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The Power of Conflict or Rhetoric and Poetry

Suzanne Riskin

College of Osteopathic Medicine, sriskin@nova.edu

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The Power of Conflict or Rhetoric and Poetry

Cover Page Footnote

Thank you for the opportunity to write this piece, share my thoughts and give a moment of gratitude for the grace that medical students show to others, attendings, patients and most importantly themselves.

Suzanne Riskin, M.D. is an Assistant Professor of Internal Medicine and Foundational Sciences at the Clearwater campus of KPCOM. She is interested in bringing narrative medicine to the curriculum because she is inspired by the works of her students.

She received her B.A. from The University of Pennsylvania and her M.D. degree from The University of Miami, Miller School of Medicine. When she is not reviewing physiology and academic medicine, she spends her time practicing the ukulele and cooking fish with olives, onions and olive oil.

ABOUT THE AUTHOR

SUZANNE RISKIN, M.D.

A decorative graphic consisting of several parallel white lines of varying lengths, slanted diagonally from the bottom right towards the top right, set against a dark green background.

The power of conflict or Rhetoric and Poetry

The first meeting of the underground, informal medical humanities student interest group started off on the third floor, in a room with a window facing the courtyard. The study rooms were visible if you crane your neck to see them. The medical students attending this meeting are in their first year since the second year of school at the Tampa campus had not begun.


We sit around the oval long table in the sparkling new room. The computer screen against the wall links the webcam with the main campus in Davie but it's not working yet. The wireless keyboard on the table serves as the control board. The white board seems huge, is empty, and there are no markers. There is not a scuff of shoes or scratches by moved chairs on the floor.

***“WE MAKE OUT OF THE QUARREL WITH OTHERS, RHETORIC,
BUT OF THE QUARREL WITH OURSELVES, POETRY.”***

W. B. YEATS

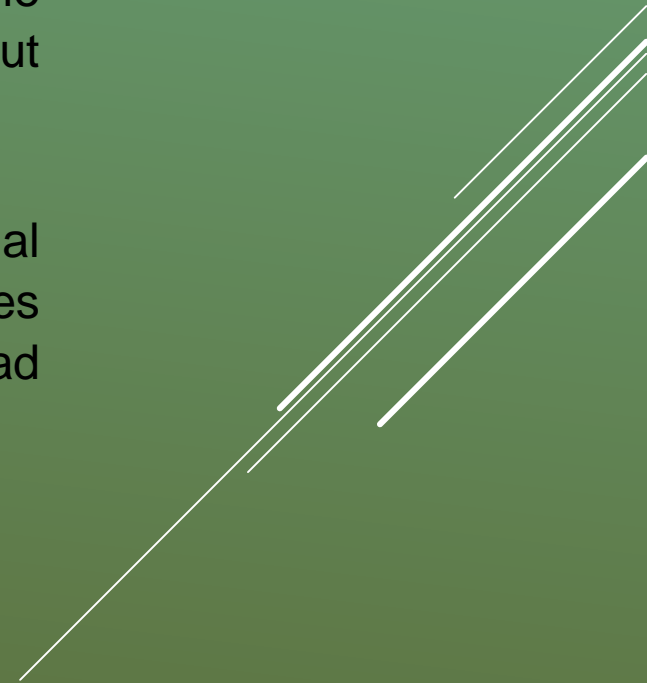
A couple dozen first year students clamor into the room and grab chairs. There are not enough seats for everyone. Standing room only is considered before they go into the room next door and borrow some chairs.

The book *On Doctoring* starts the conversation. I received the book as a first-year medical student, and it is full of stories, poems, and essays. I introduce the importance of drawings, photography, patient stories, and other expressions in the practice of becoming a physician and the importance of *art in medical education*.

The bottom right corner of the slide features several white, parallel diagonal lines that create a sense of movement and modern design.

Thirty minutes of free form writing begins shortly after we discuss the book. The students ooze their emotions onto iPads and papers. When they are finished, they look up. I remember that the first spoken comment from a participant was 'how refreshing it is to use the iPad for something other than talking or studying for an exam.' The entire group enthusiastically agrees. The room soon fills with their voices as they share their stories, reading them out loud.

Their stories are full of clinical observerships, family struggles, personal health scares, and racism. Their experiences fill the room as their narratives pour out from digital files and papers quickly sharing emotions as they read their works aloud.



Brittany wrote a piece on clinical experience and describes when a patient calls her *newbie*, and says it could be worse as he conquers stage 4 cancer. The patient conflict she experienced helped inspire her to conquer her self-doubts. The challenge/quarrel of cancer brought dialogue. Her persuasive speech of the patient landed on the pages of this medical humanities journal.

Katherine wrote about the struggle of a mother who watches her child overcome obstacles. She writes about the celebration of motherhood alongside the demands of a professional career.

Mara described feeling worthless as she observed, instead of engaged with her colleagues by not speaking up during a community rotation. She knew that her skills were limited and the medical world around her showed their lack of support.

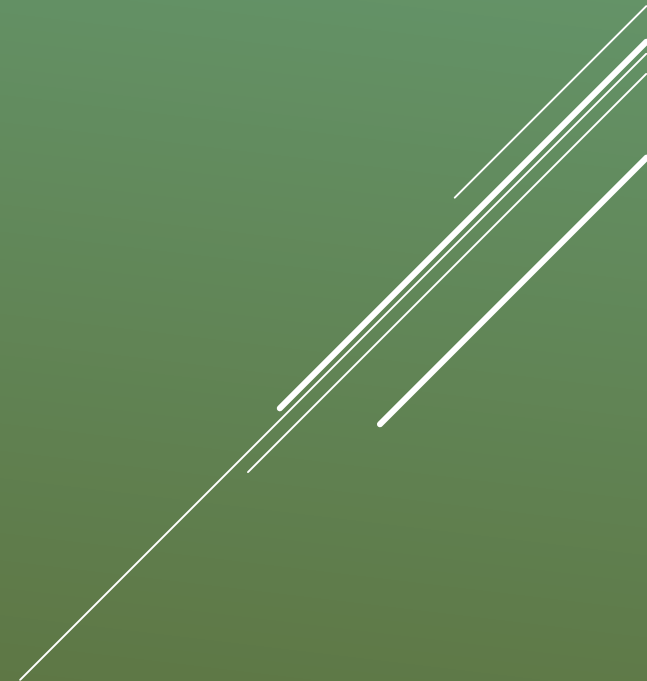
Dhruti discussed her own health.

Bryce shared his parade celebration.

Kristina wrote about a child who conquered life.

Elijah discussed “movember.”

I was in awe. Their raw emotions were eloquently expressed in that room. Although, external conflicts had been witnessed, internal conflicts were overcome, and their personal growth was demonstrated. Medical humanities is honest and a potent escape valve so that the practice of medicine does not eat us up.

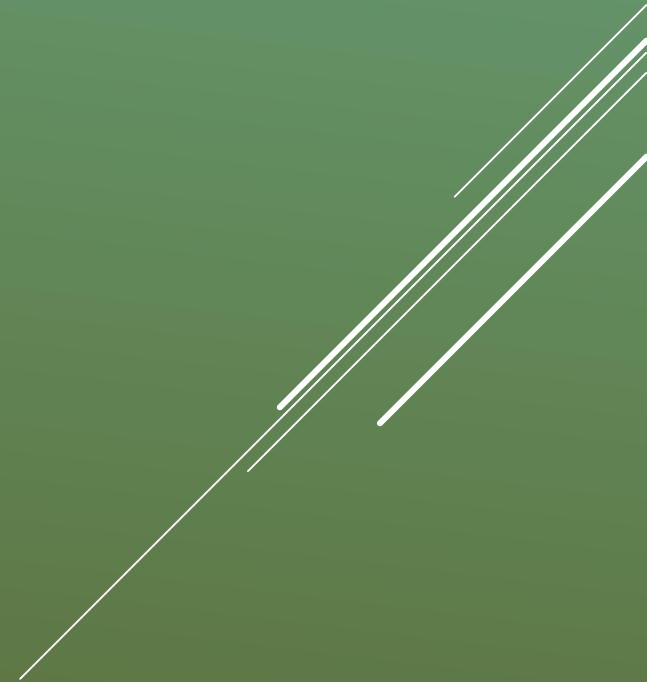


Medical education emphasizes effective speaking, persuasive speech, (rhetoric) as we observe patients navigate their illness. However it is *our shared humanity* that opens opportunities to express the internal quarrel. The daily struggle of illness is a challenge. That we all know. We watch our patients' expressions—study their eyes and their fear and take note of their worry and questioning gazes even before any news is given to them.

Patients answer our questions and bring conversation to us. We often study *how to listen*, we learn *how to hear*. We study *what to ask as we learn how to* rephrase for kindness. It's easy to practice what to say until the actual day we have to say it. Then the practiced words are questioned as we ask ourselves; 'Were they enough?'. We repeat the words again over and over, just to improve the skill in the *art of being human*.

The campus building now has scuffs. The walls have been painted again. Dry erase markers can be found. White boards are filled with lists of antimicrobials and systemic pathologies. The main campus is now easily linked to the campus in Tampa via webcams.

The new first-year medical students will arrive in the fall. It will be the first year we have all four classes. I look forward to the expressions of all.



I am grateful for the opportunity to write this piece, share my thoughts and give a moment of gratitude for the grace that medical students show to others, their attending physicians, patients and most *importantly themselves*.

Effective writing, speaking, and expression is easily born from a struggle with others. Our own internal battles emote themselves as prolific poetry.

Suzanne Riskin

AUTHOR'S STATEMENT

