experience and its implications.⁷ Foster and Freeman also acknowledged the value of studying technique. In a two-session exploration of general practice registrars' perceptions of poetry, the authors used close reading to improve listening and interpretation skills. They noted that poetry in particular could be valuable because of its use of metaphor, imagery, complexity and ambiguity—discursive features to which health care workers should be attuned in practice.⁸

When teachers expected students to learn creative writing techniques, the outcomes and/ or objectives almost always included a partial focus on enhancement of empathy, the development of self-awareness, and the improvement of relationships. For example, while the instructors' aim in the Yale resident workshop was to teach residents craft, residents also valued improved levels of self-awareness and the sense of community that developed among participants.⁹ In addition, while participants in the Foster and Freeman study recognized the value of developing close reading skills, they also noted that poetry allowed one to explore feelings and to improve awareness of self and others.¹⁰ The results of these projects illustrated how creative writing has the ability to make students more attuned to language and craft while simultaneously allowing students to meet the goals of reflective writing.

A few studies suggested that poetry in particular gave students unique opportunities to learn writing craft while also reflecting on practice. Shapiro and Stein studied poetry's ability to help students understand their relationships with patients and families as well as with other health care providers. These authors indicated that the use of particular poetic devices would help students construct experiences in challenging and rewarding ways.¹¹ For example, while the authors categorized student poetry thematically, they also provided comprehensive descriptions about how craft was taught as well as how literary techniques were evident in pieces produced by students. As they analyzed a variety of student poems according to content, they also discussed students' use of poetic devices like structure, metaphor, point of view, synecdoche, and diction among others.

Likewise, Holmes, who wrote about poetry as a way of knowing nursing, acknowledged that poetry required the poet to exercise heightened skills of observation.¹² For her, the expression of a poetic image involves a "synergism of intellect, emotion and skill with language" that leads to what James Joyce called "epiphanic knowledge.¹³" Holmes argued that nurses might improve their practice by becoming more perceptive, attentive to image, metaphor, and meaning. Another nurse educator, Young, proposed that teaching creative writing should involve instruction and practice in writing techniques such as character, description, and detail so nurses could develop better communication skills that would benefit them in daily professional writing tasks requiring coherence and conciseness.¹⁴

But wouldn't nurses and other professionals develop better communication skills by regularly engaging in *any* kind of writing? And, couldn't one argue that any act of writing

⁷ Ibid, 1111.

⁸ W. Foster and E. Freeman, "Poetry in General Practice Education: Perceptions of Learners," *Family Practice* 25 (2005): 295.

⁹ Reisman, Hansen, and Rastegar, 1111.

¹⁰ Foster and Freeman, 298.

¹¹ J. Shapiro and H. Stein, "Poetic Licence: Writing Poetry as a Way for Medical Students to Examine Their Professional Relational Systems," *Families, Systems, and Health* 23 (2005): 279.

 ¹² 12. V. Holmes, "Writing Poetry: A Way of Knowing Nursing," *Journal of Advanced Nursing* 28:6 (1998):
 1191.

¹³ Ibid, 1192.

¹⁴ S. Young, "Beyond 'Hot Lips' and 'Big Nurse': Creative Writing and Nursing," *Composition Studies* 33: 1 (2005): 80.

is an act of creation and, thus, creative? In other words, is it necessary to distinguish between reflective and creative writing, or is it an intellectual exercise without much practical application? While results from this review support the use of both reflective and creative writing, they also suggest that identifying and teaching creative writing as a unique discipline may offer singular benefits for health care students and professionals.

Making distinctions between reflective and creative writing

The need to define creative writing was supported by Samson and Visser's "Creative Writing in Health Care: A Complementary Medicine." These authors described an ongoing debate about whether creative writing in health care is used primarily for healing or as a form of art, noting that while creative writing has been used increasingly in health care activities and has become the subject of research, historically the term creative writing has defied easy categorization.¹⁵ Put simply, creative writing, like reflective writing, has been used to mean different things to different people.

In the introduction to their article, "Creative Writing Workshops for Medical Education: Learning from a Pilot Study with Hospital Staff," Gull, O' Flynn, and Hunter suggested that creative writing addresses the development of writing skills in addition to providing an opportunity for reflection.¹⁶ Yet, as they defined their aims for this creative writing course, they focused on writing as a means of recording and exploring thoughts in order to deal with stress. And while this course included activities that might be found in a literary creative writing workshop—writing theory, writing exercises, and constructive critiques from peers and faculty—the authors described the goals of these activities as related to encouraging creativity rather than teaching textual features and literary techniques. Ultimately, however, while group leaders saw the self-reflection aspect of writing as positive, they also noted there were "possible dangers" in exploring emotional issues, arguing that in future studies the "focus must be on creative writing, not the development of a psychotherapeutic group.¹⁷"

Because it relates directly to the use of writing as therapy, the field of *developmental creative writing* may further complicate attempts to define creative writing in health care education. Developmental creative writing, as discussed by Nicholls, refers to an evolving field in health care in which writing is used to enhance health and well-being. While Nicholls' call for researchers to move beyond well-known paradigms of expressive writing reflects a desire to acknowledge developmental creative writing as a distinct field, her focus is not on using writing to educate health care providers but on writing as a form of therapy.¹⁸ Thus, developmental creative writing may be considered a distinct subset of creative writing, not equivalent to the type of creative writing that has been taught by Verghese and Campo among others.

Perhaps most interesting to this question of how creative writing differs from reflective writing is the fact that narrative scholars Dasgupta and Charon used the term reflective writing *instead of* creative writing to describe writing that required students to pay close

¹⁵ F. Sampson and A. Visser, "Creative Writing in Health Care: A Branch of Complementary Medicine," *Patient Education and Counseling* 57:1 (2005): 3.

¹⁶ S.E. Gull, R. O'Flynn, and J.Y.L Hunter, "Creative Writing Workshops for Medical Education: Learning from a Pilot Study with Hospital Staff," *Journal of Medical Ethics: Medical Humanities* 28 (2002): 104.
¹⁷ Ibid., 104.

¹⁸ S. Nicholls, "Beyond Expressive Writing: Evolving Models of Developmental Creative Writing," *Journal of Health Psychology* 14:2 (2009): 176.

attention to formal elements and craft. In the article describing a seminar for second-year students at Columbia University College of Physicians and Surgeons, the authors noted that reflective writing is used in narrative medicine in a wide variety of ways. Included in the types of writing they considered reflective were writing exercises that asked students to take on another perspective or point of view, required students to write letters to patients, and challenged students to write passages in the voices of anatomy cadavers.¹⁹ Students who participated in the six-week seminar were asked to write about a personal illness experience which they subsequently rewrote by changing narrative aspects. While in literary writing workshops outside of health care, these teaching methods would be used to help students become better writers, Dasgupta and Charon stated that their goal was to teach empathy.²⁰ Thus, writing technique was a means to an end—it was *how* they arrived at *what* they wanted to teach.

For health care, this may be an ideal approach to teaching narrative competence. Like Verghese and Campo, these teachers taught craft so that students would understand how stories and poems were built by building them, how metaphors worked by making them work, how point of view can change a story by writing stories from alternative points of view. But if they were teaching the same skills with the same ultimate goal of making health care providers more attentive to textual features, why were they calling it by different names? And, again, does it matter what we call it?

Perhaps not. But while scholars experienced in narrative medicine may not find it necessary to distinguish between reflective writing and creative writing because they understand clearly the connection between *how* the methods associated with literary writing techniques help students learn *what* we want them to learn, some educators may not intuit this connection. Those who are new to using writing in health care education or who are looking to improve current teaching methods may benefit from becoming familiar with creative writing pedagogy and understanding what the academic discipline of creative writing requires of students.

Considering literary creative writing for the health care classroom

The question of how to define creative writing, how to teach it, and how to decide what we're teaching is not exclusive to health care. Although creative writing has become an accepted discipline in higher education with MFA programs occupying places in academia all over the US and UK, creative writing teachers often struggle to explain what they teach and why they deserve to be taken seriously in the academic world. The lack of clear pedagogy in creative writing in general has contributed to confusion about what it means in the field of health care and how it might be taught most effectively. Books such as *Colors of a Different Horse: Rethinking Creative Writing Theory and Pedagogy* and *Power and Identity in the Creative Writing Classroom: The Authority Project* represent attempts to bolster creative writing pedagogy. Articles on the topic of creative writing from journals like *Pedagogy* also contribute to the study and evolution of this controversial discipline.

One such article is Nancy Kuhl's "Personal Therapeutic Writing vs. Literary Writing," which has particular relevance here because it elucidates the difference between what Kuhl calls *literary creative writing* and *therapeutic writing*. She argues that an unfortunate

¹⁹ S. DasGupta and R. Charon, "Personal Illness Narratives: Using Reflective Writing to Teach Empathy," *Academic Medicine* 79: 4 (2004): 352.

²⁰ Ibid., 353.

relationship has emerged between writing and psychotherapy in popular culture,²¹ pointing to shows like Sex and the City, where heroine Carrie Bradshaw works out life problems through writing; to The Oprah Winfrey Show, which promotes gratitude journals as a means of developing one's spirit; and to Julia Cameron's The Artist's Way in which writing is commodified as self-help. Kuhl writes that this popular perception has created challenges for creative writing teachers since students bring preconceived notions about writing as unedited self-expression into the classroom.

As writing teachers attempt to convince students that literary creative writing workshops must focus on craft, style, narrative conventions, and audience, they face resistance from students who expect both writing and discussion to focus primarily on the writers' feelings. Students are also resistant to the idea that writers should be serious readers of others' work and ruthless revisers of their own. In her call for creative writing instructors to continue developing pedagogies to combat this problem, Kuhl implies that authority in the classroom is "a positive force that redirects students' attention beyond the self to language, writers' choices, and the written text.²²" In particular, by using Kuhl's term *literary creative writing*, educators may help convey to students that they will be asked to focus on elements other than self-expression.

In health care, focusing attention beyond the self is crucial to projects that seek to teach narrative competence, especially if the goal is to promote not only self-expression and self-awareness but also the ability to observe, listen, and empathize. Literary creative writing, as defined by Kuhl, offers increased opportunities for shifting the focus away from self, encouraging objectivity, and meeting the goals of narrative medicine. In her approach to narrative medicine, Charon has argued for the use of close reading methods to guide students through rigorous study of literature.²³ In addition, other scholars like Bonebakker of the Maine Humanities Council have identified respect for language, perspective-taking, sensitivity to alien points of view, and recognition of unreliable narrators as skills that can be developed through careful reading.²⁴ These same skills can be learned effectively through writing if educators develop rigorous pedagogical methods.

Conclusion

The practice of writing for personal discovery and expression as well as therapy should not be devalued in any way by the claim that literary creative writing can produce unique outcomes. In health care educational settings where the goal is to promote self-reflection, critical thinking and growth, reflective and expressive writing are proven and invaluable methods. However, when the goal is to foster empathy by teaching narrative competence or to improve students' observational abilities, the type of instruction offered in literary creative writing courses can help train students to be highly attentive to textual features.

²¹ N. Kuhl, "Personal Therapeutic Writing vs. Literary Writing," Power and Identity in the Creative Writing *Classroom* (Buffalo: Multilingual Matters, 2005), 4. ²² Ibid., 11.

²³ R. Charon, Narrative Medicine: Honoring the Stories of Illness (Oxford: Oxford University Press, 2006), 113.

²⁴ V. Bonebakker, "Literature and Medicine: Humanities at the Heart of Health Care: A Hospital-Based Reading and Discussion Program Developed by the Maine Humanities Council," Academic Medicine 78:10 (2003), 966.

In order to further understand the difference between literary creative writing and reflective writing, the two might be compared and evaluated using pedagogical models and learning theories in order to promote discussion about which cognitive processes are involved in each type of writing and to theorize what types of learning occur exclusively in the literary creative writing classroom. These theories should be tested by qualitative research that evaluates what is learned in literary creative writing activities used in health care education. Additionally, research should investigate how literary creative writing pedagogy has been or could be applied in health care writing classes as educators continue to adapt and improve teaching strategies in humanities courses and professional development programs.

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