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# Connecting historical events to contemporary issues in bioethics and medical humanities teaching

Olivia MY Ngan<sup>1,2</sup>, Jasmine YN Hui<sup>3</sup> & Sihan Sun<sup>4</sup>

<sup>1</sup> Medical Ethics and Humanities Unit, School of Clinical Medicine, LKS Faculty of Medicine, The University of Hong Kong, HKSAR; <sup>2</sup>Centre for Medical Ethics and Law, Faculty of Law and LKS School of Medicine, The University of Hong Kong; <sup>3</sup>Faculty of Medicine, The Chinese University of Hong Kong, Hong Kong SAR; <sup>4</sup>CUHK Centre for Bioethics, Faculty of Medicine, The Chinese University of Hong Kong, Hong Kong SAR

## Abstract

**Introduction:** Didactic pedagogy and passive learning in bioethics and medical humanities teaching are ineffective in engaging students and gauging learning interests. As a result, medical students are unaware of why and how bioethics and medical humanities relate to their learning and thus prioritising acquiring clinical knowledge in their medical education.

**Methods:** This project involves a teacher-student collaboration to develop a teaching approach, which bridges historical events and contemporary issues, acknowledging how ethics and humanities are interwoven in clinical and everyday life. The objectives are to (1) highlight landmark historical events in bioethics and medical humanities and (2) recognise the evolving nature of values and social norms that inform current practice.

**Results:** The three activities include the use of historical narratives, annual newsletter publications, and social media to augment didactic classroom teaching and learning. Video narratives of landmark events in bioethics were developed to strengthen historical knowledge and encourage self-reflection. The newsletter invited students to write about any topic in bioethics and medical humanities and enabled them to experience a peer-review process. It allowed students to critically appraise everyday issues. Social media engagement via Instagram offered a flexible and informal medium to diversify the traditional bioethics content taught in the classroom. The advantages and obstacles of each element are discussed.

**Conclusion:** A holistic approach using historical narratives, newsletters, and social media engages students' learning and allows students to become conscious of how past events shape the present.

**Keywords:** *Bioethics, Medical Ethics, Medical Humanities, Education, History, Curriculum Development, Social Media, Student as Partner, Newsletter*

## I. INTRODUCTION

With modern bioethics taking shape in the late 1960s, the introduction of formal bioethics teaching in medical schools developed slowly in Europe and Northern America over the subsequent decades. It was recognised that professional ability not only encompassed scientific knowledge and clinical skills, but also embodied a high standard of professional ethics, values, and moral conduct. A paradigm shift in how medical education shaped students' moral compasses and holistic decision-making abilities was needed. In 1987, the Liaison

Committee on Medical Education stated that medical schools must incorporate bioethics and medical humanities teaching into their curricula (Carrese et al., 2015). In 1993, the British General Medical Council published a white paper, *Tomorrow's Doctors*, which outlined a blueprint for reforming the curriculum and affirmed that teaching ethics and law was an integral part of medical education (Mattick & Bligh, 2006).

Bioethics teaching started relatively late in Asia-Pacific and is strategically less developed in its teaching content,

methodology, and assessment (Qian et al., 2018; Sim et al., 2019). There is little discussion on how to best deliver bioethics education through a multidisciplinary lens, as the disciplines of humanities (e.g., philosophy, history, and law), social sciences (e.g., anthropology and sociology), and arts (e.g., literature) are extensive. Our team recognised that passive learning using conventional pedagogy (e.g., didactic lectures and tutorials) had significant drawbacks. Earlier studies showed that teachers adopting these methods struggled to engage and stimulate students' reception to ethics learning (Ganguly et al., 2022; Ngan & Sim, 2021). They were unaware of why and how bioethics and medical humanities were related to their science background, called them "soft" subject, and thus prioritised acquiring clinical knowledge (Leo & Eagen, 2008).

This paper describes a new teaching approach that draws reference from the philosophy of history teaching, using the past to understand and predict present and future actions. We describe three activities, including using historical narratives, annual newsletter publications, and social media to augment classroom teaching and learning in hopes of promoting ethical sensitivity to students' clinical and everyday life experiences. Our learners are medical students undertaking a six-year undergraduate medical degree programme. These activities were implemented to support pre-clinical year teaching, though also applicable to clinical year students.

## II. DESCRIPTIONS OF THREE TEACHING ACTIVITIES

### A. Historical Narratives

The adoption of historical narratives in bioethics teaching draws reference from the philosophy of history

teaching, using the past to appreciate the present and the future. But its history is often neglected in the curriculum due to time constraints. Students perceived a disconnection between themselves and unethical events, struggling to understand the significance and effects specific past events may have had on present society (Ngan & Sim, 2021). Gerald L. Gutek (1995), *History Educator*, advocated that "[teaching] should illuminate the past in order to provide the perspective in time and place that we need to make reflective decisions on the [medical] education choices that face us today. Understanding the importance of bioethics history reminds ourselves about the wrongdoings in science, either due to procedural insensitivity or limited guidelines, and may also improve individual behaviour and organisational culture, re-enforcing a high standard of professional conduct. The video narratives reinforce historical knowledge and the ability to discern and scrutinize the similarities and differences between the past and present.

In this pilot project supported by the faculty's teaching development grant, landmark historical events were developed as short video narratives that complemented the teaching curriculum topic. Table 1 is a non-exhaustive list of examples describing key events in ethics and how they relate to contemporary issues. In our experience, the video productions were well-received by students' feedback evaluation. The high cost, however, would be a concern. Should the video improve students' sensitivity towards bioethics, a comprehensive development of bioethics history video should be invested as an educational media to support teaching.

Historical Events	Related Ethical Concerns	Contemporary Issues
Eugenics measures in the United States (1896- 1940), Germany (1933-45), and Japan (1948-1996)	Eugenics	Emerging technologies (e.g., gene-editing technologies, preimplantation diagnosis, and prenatal diagnosis)
The "God" Committee: Rationing dialysis machines (1961)	Equity, fair allocation approach, transplantation ethics	Allocation of scarce resources (e.g., vaccine, ICU bed, funds)
Tuskegee Syphilis Study, (1972)	Research ethics (e.g., informed consent, exploitation of vulnerable populations)	Research involving vulnerable populations (e.g., homeless, inmates)
Stanford Prison Experiment (1971) Milgram's "destructive obedience" Study (1974)	Unethical research conduct was uncovered (e.g., psychological harms, deception)	Social and behaviour research illuminates the need for participant protection beyond the scope of biomedical studies.

Table 1. Implications of Landmark Events on Present-day

### *B. Bioethics Newsletter*

In this pilot project, our team inceptioned a student-led bioethics newsletter aiming to draw ethical sensitivity in everyday life. Medical students were invited to contribute and write a commentary based on a topical issue of their interest; stimuli may have ranged from the news, movies, dramas, documentaries, plays, clinical ward experiences, and overseas observations. The opportunity provided students with a platform to voice and elucidate their opinions. It also allowed students to be more receptive to opposing ideas, developing a greater awareness of ethical dilemmas.

We published three annual newsletters and reflected on our experience. In the first issue, there was no peer-review process. We felt that the absence of a communication medium between the student writers and student editors hindered the quality of submissions. A peer-review process was implemented starting from the second issue, which was perceived to be beneficial as students were able to receive feedback and enhance intellectual rigour. More importantly, students were also exposed to the peer-reviewing process, which is useful for their future professional career development in academia.

Several obstacles relating to the submission process and the future sustainability of the newsletter were also met. In the first issue, interest was generated primarily through word-of-mouth and promotion on social media. In the second issue, prize incentives were given to best-written submissions. Participation gained momentum in the second and third issues, where we saw an average of 15-20 submissions. Sustainability was also a concern in terms of reader engagement and recruiting altruistic junior students to take over the project. To encourage multidisciplinary engagement, we aim to call for submissions in both written Chinese and English and accept entries from all students within the medicine faculty. We have a long-term goal of fostering a multidisciplinary collaboration across the Faculties.

### *C. Social Media*

Given the generational influx of physicians and medical educators, the use of social media in medical education has seen rising popularity in recent years. Platforms like Twitter, Instagram, YouTube, and LinkedIn are easily accessible, user-friendly and encourage users' interaction in a local and international setting. The flexibility of social media may also promote active learning pedagogies and personalised education, allowing students to build upon the knowledge they perceive to be interesting.

We started an Instagram page (IG: cubioethics) in June 2020 and curated content on a monthly basis. Content covered a broad range of bioethical topics, including several themed series: a news roundup named "Ethics in the News" and a series based on biotechnology seen in the sci-fi television series, *Black Mirror*. Each post consisted of a short synopsis on the topic and multiple discussion points were raised to incite critical thinking and reflection.

The flexibility and informal nature of Instagram allowed us to diversify the traditional bioethics content taught in the classroom. For example, it offered an experimental opportunity to teach through television and film. Moreover, the Instagram page allowed us to connect with students and professionals from local and international institutes. Engagement was reflected in post shares, likes, comments, and page follows. As the bioethics community on Instagram remains relatively small, it was easy to establish rapport. This community was able to help expand our audience via mutual post sharing and furthered the ethical debate raised in our posts.

Maintaining an Instagram page was not easy - content creation, the design process, and engaging with readers required careful planning and time. Also, from a cultural standpoint, it seemed as if there was a stronger tendency for international users to publicly participate in the conversation by commenting rather than local students. This may be due to worries about online criticism or the pervasive nature of social media and how it may no longer be viewed as a "safe space" for controversial discourse.

## III. CONCLUSION

We reflected on our experience refining traditional didactic pedagogy by adopting three activities: historical narratives, newsletters, and social media. Each component presents unique educational benefits (e.g., recounting the evolution of today's achievements, exposing students to peer-review publishing experience, cultivating sensitivities to everyday life) and operational barriers (e.g., budget constraints, altruistic students' recruitment, time- and labour-intensive). Our teaching pedagogy may also be adopted in bioethics teaching in other disciplines, including biomedical and life sciences.

### Notes on Contributors

OMYN conceived the study, developed the narration scripts, facilitated the newsletter peer-review as a teacher editor, reviewed the literature, and drafted the intellectual content of the manuscript.

JYNH led the newsletter peer-review as a student editor, managed the social media platform, and drafted the intellectual content of the manuscript.

SS reviewed newsletter entries and critically revised the manuscript for intellectual content. All authors are accountable for all aspects of the work and approve the final manuscript.

#### Ethical Approval

This study involves a theoretical discussion only and does not require ethical approval.

#### Data Availability

The data that support the findings of this study are openly available in the Figshare repository.

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#### Declaration of Interest

The authors declare no conflict of interest.

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\*Olivia M.Y Ngan  
Medical Ethics and Humanities Unit,  
School of Clinical Medicine,  
Li Ka Shing Faculty of Medicine,  
The University of Hong Kong, Pokfulam,  
Hong Kong Island, Hong Kong SAR  
Email: olivian1@hku.hk