

The Longview

Journal 2018

Front Cover: "Anxiety" by Alison Marshall
Back Cover: 'A Note on Art' by Sarah Wall

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Dear Reader,

The Longview is a collection of art, poetry, prose, and video created by healthcare students in the Calgary area. Our vision is to create an inter-professional space where art, literature and medicine intersect, through the unique perspective of the student on their educational journey. The Longview was established in 2014 by a group of medical students at the University of Calgary's Cumming School of Medicine and is entirely student-run.

This year's issue features work from students in the fields of respiratory therapy, occupational therapy, nursing, and medicine. In the first section, Resilience, we discover that the educational journey is one fraught with personal challenge. We are inspired by our colleagues and by our patients, who display so much resilience in the face of tremendous suffering. As healthcare students, we are privileged to hear our patients' narratives, through all the ups and downs of life, as displayed in Journeys. While we learn about the myriads of ways in which social determinants of health and inequitable societal structures impact our patients, we discover that our own educational journeys are also affected by hierarchy in Power and Privilege. And as we seek to bring healing to our patients and in some small way, share in their suffering, so are we changed, and Enlightened, in our turn.

We would like to thank our faculty mentors, Dr. Monica Kidd and Dr. Tom Rosenal, as well as our entire peer-reviewing and design team, for all their counsel and hard work. We would like to thank the authors and artists who have so vulnerably shared their pieces with us. And most of all, we would like to thank our patients, who continually inspire us, teach us, and encourage us to continue along this path together.

--Jonathan & Hamna
Longview Co-chairs, 2017/2018



Sandy Ly



Ainna Randhawa



Jonathan Craig



Hamna Tariq



Emilee Anderson



Sean Doherty



Cam Matamoros



Aiswarya Madhu

A word from Calgary Medical School's Writer In Residence:

I recently attended a lecture in which a cardiologist compared the human heart to a toilet. This sounds simplistic, doesn't it? Demeaning, somehow. A skeptic might ask: How could the very core of our powerful, precise bodies resemble, in any way, a porcelain apparatus that swirls away human waste?

To this skeptic, I say: Consider the analogy. Its unique ability to transcend description, to illuminate. This literary device brings a fresh dimension to our understanding of the blood-pumping organ. Consider the rise and fall of liquid, the pressure within tubular containers, the efficacy of a system, and the absolute necessity for public sanitation. Consider the brilliance of the toilet.

Sitting in the Libin theater, I felt a rush of connection between humanities and health, prose and pedagogy – the same connection that led to the creation of the writer-in-residence role at the Cumming School of Medicine.

The works that follow demonstrate the power of art and literature to explore, expose, incite and provoke. They do not shy away from the “echoes breathing behind your eyes” (Gurleen Chahal); rather, they hurl themselves, trembling with courage, into the most complex questions of medicine and the larger human experience: Why are we immune to the plight of the vulnerable? What lies in the chasm between life and death? How can we reconcile the beauty of the human body with its frailty? Which careers are worth their weight in stress? These weighty questions might make a skeptic wonder what poems, prose and visual art can really say about such vital issues.

One might just as easily ask: How can the humble toilet represent the human heart? Which is another way of asking the question raised by occupational therapy student Sarah Wall: What does art have to do with medicine?

The answer, as stated so elegantly in the pages that follow, is: Everything.

Jane Chamberlin

Writer in residence, Cumming School of Medicine

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RESILIENCE

“We may encounter many defeats
but we must not be defeated.”

- Maya Angelou

Mr. Axel



Artist: Victoria Michalik

Medium: Oil on Canvas

School: University of Calgary, Faculty of Nursing

As a Registered Nursing Student at the University of Calgary I experience a demanding degree combining both theoretical and clinical learning. As a young healthcare professional it is important to take care of yourself so that I can take care of others. To destress when I come home from a busy day or shift, I spend time with my Golden Retriever, Mr. Axel, who was the inspiration for my painting. It is important to find a balance between work and play and I use art as well as my dog to relax and shake off a bad day.

When the doing, being and becoming get tough

I could try medication, my physician said, as she proceeded to list off possible side effects.

Anything was worth it if I could claim my spirit back.

I was doing schoolwork, always.

I was being a student, always.

I was becoming depressed and anxious, always.

Sometimes the battles you face to reach your goals are not the ones that you anticipate.

“I experienced a loss of joy and self-doubt seeped deeper and deeper into my brain. It will pass, I told myself.”

I tried listening to positive affirmations, keeping a gratitude journal, meditating, reframing my thoughts.

Relief did not come.

How would I be able to handle a professional Master's program and career as an occupational therapist if I could not handle applying to Master's of Science in Occupational Therapy programs?

In hindsight, I was being a tad hard on myself, but that's part of the illness. I was also finishing my undergrad online, while working part time as a rehabilitation assistant.

The sense of uncertainty in both the effectiveness of treatment, and in my educational and vocational future became the underline of my thoughts.

'Worry' pales in comparison to the saturated spectrum of negative and questioning thoughts I had begun to experience much of every day, beginning around 4:30 AM.

My mind magically started coming up with possible negative situations that I might encounter. These situations would require problem solving.

And then there I would go, questioning my ability to problem-solve my way out of an imaginary situation, eventually coming to the conclusion that I would not be able to figure it out.

This was a cycle that eroded my self-confidence.

The part of my brain that keeps me alert to potential dangers was like a child who had been given an excessive amount of candy, resulting in uncontrollable, destructive energy.

So, this is what anxiety feels like, I thought to myself.

I remember telling my mother that I didn't think I would apply again if I did not get in. I simply couldn't fathom going through it all over again. I had lost all sense of self-efficacy.

I could see her surprise and feel her disappointment. I had not yet told her how I was feeling. She must have wondered what had gotten into me.

Would I ever be my normal self again?

With gratitude, I can say I am.

Within a few weeks, I was starting to feel the medication's effects. Within a couple of months of pharmacotherapy and cognitive-behavioural therapy, I felt completely like myself again.

I feel like I got off easy. I could have had it much worse.

I give myself some credit for getting to the doctor and telling her I needed help.

It took me time to do so; I delayed the dreaded phone call again and again, but one day I had had enough.

It was harder than it should have been.

Why?

Stigma. Social and self-stigma.

But, my education in mental health empowered me to fight the stigma and reach out. I knew that stigma could be a barrier for individuals to get help, and that early detection and intervention is important for recovery.

Not everyone is fortunate enough to have such an education. This is a problem.

From this experience, I learnt that depression runs strongly in one side of my family. I did not find this out until I discussed my issues with my mother. Why? Because even depression, one of the least stigmatized of mental health disorders, gets hidden, even from family.

I also learnt what my limits are. I guess I had to learn this the hard way.

Taking days off is not something to feel guilty for. Should I have taken days off from work? Yes. Should I have taken days off from school? Yes. Would this have made me feel even more guilty, anxious and depressed? Yes. Do I now take days off to prevent getting to that point? Yes.

Thanks to the help of my physicians, the support of my friends and family, and my own efforts, I overcame that obstacle. I feel extremely grateful for this, and for the fact that I did end up getting accepted into one of the programs. I'm now in my first year of my Master's of Science in Occupational Therapy at the University of Alberta. I plan to work in mental health one day after I graduate.

Author: Jenna Zedel

School: University of Alberta, Calgary Campus, Occupational Therapy

Credit is due to Ann Allart Wilcock, an occupational therapist, for the phrase of "doing, being and becoming." I would also like to acknowledge Kathy Hatchard for inspiring me with her story of doing, being, and becoming and mental illness. Hatchard, K. & Missuna, C. (2003). An Occupational Therapist's Journey Through Bipolar Affective Disorder, Occupational Therapy in Mental Health, 19(2), 1-17.

Anxiety



Artist: Alison Marshall

Medium: Special Effects Makeup

School: University of Calgary, Cumming School of Medicine

My struggle with anxiety has been an important part of my medical school journey. This piece, for me, is how my internal anxiety would look in picture form.

Eyes of the Alley

Poet: Gurleen Chahal

School: University of Calgary, Cumming School of Medicine

I sit on the edge of a very busy street.
You walk by, too polite to consider me.
Or you see the sign in my hands and roll your eyes,
toss me coins and a smile, then get a job implied.

I had one, I could respond, where I held different things.

I once held a different post, offshore.
It promised glory, but it paid in gore.

**It decorated me with honors...
what poor armor for horrors.**

It gave me brothers and sisters, just to take them away.
A corpse's hand is cold: now there's a lesson that stays.
Like I said, I once held different things.
Your bright-eyed child that you push away from me,
he points to a toy in the shop that he wants to see.
I remember a boy pointing a toy with a trigger.
You smile at your child and guide him with vigor
away from my cardboard home and concrete pew.
How uncanny, I used to smile and walk too.

I hold my vigil, while withering your silence and your spit.
Do you wish I had come back in a casket?
Funerals are cheaper – quicker – than what I need from you.
Though after consideration, and a sniff of dust or two,
I realize I didn't come home. That much is clear.
Yes, most of my body, it wound up here.
Yet my soul lies in exile on a hill,
busy burying a boy I shot to kill.

Like I said, I once held different things.
So you walk away, your back turned to me.
But remember those steps you take for free
I bought with blood - not always mine.
And those are the beasts that terrorize my mind.
How do you escape echoes breathing behind your eyes?
You can't. Surprise.

Your boy waves to a friend from school
Sometimes I visit my friends too.
I talk to them, reminisce over bonds forged in trenches.
They never respond, even when my fist clenches.
I scream yet they're calm, expressions the same.
In the curves of letters inscribing their names,
if I squint with blurry eyes, I can see their smiles,
but only sometimes, maybe once in a while.
Row upon row, they lay like we marched, just under wood.
Their purple hearts will never beat. I wish they could.
My siblings lay quiet, still.
It is a lonely, bitter pill.

Like I said, I once held different things.

I drink to deafen screams, scenes, sounds you don't hear.
I remember tick tick "Bomb!"; it's forever clear.
Excuse me for muddying memories the only way I can.
When I signed my name, this wasn't the plan.
But you don't recall that badge I wore,
only judge me by this bottle I hold.
My sacrifice never ends, neither does your scorn
for dirty hair, stolen carts, and clothes left torn.
I go to higher places, pay steeply per powdery pound,
so clouds cover what you asked me to do on the ground.
So much higher than chunks of friends (whole bodies never
to find).

So much higher than dead eyes on a hill (they blink in my mind).
The boy had no name, that makes it worse.
“Mercy, mercy!” That is my curse.

A sudden noise; red and gold blazes scar the sky.
Your boy laughs. I might cry.
These ones sparkle and shine,
but I knew a different kind.
He’s on your shoulders, hands seeking booming blooms, smiling.
I notice the symbol circling your neck, it’s glowing.
I can’t pray anymore. My fireworks took my leg and robbed me of believing
that there was someone out there, who would actually hear me.

Like I said, I once held different things.

They gave me a badge, and it shone so bright,
I was blind to my actions until the hill set me right.
A bit too late, on my way back was a boom.
Karma came quick, I thought here be my tomb.
Instead my eyes opened, not those of my squad, my crew.
I woke to a woman in white singing, “let us help you.”

She flew me away with a “you aren’t to blame.”
And when I stepped off my final ride on a plane,
they called me lucky. I got a map to a sterile door.
Then they left, leaving me to a different war(d).
I’ve survived hell, don’t you dare call my mind weak.
“Talk to me” you say, easy smile pasted between cheeks.

**But talking triggers the heat of battle and maim.
I’d sooner know alleys, than refuel those flames.**

Summer streets stink of sewage and smog (a city overcast),
while winter tastes of burnt trash (furnace for the outcasts).
At dawn I shake off the smell of smoke, sweat, and gunpowder.

At dusk I blink and see charred flesh dancing between
flickers of copper.

Hidden paths and backways, the vessels feeding a city after
dark.

Deals done, brawls won, cheap secrets for sale in your boy's
favored park.

Your freedom was expensive, not easily made,
a cost you forget because you didn't pay.

Greedy and eager for riches abroad, I hear.

Lest we forget - you remember one day a year.

But I can't forget, the pain doesn't cease.

I knew war, I will never know peace.

And that red flower was really very pretty, I'll admit.

But after November, it's a pinhole in a jacket
and pieces left fallen in the slush on the street
under the pitter patter of your boy's feet.

**Here is a message, spoken cleanly for you:
plastic petals break easily. People do too.**

Chilled fingers crawl over my skin in time with the moon
inviting me to a place the memories cannot chase me to.

I am scared of their pull, the destination is a mystery.

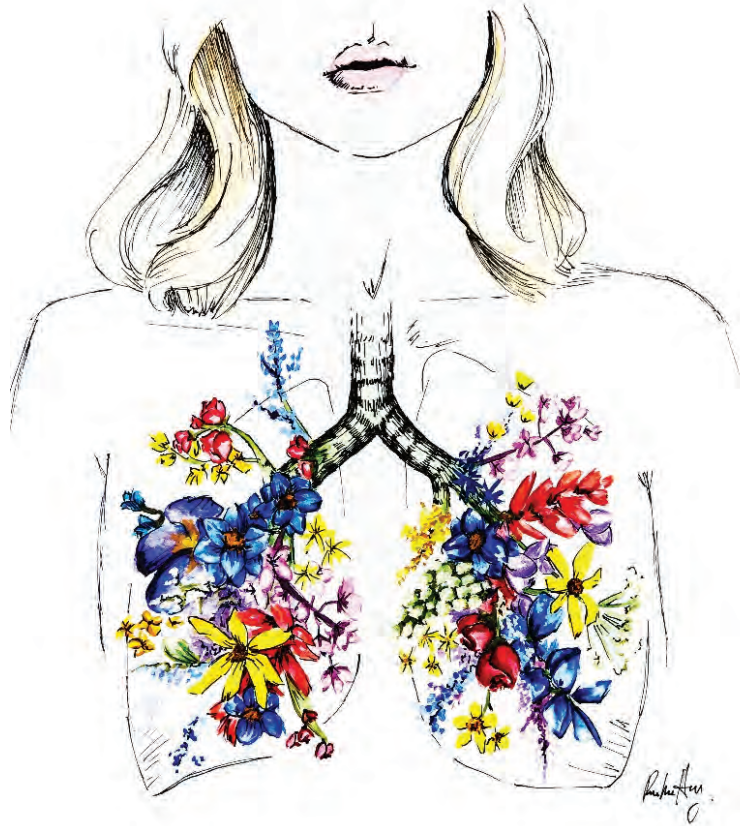
Which direction will these phantom limbs take me?

I fear that down is their will
remember boy on hill?

So I remain fixed (yet crumbling) on cement that stains cold,
asking not for a handout, just a warm hand to hold.

This poem was inspired by a clinic visit from a war veteran with post-traumatic stress disorder (PTSD), who experienced a period of homelessness. Although not as severe as in the United States, the number of homeless war veterans in Canada is growing annually. This is true despite the valiant efforts of organizations such as Veterans Emergency Transition Services Canada, which focuses on identifying and assisting homeless veterans. Veterans have increased vulnerability to substance abuse disorders, post-traumatic stress disorder, traumatic injury, suicidal ideation, anxiety and other mental health disorders. As future physicians, it is important that we learn how to tactfully and sensitively discuss veterans' experiences with them, become informed on how to screen for conditions to which they are most susceptible, and learn about the resources available for them in Canada.

Breathe



Artist: Rebecca Hay

Medium: Watercolour and ink on paper

School: University of Calgary, Cumming School of Medicine

"...If you're still breathing, you're the lucky ones. 'Cause most of us are heaving through corrupted lungs." – "Youth" by Daughter

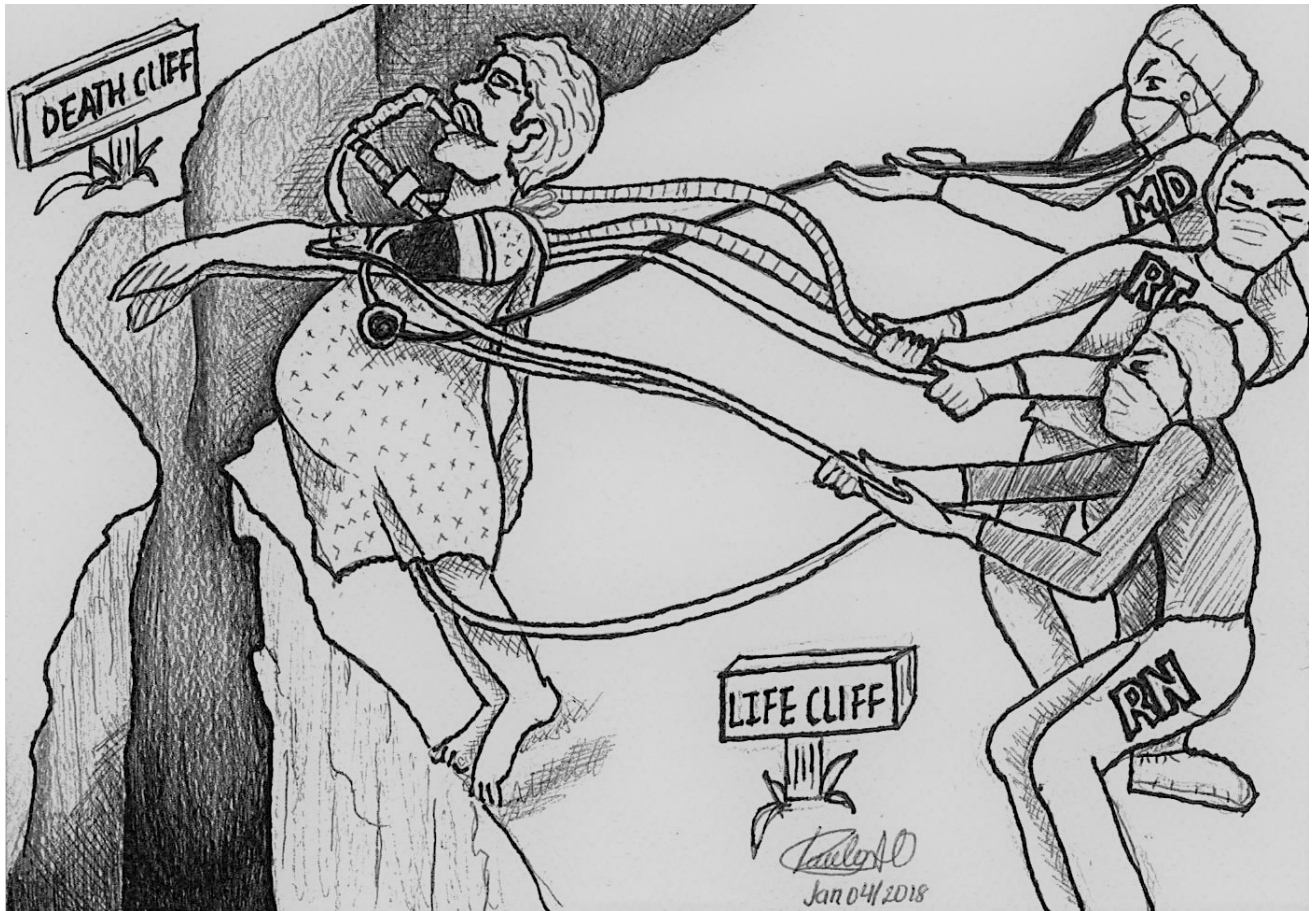
This was the first illustration I completed in a series of anatomical paintings. At the time I made this, someone very close to me experienced a life-altering trauma. Bearing witness to their pain, and feeling helpless to alleviate their suffering, is what drove me to create this piece. This piece is meant to convey that horrible crushing feeling in your chest and shortness of breath when reliving trauma on the path to recovery. Until, one day, you might wake up, and suddenly breathe a little easier.

JOURNEYS THROUGH LIFE

“To know even one life has
breathed easier because you have
lived. This is to have succeeded.”

- Ralph Waldo Emerson

Between Life and Death



Artist: Paula Ospina

Medium: Ink on paper

School: Southern Alberta Institute of Technology, Respiratory Therapy

This art piece reflects my student experience in the Emergency Department. In the Emergency Department patients may be in imminent danger of death. Death is shown in this picture as a dark abyss. Once the patient has fallen from the cliff, there is no way back. Life and death situations require a team effort to keep the patient alive. Here, the team is represented by the three people (the RN, the RT and the MD) holding the lines and keeping the patient from falling into the abyss of death. As health care professionals, we rely on each other's knowledge and experience to stabilize the patients. We do our best so that our patients can share additional moments with their loved ones.

Dive

He dove back into the water. He opened his eyes and watched the world around him. It was strange how tempting the clear water was from the outside. It was pure. It was calm. It seemed counterintuitive that the water was crystal clear when looking in, but only a blurred haze underwater. Nonetheless, the light reflecting through the crystal blue was beautiful. It was compelling to stay in this state; everything was finally quiet. All his problems were forgotten. Unfortunately, evolution got humans wrong. Humans were not created to breathe underwater. It was where they suffocated.

~~~~~

The noon hour sunrays glared through the blinds. His head pounded with the beat of his heart. He slowly rolled over to his side and squinted into the dull gloom of his apartment. Immediately, the glaring vodka bottle came into view. He shook it a little, though it was hard to say if he really added strength to the motion or if it was the trembling of his arm. There were a couple of ounces of the untainted liquid sloshing around the 26 oz. bottle. Strange, he thought, it was full yesterday. He shrugged off the thought and downed it. He felt like he spent more than half of his life underwater. He needed a couple more shots in the morning to cure his shakes and headache. Fortunately, all of this was part his job – he head-hunted for the swanky oil companies, which meant he made the parties. He socialized, ate steaks and toasted to the newcomers. This lifestyle suited him.

**He heard the quiet rattle of keys at the door. In came the hazy outline of his wife. She saw he was half-awake.**

“Hey, Honey, I went out to get some food. You came home really late last night and passed out. I’m glad that you’re off for a few days now. Remember what we agreed to do last week?” She chattered happily.

He couldn’t think past his now throbbing headache. It seemed to show on his dumbstruck expression.

She walked over, helped pull him up and gave him a peck on the cheek. "We decided to go cold turkey – a cleanse of sorts."

Pieces of his memory were coming back. He remembered that day. They were snuggling on the couch watching whatever was on, but, in reality, he was really looking at her in his arms. He remembered her warm body against his, their jokes and laughter, sharing a glass of wine together.

**She was always worrying about his drinking habits. Vodka was his siren – it helped him avoid noticing the broken pieces of his childhood, and it eventually became a crutch.**

He drank to forget, but he'd never wanted to forget her. He would do this for her.

~~~~~

He swam large strokes towards the surface. He saw the light above, but just couldn't reach it. The air clawed its way out of his lungs. His whole body convulsed. He saw her through the water. Even through its nebulousness, she looked frantic. He saw her lips move and the mascara tracks down her cheeks. She was so beautiful. Then her skin grayed and her teeth and jaw elongated and sharpened. Her kind brown eyes deepened into their sockets, until sagging black holes gaped back at him. It reached out to him and he tried swinging back. He fought and flailed with his uncoordinated, heavy limbs. He was sinking back down where the darkness claimed him. He heard a sigh in the depths - a mere whisper of "I love you" penetrated through his deafness.

Author: Jenine Yee

School: University of Calgary, Faculty of Nursing

A Tale of a smoker's heart and lungs



Artist: Stuti Gupta

Medium: iPad software (Airbrush, Markers)

School: Southern Alberta Institute of Technology, Respiratory Therapy

I wanted to do an awareness poster on the effects of smoking on both the heart and the lungs. Many people who smoke don't know that nicotine and tobacco not only have effects on the lungs but also on the heart and that's what this painting aims to show- by contrasting bright coloured heart against the dull lungs. The lungs of a smoker appear dull and black due to lack of ventilation and perfusion to lungs as the alveolar sacs start to collapse and also massive accumulation of scavenger cells that phagocytize impurities in the alveolar spaces. In the lungs above, nicotine sediments are also visible which causes airway obstruction and inflammation, eventually leading to chronic bronchitis and emphysema. The brightly coloured heart shows narrowing of the blood vessels because of fatty plaque build up and the thickening of the heart wall which makes it difficult for the heart to pump blood effectively. As a respiratory therapist, it is our job to educate people and spread an awareness of the side effects of tobacco smoking as it is an underlying cause of many cardiovascular diseases.

Dum Spiro Spero

I remember the day quite vividly. It was the afternoon after the last final exam of my grade 10 year, my first year of high school. I had briskly returned home following the exam, and taken a short nap to reinvigorate myself following the lengthy final exam season. Aside from me, the house was empty. Presumably, my parents were at work, and my older brother was attending his university classes. I thought I could finally breathe a sigh of relief.

In the late afternoon, I arose from my lazy recline in my room, and answered the phone that I heard ringing in the kitchen. It was a call from my mother, a somewhat rare occasion. My mother had always been committed to her work, and I had, over my childhood, developed the expectation that I would not receive calls from my mother unless there was some pressing issue that warranted my attention. Her voice was gentle, almost excessively so.

“This afternoon, your aunt passed away.”

I nodded, “Okay.”

She acknowledged my response, and terminated the call shortly after. I returned to my room, surprised by my own composure, ashamed and guilty that I was not more devastated by my aunt’s passing. I reminisced of the years during which I had come to know and develop a relationship with my aunt.

My aunt, the oldest of my many paternal aunts, had been more than a mere relative throughout my childhood. As a child, my parents had always been committed to their work, devoted to the careers that allowed them to acquire the livelihoods that would suffice in sustaining the family. I was born to a pair of first-generation immigrants from China, and I suppose, among immigrants to Canada, my familial circumstances were hardly unique. My parents worked relentlessly, and consequently, another caretaker was required to supervise me and my older brother during our younger

years. Thus, my oldest paternal aunt moved into the house shortly after she immigrated to Canada. She would perform all the housework, cook many of the meals, and ensure that my brother and I were well-behaved at home. Her role, however, far surpassed that of a caretaker or babysitter as I progressed into my adolescence. My aunt was a no-nonsense woman, practical and efficient, but warm and humorous. She possessed little tolerance for laziness or excuses. She expected that my brother and I developed maturity and consideration for others at a young age, and often shared the principles that guided her lifestyle.

She was frugal, but she didn't tolerate penny-pinching so extreme that it would deprive people of their necessities or joy. She expected that people took the initiative to care for themselves without neglecting their health or depending excessively on others. One late night, when I was sick with a cold but persisted in watching television instead of retreating to bed, she marched down the stairs from her room, reprimanded me harshly for not caring for myself, and briskly returned upstairs without awaiting a response. That was likely the last time that I stayed up late for entertainment when infected with some pesky virus.

Through the years, the principles that she taught me were accompanied by lessons to develop practical skills. She taught me how to peel the vegetables, wash the dishes, and fold the laundry. The frequent cooking and cleaning sessions were regularly complemented by intriguing conversations about how to live a responsible and independent life, a life worthy of the many opportunities with which I had so graciously been provided and that the generation before me had not been so privileged to receive.

Eventually, when my brother and I reached a certain age, my aunt moved out of the house to live with my grandmother in her apartment, and as time elapsed, we gradually lost touch.

Several years later, I received news from my parents that my aunt had fainted beside the stove, spilling a pot of boiling water over her legs.

The months that constituted the treatment for her severe burns culminated in a diagnosis of multiple myeloma, the condition that ultimately claimed her life.

As she underwent treatment for her cancer, I visited her regularly in her apartment. I watched as her condition deteriorated, as her weight loss rendered her unrecognizable, as she lost her hair and then her teeth, as her haggard appearance and weak voice rendered it progressively and almost unbearably challenging to face her, much less to offer an unconvincing smile in an attempt to reassure her.

I recall feeling how anachronistic her condition was with the stories that she used to share pertaining to her health. As a child, whenever I complained of headaches, she would confess how confounded she was as an adolescent and young adult when others her age would complain of headaches. She never suffered from headaches, and even as a young adult, could not fathom how or why an apparently healthy individual could be experiencing pain in their heads. Although she was a decade older than my parents, she constantly consumed a nutritional diet, and frequently took walks outside despite the frigid Calgarian winters.

I struggled to comprehend how on Earth such a healthy individual could develop multiple myeloma without any warning, how something so illogical and unexpected could occur.

And then I recalled overhearing a conversation between my parents while I was in my room one night, several weeks before my aunt had passed away. She had been unconscious during the final week of her life. However, before her coma, her final remark was haunting. "The greatest curse my doctor gave me was hope."

That was it. That was the moment, triggered by the culmination of those memories, that I could feel the heat in my nostrils, the pounding in my head, the blurring in my vision, the wetness on my cheeks.

As I continued to pursue my lifelong dream of becoming a physician, hope became among the many concepts with which I struggled and grappled.

Throughout my youth and far beyond it, I had considered hope to be a gift, or rather, a necessity. One could argue that I would not have become a medical school student without it. However, hope signified something quite different to a patient.

Hope or its absence symbolized the difference between a future and oblivion, respectively. It was the fine line that divided the vision of a life, and its termination. Hope could provide the strength for a patient to persist, but without hope, even a healthy patient's prognosis could become catastrophic.

But when did hope become tragic?

When did it become dishonest and irresponsible for a physician to dispense hope? When did it become illogical and foolish for a patient to retain it?

Years later, in reading the book that would become my favourite among many, Dr. Paul Kalanithi, a neurosurgeon diagnosed with terminal lung cancer, provided the ideas that would further the conflict raging within me. "It is important to be accurate, but you must always leave some room for hope."

Even Dr. Kalanithi, the author and physician that I so adamantly respected, suggested the necessity of providing hope to patients. In delivering any prognosis, and in discussing the survival or mortality probabilities of any condition to any patient, the recommendation was to approach the conversation from a perspective of hope. Speak about the 30% chance of survival, not the 70% chance of mortality.

Ours

Shaking
Each other in greeting
Or alone in fear.
Lying broken on a table.
Attached to a body,
Or not.
With creases to tell
The depths of their woes,
Callouses of wears,
Stories of home.
Stories we hold on to
Or at which we
Frantically grasp.
Stories that in every crack
And mottling of age spots
**Hope for a touch to save them,
Or in times of sadness
To brace them.**
The familiar shape of nails
Of hands grown old –
Turning these people into
Persons
And making them
My own

Poet: Emilee Anderson

School: University of Calgary, Cumming School of
Medicine

Ông ngoại

Ông ngoại
Grandpa,
He understood.

Words,
Generosity, kindness, knowledge,
Three words that were his principles.

**Few words,
Slowly melting,
Three, then two, then one.**

His last connection.

First,
First captive of his Mind,
Stealing him confidently, an invisible thief.

Resistance,
Resistance against his Mind,
Put his memories in exile.

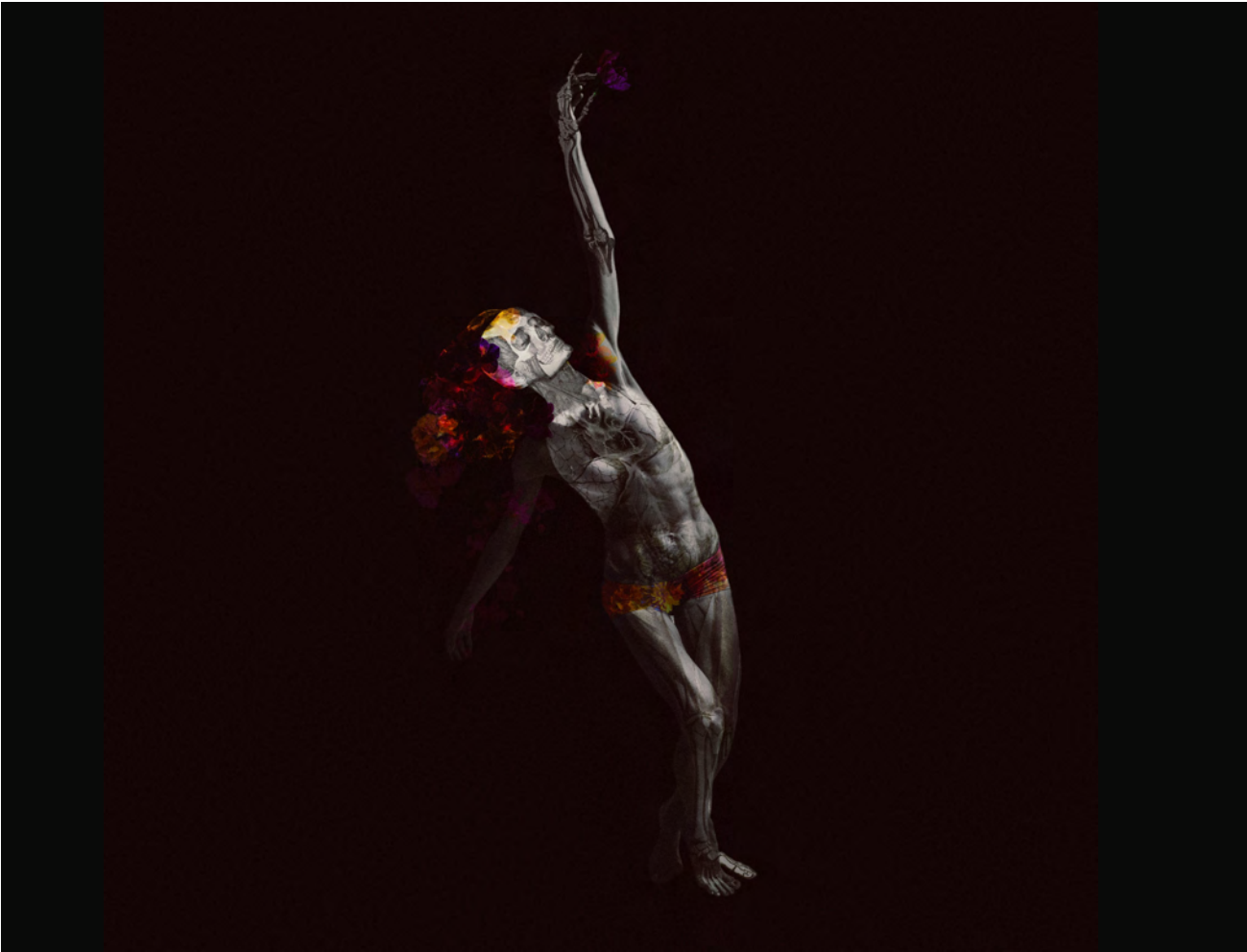
No longer,
No longer understanding,
And he knew.

He was our Ông ngoại.

Poet: Michelle Au

School: University of Calgary, Cumming School of
Medicine

They Tell Me I'm Sick



Artist: Keiko Chan

Medium: Digital artwork

School: University of Calgary, Cumming School of Medicine

In medicine, we spend years learning about the endless ways the human body may fail us. I search for pathology and dysfunction in each patient, because that is my job. I rarely take time to appreciate the human body as a delicately crafted and balanced machine of nature. Yet, even in illness and as we approach death, there is still so much the body is doing right - so many processes it continues to maintain flawlessly. I created this piece as a reminder to patients and health professionals that the human body is truly miraculous. To my patients in particular: though I may tell you that you are sick, please never forget the beauty and grace of your being.

I created this piece through digital modification of my own photography, stock photos, and various anatomy images from The College of Physicians of Philadelphia Digital Library. Their amazing collection of images is available here: <http://www.cppdigitallibrary.org/>

POWER & PRIVILEGE

“Empathy is... communicating
that incredibly healing message of,
‘You’re not alone.’”

- Brené Brown

Badge of Honour

I've worn
 a lot of badges.
Name tag for this.
 Volunteer pin for that.

And
 at one time
 a hospital band,
 for
far too long.

Like a
 badge of shame.
Then
Lights on at 6am.
 Arm out to the side of the bed.
 "Name?"
 "Date of birth?"

Needle in, blood out.

White paper shackle.

Literal seconds to
 snip
 that paper chain.
Years to break
 the metaphorical mental ones.

Now
Rounding at 6am.
 Holding her arm out at the side of the bed.
 Taking her pulse.
Breathe in, breathe out.

White coat
and
identification badge.

Mere moments to
swipe
that passport.
Official enough to allow me
through those formerly exit-less doors.

Grateful
that my hospital identification
now,
with its responsibilities and privileges,
feels...

**Like a
badge of honour**

Poet: Emily Macphail

School: University of Calgary, Cumming School of Medicine

Winner of the 2017 Writing Award for Poetry

We Are the Stars



Artist: Audrey Sun

Medium: Mixed media collage: acrylic, polyacrylate, paper, and film

School: Southern Alberta Institute of Technology, Respiratory Therapy

My piece is called "We Are the Stars" in reference to the idea that as human beings we are all made of the same materials as each other and of celestial beings. As a health care student I feel that sometimes we can become desensitized to our patients and treat them more as they are symptoms or problems rather than as humans. I hope that my piece can serve as a reminder that we are all the same in makeup and that we should be more empathetic to one another.

On Witchcraft and Womenhood

I was a witch this year
for Halloween.
As I walked down the warm windy streets
in the dim moonlight,
I saw two silhouettes spraying urine in perfect arcs
a few meters in front of my sidewalk path.
I was scared of the uncovered penises
becoming menacing as I walked by,
So I changed my course.

I used to pretend I was a witch
Or an apothecary,
Mixing tinctures and medicines
in the backyard fort,

Wanting to heal
through leaves, mud,
mint from the overflowing bush,
Content to explore, to create.

The women gather around the mother's body,
their scrubs and gowns and masks
a mimic of the New Yorker Magazine cover.
As they bring a wriggling girl into the world,
cut harshly but with love from her mother's womb,
They talk about the Plastic Surgeon
who commented blandly
that studying in residency must have been easy,
Given the limited scope of their skills.
As if they easily catch life for woman
after woman,
Or cut blindly into the vast abdomen and pelvis;
Cut into its interconnectivity,
that intrepid cancers diffusely invade,
its nourishment turned to nothing.
As if our identity resides in our ability to produce,
to carry another for some greater potential.

I pretend.
I realize for years, I have been spelling woman as women;
Plural,
 as if one cannot exist without another.
I shake it off when men do not know what I mean
 when I lightly comment that I'm troubled by the news,
 since his and his and his actions do not affect them.
Yet for us, men permeate
 into every crevice of our consciousness,
 as we look over our shoulders
 scanning the block, watching our shadows.
Still, we know it has already come
 wrapped in nicety
 from someone we trusted.

I grow aloe and rosemary now.

**I try to find nourishment in learning about my
profession,**

 knowing it sees women as interlopers.
I listen and write and clear my throat to speak.
The Moon flushes the autumn sky,
 and I arrive.

Poet: Emily Ower

School: University of Calgary, Cumming School of Medicine

ENLIGHTENED

“The best way to find yourself is to
lose yourself in the service of
others”

- Mahatma Gandhi

A Note on Art



Artist: Sarah Wall

Medium: Acrylic on Canvas

School: University of Alberta, Calgary Campus, Occupational Therapy

'What is art,' I ask myself, 'and what does it have to do with occupational therapy?' I have been artistic all my life, remembering days watching my mother paint effortlessly on large canvas pieces that were stapled together with her own hands. Seeing the shine on a newly painted car or motorcycle, my dad smiling at the hours of work that brought that moment. I love making art, and as I grew, this desire grew with me. From scrap paper to bound books, and then to my own canvases. Words came flying at me: 'You are too sensitive,' so I drew; 'you care too much,' and I painted. Now, sitting at the University of Alberta with my peers, I learn to understand phrases like 'therapeutic use of self,' vulnerability, empathizing, encouraging, collaborating, listening, and reflecting. And what a breath of fresh air, knowing that just me is fine, that this me will help others, that my real me can be my professional me. This me that creates, that dreams, that feels. And so here I am, and I ask myself, 'what does art have to do with occupational therapy?' Everything.

Credit to author Renee Taylor for the concepts of 'therapeutic use of self' and the outlined 'therapeutic modes' (i.e. empathizing, encouraging, etc.). Taylor, R. (2008). The intentional relationship: Occupational therapy and use of self. FA Davis.

The Art of Medicine



Artist: Rebecca Hay

Medium: Watercolour and ink on paper

School: University of Calgary, Cumming School of Medicine

This piece is an interpretation of the famous illustration on the cover of Gray's Anatomy. Medicine truly is an art, serving as an intersection between sciences and the human experience. As such, I chose to recreate an iconic symbol of scientific anatomy showing the beauty of this combination.

Opening Minds Through Art: A Nursing Student's Perspective

My name is Samiha Amin, and I am currently a nursing student at the University of Calgary. My submission is a digital story, which details my experience with the Opening Minds Through Art (OMA) program. OMA is a unique art program where students engage with individuals living with dementia to assist them in completing various art projects. The program promotes self-expression and independence among people with dementia, and fosters intergenerational communication.

My digital story details the growth that I experienced over the semester in areas such as working with the elderly, communicating with individuals living with dementia, and identifying and addressing my inherent biases regarding people with dementia.

When creating my digital story, I was inspired by this growth that I had experienced and by the transformation of my perspective regarding individuals living with dementia. I aspired to encourage and motivate others to step out of their comfort zones and to challenge their own assumptions regarding people with cognitive disabilities.

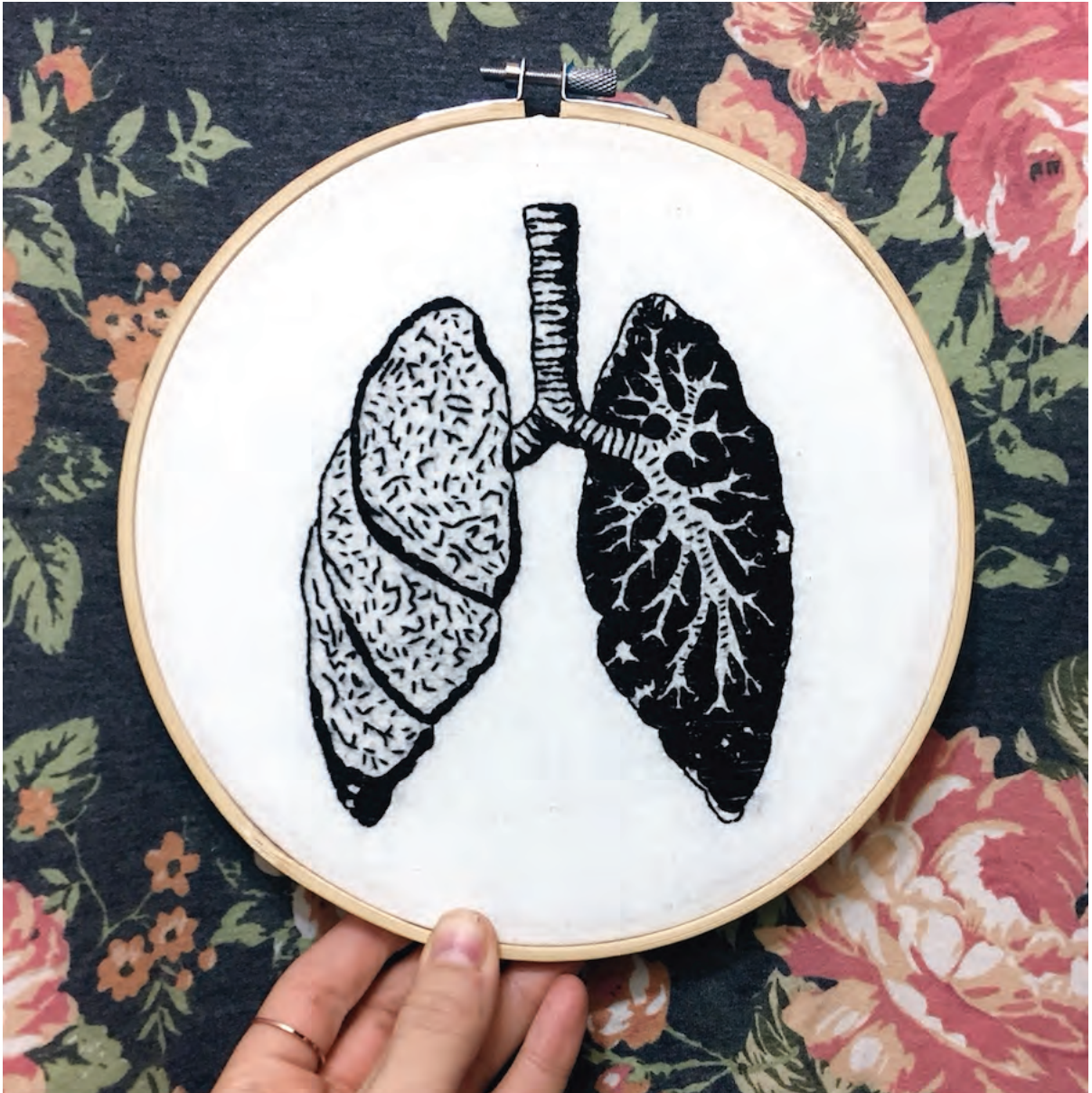
My piece illustrates my journey on identifying and addressing my assumptions, the transformation of my practice, and the development of my connection with my partner. Building connections with individuals is a core aspect of nursing, and within OMA, I was able to improve my communication skills. My digital story allowed me to self-reflect within a unique framework, and provided me with an opportunity to integrate my knowledge.

Creator: Samiha Amin

School: University of Calgary, Faculty of Nursing

To access video: <http://wcm.ucalgary.ca/longview/issues>

Lungs



Artist: Morgan Hunter

Medium: Embroidery

School: Southern Alberta Institute of Technology, Respiratory Therapy

I have always liked making things and crafting. I started embroidering when I was doing my biology undergraduate degree because I needed a way to take my mind off of school and to de-stress. It requires attention and concentration, so when I'm embroidering I can't really be thinking about anything else. I like to stitch things that relate to my life, so when I got accepted into the Respiratory Therapy program at SAIT, a set of lungs was an obvious project for me. I made it over the course of a week or so, in between studying and schoolwork, but I like to think of it as an extension of my study of lung anatomy.

The Things You Feel

When you started nursing school,
They didn't tell you how it would feel
To show up for clinical one week
And say hello to a senior you'd come to know
And show up the next week
And they were dead
And someone was already moving the furniture of a new resident
Into the room you had thought of as their home.

When you started nursing school,
They didn't tell you how it would feel
To watch someone struggle against wrist restraints all day
Because the unit was short-staffed
And there was no one to catch him
if he got out of bed and fell and injured himself
He cried all day
He was scolded for struggling against the straps.

When you started nursing school, They didn't tell you how it would feel

To hold a pediatric patient in your arms all day
because she stopped crying when you held her
She sucked on your stethoscope
You didn't mind
You Cavi-wiped it and knew
She only had about a year left to live
But you made her happy that day.

When you started nursing school,
They didn't tell you how it would feel
To see a flesh-eating wound so bad that
you could see the patient's bones
She cried every day because she felt overwhelmed and because
the antibiotics had such brutal side effects
She thanked you for everything you did for her
She never complained
She told you about her dream to start a food truck
after this was all over.

When you started nursing school,
They didn't tell you how it would feel
To get a young patient from the ICU
With terrible wounds and terrible burns
Everything you did for her caused her pain
But she had a tracheostomy so she had no voice to scream with
Just a mouth wide open in silent agony.
Her list of surgeries was pages long
You made sure everyone knew to call her Allie* and not Alisha*
Because that's what she preferred
Now she is able to talk
And she has less pain
But her hair hasn't grown back on her burned scalp
And her life will never be the same again.

When you started nursing school,
They didn't tell you how it would feel

To see patients who've come from prison with their guards Handcuffed to the hospital bed by their ankles

You check their surgical sites, IV lines, and assess their pain
Just like any other patient
Sometimes you check their ankles
for red sores from the metal cuffs.
The patients are always nice to you
The guards sometimes less so
You wonder how shitty prison must be
If to them, hospitalization seems so much better
They thank you for everything you do for them
And you wonder if kindness, not punishment
Is really what makes criminals become better people.

When you started nursing school,
They didn't tell you how it would feel
To clean feces off a patient's burned buttocks
He had never been naked in front of people before
He couldn't use his burned hands because they were still healing
He apologized when we had to move his testicles
out of the way with our gloved hands
His nose was too burned to breathe through so he used his mouth

And it was so dry, so goddamn dry
You fed him water and gave him mouth spray and lip balm
every hour through the night
It was a long night and nothing seemed to help
You went home and collapsed in your bed
Before you fell asleep his face was in your mind.

When you started nursing school,
They didn't tell you how it would feel
To get a huge gift basket delivered to the unit
from one of the most vulnerable patients we ever had and discharged
He and his mother thanked everyone
for being there in the hardest time of his life

**And you were, you made every effort
to give him the kindness and dignity**

That none of us really deserve
But that make all of us better people.

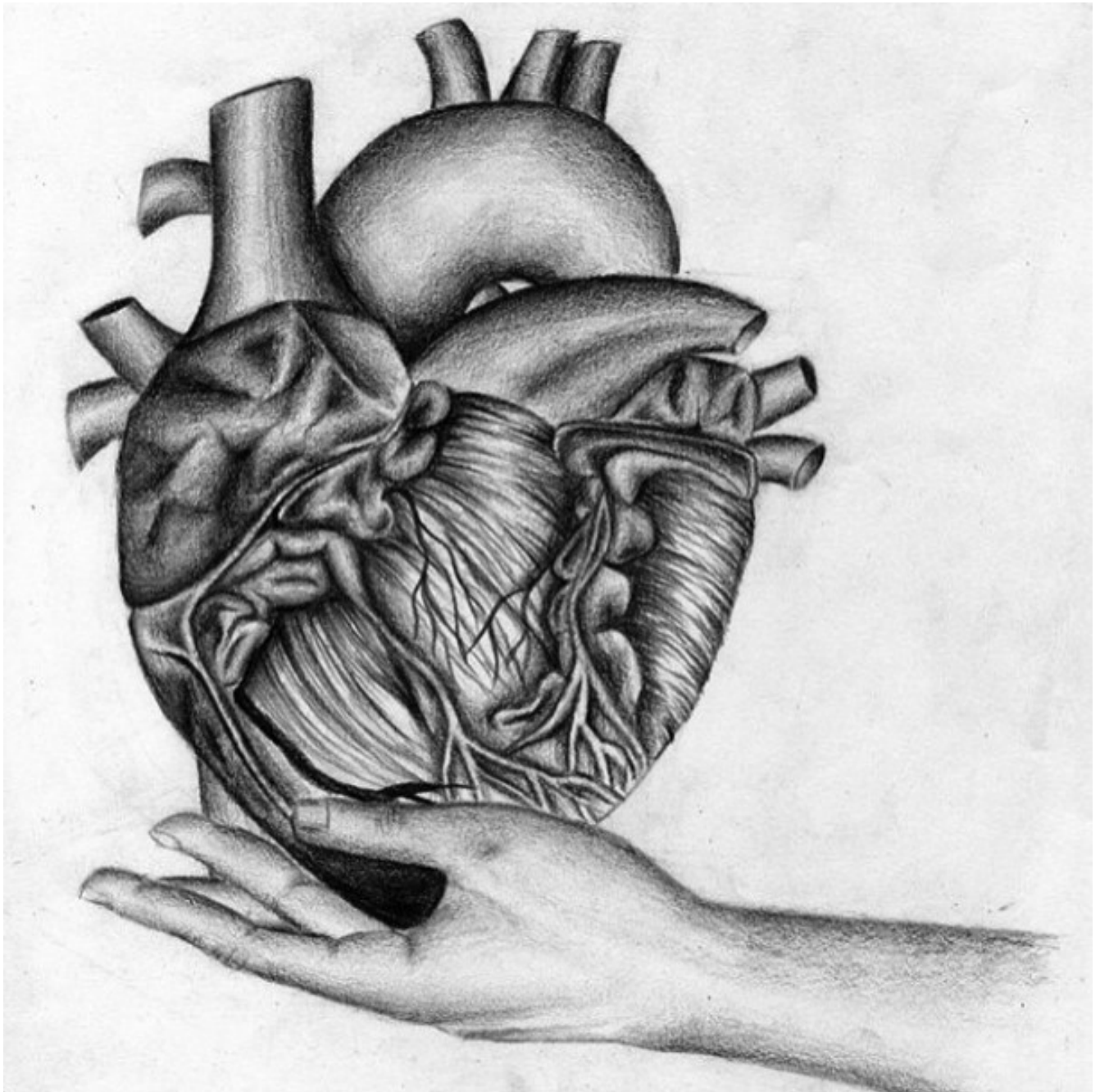
After watching your patients suffer
and wondering if anything you did made a difference
You know it did for him
And then you went on with your day because there are
always more patients to care for
Emerg and the OR are always full
It never ends
The suffering, the things patients feel,
The things you feel,
The slow healing process
Or the final release of death
You have seen both
And you will do it all again next shift.

When you started nursing school,
They did tell you
That it will be hard,
But it will be worth it.
*pseudonyms

Poet: Monica Friesen

School: University of Calgary. Faculty of Nursing

Curiosity



Artist: Ting Ang

Medium: Graphite pencil

School: University of Calgary, Faculty of Nursing

My inspiration for this piece stems from my interest in human anatomy. As a nursing student, I believe in the importance of holding curiosity close to the heart and continuing to seek out knowledge to answer questions.

Akwantemfi: 'In Mid-Journey'



Artist: Erika Friebe

Medium: Acrylic on Paper

School: University of Calgary, Cumming School of Medicine

Learning about global health is often described as a journey; the continued accumulation of experiences and ideas that gradually shape and add dimension to one's understanding. This painting, reconstituted from a quick sketch I made after sharing a dusty road with these three girls, evokes many aspects of my own unfolding global health journey. Making our way the seven or so kilometres from a small farming community in central Ghana to the main highway, I reflect on the collaborative, interactive nature of my learning. Of being guided through the local landscape by those who know it best. Of conversations fuelled by curiosity bridged only by a couple common words. With my own pack slick against my back, I am also attune to my burden and impact on the communities and people who have facilitated my learning here, and everywhere. Although this road was in West Africa, there are parallel roads and considerations here in Canada.

~fin~

