**Proposal: Health Humanities Concentration**

1. **Executive Summary**

This application proposes the development of a new Health Humanities (HH) concentration at The University of Scranton. **The concentration emphasizes the integral role played historically and presently by the humanities in shaping and transforming healthcare, health, and well-being. It aims not only to provide a comprehensive humanistic education to the students enrolled in the programs for the health professions, but also to develop new pedagogical practices informed by interdisciplinarity, experiential and community-based learning, and diversity and intercultural competence.**

**Interdisciplinarity**: The concentration is considered “interdisciplinary” because of the ways the curricular offerings range across many disciplines already offered at The University of Scranton. (**Though the institution uses the term “interdisciplinary” in the catalog to refer to courses that are team-taught, we use this term more broadly to indicate that the content of the concentration transcends the disciplines in which that content is housed.**) In the Jesuit tradition of studying the human person in the fullest context possible, the Health Humanities Concentration focuses students’ attention on the multivalent factors influencing human flourishing. Humanities electives in different humanities departments (English and Theatre, Philosophy, Latin American and Women’s and Gender Studies, Philosophy, Theology and Religious Studies, and World Languages and Cultures) will address issues of medical ethics; cultural, ethnic, and religious perspectives on illness, injury, and disability; diachronic views of medicine, health, and well-being; the relationship between community and health; narrative medicine; and communication, translation, and interpretation practices within healthcare settings.

**Experiential and community-based learning**: In line with the University’s Jesuit mission and values, the Panuska College of Professional Studies (PCPS) exemplifies critical and compassionate engagement through the Leahy Community Health and Family Center. This clinic for the uninsured serves both the community within the city of Scranton and university students, providing community healthcare services, and offering volunteering and formative disciplinary opportunities for students. **A number of courses in the proposed concentration incorporate experiential learning and service-learning approaches to health humanities.** Furthermore, service to the region can take the form of community-based participatory research (CBPR) that has the potential to generate collaborative research for faculty, students, and the surrounding community.[[1]](#footnote-1) Courses will also collaborate with the Center for Service and Social Justice where possible to strengthen the institution’s commitment to faith seeking justice.[[2]](#footnote-2)

**Diversity and intercultural competence**: Diversity and inclusion are core institutional strengths critical to the educational mission of The University of Scranton. Indeed, the Society of Jesus recently issued the Four Apostolic Preferences for Jesuits[[3]](#footnote-3) across the world that will guide Jesuit initiatives for the next ten years (2019-2029): (1) *To show the way to God through the Spiritual Exercises and discernment;* (2) *To walk with the poor, the outcasts of the world, those whose dignity has been violated, in a mission of reconciliation and justice*; (3) *To accompany young people in the creation of a hope-filled future*; (4) *To collaborate in the care of our Common Home*. Humanities disciplines are uniquely positioned to support this vision for the Society of Jesus. Humanities disciplines have historically played a crucial role in developing intercultural sensitivity and nuanced understandings of ethnic, racial, economic, cultural, and religious diversity. **The proposed Health Humanities concentration will focus on instilling critically compassionate and empathetic approaches to healthcare, and on fostering intercultural and diversity competence as well as a culture of inclusion in the context of Scranton’s growing Hispanic population and the city’s history of welcoming refugees.**[[4]](#footnote-4)Indeed, in the current context of pandemic pedagogy, one prominent Medical Humanities Director called for recognition that the Humanities are “Essential Services” for public health.[[5]](#footnote-5)

1. **Description of the Program**

**Relationship of Program to University Mission and College/Dept. Goals**

Here is the University’s Mission statement:

The University of Scranton is a Catholic and Jesuit university animated by the spiritual vision and the tradition of excellence characteristic of the Society of Jesus and those who share its way of proceeding. The University is a community dedicated to the freedom of inquiry and personal development fundamental to the growth in wisdom and integrity of all who share its life.

Here is the College of Arts and Sciences Mission Statement:

As a liberal arts college within a Catholic and Jesuit University, The College of Arts and Sciences at The University of Scranton offers a wide range of academic programs based upon an understanding of transformational education as a means to academic excellence, personal and spiritual fulfillment, and thoughtful service to the human community. The College is a community of learners dedicated to providing a liberal arts education for all of the University's students, to the pursuit of wisdom and the dissemination of knowledge, and to addressing the critical problems of the world.

In what follows, we will provide the logic behind the proposed concentration while offering evidence that it aligns with the mission and identity of the University.

Since the educational tradition of the Jesuits accents growth and transformation of the person in society, we believe this concentration hones a spirituality of seeking God in all things, as students dedicated to improving the health of our communities discern how best they can contribute to the common good. This concentration builds upon existing general education requirements, further strengthening oral and written proficiency to enhance discernment practices.[[6]](#footnote-6) Students apply those discernment practices to foster cultural sensitivity through the following humanistic approaches in the classroom: interpreting medical perspectives and caring practices by examining them through the lenses of specific historical, faith-related, and cultural conceptualizations of medicine and healing; recognizing representations of the human experience in interpreting characters of literary and filmic texts; interrogating the dichotomous separation of the biological and cultural factors that contribute to health, illness, injury, and disability; understanding the different and competing narratives that shape medical encounters; and developing critical ethical perspectives to examine the relationships between caregiver and patient, and between patient and illness, injury, or disability.[[7]](#footnote-7)

The University of Scranton’s proposed HH concentration places a special emphasis on the role of intercultural and diversity competence in healthcare settings and medical encounters. Dimensions of diversity include sex, race, age, national origin, ethnicity, gender identity and expression, intellectual and physical ability, sexual orientation, faith and non-faith perspectives, income and socioeconomic class, political ideology, education, primary language, family status, military experience, cognitive style, and communication style. The proposed HH concentration therefore emphasizes the extent to which healthcare practitioners and providers must value the intersection of these experiences and characteristics in the individual in order to offer the holistic care representative of The University of Scranton’s commitment to *cura personalis*, one of the chief characteristics of Jesuit education, which recognizes the dignity of each individual in caring for the whole person.

As noted above, the vision for the program aligns well with the Universal Apostolic Preferences of the Society of Jesus, 2019-2029. The Jesuits chose four key markers to guide the implementation of these Preferences in all their work, including education. One of the four is to “walk with the poor, the outcasts of the world, those whose dignity has been violated, in a mission of reconciliation and justice.” Health humanities courses contextualize the mission of reconciliation and justice so that the changes called for by the Society of Jesus are founded in rigorous academic study attentive to the full range of factors at play in human flourishing. The HH concentration thus furthers The University of Scranton’s mission to serve the city’s increasingly diverse community and to promote justice, compassion, and integrity. Moreover, the concentration will respond to a pressing need for non-hegemonic, humanistic understandings of health, healthcare, and well-being in higher education and in medical practice.

Since students in this concentration receive the same General Education foundational courses as all other students, they are well-situated to understand how the Society of Jesus articulates this commitment to the poor and marginalized as a “necessary condition for becoming companions ‘on the way’ in the style of Jesus.”[[8]](#footnote-8) The poor and marginalized around the world lack access to the goods and services owned and operated by the powerful. To study the humanities in the context of health in a Catholic and Jesuit educational tradition is to widen the circles of access and belonging so that inclusion in the benefits of contemporary well-being extend to all.

Additionally, Catholic Social Teaching documents, such as *Sollicitudo Rei Socialis* (1987), apply the notion of solidarity precisely in this way: our interdependence demands a new form of responsibility in the form of “a firm and persevering determination to commit oneself to the common good; that is to say to the good of all and of each individual, because we are all really responsible for all.”[[9]](#footnote-9) Students already committed to the common good, in their pursuit of professions noted for their public service, are thus afforded the opportunity to focus their attention in this concentration on these key markers of Catholic and Jesuit education, including the call to care for refugees and migrants (a growing demographic in Scranton). “Every stranger who knocks at our door,” argues the Jesuit Pope Francis, “is an opportunity for an encounter with Jesus Christ, who identifies with the welcomed and rejected strangers of every age (*Matthew* 25:35-43).”[[10]](#footnote-10) By way of further support for this mission of welcome at the core of Catholic teaching, the United States Conference of Catholic Bishops issued a document on racism in America that speaks directly to this need for us to listen to stories highlighting diversity and intercultural competence:

As Christians, we are called to listen and know the stories of our brothers and sisters. We must create opportunities to hear, with open hearts, the tragic stories that are deeply imprinted on the lives of our brothers and sisters, if we are to be moved with empathy to promote justice. Many groups, such as the Irish, Italians, Mexicans, Puerto Ricans, Poles, Jews, Chinese, and Japanese, can attest to having been the target of racial and ethnic prejudice in this country. It is also true that many groups are still experiencing prejudice, including rising anti-Semitism, the discrimination many Hispanics face today, and anti-Muslim sentiment. Especially instructive at this moment, however, are the historical and contemporary experiences of Native and African Americans.[[11]](#footnote-11)

Catholic and Jesuit education presently requires this renewed attention to diversity so that solidarity may grow. Growth in solidarity for our community, however, requires listening to the stories of pain and injustice endemic to our ways of life, including the many factors influencing health. Indeed, if we are to take clinical practice as a litmus test for the importance of story and narrative, some say clinical knowledge itself has a “narrative character” to it. When a patient’s history is taken, it is recast in a medical case narrative. “At its richest and most skilled,” writes Kathryn Montgomery, “this act of narrative perception and construction requires the capacity to understand the patient and recast his or her story of illness into a medical narrative that can be matched with the diagnostic taxonomy and lead to appropriate treatment.”[[12]](#footnote-12) By attending closely to the human stories of our communities, students will participate directly in the Jesuit mission of reconciliation and justice, and enhance their observational capacities deemed essential for health practitioners in particular.

Not only existing courses, but also **numerous existing initiatives and projects at The University of Scranton align with the goals of the HH team** and will therefore foster and contribute to the proposed concentration. In its first stages, the HH concentration will closely collaborate with the **Office for Community-Based Learning, Center for Service and Social Justice** at The University of Scranton and the **Leahy Community Health and Family Center**.[[13]](#footnote-13) (Included with this proposal we also provide signatures from the Chairs in thirteen Departments who at acknowledge awareness that this HH Concentration is being proposed and support its development.)

**Description of the New Curriculum**

**Requirements (18 credits total)**

 **Core Requirements:**

**Students must take ENLT 224: Perspectives in Literature about Illness.[[14]](#footnote-14)**

**S**tudents must have **three transcripted credits of a world language other than English among their 18 credits,** or they must **have placed at the 300-level of a language,** as determined by the University’s Language Learning Center.

**Humanities and Health Elective Courses:**

Students must take a combination of humanities elective courses (6 credits, unless a student has placed at the 300-level of a language, as explained in the following model—in this case, the student would complete 9 credits of humanities electives) and health elective courses (6 credits). **A student may apply no more than six credits of courses with any one prefix to the concentration**.

**Service or Experiential Learning:**

Students must complete **ten hours of service or experiential learning**. Students can complete these hours by taking one of the courses that includes community-based learning or experiential learning within the concentration, or they may complete this requirement independently. If a student opts for the latter, the student should speak with the program director for approval and then submit a reflection journal on these hours following their completion, required prior to graduation.

The world language requirement model that follows explains how the concentration’s 18 credits may be distributed 1. for students with three language credits already transcripted, 2. for students without language credits who are beginning at the 100 or 200 level of a language, and 3. for students who have placed at the 300 level of a language. (By “transcripted,” we also note that students may have language credits through AP or transfer credits on their transcripts. Placement in a previously studied language will be determined by placement testing in the University’s Language Learning Center.)

The concentration and language requirement can thus be navigated in the following ways:

**CORE REQUIREMENTS**

|  |  |  |
| --- | --- | --- |
| DEPARTMENT | COURSES TO BE INCLUDED | CHAIR/PROGRAM DIRECTOR |
| English & Theatre (3 credits) | ENLT 224: Perspectives in Literature about Illness | Joseph Kraus, Ph.D. |
| World Languages & Cultures (3 credits) | [Language requirement courses: 101, 102, 211, 212, 311, 312 (which correspond to levels elementary, intermediate, and advanced in all languages).] | Yamile Silva, Ph.D. |

**HUMANITIES ELECTIVES**

|  |  |  |
| --- | --- | --- |
| English & Theatre  | ENLT 254: Bodybuilding: Narratives of Health and Ability | Joseph Kraus, Ph.D. |
| World Languages & Cultures | SPAN 324: Latin American Fictions of the BodySPAN 315: Spanish for the Health ProfessionsSPAN 335: Service and the Hispanic Community | Yamile Silva, Ph.D. |
| Theology & Religious Studies | T/RS 226: Faith and Healing: God and Contemporary MedicineT/RS 246: Religion, Body, & the BrainT/RS 295: Christianity in AfricaT/RS 332: Theology & DisabilityT/RS 340: Theologies of Work & Rest | Christian Krokus, Ph.D. |
| Philosophy | PHIL 212: Medical EthicsPHIL 337: The Art of Living | Daniel Haggerty, Ph.D. (c/o Patrick Tully, Ph.D. in spring 2020) |
| Latin American Studies | LAS195: Perspectives of Health, Healthcare, and Well-being in Latin America | Susan Méndez, Ph.D. |
| Counseling and Human Services | CHS 330: Introduction to Art Therapy | Lori A. Bruch, Ed.D., CRC, LPC |

**HEALTH ELECTIVES**

|  |  |  |
| --- | --- | --- |
| DEPARTMENT | COURSES TO BE INCLUDED | CHAIR/DIRECTOR |
| Counseling and Human Services | CHS 333: Multiculturalism in Counseling and Human Services CHS 338: Poverty, Homelessness, and Social Justice  | Lori A. Bruch, Ed.D., CRC, LPC |
| Health Administration and Human Resources | HADM 315: Cultural Diversity and Health Administration HADM 331: International Health CareHADM 395: Global Health Care Systems | Daniel J. West, Ph.D., FACHE |
| Exercise Science and Sport | HPRO 230: Multicultural HealthHPRO 310: Health Behavior Theory (prerequisite: third year standing) | Paul T. Cutrufello, Ph.D.Debra L. Fetherman Ph.D., MCHES, ACSM EP-C.  |
| Psychology | PSYC 228: Health PsychologyPSYC237: Psychology of Women | Christie P. Karpiak, Ph.D.  |
| Nursing | NURS 233: Genetics for the Healthcare Professional NURS 405: Healthcare Writing for PublicationNURS 310: Understanding Transcultural HealthNURS 314: Principles of Nursing EthicsINTD211: HIV/AIDS: Biological, Social, and Cultural Issues | Kim Subasic, Ph.D., MS, RN, CNE |
| Biology | BIOL 141: General Biology IBIOL 142: General Biology IIBIOL 204: Environmental Issues in Latin AmericaBIOL 250: MicrobiologyBIOL 344: Principles of ImmunologyBIOL 364: Virology | Terrence Sweeney, Ph.D. |

The above diagram of courses is a version of the appended sheet bearing all the signatures of the listed Department Chairs.[[15]](#footnote-15)

**New courses proposed for the program:[[16]](#footnote-16)**

ENLT 254: “Bodybuilding”: Narratives of Health and Ability

 Already submitted and approved

SPAN 324: Latin American Fictions of the Body.

Already submitted and approved

T/RS 246: Religion, Bodies, and the Brain

 Already submitted and approved

LAS 195: Perspectives of Health, Healthcare, and Well-being in Latin America

 Already submitted and approved

1. **Analysis of the Need/Market (*Source(s) of data must be included*)**

**Demonstration of Need**

The increasing number of medical and health humanities degrees in higher education both nationally and internationally demonstrates global recognition of the role of empathy in more holistic understandings of health and well-being among caregivers and within healthcare institutions. Health humanities programs for undergraduates have quadrupled since 2000, as Beth Howard reports in *AAMCNews.*[[17]](#footnote-17)

The HH concentration will further The University of Scranton’s mission to serve the city of Scranton’s diverse community and to promote justice, compassion, and integrity. Moreover, the concentration will respond to a pressing need for nonhegemonic, humanistic understandings of health, healthcare, and well-being in higher education and in medical practice. For example, in 2017, the textbook *Nursing: A Concept-Based Approach to Learning* was the object of critical scrutiny within the health professions academic community, forcing publishing company Pearson Education to formally apologize and issue a recall. Beneath the heading “Cultural Differences in Response to Pain,” the text asserted a number of racial and ethnic stereotypes, effectively reproducing the stigmatization of the communities represented (e.g., “Arabs/Muslims,” “Asians,” and “Blacks”) and validating reductive means of observing the world and deriving knowledge from those observations. The highlighted assertions included that “Hispanics may believe that pain is a form of punishment and that suffering must be endured if they are to enter heaven,” that “Jews may be vocal and demanding of assistance,” and that “Blacks often report higher pain intensity than other cultures.” [[18]](#footnote-18) This one textbook’s deficient approach to topics of diversity reflects a greater need for changes in curricula nationwide.

The University of Scranton has many pre-professional degrees in the areas of health and healthcare, such as nursing, occupational therapy, and counseling and human services. Students in health administration, psychology, or the pre-medical programs will also benefit from a health humanities concentration that will complement their education. As Craig Krugman observes, in the US, humanities majors generally have higher MCAT scores than those with other majors: “When the MCAT was revised in 2011, the Association of American Medical Colleges announced that the 2015 exam would reduce the percentage of content testing in science and add sections on human behavior/culture and logical analysis/reasoning. And outside of the United States, medical school entrance exams frequently focus on reasoning skills rather than scientific knowledge” (20). [[19]](#footnote-19) The Health Humanities concentration will significantly help students to improve performance in the areas of verbal reasoning, decision making, situational judgement, interpersonal understanding, pattern identification, and intercultural competence.

In addition, the concentration has a world language requirement to ensure students are proficient in a language other than English. The need for bilingual healthcare providers in the United States, especially English-Spanish speakers, has dramatically increased in recent years. Among the 306 students registered in The University of Scranton Health Professions Organization in 2018, 57 are proficient or native speakers of a language other than English. Spanish accounts for 58% of these languages, followed by Hindi with 14%.[[20]](#footnote-20) While some of these students already volunteer at the Leahy Clinic as interpreters, they do not have a formal pedagogical framework to connect their experiences to other forms of knowledge informed by the humanities. The HH concentration will thus also address these student interpreters’ needs in its curriculum.

Also inspired by the Jesuit values of service and the promotion of justice, some of the courses offered within the HH concentration will incorporate experiential learning requirements in ways that are designed to meet community-defined needs and emphasize place-based education. Scranton’s growing Hispanic population accounts for 13% of its total population,[[21]](#footnote-21) a percentage that has grown by 3% since 2010.[[22]](#footnote-22) In addition, the city has historically welcomed refugees from around the world, including more than 1,200 Bhutanese, 400 Meskhetian Turks, and several Syrian families since 2009.[[23]](#footnote-23) The Leahy Community Health and Family Center at The University of Scranton provides free non-emergency healthcare to uninsured Lackawanna County residents and strives to provide high-quality compassionate care for patients who represent dimensions of diversity that include national origin, ethnicity, and primary language.

**Regional Competition**

There are several comparable programs in the Northeastern Pennsylvania region. Since The University of Scranton currently does not offer programs in the health humanities field, students interested in the health professions could be tempted to attend other institutions in the area. Therefore, a Health Humanities concentration will make the University more competitive in attracting local students and students from New York, New Jersey, and Philadelphia areas. Listed below are the most relevant programs with which a Health Humanities concentration at the University might compete:

**Lehigh University** offers a B.S. in Health, Medicine, and Society. This program focuses on the social, scientific, and humanistic dimensions of health and medical care to develop an understanding of the impact of health, illness, and medical care on individuals, families, and societies.[[24]](#footnote-24)

**Penn State** offers a minor in Bioethics and Medical Humanities that requires 18 credits.[[25]](#footnote-25)

**Misericordia University offers** a degree in Medical and Health Humanities and describes the purpose as follows: “The Medical and Health Humanities program applies humanistic skills— critical assessment, reflective learning, collaborative problem-solving, and effective communication—to issues in healthcare and medicine and with an emphasis on cultural, familial, philosophical, spiritual, and social factors.”[[26]](#footnote-26)

**Montclair State University** in NJ offers a 40-credit degree in Medical Humanities described as a program that “investigates the human experience of health and illness” in which “[m]ajors explore such diverse subjects as the ethics of care, patient advocacy, body image, narrative medicine, disabilities rights, medical racism, reproductive autonomy, genetic counseling, arts-based therapies, public health, health policy and the nature of death and dying.”[[27]](#footnote-27)

**Boston College** offers a minor in Medical Humanities, described as “an interdisciplinary, humanistic and cultural study of illness, health, health care, and the body” for which students take coursework “from a range of departments in Arts and Sciences, from the social sciences and the humanities as well as the natural sciences.” Boston College connects the minor to its “commitment to social justice, ethics, and care for the whole person.”[[28]](#footnote-28)

**St. Joseph’s University** has actually just established a School of Health Studies and Education that offers over 40 different degrees and/or certifications. Among these is an Interdisciplinary Health Services minor. This minor requires 18 credits (6 classes).[[29]](#footnote-29)

Unlike other health humanities and medical humanities degrees offered by comparable institutions in the region, The University of Scranton’s HH concentration will place a special emphasis on the role of intercultural and diversity competence in healthcare settings and medical encounters. The University with its long and respected tradition of academic excellence and commitment to peace and justice already has multiple resources in place to cultivate this emphasis. We anticipate the concentration will add high impact practices to student formation, and the University is well positioned to offer this new program with zero to little additional cost.[[30]](#footnote-30)

**Anticipated Enrollment**

The concentration anticipates an initial enrollment of between 20 and 25 students in its first and second years. In addition, the concentration anticipates a 50-80% of enrollment increase in 3-5 years term. In the long-term, based on student demands, the concentration may grow into a major.

The charts included below show current interest in a potential Health Humanities concentration. Students were distributed a flyer with information about the field of health humanities. This flyer included a brief survey with the following question measuring their interest in a potential health humanities program: “How interested are you in such a program, on a scale from 1-7, (1=no interest, 7=high interest)?”.

Chart A below shows data collected during a Humanities Initiative event at The University of Scranton on October 2 during the fall 2019 semester. Students from across the University’s majors attended this event. Graph B shows data collected from pre-med students at the Thirteenth Annual Retreat “Medicine as Service,” also held last October. Both charts demonstrate that there is already an extraordinary interest in a Health Humanities concentration among our students.

CHART A

CHART B



**Prospects for Graduates**

The proposed Health Humanities concentration will attract students entering different job markets, so an analysis of the job market and graduates’ prospects must be completed with consideration of the two broad categories of students likely to pursue the concentration: pre-health professions students planning to apply to medical school, and students who are not on the medical school track. For many of our health pre-professional majors, including our pre-med students, the job market is a job market for candidates with advanced degrees, so the concentration will not be directly concerned with job placement for these students. For these students, the concentration will work alongside the University’s pre-med program to prepare students for placement in medical schools. And as the proposed program is a concentration, for our students who aren’t planning to go to medical school or graduate school programs specifically for careers in the health professions, the program is designed to supplement their majors and their preparation for whatever career paths they will pursue following the completion of these majors.

As indicated earlier, Craig Krugman observes that in the US, humanities majors generally have higher MCAT scores than those with other majors: “When the MCAT was revised in 2011, the Association of American Medical Colleges announced that the 2015 exam would reduce the percentage of content testing in science and add sections on human behavior/culture and logical analysis/reasoning. And outside of the United States, medical school entrance exams frequently focus on reasoning skills rather than scientific knowledge” (20).[[31]](#footnote-31) A health humanities concentration will significantly help students improve performance in the areas of verbal reasoning, decision making, situational judgement, interpersonal understanding, pattern identification, and intercultural competence, which will make them strong candidates for medical and graduate schools and for employers.

1. **Cost/Revenue Considerations**

Operating costs for the concentration in the short-term will be minimal. All of the courses listed for the curriculum (core courses and supporting courses) are already offered on a regular basis by faculty from multiple academic departments across the University. The creation of this concentration has been possible thanks to a National Endowment for the Humanities Connections Planning Grant ($34,900). The HH team will apply for additional funding as the program grows, applying for other grants such as the National Endowment for the Humanities Connections Implementation Grant to support additional program growth into a potential major.

**Analysis of Costs and Analysis of Revenue**

Because the proposed program is a concentration, the costs associated with the program are minimal. At most, initial program development would require compensation for the Director of the program, likely in the form of a course release—see the table below—and (perhaps) secretarial overtime. Because the concentration effectively piggybacks on courses designed for other disciplines, there are no additional costs associated with these courses. Finally, there may be costs associated with doing supplemental programming for the concentration.

The revenue from the program is hard to measure with any certainty, but there are at least three ways that the program could benefit the University financially. Most immediately, the program is designed to attract more pre-medical and pre-health professions students to the University. If we have just one additional student decide to come to the University because of the Health Humanities concentration per year, then the program will already be paying for itself.

|  |  |
| --- | --- |
| **Per Semester** | **Cost** |
| Reassigned Time for the Program Director | 3 credits each semester: $4500 |
| Secretarial overtime stipend | 2 hours per week x 20 weeks x $20 =$400 |
| Total Cost:  | $4900 |

We are aware the projections may need adjustments, based upon circumstances and institutional peculiarities, such as appropriately negotiated compensation structures. Presently we envision a co-Directorship that alternates between tenure-track professors who are noted for staffing courses with sufficient enrollment numbers so as to avoid introducing a course-load context where compensation is required for low-enrolled courses. The records for both Dr. Billie Tadros and Dr. Cyrus Olsen can be consulted for further confirmation concerning enrollment numbers. We are willing to learn how best to structure the Concentration Cost in consultation with the CAS Dean’s Office.

1. **Student Learning Outcomes and Assessment Plan**

**Expected Student Learning Outcomes and Plan for Assessment**

**Assessment Strategy[[32]](#footnote-32)**:

Students who complete the concentration will assemble a portfolio representing their achievement of the Health Humanities PLOs, in addition to the successful completion of their core and supporting courses (and the exams and assignments within these courses). The Portfolios will be assessed by the Health Humanities Concentration Committee, in cooperation with best practices as guided by the Office of Educational Assessment. Presently the HH Committee consists of six Faculty members. All matters pertaining to Service-Leaning, experiential learning, or Community-Based-Learning will be coordinated with the appropriate offices according to individual needs, and solely determined by direct student consultation with the Co-Directors of the HH Concentration.

Health Humanities PLOs

1. Examine medical perspectives and caring practices through the lenses of specific historical, faith-related, and cultural conceptualizations of medicine and healing;
2. Interpret the different and competing narratives in texts across genres and disciplines that shape representations of the human experience of health, wellness, and medicine.
3. Analyze the intersection of the biological and cultural factors that contribute to health, illness, injury, and disability.
4. Examine the relationships between caregiver and patient, and between patient and illness, injury, or disability to develop critical ethical perspectives.

Students who complete the concentration will complete a survey and meet with the director for an exit interview, which will enable program assessment. The survey will include several questions to which students will record responses according to a Likert scale, as well as open ended questions that the program director and faculty teaching in the concentration will use to assess the program learning outcomes. The program director will choose a particular PLO to assess each year once graduates begin completing the program.

**PORTFOLIO**

Students concentrating in Health Humanities will create and present a portfolio of materials documenting and representing their academic development and learning experiences throughout the program curriculum. The portfolio is both an organizational tool and a vehicle for self-reflection. Upon completion of the portfolio in the final semester of their senior year, students will have a one-on-one interview with one of the members of the Health Humanities committee. In these meetings, students will present their portfolios, explaining how the work represents their achievement of the following Health Humanities program learning outcomes:

Students will demonstrate that they have

1. Examine[d] medical perspectives and caring practices through the lenses of specific historical, faith-related, and cultural conceptualizations of medicine and healing;
2. Interpret[ed] the different and competing narratives in texts across genres and disciplines that shape representations of the human experience of health, wellness, and medicine.
3. Analyze[d] the intersection of the biological and cultural factors that contribute to health, illness, injury, and disability;
4. Examine[d] the relationships between caregiver and patient, and between patient and illness, injury, or disability to develop critical ethical perspectives.

The portfolio as both a process and as an artifact will be valuable to students as they consider their future academic and/or professional paths, especially for those students applying to medical, graduate, and professional schools.

**The purposes of the portfolio and its components are as follows:**

1. To document each student’s progress in the knowledge and understanding of the role of the humanities in shaping health, healthcare, and well-being;

2. To allow students to assess their own learning in the field of health humanities; and

3. To assist the Health Humanities concentration director in ensuring that the program’s goals are being achieved.

**The portfolio should contain the following elements (\*indicates a required element):**

**\*1. Portfolio Cover Letter**

The student should introduce his or her portfolio with a 1-2 page cover letter. The letter should indicate how and why the student selected and arranged the texts included in the portfolio. Taking his or her formal learning experiences as a starting point, the student should consider how these learning experiences connect to the PLOs.

**\*2. One essay**

Students should include at least one essay on topics related to health humanities. This essay may be drawn from student work in any of the core courses within the concentration. The student should include evidence of work at all stages of the writing process: organization and pre-writing activities, drafts, revision, and editing.

**\*3. Two other additional assignments**

Students should include two additional assignments of their choice, which may be drawn from student work in any courses within the concentration (core courses or supporting courses). Examples of such additional assignments include recorded presentations, podcasts, posters, epidemiological maps, ethnographies, body maps, journals, etc.

**\*4. Reflection on Service, Experiential, or Community Based-Learning**

The student should write a summary of any and all community volunteer service and service learning experiences in which he or she has been involved, making particular note of any service connected to health, healthcare, and well-being. The student should reflect briefly on the value of service to his or her intellectual and personal growth at The University of Scranton and establish connections between the field of health humanities and his or her involvement and work with the Scranton community.

**5. Reflection on Extra-curricular activities**

The student may write a summary of his or her participation in relevant extra-curricular activities and reflect briefly on how such involvement contributed to his or her learning. Such activities may include attending a lecture, cultural event, or film, creating a poster presentation, etc.

1. **Accreditation**

There is no applicable accreditation for this program.

1. **Curriculum Guide (as it might appear on the University web site)**

Health humanities is an interdisciplinary field that advocates for a humanistic perspective of healthcare, focusing on the study of social, ethical, cultural, religious, and historical perspectives. The increasing number of medical and health humanities degrees in higher education both nationally and internationally demonstrates global recognition of the role of empathy in more holistic understandings of health and well-being among caregivers and within healthcare institutions. This concentration emphasizes the integral role of the humanities in shaping and transforming healthcare, health, and well-being. It aims not only to provide a more comprehensive education to students who may be enrolled in the programs for the health professions at The University of Scranton, but also to offer other students interested in the intersections of health and humanities study a deepened undergraduate education focused on interdisciplinarity, community-based learning, and diversity and intercultural competence. Completing this concentration will help students improve performance in the areas of verbal reasoning, decision making, situational judgement, interpersonal understanding, pattern identification, and intercultural competence, which will make them strong candidates for medical and graduate schools as well as for employers outside of medicine and the health sciences.

**Interdisciplinarity**: Students will take core courses in different humanities departments such as Theology and Religious Studies, World Languages and Cultures, and English and Theatre, which address issues of medical ethics; cultural, ethnic, and religious perspectives on illness, injury, and disability; diachronic views of medicine, health, and well-being; the relationship between community and health; narrative medicine; and communication, translation, and interpretation practices within healthcare settings.

**Experiential and community-based learning**: In line with the University’s Jesuit mission and values, a number of courses in the concentration incorporate experiential learning and service learning approaches to health humanities, and all students will complete at least ten hours of service/experiential learning.

**Diversity and intercultural competence**: Diversity and inclusion are core institutional strengths critical to the educational mission of The University of Scranton. Humanities disciplines have historically played a crucial role in developing intercultural sensitivity and nuanced understandings of ethnic, racial, economic, cultural, and religious diversity. The concentration focuses on instilling critically compassionate and empathetic approaches to healthcare, and on fostering intercultural and diversity competence as well as a culture of inclusion in the context of Scranton’s growing Hispanic population and the city’s history of welcoming refugees.

**Requirements (18 credits total)**

 **Core Requirements:**

**Students must take ENLT 224: Perspectives in Literature about Illness.[[33]](#footnote-33)**

**S**tudents must have **three transcripted credits of a world language other than English among their 18 credits,** or they must **have placed at the 300-level of a language,** as determined by the University’s Language Learning Center.

**Humanities and Health Elective Courses:**

Students must take a combination of humanities elective courses (6 credits, unless a student has placed at the 300-level of a language, as explained in the following model—in this case, the student would complete 9 credits of humanities electives) and health elective courses (6 credits). **A student may apply no more than six credits of courses with any one prefix to the concentration**.

**Service or Experiential Learning:**

Students must complete **ten hours of service or experiential learning**. Students can complete these hours by taking one of the courses that includes community-based learning or experiential learning within the concentration, or they may complete this requirement independently. If a student opts for the latter, the student should speak with the program director for approval and then submit a reflection journal on these hours following their completion, required prior to graduation.

The world language requirement model that follows explains how the concentration’s 18 credits may be distributed 1. for students with three language credits already transcripted, 2. for students without language credits who are beginning at the 100 or 200 level of a language, and 3. for students who have placed at the 300 level of a language. (By “transcripted,” we also note that students may have language credits through AP or transfer credits on their transcripts. Placement in a previously studied language will be determined by placement testing in the University’s Language Learning Center.)

**CORE REQUIREMENTS (3-6 credits)**

All students are **required to take ENLT 224: Perspectives in Literature about Illness** (offered every fall)

**S**tudents must have **three transcripted credits of a world language other than English among their 18 credits,** or they must **have placed at the 300-level of a language,** as determined by the University’s Language Learning Center.

**World Language Requirement Options[[34]](#footnote-34)**

 **(for students who have not placed at the 300-level of a language)**

ASL, ARAB, CNS, FREN, GERM, GRK 101, 102, 211, 212, 311, 312 (which

ITAL, JPN, LAT, PORT, RUSS, or SPAN correspond to, levels elementary, intermediate, and advanced in all languages).

**HUMANITIES ELECTIVES (6-9 credits)**

**(Students will take 6 credits from these courses below unless they have placed at the**

**300-level of a language; students who have placed at the 300 level of a language will**

**take 9 credits from these courses below. Students may not apply more than 6 credits**

**with any one prefix to the concentration.)**

CHS 330: Introduction to Art Therapy

ENLT 254: Bodybuilding: Narratives of Health and Ability

LAS 195: Perspectives of Health, Healthcare, and Well-being in Latin America

SPAN 315: Spanish for the Health Professions

SPAN 324: Fictions of the Body

SPAN 335: Service and the Hispanic Community

PHIL 212: Medical Ethics

PHIL 337: The Art of Living

T/RS 226: Faith and Healing: God and Contemporary Medicine

T/RS 246: Religion, Bodies, & the Brain

T/RS 295: Christianity in Africa

T/RS 332: Theology & Disability

T/RS 340: Theologies of Work & Rest

**Health Electives (6 credits)**

BIOL 141: General Biology I

BIOL 142: General Biology II

BIOL 204: Environmental Issues in Latin America

BIOL 250: Microbiology

BIOL 344: Principles of Immunology

BIOL 364: Virology

HPRO 230: Multicultural Health

HPRO 310: Health Behavior Theory

CHS 333: Multiculturalism in Counseling and Human Services

CHS 338: Poverty, Homelessness, and Social Justice

HADM 315: Cultural Diversity and Health Administration

HADM 331: International Health Care

HADM 395: Global Health Care Systems

INTD 211: HIV/AIDS: Biological, Social, and Cultural Issues

PSYC 228: Health Psychology

PSYC237: Psychology of Women

NURS 233: Genetics for the Healthcare Professional

NURS 405: Healthcare Writing for Publication

NURS 310: Understanding Transcultural Health

NURS 314: Principles of Nursing Ethics

|  |
| --- |
| Here we provide just one example of how one hypothetical student could navigate the curriculum, while completing the HH Concentration:**Biology Pre-Med, Spanish Minor, HH Concentration** |
|   | ***Dept & # - Descriptive Title of Course*** | **Fall Cr.** | **Spr. Cr.** |
| **First Year** |   |   |
| Major (GE NSCI) | BIOL 141 - (E) (FYOC, FYDT Lab only) General Biology with Lab1BIOL 142 - (E) (FYOC, FYDT Lab only) General Biology with Lab1 | 4.5 | 4.5 |
| Cognate | CHEM 112-113 - (E) General and Analytical Chemistry/CHEM 112L-113L  | 4.5 | 4.5 |
| GE WRTG | WRTG 107 - (FYW) Composition |  | 3 |
| GE ELECT | SPAN 311 – SPAN 312 | 3 | 3 |
| GE FSEM | T/RS 121X - (FYS) Bible | 3 |   |
|   |   | **15** | **15** |
| **Second Year** |   |   |
| Major | BIOL 250: Microbiology 1 + Lab - BIOL 260: Genetics | 5 | 3 |
| Cognate | CHEM 232 - (E) Organic Chemistry/CHEM 232L – CHEM 233 - (E) Organic Chemistry/CHEM 233L  | 4.5 | 4.5 |
| GE QUAN | Math 114: (Q) Calculus 1 |  | 4 |
| GE ELECTGE HUMN | ENLT 121: Intro to PoetrySPAN 320 + SPAN 321 | 3 | 33 |
|   |   | **15.5** | **17.5** |
| **Third Year** |   |   |
| Major | BIOL 344 - Principles of Immunology (MC) / BIOL 350: (W, EPW: lab only) Cellular Biology (MC) | 4.5 | 5 |
| Cognate | PHYS 120/PHYS 120L - (E) General Physics I – PHYS 121/PHYS 121L - (E) General Physics II  | 4 | 4 |
| GE S/BH | PSYC 110: Intro to Psychology (S/BH) | 3 |   |
| GE HUMN | T/RS 122: Intro Christian Theology (P) | 3 |   |
| GE PHIL | PHIL 120: Intro to Philosophy (P) / PHIL 210: Ethics | 3 | 3 |
| GE ELECT | SPAN 315: Spanish for the Health Professions |  | 3 |
|   |   | 17.5 | 15 |
| **Fourth Year** |   |   |
| Major | BIOL 375 - Evolution (MO) / BIOL 472 - Systems Ecology (MO) | 3 | 3 |
| Major | BIOL 374 - (W: lab only) Vertebrate Biology |  | 5 |
| Major | BIOL 364 - Virology (MC) |  | 3 |
| Major | BIOL 241 - Comparative Vertebrate Biology | 5 |   |
| Major | BIOL 479 - Portfolio Completion | 0 |   |
| GE T/RS | T/RS 226: Faith and Healing: God and Contemporary Medicine | 3 |   |
| GE HUMN | SPAN 324: Latin American Fictions of the Body |   | 3 |
| GE ELECT | ENLT 224: Perspectives in Literature about Illness | 3 |  |
| Concentration | Health Humanities - Portfolio Completion |  | 0 |
|   |   | **14** | 14 |
|   | Total: 123.5 Credits |

This hypothetical student fits the third pathway indicated:



3 core requirements credits (as the student has placed at the 300-level of a language and does not need to apply 3 credits in a world language) = ENLT 224

9 humanities elective credits (as the student has placed at the 300-level of a language) = SPAN 315, SPAN 324, T/RS 226

6 health elective credits = BIOL 141, BIOL 364

1. Jull, J., et al. Community-based participatory research and integrated knowledge translation: advancing the co-creation of knowledge. *Implementation Sci* 12**,**150 (2017). https://doi.org/10.1186/s13012-017-0696-3 [↑](#footnote-ref-1)
2. A document produced by the University of Notre Dame’s Center for Social Concern clearly articulates the pillars of Catholic Social Teaching underpinning centers of this kind in the context of Catholic education: https://socialconcerns.nd.edu/sites/default/files/documents/CST%20Intro\_The%20Welcome%20Table.pdf [↑](#footnote-ref-2)
3. https://jesuits.global/en/documents/send/8-uap-docs/63-universal-apostolic-preferences [↑](#footnote-ref-3)
4. This is just one of the reasons a core requirement of the concentration is three transcripted credits in a world language other than English. (In a recent Modern Language Association webinar [“Medicine, Narrative, Pandemic, and Power,”](https://register.gotowebinar.com/recording/viewRecording/7280447437276989451/5895968784528030735/billie.tadros%40scranton.edu?registrantKey=940421499142928399&type=ATTENDEEEMAILRECORDINGLINK) narrative medicine expert Rita Charon criticizes doctors who think being able to ask a patient “¿Dónde le duele?”—in Spanish, “Where does it hurt?”—is sufficient for ethical care and practice and emphasizes the importance of interpreters who can speak the languages patients speak.) [↑](#footnote-ref-4)
5. Ostherr, Kristen. “Humanities as Essential Services,” Inside Higher Ed, May 21, 2020.

<https://www.insidehighered.com/views/2020/05/21/how-humanities-can-be-part-front-line-response-pandemic-opinion> [↑](#footnote-ref-5)
6. See Pierre Hadot, *Philosophy as a Way of Life: Spiritual Exercises from Socrates to Foucault* (Blackwell, 1995). [↑](#footnote-ref-6)
7. The field or narrative medicine alone demonstrates the influence and importance of humanities education in ethical medical practice. Rita Charon discusses some of the models for this at Columbia University in a recent webinar hosted by the Modern Language Association, [“Medicine, Narrative, Pandemic, and Power.”](https://register.gotowebinar.com/recording/viewRecording/7280447437276989451/5895968784528030735/billie.tadros%40scranton.edu?registrantKey=940421499142928399&type=ATTENDEEEMAILRECORDINGLINK) [↑](#footnote-ref-7)
8. https://jesuits.global/en/documents/send/8-uap-docs/63-universal-apostolic-preferences [↑](#footnote-ref-8)
9. Pope John Paul II, *Sollicitudo Rei Socialis*, §38. [↑](#footnote-ref-9)
10. Message of his Holiness Pope Francis for the 104th World Day of Migrants and Refugees 2018. https://w2.vatican.va/content/francesco/en/messages/migration/documents/papa-francesco\_20170815\_world-migrants-day-2018.html; see also Giulia McPherson, “Defending the Rights of Refugees: A Catholic Cause,” *Praxis: An Interdisciplinary Journal of Faith and Justice*, Volume 1, Number 1 pp. 47–54 doi: 10.5840/praxis2018115 [↑](#footnote-ref-10)
11. United States Conference of Catholic Bishops, *Open Wide Our Hearts: The Enduring Call to Love, A Pastoral Letter Against Racism*, 2018. (http://www.usccb.org/issues-and-action/human-life-and-dignity/racism/upload/open-wide-our-hearts.pdf) [↑](#footnote-ref-11)
12. Kathryn Montgomery, *How Doctors Think: Clinical Judgment and the Practice of Medicine* (Oxford: Oxford University Press, 2006), 50. [↑](#footnote-ref-12)
13. Supporting documents proving open collaboration with all these groups are appended to this application. [↑](#footnote-ref-13)
14. This course is currently offered every fall and taught by one of the directors of the proposed program. The course introduces students to the concept of narrative medicine as they perform close readings and analyses of depictions of experiences of illness; identify the multiple perspectives, narrative strategies, and narrators implicated in any experience or representation of illness, and evaluate their rhetorical positions; understand and articulate the ways in which gender, race, ethnicity, dis/ability, age, and other cultural categories of identity intersect and affect the perspectives of patients and healthcare providers; and develop and support organized arguments in a course that satisfies the University’s EPW requirement. [↑](#footnote-ref-14)
15. This document was in circulation when the University closed amid the COVID-19 crisis. However, the department chairs listed had already offered their electronic consent to the inclusion of the listed courses. This support is now also represented by an attached electronic signature form. [↑](#footnote-ref-15)
16. Note that the NEH Grant was awarded under the agreement that the committee would propose a set of new courses as recipients of the grant. Institutional support and approval of proposed courses displays further commitment to the planning process and situates grantees for pursuing implementation grants to further the process. Any future support requires further evidence that the institution is actively engaged in the promotion of educational endeavors of this kind. [↑](#footnote-ref-16)
17. news.aamc.org/medical-education/article/more-premed-opting-health-humanities-programs/. [↑](#footnote-ref-17)
18. Scott Jaschik discusses this scandal in an article in *Inside Higher Education*

www.insidehighered.com/news/2017/10/23/nursing-textbook-pulled-over-stereotypes. [↑](#footnote-ref-18)
19. Craig Klugman, “Undergraduate Education,” a chapter in the collection *Teaching Health Humanities*, edited by Olivia Banner, Nathan Carlin, and Thomas R. Cole, and published by Oxford University Press. [↑](#footnote-ref-19)
20. Data from 2018 provided by the director of the Pre-medical program, Dr. Mary Engel. [↑](#footnote-ref-20)
21. Current demographics information can be found here: www.city-data.com/city/Scranton-Pennsylvania.html. [↑](#footnote-ref-21)
22. The United States Census Bureau offers census data from 2010 here:

factfinder.census.gov/faces/tableservices/jsf/pages/productview.xhtml?src=CF. [↑](#footnote-ref-22)
23. The *Scranton Journal* published additional information about this in 2016:

 www.scranton.edu/alumni/journal/issues/2016/fall/features/state-of-scranton.shtml. [↑](#footnote-ref-23)
24. http://catalog.lehigh.edu/coursesprogramsandcurricula/artsandsciences/healthmedicineandsociety/ [↑](#footnote-ref-24)
25. https://bulletins.psu.edu/undergraduate/colleges/intercollege/bioethics-medical-humanities-minor/#programrequirementstext [↑](#footnote-ref-25)
26. https://www.misericordia.edu/page.cfm?p=1798 [↑](#footnote-ref-26)
27. https://www.montclair.edu/medical-humanities/courses/ [↑](#footnote-ref-27)
28. https://www.bc.edu/content/bc-web/schools/mcas/sites/medhumanities/about.html. [↑](#footnote-ref-28)
29. https://she.sju.edu/#programs [↑](#footnote-ref-29)
30. For resources on high impact practices, see the following AAC&U report: <https://www.aacu.org/sites/default/files/files/LEAP/HIP_tables.pdf> [↑](#footnote-ref-30)
31. Craig Klugman, “Undergraduate Education,” a chapter in the collection *Teaching Health Humanities*, edited by Olivia Banner, Nathan Carlin, and Thomas R. Cole, and published by Oxford University Press. [↑](#footnote-ref-31)
32. Note: The University of Scranton does not conduct assessment of Concentrations. We engage in Program Assessments and require syllabi to indicate how they can engage concerns about quality assurance with respect to course content. Since the courses utilized in the Concentration already bear the vetted assessment mechanisms for courses and programs, the listed courses remain available for appropriate assessment practices required for Programs. Until the Concentration becomes a Program, it is not required to engage in assessment practices of the kind listed here. We provide the necessary components of best practices for assessment, for the sake of completing the proper elements of the application, but with the caveat that the Institution itself does not at this time require assessment of concentrations for the sake of reporting to accrediting bodies, such as Middle States. [↑](#footnote-ref-32)
33. This course is currently offered every fall and taught by one of the directors of the proposed program. The course introduces students to the concept of narrative medicine as they perform close readings and analyses of depictions of experiences of illness; identify the multiple perspectives, narrative strategies, and narrators implicated in any experience or representation of illness, and evaluate their rhetorical positions; understand and articulate the ways in which gender, race, ethnicity, dis/ability, age, and other cultural categories of identity intersect and affect the perspectives of patients and healthcare providers; and develop and support organized arguments in a course that satisfies the University’s EPW requirement. [↑](#footnote-ref-33)
34. Many students at the University will likely fulfill this requirement with Spanish, given the service opportunities available at the Leahy Clinic with Spanish-speaking members of the Scranton community and other courses in the concentration that students might apply toward their Spanish majors or minors. However, the concentration is designed to recognize the value of the study of any world language to study in the humanities, as well as the additional benefit such study might provide for students who may complete service trips related to healthcare and who many pursue future opportunities in the health professions. We recognize that not all of these courses are offered with the same frequency but want our students who do take these less frequently offered world language courses to have the opportunity to apply their study to this concentration. [↑](#footnote-ref-34)