

New ways of thinking on health, arts and humanities are emerging in Africa

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Imagine bringing the best of all academic disciplines, artistic creations, activist experience and healthcare knowledge to bear on understanding and addressing current healthcare concerns. Rather than silos of people working in their specific areas of interest, imagine collaborations committed to listening and learning from all participants.



A University of Cape Town medical student doing yoga for a project that draws on ideas from medical and health humanities. Third Year Yoga SSM

This is the vision of Medical and Health Humanities in Africa. It's a field that grew out of <u>the medical humanities</u> in the US and <u>UK</u>. It brings together academics, researchers, practitioners, creative artists, health care seekers and providers.

Essentially, it straddles disciplines and practices in an effort to address health concerns. Artists compose music to open up understandings of health care and specific conditions, such as <u>delirium</u>. Some academics open up new conversations about existing health concerns like <u>AIDS</u> or use everything from yoga to photography to <u>observation and drawing</u> to help educate health sciences students. Others pair academics and artists to help young people talk about <u>sex and sexuality</u> or <u>tuberculosis</u>.

At its core, Medical and Health Humanities is about conversations and collaborations between people who are interested in health. This encourages new understanding, practice and knowledge. It also seeks to provide "translators" who can make often complex ideas in science and humanities accessible. They can also use creative arts to change perceptions, frame new questions and direct new discussions that result in more nuanced answers to health issues.

While still a relatively new field on the African continent, it is growing and gaining momentum. The latest milestone is the first English-language special issue of the globally respected <u>BMJ Medical Humanities Journal</u> to deal exclusively with work on and about medical and health humanities in Africa.

The special issue came out in December 2018. It showcases work from various countries in <u>Africa</u>, among them Nigeria, Malawi, Kenya, Tanzania and South Africa.

The projects profiled in this special issue, and others elsewhere on the continent, reveal the vital role Medical and Health Humanities can play across Africa in bridging the gaps between disciplines to improve people's experiences of healthcare.

Beyond disciplinary boundaries

One of the Medical and Health Humanities projects highlighted in the BMJ's special edition deals with digital storytelling and antiretroviral adherence in KwaZulu-Natal, South Africa. Another article shows how opium, thalidomide and contraceptives contributed to the making of modern South Africa.

The projects and articles themselves are, of course, important. But another critical element that must not be overlooked is how the field exemplifies inter-, trans- and multidisciplinary research and practice. It removes people from their disciplinary silos.

This is becoming increasingly important across academia. In the worlds of medicine and health, people often work on similar concerns in familiar ways; in doing so, they miss out on <u>new perspectives</u>. Working across disciplines and practices is a way to learn from each other and reflect on how things could be changed for the better.

And, crucially, it creates conversations about how we might improve our collective understanding of health and wellness.

Different forms

On the African continent, the Medical and Health Humanities community is also trying to do things differently when it comes to how research is conducted and presented.

If a field is genuinely committed to collaboration, collective engagement, building networks and relationships, it must do more than work quickly to "produce measurable outcomes" limited to academic articles. It must spend time building connections that extend beyond one event or "outcome".

We attempted to do this during the writing of the special issue of the BMJ Medical Humanities journal. We were among a group of practitioners in South Africa who pooled resources from two universities to bring as many people who were working on the special issue together as possible. We wanted to ensure that experienced and emerging writers from multiple disciplines and practices had a chance to benefit from each other's knowledge and experiences.

A workshop was held in 2017 at the Wits Institute for Social and Economic Research (WiSER). Participants came from Zimbabwe, Kenya, Nigeria, Tanzania, Malawi, Swaziland, South Africa, the UK and Canada and presented and discussed their work.

From this, people put together a range of material for the journal and the <u>blog</u> linked to the special edition. Some of this material took the form of academic articles; there are also podcasts, photographs, pieces of music, images and poetry.

This allowed us to present creative and academic work in a format that was more accessible to those with digital access and moved beyond academic journals. After all, part of what the field is concerned with is maintaining critical, intellectual rigour while making information available to people in a number of ways. In doing this the field tries to break down some of

the barriers that prevent people from sharing work or ideas.

New networks

There is more to come for the Medical and Health Humanities field in Africa. A group called the Medical and Health Humanities Africa network has been established. CODESRIA, the Council for the Development of Social Science Research in Africa, among others, has been drawn into discussions about growing the field's networks on the continent. The second conference organised by the Malawi Medical Humanities Network will be held in Zomba, Malawi in August and a workshop in Johannesburg in March called State of Dis-ease will continue these exciting new conversations.

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