

PPT1: Title

**Teaching Literature and Medicine through Pathography:
Developing Interpretive and Narrative Competencies
through Creative Nonfiction**

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Thank you, Dr. Hope Sabanpan-Yu for that kind introduction. Good morning, esteemed members of the CHED Technical Committee for Literature and colleagues in teaching, particularly in the Centers of Excellence and Centers of Development. Thank you for inviting me to share my experience in designing the prototype Pathography course I taught in De La Salle University on the first trimester of academic year 2019-2020. It was then a blended learning course pre-Covid19 using Google Classroom as our online learning management system. But now, this first trimester of the new academic year 2020-2021, I am teaching its full online version using Canvas, De La Salle University's official learning management system. While the course I'm presenting is a graduate seminar course, I believe it offers a template for designing an interdisciplinary course in the AB Literature curriculum or in the Literature Across the Professions Program (LAPP), like the one initiated by the DLSU & UST Literature Departments.

PPT2: Literature and Medicine

This presentation will be in two parts: the first offers some contexts from the medical field that led me on a serendipitous journey into Literature and Medicine; and the second gives a description of the design and delivery of the Pathography course.

PPT3. Subtitle

A Journey into Literature and Medicine

It began 13 years ago when Dr. Rosario Mendoza-Cloma, then president of the Makati Medical Society, asked me for a lecture on poetry and how it can work with medicine for the benefit of patients. I did my best to respond to the brief, which to me underscored some need to restore the seemingly lost kinship between Medicine and Literature. My professorial chair research resulted in “The Art of Healing and Poetry” lecture given at the doctors’ annual convention on March 16, 2007. Five years later, Dr. Cloma became chairperson of the Anesthesiology Department of Makati Medical Center (MMC), and she asked me to deliver an updated lecture— the 2nd of the series in honor of her mentor Dr. Paz Y. Fores, the first chairperson of the department.

The need to circle back to the art of poetry and see anew its relationship to healing was articulated by Filipino doctors elsewhere and by institutions training medical students. In August 2008, Silliman University included the lecture for its medical and nursing students in the Prof. Albert Faurot lecture series. In 2012, oncologist Dr. Noel Pingoy flew me to GenSan City to deliver it during the annual convention of the Philippine Medical Association of Southern Mindanao. A year later, I delivered a shortened TED-style version in the first Research Congress of DLSU. And in 2015, I gave the lecture during the annual convention of the Academy of Filipino Neurosurgeons (AFN), led by Dr. Alfred Tan.

PPT4: From the Eyes of a Healer/ Bulawan cover

Retirement in 2014 gave me more time for my research into the Medical Humanities. I kept abreast with readings in the field, paying attention to the literary production of Filipino doctors. Dr. Joey A. Tabula edited in 2017 a groundbreaking anthology of medical anecdotes, called “From the Eyes of a Healer.” It was meant to

believe the rash judgement of a media personality who opined that “there is no ounce of compassion in the doctors of the UP-PGH.” The book is an essential read for everyone looking for substance and soul in the medical care they expect from their doctors. Drs. Tabula, Noel Pingoy, and Maria Belen Tamayo also edited the book “Bulawan: Interviews with Filipino Medical Oncologists,” on treating cancer, the “Emperor of Maladies, as Dr. Siddhartha Mukherjee calls it.

PPT5: Some Days You Can't Save Them All/ Antiemetic for Homesickness

The 2020 additions to my personal library are: a signed copy of “Some Days You Can't Save Them All,” by Dr. Ron Baticulon, and a signed copy of “Antiemetic for Homesickness,” by Romalyn Ante, a Batangueña nurse-poet in the U.K. working with the National Health Service (NHS). I also have Dr. Gideon Lasco's “The Philippines Is Not A Small Country,” and “Surgeons Do Not Cry” by Dr. Ting Tiongco, in addition to Dr. Alice Sun-Cua's “Women Talk: Answers to Common Pregnancy and GYN Questions.”

PPT6: Sofitel dinner photo

Last Jan. 23, 2020 before Covid19 changed the world, I invited Drs. Ronnie Baticulon and Joti Tabula to dinner, to hear them talk about the braiding of their medical and art practices. Dr. Tabula focused on his MFA thesis consisting of 60 poems in Filipino on HIV-AIDS, and said that his medical research as well as poetics research feel like one and the same enterprise. Dr. Baticulon said, “I feel that am a better doctor because I write. I feel obliged to look after my patients with the same amount of introspection and meticulous care that writers give their characters.” He also revealed that in the medical courses he teaches in the Ateneo and UP, he challenges his students

to answer a bonus exam question that requires them to read a literary work and reflect on it. More often than not, his students would earn the bonus points.

PPT7: CNF Workshop with UP PGH mentees

With the Covid19 pandemic quarantine, the need for us to listen to our doctors' stories became more urgent. And physician-writers felt the heightened need to write stories from the medical frontline. Last April and May, seven of Dr. Tabula's UP College of Medicine mentees and two colleagues attended a fortnight's online Pathography workshop (using Google Classroom and Bluejeans) which I designed and co-facilitated.

PPT8: Writing the Pandemic workshop

This was followed by last September's first creative nonfiction workshop for physician-writers on the theme "Pathography: Writing the Pandemic" held online (using Google Classroom and Zoom) under the auspices of the Bienvenido N. Santos Creative Writing Center. I designed and directed it, with Dr. Tabula and Dr. Lance Isidore Catedral as co-panelists. Dr. Tabula noted the importance of the writing workshop for doctors, saying, "There's a door that has been opened in Literature & Medicine in the country. We feel blessed that we're passing through it with you."

I concur with Dr. Tabula's pronouncement that the time is ripe for the Literature and Medicine course we had been dreaming up. All the positive responses to the provocations, ideas, and insights on the intersections of Literature and Medicine through the art of creative nonfiction attest to this kinship, or what Dr. Catedral calls "the almost inevitable marriage between literature and medicine, syntax and touch, creative metaphor and technical jargon."

The vision is to teach on one hand an interdisciplinary narrative medicine course to doctors and medical service professionals, for them to read literary pieces skillfully, in order to develop and sharpen interpretive and narrative competencies important in their practice of the medical arts. And on the other, to teach a pathography course to Literature students, for them to understand the language of pain, illness and dying in the literary texts and to craft their pathographies.

PPT9: Lit & Med/ Narrative Med book covers

I owe whatever confidence I had in designing the Pathography course to the work of two women: Anne Hunsaker Hawkins, Professor Emerita for Humanities in Penn State College of Medicine, and Rita Charon, Founder and Executive Director of the Program in Narrative Medicine at Columbia University. Hawkins co-edited with Marilyn Chandler McEntyre in 2000 the book “Teaching Literature and Medicine.” She says that the best way doctors, nurses, and other medical service professionals could re-examine and reconstitute the humanity of their relationship with their patients is through reading literary works,

PPT10: Teaching Lit&Med with quote

because “Literature, like Medicine deals with characters, relationships between characters, story, interpretation, and major life issues.” (353) Further, she says: “Literature that deals with fundamental aspects of human experiencing can help physicians negotiate those deep waters of human need, grief and suffering; *it can help them voice their often-unarticulated responses to their work...*” (Ibid. Itals., mine).

PPT11: Charon book

Charon broke academic ground for Narrative Medicine, and her book “Narrative Medicine: Honoring the Stories of Illness” (2008), inspired the design of a one-day poetry module for doctors on May 6, 2018, as part of the continuing Leadership Journeys program for doctors, run by Jojo Fresnedi and Rhodora Palomar-Fresnedi. Poetry was the genre of choice for practical and pedagogical reasons. Narrative Medicine practitioners have observed that “the brief poem, utilizing metaphor and symbol and packed with overt and covert meaning, is closer in length to the now much-abbreviated patient interview.” The pedagogical reason was that “the analytic and imaginative act of reading poetry develops interpretive skills in listening and increases tolerance for ambiguity.” (6-7)

PPT12: Uses of Pathography

Hawkins defines pathography as “patient narratives” and says that doctors will find pathographies “especially useful...when they are given less and less time to get to know their patients but are still expected to be aware of their patients’ wishes, needs, and fears.” Her article on Pathography in the *Culture and Medicine* journal (Aug. 1999: Vol. 171) cites five reasons pathographies are medically useful:

- 1) these embody the patient’s point of view on a variety of aspects of medical experience;
- 2) offer a longitudinal view of illness as it is experienced before and after a patient encounters the physician;
- 3) describe common issues in medical encounters that are often problematic, demonstrating both helpful and harmful ways in which a physician can deliver bad news; provide concrete examples of physicians who express (or fail to express) empathy; illustrate the patient’s dilemma when confronted with conflicting advice from different medical experts;

4) provide information about alternative medical treatments from perspectives of patients who use such treatments; 5) reveal cultural attitudes and assumptions about illness, treatment, and recovery (the idea that infection from Covid19 is a war, for example), showing how these can help (or fail to help) patients to better deal with their medical situations. (129)

PPT13: Kinds of Pathography

Pathographical narratives in prose and poetry have been classified by Hawkins into four kinds: 1) Didactic pathographies, which blend useful and practical information with personal narratives of illness; 2) Angry pathographies which tell stories of perceived deficiencies in specific aspects of patient care; 3) Alternatives pathographies that offer stories of alternative treatments outside of Western Medicine; and 4) Ecopathographies that link personal illness with larger environmental, political, and socio-cultural problems.

Whatever moves a patient or caregiver to write narratives of illness, Hawkins believes that “the act of writing in some way seems to facilitate recovery: the healing of the whole person...Writing about an illness experience is a kind of psychic rebuilding that involves finding patterns, imposing order, and, for many, discovering meaning. Pathography, then, is not only a description of how awful it is to be seriously ill, but also a testimony to the capacity to transform that experience in ways that heal.” (128)

PPT14: Subtitle

Designing and Teaching Pathography

On May 16, 2019, at the 2nd Writing the Classroom National Conference on pedagogies of interdisciplinarity organized by DLSU’s Literature Department, I pitched

again in my keynote the dream of a Literature and Medicine course that could benefit future doctors and patients, to improve and humanize medical care in the country. This time, the challenge was taken up the department's graduate programs coordinator Dr. John Iremil Teodoro, who asked if I'd consider teaching the course in the Master of Fine Arts Creative Writing program and the M.A. in Language and Literature program.

I decided to focus on Creative Nonfiction, particularly Pathography. The design envisioned to complement and expand the scope of Narrative Medicine— the practice of doctors close-reading literary texts to hone interpretive and narrative skills, and then writing beyond the brief *medical history* chart the *story* of a particular patient that serves as a “parallel chart.” While Narrative Medicine trains doctors, nurses, and other medical service professionals, Pathography trains everyone — patients (doctors included, since they can also get sick and die) and caregivers, who need to write of their or their loved one's illness to put some order into that chaotic time, to cherish the gift of overcoming disease to live another day, or as Dr. Gerardo Largoza says, “to understand death's unearthly crystalline perfection, to which...nothing can be added.” (2).

Doctors, on one hand, learn through literature how to interpret the stories of characters they encounter in a text— and by extension, the stories their patients tell them about illnesses; patients, on the other, learn through literature how to tell their personal stories well. The indispensable communicative connection between doctors and patients is strengthened when story-listening and storytelling skills are dynamically matched. Moreover, through pathography, the reader's or the writer's deeper insights into life and death, illness and wellness, would more strongly suggest not a binary opposition between these terms of being, but a dynamic, constantly oscillating yin-yang

dance from health to illness and back again to health, which can be brought to light for others to reflect upon.

PPT15: Objectives of the Course

The prototype Pathography course enabled students to: 1) critically read and interpret literary texts vis-a-vis the current scientific discourses on illness and pain; 2) craft auto/biographical narratives in prose/poetry dealing with illness and pain in the context of recovery or death; and 3) research and write critical papers on how literary language effectively absorbs and transforms the experience of illness and pain towards healing.

PPT16: The Diving Bell and the Butterfly

The course attended to the heft of human mortality and the facticity of illness and pain. We began with Elaine Scarry's "The Body in Pain: The Making and Unmaking of a World," which states that one's personal experience of pain is almost impossible to communicate to others. While hospitals have instruments at the point of patient contact that can help patients report the degree of pain they are experiencing, these valuations are haunted by the patient's subjectivity and tolerance to pain. Pain has no object but itself, and therefore brings the sufferer to prelinguistic moans and groans. Pathography confronts this "wordlessness country" and opens up spaces where literary texts have broken through the no-language barrier to show us what it is like. "The Diving Bell and the Butterfly" by Jean-Dominique Bauby, who suffered in 1995 the "locked-in syndrome" after a massive stroke is one example.

Postmodern issues of agency, power, and choice on how to read and write narratives on the human experience of illnesses underpinned the choice of texts in the

syllabus. The students were tasked to choose from the long reading list at least six critical readings for their papers and in-class and online provocations/conversations on the nature of pain and its relationship with language; the socio-cultural contexts of disease and health, including the politics of healthcare; the power to heal through the arts through absorptive transformation as receivers of the arts; the ambiguity of magical thinking; the dispassion and compassion of doctors, nurses, and other medical service professionals; and the ways of honoring auto/biographical narratives of illness.

Close-reading was our method of listening carefully to the stories of contemporary Filipino doctors who critically examined their medical practice and reflected on the actual delivery of medical services, even as professional practices and protocols have changed through time in a steadily corporatized hospital environment. “From the Eyes of a Healer,” offered the best examples. We studied how these stories are also part of the tradition of Philippine literature of witness and protest, as all the UP-PGH physician-writers — while caring for the indigent in the charity wards— protested against the socio-economic structures that perpetuate the poverty of the patients they attended to. They also bore witness to their patients’ courage in enduring their medical ailments despite their constant lack of resources.

Students also read RA#11223, the universal health care law of the country, which was signed last February 20, 2019. They critiqued the gaps of its purported comprehensive coverage, and even thought of ways of affecting policy makers who were then crafting the law’s implementing rules and regulations.

PPT17: Dr. Cloma on the board

The course had a special feature: a series of face-to-face guest lectures given by doctors,

PPT18: Dr. Tabula

like Dr. Tabula's on the Hippocratic Code titled "Ang Orkos sa Modernong Panahon,"

PPT19:Dr. Cloma with slide

and Dr. Cloma's on "Medical Theories of Pain and Modern Pain Management,"

as well as lectures on pathographic creative nonfiction and fiction

PPT20: Letting Go/ Night Bird covers

by writers Susan Lara and Janina Rivera, and

PPT21: Painting of woman's radical mastectomy

by visual artist Leila Marapao-Brian, a cancer-survivor. There were also lectures outside campus on the healing beliefs and practices in Christianity and Buddhism given by Fr. Ari Dy, S.J. and Venerable Miao Jing at the Mabuhay Buddhist Temple, respectively.

In the GoogleClassroom we used, students posted on the stream their responses to the provocations/conversations articulated in the face-to-face sessions. Their writing exercises were also posted either just for me to read, or for the whole class to access. The latter was a personal decision they had to make since stories of illness are intimate revelations of self, and sharing and reading these implied mutual ethical responsibility and due respect for privacy. Their creative and critical works were always first posted for me to comment on and suggest revisions for.

PPT 22: Pedagogy of critical reading of creative works

My non-prescriptive pedagogical approach to critiquing creative works consists of three processes I call C-D-E: 1) close-reading the text to interpret how the whole story

is conceived and how the parts are working with the whole; 2) deconstructing the text to uncover the text's unconscious; and 3) evaluating the craft techniques for their strengths and weaknesses, and offering the student-writer creative exercises with which to explore possible alternatives for the revision. Students were free to do two to three revisions to fine-tune their work, with an agreed-upon deadline. They also gave oral presentations of their folio of pathographies and critical papers. They were also asked to review their peer's works.

PPT23. Subhead

Students' Journey of Healing through Pathography

The Pathography class was oversized with 17 students in the MFA and MALLIT programs,

PPT24: Pathography class photo

whose interest was stirred by the course title and description. Their pathographies ranged from congenital diseases like blepharophimosis syndrome or BPES, and atopic eczema, to stories of caring for their sick parents or siblings, learning 'magical thinking' along the way, and growing up wiser because of their acquaintance with illness and/or death. There were pathographies of family members and close friends suffering from anorexia-bulimia, and those who were under antiretroviral treatment for HIV-AIDS. One angry pathography was written by a student who suffered anxiety and panic attacks when she was working as an OFW in Singapore. The doctors who did not take her complaints seriously misdiagnosed her condition and treated her for hyperacidity.

PPT25: Ecopathography RTD

In the Ecopathography module, the works of four students were presented in a roundtable panel on “The Natural Environment and Health as Heritage” at the 13th DLSU Arts Congress last February 12, 2020. Carmie Flor Ortego focused on the the reality of the rising sea waters and the fate of the endangered village well in her hometown in Talalora, Samar, while Arielle Aliwalas talked about gold mining in Lobo, Batangas, which had affected the health of the children and precipitated the people’s successful resistance to mining. From the metro-anthropocene, Jonah Leigh Ramos focused on the health hazards of traffic officers and street vendors working for a living in the busiest intersections in Manila, while Renz Louis Canlas explored the government’s assuagement to restore the Pasig River, declared in 1990 as “biologically dead.”

PPT26: Subhead

Pathography in Public Discourse

Shortly after the term ended,

PPT27: Twink Macaraig

Twink Macaraig, one of the Filipino authors whose work we close-read in class passed away from breast cancer. Her pathography titled “Why I Fight,” (*Philippine Star*, March 24, 2019) had inspired the class with her courage as a writer to confront not only her illness, but also the canker sores in a country ruled by a strongman. She said she fights “...Because not fighting would be plain rude to my onco, Dr. Marina, whose concern for me goes well beyond the call of duty. Because not fighting would be a repudiation of how my parents raised me. Because not fighting would ignore the very real option that still exists: the handful of brave, honorable souls putting their lives on the line on the firm belief that the Filipino people can get better; can choose to get better; deserve better.

They represent, if not a cure, the lone path to a cure too late for my benefit, perhaps, but for the next generation.”

PPT28: Randy David

Also during the term, on October 20, 2019, Dr. Randy David wrote ‘The ER’ in his “Public Lives” column (*Philippine Daily Inquirer*) on how emergency rooms in Philippine hospitals are overcrowded places festering with intense hope and stark despair. This pathography ends with a moving account of his wife Karina’s death: “Our last visit to the ER of the Heart Center in the early evening of May 7 this year proved to be as typical as I could have imagined it. Karina had suffered a cardiac arrest while taking a shower at home. At once, her professional nurse and I tried to revive her while waiting for the ambulance from the nearby UP infirmary. Within 15 minutes, Dr. James Ho himself was attending to her at the ER.

She lay on the same ambulance stretcher that had carried her to the hospital. As I expected, all the cubicles were occupied. After the doctor unsuccessfully tried to revive her, I held her face with both my hands and closed her eyes. In the glare of the ER’s fluorescent lights she was as lovely as when I first saw her. She was at peace and young again. Perhaps she would not have minded being stared at by strangers.”

PPT29: CNN Philippines article

Pathography in public discourse underscores the challenges healthcare faces today, not only in the country, but also throughout the world, what with the unprecedented magnitude of health hazards compromising everyone everywhere in the crosscurrents of global development and tourism, and the ruination of the natural environment. As facilitator of the Pathography course, I encouraged students to dive

deep into the interdisciplinary readings and be engaged with health issues in public discourse.

PPT30: Body in Pain with quote

For instance, in “The Body in Pain: The Making and Unmaking of a World,” (1987) Elaine Scarry’s shows that physical pain defeats language and isolates the sufferer unless a language is found that would traverse the chasm between the ill and the healthy. Scarry says, “The very temptation to invoke analogies to remote cosmologies...is itself a sign of pain’s triumph, for it achieves its aversiveness in part by bringing about, even within the radius of several feet, this absolute split between one’s sense of one’s own reality and the reality of other persons.” (58-59) She examines this problematic relationship in terms of those who willingly torture and kill others, and the unchosen pain of torture victims in despotic and murderous regimes all over the world.

PPT31: Body in Pain/Illness as Metaphor Covers

There’s also Susan Sontag whose discourse on “Illness as Metaphor and AIDS and its Metaphors” (1989) opened up the way society criminalizes or demonizes through linguistic metaphors those who have contracted the virus. In recent times, we have heard through media the language of Sinophobia and racist interpretations of the dreaded zoonotic virus that originated from Wuhan, China, even as the World Health Organization continues to call for its containment, delayed as it was by geopolitics in declaring it a pandemic.

I believe it is through Literature that we confront the most basic question of our humanity in the face of our own or another’s pain and illness. Pathography upholds that writing about illness sharpens our will to live with a deeper understanding of our mortal

nature, and strengthens our heart to practice compassion for others, who are just as finite as we are.

PPT32: Thank you

Thank you for your listening patience.

PPT33-34-35: References Cited

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