

Title: What can medical education learn from comics?

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SB made substantial contributions to the design of the work, contributed to the draft of the work, and agreed the final approval of the version to be published.

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LB made substantial contributions to the design of the work, contributed to the draft of the work, agreed the final approval of the version to be published and agrees to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

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What can medical education learn from comics?

Graphic medicine is the use of comics to communicate illness experiences. Recognition of its usefulness in medical education is growing, particularly in the USA, but explorations of how students engage with comics within medical curricula are lacking. Here, we report on a co-created graphic medicine project, developed as a student-selected component (SSC), exploring how reading and creating comics can facilitate understanding. SB and RM are students and LB a member of faculty at Lancaster Medical School.

Comics tell stories in visually appealing ways and communicate embodied experiences beyond the individual. Graphic medicine goes beyond textual narrative, often by imaginatively externalizing and representing illness. Comics employ literary devices which create a more visceral and thought-provoking reader experience, communicating life-changing themes with more nuance and depth than in conventional texts. In designing this SSC, the aim was to introduce creative methods to encourage students to engage with complex topics affecting patient experiences, and to raise awareness of stigma and health inequalities.

This four-week SSC was therefore composed of two summative assessed components. The first component was a structured literature review about graphic medicine as a genre. The second assignment was to create a comic, with the brief to explore how this genre could reduce stigma around illnesses, and depict illness experiences differently (figure 1 and figure 2).

Throughout the process, students demonstrated their capacity to take ideas forward in unexpected and creative ways that really demonstrate their passion for medicine and their eye for a wry observation.

As students, we were drawn to this SSC partly by our own interest in and familiarity with comics, and the initiative provided us with a unique educational experience. Many young people build an early

appreciation for comic books. Characters are designed to be relatable and engaging for the audience, like television cartoons.

Comics are available in many formats from paper copies to online publications, making them an accessible medium for patients, medical students and other healthcare professionals. They are also a simple way of communicating a personal experience, for example dealing with a new diagnosis.

Artistically, they can take many forms – all you need is a pencil, paper and an idea.

Combining image and text with emotion and humour is, nevertheless, a real skill. Initially, we explored the genre, signature techniques and styles, before reading ‘graphic pathographies’ which told patient stories. One example was Miriam Engelberg’s *Cancer Made Me a Shallower Person (1)* which depicts how a diagnosis can become all-consuming and cause disruption. A research-led comic allowed us to consider representations of stigma. *The Weight of Expectation (2)* depicts the embodied nature of stigma at the intersection between obesity and socio-economic status, showing the intractable relationship between health inequalities and healthy lifestyles. From this process, we were able to use the techniques to design our own comics.

As medical students, we are traditionally taught communication skills through taking histories and learning to build a rapport with patients. We felt that our experiences on clinical placement had shown us that communication is not just verbal, but occurs via body language and facial expressions. Graphic medicine foregrounds these aspects of communication, building emotion in characters’ facial expressions and actions (3).

In comic books, the reader can often relate to the characters, which allows them to see aspects of their own story portrayed. The same applies in graphic medicine, especially where comics can be used to aid communication with the patient. For example, seeing how others have coped with a life-changing diagnosis, or to understand the patient perspective on how it feels to live with a long-term condition.

One difficulty when using comic books in communicating with patients is that the doctor must try to evaluate if their patient is ready to receive the information shared in that comic. Many graphic medicine comics tackle issues such as disability and death, which can be difficult subjects to approach. As with any creative piece, an author cannot guarantee that their audience will receive the work as intended, but the medium provides another way to gain insight into the lived experiences of patients.

The biggest surprise about this SSC was how many high-quality, engaging resources are available and how extensive, yet under-recognised, the graphic medicine community is (4). We were also both surprised how good the creation of the comic made us feel – it was an experience that enabled us to feel energised and accomplished. Integration of more creative methods of crafting resources into the core curriculum alongside more traditional textual resources may help students to really engage with patient experiences as well as providing insight into conditions. It is easy to dismiss comics as being purely for entertainment, but their usefulness as a tool for delivering information to patients and developing empathy in future medics should not be underestimated.

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