



DIVISION OF EDUCATION PROGRAMS

Narrative Section of a Successful Application

The attached document contains the grant narrative and selected portions of a previously funded grant application. It is not intended to serve as a model, but to give you a sense of how a successful application may be crafted. Every successful application is different, and each applicant is urged to prepare a proposal that reflects its unique project and aspirations. Prospective applicants should consult the Humanities Connections Implementation guidelines at

<https://www.neh.gov/grants/education/humanities-connections-implementation-grants>

for instructions. Applicants are also strongly encouraged to consult with the NEH Division of Education Programs staff well before a grant deadline.

Note: The attachment only contains the grant narrative and selected portions, not the entire funded application. In addition, certain portions may have been redacted to protect the privacy interests of an individual and/or to protect confidential commercial and financial information and/or to protect copyrighted materials.

Project Title: Revising a Medical and Health Humanities Degree Program
Institution: Misericordia University
Project Director: Amanda Caleb
Grant Program: Humanities Connections Implementation

“The Contagion of Life”: Revising a Medical and Health Humanities Program

Table of Contents

Summary	1
Narrative	2-16
Intellectual rationale	2-5
Content and Design	5-12
Collaborative Team	12-14
Institutional Context and Resources	14-15
Impact and Dissemination	15-16
Evaluation	16
Budget	17-18
Appendices	19-83
Appendix A: Planning and Project Timeline	19-23
Appendix B: Guiding Texts and Resources	24-26
Appendix C: Medical and Health Humanities Program Goals & Learning Outcomes	27
Appendix D: Medical and Health Humanities Electives	28
Appendix E: Planning Data	29-30
Appendix F: Institutional Letters of Support	31-35
Appendix G: Program Directors and Misericordia Participants Curricula Vitae	36-66
Appendix H: Misericordia Faculty and Staff Letters of Commitment	67-73
Appendix I: Letters of Commitment and Curricula Vitae for External Contributors	74-83

“Contagion of Life”: Revising a Medical and Health Humanities Program Summary

With support from the Humanities Connections Grant, Misericordia University proposes revising its existing Medical and Health Humanities degree to include a more dialogical view of health rooted in Humanities’ intellectual skills and combined with a significant and meaningful experiential learning component that fulfills the program’s mission to “comprehensively prepare students for future employment and a life of serving others with respect, compassion, and empathy.” Such revisions would make the Medical and Health Humanities program a truly transdisciplinary program, with an emphasis on team-teaching and putting academic knowledge into practice. The changes would complement our strong Health Sciences programs, which enroll 46% of our total undergraduate population (approximately 1900 students) and strengthen the role of the Humanities at our University. More importantly, the revised program would emphasize the necessity of Humanities’ intellectual skills in the study and practice of health and healthcare.

The revised degree structure will require students to take courses in five areas: MHH core (which includes experiential learning), Humanities and Medicine, Critical Health Studies, Global Health, and MHH electives (comprised of courses from 10 departments or programs). The experiential learning will be scaffolded and embedded in three revised courses, beginning with archival and digital research and interview work in MHH 201: Introduction to Medical and Health Humanities; narrative medicine and outreach via podcasts in MHH 301: Narrative Medicine; and reflective fieldwork through an internship or an observational rotation at a local hospital in MHH 410: Fieldwork.

The revised curriculum will include eight new courses and three revised ones, developed by 13 faculty from 10 departments (English, History, Fine Arts, Religious Studies, Psychology, Political Science, Biology, Nursing, Occupational Therapy, and Social Work) in the College of Arts and Sciences and the College of Health Sciences and Education, who will also team-teach many of the courses. New courses include the following: Health Disparities; Environmental Health; Race, Gender, and Health; Health and Human Rights; Global Health Populations; Introduction to Medical Geography; Modern Pandemics and Epidemics. These new courses will emphasize dialogical view of health based on the Humanities’ intellectual skills and with a focus on inter-relational health. The revised courses will enhance the experiential learning component of the degree and better combine Humanities’ skills with career preparation. Moreover, these new and revised courses will be open to all students; given that there are nine required credits of free electives in our core structure, these courses will be of particular interest to Health Science majors. The Humanities Connection grant will fund summer salaries for a team of 15 faculty and staff members to create these new courses, as well as support the work of the Program Director and Co-Director in leading this effort. Additional funds will support a curriculum and teaching workshop, including bringing Dr. Erin Lamb, a Health Humanities expert, to campus, as well as provide a stipend for community partners who will help develop the experiential learning components at all levels. In total, Misericordia University requests \$99,985 over three years to fund these expenses. At the end of the grant period, the revised Medical and Health Humanities program will continue to be supported by Misericordia University’s College of Arts and Sciences through its operating budget.

The NEH Humanities Connection Implementation Grant will allow us to develop a program that addresses urgent global health issues through experiential learning in a transdisciplinary curriculum that will truly transform our students’ educational experience. Finally, the proposed project will help reinforce the Humanities’ central position in the educational and lived experience at Misericordia University.

Narrative

1. Intellectual rationale

“Originally, the patient was protected by the sterility of the hospital. Only the sterility went too far: It sterilized the doctor’s thinking. It sterilized the patient’s entire experience in the hospital. It sterilized the very notion of illness to the point where we can’t bring out soiled thoughts to bear on it. But the sick man needs the contagion of life.”¹

In reflecting upon the doctor-patient relationship, Anatole Broyard reveals a crisis of our time: medicine dependent upon diagnostic evidence that minimizes the role of human experience and relationships. Broyard’s words speak to the dangers of disconnection between the Humanities and Medical/Health Sciences, one that we recognize at Misericordia University, a small Catholic University that values the Humanities tradition and enrolls approximately 1,900 undergraduates, of which 46% major in the Health Sciences. It is this spirit of fighting against such sterility of experience and of self, and embracing Broyard’s “contagion of life,” that motivates this Humanities Connections grant project: to revise our Medical and Health Humanities curriculum to create a stronger transdisciplinary program with an enhanced and scaffolded experiential learning component—inquiry-focused learning with an emphasis on reflection and career preparation—that makes such sterility impossible. The Humanities Connections grant will support a revised curriculum that challenges students to understand how the Humanities inform and shape concepts of health and illness, and to apply their academic knowledge to practice in a meaningful and lasting manner. Such curricular changes will foster meaningful dialogue between the Humanities and Health Sciences and will directly benefit Misericordia University’s intellectual and cultural life by encouraging “an active engagement with knowledge and cross-fertilization of ideas.”²

In revising this curriculum, we look to Paul Kalanithi’s words: “Openness to human

¹ Anatole Broyard. “Doctor, Talk to Me.” *The New York Times*, Aug. 26, 1990.

² Sarah Berry, Therese Jones, and Erin Lamb. “Editor’s Introduction: Health Humanities: The Future of Pre-Health Education is Here.” *Journal of Medical Humanities* Online First (July 2017), 1-8, doi: 10.1007/s10912-017-9466-0.

relationality does not mean revealing grand truths from the apse; it means meeting patients where they are, in the narthex or the nave, and bringing them as far as you can.”³ We view the revised curriculum as not only meeting students where they are and helping them achieve their best selves, but also transforming the concept of health itself through Humanities’ intellectual skills: critical assessment, reflective learning, collaborative problem-solving, and effective communication.⁴ Restructuring the program will accomplish three vital objectives: integrate a more interdisciplinary approach to the material that advances a productive partnership between the Humanities and other disciplines; enhance the experiential learning component to better prepare students for leadership roles in health practice and research; and diversify the curriculum to encourage program growth and sustainability. These objectives will be accomplished by creating courses that are both interdisciplinary in design and instruction; scaffolding the experiential learning component that integrates the Humanities’ intellectual skills with career preparation; and creating a required cluster of Critical Health Studies and Global Health courses to address compelling issues in healthcare.

The current Medical and Health Humanities curriculum was developed by faculty from eight departments (English, Fine Arts, History, Philosophy, Biology, Nursing, Occupational Therapy, and Social Work) who felt they had a duty to their students to foster a meaningful partnership between the Humanities and the Health Sciences and to promote a dialogical approach to healthcare focused on the human experience. These faculty formed a steering committee and developed the program in 2015-16 with guidance from the consulting firm, Educational Advisory Board; the first cohort of 12 enrolled in Fall 2017. The curriculum, though innovative in concept, is limited by its current mono-disciplinary design—a practical approach for evaluating initial student interest and accounting for teaching loads, though less so for creating dialogue. Although grounded in Humanities’ habits of

³ Paul Kalanithi, *When Breath Becomes Air* (New York: Random House, 2016), 96.

⁴ For more on the Liberal Arts and Medicine, see Karl Haden. “Interprofessional Education and the Liberal Arts.” *Academy for Academic Leadership*. December 2016 newsletter. <http://www.aalgroup.org/newsletter/>

mind, the current mono-disciplinary program risks undermining such skills. To encourage these habits of mind—critical approaches to science, truth, texts, and data—collaboration in both teaching and student learning is essential and will better prepare students who pursue careers in healthcare to apply such dialogical and critical thinking to practice. Based on these conclusions, as well as data collected on student and faculty feedback, enrollment trends, and curricular changes at other institutions (Appendices A and E), we believe there is a compelling need to revise the curriculum to create a transdisciplinary critical assessment of health.

The proposed curricular revisions are considerable and require significant support in order to expand the role of the Humanities as the foundation of transdisciplinary study, and to create effective and meaningful collaboration across disciplines. Faculty will create eight new courses and revise three existing ones as part of the degree restructuring. The project will include a team of 13 faculty from 10 disciplines (English, History, Fine Arts, Religious Studies, Psychology, Political Science, Biology, Nursing, Occupational Therapy, and Social Work) from two colleges (Arts & Sciences and Health Sciences & Education), and staff members from the Center for Nursing History and the Center for Human Dignity in Bioethics, Medicine, and Health. This broad composition is essential to create courses that support our interdisciplinary approach and goals. The University has pledged its support through its endorsement of the existing program and prospectively through its commitment to the revised curriculum and team-teaching of the new courses.

The development of these courses and the enhanced experiential learning components will increase the enrollment in the degree and in new courses. The program currently enrolls 19 majors (and 14 minors), from first years to seniors; nearly a third will pursue a doctorate in Physical Therapy (DPT) degree after completing the undergraduate curriculum. Revising the curriculum will increase the enrollment in ways the current program cannot: by encouraging transdisciplinary thinking and allowing the flexibility for more students to tailor their studies to their passions. Transdisciplinarity,

enacted through team-teaching, will increase course enrollment through the appeal to multiple health disciplines and through an emphasis on health as broad, subjective, and effectively understood only through multiple perspectives. By design, such transdisciplinarity will enhance faculty thinking and pedagogy, which will expand the role of the Humanities within the University's intellectual life and greatly enrich student learning. Strengthening and expanding the experiential learning component of the degree will allow students to practice Humanities' intellectual skills in real-world settings and better prepare students for careers, which will also translate to increased enrollment. Based on the information provided in Appendix E, we estimate an increase of 4 majors per cohort above the typical yield of 12 during and immediately following the grant period, thereby making our enrollment the largest in the Humanities at 16 per cohort (64 majors in total).

2. Content and Design

The revised curriculum will be composed of five components that focus on Humanities' habits of mind, collaborative disciplinary partnerships, and experiential learning.

1. **MHH core** courses provide the degree's foundation. The four MHH core classes are scaffolded to introduce students to concepts in the field through a transdisciplinary approach, to develop student interests in the field, and to provide multiple levels of experiential learning, culminating in the fieldwork requirement and their capstone project.
2. **Humanities and Medicine** courses provide the foundation for the Humanities' approach to the health and medical humanities. The courses are cross-disciplinary and provide students with an intensive study of Humanities' habits of mind as applied to the study of health and medicine.
3. **Critical Health Studies** courses allow for students to experience dialogical learning and research through a transdisciplinary approach, both in terms of the material and the instruction. The courses address central concepts of health, healthcare access, and inter-relational health.
4. **Global Health** courses will integrate an interdisciplinary approach to understanding health in a

broad context and will expose students to observing health beyond national boundaries.

5. **MHH Electives** allow students to tailor courses to their academic interests. The requirement of at least one 300-level course will ensure a deep study of at least one topic.

The chart below provides a summary of the current and revised degree requirements.

Current requirements		Proposed requirements <i>Italics indicate new or revised courses.</i>	
Course prefix, number, and title	credits	Course prefix, number, and title	credits
		MHH Core (21 credits)	
BIO 211: Anatomy & Physiology I	4	BIO 211: Anatomy & Physiology I	4
BIO 212: Anatomy & Physiology II	4	BIO 212: Anatomy & Physiology II	4
MHH 201: Introduction to Medical & Health Humanities	3	<i>MHH 201: Introduction to Medical & Health Humanities</i>	4
MHH 301: Narrative Medicine	3	<i>MHH 301: Narrative Medicine</i>	3
MHH 350: Field Work	3	<i>MHH 410: Fieldwork</i>	3
MHH 401: Senior Seminar OR MHH 450: Senior Thesis	3	MHH 450: Senior Thesis	3
		Humanities & Medicine (9 credits)	
ENG 305: Literature & Medicine	3	ENG 305: Literature & Medicine	3
PHL 310: Medical Ethics	3	HIS 342: History of Medicine & Health	3
PHL 315: Philosophy of Medicine OR HIS 342: History of Medicine & Health	3	PHL 310: Medical Ethics	3
MHH Electives (12 credits)		PHL 315: Philosophy of Medicine	3
See Appendix D for list of electives	12	Critical Health Studies (6 credits)	
		<i>Health Disparities</i>	3
		<i>Environmental Health</i>	3
		<i>Race, Gender & Health</i>	3
		<i>Health & Human Rights</i>	3
		Global Health Studies (3 credits)	
		<i>Global Health Populations</i>	3
		<i>Modern Epidemics & Pandemics</i>	3
		<i>Introduction to Medical Geography</i>	3
		MHH Electives (9 credits). At least one course must be at the 300+ level	
		See Appendix D for list of electives	9
Total semester credit hours: 41		Total semester credit hours: 48	

The revised Medical and Health Humanities curriculum will be developed by a team of faculty drawn from 10 disciplines who have expertise in the proposed new courses, as indicated below, and developed from guiding texts indicated in Appendix B and to support the program goals

in Appendix C. Dr. Caleb will implement the new degree structure and the individual courses by staggering the eight new classes, offering two classes per semester for four semesters, while the core MHH courses will be offered annually. Although designed for majors and minors, these courses, open to all students, will be of particular interest to Health Science majors, who typically use their nine credits of free electives derived from our Core Curriculum for courses that complement their majors. Current MHH courses, capped at 15 (20 for MHH 201), typically enroll at 50-75%; we anticipate these new and more relevant courses to enroll at 80-100%. We estimate that approximately 25% of our undergraduates outside the major will benefit from these new courses, based on the staggered course schedule outlined above and in Appendix A, which also includes completed planning and a schedule for the grant period.

New courses

- **Health Disparities.** Dr. Amanda Caleb (English); Dr. Susan McDonald (Social Work)

Students will critically examine health disparities between and within nations, using the United States as a case study. Using sociological texts alongside literary works, students will explore gaps in health outcomes as they relate to race/ethnicity, social class, gender, disability, nationality, and migration and immigration status. Determinants of health as defined by the World Health Organization will provide students with a foundation for a better understanding of the systems that shape and influence the conditions of daily life. The textbook *Health Disparities, Diversity, and Inclusions* by Patti R. Rose will be paired with Josephine Ensign's memoir *Catching Homelessness* and Rebecca Skloot's nonfiction work *The Immortal Life of Henrietta Lacks*.

- **Environmental Health.** Dr. Matthew Nickel (English); Dr. Barbara McCraith and Dr. Cosima Wiese (Biology)

Focusing on both domestic and global environmental health, students will examine biological, socio-economic, and cultural issues in the intersection between environmental factors and

human health. Through analyses of case studies and literary depictions of environmental factors in cultural products, disease causation, and public health, students will evaluate how different individuals and communities engage with the challenges of environmental health concerns ranging from microbial and chemical contamination of water and air to industrialization and unplanned urbanization. Students will use Harold Frumkin's textbook *Environmental Health: from Global to Local* alongside Bill Conologue's literary criticism, *Here and There: Reading Pennsylvania's Working Landscapes*.

- **Race, Gender, and Health.** Dr. Ryan Weber (Fine Arts); Dr. Marnie Hiester (Psychology); Dr. Amanda Caleb (English)

Using a biopsychosocial model of health, students will explore constructions of and relationships between race and gender and how such constructions have shaped healthcare and health policies. Students will examine the historical foundations of race and gender, including national politics about slavery and race; evolutionary theory; eugenics policies and practices; nineteenth-century gynecology; psychology, mental health, and sexuality. The course will integrate secondary sources such as *The Science of Woman: Gynaecology and Gender in England, 1800-1929* by Ornella Moscucci and *The Oxford Handbook of the History of Eugenics*, edited by Alison Bashford & Philippa Levine, with fictional works such as David Feldshuh's play *Miss Evers' Boys*.

- **Health and Human Rights.** Dr. Joseph Curran (Religious Studies); Mrs. Kathleen Gelso (Nursing); Dr. Thomas Hajkowski (History)

Students will explore issues that arise at the intersection of healthcare and human rights and the ways that human rights are used to establish standards for the provision of healthcare and ethical norms for healthcare professionals. Topics include: informed consent, access to healthcare for the economically disadvantaged and for persons with disabilities, and healthcare for victims of torture and for prisoners. Students will read primary sources from *Health and Human Rights: Basic International Documents*, edited by Stephen P. Marks, alongside secondary sources on human rights, such as John

Dittmer's *The Good Doctors: The Medical Committee for Human Rights and the Struggle for Social Justice in Health Care*, and *Health and Human Rights in a Changing World*, edited by Michael A. Grodin et. al.

- **Global Health Populations.** Dr. Glenn Willis (Religious Studies); Dr. Joseph Cipriani (Occupational Therapy); Dr. Ryan Weber (Fine Arts)

Students will consider healthcare practices in a global setting and with an eye toward social, political, and economic impacts and through the lens of inter-relational health. Students will examine various global populations, in particular those populations in under-resourced regions, in light of their healthcare needs--both communal and individual--national health policies, the impact on the national and international communities, and the role of cultural memory. The course will include the textbooks *The Oxford Handbook of Medical Ethnomusicology*, edited by Benjamin Koen, and *Biopsychosocial Perspectives on Arab Americans*, edited by Sylvia C. Nassar-McMillan, Kristine J. Ajrouch, & Julie Hakim-Larson, with Anne Fadiman's literary nonfiction *The Spirit Catches You and You Fall Down*.

- **Modern Epidemics and Pandemics.** Dr. Amanda Caleb (English); Dr. Thomas Hajkowski (History)

Students will focus on the cultural, economic, and political impact of epidemics and pandemics in the modern period by exploring specific outbreaks: the Plague, the nineteenth-century cholera epidemic, the 1918 influenza pandemic, and HIV/AIDS. These case studies will help students understand epidemics and pandemics in relation to warfare, trade, health and economic policies, and public perceptions in both their historical contexts and comparatively. The course will integrate secondary sources about epidemics, such as Charles E. Rosenberg's *Explaining Epidemics and Other Studies in the History of Medicine* and John Aberth's *Plagues in World History*, with literary texts, including Daniel Defoe's *A Journal of the Plague Year* and Tony Kushner's *Angels in America*.

- **Introduction to Medical Geography.** Dr. Thomas Hajkowski (History)

This course will introduce students to methodological and theoretical concerns of geography

and how they can be applied to the study of health and healthcare. Students will examine how our natural and built environments impact our health and access to healthcare and the spatial dimension of national and global health disparities. Students will evaluate how Geographic Information Systems are used to address the concerns of health professionals. This course will primarily use the textbooks Tom Koch's *Disease Maps: Epidemics on the Ground* and Peter Anthamatten and Helen Hazen's *An Introduction to the Geography of Health*.

- **Introduction to U.S. Health Policy.** Dr. Rebecca Padot (History and Government)

This course introduces students to U.S. health policy and factors influencing policy at the state and federal levels, including health policy reform initiatives and health policy implementation stumbling blocks, such as the debate over quality versus cost. Students will examine these topics in relation to social and economic factors, including the role of the pharmaceutical industry, the opioid epidemic, the changing dynamics of private insurance, access to healthcare, and healthcare within a global context. Students will examine healthcare from a political perspective in William G. and Carol S. Weisser's *Governing Health: The Politics of Health Policy* and *Medicaid and Devolution: A View from the States*, edited by Frank J. Thompson & John J. DiIulio, and from the public view in the *Washington Post* Staff's *Landmark: The Inside Story of America's New Health-Care Law and What it Means for Us All*.

Experiential learning and revised courses

The revisions to existing courses expand the experiential learning component of the program. Current students are required to complete three credits of fieldwork: an internship with a health organization or an observational rotation at a local hospital. While those who have completed their fieldwork have found it relevant and rewarding, the process of selecting a fieldwork site was hindered by a lack of preparation. As such, the revised curriculum will scaffold experiential learning to expose students to a variety of fieldwork and employment opportunities and allow for critical reflection through structured writing while maintaining the courses' academic rigor.

- **MHH 201 Introduction to Medical & Health Humanities:** Dr. Amanda Caleb (English)

In this foundational course, students examine how the Humanities engage with medicine and health through transdisciplinary study. Topics include human dignity, cultural approaches to health and illness, aging, and public health. This course will be revised from three credits to four, allowing for experiential learning that fosters exploration of career and fieldwork opportunities. Students will participate in three assignments applying academic knowledge to practice: an object biography of an artifact from the Center for Nursing History archive; creation of an open-access website hosting resources about Medical/Health Humanities (including student projects); and interviews with healthcare professionals about the Humanities' relevance to healthcare issues. The course will integrate the textbooks Lennard J. Davis's *Enforcing Normalcy* and *Medical Humanities: An Introduction*, edited by Thomas R. Cole, Nathan S. Carlin, & Ronald A. Carso, with Margaret Edson's play *W;t*.

- **MHH 301 Narrative Medicine:** Dr. Susan McDonald (Social Work)

In this intermediate-level course, students use narrative to explore the relationship between health and healing, to give voice to the vulnerable and disadvantaged, and to articulate the human dimension in healthcare. Currently students study theoretical approaches to narrative and practice these approaches in the classroom; however, the course lacks application in the healthcare setting. Through partnerships with the Mercy Center Nursing Unit (a skilled nursing and personal care facility) and Candy's Place: The Center for Cancer Wellness (a support center for people affected by cancer), students in the revised course will practice their narrative skills in a healthcare setting by recording and narrating others' stories of health, which will become (with permission) podcasts on the MHH webpage. The course will draw on foundational work in narrative medicine: Rita Charon's *Narrative Medicine*, Susan Sontag's *Illness as Metaphor*, and Arthur Frank's *The Wounded Storyteller*.

- **MHH 410 Fieldwork:** Dr. Amanda Caleb (English)

Students complete an internship with a health organization or a reflective observational

rotation at Geisinger Wyoming Valley Medical Center. For the internship, students apply academic knowledge to work experience; for the observational rotation, students attend clinical meetings (including ethics boards and tumor boards) and participate in on-site observations of palliative care providers. The course will become a 400-level course with the prerequisites of MHH 201 and MHH 301 to scaffold the expanded experiential learning. In this revised version, students will compose: reflective journals about their fieldwork; a critical essay on the MHH skills used in patient care and healthcare decisions; and an analytical essay on challenges in healthcare based on their experiences.

3. Collaborative Team

Program Director: Dr. Amanda Caleb, Associate Professor of English and Director of the Medical and Health Humanities program. Dr. Caleb will convene the curriculum workshops, submit curriculum changes to the University's Curriculum Committee, assess the project, submit NEH reports, and promote the project to a wide audience; she will serve as point person for community partners and for inquiries about the program. She helped design the current MHH curriculum and evaluated programs while serving on Academic Program Review Committee.

Assistant Program Director: Dr. Thomas Hajkowski, Associate Professor of History and Interim (Fall 2017) Director of the Medical and Health Humanities program. Dr. Hajkowski will assist in convening the curriculum workshops, submitting the curricular changes to the University's Curriculum Committee, and developing evaluation surveys. He helped design the current MHH curriculum and developed assessment tools while serving as University Honors Director.

Faculty and Staff Participants: The following faculty and staff members will develop and teach the proposed new courses; for more on their qualifications, please see Appendix G.

- **Health Disparities** (team-taught): Dr. Amanda Caleb, Associate Professor of English; Dr. Susan McDonald, Assistant Professor of Social Work. Dr. Caleb's research and teaching focus on marginalized groups in literature; Dr. McDonald's private practice, teaching, and research provide

the healthcare expertise needed for this course.

- **Environmental Health** (team-taught): Dr. Matthew Nickel, Assistant Professor of English; Dr. Barbara McCraith, Associate Professor of Biology; Dr. Cosima Wiese, Associate Professor of Biology. Dr. Nickel has researched and taught environmental literature; Drs. McCraith and Wiese teach Introduction to Environmental Science and Environmental Biology.
- **Race, Gender, and Health** (team-taught): Dr. Ryan Weber, Assistant Professor of Fine Arts; Dr. Marnie Hiester, Professor of Psychology; Dr. Amanda Caleb, Associate Professor of English. All three faculty members teach gender-focused courses; Drs. Weber and Caleb also research and teach about eugenics.
- **Health and Human Rights** (team-taught): Dr. Joseph Curran, Professor of Religious Studies; Mrs. Kathleen Gelso, Assistant Professor of Nursing; Dr. Thomas Hajkowski, Associate Professor of History. Drs. Curran and Hajkowski teach classes on human rights; Mrs. Gelso and Dr. Curran are members of the University's Ethics Institute; Mrs. Gelso has extensive experience in healthcare.
- **Global Health Populations** (team-taught): Dr. Glenn Willis, Assistant Professor of Religious Studies; Dr. Joseph Cipriani, Professor of Occupational Therapy; Dr. Ryan Weber, Assistant Professor of Fine Arts. These faculty members conduct research in a global context and with an eye toward health and marginalized groups; they are involved with international educational experiences and service-learning; Dr. Cipriani has considerable experience working with patients in Jamaica.
- **Modern Epidemics and Pandemics** (team-taught): Dr. Amanda Caleb, Associate Professor of English; Dr. Thomas Hajkowski, Associate Professor of History. Both teach about epidemics and pandemics in several Medical and Health Humanities, English, and History courses.
- **Introduction to Medical Geography**: Dr. Thomas Hajkowski, Associate Professor of History. Dr. Hajkowski already teaches GEO 202: Cultural World Geography with an emphasis on health.
- **Introduction to US Health Policy**: Dr. Rebecca Padot, Assistant Professor of History and

Government. Dr. Padot has extensive research experience in public policy, including studying the healthcare and economic impact of foster care.

- Ms. Maureen Cech, archivist, Center for Nursing History; and Dr. Stacy Gallin, Director, Center for Human Dignity in Bioethics, Medicine, and Health, will help develop experiential learning in MHH 201: Introduction to Medical and Health Humanities and will provide material support for other courses. Ms. Cech has a depth of knowledge with regard to the Nursing History archive; Dr. Gallin provides expertise in bioethics, particular in relation to marginalized groups.

Visiting Scholar: Dr. Erin Lamb, Associate Professor and Chair of Biomedical Humanities at Hiram College. Dr. Lamb is an advocate for the development of Health Humanities programs across the United States, and several of our faculty attended her 2016 workshop on teaching in the Health Humanities at Hiram College. Dr. Lamb will visit early in the grant period to help with the development of new courses through a transdisciplinary approach; she will return near the end of the grant period to offer her evaluation as part of our overall assessment.

Community Partners: Mary Supey at the Mercy Center Nursing Unit and Nicole Hapshe at Candy's Place: The Center for Cancer Wellness will assist in developing the experiential learning component for Narrative Medicine at their organizational locations.

4. Institutional Context and Resources

Misericordia University describes itself as a “broad-based liberal arts and pre-professional studies institution”: 65% of undergraduates enroll in Health Sciences and Business degrees, while approximately 4.3% of all undergraduates enroll in Humanities degrees, and all students complete a 49-credit liberal arts core (out of 121-127 total credits). The Humanities have a strong presence in the core—30 credits—in English, Fine Arts, History, Philosophy, and Religious Studies. Students graduate with a solid Humanities base; however, connections between the Humanities and the students’ majors can range from foundational to peripheral, depending on the degree.

The existing Medical and Health Humanities program attempts to bridge the gap between disciplines; however, securing the Humanities Connection grant would fund revisions that would further strengthen this bridge and provide students across the University with the opportunity to study health issues steeped in Humanities' habits of mind. These new proposed courses complement many degree programs in the Health Sciences, Business, and the Natural Sciences. Expanding the program to be more transdisciplinary will foster partnerships across disciplinary boundaries that will shape the University's intellectual and cultural life by including and engaging all majors.

Institution resources that will support this project include the **Mary Kintz Bevevino Library**, the **Center for Human Dignity in Bioethics, Medicine, and Health**, the **Center for Nursing History**, and the **Center for Faculty Professional Development**. The librarians have and will continue to support the program's educational goals and assist in procuring materials for both faculty and students. The Centers will support curriculum development and assessment and offer research assistance for students' coursework, thesis development, and experiential learning.

5. Impact and Dissemination

The proposed program revisions will transform the degree into one that fully integrates the Humanities' habits of mind: it will allow students to transcend disciplinary boundaries and to develop critical thinking skills and practice meaningful reflection that provide the foundations to engage with compelling issues in health and the human experience. Such transdisciplinary courses will foster connections between degree programs and reveal to students in all majors how disciplines speak to each other and work together. Finally, such changes will create a stronger presence for Medical and Health Humanities on our campus, expanding the Humanities' vital position in the educational experience. Conservatively, we estimate that enrollment will increase from 12 students/cohort to 16 because of the increased course offerings and the flexibility of the major, which is particularly appealing to double majors. We estimate doubling the number of minors from 14 to 28,

drawing largely from the Health Science majors who can use their free electives to pursue the minor.

The University's marketing department and the program's admissions liaison will advertise the revised curriculum and the students' experiential learning projects to prospective high school students and current undergraduates. The student projects and podcasts will be promoted to a global audience through the creation of an MHH Twitter account (linked to the program's webpage), which will also share information about the degree program. Working with the Center for Faculty Professional Development (CFPD), faculty participants will record podcasts on pedagogy relevant to this project (such as team teaching and curriculum development), which will be hosted on CFPD's website and advertised by its Director on professional development listservs. Dr. Caleb will present the project at Misericordia's annual Healthcare Symposium, whose audience includes local healthcare providers, and at the Health Humanities Consortium conference; she will also develop an article on transdisciplinarity in Health Humanities education for the *Journal of Medical Humanities*.

6. Evaluation

Evaluation of the project will comprise three stands of assessment. Using both direct and indirect measures, formative assessment of student learning (with regard to interdisciplinarity and experiential learning) will be completed annually by the project director and results shared with the faculty of record and the project participants. Any changes in pedagogy and student learning activities will be considered in light of this data and other trend data. Second, faculty of record and the project participants will offer reflective statements about the courses' effectiveness, the structure and sequencing of the coursework, and their perceptions on student learning. Summative evaluation at the end of the third year will include overall analysis of the formative assessment, external program review, and an institutional assessment component devised to capture the effect of this program on institutional intellectual and cultural development in relation to the Humanities' contribution to health education.

Appendix A: Planning and Project Timeline

Planning for the original curriculum and proposed revised curriculum:

November 2014

Dr. Caleb visited Lehigh University to discuss their Health, Medicine, and Society minor and began feasibility study.

March 2015

Dr. Caleb presented to faculty representatives from all departments about the proposed Medical Humanities program; at this time, volunteers from eight departments created the Medical and Health Humanities steering committee (Dr. Amanda Caleb, English; Dr. Thomas Hajkowski, History; Dr. Ryan Weber, Fine Arts; Dr. Mark Painter, Philosophy; Dr. Antony Serino, Biology; Dr. Joseph Cipriani, Occupational Therapy; Dr. Susan McDonald, Social Work; and Dr. Brenda Pavill, Nursing)

April 2015

Dr. Caleb contacted program directors at Johns Hopkins University, Vanderbilt University, Baylor University, Hiram College, Davidson College, and Drexel University to discuss their programs and solicit information to help create Misericordia's program. Based on the feedback from these discussions, the steering committee agreed to create a major and a minor.

Summer 2015

Faculty developed program goals, learning outcomes, degree structure, and courses for the major and minor.

October 2015

The University conducted a feasibility and marketing study; with positive results, the VPAA pledged support for the degree.

November 2015

The steering committee submitted the curriculum to the Curriculum Committee.

February 2016

The curriculum was approved and added to the AY 16-17 catalogue.

May 2016

The University announced the new program.

June 2016

Three members of the steering committee attended Hiram College's Medical Humanities teaching conference.

Fall 2016

Seven matriculated students declared the MHH major.

Spring 2017

The program ran its first courses (MHH 201 and PHL 310); the program sponsored the Deadly Medicine exhibit and speaker series to recruit students.

May 2017

The steering committee met to discuss enrollment, curricular changes, and changes to other programs; the committee agreed to research courses over the summer and review the curriculum in the next year.

August 2017

MHH enrolled its first cohort; the steering committee met to discuss curricular changes and proposed the revised curriculum outlined in this document.

Project timeline:

May 2018

- Faculty participants and staff participants (Dr. Susan McDonald, Dr. Matthew Nickel, Dr. Barbara McCraith, Dr. Cosima Wiese, Dr. Marnie Hiestler, Dr. Ryan Weber, Dr. Joseph Curran, Mrs. Kathleen Gelso, Dr. Joseph Cipriani, Dr. Glenn Willis, Dr. Rebecca Padot, Ms. Maureen Cech, and Dr. Stacy Gallin) will attend curriculum meeting run by Drs. Caleb and Hajkowski
- The above participants (or at least one representative from each team-taught course) will attend the Center for Faculty Professional Development Summer Institute on “Effective Teaching Methods”
- Dr. Caleb contacts Mary Supey (Mercy Center) and Nicole Hapshe (Candy’s Place) to arrange meetings with Dr. Susan McDonald (for MHH 301: Narrative Medicine).
- Drs. Caleb and Hajkowski arrange transdisciplinary curriculum workshop, including arranging for Dr. Lamb’s travels, ordering texts, and creating Blackboard page with additional resources.

Summer 2018

- Dr. Erin Lamb visits campus to help with MHH teaching institute.
- Faculty and staff participants (Dr. Amanda Caleb, Dr. Thomas Hajkowski, Dr. Susan McDonald, Dr. Matthew Nickel, Dr. Barbara McCraith, Dr. Cosima Wiese, Dr. Marnie Hiestler, Dr. Ryan Weber, Dr. Joseph Curran, Mrs. Kathleen Gelso, Dr. Joseph Cipriani, Dr. Glenn Willis, Dr. Rebecca Padot, Ms. Maureen Cech, and Dr. Stacy Gallin) completed assigned summer reading
- Faculty and staff participants listed above attend workshop on transdisciplinary curriculum development and teaching. The first four sessions will also be open to any faculty at Misericordia.
 - Sessions:
 - Dr. Erin Lamb: Methods in Health Humanities
 - Reading: from *The Health Humanities Reader*
 - Dr. Amanda Caleb: A Collision of Humanities and Medicine
 - Reading: *W;t*

- Dr. Erin Lamb: Aging Studies as a Model for Transdisciplinary Teaching
 - Reading: photocopies
- Dr. Ryan Weber: Disability as Transdisciplinary
 - Reading: from *The Health Humanities Reader*, photocopies
- Dr. Erin Lamb: Curriculum workshop
 - Faculty will finalize curriculum proposals and reflect upon sessions.
- Faculty participants (Dr. Amanda Caleb, Dr. Thomas Hajkowski, Dr. Susan McDonald, Dr. Matthew Nickel, Dr. Barbara McCraith, Dr. Cosima Wiese, Dr. Marnie Hiester, Dr. Ryan Weber, Dr. Joseph Curran, Mrs. Kathleen Gelso, Dr. Joseph Cipriani, Dr. Glenn Willis, and Dr. Rebecca Padot) develop curriculum for individual courses
- Dr. Caleb and Dr. Susan McDonald work with Mary Supey (Mercy Center) and Nicole Hapshe (Candy's Place) to establish clear guidelines and permissions for student interactions.
- The Medical and Health Humanities steering committee (Dr. Amanda Caleb, Dr. Thomas Hajkowski, Dr. Ryan Weber, Dr. Joseph Cipriani, Dr. Susan McDonald, Mrs. Kathleen Gelso, Dr. Margot Wielgus, and Dr. Anthony Serino) reviews program goals and learning outcomes in light of new courses.

Fall 2018

- Drs. Caleb and Hajkowski:
 - review all proposals, create an omnibus proposal, and submit it to the Curriculum Committee.
 - develop assessment surveys for students to complete regarding career preparation and applying Humanities skills to coursework and practice
 - meet with Dr. Alicia Nordstrom, the Director of the Center for Faculty Professional Development to review the assessment instruments.
- Dr. Caleb establishes the MHH Twitter page and develops database of contacts for MHH 201 experiential learning project.

Spring 2019

- The following courses are offered
 - Dr. Caleb teaches revised MHH 201: Introduction to Medical and Health Humanities (MHH core)
 - Dr. Margot Wielgus teaches PHL 310: Medical Ethics (Humanities and Medicine)
 - MHH electives offered based on rotation determined by home department.
- Dr. Caleb:
 - arranges peer evaluations and student surveys for the above courses.
 - works with IT to develop the hosting webpage for the MHH 201 projects.
 - attends the NEH meeting in Washington, DC
 - assists marketing and admissions with advertising new curriculum.

Summer 2019

- Drs. Caleb and Hajkowski conduct formative evaluation based on student survey results and faculty evaluations, which is circulated to the faculty and staff participants (Dr. Susan McDonald, Dr. Matthew Nickel, Dr. Barbara McCraith, Dr. Cosima Wiese, Dr. Marnie Hiester, Dr. Ryan Weber, Dr. Joseph Curran, Mrs. Kathleen Gelso, Dr. Joseph Cipriani, Dr. Glenn Willis, Dr. Rebecca Padot, Ms. Maureen Cech, and Dr. Stacy Gallin).

- Based on feedback from faculty and staff participants and MHH steering committee, Dr. Caleb makes recommendations for any teaching changes, assignment changes, etc. for MHH 201: Introduction to Medical and Health Humanities and MHH 410: Fieldwork.
- Dr. Caleb applies for IRB Level 1 clearances for MHH 301 class

Fall 2019

- MHH program enrolls its first cohort for the new curriculum
- The following courses are offered (to be confirmed Spring 2018):
 - Dr. Susan McDonald teaches the revised MHH 301: Narrative Medicine (MHH core)
 - Drs. Matthew Nickel, Barbara McCraith, and Cosima Wiese teach Environmental Health (Critical Health Studies)
 - Drs. Amanda Caleb and Thomas Hajkowski teach Modern Epidemics and Pandemics (Global Health)
 - Dr. George Shea/Dr. Margot Wielgus teaches PHL 315: Philosophy of Medicine (Humanities and Medicine)
 - MHH electives offered based on rotation determined by home department.
- Dr. Caleb arranges student surveys for all classes and for faculty evaluations for all classes

Spring 2020

- The following classes are offered (to be confirmed Spring 2018):
 - Dr. Caleb teaches the revised MHH 201: Introduction to Medical and Health Humanities (MHH core)
 - Dr. Caleb convenes MHH 410: Fieldwork and MHH 450: Thesis (as needed) (MHH core)
 - Drs. Susan McDonald and Caleb teach Health Disparities (Critical Health Studies)
 - Dr. Thomas Hajkowski teaches Introduction to Medical Geography (Global Health)
 - Dr. Caleb teaches ENG 305: Literature and Medicine (Humanities and Medicine)
 - MHH electives offered based on rotation determined by home department.
- Dr. Caleb arranges student surveys for all classes and for faculty evaluations for all classes

Summer 2020

- Dr. Caleb conducts formative evaluation based on student survey results and faculty evaluations, which is circulated to all faculty and staff participants (Dr. Thomas Hajkowski, Dr. Susan McDonald, Dr. Matthew Nickel, Dr. Barbara McCraith, Dr. Cosima Wiese, Dr. Marnie Hiester, Dr. Ryan Weber, Dr. Joseph Curran, Mrs. Kathleen Gelso, Dr. Joseph Cipriani, Dr. Glenn Willis, Dr. Rebecca Padot, Ms. Maureen Cech, and Dr. Stacy Gallin).
- Based on feedback, Dr. Caleb makes recommendations for any teaching changes, assignment changes, etc. to the faculty who taught in AY 19-20 (Drs. McDonald, Hajkowski, Nickel, McCraith, and Wiese).

Fall 2020

- The following courses are offered (to be confirmed Spring 2018):
 - Dr. Susan McDonald teaches MHH 301: Narrative Medicine (MHH core)
 - Dr. Amanda Caleb convenes MHH 410: Fieldwork and MHH 450: Thesis (as needed) (MHH core)

- Drs. Thomas Hajkowski and Joseph Curran and Mrs. Kathleen Gelso teach Health and Human Rights (Critical Health Studies)
- Drs. Glenn Willis, Joseph Cipriani, and Ryan Weber teach Global Health Populations (Global Health)
- Dr. Thomas Hajkowski teaches HIS 342: History of Medicine and Health (Humanities and Medicine)
- MHH electives offered based on rotation determined by home department.
- Dr. Caleb arranges student surveys for all classes and for faculty evaluations for all classes

Spring 2021

- The following courses are offered (to be confirmed Spring 2018):
 - Dr. Caleb teaches the revised MHH 201: Introduction to Medical and Health Humanities (MHH core)
 - Dr. Caleb convenes MHH 410: Fieldwork and MHH 450: Thesis (as needed) (MHH core)
 - Drs. Ryan Weber, Marnie Hiester, and Amanda Caleb teach Race, Gender and Health (Critical Health Studies)
 - Dr. Margot Wielgus teaches PHL 310: Medical Ethics
 - Dr. Rebecca Padot teaches Introduction to U.S. Health Policy (MHH elective)
 - MHH electives offered based on rotation determined by home department.
- Dr. Caleb arranges student surveys for all classes and for faculty evaluations for all classes
- Dr. Caleb conducts formative evaluation based on student survey results and faculty evaluations, which is circulated to all faculty and staff participants (Dr. Thomas Hajkowski, Dr. Susan McDonald, Dr. Matthew Nickel, Dr. Barbara McCraith, Dr. Cosima Wiese, Dr. Marnie Hiester, Dr. Ryan Weber, Dr. Joseph Curran, Mrs. Kathleen Gelso, Dr. Joseph Cipriani, Dr. Glenn Willis, Dr. Rebecca Padot, Ms. Maureen Cech, and Dr. Stacy Gallin).
- Based on feedback, Dr. Caleb makes recommendations for any teaching changes, assignment changes, etc. to the faculty who taught in AY 20-21 (Drs. Hajkowski, Curran, Willis, Cipriani, Weber, Hiester, and Padot and Mrs. Gelso).
- Dr. Lamb returns to campus for final evaluation
- Dr. Caleb completes summative evaluation, using formative evaluations as comparison, and submits final report to the NEH

Appendix B: Guiding Texts and Resources

Below are some of the many texts and resources that helped shape the revised curriculum.

Medical and Health Humanities

- Berry, Sarah, Therese Jones, and Erin Lamb. "Editor's Introduction: Health Humanities: The Future of Pre-Health Education is Here." *Journal of Medical Humanities* Online First (July 2017), 1-8, doi: 10.1007/s10912-017-9466-0.
- . "Health Humanities Baccalaureate Programs in the United States." *Center for Literature and Medicine, Hiram College*. December 2016. http://www.hiram.edu/wp-content/uploads/2016/11/HHBP_12_2_16.pdf
- Bordin, Giorgio, and Laura Polo D'Ambrosio. *Medicine in Art*. Trans. Jay Hyams. Los Angeles: Getty Publications, 2010.
- Downie, R.S., and Jane MacNaughton. *Bioethics and the Humanities: Attitudes and Perceptions*. New York: Routledge, 2007.
- Gawande, Atul. *Being Mortal: Medicine and What Matters in the End*. New York: Metropolitan Books, 2014.
- Gilman, Sander L. *Illness and Image: Case Studies in the Medical Humanities*. New York: Routledge, 2014.
- Jones, Therese, Delese Wear, and Lester D. Friedman, eds. *Health Humanities Reader*. New Brunswick: Rutgers University Press, 2014.
- Kellehear, Allan. *A Social History of Dying*. Cambridge: Cambridge University Press, 2007.
- Porter, Roy. *The Cambridge History of Medicine*. Cambridge: Cambridge University Press, 2006.
- . *The Greatest Benefit to Mankind: A Medical History of Humanity*. New York: Norton, 1997.
- Stone, John, and Richard Reynolds (eds.). *On Doctoring: Stories, Poems, Essays*. 3rd ed. New York: Simon and Schuster, 2010.
- Waddington, Keir. *An Introduction to the Social History of Medicine: Europe Since 1500*. Basingstoke: Palgrave, 2011.

Environmental Health

- Bartram, Jamie. *Routledge Handbook of Water and Health*. New York: Routledge, 2015.
- Burlage, Robert S. *Principles of Public Health Microbiology*. Burlington: Jones and Bartlett Learning, 2012.
- Conologue, Bill. *Here and There: Reading Pennsylvania's Working Landscapes*. University Park: The Pennsylvania State University Press, 2013.
- Frumkin, Harold. *Environmental Health: from Global to Local*. 2nd ed. San Francisco: Jossey-Bass, 2010.
- Houser, Heather. *Ecosickness in Contemporary U.S. Fiction: Environment and Affect*. New York: Columbia University Press, 2014.
- Resnik, David B. *Environmental Health Ethics*. Cambridge: Cambridge University Press, 2012.
- Roberts, Elizabeth Madox. *The Time of Man: A Novel*. Lexington: University of Kentucky Press, 2000.

Health Disparities

- Bashford, Alison, and Philippa Levine, eds. *The Oxford Handbook of the History of Eugenics*. Oxford: Oxford University Press, 2012.
- Davis, Lennard J. *The End of Normal: Identity in a Biocultural Era*. Ann Arbor: The University of Michigan Press, 2013.
- . *Enforcing Normalcy: Disability, Deafness, and the Body*. New York: Verso, 1995.
- Ensign, Josephine. *Catching Homelessness: A Nurse's Story of Falling through the Safety Net*. Berkeley: She Writes Press, 2016.
- Feldshuh, David. *Miss Evers' Boys*. New York: Dramatists Play Service, 1998.

- LaVeist, Thomas A., and Lydia A. Isaac, eds. *Race, Ethnicity, and Health: A Public Health Reader*. 2nd ed. Hoboken: John Wiley and Sons, 2012.
- Lombardo, Paul A., ed. *A Century of Eugenics in America: From the Indiana Experiment to the Human Genoma Era*. Bloomington: Indiana University Press, 2011.
- Moscucci, Ornella. *The Science of Woman: Gynaecology and Gender in England, 1800-1929*. Cambridge: Cambridge University Press, 1993.
- Rose, Patti R. *Health Disparities, Diversity, and Inclusions: Contexts, Controversies, and Solutions*. Burlington: Jones and Barlett Learning, 2017.
- Skloot, Rebecca. *The Immortal Life of Henrietta Lacks*. New York: Broadway Books, 2011.

Medical/Healthcare Ethics and Human Rights

- DeGrazia, David. *Biomedical Ethics*. New York: McGraw-Hill, 2011.
- Dittmer, John. *The Good Doctors: The Medical Committee for Human Rights and the Struggle for Social Justice in Health Care*. Jackson: University Press of Mississippi, 2017.
- Edson, Margaret. *W;t*. New York: Farrar, Straus, and Giroux, 1999.
- Grodin, Michael, Daniel Tarantola, George Annas, and Sogja Gruskin, eds. *Health and Human Rights in a Changing World*. 3rd ed. New York: Routledge, 2013.
- Lewis, Sinclair. *Arrowsmith*. New York: Signet, 2008.
- Marcum, James A. *The Virtuous Physician: The Role of Virtue in Medicine*. New York: Springer, 2012.
- Marks, Stephen P., ed. *Health and Human Rights: Basic International Documents*. 3rd ed. Cambridge: Harvard University Press, 2013.
- Washington, Harriet A. *Medical Apartheid: The Dark History of Medical Experimentation on Black Americans from Colonial Times to the Present*. New York: Harlem Moon, 2006.

Global Health

- Aberth, John. *Plagues in World History*. Lanham: Rowman and Littlefield, 2011.
- Anthamatten, Peter, and Helen Hazen's *An Introduction to the Geography of Health*. New York: Routledge, 2011.
- Barry, John M. *The Great Influenza: The Story of the Deadliest Pandemic in History*. New York: Penguin, 2009.
- Birn, Anne-Emanuelle, Yogan Pillay, and Timothy H. Holtz. *Textbook of Global Health*. 4th ed. Oxford: Oxford University Press, 2017.
- Camus, Albert. *The Plague*. New York: Vintage, 1991.
- Defoe, Daniel. *A Journal of the Plague Year*. Ed. Paula R. Backscheider. New York: Norton, 1992.
- Fadiman, Anne. *The Spirit Catches You and You Fall Down: A Hmong Child, Her American Doctors, and the Collision of Two Cultures*. New York: Farrar, Straus, and Giroux, 1998.
- Johnson, Steve. *The Ghost Map: The Story of London's Most Terrifying Epidemic--and How It Changed Science, Cities, and the Modern World*. New York: Riverhead Books, 2006.
- Koch, Tom. *Disease Maps: Epidemics on the Ground*. Chicago: University of Chicago Press, 2011.
- Koen, Benjamin. *The Oxford Handbook of Medical Ethnomusicology*. Oxford: Oxford University Press, 2008.
- Kushner, Tony. *Angels in America: Revised and Complete Edition*. New York: Theatre Communications Group, 2013.
- Nassar-McMillan, Sylvia C., Kristine J. Ajrouch, and Julie Hakim-Larson, eds. *Biopsychosocial Perspectives on Arab Americans: Culture, Development, and Health*. New York: Springer, 2014.
- Oldstone, Michael B.A. *Viruses, Plagues, and History: Past, Present, and Future*. Oxford: Oxford University Press, 2010.
- Rosenberg, Charles E. *Explaining Epidemics and Other Studies in the History of Medicine*. Cambridge:

Cambridge University Press, 1992.

Thomas, Felicity, ed. *Handbook of Migration and Health*. Northampton: Edward Elgar Publishing, 2016.

Health Policy

Musgrave, Frank W. *The Economics of U.S. Health Care Policy: The Role of Market Forces*. New York: Routledge, 2015.

Sachs, Jeffrey. *The End of Poverty: How We Can Make it Happen in Our Lifetime*. New York: Penguin, 2005.

Staff of the *Washington Post*. *Landmark: The Inside Story of America's New Health-Care Law and What it Means for Us All*. New York: PublicAffairs, 2010.

Teitelbaum, Joel B., and Sara E. Wilensky. *Essentials of Health Policy and Law*. 2nd ed. Burlington: Jones and Bartlett Learning, 2013.

Thompson, Frank J., and John J. DiIulio, eds. *Medicaid and Devolution: A View from the States*. Washington, DC: The Brookings Institute Press, 1998.

Weisser, William G., and Carol S. Weisser. *Governing Health: The Politics of Health Policy*. 4th ed. Baltimore: Johns Hopkins University Press, 2012.

Narrative Medicine

Charon, Rita. *Narrative Medicine: Honoring the Stories of Illness*. Oxford: Oxford University Press, 2008.

---, et. al. *Principles and Practice of Narrative Medicine*. Oxford: University of Oxford Press, 2014.

Frank, Arthur. *The Wounded Storyteller: Body, Illness, and Ethics*. 2nd ed. Chicago: University of Chicago Press, 2013.

Kalanithi, Paul. *When Breath Becomes Air*. New York: Random House, 2016.

Sontag, Susan. *Illness as Metaphor and AIDS and Its Metaphors*. New York: Picador, 2001.

Wiggins, Osborne P. *Clinical Ethics and the Necessity of Stories: Essays in Honor of Richard M. Zaner*. New York: Springer Science, 2011.

Transdisciplinary Teaching and Research

Brown, Valerie A., John A. Harris, and Jacqueline Russell. *Tackling Wicked Problems: Through the Transdisciplinary Imagination*. New York: Routledge, 2010.

Gibbs, Paul, ed. *Transdisciplinary Higher Education: A Theoretical Basis Revealed in Practice*. New York: Springer, 2017.

Haden, Karl. "Interprofessional Education and the Liberal Arts." *Academy for Academic Leadership*. December 2016 newsletter. <http://www.aalgroup.org/newsletter/>

Nicolescu, Basarab, ed. *Transdisciplinarity: Theory and Practice*. New York: Hampton Press, 2008.

Web Resources:

- American Society for Bioethics and Humanities
- The Art of Medicine podcast
- *Atrium: A Journal about Bioethics and Medical Humanities*
- Health Humanities Consortium
- *Journal of Medical Humanities*
- Literature, Arts, and Medicine Database
- Maimonides Institute for Medicine, Ethics, and the Holocaust
- World Medical Association

Appendix C: Medical and Health Humanities Program Goals and Learning Outcomes

The program in Medical and Health Humanities helps its majors to:

1. Understand difference in perspective of holism and reductionism in the diagnosis, narrative, and definition of wellness.
2. Understand how non-medical disciplines contribute to the study and treatment of illness, disease, and care, including social justice, historical, literary, ethical, and philosophical perspectives.
3. Understand how cultural perspectives impact the concept of wellness.
4. Understand the concepts of autonomy, beneficence, non-maleficence, and justice as they relate to the preservation of human dignity and human rights.
5. Develop strong writing skills across multiple disciplines and addressed to varied audiences.
6. Develop strong oral communication and presentation skills.

The program goals are realized in the following student learning outcomes:

Program Goal 1 Outcome:

Students will evaluate holism and reductionism in the diagnosis, narrative, and definition of wellness, including biomedical, narrative, and bio-psychosocial models.

Program Goal 2 Outcome:

Students will compare and contrast different non-medical approaches to understanding illness, disease, and care.

Program Goal 3 Outcome:

Students will assess how cultural perspectives impact concepts of wellness and health.

Program Goal 4 Outcome:

Students will evaluate the application of autonomy, beneficence, non-maleficence, and justice to issues of human dignity and human rights.

Program Goal 5 Outcome:

Students will demonstrate strong writing skills across multiple disciplines and addressed to varied audiences.

Program Goal 6 Outcome:

Students will demonstrate the ability to communicate clearly, effectively, and compellingly.

Appendix D: MHH Electives

The following courses are currently approved for the MHH major and minor:

- ADC 340A/SWK 340A: Chemical Additions and Dependency
- ENG 225: Disability in Literature
- FA 213: Themes in Medical Humanities
- FA 361: Music and the Mind
- FA 374: Anatomical Drawing
- HIS 165: The History of Human Rights
- HP 220: American Sign Language
- MHH 385: Special Topics in Medical and Health Humanities
- MHH 380: Independent Study
- PHL 202: Environmental Philosophy
- PHL 210: Philosophy of Person
- PSY 277/GER 277: Adult Development and Aging
- PSY 305: Health Psychology
- PSY 310: Gender Studies
- RLS 117: Christian Health Care Ethics
- RLS 215: Death and Dying
- SWK 320: Trauma and Resiliency

The following course will be added as electives based on the proposed revisions:

- POL 330: Urban Policy: Disadvantaged Youth
- POL 3xx: Introduction to US Health Policy

Appendix E: Planning Data

In planning this revised Medical and Health Humanities, we looked at data about national trends in Medical Humanities/Health Humanities education—both in terms of career preparation and competition from other programs—enrollment in existing Medical and Health Humanities classes, Misericordia University’s existing curriculum in other programs, and recruitment data to help develop a curriculum that would situate the Humanities as central to the students’ education with better preparing them for their careers and attracting more students.

In Fall 2015, Misericordia University contracted Educational Advisory Board (EAB) to complete a market study for the proposed Medical and Health Humanities degree. The results from that study indicated that the program should include an introductory course, host guest lectures, and support team-taught courses to attract students. In Spring 2017, the program offered its first section of MHH 201: Introduction to Medical and Health Humanities. Dr. Caleb also arranged for the Deadly Medicine exhibit from the US Holocaust Memorial Museum to be on campus and organized a related speaker series, featuring notable scholars like Dr. Arthur Caplan and Dr. Matthew Wynia, as well as Holocaust survivor Mrs. Eva Mozes Kor. However, due to a significant delay on EAB’s part, the MHH steering committee received this marketing study after the curriculum had been developed, making it difficult to implement all the suggestions, especially team-teaching, as faculty felt stretched within their own departments. The Medical and Health Humanities committee could not develop truly transdisciplinary courses in such a short period of time and knowing that they could not be taught in that manner from the onset of the degree. With the luxury of more time to plan such courses, the faculty can create transformative courses composed of meaningful disciplinary partnerships and develop the program that is most conducive to student learning, recruitment, and retention.

Two additional suggestions from the EAB market study were to host student testimonials and projects on our website and to offer courses addressing social justice and health disparities. Our website does host a student’s blog from his summer internship in Washington, DC; however, being such a new program, there are few testimonials that we can host at this time. However, the revisions to MHH 201 and MHH 301 will provide more information about the program, from the student perspective, to the general public and prospective students. These projects were not completed at the time of the original curriculum development due to the newness of the program and staffing demands to offer such courses that work best as transdisciplinary.

Finally, the EAB market study encourage career preparation through community partnerships and flexible tracks within the curriculum. Misericordia’s size—approximately 1,900 undergraduates and 138 full-time faculty—makes tracks difficult. However, a menu of courses and team-teaching will allow for some degree tailoring to help with career preparation. Having established the foundations of the degree, through the support of the grant we will be able to partner with community organizations in a more meaningful and systematic manner. Both these changes will help prepare students for their future careers while reinforcing the intellectual skills of the Humanities.

A second source we used for this revision was “Health Humanities Baccalaureate Programs in the United States,” a study conducted by Sarah L. Berry, Erin Gentry Lamb, and Theresa Jones tracking current and developing programs in the US. At the time of the report (December 2016), there were 16 majors in the country, 11 of which have appeared in the last 10 years; since then, a simple web search reveals several more University who have majors that either did not provide numbers to the report or have since developed a major, including Lehigh University, which is 80 miles from Misericordia University. The increase in competitors provides a practical motivation to revise our curriculum to better prepare our students for future employment and thereby improve

our recruitment efforts.

We also considered student feedback and Institutional Data to help determine changes that would be beneficial to our students. 16 students enrolled in MHH 201 in Spring 2017: six majors, nine minors, and one non-major/non-minor. While the enrollment numbers were satisfactory for the first time running the course, the feedback from the students revealed some concerns. Several of them commented on wanting more time in the class to better apply what they learned to potential careers. Without sacrificing the existing content—which the students appreciated and applauded, especially the guest lectures—it became clear to the MHH steering committee that the course need to become four credits to offer the students a foundation in experiential learning and career exploration.

A second factor we considered was the curriculum of other programs, particularly in encouraging double majors. The original curriculum did not allow for students to double count core and major courses and, because of the limited course offerings, was restrictive in requiring specific Humanities classes. While the intention was for students to have a strong Humanities background, instead students outside the Humanities were deterred; similarly, transfer students lost credits because of the restriction on double counting. The proposed revision addresses this issue by allowing students to count 6 credits of MHH electives toward the core; moreover, departments on campus, such as Social Work, will include some of the new proposed courses toward their own majors, making it more feasible to double major. Finally, the new courses create more flexibility, allowing transfer students to bring in courses; for instance, Introduction to Public Health could count as Health Disparities; similarly, Medical Anthropology could count as Global Health Populations.

Finally, we looked at last year's recruitment data to ascertain, as best we could, the reasons students who choose our program and students chose other programs. Last year, we had 37 prospective students for the MHH major without a pre-professional designation (such as pre-DPT), of which 10 applied to the program, eight were admitted, and four chose to attend. Of the four who did not matriculate this Fall, two of them chose other schools for more flexibility and better career preparation; the other two did not provide reasons. Although part of a small data set, these students—with our current students—helped us determine that the program needed to improve both for recruitment purposes and to serve our students better.