EXECUTIVE COMMITTEE COLLEGE OF HUMANITIES, ARTS, AND SOCIAL SCIENCES REPORT THE RIVERSIDE DIVISION May 29, 2018

<u>To be adopted:</u> Proposed Medical and Health Humanities Minor

PRESENT: PROPOSED:

- 1. Upper-division requirements (20 Units)
 - a) Four (4) units from MHHS #### (intro)
 - b) Twelve (12) additional units, selected from the following streams. Students must take at least four (4) units from two of the three groups.

STREAM ONE: Science and Medicine. ANTH 175; ANTH 187; GSST 183; GSST 161; GSST 189; HIST106

STREAM TWO: Society, Culture and Health. AHS 133; ANTH 160; ANTH 162; ENGL 122Q; ENGL 141; ENGL 193; GSST 185; HIST 107; HIST 188; PHIL 112, PHIL 167; PHIL 168; RLST 110; RLST ###

STREAM THREE: Arts in Wellness.

CRWT 146; CRWT 155; CRWT 176;

DNCE 115; DNCE 013X; DNCE 181;

MCS 106; MCS 135; TFDP 122; TFDP

158

c) Four (4) units from MHHS #### (senior seminar).

All students must take the introductory course and the senior seminar. There is no required order in which elective courses must be taken but credit in MHHS #### INTRO is required for entry into MHHS #### SEM.

See Minors under the College of Humanities

Arts and Social Sciences in the Colleges and

Programs for additional information on minors.

Justification:

This is a proposal for a new minor. The introductory course is required for entry into the senior seminar, but it is not required before taking the elective courses for the minor. A student may choose to do the introductory course after having already take several courses that he or she later decides to organize into the minor by taking the required intro and seminar courses.

The decision to build a Medical and Health Humanities minor came on the heels of a successful National Endowment for the Humanities award to build programming and faculty development in narrative and medicine, and right before a successful jointly funded hire between UCR and the Huntington Library in English with a focus on Medical Humanities. The campus cluster hire effort also resulted in the hire of two additional scholars in Creative Writing who have research interests in Medical Narratives. We now have a critical mass of faculty across CHASS who are committed to work in the Medical Humanities and evidence of strong extramural support.

On campus, the School of Medicine would provide a host of opportunities as a research site for undergraduates to examine humanistic concepts in the education and provision of medical care. The minor would also support pre-medical students by providing them with necessary understanding of how humans document, conceptualize, and process illness, healing, the body, and biomedical and health encounters. With the School of Medicine's Thomas Haider Program, which holds 24 seats for qualifying UCR graduates, a minor in Medical and Health Humanities has the potential for transforming the ways in which these future physicians practice medicine.

In 2016, we developed a graduate Designated Emphasis in Medical and Health Humanities, which is now enrolling students. In August of 2017, we launched of the Medical and Health Humanities DE for medical students. We currently have 12 medical students working toward earning the DE in addition to their MD. The minor in CHASS could provide potential TA opportunities for PhD students and, reciprocally, the DE will offer the undergraduate students an opportunity to pursue research in these fields at the graduate level at UCR.

Approvals:

Approved by the faculty of the Department of Anthropology: November 8, 2017

Approved by the faculty of the College of Humanities,

Arts, and Social Sciences: Proposals for new undergraduate programs do not require an all-College faculty vote as they are not affecting the bylaws or regulations of the college

Approved by the Executive Committee of the College

of Humanities, Arts, and Social Sciences: April 4, 2018

Approved by the Committee on Educational Policy: (pending)

A Proposal for

Medical and Health Humanities Minor

Department of Anthropology Riverside, CA

February 20, 2018

Submitted by:

Juliet McMullin, Professor, Social Medicine Population and Public Health. Department of Anthropology, Co-operating Faculty

Jeanette Kohl, Associate Professor and Chair, History of Art Department

University of California, Riverside College of Humanities, Arts, and Social Sciences Proposal for Medical and Health Humanities Minor December 14, 2017

PURPOSE

The minor in Medical and Health Humanities at UCR emphasizes the inextricable relationship between the Humanities, Social Sciences, and the Arts and their contributions to explicating health, illness, and medicine. This proposal fits within the growing national and international recognition of Medical and Health Humanities in providing students with the skills to perceive, understand, and document diverse human experiences in health and medicine. The minor will serve as the foundation for students to examine current and historical narratives, discourses, and artistic expressions of health, and emphasizes that health and pathology are not only the domain of medicine and biomedical sciences but also rich topics for interdisciplinary humanities inquiry.

UCR is among the most economically and ethnically diverse campuses in the United States. Given this context, the proposed minor builds on student interests in diversity and social equity, and faculty strengths in humanities research that examines the social, economic, and political forces on human experiences, documentation of health and illness, narrative and medicine, and the role of science and technology in medicine. The program encompasses courses in the history of medicine, literature and illness, cultural and political approaches to health and illness, medical narratives, graphic medicine, art and the human body, bioethics, cultural analysis of print and media texts, and creative expressions of health and illness. This minor will be a rich interdisciplinary study of human responses to health and medicine and will complement program majors in departments such as Anthropology, Art History, Creative Writing, English, History, Media and Cultural Studies, Philosophy, Religious Studies, Theater, and Gender and Sexuality Studies.

JUSTIFICATION

The decision to build a Medical and Health Humanities minor came on the heels of a successful National Endowment for the Humanities award to build programming and faculty development in narrative and medicine, and right before a successful jointly funded hire between UCR and the Huntington Library in English with a focus on Medical Humanities. The campus cluster hire effort also resulted in the hire of two additional scholars in Creative Writing who have research interests in Medical Narratives. We now have a critical mass of faculty across CHASS who are committed to work in the Medical Humanities and evidence of strong extramural support.

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qualifying UCR graduates, a minor in Medical and Health Humanities has the potential for transforming the ways in which these future physicians practice medicine.

In 2016, we developed a graduate Designated Emphasis in Medical and Health Humanities, which is now enrolling students. In August of 2017, we launched the Medical and Health Humanities DE for medical students. We currently have 12 medical students working toward earning the DE in addition to their MD. The minor in CHASS could provide potential TA opportunities for PhD students and, reciprocally, the DE will offer the undergraduate students an opportunity to pursue research in these fields at the graduate level at UCR.

COMMITTEE IN CHARGE

Juliet McMullin, Professor (co-Chair) School of Medicine and Anthropology McMullin's teaching and research examines the production of knowledge and inequality in health and medicine, focusing on fields of cancer, concepts of health and sovereignty with Native Hawaiians, and Graphic Medicine.

Jeanette Kohl, Associate Professor (co-Chair)

Kohl's research and teaching focus on images and cultural concepts of the Italian Renaissance, on portraiture, sculpture and materiality, and the role of the human body in art.

Emily Rapp Black, Assistant Professor Creative Writing Rapp Black is an award-winning author whose work explores medical ethics, genetics, disability issues, 19th century philosophy, and the ethics of end-of-life care.

Clifford Trafzer, Distinguished Professor History
Trafzer specializes in Native American histories of illness, genocide, and medicine.

Fuson Wang, Assistant Professor English
Professor Wang specializes in British Romantic literature and the medical humanities. His work
examines historical and literary accounts of vaccination and smallpox.

Supporting Faculty

Gloria Chan-Sook Kim, Assistant Professor Media & Culture Studies Chan-Sook Kim's research and teaching focuses on media, the Anthropocene, microbes, and health.

Lucille Chia, Professor History
Professor Chia's research and teaching examine the social and cultural history of middle and late imperial China, with additional interests in food and Chinese medicine.

María Regina Firmino-Castillo, Assistant Professor Dance
Firmino-Castillo is a performative artist, cultural worker, and transdisciplinary researcher
working at the intersections of performance and critical dance studies, decolonial studies, critical

anthropology, and environmental philosophy. Her work explores Mayan performance as a praxis of survivance and wellness in the face of genocide and its ontological violence.

Katie Ford, Professor

Creative Writing

Ford is an award-winning poet whose work explores illness and dying. Her teaching interests include international poetry, the lyric tradition, and the shapely creation of poems and poetry manuscripts.

Kimberly Guerrero, Assistant Professor Theater, Film, and Digital Production Guerrero's practice-based research centers around righting the misrepresentation and underrepresentation of Native peoples in mainstream media. She works with tribes to create compelling PSAs, music videos, and documentaries many of which have a health focus.

George Haggerty, Distinguished Professor

English

Haggerty specializes in 18th-Century English Literature and Queer Studies.

Allison Hedge Coke, Distinguished Professor

Creative Writing

Hedge Coke is an award-winning poet/writer whose work explores the environment, migration, labor, incarcerated youth, underserved communities, and narrative medicine, with career devotion to serving Indigenous communities.

Tamara Ho, Associate Professor

Gender & Sexuality Studies

Professor Ho's new research and teaching examines the intersection of gender, race, and medicine. She uses disability studies to examine the discourse and experience of cancer.

Matthew King, Assistant Professor

Religious Studies

King's teaching and research focuses on Tibetan and Mongolian religious identities in their transnational contexts. Specific interests include Buddhism, science, medicine, and secularism in Inner Asia; Buddhist economics; and the global circulation of knowledge about Buddhism and Buddhist peoples.

Antoine Lentacker, Assistant Professor

History

Lentacker's research and teaching explores the relations between the history of media and the history of science and medicine in modern Europe. He has a special interest in the history of drugs.

Goldberry Long, Associate Professor of Teaching

Long is a fiction writer. Her writing inspired her to develop a mandatory writing program for UCR's medical students aimed at fostering more empathy.

Luis Lara Malvacias, Assistant Professor

Dance

Malvacias is a Venezuelan choreographer and trans-disciplinary artist. His body of work has focused on ideas of transformation, multiplicity, authorship and the role of the audience in dance performance. Using signposts connected with life and aging, his work looks into issues surrounding mature dance makers and inquiring into the relationship of the body thinking, the body processing, the body making, and the body performing.

Allison (Bella) Merlin, Professor Theater, Film, and Digital Production Merlin work focuses understanding pragmatic skills of communication, presentation, and public speaking, as well as physical presence and voice production, to the more humanitarian skills of empathy, compassion, and "dynamic listening."

Yolanda Moses, Professor

Anthropology

Moses's research focuses on the broad question of the origins of social inequality in complex societies. This question is examined in areas of higher education and health inequities.

Worku Nida, Assistant Professor

Anthropology

Nida's research and teaching span Africa, the United States, and the Middle East with foci on social change, entrepreneurialism, migration, identity, ethnohistory, and the intersection of religion and illness narratives, focusing on processes through which the Gurage (in Ethiopia) diagnose, manage, and treat culturally defined illnesses inflicted by three deities.

Dana Simmons, Associate Professor

History

Simmons' is a historian of science and technology. Her research interests include hunger, nutrition, political economy, the human sciences, feminist theory, technopolitics and technoscientific utopias.

Jennifer Syvertsen, Assistant Professor

Anthropology

Syvertsen's work combines epidemiologic methods to describe patterns of drug use with ethnographic approaches that uniquely humanize and illuminate the powerful compulsion of drug addiction and its breadth of social and health consequences.

Annika Speer, Assistant Professor of Teaching Theatre, Film, and Digital Production Speer's research interests include gender and communication, and documentary/interview-based activist theatre. Communication as critical to witnessing for medical and traumatic encounters.

Chikako Takeshita, Associate Professor

Gender & Sexuality Studies

Takeshita's teaching and research focuses on feminist studies of science, technology, & medicine; reproductive health, rights, & politics; and sustainable futures.

Sherryl Vint, Professor

English and Media & Culture Studies

Vint's teaching and research focuses on science fiction, technoculture, popular culture and science, human-animal studies. Her work explores the exchanges between speculative imagination and material practice in personalized medicine, agribusiness and other genomic research.

Ni'Ja Whitson, Assistant Professor

Dance

Whitson is practitioner of indigenous African ritual and resistance forms, creating work that reflects the sacred in street, conceptual, and interdisciplinary performance. Whitson engages a nexus of postmodern and African Diasporic performance practices, workshop/healing facilitation through a critical intersection of gender, sexuality, race, and spirit.

Susan Zieger, Associate Professor

English

Zieger specializes in nineteenth-century British and related literatures and cultures, with an emphasis on the novel, ephemera, and other mass media forms. Her book describes how metaphors of addiction such as exile, self-enslavement, and disease circulated through literature and culture to forge the new identity of the addict.

ADMINISTRATION

The minor will be administratively housed in the Department of Anthropology (the Chair indicates support of this arrangement in the attached letter) and will be overseen by Juliet McMullin (School of Medicine and Anthropology) and Jeanette Kohl (Art History). Our Committee in Charge includes Emily Rapp Black (Creative Writing), Fuson Wang (English), and Clifford Trafzer (History). We do not anticipate any additional space needs for the program. Dr. McMullin and Kohl will advise students from their faculty offices, and the Department of Anthropology staff will request classrooms for our two courses as part of the administrative support.

Letters of support from Chairs of all involved departments indicate their agreement to occasionally release faculty from their programs to teach the new course we are proposing as part of this minor. An Introduction to and Seminar in Medical and Health Humanities will initially be taught by various members from the Committee in Charge while the new degree is set up. We anticipate that we would offer the Introduction to Medical and Health Humanities course every other year, with an anticipated enrollment of 50-60 students. At this stage, we are requesting no new resources for this program, but should it prove more popular than estimated here, support for TAs or Readers would allow us to expand enrollment. If this program were to receive its own funding in the future, we would be able to employ the graduate students in the Medical and Health Humanities DE, thus using this program's resources to help support graduate students as well as to support the minor.

All other courses required for the program are ones regularly offered and staffed by the relevant participating departments, as indicated in the attached letters of support from Department Chairs. We do not anticipate this new program will have any impact on existing programs since all our supporting faculty already teach courses in line with an interdisciplinary Medical and Health Humanities degree.

We anticipate this program granting 12-15 minor degrees a year.

The membership of the Committee in Charge will rotate on a biannual basis to allow participation in decisions from faculty from all participating departments. This committee will make decisions about course substitutions and other curricular program matters. Dr. McMullin or Dr. Kohl will remain co-Chairs of this committee for at least the next five years. Every three years thereafter, the committee in charge and participating faculty will nominate and vote on the next Chair and/or co-Chairs. The Chair and/or co-Chairs will also have support from their home department.

CURRICULUM

The minor consists of 20 credits, as follows:

- MHHS ####: Introduction to Medical and Health Humanities (4 credits)
 This course is required to receive the minor but need not be taken prior to taking other relevant courses. It will be taught on a rotating basis by faculty across the supporting departments. This course will provide a foundation for interdisciplinary study for the students, and will emphasize the connections between medicine and the study of humanities.
- 2. Additional credits (12 credits = 3 courses), will be selected from the qualifying courses. Students must take at least one course from two of the three streams: 1) Science and Medicine, 2) Society, Culture, and Health, and 3) Arts in Wellness.
- 3. MHHS ### Senior Seminar in Medical and Health Humanities (4 credits)
 This is a required, capstone course to receive the minor. It is expected that students would normally take this course in their final year of undergraduate study. This course will be taught on a rotating basis by faculty across the supporting departments. The Senior Seminar in Medical and Health Humanities will provide students with the skills for formulating independent research questions in interdisciplinary studies of health and medicine.

QUALIFYING COURSES

Stream 1 – Science and Medicine

Anthropology

ANTH 175 Public Health, Media, and Risk Management

Examines media and politics in public health and risk management. Focuses on the role that effective communication, public relations, media, and crisis management can play in both informing the public and reducing and preventing serious threats to human health.

ANTH 187 Anthropology of Risk

Examines theoretical and ethnographic works related to the perception of risk. Focuses on a range of arguments that view risk as an objective hazard, a symbolic construction, or as historically, politically, and socially contingent. Topics include law, health, pollution, and migration.

Gender and Sexuality Studies

GSST 183 Feminist Politics of Food

Explores politics of food using gender, race, class, and globalization as analytical lenses. Examines expressions of gender and sexuality in food consumption. Investigates relationships between diet and structural racism and between feminist politics and food movements. Topics include food and advertisement, industrial and sustainable agriculture, food security, health, and bioengineering.

GSST 161 Gender and Science

Focuses on the intersections of Western constructions of gender and scientific knowledge since the sixteenth century. Considers the cultural and political roles of the scientist in terms of gender; the structuring of objectivity and objects of study; the status of scientific knowledges; and the emergence of feminist science studies.

GSST 189 Gender, Technology, and the Body

Investigates how technological interventions in the body reproduce and reshape gender ideologies in contemporary Western culture. Topics include cosmetic, sex-reassignment, and weight loss surgeries; reproductive, contraceptive, and medical technologies; anti-depressants; sex toys; and body piercing.

History

HIST 106 Science in Triumph and Crisis

History of science in the twentieth century with attention to the revolutions in physics and biology, the role of scientists in the world wars, the social responsibility debate, and the rise of the United States as a scientific power.

Stream 2 - Society, Culture, and Health

Art History

AHS 133 The Body in Western Art: Antiquity to Present

Presents further questions and study of the human body and how it was depicted and interpreted in works of art from Roman Antiquity to the present, familiarizing them with a broad range of artworks in their specific historical, cultural, medical, social, religious, political and intellectual contexts.

Anthropology

ANTH 160 Political Economy of Health

Examines critical medical anthropology. Focuses on the linkages between political economy, health, and healthcare systems in modern societies. Considers the effects of poverty, occupation, and environmental transformation in particular social contexts. Looks at four case studies: the political economy of HIV/AIDS, poverty, famine, and nuclear regulation.

ANTH 162 Culture and Medicine

Interrelations of health, disease and culture; cross-cultural comparisons of "health," "disease" and "curing" concepts; effects of cultural behavior on health and illness. Special focus on traditional societies and their belief systems, and on the effects of cultural change (historical and modern) on illness and curing.

English

ENGL 122Q Literature of AIDS: Gay Men Respond to a Crisis (cross listed with LGBS 122Q) Considers the literary response to the AIDS crisis as it emerged in 1980s and 1990s gay American culture. Examines the literary, political, and cultural effects through memoirs, novels, plays, poetry, and essays.

ENGL 141 Literature and Medicine

A critical survey of the study of literature in relation to other areas: creativity, myth, iconography, society, science, medicine, behavior, and translation.

ENGL 193 Senior Seminar on Literature and Disability – Introduces disability studies via the "disability narrative," a genre that will be theorized and critiqued. Includes contemporary disability memoir then examines literary history of disability starting with humanism's inward turn away from divine explanation.

Gender and Sexuality Studies

GSST 185 Gender, Race, and Medicine (cross-listed ANTH 143)

Explores the relationship between Western medicine and women, racial minorities, and non-Western citizens. Investigates how gender ideology, racial inequity, and colonialism shape the medical representation of bodies, sexuality, and pathology. Examines how patients have renegotiated their relationships with medicine through health movements and alternative healing practices.

History

HIST 107 Disease and Society

Covers a world history of disease and how it relates to massive population change, cultural shocks, and globalization. Evaluates the complex and reciprocal relationship between illness and society. Analyzes how cultures, states, and individuals shape the spread of contagious disease, as well as how disease affects societies.

HIST 188 Topics in Chinese History

An in-depth look at important topics in Chinese history. Chinese Food Culture and Medicine.

Philosophy

PHIL 112 Mortal Questions

Focuses on aspects of our distinctively human capacity to lead a meaningful life, especially investigating aspects of the nature of the mind and human freedom. The nature of death and its place in the context of a meaningful life is discussed.

PHIL 167 Biomedical Ethics

A philosophical discussion of newly emerging issues, both ethical and social, in biology and medicine, such as genetic engineering, euthanasia, experimentation with human subjects, abortion, behavior control, and patient's right to know.

PHIL 168 Ethics and Families

Analyzes ethical issues with regard to families of different kinds such as gender relations in traditional marriages; the ethics of same-sex marriage; the morality of abortion, surrogate mothering, and cloning; the justice of school vouchers; the grounds for universal health care; and possible gender inequalities in divorce.

Religious Studies

RLST 110 Yoga: Ancient and Modern

Investigates yoga in its transition from an ancient Indic system of contemplative practice to its modern postural forms. Engages the history of yoga in India and its primary texts and current cultural and religious debates activated through the globalization of modern postural yoga.

RLST ### Medicine and Asian Religions – This course considers the relationship between religious cosmologies, the organization of knowledge, and the practices for managing bodily and natural order that underpin three major medical traditions of Asia: Ayurveda, Traditional Chinese Medicine, and the Four Tantras.

Stream 3 - Arts in Wellness

□ Courses in this section will qualify when they are taught by MHH supporting faculty and include a focus on health, illness, and/or medicine broadly defined.

Creative Writing

CRWT 146 Special Topics: Fiction

Explores specific topics of style and craft in fiction.

CRWT 155 The Graphic Novel

Explores the chronological development of the graphic novel. Focuses on theme, style, and artistic presentation

CRWT 176 Topics in the Craft of Writing

Covers the formal study and practice of the craft of writing, its technical aspects, and development through the contemporary period in the genres of poetry, fiction, and non-fiction.

Dance

DNCE 115 Dance Making

Advanced analysis of dance-making as an art form with emphasis on storytelling, ritual, political activation, site, media and technology, contact, and materials.

DNCE 13X Series of courses that examine the intersections of dance and topics such as politics, geography, time, race, property, collectivity, and change.

DNCE 181 Dance Cultures, Culture in Dance

Focuses on ways dance and other movement practices are intricately woven into culture. Incorporates studio practice time as well as videos, books, field trips, and guest lectures; includes completion and presentation of a paper or project.

Media and Culture Studies

MCS 106 Disability Culture and Media

Examines disability rights politics and activism through cultural production. Explores access to art production, aesthetics and disability, and the role of art in social change. Surveys several genres of art production including dance, theatre, language and visual arts, and film and video.

MCS 135 Intermedia: Art, Media, and Culture

A study of performance, photography, video, film, television, installation, and other related "intermedias." Focuses on artworks within and without the mass media: how they are constructed, documented, analyzed, and viewed in the larger context of culture.

Theatre, Film and Digital Production

TFDP 122 Theatre for Social Change

Examines theatre for social change as created by grassroots theatrical organizations. Focuses on how community-based theatre groups develop works and how theatre in public or private spaces redefines traditional theatre practices.

TFDP 158 Storytelling of Witness: Introduction to Documentary Theatre and Film Introduces vocabulary, themes, genres, and methods of documentary storytelling in theater and film. Explores the evolution of documentary storytelling focusing on signature works by noted playwrights and filmmakers. Addresses craft, voice, and legacy of documentary storytelling from strictly recorded (verite, interview) to creatively devised narratives (post-event recreation, hybrid forms).

Letters of Support

CHASS

Milagros Peña, Dean, College of Humanities, Arts, and Social Sciences

Anthropology, Associate Professor and Chair, Travis Stanton
Art History, Associate Professor and Chair, Jeanette Kohl
Creative Writing, Associate Professor and Chair, Andrew Winer
Dance, Professor and Chair, Anthea Kraut
English, Professor and Chair, George Haggerty
Gender and Sexuality Studies, Associate Professor and Chair, Juliann
Allison History, Professor and Chair, Kiril Tomoff
Media and Culture Studies, Professor and Chair, Erika Suderburg
Philosophy, Professor and Chair, Andrews Reath
Religious Studies, Professor and Chair, Pashaura Singh
Theater, Film, And Digital Production, Professor and Chair, Erith Jaffe-Berg

SOM

Paul Lyons, Senior Associate Dean, Medical Education Deborah Deas, Dean, School of Medicine, CEO Clinical Affairs

External Letters

Brian Dolan, PhD, Professor of Medical Humanities and Social Medicine Department of Anthropology, History, and Social Medicine University of California, San Francisco School of Medicine

Frances Garrett, PhD Associate Professor Department for the Study of Religion University of Toronto

Erin Gentry Lamb, PhD Herbert L. and Pauline Wentz Andrews F

Herbert L. and Pauline Wentz Andrews Professor of Biomedical Humanities Associate Professor and Chair of Biomedical Humanities Director, Center for Literature and Medicine. Hiram College

Mary-Jo DelVecchio Good, PhD Professor of Global Health and Social Medicine Harvard Medical School

Johanna Shapiro, Professor, Department of Family Medicine Director, Program in Medical Humanities & Arts University of California, Irvine





March 26, 2018

To: Chair, Committee on Educational Policy, Academic Senate

Via: Juliet McMullin and Jeanette Kohl, Medical and Health Humanities Co-Chair

From: Milagros Peña, Dean, CHASS

Re: Medical and Health Humanities Minor

900 University Avenue 3413 HMNSS Building Riverside, CA 92521 Tel 951.827.2762 Fax 951.827.4537 www.chass.ucr.edu

Dear Colleagues:

On behalf of the College, I write in support of establishing a minor in Medical and Health Humanities. As you see, in the supporting materials there is tremendous support in the College for the minor. In particular, the Anthropology Department strongly supports the establishment of a minor in Medical and Health Humanities and is happy to provide an administrative home for the minor.

The proposal makes a convincing case for the minor and lays out a clear academic plan for providing UCR students with the skills to perceive, understand, and document diverse human experiences in health and medicine. As noted, the minor will serve as the foundation for students to examine current and historical narratives, discourses, and artistic expressions of health, and emphasizes that health and pathology are not only the domain of medicine and biomedical sciences but also rich topics for interdisciplinary humanities inquiry.

The minor is supported by a long list of faculty prepared to teach and mentor students in a growing and important field of study. I wholeheartedly support the proposal.

Sincerely,

Milagros Peña

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Riverside, California, December 17, 2017

To: Chair, Committee on Educational Policy, Academic Senate

Via: Juliet McMullin and Jeanette Kohl, Medical and Health Humanities Co-Chair

From: Travis Stanton, Chair, Department of Anthropology

Re: Medical and Health Humanities Minor

900 University Avenue Riverside, CA 92521 Fax: 951.827.3330 anthropology.ucr.edu Dear Colleagues,

The Anthropology Department strongly supports the establishment of a minor in Medical and Health Humanities and is happy to provide an administrative home for the minor; the available faculty unanimously voted to house the minor in the Department during the faculty meeting on November 8, 2017. This minor will take advantage of the extraordinary resources UCR now has available for the study of health and medicine. The College of Humanities, Arts, and Social Sciences now has a distinguished cluster of faculty with expertise in this interdisciplinary area. There are also activities across campus that support the minor. These numerous events range from bi-annual conference with medical and health humanities themes, individual departmental events, and efforts sponsored by the Center for Ideas and Society. The minor is particularly appealing to students wishing to enter into the health fields. Educating students in a strong grounding in the arts, humanities, and social sciences has the potential of transforming the delivery of care. Offering this minor at this moment in UCR's history will make this a draw for future students.

We also support cross-listing ANTH 160, 162, 185, and 187 in the minor and will commit to teaching those courses at least once every three years. Professors Jennifer Syvertsen, Worku Nida, and Yolanda Moses are highly supportive of the minor and have agreed to teach the suggested courses.

The Anthropology Department is a good choice for the administrative home of this program. The co-Chair, Juliet McMullin, was a faculty member in Anthropology for over 10 years and is currently a co-operating faculty member. Her primary appointment is in the School of Medicine. Many of the courses and three faculty in addition to Professor McMullin are participating in the minor. The Undergraduate Advisors for SOC/ANTH (Tiffany Carter, Kim Etzweiler, and Sumer Sharif) can provide the staff support needed to check requirements and ensure that students get proper credit for the minor on their transcripts. Since the co-chairs will be

providing a lot of hands-on management especially in the early phase of the program, it makes sense to have staff support available in the Anthropology Department. Our Undergraduate Faculty Advisor, Worku Nida, also supports this proposal and will provide additional assistance as needed.

Sincerely,

.

Travis W. Stanton

Chair, Associate Professor



Department of the History of Art 900 University Avenue

Riverside, CA 92521

Dr. Jeanette Kohl Associate Professor and Chair ikohl@ucr.edu

Letter of support Medical and Health Humanities Minor at UCR

I am writing this letter in enthusiastic support of the initiative to establish a new Medical and Health Humanities minor program and degree at UCR.

As co-chair of the proposed minor, I have been actively engaged in developing this idea and the program for the past two years. Thanks to my co-chair Juliet McMullin's outstanding expertise in the fields of Medical and Health Humanities, we were able to develop a unique and cutting-edge program that will attract a great amount of attention and interest among undergraduate students. As a mother of a pre-med student in her senior year at UC Berkeley, I became aware of the lack of sufficient and intellectually broad preparation for future physicians on the undergraduate level. My daughter's story is shared by many of her friends: while they all know how to fulfill their premed requirements in the sciences, the difficulties start when searching for undergraduate programs that complement their interests in the medical field in ways that make sense in the humanities. This apparent lack of coordinated, coordinated, and intellectually stimulating programs was a major stimulus for me to help develop such a program that would define new standards at UCR.

Medical Humanities and Social Medicine are up-and-coming fields. UCR has three ideal prerequisites for an undergraduate program in Medical and Health Humanities: it has a rather new School of Medicine with visionary and engaged doctors who encourage interdisciplinary thinking and education; it has a substantive and highly qualified group of faculty across the humanities and social sciences with a range of interests in medical related fields that will make the minor a strong and unique program; it has an unusually high percentage of first-generation and ethnically divers undergraduate students – a student population that will particularly benefit from our minor, which will potentially put them at an advantage when applying to medical schools.

In conversations with colleagues from other UCs and the UC Medical Humanities

Consortium, I have learned that there is an intensified interest and support for establishing

undergraduate programs for pre-med and health science students that promote interdisciplinary

thinking and a pre-med education that is set on a broader footing than the sciences alone. The proposed minor in Medical and Health Humanities at UCR will do exactly this.

As Associate Professor and Chair of Art History, I will be actively engaged in teaching in the minor. Art History is not usually a part of the Medical or Health Humanities, yet here it will be – together with Dance, Theatre and Performing Arts, and Creative Writing. The strong presence of the Arts will be unique and distinguishes our program from the average Medical Humanities program. I have developed a new course, AHS 133 "The Body in Western Art: Antiquity to Present," that will be cross-listed with the minor. I plan to offer one the course once every three years and will ensure that a minimum of five students in the minor will be permitted to enroll.

The course goal is twofold: to provide students with new insights in the visual history of medicine and the human body and to train their visual intelligence by sharpening their visual acumen and by learning the 'art of looking.' I have already introduced aspects of my teaching and the role of art history within medical humanities in two LACE lectures for students of the UCR Medical School (2016 and 2017) and received enthusiastic feedback.

My support of the new minor is unreserved. We have a chance to make a real difference here.

Sincerely,

Dr. Jeanette Kohl



December 17, 2018

Re: Medical and Health Humanities Minor

Dear Juliet McMullin and Jeanette Kohl,

The Department of Creative Writing strongly supports the minor in Medical and Health Humanities. We agree to cross-list CRWT 146, CRWT 155, and CRWT 176 for credit in the new minor, courses that the department will continue to offer regularly, and that will be open to MHH minors. These courses provide a background in narrative and empathizing with others, both of which are so critical to understanding the complexities of illness and the practice of medicine as human experience.

The affiliated faculty from our department, Professors Emily Rapp Black, Katie Ford, Goldberry Long, and Allison Hedge-Coke could be released to teach one of the MHH courses, at times.

Given the growing number of diverse and talented faculty whose work engages humanistic concerns around medicine and illness, this proposal is timely. If one of the goals of Medical and Health Humanities is to show how stories about the body and health open out into larger political social issues, our courses can employ fiction, the graphic novel, memoir, the personal essay, philosophy, feminist theory, and critical disability theory to help students unpack ways in which they come to know themselves, and, in turn, how they come to know the other. Our department's faculty have expertise not only in creative writing genres but also in medical narratives, critical disability studies and writing, health activism, euthanasia, medical ethics, the grief cannon, cultural attitudes toward dying and the role of hospice care, and the treatment of and language around disability in mainstream cultural conversations and the academy. We can teach courses that engage students at the narrative level on the construction of the self and the other, and that explore how this dialectic plays out in a particular way in illness, disability, and healing narratives—stories in which the body can be both a source of conflict and empowerment, and that can pose a challenge to deeply-held social and cultural beliefs about ability, anomaly, illness, and medicine.

900 University Avenue

Riverside CA 92521

creativewriting.ucr.edu



All of which aligns naturally with the proposal's goal to "build a foundation for students to examine current and historical narratives, discourses, and artistic expressions of health, and emphasize that health and pathology are not only the domain of medicine and biomedical sciences but also rich topics for interdisciplinary humanities inquiry." We feel that creating this minor enhances the potential for CHASS to become a national leader in the field of Medical and Health Humanities.

Please let me know if there is anything else I can do to help support this program.

Sincerely,

Andrew Winer

Chair and Associate Professor

UNIVERSITY OF CALIFORNIA, RIVERSIDE

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January 2, 2018

Dear Professors McMullin and Kohl:

I am writing in my capacity as Chair of the Department of Dance to express the Department's support for the Medical and Health Humanties Minor. Three of our Assistant Professors are excited to be listed as supporting faculty: María Regina Firmino-Castillo, Luis Lara Malvacias, and Ni'Ja Whitson.

As we have discussed, the following courses will count toward the minor when they are taught by Professors Firmino-Castillo, Lara Malvacias, or Whitson: any courses in the DNCE 115 series, any DNCE 13X courses, and DNCE 181. The Department agrees to schedule the supporting faculty to teach at least one of the above courses at least once every three years, and we agree to allow a minimum of five students who are pursuing the minor in Medical and Health Humanities to enroll when the supporting faculty are teaching the qualifying courses.

Sincerely,

Anthea Kraut Professor and Chair

Murea Kaux

Department of Dance

UC Riverside

Subject: Re: le&er of support for medical and health humani5es minor **Date:** Thursday, February 8, 2018 at 7:24:08 AM Pacific Standard Time

From: George Haggerty

To: Juliet McMullin

Dear Juliet,

I am pleased to write a letter in support of the proposed Minor in Medical Humanities. I can hardly think of a more worthwhile venture on our campus at this time. The faculty organizing the Minor are all distinguished and hard-working, and there is every guarantee that this Minor will be a success. Student interest in this topic is more than certain, and the conception behind the proposal insures that student interest will help to shape future plans. I think this is a win for our students and a win for the campus. We should be thanking those members of the faculty who have the forward-looking vision to bring something like this to our attention.

In addition to supporting Fuson Wang, Susan Zieger, and Sherryl Vint's service as Affiliated English Faculty for the Medical and Health Humanities Minor, our department's contribution to the new program will include offering the following courses at least once every three years:

ENGL 122Q Literature of AIDS: Gay Men Respond to a Crisis (cross listed with LGBS 122Q) ENGL

141 Literature and Medicine

ENGL 189 Capstone Seminar on Literature and Disability

We will also guarantee space in these classes for five students minoring in Medical and Health Humanities.

Yours sincerely, George

Haggerty

George E. Haggerty Distinguished Professor and Chair Department of English University of California, Riverside Riverside, CA 92521-0323

office: 951827-1458 mobile: 310-766-3592



Department of Gender and Sexuality Studies

900 University Avenue Riverside, CA 92521

November 22, 2017

To Whom it may Concern:

I am happy to support the creation of a minor in Medical and Health Humanities. Although the field of Gender and Sexuality Studies (GSST) does not include a specific sub-discipline in this area, there has been extraordinary growth in research and practice on gender and other sources of disparity in the health sciences. Our department currently supports courses on science and technology, women's health, and agriculture and food as part of our Sustainability Studies BS and coursework concentrations in Science and Technology Studies and Social Justice.

In addition to supporting Tamara Ho's and Chikako Takeshita's service as Affiliated GSST Faculty for the Medical and Health Humanities minor, our department's contribution to the new program will include offering the following courses at least once every three years:

- GSST 185 Gender, Race, and Medicine (cross-listed ANTH 143)
 Explores the relationship between Western medicine and women, racial minorities, and non-Western citizens. Investigates how gender ideology, racial inequity, and colonialism shape the medical representation of bodies, sexuality, and pathology. Examines how patients have renegotiated their relationships with medicine through health movements and alternative healing practices.
- GSST 183 Feminist Politics of Food
 Explores politics of food using gender, race, class, and globalization as analytical lenses.
 Examines expressions of gender and sexuality in food consumption. Investigates relationships between diet and structural racism and between feminist politics and food movements. Topics include food and advertisement, industrial and sustainable agriculture, food security, health, and bioengineering.

• GSST 161 Gender and Science

Focuses on the intersections of Western constructions of gender and scientific knowledge since the sixteenth century. Considers the cultural and political roles of the scientist in terms of gender; the structuring of objectivity and objects of study; the status of scientific knowledges; and the emergence of feminist science studies.

GSST 189 Gender, Technology, and the Body Investigates how technological interpretion

Investigates how technological interventions in the body reproduce and reshape gender ideologies in contemporary Western culture. Topics include cosmetic, sex-reassignment, and weight loss surgeries; reproductive, contraceptive, and medical technologies; anti-depressants; sex toys; and body piercing.

We will also guarantee space in these classers for five students minoring in Medical and Health Humanities.

Sincerely,

Juliann Emmons Allison

Associate Professor and Chair, Gender and Sexuality Studies

juliann@ucr.edu/951.236.0519

J EmmodElim

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SANTA BARBARA

SANTA CRUZ

KIRIL TOMOFF, PROFESSOR AND CHAIR DEPARTMENT OF HISTORY RIVERSIDE, CALIFORNIA 92521-0204 EMAIL: kiril.tomoff@ucr.edu OFFICE: (951) 827-1846 FAX: (951) 827-5299

4 February 2018

Professor Juiet McMullin and Professor Jeanette Kohl Co-Directors, Proposed Minor in Medical and Health Humanities University of California, Riverside Riverside, CA 92521

Dear Professors McMullin and Kohl:

I am pleased to write this letter of enthusiastic support for the Minor in Medical and Health Humanities and to commit the History Department to participate in its program. I consider this initiative to be an excellent way to bring existing cross-disciplinary ties among faculty at UCR to undergraduates in an institutionalized way. Furthermore, I agree that the development of this minor is in line with the growing national and international recognition of Medical and Health Humanities in providing students with the skills to perceive, understand, and document diverse human and non-human experiences in health and medicine. I am confident that you will construct a program that will help students build a foundation to examine current and historical narratives, discourses, and artistic expressions of health, and I am encouraged that the program will emphasize that health and pathology are not only the domain of medicine and biomedical sciences but also rich topics for interdisciplinary humanities, social scientific, and artistic inquiry. I also think that the proposed minor will pair well with a major in History at UCR, especially considering that the History of Science, Technology, and the Environment is a current area of faculty strength within the History Department. That faculty strength is reflected in the large number of History faculty who have committed to supporting and/or affiliating with the minor.

That faculty support makes it possible for me to commit that the History Department will offer the courses that fulfill the minor's requirements -- currently identified courses and/or those to be developed by affiliated faculty in the future -- at least once every three years. When they are offered, space for at least five students from the minor will be reserved for their enrollment.

The brevity and relative tardiness of this letter should not be interpreted as a sign of tentative support. I thank you for directing this excellent initiative, and I am thrilled that my colleagues, individually, and the History Department, institutionally, can contribute to it.

Respectfully,

Kiril Tomoff





November 21, 2017

Dear Professors McMullin and Kohl,

This letter is in support of the minor in Medical and Health Humanities. The department of Media and Cultural Studies is very excited to be able to join you in making this program a reality. We have many intersections with your stated goals. We have recently been able to hire Gloria Kim who will be writing specific courses all of which can be cross listed with the minor. In addition Professor Vint will also be writing a complement of new courses pertinent to a Minor in Medical and Health Humanities. We are able to offer qualifying courses at least once every three years taught by affiliated faculty. MCS will also be able make space for at least five students from the minor to enroll in these courses when they are taught. You identified MCS 106 and MCS 135 as courses of interest, which is a good start, but I expect that the recent expansion of MCS will produce a large menu of courses of interest to this collaboration. Media and culture studies are critical to medical and health humanities and vice versa. We are honored to partner with you in this new endeavor and are excited to be able to intersect at this level given our complement of new faculty interests.

Sincerely

Erika Suderburg

University of California, Riverside

Erika Sudaban

Chair, Department of Media and Cultural Studies Director, Gluck Fellows Program for the Arts Cooperating Faculty, Department of

Comparative Literature & Foreign Languages

Office: 951 827-2685

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DEPARTMENT OF PHILOSOPHY

RIVERSIDE, CALIFORNIA 92521-0201

reath@ucr.edu

December 7, 2017

Proposed Minor in Health and Medical Humanities

I am writing in support of the proposed minor in Health and Medical Humanities. This is a timely idea and a good program for our campus to have given our new School of Medicine. The Philosophy Department supports the minor and we are happy to have our courses, Philosophy 112, 167 and 168, be part of the program and to work with the program to reserve some seats for students in the minor.

Philosophy 167: Biomedical Ethics is an obvious fit for the minor. Philosophy 168 takes up issues about the nature of the family, surrogate mothering and cloning, universal healthcare, and so on, that make it a natural fit. Philosophy 112 is designed to cover general questions about the human condition and the nature of persons, such as free will and responsibility, moral luck, meaning in life, and the significance of death. These questions may have a less direct connection to the aims of the minor, but we think that students in this minor would also benefit from begin exposed to these philosophical issues, and we support including it as one of the courses.

Andrews Reath

Professor and Department Chair

am Noz



Pashaura Singh
Chair
Professor and Saini Chair in Sikh Studies
Department of Religious Studies
2026 CHASS INTN Building
900 University Avenue
Riverside, CA 92521

From: Pashaura Singh, Chair, Department of Religious Studies

To: Juliet McMullin and Jeanette Kohl

Re: Medical and Health Humanities Minor

Date: 12/18/2017

The Department of Religious Studies enthusiastically supports the minor in Medical and Health Humanities. We agree to cross-listing Yoga, Ancient and Modern (RLST 110) and Medicine and Asian Religions (RLST ###) for credit in the new minor and that the department will continue to offer these courses regularly. These courses will provide a background in diverse religious traditions which are so critical to understanding the complexities of illness and the practice of medicine as human experience.

The affiliated faculty from the Department, Professor Matthew King will be scheduled to teach one of the MHH courses at least once every three years. We are hoping the new hire in Jain studies will start teaching in the Winter 2019, who will also be able to teach relevant courses in Medical and Health Humanities.

Given the growing number of faculty whose work engages humanistic concerns around medicine and illness this proposal is timely. Our department's expertise in this area, **particularly new position of Jain Studies Chair (being recruited in the current academic year) in Jain bioethics, medicine and environmental justice issues in the local community**, is in line with the proposal's goal to "build a foundation for students to examine current and historical narratives, discourses, religious, and artistic expressions of health, and emphasize that health and pathology are not only the domain of medicine and biomedical sciences but also rich topics for interdisciplinary humanities inquiry." As an interdisciplinary field, our students will be exposed to a range of

talented UCR professors. Creating this minor enhances the potential for CHASS to become a national leader in the field of Medical and Health Humanities.

Please let me know if there is anything else I can do to help support this program.

Sincerely,

Pashaura Singh

Jashaura Lingh

Professor and Chair of the Department of Religious Studies

From: Erith Jaffe-Berg

Chair, Department of Theatre, Film and Digital Production (TFDP)

To: Juliet McMullin and Jeanette Kohl

Re: Medical and Health Humanities Minor

Date: 21 November, 2017

The Theatre, Film and Digital Production Department strongly supports the minor in Medical and Health Humanities. We agree to listing TFDP 122 and TFDP 158 for credit in the new minor and that the department will continue to offer these courses regularly. These courses provide a background in personal narrative, documentary theatre and theatre for social change, which are so critical to understanding the complexities of illness and the practice of medicine as human experience.

Given the growing number of faculty whose work engages humanistic concerns around medicine and illness this proposal is timely. Our department's expertise in this area performance, health and well-being as well as social and public engagement is in line with the proposal's goal to "build a foundation for students to examine current and historical narratives, discourses, and artistic expressions of health, and emphasize that health and pathology are not only the domain of medicine and biomedical sciences but also rich topics for interdisciplinary humanities inquiry." As an interdisciplinary field, our students will be exposed to a range of talented UCR professors. Creating this minor enhances the potential for CHASS to become a national leader in the field of Medical and Health Humanities.

Please let me know if there is anything else I can do to help support this program.

Sincerely,

Erith Jaffe-Berg Professor & Chair Department of Theatre, Film and Digital Production University of California, Riverside





March 2, 2018

To: Chair, Committee on Educational Policy, Academic Senate

Via: Juliet McMullin and Jeanette Kohl, Medical and Health Humanities Co-Chair

Re: Minor in Medical and Health Humanities

I am pleased to offer my support for the proposal to establish a minor in Medical and Health Humanities. This proposal is well designed, well-timed and represents the next logical step in a progression of educational offerings within UCR focused on the intersection of health and humanities.

With the establishment of the School of Medicine on campus, UCR is in a unique position to develop scholarship focused on this important intersection. With a critical mass of existing scholars, a strong demonstrated interested on the part of learners at several levels and with a track record of successful related initiatives (NEH funded faculty development, graduate level Designated Emphasis, integrated medical humanities curriculum within the School of Medicine with an option for a Designated Emphasis) UCR is prepared in my assessment to expand into the undergraduate educational arena.

I believe that there exists a broad potential interest in this area among undergraduate students and that this interest is likely to increase with the growth of the medical school. Medical Humanities is also emerging nationally as an important discipline within the practice and educational domains of medicine. With the addition of a minor, UCR will have a comprehensive educational pipeline, an expanding pedagogical base of experience and offerings and an increasingly attractive research/scholarly community that will contribute to new knowledge and serve as an attractive environment for scholars seeking new opportunities professionally.

As the Senior Associate Dean for Education within the School of Medicine I can offer the full collaboration of the school of medicine in whatever manner might prove helpful for this program. I am pleased to support the initiative and would be happy to continue the conversation if additional information or questions arise.

Paul Lyons, MD

Distinguished Teaching Professor and Chair

Department of Family Medicine

Senior Associate Dean for Education

School of Medicine

School of Medicine 900 University Avenue Riverside, CA. 92521



March 2, 2018

TO: Chair, Committee on Educational Policy

Academic Senate

VIA: Juliet McMullin and Jeanette Kohl

Medical and Health Humanities Co-Chairs

Dear Committee Members:

On behalf of the UCR School of Medicine, I write to express my wholehearted support for the proposed minor in Medical and Health Humanities in the College of Humanities, Arts, and Social Sciences (CHASS). If approved, this proposed minor would build upon and extend the impact of the current Designated Emphasis in Medical and Health Humanities that is available to medical students.

I also anticipate this will be of great interest to CHASS undergraduates, especially those who are planning to apply to the Thomas Haider Program of the UCR School of Medicine, which provides a unique pathway into medical school for up to 24 UCR degree holders. The UCR School of Medicine accepts applications from any undergraduate major, recognizing that students with diverse academic backgrounds enrich the intellectual and medical education environment. A minor in Medical and Health Humanities will certainly support this goal.

Furthermore, the School of Medicine would be an enthusiastic partner in this proposed minor, collaborating with faculty and undergraduates in research that examines the diverse human experiences in medicine and health. This supports the campuswide goal to stimulate greater collaboration between academic disciplines.

I applaud the commitment of Profs. McMullin, Kohl, and their committee in creation of this innovative academic minor.

Sincerely,

Deborah Deas, M.D., MPH

The Mark and Pam Rubin Dean

CEO, Clinical Affairs

External Letters of Support

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September 18, 2017

Dr. Juliet McMullin School of Medicine, Education Building University of California, Riverside 900 University Ave. Riverside, CA 92521

Dear Professors McMullin and Kohl

This letter is offered in support of your initiative to establish a minor degree program at UC Riverside in Medical and Health Humanities. As professor of medical humanities and social medicine at UCSF School of Medicine (Department of Anthropology, History & Social Medicine), I have been involved for the past 15 years in a number of medical education programs where interdisciplinary faculty have mentored and taught students in this area. Furthermore, through the support of UC's Office of the President, I have been the director of the UC Medical Humanities Consortium for the past 8 years, connecting teaching and research activities at UC Berkeley, UC Davis, and UC Irvine. I can say with intimate knowledge that there is broad UC interest and support for Medical and Health Humanities throughout UC's professional programs at health science campuses. We have also been strong advocates for establishing undergraduate programs for pre-med and health science students that promote and focus on medical and health humanities.

The rationale you provide in your proposal underscores the intellectual and organizational resources at UC Riverside that will allow you to establish this degree program. From my perspective, I would like to draw attention to the broader impact your program can have on the future training of students who take advantage of your program. For years at UCSF School of Medicine, we have faced numerous curricular changes that aim to increase opportunities for students to do original research and increase their time in clinical settings. This puts additional pressure on classroom or other instructional time, and it is therefore desirable to have students trained in fundamentals of social and cultural dimensions of healthcare before professional or graduate school. Your program could introduce students to a broad range of concepts and disciplinary approaches to understanding healthcare and patients' experiences with illness that will better prepare them to launch into hands-on training or original research in their next levels of exploration. It would be terrific if UC Riverside could set the example for other campuses with undergraduate students to establish programs like this which help to shape the mentality that medical or scientific training involves more than laboratory work and mathematics.

As you are aware, I edited a volume of historical essays called *Humanitas: Readings in the Development of the Medical Humanities* which demonstrates how "the humanities' have been integrated into medical education for over 100 years. It is interesting that these innovations have happened within medical schools more often than have happened in undergraduate degree programs, but this might be explained by the somewhat rigid disciplinary structure of academic departments and degree programs that defined institutions in the twentieth century. But the twenty-first century is increasingly about interdisciplinary collaboration, team work, and multi-faceted perspectives on complex social problems. Now is the time for undergraduate programs to offer innovative and cross-disciplinary approaches to teaching about the human experience of health and disease, and the ways we use creativity to help advance healthcare worldwide.

I sincerely hope you are successful in your endeavor. Please do not hesitate to contact me if I can be of further assistance.

Sincerely,

Dr. Brian Dolan

Professor of Medical Humanities and Social Medicine Department of Anthropology, History and Social Medicine

UC San Francisco School of Medicine



Sunday, November 26, 2017

Juliet McMullin, Ph.D.
School of Medicine, Education Building
University of California, Riverside
900 University Ave.
Riverside, CA 92521

Jeanette Kohl, Ph.D.

Department of Art History
University of California, Riverside

Dear Drs. McMullin and Kohl,

I am writing to offer my enthusiastic support for your proposal for a Medical and Health Humanities minor at the University of California, Riverside. This minor takes advantage of national trends and will likely be valuable for recruitment; it will serve a very broad range of your students in diverse ways. Additionally, the minor as proposed is particularly well-conceived and innovative.

I base my assessment of your proposal on my diverse professional experiences in the field of health humanities. I am the Herbert L. and Pauline Wentz Andrews Professor of Biomedical Humanities and Director of the Center for Literature and Medicine at Hiram College. Hiram's Biomedical Humanities major, which I chair, was the first baccalaureate-level major in health humanities offered in the United States. Much of my recent research has focused on the growth of health humanities at the baccalaureate level, including co-authoring the 2017 report *Health Humanities Baccalaureate Programs in the United States*, and co-editing the December 2017 special issue of the *Journal of Medical Humanities* on "Pre-Health Humanities." Currently, I am co-editing a textbook on *Research Methods in the Health Humanities*. I additionally advocate for the health humanities through national organizations, including the Health Humanities Consortium and the Modern Language Association.

From reading the proposal, this minor is an ideal fit for your institution. It builds on recent hires and an impressive collection of faculty expertise and already-existing coursework. It most particularly builds on the recently-developed Designated Emphasis in Medical and Health Humanities in both the graduate school and medical school. The possibilities for mutually-beneficial, reciprocal exchange between undergraduate, graduate, and medical students—in terms of research, teaching, shadowing, mentorship, etc. —are very promising. This minor will take advantage of your rich curricular resources without impacting existing programs.

The proposed curriculum for the minor is well-conceived and at the forefront of undergraduate health humanities programs. The required introductory and capstone courses will provide assessable moments

of contact with all minors and ensure exposure to key concepts and methods, while the flexibility of selecting electives from the three streams will allow students to tailor their coursework to fit their needs and interests. Of these three streams, the Arts in Wellness stream sets Riverside's program apart from others. Most programs include the humanities and social sciences, but few foreground the arts, even though the arts form the basis for most practical interventions that health humanists conduct with patients, students, and practitioners. Riverside's minor will thus be particularly valuable to those students looking to pursue further health humanities study, or to pursue graduate work in a discipline where health might be their chosen focus.

The proposed minor is part of a rapidly growing area of baccalaureate health humanities programming, but also stands to put UC Riverside ahead of the curve. Just since 2000, the number of health humanities majors, minors, and certificate programs within the United States has more than quadrupled, showing particularly strong growth in the last five years. However, to my knowledge, only two programs currently exist in California schools: a certificate in Ethics and Medical Humanities at Stanford University that was initiated in 2008 and a minor in Medical Humanities at the University of California, Irvine started in 2016. At least one more minor is in development at California State University, Long Beach. The timely initiation of this minor may thus be a curricular selling point for Riverside, as other schools (such as The University of Texas at San Antonio and Case Western Reserve University) have noted explosive growth in student interest and enrollment in their recently-created programs.

Baccalaureate-level health humanities coursework is popular partially because it serves students so broadly—certainly premedical students, but also students interested in other health professions (pre-PA, pre-PT, pre-OT, nursing, etc.), as well as students who have no interest in working in health care. Studies examining students who have matriculated to medical school have shown that, in comparison with their peers who focused on the sciences, students who studied premedical humanities perform at equal or superior levels in clinical interactions and clinical research and demonstrate a greater understanding of structural inequality and its relationship to health disparities. These students are also more likely to demonstrate empathy and skillful communication, to be patient-centered, and to choose specialties that tend toward whole-person care and are among those most in need, such as primary care and psychiatry. These skills noted in medical students are relevant for all would-be health professionals. For those students with no intention of working in health care, the minor's courses are still highly relevant. All students are guaranteed to interact with the health care system and to experience whether in their own lives or those of their loved ones—the realities of aging, disability, illness, caregiving, and death. Recent studies have suggested that baccalaureate health humanities education prepares students for critical and creative thinking, identification of internal biases, and ethical reasoning in decision-making processes—all skills that are critical for participating in our complex health care system on individual, professional, and collective levels. The courses in the proposed Medical and Health Humanities minor will thus serve all of your students, helping them to understand the structural inequality that shapes individuals' health and health care experiences, and preparing them for the inevitabilities of bodily change, suffering, grief, illness, and end-of-life.

A final note on terminology: I think naming the minor Medical and Health Humanities is judicious. I have been using the terms 'Medical Humanities' and 'Health Humanities' interchangeably. There are fervent advocates for both of these terms within baccalaureate-level programs, with some emphasizing the preprofessional value of the course of study and others pushing for broader inclusivity. The inclusion of both terms speaks to the minor's capacity to serve a broad range of students.

In summary, I offer my whole-hearted support for the Minor in Medical and Health Humanities. It is, to my mind, "a no-brainer." If I can provide any further support on behalf of this proposal, please do not hesitate to contact me at the information below.

Yours sincerely,

Erin Gentry Lamb

Herbert L. and Pauline Wentz Andrews Professor of Biomedical Humanities

Associate Professor and Chair of Biomedical Humanities

Director, Center for Literature and Medicine

Eni Gentry Fand

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Mahan House

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Department for the Study of Religion

UNIVERSITY OF TORONTO

November 29, 2017

Dear Professors McMullin and Kohl,

I am writing in support of UCR's proposed Minor program in Medical and Health Humanities. I have reviewed the September 8, 2017 Proposal for the Minor program. This program rightly recognizes the value of using approaches in the humanities, social sciences, and arts to understand health and medicine. A growing number of medical humanities programs across North America (and around the world) are testament to the importance of using interdisciplinary methodologies to explore illness, health, and medicine. As the proposal points out, such programs are of great value, and of interest, to students of medicine as well as to students in the humanities or social sciences, and such programs are supported by substantial and well established bodies of scholarship in related but diverse fields, such as medical anthropology, medical history, and so forth. As someone who has long worked in the intersection between religious studies and medical history, I am impressed and excited by the scope and vision of the proposed UCR program.

UCR's proposal for a Minor program articulates a wealth of resources locally upon which to build this program. There is a critical mass of faculty across campus whose work intersects with the program field and who have expressed commitment to building and supporting the program. Administrative support from relevant departments has been offered, and student interest appears to be high, judging from the already successful Designated Emphasis in Medical and Health Humanities at the graduate level. I would anticipate a substantial interest from undergraduates with the creation of this exciting new minor program. The program proposal is solidly articulated, with a cohesive core course requirement and a long list of eligible courses organized clearly into three streams.

This is a well developed and strongly supported program proposal that offers a compelling rationale and more than adequate resources for an undergraduate minor. I fully support the development of this minor program at UCR and believe that it will provide an important and influential contribution to undergraduate education at your institution. Please do not hesitate to contact me if you require further information.

Sincerely,

Canas

Frances Garrett

Associate Professor, Department for the Study of Religion

Director, Robert H.N. Ho Family Foundation Centre for Buddhist Studies

University of Toronto

Email: frances.garrett@utoronto.ca

Mary-Jo DelVecchio Good, Ph.D. Professor of Global Health and Social Medicine Harvard Medical School Maryjo_Good@hms.harvard.edu 641 Huntington Avenue Boston, MA 02115 Tel.: (617) 432-1707 Fax: (617) 432-2565

September 29, 2017

Professor Juliet McMullin Associate Professor Jeanette Kohl Co-Chairs of the Committee in Charge, Medical and Health Humanities Minor University of California, Riverside College of Humanities, Arts, and Social Sciences

Dear Professors McMullin and Kohl,

It is a pleasure to provide a highly positive evaluation of the proposal for a minor in Medical and Health Humanities at UC Riverside. As a comparative sociologist and medical anthropologist, my work has broadly focused on culture and political economy of biomedicine, biotechnology and bioethics, including clinical realities and moral dilemmas encountered by physicians in the United States and globally (Indonesia, East Africa). Over the past few years I have been invited to UCR twice to present my work on mental health services in post-tsunami and post-conflict Aceh (Indonesia). I have shared my experiences in program development at Harvard, and provided advice on building a medical and health humanities at UCR as part of Juliet McMullin's NEH award. It gives me great pleasure to review the product of my conversations with your faculty.

This fine interdisciplinary minor has a deep and diverse cooperating faculty and a rich set of relevant courses. I find the structure of the minor, with a required introductory course and a capstone seminar, plus courses selected from arts, humanities, and social sciences, to be exceedingly well thought out and academically sound. The core courses will foster cohesion among the students. The breadth of selective courses combined with the core courses provide an excellent minor in a generative mode linking medicine, culture, art, and science. Typically, medical humanities programs often focus only on the practice and documentation of human health and illness in biomedicine and its institutions. However, this minor will also integrate a

broader multicultural and historically situated focus creating a robust foundation upon which to further study landscapes of gender, ethnic differences, media, and creative writing. All courses in the minor will emphasize analytical and expressive skills.

I am also delighted to see that the products of the proposed curriculum will include both scholarly papers and artistic works. These could be extended to include applied humanities, visual works, performance pieces, and critical research on power relationships in medicine and within global enactments of social suffering. This could encourage students to work outside their comfort zones and collaborate with others with different academic profiles. Additionally, the range of scholarly and artistic work will provide students who are applying to medical school a strong grounding and evidence of training in what it means to work with and to understand the meaning of the diversity of human experience. The array of courses imaginative and appealing and would be ones that I would recommend to my own students. We see a robust rising interest in the medical humanities in the US and globally, and this minor offers a critically sound foundation for students – including many premedical students – who wish to pursue in their undergraduate studies imaginative ways to understand medicine, culture, and illness.

In sum, I strongly support the proposal for a minor in Medical and Health Humanities at UCR. You have developed a rich program that builds on the curricular formats of similar programs nationwide. Professor McMullin and her colleagues are exceptional outstanding leaders in bringing imaginative and creative perspectives and projects into the medical humanities and to studies of culture, medicine, and illness.

Sincerely,

Mary-Jo DelVecchio Good, Ph. D.

Professor of Global Health and Social Medicine

Department of Global Health and Social Medicine, HMS

Department of Sociology, Affiliated Faculty, FAS,

Associate Faculty, Weatherhead Center for International Affairs,

Harvard University



College of Medicine Department of Family Medicine UCI Medical Center Bldg. 200. Rt. 81 101 The City Drive South Orange, CA 92868-3298

September 23, 2017

Dear Dr. McMullin and Dr. Kohl,

Thank you for the opportunity to write in support of the proposed Medical and Health Humanities minor in the College for Humanities, Arts, and Social Sciences at UC Riverside. Having been part of a working group that established a minor in Medical Humanities at UC Irvine last year, I well understand the need for such a program, as well as some of the challenges it faces in its implementation. In reviewing your proposal, I'm impressed by the clarity of your vision, the extent of your preparation to minimize potential difficulties, and your anticipation of opportunities that the existence of the minor will address.

The first strength I noted is the deep interdisciplinary roots of your proposed minor. Medical/Health Humanities (MHH) definitionally cannot be encompassed by a single discipline, and you have successfully woven together Humanities, Social Sciences, and the Arts. We adopted a similar approach here at UC Irvine and believe it reflects the wide-ranging, synergistic nature of the field. The issues Medical/Health Humanities grapples with, such as social injustice in healthcare or end of life, cannot effectively be understood through one particular academic lens. Rather, by providing students with the opportunity to wrestle with concepts of health and pathology through the use of multiple frameworks, the proposed UC Riverside minor will significantly enrich student understanding of the complexity and nuances implicated in wellness/illness. The breadth and depth of the program, incorporating narrative medicine, graphic medicine, history of medicine, art and the body, bioethics and other components, are well-conceptualized and well-resourced.

Since its inception, I have been struck by how UC Riverside and the UCR School of Medicine have critically embraced Medical/Health Humanities and developed impressive initiatives in this area. The Graduate Emphasis and GE for medical students you've established have provided both a model and an inspiration for our own efforts. Similarly, your NEH award to build programming and faculty development in narrative medicine created a rigorous foundation on which to build even more extensive and needed coursework and programming.

Notably, not only have you laid the theoretical and organizational groundwork for a fruitful minor, but you have successfully applied for cluster hire support to fund additional scholars with expertise in Medical Humanities. Further, you have assembled a diverse, interdisciplinary organizing committee, plus many supporting faculty from highly relevant disciplines (history, English, creative writing, religious studies, art history, anthropology, gender and sexuality studies, technology and medicine). As well, you have designed content unique to the minor, specifically a core introductory course

(Introduction to MHH) and capstone MHH Seminar; and created different streams of scholarship (science and medicine; society, culture, and health; arts in wellness) to accommodate the potential variety of student interests. This latter feature is especially appealing because it shows the flexibility and depth of resources that you are able to bring to the minor.

Being based in a School of Medicine, I can attest to the value of an MHH minor for the campus' premedical students. We currently have about 50 students enrolled in the UCI minor, and many of them are aiming for careers not in the humanities but in the health sciences, including medicine. Medical school admissions committees look favorably on diverse academic experiences, and the MHH minor offers evidence of students who have been trained to think critically and deeply about various aspects of healing and suffering. Thus, I would expect this minor to be utilized not only in the Schools of Humanities and Social Sciences, but also by premedical and pre-health professional students.

UCR has already developed a well-deserved reputation for commitment to underrepresented minority students; and in its medical school, for an emphasis on preparing physicians to care for underserved and underresourced populations. The proposed minor builds on this commitment to diversity and social equity, and will help students grasp how the social determinants of disease and the complex web of culture, class, race, and gender in which illness occurs can be more significant in influencing ultimate patient outcomes than the biological mechanisms of disease.

MHH minors exist in growing numbers at universities across the country, because increasingly academic institutions recognize that the research and scholarship required to advance knowledge in the area of health and illness must have an interdisciplinary perspective and organization. The existence of such minors trains future scholars and researchers while at the same time providing those aiming toward the health professions with new and creative ways for thinking about the nature of their work.

I congratulate you on the meticulous care you've taken to create this MHH minor by attending to all necessary aspects – theoretical and conceptual, organizational and pragmatic. I am convinced it will be highly successful and contribute in many meaningful ways both to the discovery of new knowledge and the preparation of future scholars and physicians.

Thank you for the opportunity to speak in support of this initiative.

Shipno Pf. E

Sincerely,

Johanna Shapiro, Ph.D.

Professor, Department of Family Medicine Director, Program in Medical Humanities & Arts University of California Irvine, School of Medicine

New Courses

MHHS #### Introduction to Medical and Health Humanities

MHHS #### Seminar in Medical and Health Humanities

RLST #### Medicine and Asian Religions

WORKSHEET — Request for a New Course Version 1.3

** Place your pointer on the underlined fields and start typing to fill in text, ** or use an X or a number to fill in "check-box" or numbered fields.

Provide information requested below that is not contained in the syllabus. Please

note	e the guidelines in the boxes	S.
Number (if known): Professional	xx UndergraduateG	raduate
Title/subtitle: _Introduction to M	ledical and Health Humanities	
Effective: _Fall 2019 (Quarter	and Year)	
Offered: <u>xx</u> FallWinte Other	rSpringSummer_	Once Only
Instructor(s): _Juliet McMullin	_	
Hours per week per unit of cred	lit may not be less than but ma	y exceed those listed below.
• One unit for each hour per week (1 workshop	:1) of colloquium, consultation, disc	ussion, lecture, seminar, or
 One unit for each three hours per w internship, laboratory, practicum, re written work, and similar assigned 	esearch (scheduled and outside), scre	
• One unit for each two to three hour	s per week (1:2-3) of studio	
Units: <u>4</u>		
Activities and hours per wee spend in the activities listed (leave black)		urs per week that students will
Activity	Internship	Seminar
Clinic	Laboratory	Studio
Colloquium	3 Lecture	Term Paper

Activity	memsiip	Sellillai
Clinic	Laboratory	Studio
Colloquium	_3_ Lecture	Term Paper
Consultation	Practicum	Thesis
Discussion	Research (outside)	Tutorial
1 Extra Reading	Research (scheduled)	Workshop
Field	Screening (outside)	Written Work
Individual Study	Screening (scheduled)	Other:

Prerequisite(s): _none

Read the guidelines in this box before writing the Catalog description.

Write the description in the present tense and limit it to 50 words (do not count grading information, repeatability information, or a list of E-Z subtitles). If possible, do not use complete sentences. However, use sentences that contain more than a list of items or topics.

Examp	les:
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Instead of "This course will introduce students to the history of \dots ," use one of the following formats:

Introduces the history of . . . An introduction to the history of . . . Introduction to the history of . . .

Course is repeatable as topics change to a maximum of _ units.

Instead of "Functions, equations, and graphs," use a format similar to one of the following examples:

Explores functions, equations, and graphs . . . Topics include functions, equations, and graphs . . . A study of functions, equations, and graphs . . .

Catalog description: Introduces medical and health humanities. An interdisciplinary exploration of humanities and arts importance to medical science and practice, diverse understandings of health and illness, and complex social and economic forces that inform how and who cares for others during times of illness.

Grading:	XX Letter Grade or petition for Satisfactory/No Credit (S/NC)	Letter Grade only	In Progress (IP)
	Letter Grade or S/NC; no petition required	S/NC only	

The statements selected below will be added to the Catalog description by the Catalog office:

Grading statement (if required):
Satisfactory (S) or No Credit (NC) grading is not available.
Graded Satisfactory (S) or No Credit (NC).
Normally graded Satisfactory (S) or No Credit (NC), but students may petition the instructor for a
letter grade on the basis of assigned extra work or examination.
May be taken Satisfactory (S) or No Credit (NC) with consent of instructor and graduate advisor.
May be taken Satisfactory (S) or No Credit (NC) by students advanced to candidacy for the Ph.D.
Students who submit a term paper receive a letter grade; other students receive a Satisfactory (S) or No Credit (NC)
grade.
Students who present a seminar receive a letter grade; other students receive a Satisfactory (S) or No
Credit (NC) grade.
Students who present a seminar or submit a term paper receive a letter grade; other students receive a Satisfactory (S) or No Credit (NC) grade.
Other:
Repeatability statement (if required):
Course is repeatable.
Course is repeatable to a maximum of units.
Course is repeatable as content changes.
Course is repeatable as content changes to a maximum of units.
Course is repeatable as topics change.

Credit statement (to limit credit when course content overlaps):
Credit is awarded for only one of
Other
Breadth statement (for CPAC, ETST, FVC, HASS, or WMST courses only): Fulfills the Humanities requirement for the College of Humanities, Arts, and Social Sciences. Fulfills the Social Sciences requirement for the College of Humanities, Arts, and Social Sciences. Fulfills either the Humanities or Social Sciences requirement for the College of Humanities, Arts, and Social Sciences. See the Student Affairs Office in the College of Humanities, Arts, and Social Sciences. Does not fulfill the Humanities or Social Sciences requirement for the College of Humanities, Arts, and Social Sciences. Other:
If the course content overlaps or duplicates the content of another course , describe the overlap or duplication:
If the course affects degrees, minors, and/or programs , list the affected degrees, etc. and explain how they are affected: Will be a mandatory course in the Medical and Health Humanities minor
If the course affects the prerequisites and/or descriptions of other courses , list the affected courses and explain how they are affected:
Justification for establishing the course (insert or attach):
The course will be the foundational course for a new interdisciplinary minor in Medical and Health Humanities. The purpose of the minor is to examine the intersections and exchanges between health, medicine, and the humanities and arts as discursive and material forces that shape human experience of bodily, mental, and social suffering.
Syllabus (insert or attach and include the information below):
Course requirements (e.g., term papers and examinations)
If an activity selected above under "Activities and Hours" does not involve faculty contact (e.g., extra reading, individual study, and outside research), describe the activity and explain how it will be evaluated.
If one of the activities selected above is consultation hours , explain how these hours will be implemented and monitored.
For further information about course guidelines, see the <i>General Rules and Policies Governing Courses of</i>

If the course is repeatable, may a student take more than one section of the course in a single

Syllabus:

__ Other: ___

Cross-listing statement: Cross-listed with ____

quarter? Yes No

Students will be required to attend regularly and participate in discussion. The writing assignments will consist of weekly summaries, an in-class midterm exam (including short-answer and essay sections), and a final 7-8 page paper, in lieu of a final exam.

Instruction at senate.ucr.edu/Committees/courses/guidelines.pdf

Evaluation:

Attendance and Participation: 15%

Weekly summaries: 25% Midterm Examination: 30%

Final Paper: 30%

Reading List:

Czerwiec, MK. (2017) Taking Turns: Stories from HIV/AIDS Care Unit 371.

Pennsylvania: Penn State University Press.

Jones, Therese, Delese Wear, and Lester D. Friedman (eds) (2014) The Health

Humanities Reader. New Brunswick: Rutgers University Press.

Livingston, Julie. (2012) Improvising Medicine: An African Oncology Ward in an Emerging Cancer Epidemic. Durham: Duke University Press

Schedule of Reading and Discussion

Week One: What's the difference between Medical and Health Humanities?

Dolan, Brian (2015) "One Hundred Years of Medical Humanities: An Overview" in *Humanitas: Readings in the Development of Medical Humanities.* San Francisco: University of California, Medical Humanities Consortium. Pp. 1-30. (PDF on ilearn)

Crawford, Paul (2015) "Health Humanities" in Health Humanities. Paul Crawford, Brian Brown, Charley Baker, Victoria Tischler and Brian Abrams. New York: Palgrave Macmillan. Pp 1-19 (PDF on ilearn)

Week Two: Medicine in Context

Julie Livingston, (2012) Improvising Medicine An African oncology ward in an emerging cancer epidemic. Chapters 1-3

Week Three: Death and Dying

Julie Livingston, (2012) *Improvising Medicine An African oncology ward in an emerging cancer epidemic.* Chapters 4-6

Montello, Martha and John Lantos. (2014) Postmodern Death and Dying: A Literary Analysis. In *Health Humanities Reader*. Pp113-120.

Film - Wit Mike Nichols, director (2001)

Week Four: Writing and the Literary Imagination

Frank, Arthur (2014) Being a Good Story: The Humanities as Therapeutic Practice. In *The Health Humanities Reader*. Pp.13-25

Chekhov, Anton (1892) "Ward Number Six" (PDF on ilearn)

William Carlos Williams (1984) The Doctor Stories. "The Paid Nurse," "The Poor," "Verbal Transcription 6 a.m." (PDF on ilearn)

In class Mid-term

Week Five: Medicine, Race, and Class

- Washington, Harriet (2006) Medical Apartheid: The Dark History of Medical Experimentation on Black Americans from Colonial Times to the Present. New York: Harlem Moon. Pp. 52-72. (PDF on ilearn)
- Dasgupta, Sayantani (2014) Listening as Freedom: Narrative, Health, and Social Justice. In *The Health Humanities Reader*. Pp251-260.
- Metzl, Jonathan M. (2014) Race and Mental Health. In The Health Humanities Reader. Pp. 261-268.
- Grainger-Monsen, Maren (2014) The Rooms of Our Souls. In *The Health Humanities Reader*. Pp. 277-282

Week Six: Gender and Sexuality

- Peterkin, Allan (2014) Adult Intake Form. In *Health Humanities Reader*. Pp.203 206
- Levine-Clark, Marjorie (2014) "I Always Prefer the Scissors": Issac Baker Brown and Feminist Histories of Medicine. *The Health Humanities Reader*. Pp215-225
- Squier, Susan (2014) Comics in the Health Humanities: A New Approach to Sex and Gender Education. *The Health Humanities Reader*. Pp226-241
- Campo, Rafael (2014) I Am Gula, Hear Me Roar: On Gender and Medicine. *The Health Humanities Reader*. Pp.242-250.
- Deidrich, Lisa (2017). *Indirect Action: Schizophrenia, Epilepsy, AIDS and the Course of Health Activism*. Minneapolis: University of Minnesota Press. Pp17-44. (PDF on ilearn)

Week Seven: Visualizing Disease: Graphic Medical Narratives

Czerwiec, MK. (2017) *Taking Turns: Stories from HIV/AIDS Care Unit 371*. Pennsylvania: Penn State University Press.

Week Eight: Disability

- Rapp Black, Emily (2016) Beautiful Monsters: Living with a Prosthetic Limb. *Utne Reader*. https://www.utne.com/mind-and-body/beautiful-monsters-living-with-prosthetic-limb-zm0z16uzsel. (online resource)
- Rapp Black, Emily (2014) Casa Azul Cripple. The Rumpus. http://therumpus.net/2014/09/the-sunday-rumpus-essay-casa-azul-cripple/ (online resource)
- Straus, Joseph (2014) Music and Disability. In *The Health Humanities Reader*. Pp77-86.
- Norden, Martin F. (2014) American Narrative Films and disability: An Uneasy History. In *The Health Humanities Reader*. Pp 87-96.

Week Nine: Science and Technology Studies

- Squier, Susan (2017) *Epigenetic Landscapes: Drawings as Metaphor.* Durham: Duke University Press. Pp21-49. (PDF on ilearn)
- Belling, Catherine (2014) Andromeda's Futures: A story of Humanities, Technology, Science, and Art. In *The Health Humanities Reader*. Pp409-418.
- Root Wolpe, Paul (2014) Knowing and Seeing: Reconstructing Frankenstein. In *The Health Humanities Reader*. Pp.419-429.

Kavey, Allison (2014) A Brief History of Love: A Rationale for the History of Epidemics. In *The Health Humanities Reader*. Pp430-441.

Week Ten: Humanities in Practice

- Bleakley, Alan. "The Medical Humanities in Medical Education: Toward a Medical Aesthetics of Resistance." In *The Health Humanities Reader*. Pp501-510.
- Crawford, Paul, et al (2015). "Practice Based Evidence: Delivering Humanities into Healthcare." In *Health Humanities*. Pp 20-39 (PDF on ilearn)
- Shapiro, Johanna, Jack Coulehan, Delese Wear, and Martha Montello (2015) "Medical Humanities and their Discontents: Definitions, Critiques and Implications" from *Humanitas: Readings in the Development of Medical Humanities.* Pp 268-289.

Final paper due during finals week.

WORKSHEET — Request for a New Course Version 1.3

** Place your pointer on the underlined fields and start typing to fill in text, ** or use an

X or a number to fill in "check-box" or numbered fields.

Provide information requested below that is not contained in the syllabus. Please

note	e the guidelines in the boxe	9S.
Number (if known): Professional	_XXUndergraduate	Graduate
Title/subtitle: _Seminar in Medi	cal and Health Humanities	
Effective: Fall 2019 (Quarter	and Year)	
Offered:FallWinter Other	_xx _SpringSummer	Once Only
Instructor(s): Juliet McMullin	_	
Hours per week per unit of cred	lit may not be less than but m	ay exceed those listed below.
• One unit for each hour per week (1 workshop	:1) of colloquium, consultation, dis	cussion, lecture, seminar, or
One unit for each three hours per w internship, laboratory, practicum, re written work, and similar assigned.	esearch (scheduled and outside), sch	•
• One unit for each two to three hour	s per week (1:2-3) of studio	
Units: _4		
Activities and hours per wee spend in the activities listed (leave bla		ours per week that students will
Activity	Internship	_3_ Seminar
Clinic	Laboratory	Studio

Activity	Internship	3 Seminar
Clinic	Laboratory	Studio
Colloquium	Lecture	Term Paper
Consultation	Practicum	Thesis
Discussion	5_ Research (outside)	Tutorial
5_ Extra Reading	Research (scheduled)	Workshop
Field	Screening (outside)	Written Work
Individual Study	Screening (scheduled)	Other:

Prerequisite(s): _MHHS #### Introduction to Medical and Health Humanities

Read the guidelines in this box before writing the Catalog description.

Write the description in the present tense and limit it to 50 words (do not count grading information, repeatability information, or a list of E-Z subtitles). If possible, do not use complete sentences. However, use sentences that contain more than a list of items or topics.

Examples:

Instead of "This course will introduce students to the history of \dots ," use one of the following formats:

Introduces the history of . . . An introduction to the history of . . . Introduction to the history of . . .

Instead of "Functions, equations, and graphs," use a format similar to one of the following examples:

Explores functions, equations, and graphs . . . Topics include functions, equations, and graphs . . . A study of functions, equations, and graphs . . .

Course is repeatable as content changes to a maximum of units.

__ Course is repeatable as topics change to a maximum of _ units.

__ Course is repeatable as topics change.

Catalog description: Develops skills in the formulation and investigation of research questions in medical and health humanities. Synthesizes and integrates knowledge and skills obtained in the minor. Includes a major research project and interaction with an interdisciplinary group of faculty experts.

Grading:	Letter Grade or petition for Satisfactory/No Credit (S/NC)	xx_ Letter Grade only	In Progress (IP)
	Letter Grade or S/NC; no petition required	S/NC only	

The statements selected below will be added to the Catalog description by the Catalog office:

Grading statement (if required):
x Satisfactory (S) or No Credit (NC) grading is not available.
Graded Satisfactory (S) or No Credit (NC).
Normally graded Satisfactory (S) or No Credit (NC), but students may petition the instructor for a
letter grade on the basis of assigned extra work or examination.
May be taken Satisfactory (S) or No Credit (NC) with consent of instructor and graduate advisor.
May be taken Satisfactory (S) or No Credit (NC) by students advanced to candidacy for the Ph.D.
Students who submit a term paper receive a letter grade; other students receive a Satisfactory (S) or No Credit (NC
grade.
Students who present a seminar receive a letter grade; other students receive a Satisfactory (S) or No
Credit (NC) grade.
Students who present a seminar or submit a term paper receive a letter grade; other students receive a Satisfactory (S) or No Credit (NC) grade.
Other:
Repeatability statement (if required):
Course is repeatable.
Course is repeatable to a maximum of units.
Course is repeatable as content changes.

Other:	
If the course is repeatable, may a student take more than one section of the course in a single quarter? Yes No	
Cross-listing statement: Cross-listed with	
Credit statement (to limit credit when course content overlaps):	
Credit is awarded for only one of	
Other	
Breadth statement (for CPAC, ETST, FVC, HASS, or WMST courses only): Fulfills the Humanities requirement for the College of Humanities, Arts, and Social Sciences. Fulfills the Social Sciences requirement for the College of Humanities, Arts, and Social Sciences. Fulfills either the Humanities or Social Sciences requirement for the College of Humanities, Arts, and Social See the Student Affairs Office in the College of Humanities, Arts, and Social Sciences. Does not fulfill the Humanities or Social Sciences requirement for the College of Humanities, Arts, and Sciences. Other:	
If the course content overlaps or duplicates the content of another course , describe the overlap or duplication:	
If the course affects degrees, minors, and/or programs , list the affected degrees, etc. and explain how they are affected: Will be a mandatory course in the Medical and Health Humanities minor	
If the course affects the prerequisites and/or descriptions of other courses , list the affected courses and explain how they are affected: <u>none</u>	
Justification for establishing the course (insert or attach):	
Syllabus (insert or attach and include the information below):	
Course requirements (e.g., term papers and examinations)	
If an activity selected above under "Activities and Hours" does not involve faculty contact (e.g., extra reading, individual study, and outside research), describe the activity and explain how it will be evaluated.	
If one of the activities selected above is consultation hours , explain how these hours will be implemented and	l monitored.

For further information about course guidelines, see the *General Rules and Policies Governing Courses of Instruction* at **senate.ucr.edu/Committees/courses/guidelines.pdf**

<u>Syllabus:</u>

Students will be required to attend regularly and participate in discussion. Writing assignments will consist of a seminar presentation on individual research accompanied by a written script submitted to the instructor, and a major research paper of 12-15 pages. Extra reading for each week will be assigned at the beginning of the term and will draw on materials relevant to the students' research projects and will emphasize humanities methods, interpretation, and writing. Extra essays may be added related to the topics addressed by guest speakers in each respective session.

Evaluation:

Attendance and Participation: 25%

Weekly summaries: 25%

Presentation: 20%

Final Paper: 30%

Reading List:

Elliott, Denielle and Dara Culhane (2002) A Different Kind of Ethnography: Imaginative Practices and Creative Methodologies. Toronto: University of Toronto Press.

Montgomery Hunter, Kathryn (1993) Doctors' Stories: The Narrative Structure of Medical Knowledge. New Jersey: Princeton University Press.

Sousanis, Nick (2016) Unflattening. Massachusetts: University of Harvard Press.

Week One: The dominance of narrative in medical and health humanities

Montgomery Hunter, Kathryn (1993) Doctors' Stories: The Narrative Structure of Medical Knowledge.

Week Two: Narrative Continued.

Continue - Montgomery Hunter, Kathryn (1993) Doctors' Stories: The Narrative Structure of Medical Knowledge.

Guest Speaker: Allison Hedge Coke – Creative Writing (additional readings forthcoming)

Week Three: Image and Text - Double Orientations

Sousanis, Nick (2016) Unflattening. Massachusetts: University of Harvard Press.

Week Four: Art in the Medical and Health Humanities

Continue - Sousanis, Nick (2016) Unflattening. Massachusetts: University of Harvard Press. Guest Speaker – Jeannette Kohl – History of Art (additional readings forthcoming)

Week Five: In the field, working with people, writing about illness

Elliott, Denielle and Dara Culhane (2002) A Different Kind of Ethnography: Imaginative Practices and Creative Methodologies. Toronto: University of Toronto Press.

Week Six: Performing the Data

Continue - Elliott, Denielle and Dara Culhane (2002) A Different Kind of Ethnography: Imaginative Practices and Creative Methodologies. Toronto: University of Toronto Press.

Guest Speaker - María Regina Firmino-Castillo – Dance, or Allison (Bella) Merlin – Theater, Film, and Digital Production (additional readings forthcoming)

Week Seven: Chronicles, Histories of Medicine

Guest Speaker - Dana Simmons or Antoine Lentacker - History (additional readings forthcoming)

Week Eight: Spirituality and Religion

Jones, Therese, Delese Wear, and Lester D. Friedman (2014) *The Health Humanities Reader*. New Brunswick: Rutgers University Press. Pp.365-407. (PDF on ilearn). Guest Speaker – Matthew King – Religious Studies (additional readings forthcoming).

Week Nine: In class workshopping of papers and presentations

Week Ten: Student Presentations

Finals Week: Student Presentations. Final Papers Due.

WORKSHEET — Request for a New Course

** Place your pointer on the underlined fields and start typing to fill in text, ** or use an X or a number to fill in "check-box" or numbered fields.

Provide information requested below that is not contained in the syllabus. Please note the quidelines in the boxes.

r	note the guidelines in the box	xes.
Number (if known): Professional	X_ Undergraduate	eGraduate
Title/subtitle:		
Effective: W 2019 (Quarter	and Year)	
Offered:FallWint Other	er <u>X</u> SpringSumme	erOnce Only
Instructor(s): _Matthew King	<u>a</u>	
Hours per week per unit of o	credit may not be less than but	may exceed those listed below.
workshop	k (1:1) of colloquium, consultation, o	
	m, research (scheduled and outside),	reading, fieldwork, individual study, screening, term paper, thesis, tutorial,
• One unit for each two to three l	nours per week (1:2-3) of studio	
Units: _4 Activities and hours per waspend in the activities listed (leav	/eek: Indicate below the number of e blank those that do not apply).	hours per week that students will
Activity	Internship	Seminar
Clinic	Laboratory	Studio
Colloquium	_3_ Lecture	_2_ Term Paper
Consultation	Practicum	Thesis
Discussion	_1_ Research (outside)	Tutorial
Clinic Colloquium Consultation Discussion Extra Reading Field Individual Study	Research (scheduled)	Workshop
Field	Screening (outside)	Written Work
<u>6</u> Individual Study	Screening (scheduled)	Other:

Prerequisite(s): ____

Read the guidelines in this box before writing the Catalog description.

Write the description in the present tense and limit it to 50 words (do not count grading information, repeatability information, or a list of E-Z subtitles). If possible, do not use complete sentences. However, use sentences that contain more than a list of items or topics.

Exam	pΙ	es:
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Instead of "This course will introduce students to the history of \dots ," use one of the following formats:

Introduces the history of . . . An introduction to the history of . . . Introduction to the history of . . .

Instead of "Functions, equations, and graphs," use a format similar to one of the following examples:

Explores functions, equations, and graphs . . . Topics include functions, equations, and graphs . . . A study of functions, equations, and graphs . . .

Catalog description: ____

quarter? Yes No

Grading:	X Letter Grade or petition for Satisfactory/No Credit (S/NC)	Letter Grade only	In Progress (IP)
	Letter Grade or S/NC; no petition required	S/NC only	

The statements selected below will be added to the Catalog description by the Catalog office:

Grading statement (if required):
Satisfactory (S) or No Credit (NC) grading is not available.
Graded Satisfactory (S) or No Credit (NC).
Normally graded Satisfactory (S) or No Credit (NC), but students may petition the instructor for a
letter grade on the basis of assigned extra work or examination.
May be taken Satisfactory (S) or No Credit (NC) with consent of instructor and graduate advisor.
May be taken Satisfactory (S) or No Credit (NC) by students advanced to candidacy for the Ph.D.
Students who submit a term paper receive a letter grade; other students receive a Satisfactory (S) or No Credit (NC)
grade.
Students who present a seminar receive a letter grade; other students receive a Satisfactory (S) or No
Credit (NC) grade.
Students who present a seminar or submit a term paper receive a letter grade; other students receive
a Satisfactory (S) or No Credit (NC) grade.
Other:
Repeatability statement (if required):
Course is repeatable.
Course is repeatable to a maximum ofunits.
Course is repeatable as content changes.
Course is repeatable as content changes to a maximum ofunits.
Course is repeatable as topics change.
Course is repeatable as topics change to a maximum of units.

If the course is repeatable, may a student take more than one section of the course in a single

Cross-listing statement: Cross-listed with _medical humanities	
Credit statement (to limit credit when course content overlaps):	
Credit is awarded for only one of	
Other	
Breadth statement (for CPAC, ETST, FVC, HASS, or WMST courses only): Fulfills the Humanities requirement for the College of Humanities, Arts, and Social Sciences. Fulfills the Social Sciences requirement for the College of Humanities, Arts, and Social sciences. Fulfills either the Humanities or Social Sciences requirement for the College of Humanities, Arts, and Social Sciences. See the Student Affairs Office in the College of Humanities, Arts, and Social Sciences.	ciences.
Does not fulfill the Humanities or Social Sciences requirement for the College of Humanities, Arts, and Sciences Other:	ocial
f the course content overlaps or duplicates the content of another course , describe the overlap or uplication:	
f the course affects degrees, minors, and/or programs , list the affected degrees, etc. and explain how ney are affected:	
f the course affects the prerequisites and/or descriptions of other courses , list the affected courses and xplain how they are affected:	
lustification for establishing the course (insert or attach): brings interdisciplinary perspectives of eligious studies into the medical humanities programs at UCR.	
Syllabus (insert or attach and include the information below): <u>inserted below</u>	
Course requirements (e.g., term papers and examinations)	
If an activity selected above under "Activities and Hours" does not involve faculty contact (e.g., extra reading, individual study, and outside research), describe the activity and explain how it will be evaluated.	
-Students will do assigned readings for every class as preparation. Pop quizzes on readings will occur intermittently.	
-Students will sign up to submit four reading response papers (1 page each) over the quarter, and on those days will help lead class discussion.	
-Students will research and prepare a mid-quarter response paper and a final research prospectus (with annotated bibliography).	

For further information about course guidelines, see the *General Rules and Policies Governing Courses of Instruction* at **senate.ucr.edu/Committees/courses/guidelines.pdf**

If one of the activities selected above is **consultation hours**, explain how these hours will be implemented and monitored.

Medicine and Asian Religions in Global Circulation

Prof. Matthew King Department of Religious Studies University of California, Riverside

This medical humanities course considers the relationship between religious cosmologies, the organization of knowledge, and the practices for managing bodily and natural order that underpin three major medical traditions of Asia: Ayurveda, Traditional Chinese Medicine, and Tibet's Four Tantra Tradition.

On the basis of guided readings of primary sources, secondary scholarly literature, lectures, and class projects, students will learn about these three important Asian medicoreligious traditions in the global contexts of circulation and exchange. We will first introduce ourselves to these traditions and their potentially quite unfamiliar orientations to topics like embodiment, illness, health, and "medicine." We will then explore ways that each of these traditions has mediated (and has been mediated in turn by) biomedical knowledge and practice in the last century.

The course will conclude with students writing a preliminary prospectus and annotated bibliography for a research project on either i) a particular example of Asian medicoreligious knowledge as it is currently practiced in the greater Los Angeles and Inland Empire area today; or ii) a pre-modern Asian medico-religious tradition or "physician."

Required Texts

-All readings will be made available in a course-booklet.

Evaluation

- 15% Pop Reading Quizzes (X 3)
- 15% "Comparing Pre-modern Traditions" Response Paper
- 20% Four Peer-Evaluated Reading Responses (submitted on assigned weeks)
- 25% Final research paper (10-12 pages): Prospectus and annotated bibliography on Asian religion & medicine in SoCal
- 25% Final Exam

Late Policy: Assignments must be submitted as hardcopies at the start of class on the due date. Late submissions will have -5% deducted per day, beginning at the start of class on the due date. If you have a medical issue (not a printing issue!) an extension is possible if you update me ASAP and provide a medical certificate signed by your doctor. If other life situations are making it difficult to complete you assignment in time, please speak to your academic counselor: we will make every possible accommodation and help connect you with helpful resources at the university.

Accessibility: UCR and I are committed to fully supporting students with any type of disability or obstructing situation to be full and active community members through the provision of academic and co-curricular accommodations. Please register with Accessibility Services as early as possible: http://specialservices.ucr.edu/disabilities/. This includes health issues (physical or mental), child care, family emergencies, and so on.

<u>Use the Writing Center!</u> UCR Undergraduate Writing Center is located in the ARC, the Writing Center provides free writing tutoring to undergraduate students in any major and at any stage of the writing process. Appointments are one-on-one and last about an hour. Writing tutors are a complement to in-class instruction and instructor office hours. Students can make an appointment for writing tutoring by calling the ARC at (951) 827-3721 or by going to <u>arc.ucr.edu</u>.

Course Schedule

Week 1: Orientations

- -Samuel, Geoffrey. 2010. Healing, efficacy and the spirits. Journal of Ritual Studies 24 (2): 7-20 (special issue, The Efficacy of Rituals Part II, ed. W. S. Sax and J. Quack).
- -Samuel, Geoffrey. 2015. Healing. In A.J. Strathern & P.J. Stewart (Eds.) The Ashgate Research Companion to Anthropology. Farnham, Surrey: Ashgate.
- Shigehisa Kuriyama (2002) The Expressiveness of the Body. Preface, Chapters 1 & 2 (pp. 7108).
- -Comfort, A. 1979. I and That: Notes on the Biology of Religion. New York: Crown.

<Unit I: Pre-Modern Medicine and Asian Religion in Global Circulation>

Week 2: India

- Wujastyk, Dagmar, and Frederick M. Smith. 2008. *Modern and global Ayurveda: pluralism and paradigms*. Albany: State University of New York Press.
- Samuel, Geoffrey. 2013. The Subtle Body in India and Beyond. In Religion and the Subtle Body in Asia and the West: Between Mind and Body. Co-edited with Jay Johnston, pp.33-47. London and New York: Routledge.

Week 3: Tibetan Medicine: Men rig né

-Garrett, Frances. 2009. "The Alchemy of Accomplishing Medicine (*sman sgrub*):

Situating the *Yuthog Heart Essence* Ritual Tradition," *Journal of Indian Philosophy* 37(3): 207-30.

-Garrett, Frances. 2010. "Tapping the Body's Nectar: Gastronomy and Incorporation in Tibetan Literature," *History of Religion* 49(3): 300-26.

Week 4: Materia Medica in Early Modern China

- Mayor, David F. and Micozzi, Marc S. 2011. Energy Medicine East and West: A Natural History of Qi. Churchill Livingstone.
- -Carla Nappi (2009) The Monkey and the Inkpot: Natural History and its Transformations in Early Modern China. Prologue, Chapters 1 & 4.

Week 5: Medicine and State in Late-Imperial China

- -Ruth Rogaski (2004) Hygienic Modernity: Meanings of Health and Disease in Treaty Port China. Introduction.
- -Van Vleet, Stacey. "Medicine as Impartial Knowledge: The Fifth Dalai Lama, the Tsarong School, and Debates of Tibetan Medical Orthodoxy." In *The Tenth Karmapa & Tibet's Turbulent Seventeenth Century*. Chicago: SerIndia Publications, 2016.
- -Gyatso, Janet. 2004. "The Authority of Empiricism and the Empiricism of Authority: Medicine and Buddhism in Tibet on the Eve of Modernity," *Comparative Studies of South Asia, Africa, and the Middle East* 24(2): 83-96.

<Unit II: Asian Medicine and Globalization in the Twentieth Century>

Week 6: Religion as Biomedicine?

- Janes, Craig. 1995. The Transformations of Tibetan Medicine. Medical Anthropology Quarterly, New Series, Vol. 9, No. 1 (Mar., 1995), pp. 6-39
- Craig, Sienna R. 2011. From Empowerments to Power Calculations: Notes on Efficacy, Value, and Method. In Vincanne Adams, Mona Schrempf and Sienna R. Craig (eds.), Medicine Between Science and Religion, pp.215-240. Oxford: Berghahn Books.

Week 7: Jung, Mandalas, and Psychotherapy

- -Jung, C.G. 1968. Concerning mandala symbolism. In: C.G. Jung, Collected Works of C. G. Jung, Vol. 9(1). 2nd edn, pp. 355-384. Princeton, NJ: Princeton University Press.
- -Slegelis, M.H. 1987. A study of Jung's mandala and its relationship to art psychotherapy. The Arts in Psychotherapy, 14, 301-311.

- Katz, Nathan. 1992. Dākiṇī and Anima—On Tantric Deities and Jungian Archetypes. In Daniel J. Meckel and Robert J. Moore (eds.) Self and Liberation: The Jung-Buddhist Dialogue, pp.302-329. New York and Mahwah: Paulist Press.

Week 8: Mindfulness & Meditation

- Kabat-Zinn, Jon and Davidson, Richard with Houshmand, Zara. 2013. The Mind's Own Physician: A Scientific Dialogue with the Dalai Lama on the Healing Power of Meditation. New Harbinger Publications. (2005 Mind & Life Dialogue in Washington, DC, USA.)
- Braun, Erik. 2013. The Birth of Insight: Meditation, Modern Buddhism and the Burmese Monk Ledi Sayadaw. Chicago: University of Chicago Press.
- -Baer, Ruth A. and Krietemeyer, Jennifer. 2006. Overview of Mindfulness- and Acceptance-Based Treatment Approaches. In Ruth A. Baer (ed.), Mindfulness-Based Treatment Approaches: CLinican's Guide to Evidence Base and Applications, pp. 3-27. Burlington, MA and London: Academic Press.
- Kabat-Zinn, Jon. 2011. Mindfulness: Diverse Perspectives on its Meaning, Origins, and Multiple Applications at the Intersection of Science and Dharma. Contemporary Buddhism 12(1): 1-18.
- Samuel, Geoffrey. 2015. The contemporary mindfulness movement and the question of non-self. Transcultural Psychiatry, 52(4), 485-500.

Week 9: Yoga and Loving-Kindness Training

- Ozawa-de Silva, B. R., Dodson-Lavelle, B., Raison, C. L. & Negi, L.T. 2012. Scientific and Practical Approaches to the Cultivation of Compassion as a Foundation for Ethical Subjectivity and Well-Being. J. Healthcare, Science and the Humanities, 2, 145-161
- Berger, Rachel. 2013. "Ayurveda's Dyarchic Moment, 1920-1935," *Ayurveda made modern: political histories of indigenous medicine in North India, 1900-1955*. Houndsmills, Basingstoke, Hampshire: Palgrave Macmillan.
- -Jindani, F. & Khalsa, Guru F.S. (2015) A Journey to Embodied Healing: Yoga as a Treatment for Post-Traumatic Stress Disorder, Journal of Religion & Spirituality in Social Work: Social Thought, 34:4, 394-413.
- Zope, S. & Zope, R. 2013. Sudarshan kriya yoga: Breathing for health. International J. Yoga, 6, 4-10.

Week 10: Emotions and Exam Review

- -Apple, James. 2006. Tsong-kha-pa's gradual path system for ending mental afflictions and his methods for countering anger. In D.K. Nauriyal, Michael S. Drummond and Y.B. Lal (eds), Buddhist Thought and Applied Psychological research: Transcending the Boundaries, pp.262-284. London and New York: Routledge.
- -Dreyfus, Georges. 2001. Is Compassion an Emotion? A Cross-Cultural Exploration of Mental Typologies. In Davidson, Richard J. and Harrington, Anne (eds.) Visions of Compassion: Western Scientists and Tibetan Buddhists Examine Human Nature, pp.31-46. New York & Oxford: Oxford University Press.
- -Ekman, Paul, Davidson, Richard J., Ricard, Matthieu and Wallace, B. Alan. 2005. Buddhist and Psychological Perspectives on Emotions and Well-Being. Current Directions in Psychological Science 14(2): 59-63.