New perspectives in Medical Humanities

Deborah Bowman

It is a pleasure and a privilege to be able to introduce this guest-edited edition of *Medical Humanities* on the theme of the ‘Critical Medical Humanities’. The issue is the result of outstanding leadership by William Viney, Felicity Callard and Angela Woods who have demonstrated their commitment to both intellectual originality and unforgiving editorial deadlines throughout the process. Their work has brought together a collection of papers that are exciting, stimulating and engaging.

There are a number of ways in which this special edition offers rich, and perhaps new, ways of conceptualising and contributing to the field known as the medical or health humanities. The first noteworthy point is the identities of the authors and the way in which they were persuaded to become involved in writing for this journal. Many of the authors are at the earlier stages of their academic careers. A significant number of them might not have considered themselves as working in, or having a relationship with, the ‘medical humanities’.

Yet, thanks to the imagination and the inclusive approach of the team at Durham who have guest-edited this issue, these scholars were encouraged to reflect on whether and how their work might inform and enrich the medical and health humanities. In so doing, not only have we benefited from fresh perspectives and new (to this title) writers, but something more fundamental has occurred: the landscape itself is altered and altering.

So, it is that the boundaries of medical humanities have become more fluid and broadened. The diversity of content in this issue is remarkable. The scientific claims and methods of biomedicine are the subject of Slaby’s paper on critical neuroscience and Goffey’s exploration of uncertainty in immunology. The political and social dimensions of health and its systemic organisation receive attention in Friedli and Stearn’s paper on workfare and the medical humanities and in Parry’s consideration of global clinical labour. Chen’s original interrogation of the notion of ‘toxicity’ leads ultimately to a fundamental challenge to the nature of research itself via creative engagement with questions of economics, disability and race. These are papers that push at the boundaries of what it is to be part of, and to contribute to, the medical humanities. Their authors are often affiliated with disciplines and in departments that would not necessarily have been considered as working in our field, yet each paper demonstrates the inestimable value of seeking out those who see an area of inquiry or question from a different perspective. For it is in such contributions that we find innovation and stimulus for the continuing development of medical humanities as an important and dynamic place to be.

There is more to celebrate in this issue than the range and identities of the contributors. The ways in which the guest editors both facilitated participation in the issue itself and created space for diverse perspectives should also be noted. The papers published in this edition emerged from a symposium hosted by the guest editors’ institution: the Centre for Medical Humanities at Durham. That symposium from its call for participation to its outputs was characterised by an openness of approach and an ethos of inclusivity. The deliberate involvement of a wide range of participants and the careful creation of a programme that allowed space for meaningful response created an ongoing culture of reflection and collaboration which has, in turn, set the tone for this edition of *Medical Humanities*. Each original paper in this edition is followed by a response piece. These papers and responses are significant both in terms of the discussants and the content of the conversation. We offer them to our readers in the hope that they too may wish to contribute and that there will be further response and discussion.

This issue also represents a challenge to the notion of what it is to be ‘critical’. In their essay, Viney, Callard and Woods suggest that the concept of ‘entanglement’ is more enriching and valuable than equating what it is to be critical with being antagonistic. Critical medical humanities offers a way that moves beyond dependence on, or opposition to, medicine and the practice of healthcare. It is a flexible and cross-disciplinary approach that seeks out the unseen and explores areas that have, until now, been overlooked, disregarded or otherwise unconsidered. In so doing, it necessarily invites contributions from those who are ‘new’ to the medical humanities.

This issue then represents something significant in the journal’s evolution: it is a challenge and a shift in what the title has done before. It is challenging the boundaries and landscape of medical humanities and it is shifting the ways in which we work together and our scholarship might develop. It is an issue that is as much about academic leadership as it is about disseminating interesting research per se.

As a journal, we are keen to continue to lead, to challenge and to influence. We believe that the way to achieve those aims is to continue to seek out and to encourage innovative ways of thinking and working. We want to encourage collaborations and to foster imaginative approaches to the widest range of questions and problems. To that end, we have made two decisions.

First, from 2016, *Medical Humanities* will be published four times per year allowing us the space and presence to make a greater impact and to share more outstanding work from a wider range of authors. Second and as a result of increasing the frequency of publication, we are intending to publish more themed, special and guest-edited issues. It is gratifying that we have already received a number of fascinating proposals for special and guest-edited editions of the journal. We are, of course, open to more suggestions and ideas. Our contributors and our readers have always been the mainstay of the journal. We are looking forward to a renewed and more active relationship with you.

For now though, it remains only to thank Will Viney, Angela Woods and Felicity Callard for their vision and commitment in proposing and guest-editing this issue of *Medical Humanities*. It is an edition to savour.

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Correspondence to Professor Deborah Bowman, Institute of Medical and Biomedical Education, St George’s, University of London, London, UK; dbowman@sgul.ac.uk