

IATL Academic Fellowship

Designing an M-Level Module in Medical Humanities: The Medical Mind

Dr Elizabeth Barry

Introduction

In Autumn 2013, I received an Academic Fellowship with the purpose of designing an M-Level interdisciplinary module in Medical Humanities, the first such module at Masters level, in close collaboration with IATL Teaching Fellow Jonathan Heron. The project aimed to build on the research and teaching we delivered as part of the very successful AHRC-funded Beckett and Brain Science project that was undertaken in 2012, culminating in a well-received symposium, using OSL techniques to run a practical workshop for psychiatrists, psychologists, neuroscientists, medical students and humanities scholars and students, as well as a performance event, discussion and talks. The idea was that a module would run on similar lines, bringing together students from all faculties to create transdisciplinary knowledge through performance-related practice and teaching and learning activities, and inviting in 'expert witnesses' from across the disciplines to enhance the students' learning.

Project Format

To this end, we advertised for and engaged two Lead Learners, one undergraduate and one postgraduate, both in Psychology, to document and evaluate the project, and give a scientific perspective on the material and methods we were trialling. We also engaged a video-maker who worked with us closely on the Beckett and Brain Science project and is very well informed about our working methods and research interests, as well as OSL in general and the innovative pedagogy we are developing in relation to explorations of the mind and mental illness, and the culture surrounding them.

We then organized three workshops which comprised Open Space Learning, as well as seminar-style discussion and talks from me and experts from other disciplines, and made use of varied audi-visual stimuli, and a range of materials from Literature, Theatre, History, Philosophy, Psychology and Psychiatry. These were advertised across the faculties of the university. We also had participation via video conferencing facilities from clinicians from the University of Oxford and the National Institutes of Health (NIH) in Washington DC (USA). These workshops trialled material and pedagogical techniques destined for use in the teaching of the future Masters module. The two 'open' workshops (the first and the third) had a very diverse makeup, ensuring that the response and evaluation from participants gave a good indication of the potential reception of the module. Attendees included students at all levels (UG, Masters, PhD), faculty and staff from the following departments: Chemistry, English, Medical School, Philosophy, Politics, Psychology, and Theatre.

Workshops

The first workshop (16 attendees), Wednesday 23rd October 2013, 'The Flight of the Mind', focused on Virginia Woolf's 1924 novel *Mrs Dalloway*, the 1998 novel it inspired, Michael Cunningham's *The*

Hours, and the 2002 Stephen Daldry film made of *The Hours*. It also introduced participants to a 1918 article from the British Medical Journal about the phenomenon of shellshock (addressed in Woolf's novel), a modern critical article on the concept in the history of medicine, as well as an extract from Elaine Showalter's book critiquing notions of hysteria (and the 'male hysteria' associated with shellshock) in the literature and culture of the period, *The Female Malady*. Participants participated in a practical activity using extracts from *Mrs Dalloway* as source material, and did some group work to explore notions of normality, pathology and emotion in relation to these passages of the novel and other materials, and were given a talk by Elizabeth Barry about Woolf, ideas of mental illness, and the fluid history of the concept of 'shellshock'. In the final version of the module, an 'expert witness', Mathew Thomson, a historian of psychology and an expert in the links between the First World War and mental illness, will lead a discussion.

The second workshop (22 attendees), on Friday 22nd November, aimed to explore the reception of medical humanities material embedded in a syllabus. It took as subjects a group of first year undergraduate students of English and Theatre, and embedded the workshop in their module 'British Theatre since 1939'. It exposed them to a practical performance workshop on Beckett's 1982 play *Not I* and explored with them its potential uses in clinical settings. Many of them wrote about Beckett's work for their first assessed essay, drawing on insights from this workshop.

The third workshop (19 attendees), on Wednesday 4th December, explored a range of source materials, including Beckett's plays *Not I* and *Footfalls*, Harold Pinter's play *A Kind of Alaska*, inspired by Oliver Sacks's neurological memoir *Awakenings*, Sacks's *The Man Who Mistook His Wife for a Hat*, nineteenth century neuropsychological case studies by Pierre Janet and Eugène Claparède, and the classic 1960 critique of psychiatry, R. D. Laing's *The Divided Self*. Practical and performance activities were undertaken using textual material from Beckett and Pinter's plays. Two discussions were facilitated with different clinicians, psychiatrist Dr Matthew Broome (in relation to R. D. Laing) via videolink with the Warneford Psychiatric Hospital, Oxford (UK), and palliative care clinician Hunter Groninger MD (in response to Beckett's play *Footfalls*), via videolink from the National Institutes of Health, Washington DC. These clinicians will participate in slightly more formal ways in the delivery of the module as a whole, as will Warwick psychologist John Pickering.

Lead Learners and External Input

In addition to assembling summary reports and evaluation materials (see below), the two Lead Learners wrote short reports based on their reading of a proposed text for the module, Oliver Sacks's *The Man Who Mistook His Wife for a Hat*, as a sample of the sort of formative work that might be undertaken on the module, and received feedback on this work, a process that was instructive for both them and me. The project team, Jonathan Heron, UG Lead Learner Kimberley Brett and PG Lead Learner Lauren Bellaera, and I also went on a 'field trip' to London to see Samuel Beckett's play *Happy Days* at the Young Vic, and the subsequent interdisciplinary discussions of this work and its relevant to notions of the 'medical mind' also fed into thinking about source material for the prospective module. Discussions about the module were undertaken with our two project clinicians, Broome and Groninger, historian Matthew Thomson from the Centre for the History of Medicine, and psychologist John Pickering. Jonathan Heron and I were also invited during the period of the fellowship to give a talk at the Centre for Cognition, Kinesthetics and Performance at the University of Kent on the work of the project and the research and pedagogical activities leading up to it. The questions and post-talk discussion from a community of theatre and performance scholars, clinicians, psychologists and therapists was very useful in shaping the design of the module.

Evaluation and Feedback

Questionnaires were administered to participants after each of the three workshops, and interviews (with some video documentation) were conducted after the third workshops. The feedback was overwhelmingly positive. The numbers of responses to workshop 1 were very small, but these were positive; the score for overall experience of the workshop for the second workshop 2 was an average of **4.57 out of 5**; for the third workshop **4.67 out of 5**. When asked if they would consider taking a similar module at Masters level, 10 out of 22 said 'maybe', 12 'yes' (and nobody 'no') after the second workshop; after the third, everyone for whom the question was applicable responded 'yes' (the others responded 'N/A'). This was a very encouraging results giving an initial sign that the module would recruit well.

What did the participants learn, and what did they find useful?

asked what they had learnt, typical responses were that 'Beckett's works can be applied to medical and psychiatric contexts'; that drama can 'be interdisciplinary' and how helpful this was, 'how liberating it could be'; that theatre could 'be used to help people open up and also to explore identity', that physicality could be used 'to explain something you can't verbalize or feel vulnerable about'. They also learnt about 'the importance of narrative in medical and clinical science', the usefulness of 'case studies as explorations of narrative', 'the ethics of learning about mental health through literature, and how useful this is'. Participants found especially useful practical 'partner exercises', practical activities where 'improvised streams of consciousness were combined and intercut' to convey 'a sense of fragmentation and frustration at the inability to tell a story', and the way in which this allowed them to make 'links between drama and humanity'. They also found useful the opportunity to interact with fellow participants, to discuss video material, and to hear from clinicians. There were positive comments about the usefulness of the material presented.

Feedback on the teaching methods.

With respect to the teaching methods in particular, they 'really enjoyed' them and found them 'effective', someone else found them 'helpful and stimulating'. They found it useful to work with partners, and to encounter different concepts, objects and texts. They appreciated teaching and learning 'outside the lecture hall' and found it freeing, creating an 'open forum for discussion'. They found the sessions 'fun and engaging', with a 'good balance between practical and theatrical', and found 'performance to be a great tool for learning'. One participant commented that they were 'very 21st century'!

What did they not find useful?

The principal critique was that there was not enough time and more questions raised than answered (though the participant who said this comment that 'this is inevitable'). One response wanted 'deeper psychological analysis' of Beckett's work, and someone wanted a greater use of movement. In discussions after the first workshop, it was also felt that there was some anxiety about encountering texts, particularly literary texts, from those outside humanities disciplines, and in the longer module, more support should be given with this.

Conclusion and Outcomes

In conclusion, the fellowship allowed for an extremely useful and rewarding process of devising, trialling and reflecting on material and teaching methods necessary to the success of an interdisciplinary module on the Medical Mind. It was useful to work closely with students from psychology at every stage of the project, and we were extremely fortunate to get a very wide range of participants at the workshops, reflecting all of the faculties of the university, and giving a representative spread of views. Their attendance, and their enthusiasm for the workshops, are encouraging in taking the process forward to delivery as an interdisciplinary module. The signs are there that this would recruit well and be a rewarding experience for students across the university.

The principal challenge encountered, reflected in a small number of responses in the feedback, was that the workshops contained too much material, something that will be remedied easily by having a much longer time span over which to cover the relevant material in the course of the module. Sometimes depth was sacrificed for breadth, but again concepts can be explained, analysis undertaken and discussions allowed freer rein in the seminars of the module proper. Instructive for me was the difficulty of discussing and analysing scientific material for humanities students, and literary and theatrical material for science and social science students. The performance-related activities will allow for learning experiences that could transcend discipline boundaries, mitigating this issue to some extent, and, in addition, some methodological and practical training in reading certain kinds of texts will be given at the start of the module, and support from me and appropriate experts will be given throughout in dealing with the texts and artefacts in question.

The evaluation of the project, while broadly very positive, suggested the idea of testing the material used in the second workshop with an interdisciplinary group of participants, as this second workshop was embedded in an English and Theatre Studies module. In fact, this material has been 'tested' in various forums, including an interdisciplinary symposium as part of the Beckett and Brain Science project (involving English, Theatre, Philosophy, Psychology, Health Sciences and Medicine students and staff), as well as among student psychiatrists and a special interest group of clinicians, humanities scholars and research psychologists at the Institute of Psychiatry, Kings College, London, so we are confident that it is intelligible and useful for a range of audiences in a range of disciplines.

The principal project outcome is the module proposal (attached). This module has now been accepted, with some minor changes which I am in the process of making. We have also produced two video documents, giving a taster of the content, showcasing the methods used, and providing documentation of the experience of the workshops from the perspective of student and staff participants. Further information can be obtained from Elizabeth Barry (e.c.barry@warwick.ac.uk).

Appendices:

1. Project report from PG Lead Learner#
2. Documentation and summary of feedback from UG Lead Learner

Please see also (via the links below the one for this report):

Module proposal (submitted 24th January 2014; accepted, with minor revisions, 24th February 2014).

Video documentation.

IATL Project: The Medical Mind

October-December 2013

Final Report

Lauren Bellaera (PG Lead Learner)

Aims and Roles

The aim of this project was to obtain evidence in order to support a proposal for an interdisciplinary M-level module in the Medical Humanities. This interdisciplinary module explores literature and medical science, bringing together pedagogy approaches with research and anticipates being of interest to a number of academic disciplines especially the medical sciences. Specifically, this project aims to support this module proposal by developing, organising, running and evaluating three pilot workshops, which intend to simulate the module content and its teaching and learning style.

To facilitate the aims outlined above two lead learners assisted with the project. Their main role was to design feedback mechanisms (e.g., questionnaires, interviews) and to document this information through written responses, audio and film recordings. The evaluation process used both qualitative and quantitative approaches; with the feedback questionnaire consisting of numeric scales as well as open-ended questions. In addition, interviews were also carried out with some of the participants from the workshops in order to ask more detailed questions. The focus of the feedback was concerned with an evaluation of the content of the workshop (i.e., what was useful and what wasn't), the methods of teaching (i.e., views of open-space learning, performance-as-research) and practical aspects such as the pace of the sessions (i.e., was the information presented too quickly or slowly). The lead learners undertook certain administrative responsibilities, including advertising the workshops and maintaining a register of attendees. Furthermore, the lead learners helped to develop some of the content for the third workshop based on the writings of Oliver Sacks.

Summary and Evaluation of the Workshops

Workshop 1 - The Flight of the Mind: The Medical Mind in Literature and Culture

Content

Sixteen participants from a wide range of academic disciplines including Philosophy, English and Theatre Studies, Psychology, Engineering and Medicine took part in a two-hour workshop, which explored the work of Virginia Woolf in the context of mental health. Participants took part in a number of performance-related activities, e.g., viewing clips from Stephen Daldry's film *The Hours* and they were also given extracts to read from Michael Cunningham's novel on which the film was based. In a multi-modal experience, participants read the extracts whilst the film was played in the background. Following this, discussions centred on the narrative and how the experience impacted on the participants' perceptions and emotions. Finally, the different strands of theatre, film work and fiction were brought together in a taster seminar.

Evaluation

The feedback from the workshop was unanimous; all of the participants enjoyed the group discussions, in particular reflecting on how the narratives made them feel. Moreover, the method of learning through the use of open-space and movement were very well received. One concern expressed was that the extracts were beyond some of the participants' knowledge base and thus more pointers and some additional reading prior to the workshop would have been helpful. In order to address this preliminary reading was provided for subsequent workshops. The seminar which brought together the texts by making connections was viewed as useful, helping to clarify information as well as acting as a 'springboard for thinking'. However, the participants did feel that a lot of information was packed into the session and consequently some fruitful discussions were cut short. Overall the participants rated this workshop as either good or excellent.

Workshop 2 - Compassionate care: Medical Humanities in Performance

Content

Twenty-two participants from the English and Theatre Studies course (undergraduate, level 1) took part in a 3-hour workshop examining the work of Samuel Beckett and in particular his 1972 play *Not I*. The participants watched the play and then took part in performance-based activities involving this script. They read the script in groups and then, based on this, a dialogue was developed exploring different levels of intensity and expression in speech.

Evaluation

All of the participants rated the workshop as either very good or excellent and said they would consider taking this at a Masters level. Eighty percent of the participants viewed the content as being closely related to the medical mind. The desire for more theatrical methods in learning environments was also highlighted by the fact that they all said they would definitely like to experience more of this type of teaching style.

Workshop 3 - Do You Know Who I Am?: A Medical Humanities Workshop

Content

Nineteen participants from a number of disciplines took part in the three-hour workshop. This final workshop focused on the topic of mental health, perception and feeling in relation to scientific (Oliver Sacks) and theatrical texts (Samuel Beckett, Harold Pinter). In particular, Beckett's 1972 theatrical work *Not I* formed a large part of the workshop. Further, it was considered how this literature and theatrical performance could help doctors, nurses, and patients better understand and communicate about their illness. To make these links explicit between literature and medicine, two clinicians were present via video link, one from the

Warneford Hospital, Oxford, and the other from the National Institute of Health, Washington DC, and they led discussions surrounding these topics.

Evaluation

Every participant who completed the feedback sheet rated the experience as either very good or excellent, with 67% of them rating the workshop as excellent. Those participants for whom the question was relevant (i.e., postgraduate level students) said that they would consider taking this module if it was available. In terms of the pace of the workshop, all of the participants except one rated the pace as 4 (1= very poor, 5 = excellent) suggesting that the pace overall was pitched correctly. The amount of content was considered as excellent by over 50% of the participants. The level of discipline overlap with the content of the workshop ranged between 3 and 5 based on a 1 to 5 scale. This range was to be expected considering the mixture of science and humanities students present at the workshop. This mixture was also reflected in the level of engagement with the subject materials presented in the workshop which also ranged from 3-5; again this would be anticipated considering the differing levels of expertise in relation to literature and/or science.

Commentary on the Evaluation Process

The evaluation process primarily was based on responses to the feedback questionnaires. These results were supported by interviews of participants from the third workshop; however these interviews were limited due time constraints and participant availability. In the future, more interviews would be beneficial in order to add clarity and insight to the evaluation process, with the interviews being organised prior to the workshops occurring. Whilst the second workshop was useful as it provided additional feedback, the participants were not the target audience as they were first year undergraduate English and Theatre Studies students who already had a strong knowledge base around this subject. Therefore, consideration should be given to running an additional workshop using an interdisciplinary sample in order to obtain relevant feedback. In terms of developing this as the content for a module, consideration needs to be taken in terms of the varying levels of understanding of different

students. Also, as demonstrated by the workshops, selecting texts which are accessible is important and as indicated by the feedback it was well selected for the current set of workshops.

Final Comments

The project clearly demonstrates a keen interest from a number of disciplines (e.g., Philosophy, English Theatre, Psychology, Medicine, Engineering) for a 'Medical Mind' module to be developed and made available to postgraduate students. The content of the workshops show that there is a strong overlap between science and literature and the main criticism was that there was 'too much' information presented in the workshops which indicates that such content would be better suited for a longer time frame and hence bodes well for the content to be rolled out as a ten-week M-level module in the Medical Humanities. Finally, across all three workshops, the experience of the sessions were rated as either very good or excellent by all participants bar two, and almost all would consider taking this module at Masters level. In conclusion, the workshops can be considered a success and would clearly be well received as a module.

Appendix 2

Documentation (Kimberley Brett, UG Lead Learner)

Workshop 1

Medical Mind- Video recording discussion of Virginia Woolf extracts

The following is a transcript of responses to the Woolf extracts used, and their juxtaposition with excerpts from the film of *The Hours* and a recording of Woolf reading a relevant essay about language and the mind.

- Sense of momentum involved in a lot of images. Appear to be mechanical or kinetic. Overwhelming sense of inertia, which drives the depressive subject towards these kinds of situations where they feel like they don't have any control.
- Different ways in which the information was presented. Visually reading the information made it harder to link all the information together than just watching the film as it was easier to get the 'take home message', linked to suicide, mood and emotional disorders.
- Two poles of the suicidal condition. Septimus is frantic, but calmness of letter and walking into the pond (though each implies the other). Affectlessness of the surrounding world.
- Idea of movement and water. Talks about how her emotions were 'eddying now this way, now that'. How the free-flowing movement of the water represents her emotional state.
- Being presented with all the information all at once- visual, text, sound. Thought this linked to the erraticness of mental illness and how they felt in that situation.
- Feelings of the narrator. Some extracts pessimistic. However, sometimes appears optimistic about the concept of death, so there is a dignity to some of the extracts, whereas others have a dejected finality.
- Relation between mood and transport in a modernist concept.

Video Transcript

On Cunningham's conceit of the three women across time inspired by Woolf's text and how that may shed a light on mental health:

- Loses sense that Mrs Dalloway has as male characters mental illnesses are presented in a feminised way. In the film, seems to be three privileged women that are very wealthy and

preoccupied about flowers in different time zones. Don't really feel their anxiety or believe they are reading the book.

- Structure- Similar. How far does the anxiety spread along the spectrum? Suicidal?
- Film- making Woolf more accessible as many young people haven't read Mrs Dalloway.

Clarissa passage from *The Hours*:

- Moment of clarity when she remembers- how detailed this is e.g. dead grass. If you have a memory you want to remember, you do remember all the little details of it.
- Blissfully ignorant. How much a person is aware of their own psychological profile e.g. clarity etc.
- Being in the moment vs. looking back. 'Engine is going' when you're in the moment- anticipating different things. Looking back= dispassionate, but evaluative.
- In the moment- search for happiness. The remembered happiness keeps being depressive as if they don't make that step, the happiness is in the past. Only gets the intuition of happiness as the memory comes back. Extent of her happiness and whether she misses it.
- Fluid narrative, tunnelling between past and present. How far is memory a dispassionate activity. Do they access emotion predominantly through remembering the past? Hyper emotion. Living in time= living in feeling.
- Do we know if she ever did have happiness? Seems painful?
- Adaptation added humour to make it more accessible.
- Disengagement of the character. Retrospect- not being mindful and present in actions.

Responses to questions asked by Liz Barry about *Mrs Dalloway*

- Septimus- overwhelmed by the world- cannot separate things in his mind. We can put things to the back of our minds, but he cannot. Continuum. Myriad of impressions that can fall upon the mind.
- How everyone else reacts- e.g. wife and doctor- portrays how mental illness is perceived in culture.
- Aware that he is losing himself and that others notice as they pull him back to the present.
- What are we conditioned to accept socially. If Septimus was at war- why wouldn't he be suffering those things? How society copes with individual experiences. Dealing with collective trauma. Why isn't society addressing it rather than labelling.
- Can we understand? Is he too busy dealing with the emotions to worry about how he is being portrayed to others?
- If any of us responded to what we heard on the news we would all be 'mad'. Septimus IS responding to everything, which is a lot to deal with.

Feedback meeting/ informal focus group afterwards

- Medical- Email all doctors in training
- Would like to see the narrative developed, though wary that this could be easy to get wrong. Examples etc.
- Narrative that a person may tell of themselves. Pre-History. Woolf puts issues into context- issues for women and soldiers. Do things become more false as we become more self conscious?
- Useful to know how it is applied socially. Bridging the gap- is it working. 'Teaching compassion'. 'People of the broken machine'
- Medicine- Sims can be humans or puppets but term used inter-changeably
- Bring in clinical patient for their POV- guest speaker. Ethics
- Important who you pair people with. Balance subject area knowledge.
- Pre-reading

Feedback forms- Workshop 1

Points raised:

- When asked to comment on the extract some people felt a bit out of their depth as they were not used to doing that level of criticism in their usual discipline. May have been useful to have pointers of what to look for.
- Thought it may have been helpful to know more about the material before being given the task (maybe do some pre-reading before the workshop).
- Enjoyed reflecting on how the narratives made them feel
- Found it useful when Liz described the different strands of the module and how the texts connect. Gave them a 'springboard' for thinking
- Too much too quickly- felt that sometimes interesting discussions may have been cut short
- Thought the movement aspect was a good method of learning
- Enjoyed the group and sub group discussions

Overall they thought the workshop was good

Feedback Workshop 2 (Beckett)

What are the main points they learned?

- Beckett's works can be applied to medical and psychiatric contexts (i.e. helping challenged individuals)
- Beckett wants to engage with people's nerves, not their intellect
- Importance of movement in human expression
- How interdisciplinary drama can be and how helpful this is. It's ability to liberate.

- Ideas of silent compassion, physical restriction leading to freedom through language and the stream of consciousness being linked to helplessness
- Beckett can be used to help people open up and also to explore identity
- Detachment of voice and body
- Using physicality to explain something you can't verbalise or feel vulnerable about is very helpful

Things they found useful:

- Partner exercises- Highlighted the relationship between actor and text, actor and self (thoughts, body) and actor and spectator.
- Activity where the improvised streams of consciousness were combined and intercut- got a sense of fragmentation and frustration at the inability to tell a whole story. Listening to people's voices simultaneously built intensity.
- Not I reading- Intense and the words became meaningless- focus on mouth, speech and posture.
- Exercise where the auditor had to fill in the ellipsis with questions
- Links between drama and humanity (reminded them of why they find drama important and how it affects people)

What did they not find useful:

- Would like deeper psychological analysis of Beckett's work
- Don't quite see how the tennis ball metaphor related to the larger points of the workshop
- Would like to have focused on the use of movements a bit more
- Would have liked a little more background explanation of the video at the end

How did they find the teaching methods?

- Very helpful to work with a partner, objects and different concepts and texts
- Feel like teaching outside the lecture hall frees up your mind for ideas
- Fun and engaging, a good balance between practical and theatrical
- Find performance to be a great tool for learning and discussions more interesting
- Open and free- no pressure, felt like an open forum to share ideas
- Would have liked the discussion sessions to be longer so they could be longer

How was their experience of the workshop (1- 5, 1= Poor, 5=Excellent)

- Average= 4.57

How did they find the pace? (1- 5, 1= Poor, 5=Excellent)

- Average= 4.52

How did they find the overlap with subject knowledge? (1- 5, 1= Poor, 5=Excellent)

- Average= 3.95

How did they find the ease of engagement with subject materials?(1- 5, 1= Poor, 5=Excellent)

- Average= 4.09

How did they find the amount of content presented? (1- 5, 1= Poor, 5=Excellent)

- Average= 4.27

How well did they find the content relate to the medical mind? (1- 5, 1= Poor, 5=Excellent)

- Average= 4.14

Would they consider taking it at masters level?

- Maybe- 10
- Yes- 12

Additional comments:

- Idea of finding meaning and hope in the meaningless could be linked to terminal illnesses
- Found it thought provoking to link performance and medicine

Feedback Forms- Workshop 3

What are the main points they learned?

- The importance of Narrative in medical and clinical science
- Malleability of time, perception(s) of/ on reality
- Case studies used as explorations for narrative
- Situation V. important [e.g. "how old am i?"]
- The importance of understanding experience
- How literature can be used to increase awareness and encourage certain useful responses
- Clinical knowledge
- Ethics of learning about mental health through literature/ theatre and hw useful this is
- Idea of theatre/ literature/ the arts functioning in understanding the mind
- How powerful this kind of presenting media can be of creating a realistic environment for looking at clinical scenarios

Things they found useful:

- Interaction with other members
- Speakers' speeches
- Audience/ participant comments
- Discussion in intelligibility

- Reading 'A Kind of Alaska' in pairs- gave chance to get another disciplines' perspective and that of another person
- Discussion of video performances
- The readings/ extracts

What did they not find useful?

- More questions were raised than answered, but this is inevitable
- Needed more time

How did they find the teaching methods?

- Really enjoyed them, very '21st century' and effective
- Helpful and stimulating
- Created an open forum for discussion

How was their experience of the workshop (1- 5, 1= Poor, 5=Excellent)

- Average of 4.67

How did they find the pace? (1- 5, 1= Poor, 5=Excellent)

- All rated a 4
- More time to formulate thoughts would have been good

How did they find the overlap with subject knowledge? (1- 5, 1= Poor, 5=Excellent)

- Average of 3.67

How did they find the ease of engagement with subject materials?(1- 5, 1= Poor, 5=Excellent)

- Average of 4.5

How did they find the amount of content presented?

- Average of 4.5

How well did they find the content relate to the medical mind? (1- 5, 1= Poor, 5=Excellent)

- Average of 4.3

Would they consider taking the module? (Yes, No, Maybe)

- Most put yes, a few put N/A

Title suggestions?

- A way into the medical mind

Additional comments?

- Really thought provoking