Editor's Note: Welcome to the inaugural New Ideas section of the *Journal of Graduate Medical Education*. Submissions to this category are published annually in the June issue. For more information about the development of this category, editorial review process for submissions, and criteria for acceptance see the editorial by Sullivan and Simpson: "Graduate Medical Education Needs New Ideas" (p. 193).

New Ideas

Faculty Development in Narrative Medicine: Using Stories to Teach, Learn, and Thrive

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Setting

Each day, residents witness incredible events, make powerful decisions, and are touched in both uplifting and discouraging ways. Yet these moments often disappear within demanding tasks, long hours, and fatigue. As physicians, we may not always embrace the task of exploring our own motivations and reactions to these events. Regularly, we are expected to suppress our feelings in order to perform professionally. Physicians require outlets to prevent burnout and promote wellness, and this should begin early in residency training. We designed a faculty development program, using the format of a faculty learning community (FLC) for physicians interested in utilizing literary readings and reflective writing to guide residents to recognize the impact of these moments. We believe the process of reflection promotes a deeper understanding of patients, the connection with colleagues, and our individual journeys through medicine, for residents and faculty alike.

Intervention

The intervention implemented was a yearlong FLC in Narrative Medicine. Twelve faculty members selected to participate represented several institutions and diverse disciplines, including family medicine, psychiatry, pediatrics, radiology, internal medicine, and obstetrics and gynecology. Participants met monthly on a weekday evening for this innovative experience. Prior to the FLC, they completed an initial needs assessment of their familiarity with this type of curriculum.

Each 2-hour session opened with a spontaneous writing exercise triggered by an everyday object or concept within an assigned construct, such as *Haiku on Fatigue* and *Ode to My Pager*. A reading list was created with essays, short stories, and book excerpts that highlighted diverse physician-patient themes such as grief, depersonalization, family dysfunction, and cultural conflict (TABLE). During the session, a faculty facilitator engaged the group in a lively discussion of the themes depicted in the selected reading. This served as a literary "trigger," and each session concluded with participants sharing written reflections inspired by the reading. Between sessions, participants were encouraged to trial the exercises learned during the FLC with residents and students in their programs, and report back on their success. At the conclusion of the year, a post-FLC evaluation was completed by participants.

Outcomes to Date

Pre- and post-FLC evaluations yielded a response rate of 83%, and results were grouped in 3 major categories. This showed increases in confidence in writing and leading writing exercises (from 3.1 to 4.2; Likert 1–5), confidence in leading literary discussions (from 3.7 to 4.4; Likert 1–5), and integration of these tools in teaching (from 2.0 to 2.7; Likert 1–4). In the initial needs assessment, more than half of participating faculty reported they had not thought about incorporating reading and reflection into their educational programs. Following the workshop, the same faculty reported being revitalized by the FLC and committed to its integration in teaching.

The interactive, spontaneous writing exercises were easily adapted from the FLC to residency events such as orientation, retreats, and advisor meetings. The group discussions of literary works were deemed as highly effective tools for teaching medical concepts, often better than traditional methods. In a session, a short story about a couple's life after their baby had died unexpectedly provided a meaningful depiction of the stages of grief, perhaps in a

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TABLE **Examples of Literary "Triggers" and Correlating Themes for Discussion and Writing Assignments, and Examples of Spontaneous Writing Exercises**

Sample Literary Readings	Medical Themes Highlighted
The Things They Carried, Tim O'Brien	Journey through medicine
The Absolute True Diary of a Part-Time Indian, Sherman Alexie	Cultural conflict
Anthem, Ayn Rand	Depersonalization; hierarchy in medicine
A Temporary Matter, Jhumpa Lahiri	Grief
Pain Scale, Eula Biss	Patients with chronic pain
Curious Incident of the Dog in the Nighttime, Mark Haddon	Communication disorders
The Girl Who Seduced Everybody, Michael Crichton	Physician-patient relations
Sample Spontaneous Writing Exercises	
Haiku about Fatigue	
Ode to My Pager	
55-Word Story About My Last Patient of the Day	
Letter to My Intern-Self	
My Obituary	

more memorable way than a scientific journal article about the same topic. Faculty found the imaginative readings, such as "The Pain Scale" by Eula Biss, a vivid account by a person living with chronic pain, triggered them to write about a personal interaction with a similar type of patient or devise their own original pain scale.

Conclusions

An FLC on narrative medicine proved to be a valuable strategy, as faculty learned creative skills to convey vital concepts and promote personal and professional development of residents. Participants also were given tools to conduct a similar faculty development series at their own institutions. Further implementation of this innovative curriculum is currently ongoing at local residency programs, in both longitudinal writing workshops and educational conferences for residents.

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