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## BOOK REVIEW

**Shapiro J** 2009: *The Inner World of Medical Students – Listening to Their Voices in Poetry*. Oxford: Radcliffe Publishing Ltd. 268 pp. PB.

ISBN 978-1-85775-752-1

What themes constitute the experience of undertaking a medical school education? Shapiro, a medical humanities scholar, explores this question through a content analysis of poetry written by American medical students. The result is a fascinating insight into the ways in which writing poetry can promote reflective practice.

Shapiro's methodology itself is of interest to scholars of the humanities in professional health care. 576 poems, written by nearly 400 medical students, were examined by Shapiro via scrutiny of medical schools' literary/arts journals. Shapiro explores 'narrative competence' by adopting Arthur W. Frank's fourfold narrative methodology: narratives of chaos, restitution, quest and witness. Chaos narratives highlight patients' despair and inability to form coherent narratives out of their illness experiences. Restitution types narrate the temporary 'brokenness' of patients and the efforts of healthcare staff to restore patients to health again. Quest narrative types focus upon patients as selves in their quest to attribute meaning to their 'illness journeys'. Finally, witness types provide narratives which attest to unanswerable questions

(e.g. suffering) and are characterised by solidarity with others. To these, Shapiro adds a fifth: narratives of transcendence featuring examples of epiphanic healing and grace.

Content analysis forms the basis of ten chapters. Themes range from exploring the experience of cadaver dissection, becoming a physician, patient experiences, doctor-patient relationships, student-patient relationships, social justice, death and dying to personal reflections on life itself. Each theme is explored via consideration of poetry under these narrative types. A key sub-theme identifies the medical student with the illness experience of the patient. This may be attributable to a student's distinct life-stage experience, but Shapiro argues strongly that varieties of reflective writing may challenge certain objectifying traditions inherent within medical practice and education itself.

The most frequently cited narrative typologies are those of chaos and witness. Concerning the former, many aspects of being a medical student (study demands, clinical experiences, teamwork) are linked to experiences of distress and anxiety. Of potentially greater significance, however, is the identification of students' experiences of relating to patients in terms of witness narratives. This often takes the form of resistance to dominant

(medical) narratives, identification with patients' experiences and a testimony which adopts a proper humility in addressing death, especially in children.

Could these insights apply to an exploration of the experiences of students of nursing? Poetry has long been used in nurse education curricula to explore nursing knowledge, patients' experiences and aspects of nursing practice (the art of nursing) itself. Although I suspect that emergent themes from such a prospective study may differ from Shapiro's (e.g. less on socialising experiences of nurse education in favour of themes arising from practice of nursing itself), Shapiro's work may offer a template to commence such a task.

Shapiro's book is not without certain limitations. It is too lengthy and the need for simplification of content in some chapters is apparent. Nevertheless, this book is an essential addition to the growing scholarship on the role of the humanities within professional healthcare practice. It is to be warmly recommended.

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