

## Propelling medical humanities in China

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### Summary

Advances in the study of the medical humanities and medical humanities education have been made over the past few decades. Many influential journals have published articles examining the role of medical humanities and medical humanities education, the development and evaluation of medical humanities, and the design of a curriculum for medical humanities education in Western countries. However, most articles related to medical humanities in China were published in Chinese, moreover, researchers have worked in relative isolation and published in disparate journals, so their work has not been systematically presented to and evaluated by international readers. The six companion articles featured in this issue describe the current status and challenge of medical humanities and medical humanities education in China in the hope of providing international readers with a novel and meaningful glimpse into medical humanities in China. This Journal is calling for greater publication of research on medical humanities and medical humanities education to propel medical humanities in China.

**Keywords:** Medical humanities, medical humanities education, academic literature

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Defined as an inter- and multidisciplinary field that explores contexts, experiences, and critical and conceptual issues in medicine and health care (1), medical humanities ought to be a source of encouragement, illumination, and understanding in support of the detailed manifestations of the idea of humane health care (2). Advances in the study of the medical humanities and medical humanities education have been made over the past few decades.

The literature on medical humanities is relatively extensive. From the end of the 19th century to the early 20th century, research began to focus on the interaction between medicine and society. In 1919, William Osler put forward the concept of scholars in medical humanities. In the 1940s, George Sarton first used the term "medical humanities" in the journal *ISIS* (3). Since the 1970s, new journals such as the *Journal of Medicine and Philosophy*, the *Journal of Medical Humanities*,

and *Literature and Medicine* began to outline the contours of the intersection between humanities and medicine interface in the United States (US). Medical humanities has also had an equally fruitful past and achieved academic recognition in the United Kingdom (UK). The BMJ Group publishes *Medical Humanities*, the *Journal of Medical Ethics*. And several peer-review journals devoted to exploration of particular facets of humanities and medicine, such as *Medical History* and *Social History of Medicine*, that predate the appearance of publications devoted to the generic area of medical humanities.

Medical humanities gained institutional recognition with the founding of the Institute of Medical Humanities at the University of Texas Medical Branch at Galveston (UTMB) in 1973 to ensure that humanities teaching and research became an integral part of the education of future scientists and healthcare professionals at UTMB (4). In 1993, the General Medical Council in UK also highlighted the importance of the humanities in medicine by suggesting its integration into the undergraduate medical curriculum to foster communication skills, study of ethical and legal issues relevant to clinical practice, respect for patients and colleagues, and patients' rights in all respects (5).

Besides efforts in the US and UK, many medical universities in other Western countries, such as Canada,

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Germany, and Sweden, and in some Asian countries like Japan and South Korea, have already recognized the value of medical humanities by integrating humanities teaching into their medical education.

Over the past 40 decades, articles on medical humanities and medical humanities education have been published in many influential journals including *The Lancet*, *Academic Medicine*, *Medical Teacher*, *BMC Medical Education*, *The Journal of Medical Humanities*, and *Medical Humanities*. These articles have extensively examined the role of medical humanities and medical humanities education, the development and evaluation of medical humanities, and the design of a curriculum in medical humanities education in Western countries.

In China, instruction in and research on medical humanities has increased at many medical colleges since the 1980s. The reform of medical education over the past decade has emphasized topics such as medical humanities, life-long learning, and patient-centered learning in an effort to increase the professionalism of future physicians (6). However, obstacles such as a lack of organizational independence and a shortage of instructors have delayed the integration of medical humanities courses in medical universities in comparison to the pace in Western countries (7). Moreover, many articles have featured a long-running commentary on the medical humanities and frequent calls for a greater emphasis on the humanities in medical education, but most of those articles were in Chinese. In China, researchers have worked in relative isolation and published in disparate journals, so their work has not been systematically presented to and evaluated by international readers.

The six companion articles featured in this issue describe the current status and challenge of medical humanities and medical humanities education in China in the hope of providing international readers with a novel and meaningful insight into medical humanities in China.

In this issue, Yun *et al.* emphasized the importance of using medical humanities in medical policy-making and to guide clinical practice, and those authors called for the launch of a national foundation to support research on medical humanities in China. Liu *et al.* emphasized the importance of incorporating medical humanities education into education for Chinese medical students, arguing that comprehensive medical education that includes both medical skills and humanities could greatly improve medical care. Yun *et al.* described centers and institutes of medical humanities education established in China over the past few decades. Courses such as an online course entitled Introduction to Medical Humanities created at Fudan University in 2015 have benefited almost half a million students from 140 universities.

Given the current tensions in the doctor-patient relationship in China, Wang *et al.* have emphasized

the role of medical humanities in clinical practice. They argue that the most efficient way to improve the doctor-patient relationship is to change the emphasis on medical science and to reshape medical humanities. Liu *et al.* raise similar concerns about training in communications skills for Chinese doctors to improve the doctor-patient relationship. They suggest that efforts should be made to teach medical communication in accordance with the requirements of competency-based education.

A thorny problem in China is the mindset that "medical technology comes first", leading to technology-oriented medicine that overlooks humanity in medical practice. This is one of the most pressing issues that China must address. An article in this issue by Song *et al.* goes straight to the heart of this question, insisting that medical humanities play a greater role in medical education to foster medical personnel with humanistic spirit, and measures should be taken to promote the integration of medical scientific spirit and medical humanistic spirit. Moreover, Chen *et al.* recommends the use of films and television shows as a medium to accelerate the spread of medical humanistic spirit.

In the era of biological-psychological-social medicine model, an exclusively technical-scientific approach to education is increasingly considered inadequate for the 21st century doctor. Medical humanities must be added to the medical curricula to foster sensitivity, empathy, and understanding of the human condition among medical students. In China, the integration of medical humanities courses in medical universities has occurred later than in Western countries. The field of education differs considerably between Western countries and China. Here in China, medical students need to be reminded that they need both knowledge of medical science as well as medical humanistic spirit in the care they provide.

The six companion articles featured in this issue are just the beginning. This Journal is calling for greater publication of research on medical humanities and medical humanities education to propel medical humanities in China. These articles and future publications should stimulate ideas regarding both the teaching and learning of medical humanities, thus helping to create better conditions for medical education and to give medical students in China a more well-rounded professional identity.

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