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Meditations in an Emergency: Collaborating Online in Narratives of Illness and Care

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Abstract: This article describes a collaborative writing project involving narratives of health and caregiving. An interdisciplinary seminar titled “Narratives of Illness and Care” examines literary and medical narratives to better understand disease, therapeutic communication, empathy, and the social determinants of health. During the COVID-19 crisis, however, the instructor adapted course structure and curricular assignments to help students make meaningful connections with their immediate circumstance. The author reflects on the significance of the project during a time of global upheaval and suggests changes for future iterations.

Keywords: COVID-19 pandemic; collaborative learning; narrative medicine; empathy in education; University of Tennessee at Chattanooga (TN)—Honors College

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In fall 2019, Kelli Hand and I proposed an interdisciplinary honors seminar titled “Narratives of Illness and Care.” This course analyzed literary and medical narratives to better understand disease, therapeutic communication, empathy, and the social determinants of health, fulfilling general education requirements in either literature or natural sciences. Our proposal was accepted in spring 2020, to be taught the following year, and we agreed to put course planning aside until after the spring semester concluded. Just before spring break began, though, cases of COVID-19 became impossible to ignore in the United States. The nation attempted to mitigate the rapid spread of the virus that would soon overwhelm medical facilities and lead to emotional

and economic devastation by “flattening the curve” through social distancing. Schools were moved online, businesses closed their doors, and millions adjusted to working from home, were laid off, or were permanently terminated from their positions.

As case numbers grew, it became clear that our course would also need to be delivered mostly online, synchronously, with discussion taking place in virtual grids on brightly lit screens. This terrain was new for the two of us, as it was for many, and we were unsure how a course we hoped would create a safe space for students, to which they could bring personal insights from their interactions with the medical world, would transfer to the often alienating virtual environment. With these new challenges, I began thinking of ways to build more material connections with one another to combat isolation. What resulted from this effort was the creation of a class anthology of personal illness narratives written, organized, edited, and designed entirely by students, subsequently “published” by our university printing office.

While Hand guided students through the process of writing a scientific research paper, I was in charge of leading them through the narrative project. The thirteen students enrolled in the class represented a range of knowledge from diverse majors, including creative writing and nursing but also finance, entrepreneurship, psychology, anthropology, and women, gender, and sexuality studies. To prepare this diverse group, we first discussed the formal, thematic, and linguistic choices writers make in representing something as nebulous as the experience of illness and pain. Two longer works—Paul Kalanithi’s *When Breath Becomes Air* and Anne Boyer’s *The Undying*—launched these inquiries. Both texts recount the writers’ experiences with cancer, but their approaches are quite distinct. Kalanithi uses a linear chronology, beginning with his early childhood and proceeding to his vocational successes in neurosurgery, his eventual lung cancer diagnosis, and his subsequent reprioritizing of his life goals. The narrative brings us to his death, with an afterword written by his widow, and is philosophical and elegiac. Boyer’s narrative, in contrast, is fiercely political, critiquing a culture that profits from the pain of others and an economy that pumps cancerous toxins into the environment. She experiments with temporality and structure to replicate the disorientation she experienced undergoing treatment for breast cancer.

Discussions of these longer texts showed students the ways that form can reinforce, challenge, or otherwise complicate narrative meaning. Shorter pieces, which allowed us to explore a fuller range of topics and structures, included Lorrie Moore’s short story “People Like That Are the Only People

Here,” Leslie Jamison’s essays in *The Empathy Exams*, and Esmé Weijun Wang’s “Yale Will Not Save You,” an exploration of how universities limit access for neurodiverse students. The academic monograph *Narrative Medicine* by medical doctor and literature scholar Rita Charon provided the theoretical underpinning of the course. Patients listing their ailments are acts of narration, stories of the body, and Charon argues that medical practitioners benefit from cultivating attentiveness to these stories by using the analytical skill of close, critical reading. Building attentiveness to these aspects of narrative helped students develop nuanced understandings of the experiences of others. Miriam Marty Clark writes that reading closely and critically results in the development of mature, contemplative “moral reasoning” and a “prosocial orientation” (151), while learning how to notice and interpret detail through close reading “help[s] students move from reflexive responses to reflective engagement with the world” (153). As my students read the experiences of others with more attentiveness, even when the experiences were very different from their own, they developed a greater understanding of the ways their stories were also situated in specific contexts.

While they read these texts, I encouraged students to treat their own stories with the same attention to language and form. Developing skills in close reading accorded distance from which to think more abstractly about their subjective experiences. As they began drafting, students used the discussion board to share pre-writing and ask preliminary questions. They knew that their stories would be shared with a wider audience of their peers and that they could fictionalize them to protect their privacy. Taking advantage of online learning’s potential to access multiple places simultaneously, I also invited a creative writer who publishes on illness and the body to join us from South Carolina to conduct a virtual workshop, and she led students through two free-writing exercises that produced new perspectives on their stories. Once the students drafted their essays, received feedback, and integrated desired changes, we began the bookmaking process.

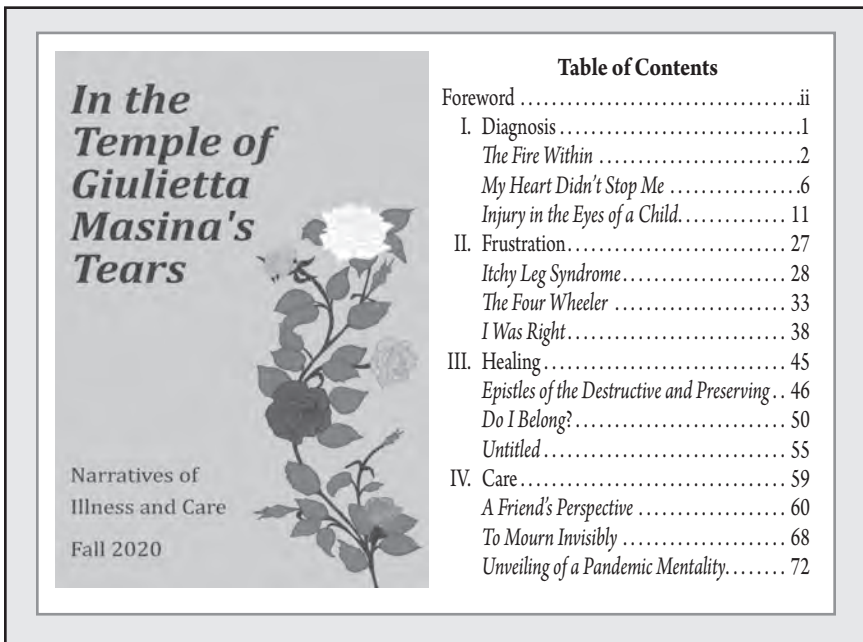
Students were divided into two teams, editorial and design, for which they self-selected based on their perceived skillsets. The editorial team was responsible for lightly editing the essays, creating a collection title, and developing a coherent table of contents. The challenge of this role was to synthesize each story and construct an order that did justice to individual pieces and how the collection would unfold for an outside reader. In a shared document, the team summarized the major themes of each story and grouped them under the subheadings “Diagnosis,” “Frustration,” “Healing,” and “Care.” This structure

provided an organic master narrative of the stages of illness and demonstrated their internalization of the importance of structure. The title, *In the Temple of Giulietta Masina's Tears*, refers to a section from Boyer's *The Undying*, showing that the course reading informed the conceptual basis from which the project grew.

The design team then assembled the collection, provided original illustrations for the cover and individual sections, and generally made the book look professional and consistent in its font, spacing, pagination, and margins. Their challenge, beyond these technicalities, was to make sure that the book communicated visually what the editorial team had developed in language, a process of translation. With soft, minimalist illustrations peppered throughout, the design team successfully produced an artifact that matched the general tone of the stories contained therein (see Figure 1).

Because I wanted the students' work to yield something material, I applied for and received a small grant from the Walker Center for Teaching and Learning at my university to print the books. The design team and I reviewed their printing options and the budget together. Other than liaising between the design team and the printing office, which involved communicating students' ideal design specifications, managing the budget report, and

FIGURE 1. NARRATIVE BOOKLET COVER AND TABLE OF CONTENTS



providing class time for students to work together, my role was minimal. Students kept in contact outside of class to finish the project through GroupMe, a group text messaging application. In total, the project took three weeks to complete—a week for each team to work together, and a week for printing and distribution.

The impulse might be to grade a project like this that represents a culmination of what students learned, but I chose instead to de-emphasize the evaluative component and allow students greater ownership and creative control over the final result. I approached this effort in the spirit of “ungrading” (Newton et al. 41); as Jeffrey Schinske and Kimberly Tanner argue, “Grades appear to play on students’ fears of punishment or shame, or their desires to outcompete peers, as opposed to stimulating interest or enjoyment in learning tasks” (161). Honors students are often grade-driven, in part because of GPA requirements and similar institutional structures, and I did not want to bring this concern to their shared work in a pandemic year. Instead, I wanted to provide structure for collaboration on a project that gave value to their words; the rest was a result of intrinsic motivation and peer support. After a semester of discussion on the healing powers of narrative, they were primed to take great care of their peers’ words and needed no additional incentive to work together.

This project was successful for several reasons. It appealed to two high-impact educational practices: the course was already writing-intensive, and the collaborative nature of the project allowed students to work with that writing in new ways (Kuh). Students understood their writing not only as a document to be evaluated by an instructor but as a text reaching a wider audience, which resulted in riskier creative choices and more careful editing—essentially, better writing. Adam Watkins and Zahra Tehrani discuss in a recent issue of *Honors in Practice* the virtues of creative writing assignments as pedagogical tools that offer “an inclusive and synthesizing intellectual arena” that “challenges its practitioners to explore the interconnections between the world of ideas and the world of our lived experience; it privileges complexity, ambiguity, and the ongoing development of new questions” (33). Students took advantage of the creativity and freedom afforded to them through this open-ended project, experimenting formally with linearity, fragmentation, stream-of-consciousness, and diary-style confessional; one student even wrote and illustrated a children’s book. They also felt empowered to showcase talents not fully captured in a traditional reading- and discussion-based seminar. I became aware through this project that several students were

visual artists, had previous editorial experience, knew about book formatting, were technology-savvy, or were skilled in group leadership and project management.

Most importantly, the process of building the book together provided a way to build community through peer support and encouragement. Throughout the semester, we discussed empathetic listening and the value of story; this project put those concepts into practice and honored their stories through the careful attention that students gave to one another in the book-building process. As we discussed the concept of care abstractly, creating the book allowed students to practice caring for one another's stories. Students told me directly that they had grown to care for each other, but their deepened connection is best shown in their independent request on our last day that everyone read their favorite passage from someone else's story. What resulted was a feeling of camaraderie. Students openly expressed gratitude for the vulnerability of their peers, commented positively on one another's stylistic and formal decisions, thanked one another after every reading, and a few even got teary-eyed to hear their stories read by someone else. For a moment, it hardly felt that we were separated by the mediating screen.

In the future, I will plan to have students submit a short reflection on the process of making the book. It did not seem fair to ask this of them last minute in an already stressful semester, though we reflected verbally together on its impact. Workload distribution did not seem to be an issue with the small group of students I taught, but I would also ask students to state specifically their roles in the project for accountability. Overall, students expressed strong appreciation for what the project gave them: a way of making the course content resonate in embodied ways that promoted creativity and connection without the mental duress of another graded assignment that produced a material artifact of their work in a steadily virtual semester.

I also asked on the last day of class what the students would remember from the course ten years from now. Most said they will never forget that they took a course on illness during a global pandemic. The closeness of the content to our shared reality was always there, sometimes explicitly, sometimes a specter. As the nation mourns, and occasionally dismisses, the hundreds of thousands of Americans who have been taken by this pandemic, what is often missing in media coverage is the human story, perhaps because stories can be dangerous to status quo thinking, powerful agents of persuasion, commonality, and solidarity. A story's specificity, its human touch, is a necessary tool for understanding; without it, we have lost even more than we realize.

We ended the course on a positive note: their essay collection concluded with the categories “healing” and “care,” and as I write this, frontline health-care workers are being vaccinated against COVID-19. Better days are ahead, and while stories can shatter our illusions, articulate our pains, and give shape to our sorrows, they can also heal. As Rita Charon writes, “all that we suffer unites us, and the more deeply suffered, the more irrevocably united” (234). Despite our digital divide this year, through the students’ collaboration, willingness, and optimism, we were together.

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