



HUMANITIES IN MEDICAL EDUCATION AND PATIENT CARE: LESSONS FROM SOME COLLEGES OF MEDICINE IN NIGERIAN UNIVERSITIES

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Abstract

The growing recognition of the need for humanities in medical colleges has opened discussion for the integration of medical humanities into the curriculum of medical schools.

The paper discusses Nigerians' place in the realization of the integration of medical humanities (MH) into the curriculum of medical students in Nigerian universities. The study was conducted by gathering data from six colleges of medicine located in the south western part of Nigeria. The curriculum of most medical schools in Nigeria is designed in such a way that disciplines in the humanities are not included thereby preventing most medical practitioners from having an understanding of the beliefs; culture of their patients and the role of humanities in patient care. The medical librarians who participated in this study are in support of the integration of the humanities into the medical curriculum and are willing to give their support in the area of collection development to non medical books particularly in the Humanities.

Introduction

Medical education in Nigeria began with the establishment of the University College Hospital Ibadan as a college branch of the University of London in 1948. Since then, other generations of medical schools have evolved. These newer medical schools adopted the curriculum of the older schools with little modifications. The growing recognition of the need for humanities in medical education and patient care in

developed countries has been a matter of interest. Great number of medical school courses according to Welbery and Gooch (2005) has undergone drastic changes to incorporate the humanities and behavioral sciences including human relations, biological and cultural elements, methods of communication between students and the medical community faculty. One has only to scan index medicus under the subject headings - EDUCATION, MEDICAL and HUMANITIES to be aware of the literature being published which reflects the broadened scope of the medical education in some developed countries like the United State. The subsequent introduction of changes and modification in the curriculum of medical education worldwide did not seem to affect medical schools in Nigeria as these changes would have reflected in their curriculum as seen below.

NORMAL HUMAN BODY, MIND AND SOCIETY

- Anatomy
- Biochemistry
- Physiology
- General Pharmacology
- Psychology
- Medical Sociology
- Bio—Statistics
- Genetics

1. ABNORMAL HUMAN BODY AND MIND AND SOCIETY

- Morbid Anatomy
- Clinical Pathology
- Medical Microbiology and Parasitology
- Special Pharmacology
- Clinical Pharmacology
- Community Health
- Environment Occupational Health
- Epidemiology and the control of communicable diseases
- Immunology (as an interdisciplinary course)

2. CLINICAL COURSE

- Clinical skills including basic therapeutic skills
- Medicine
- Psychiatry
- Surgery
- Obstetric & Gynecology
- Clinical Pediatrics
- Anesthesia
- Radiology
- Community Health

3. PRIMARY HEALTH CARE

- Maternal and Child Health
- General Medical Practice including Community Health Project

Health Management, Health Education
Medical ethics and Jurisprudence

From the above, courses in medicine and dentistry are divided into four broad areas.
(Source: College of Medicine of the University of Lagos Prospectus 2001 – 2003)

Medical humanities have been defined as an integrated, interdisciplinary, philosophical approach to recording and interpreting human experiences of illness, disability and medical intervention Evans (2002). Thus medical humanities may variously include fields of arts, humanities and social science, and is concerned with how they may provide an insight and understanding for medical practice that is qualitatively different to a scientific view point. Basically the study is underscored by the need to have greater insight to the thinking and behavior of the people under study as a way of fostering good relationship as well as ensuring service delivery.

Against this background, medical service is a very vital necessity for the survival of mankind. Accordingly, societies and cultures have over the years come up with systems and practices for administering medical care on their people. In Nigeria today, the advent of western civilization and by extension, education brought in its trail the relegation to the background the indigenous health care system by branding it as “primitive” and “uncivilized”. The import of this relegation is that the western medical practice was super- imposed on the traditional medical system with the curriculum of the former being acceptable standards for the training of medical practitioners in Nigeria. Though some people, particularly the illiterates still prefer the traditional medical care to going to hospitals for care and medical attention. The reason for this is not being far fetched. The traditional health care system in Nigeria enjoys large patronage due to the cultural beliefs and the confidence it evokes among the people. It is also considered to be cheaper and affordable to the large rural population which constitutes its primary clientele.

The curriculum of most medical schools in Nigeria is designed in such a way that disciplines in the humanities are not included thereby preventing most medical practitioners from having an understanding of the beliefs; culture of their patients with regard to the notion of health, sicknesses and their cure. In the light of this background, answers to a number of questions become inevitable and these are as follows: Should some kind of subjects in the humanities become part of the curriculum of the colleges of medicine? And should Literature be used in patient care? If the answers to these questions are in the affirmative, what are the disciplines that should be introduced into the curriculum for medical students in Nigerian colleges of medicine? What are the roles of the Librarians in the development and implementation of such curriculum?

This paper therefore attempts to answer these questions by describing the existing conditions in selected colleges of medicine and their libraries in the Western part of Nigeria. The rise in the number of patients attending alternative medical care is an indication of their dissatisfaction with the former. For example women both in the urban and rural areas of Nigeria are attending antenatal in traditional clinics where they are given herbs instead of drugs. This has resulted in high rate of infant mortality

and sometimes the death of the mother. There are also a considerable number of men and women seeking alternative cure from traditional clinics because of the attention they get there at a reduced cost. Such disease ranges from diabetes, sexually transmitted diseases, stroke, Asthma, Antenatal care etc. Others go for self medication by going to Pharmacies or and medicine stores to buy drugs to treat whatever ailment they have at that time. All these have resulted in an increase in the death rate in Nigeria.

The working assumption therefore is that there is a need for doctors to have greater understanding of their profession and be well groomed right from school to be able to respond effectively to variety of emotions that may be displayed by patients. This may not achieve the desired result if humanities are only taught at just the premedical classes as it is been done in Nigerian medical schools. An added advantage is an understanding of literature that may be recommended to patients if the need arises during the course of receiving treatment at the hospital. This no doubt may accelerate the recovery process in their patient either to heal their social, emotional, or personal problems. Adams and Pitre (2000), and Alat, (2002) in their study of bibliotherapy emphasized that the use of book allows a reader to identify with characters and problems in a book and relate them to their own lives and are able to deal with their own frustrations and disappointments.

Statement of problem

It was observed that one of the problems facing medical students in Nigeria has been access to the main university collection. This is because the medical schools are usually located several miles away from the University's main Library, though they have access to medical libraries in their colleges, they are culturally isolated from the collection of the university and public libraries. The acquisition of collections on humanities is solely handled by the main library and as a result of shortage of funds; medical libraries are deeply involved in acquiring books and publications on medicine and allied fields only. Also medical doctors in Nigeria lack information on books they can recommend to their patients which can accelerate the recovery process, and they themselves are not even in the habit of reading literature, hence the level of awareness or practice of bibliotherapy is at a reduced rate in Nigeria.

Much as the use of Information and Communication Technology (ICT) is desirable, most libraries in Nigeria are not yet automated. Those libraries that have taken the giant leap are only partially automated. This has really created a wide gap in resource sharing; hence the medical libraries cannot even access the resources of the main library through online public access catalogue. Therefore libraries in Nigeria generally are yet to experience a breakthrough in the area of navigating borders and sharing of electronic resources.

Methodology

The study is a survey that was specifically designed to capture multifaceted data from the view point of librarians, medical educators and students in selected colleges of medicine located in the western part of Nigeria. The choice of this part of the country is predicated on the relative high concentration of medical schools and libraries. The oldest college of medicine which is more than fifty years old is located in this area. The

assumption is that the outcome of the study can substantially be generalized as reflective of the view across the country.

Three different set of questionnaires were designed and used for data collection. The first was targeted at librarians in the colleges of medicine to ascertain the level of materials on humanities that are reflected in their collection. The second and third instrument was directed at lecturers and students of these colleges. A total of 150 questionnaires were sent to lecturers but 140 were returned, so the 140 was used for the study, 10 questionnaires for librarians and 320 questionnaires were sent to the medical students, but 300 questionnaires were returned. In all a total of 460 questionnaires were administered. This was aimed at ascertaining the contents of humanities related disciplines in the curriculum of these colleges. The impact of Medical Humanities (MH), if integrated into the curriculum was also identified. The data will be analyzed using frequency count and percentages.

Results

TABLE 1. PROFILE OF THE MEDICAL SCHOOLS STUDIED

Institution	Year established	Ownership
University College Hospital, University of Ibadan	1948	Federal
Lagos University College of Medicine, Idi Araba, Lagos	1962	Federal
Obafemi Awolowo University College of Medicine, Ile Ife	1972	Federal
Olabisi Onabanjo College of Medicine ,Sagamu	1985	State
Ladoke Akintola University of Technology College of Medicine	1990	State
Lagos StateUniversity College of Medicine, Ikeja Lagos	1999	State

Table 1 reveals all the medical schools from which data was gathered in this study. The oldest is the University of Ibadan, and the youngest of all the schools is the Lagos State University College of medicine, which is nine years old. Data gathered from the study reveals that none of the medical schools shown above has medical humanities in their curriculum, hence, humanities are not being taught in Nigerian medical Schools except in the Pre- medical class where General studies (comprising of use of English, Philosophy, Psychology, History, Culture and Civilization) are taught in bits and pieces in the first year.

Table 2. Medical Schools willing to have Medical Humanities (MH) in their curriculum

Name of school	Medical Educators		Students			
	No of Respondent	Frequency of Response		No of Respondent	Frequency of Response	
		Yes	No		Yes	No
Olabisi Onabanjo University	25	25	-	50	35	15
Ladoke Akintola University	23	23	-	50	43	7

Lagos State University	25	25	-	50	35	13
University of Ibadan	22	22	-	50	40	10
University of Lagos	25	25	-	50	46	4
Obafemi Awolowo University	20	20	-	50	48	2
Total	140	140	-	300	247	51
Frequency in %		93%			82%	17%

From table 2, 93% of the lecturers (medical educators), and 82% of the students agreed that humanities should be taught in medical schools. Table 3 reveals the lecturers further opinion on the introduction of MH into the curriculum where 93% of them said they would have loved it if they were taught medical humanities during their days in school.

Table 3. Medical Educators who would have loved being taught Medical Humanities (MH) in the school during their days

Name of School	Medical educators	Frequency of Response	
	Total no of respondents	Yes	No
Olabisi Onabanjo College of medicine	28	28	-
Ladoke Akintola University college of medicine	19	19	-
Lagos State College of Medicine	25	25	-
University College Hospital College of medicine	20	20	-
Univeristy of Lagos College of medicine	28	28	-
Obafemi Awolowo University College of medicine	20	20	-
Total number of respondents	140	140	
Frequency in percentage	93.0%		

Table 4. Medical humanities as a core, required or elective course

Name of School	Medical Educators			Students		
	Core	Req	E	Core	Req	E
Olabisi Onabanjo University	12	12	1	5	35	10
Ladoke Akintola University	6	13	4	1	22	26
Lagos State College of Medicine	6	14	5	5	9	34
University of Ibadan	10	9	-	7	20	20
University of Lagos College of Medicine	5	20	-	5	10	35
Obafemi Awolowo University	-	5	14	8	38	4
Total number of respondents	39	73	24	31	134	129
Frequency in percentage	28%	52%	17%	10%	45%	43%

Where Core is Compulsory
Req = Required

E = Elective

Table 4 reveals that 45% of the students indicated that MH should be taught as a required course while 43% of them said it should be taught as an elective. But from the view point of the medical educators, 52% of them agreed that it should be taught as a required course. To ensure that Medical Humanities achieve its full purpose in the curriculum of the students, it is best taught as a required course.

Table 5. Impact of MH on professional practice

	Statement	Medical educators	Frequency in %	Students	Frequency in %
1	It will help them relate well with patient	25	18	38	13
2	It will help them to understand and respond to varieties of emotions in their patients	18	13	47	16
3	It will lead to improved health care delivery	14	10	27	9
4	It will reduce the number of patients who seek for alternative medicine	4	3	33	11
5	It will increase the level of confidence patients have in their doctors	9	6	2	0.5
6	It will lead to an increased understanding of human feeling	12	9	34	11
7	It will give students the privilege of having different perspectives about the cultural beliefs of people who have a different background from their own	9	6	-	-
8	It will lead to an increase in patient's satisfaction in health care delivery and services	9	6	-	-
	All of the above	74	53	181	60

Table 5 reveals that 60% of the students agreed with statements 1 to 8 above while 53% of the lecturers on the other hand agreed with all of the above statement. This is to say that medical humanities are capable of having all of the above impact on their professional growth.

The study reveals that the medical librarians who participated in this study are in support of the integration of the humanities into the medical curriculum. They are also willing to give their support in the area of collection development to non medical books particularly in the Humanities. Though there is no section dedicated for non medical books but frantic effort will be made by the librarians to create a section for humanities and lighter reading resources.

Both students and lecturers affirmed that the curriculum is long overdue for review to include courses in the humanities. Presently, at the University of Lagos College of medicine, a panel has been set up to embark on this task.

Conclusion

The inclusion of medical humanities in the curriculum for tomorrow's doctors can therefore be viewed from this study as a vital step towards the development of a compassionate and reflective practitioner who understands and respects patient's needs and who has a desire to relieving suffering and promote well being.

The need for collaboration among medical libraries and librarian is now if the cross border bridges are going to be overcome. Medical libraries in developed countries must take the giant leap in assisting medical libraries in developing countries in overcoming some of the teething problems they have in acquiring resources particularly on medical humanities.

Critical issues for librarians in Developing countries

Medical students want a breather from daily tensions, so also their patients. They will want to use literature to relax, unwind or alleviate some emotional problems. Research has shown that art, music, travel, photography, art books, history etc are excellent relaxers and sometimes those best sellers are heaven sent. Therefore, medical libraries should:

- ✓ Create access to a broader library collection which should not only be the basic biological disciplines, psychology, history, literature, art etc
- ✓ Every medical library must be able to produce its own collection on almost every type of library materials to support reading and research
- ✓ Medical school libraries must be able to present to patrons a varied collection which can adequately or at least temporarily satisfy users need with materials which relate to their interests and which hopefully complement the new curriculum.
- ✓ Develop a plan to be integrated in the curriculum design in each medical school so as to develop library support for such disciplines that would be integrated.
- ✓ Librarians should be trained and retrained to be able to do better web and research database searches to interest the students.
- ✓ Finally, medical librarians should design and implement information and data management projects and embed information and searching skills training in the curriculum.

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