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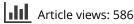
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EDITORIAL



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The arts and humanities are fundamental to health professions education

The World Health Organization, National Academy of Science, Engineering, and Medicine, and the Association of American Medical Colleges all recognize the arts and humanities as fundamental to health professions education (Fancourt & Finn, 2019; Moniz et al., 2021; National Academies of Sciences E & Medicine, 2018). A growing evidence base suggests that integration of the arts and humanities into health professions education can improve a variety of clinically relevant skills and attitudes, including observation, critical thinking, empathy, tolerance of ambiguity, and capacity for wonder, as well as support professional identity formation and teamwork (Agarwal et al., 2020; Bentwich & Gilbey, 2017; Chisolm et al., 2020; Howley et al., 2020; Moniz et al., 2021; Tackett et al., 2023; Zheng et al., 2023). The papers in this special issue on The Arts and Humanities in Health Professions Education focus on a range of topics of interest both to healthcare professionals and the patients we serve. The issue includes systematic reviews, original research, educational case reports, and commentaries on the topic of the arts and humanities in psychiatry education and in health professions education more generally. This issue also includes several personal reflections by a diverse group of clinicians, educators, and learners.

This volume begins with a series of papers focused on psychiatry, starting with a systematic review of the literature on the arts and humanities in psychiatry education. In their search of the literature, Yaden from the Johns Hopkins University School of Medicine and her team identified 35 articles that evaluated arts and humanities programs for psychiatry learners. About half of the programs included medical students, and film/ television was the most common arts and humanities subject used for teaching. A related subject, photography, and its role in psychiatry is explored by Chan and his team from the Medical College of Wisconsin and the Austen Riggs Center Erikson Institute for Education and Research. The authors reflect on the relationship of photography and psychodynamic psychotherapy, and how photographs may be used both clinically and educationally. In another paper, Ballou from the University of Toronto and Gaufberg from the Harvard Medical School describe a specific technique for incorporating photographic portraits in medical education, using the lens of psychotherapy. The authors present an exemplary historical portrait to demonstrate how this approach engages learners towards improving analytical skills and reducing bias. While the visual arts predominate in psychiatry education, two Johns Hopkins University School of Medicine medical students each share their personal reflections on how the literary arts have enhanced their own general medical learning. Kalkat describes how she has used spoken word poetry to tell her unique story, and Kelly shares how his work as a playwright and historian has informed his nontraditional journey in medicine.

This issue includes a second systematic review of the literature conducted by Kelly-Hedrick from Duke University School of Medicine and her team. The authors reviewed the results of the evaluation of arts and humanities programs in surgery education. Their search identified 10 articles and, as with the review of the arts and humanities in psychiatry education, most studies included medical student learners. However, in surgery education, reflective writing was the most common arts and humanities subject, in contrast to film/television in psychiatry education. Both systematic reviews build on and extend from a large scoping review commissioned by the AAMC (Moniz et al., 2021), from which a model was developed to understand the functions the arts and humanities serve in medical education (Moniz et al., 2021, Moniz et al., 2021). This model, called the Prism model, is the focus of a paper by Manohar from the Baylor College of Medicine. In this paper, Manohar et al provide a step-bystep demonstration of how to use the Prism model to design an arts and humanities health professions curriculum. Beginning with the first step of selecting a learning domain through the final step of curriculum evaluation, the authors demonstrate how educators can apply the model to develop curricula with intentionality and rigor. The paper by Guth et al. describes such a curriculum, developed at the University of Colorado School of Medicine in collaboration with the Center for Bioethics and Humanities and the Denver Art Museum. The authors share examples of art museum-based techniques implemented with medical students in the classroom and discuss the direct applications and importance of these skillsets in the exam room and the radiologic reading

room respectively. In a paper by Elsden and Kador et al. from University College London, University of Oxford, and King's College London present original research on the role of experiential learning spaces in supporting student wellbeing. An online survey and interviews with students from their universities reveal significantly lower levels of life satisfaction, happiness, perceived worthwhileness and higher levels of anxiety, compared to the national average. The authors also present results suggesting that experiential learning spaces (such as museums, collections, libraries, and gardens) hold strong potential to support student mental health. In a personal commentary by a Johns Hopkins University medical student, Li describes how drawing provides a way for self-expression and reflection, which supports his wellbeing and enables him to become a more well-rounded and competent physician.

Several papers present examples of programs and curricula designed to support a range of learning objectives. In an original research article from Baylor College of Medicine, Manohar et al. describe an intergenerational art and storytelling program that reduces negative biases of medical students towards older adults. In another paper, Koshy, also from Baylor College of Medicine, suggests that visual art can also be used to promote activism and meaningful action. And a paper by Balhara from the Johns Hopkins University School of Medicine and her team describes the development of a digital image library designed specifically to support the facilitation of conversations around race and racism. Kelly-Hedrick et al. from Duke University and her co-authors present evidence from the literature on the role the arts can play in the character education and virtue development of medical learners. And Smyth Zahra et al from King's College London provide an example of this in their report on a longitudinal clinical humanities and wellbeing program for undergraduate dental students focused on the development of practical wisdom.

It is clear that faculty development programs are needed to cultivate the unique set of teaching skills to design and facilitate such innovative arts and humanities programs for health professions learners. Gaufberg et al. present the development, implementation, and impact of one such program: the Harvard Macy Institute Art Museum-based Health Professions Education Fellowship. One example of a museum-based learning activity is Visual Thinking Strategies. In her paper, Moorman from the Indiana University School of Nursing, describes how Visual Thinking Strategies can create meaningful, clinically relevant reflections and discussions among nursing learners. Kagan from Cornell College of Medicine and her team also write about Visual Thinking Strategies, but with a focus on the need for faculty development in this method, especially when conducting research to evaluate the method's efficacy. Jung from the Johns Hopkins University School of Medicine and her team describe another museum-based learning activity, the Group

Poem. The authors provide specific directions on how to design and implement the activity from preselecting the works of art through debriefing the experience. In the issue's final paper, Gaufberg from Harvard University Medical School and her team provide tips for how to facilitate 'translational debriefing' discussions after any museum-based activity in a way that supports the discovery of real-world connections to clinical teaching, learning, and care delivery.

We hope that the papers included in this special issue convey our enthusiasm for integration of the arts and humanities in health professions education. Hopefully these papers will spark an interest in implementing more broadly and evaluating these programs more rigorously. We are grateful to the authors and reviewers for the time and energy devoted to creating this issue.

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