

Medical narratives display and reception

A celebration of student work and learning

Each semester, all reference librarians at the University of Rochester's River Campus Libraries work with at least one introductory writing class offered by the Writing, Speaking, and Argument Program. There are several sections of this required undergraduate course, each containing around 10 to 15 students. The graduate instructors choose the theme(s) for their courses and design the syllabus, incorporating the act of writing with particular themes and subjects. Working with the graduate instructors for these courses, we customize our reference and instruction services depending on the content, assignments, instructor preferences, and needs of the class.

In fall 2012, I collaborated with graduate student instructor Jenny Boyar for her writing class, "Narratives of and as Medicine." The main objective of the course is to teach the students effective writing skills in creating a thesis, supporting argument, and synthesizing scholarly sources to contribute to academic research. In Boyar's syllabus, she describes narrative medicine as "a burgeoning interdisciplinary movement (that) encourages patients and professionals to practice storytelling as a holistic alternative to traditionally clinical modes of communication."¹

Assignments and library classes

The course's content attracted many undergraduate pre-med students. The class met in Rush Rhees Library and visited Miner Library, the University of Rochester's medical library. Boyar and I met to discuss our learning objectives and content we'd like covered in our library instruction session. For our session, the students received a brief tour of the main features of the library and then practiced using

a few suggested library resources from our Web site and their library resources course page. At the medical library, they received a tour of the facility and a viewing of some of its special collections items.

As in all Writing 105 classes, the students were assigned a research paper, an opportunity to practice their argument, and research skills acquired in the class. Subsequently, as a separate assignment, students had to create their own personal medical narratives, turning theory into practice. These narratives could be real or fictional, and had to choose from "four of medicine's central narrative situations: physician and patient, physician and self, physician and colleagues, and physicians and society."²

While these narratives were creative writing exercises, they could also indirectly be an examination and reflection tying together what they'd learned in class, from their research, personal experiences, and curiosities. Inspired by a collaboration between another writing instructor and his course's librarian, where a portion of the students' final projects were displayed in the library followed by a reception, Boyar asked if we could do this. Experiencing the success of this previous pilot project, I enthusiastically agreed and began planning the process.

Display and reception

When the students turned in the final drafts of their personal medical narratives, Boyar

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asked them to indicate whether they wanted their narratives displayed and, if so, to choose one page of the narrative for the display. From those who agreed to display one page of their narratives, I asked who would be willing to read their entire narrative at the reception. I also periodically e-mailed all of them to announce when the display went up, asked their preferences for the reception, and reminded them about the event.

Another staff member from the reference department and I put the display in our “pop-up display” area, on the first floor of the library, wedged between our Popular Reading section and a student computer and printing area, in front of the Reference Desk. The content of the “pop-up displays” range from displaying student work to a themed book display, sometimes in conjunction with an event we’re having in the library.

Of 14 students, 11 agreed to display one page of their narratives. Readers and participants would have to come to the reception to hear the rest of their stories. Four volunteers agreed to read or allow someone to read their entire narratives. They came from myriad perspectives and situations, and, by reading one page, the reader could get a vague yet intriguing sense of what was going on but not enough to get the full picture and find out what finally happened (if this was revealed at all) to the person experiencing illness.

For a little over a month, about three weeks before the reception, we displayed the one-page excerpts, giving passersby a chance to read and to spark their curiosity. Before the reception, we advertised the display and reception on the library’s Web site, invited librarians from the medical library, and posted signs throughout the library advertising the event.

The day of the reception, a couple of students could not come to read their narratives

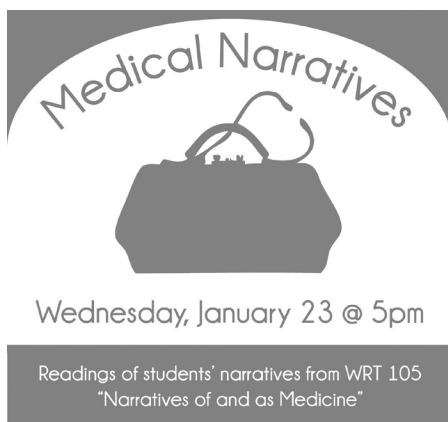
because of other commitments. In all, two students read their narratives and another librarian and I read the other two with permission from the students who could not attend. Surprisingly, another student who did not think she could come to the reception, showed up and on the fly and read her narrative. One of the narratives was a personal account of his healing process while recovering from a stroke, another, a young woman’s experiences with relating with her dying grandmother and experiencing her death. The others were a poem in a little girl’s narrative voice relating an experience before and after an operation, while another described her observations and interactions with a cousin who has autism.

After the four readings, the two students turned their chairs toward the audience for a question-and-answer session. The conversation opened itself to questions about the writing process, how what they learned in the class affected their perceptions of illness, and how it inspired their stories. Some of the issues in the stories hit home with members of

the audience as they could empathize with the stories because of something similar happened to them or someone else.

In the class, the students learned that empathy can be a by-product of practicing narrative medicine and through their performances, we all witnessed how sharing these stories with others made empathy a contagion to be spread to the listeners.

We had an audience of more than 20 for our reception, decent for a Wednesday evening. Our audience included a few writing instructors, students from Boyar’s previous and current “Narratives of and as Medicine” classes, the Writing, Speaking, and Argument Program’s Instruction Training Coordinator, a Friend of the library, a librarian from our medi-



Medical Narratives display advertisement.
Courtesy of Katharine Kumler.

cal library, and a few other librarians from the Reference, and Rare Books and Special Collections departments. Many commented on how well the narratives were written and the audience could witness the integration of what they learned from the class, content, and writing skills with personal interests and experiences. It was an evident shift from content consumer to producer. Their responses to questions also

It also reinforced that the library is their place:⁴ a public expression of the library as a learning environment and that their scholarly work is treasured along with the storage and access of other scholarly information. We are not only a house of potential evidence, but of ideas, discussion, discovery, and inspiration—a community gathering place of ideas: “The libraries’ most powerful asset is the conversation they provide—between books and readers . . . between individuals and the collective world. Take them away and those voices turn inwards or vanish. Turns out that libraries have nothing at all to do with silence.”⁵

Exhibiting student work in the library sends our community “an invitation to communicate,” and possibly a wave of inspiration.⁶ It gives an opportunity and incentive to explore, start a conversation, and to have out-of-the-classroom experiences that could still be tied to curriculum. It’s

also another way to create or strengthen collaborative relationships between librarians and faculty, students, community organizations, and other libraries.

Having the opportunity to work with Boyar and these students confirmed that the liaison relationships that librarians and the library have with the campus community can amplify everyone’s learning and discovery experiences in ways one normally wouldn’t expect. Many student work displays in libraries show works of art or award-winning research, but other kinds of student work should be valued enough to showcase.

Notes

1. Jenny Boyar, “Narratives of and as Medicine” course syllabus, accessed March 14, 2013

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Student reading at the Medical Narratives reception. Courtesy of LeRoy LaFleur.

showed a heightened sense of sensitivity and understanding for the human condition.

Reflections and musings

In previous conversations throughout the semester, Boyar and I both expressed an enthusiasm for promoting student efforts, and this was an exciting way to illustrate this desired outcome “. . . building and sustaining a ‘win-win-win’ relationship.”³ Our open and creative collaborative relationship was beneficial in combining forces to coach the students with writing and research skills, but the display and reception took it to another level.

It took the culmination of a semester-long’s worth of reading, learning, and writing and put it into a performance mode—a personal, interactive, and creative expression of a learning experience—as a third dimension to the course’s content arena.



ACRL Board 2013–14 (l to r): (back) Mark Emmons, Susan Barnes Whyte, Julie Ann Garrison, Julia M. Gelfand, Marilyn Nabua Ochoa, Irene M. H. Herold, Mary Ann Sheble, Loretta R. Parham; (front) Cynthia K. Steinhoff, Karen Williams, Trevor A. Dawes, Steven J. Bell, Douglas K. Lehman, Mary Ellen K. Davis.

- o Personal members: \$58
- o Student members: \$38
- o Retired members: \$38

- Confirmed the virtual vote approving new policies governing Section Review, Merger, and Creation which will go in effect September 1, 2013. The governing policies for all ACRL Communities of Practice are available online (www.ala.org/acrl/copa-group-breakdown).

- Confirmed the virtual vote approving the disbursement of \$32,967 in Friends Fund donations in support of the following projects:

- o \$6,500 in support of the ALA Spectrum Scholars Initiative.

- o \$10,000 contribution towards the cost of uploading *C&RL* back files to the journal's online site at HighWire Press.

- o \$4,167 to support the Library Copyright Alliance Project.

- o \$4,500 to support a Scholarly Communication Workshop.

- o \$7,800 to support consulting and coaching of the "Assessment in Action" facilitation and design team.

- Approved a one-time match of up to \$8,000 to funds raised by RBMS to bring the Leab Endowment to \$50,000. This match will assist the section in meeting ALA's requirement that endowment funds maintain a \$50,000 minimum. ¶¶

("Medical narratives...", cont. from page 430)

2. Rita Charon, "Narrative Medicine: A Model for Empathy, Reflection, Profession, and Trust." *JAMA* 286, no.15 (2001): 1897-1902, doi: 10.1001/jama.286.15.1897

3. National Network for Collaboration Framework. "Collaboration Framework: Addressing Community Capacity," www.uvm.edu/extension/community/nnco/collab/framework.html, accessed March 14, 2013.

4. EDUCAUSE, "7 Things You Should Know about the Modern Learning Com-

mons," <http://net.educause.edu/ir/library/pdf/PUB7101M.pdf>.

5. Beth Bathurst, "The Secret Life of Libraries," *The Observer*, www.guardian.co.uk/books/2011/may/01/the-secret-life-of-libraries.

6. Joan Lippincott, "Net Generation Students and Libraries" in *Education the Net Generation*, edited by Diane G. Oblinger and James L. Oblinger, 2005, <http://net.educause.edu/ir/library/pdf/PUB7101M.pdf>. ¶¶