



A Map of the Current Cultural Climate in Medicine and Healthcare, and How We Can Change It

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In Canada, healthcare and medicine are grounded in structures of coloniality, oppression, heteropatriarchy and a variety of “-isms” (racism, sexism, ableism, classism). Consequently, it is little wonder that deep-rooted, enduring health disparities exist for many different groups across Canada. The COVID-19 pandemic has only served to exacerbate these disparities. Clearly, something needs to change in healthcare delivery and education. Comics are an ideal medium to document this moment, as well as catalyze change, for many reasons. Graphic Medicine – the creation and study of comics in healthcare contexts – can be used to explore the current discourses and cultures of healthcare and bring diverse perspectives into dialogue. Comics are also inherently disruptive. They challenge what is considered acceptable as discourse, and therefore knowledge, within medicine. They are also accessible to anyone with a writing tool, surface, and an idea to share. In this way, comics help democratize communication and give oft-ignored voices the ability to help shape medical discourse. Additionally, the diversity of forms and features used in comics creation directly relates to and enhances the diversity of voices, perspectives and lived experiences expressed in comics. Graphic Medicine can be a tool to advocate for health equity across populations.



Introduction

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A MAP OF THE CURRENT CULTURAL CLIMATE IN MEDICINE AND HEALTHCARE AND HOW WE CAN CHANGE IT! BY SAVITA RANI



marker pause!

The cultures of *medicine and healthcare* in Canada are grounded in OPPRESSION, COLONIALITY, AND "-ISMS" galore.



The COVID-19 pandemic has *magnified* already existing health INEQUITIES in subpopulations within and across societies.



Comics are an *ideal* way to document this moment and HELP CATALYZE CHANGE in *medical discourse*.



Comics can help *disrupt* the medical hegemony and challenge what is considered

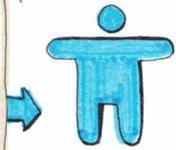


An upstream change in *medical culture, ethos and structures* is needed in order to reduce WIDESPREAD DISPARITIES in health.



ACCEPTABLE as discourse in medicine and healthcare. DISRUPT HOW? Through their *creative, narrative* form and function, comics provide an alternative approach to *scholarship in medicine*: they can act as a RESEARCH METHOD, a means of knowledge TRANSLATION, and a way to document and PRESERVE stories.

1



Comics are an *accessible medium* — anyone with something to write on, write with, and share with others can **MAKE COMICS**. This enables participation of peoples with varying *abilities, ages and identities*, helping bring off-ignored voices into medical discourse.

“the

ULTIMATE goal is to bring the **CARE** back into healthcare”



now that we have an overview of the situation, let us dive deeper...



The COVID-19 pandemic has *magnified and amplified* existing structural inequities in social determinants of health on a **GLOBAL SCALE**. This has led to a *disproportionate* burden of health impacts on certain subpopulations within and across societies.

When the health status of a population has been *systemically and systematically* harmed, the population is **DISADVANTAGED** in terms of ability to *cope* with expansive health insults, like a **PANDEMIC**.



SOME AFFECTED subpopulations **ARE:**

- people living in rural or remote areas
- LG-BTQ2S+ peoples
- those who experience homelessness, poverty and underhousing
- those suffering from addictions and/or other mental illnesses
- racialized and immigrant peoples
- elderly and institutionalized peoples
- those who are body- and ability-diverse

* REFERENCES 1-8

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marker pause!

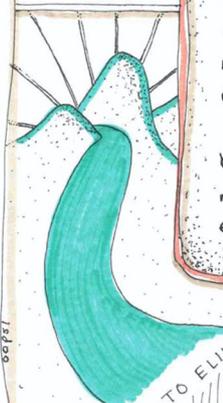
IN THE CANADIAN CONTEXT, THE CULTURES OF HEALTHCARE AND MEDICINE FURTHER EXACERBATE THESE INEQUITIES, AS THEY ARE GROUNDED IN STRUCTURES OF

OPPRESSION, COLONIALITY, HETEROPATRIARCHY,

AND A VARIETY OF **-ISMS** ²⁹ E.G. RACISM, CLASSISM, SEXISM, ABLEISM [9,10]



The existence of widespread health inequity is UNACCEPTABLE and needs to be dealt with swiftly and urgently. Comics as a medium are ideal for documenting this moment — and catalyzing necessary change — for many reasons. They are a flexible, low-barrier medium that can be used to respond to situations in an ACTIVE, TIMELY manner. This practice can help catalyze change in healthcare culture by offering an evocative, adaptable method for sharing stories and presenting evidence.



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IF WE ARE TO ELIMINATE HEALTH INEQUITIES, WE NEED

UPSTREAM CHANGE -

A REDESIGN OF THE CULTURE, ETHOS AND STRUCTURES THAT COMPRISE MEDICINE AND HEALTHCARE.

graphic medicine — the use of comics in healthcare — can be a part of this change because as a medium, comics challenge what is acceptable as discourse, and therefore knowledge, within medicine.



IT IS CLEAR that arts and humanities - based methods, of which graphic medicine is a part, can be used to advocate for health equity across populations. Put another way, arts and humanities can help bring the **"CARE" BACK INTO HEALTHCARE.**

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- ✿ Icons from pages 1 and 2 based on those by these artists, from NounProject.com
- Trample by Jonathan Segura Espinoza
 - Magnifying by fuad hasan
 - Flag by Icon 2
 - Up by Tanguy Kr
 - Disruptive by Ralf Schmitzer
 - Accessibility by Fa tahillah

Conclusion

It is clear that arts and humanities-based methods, of which Graphic Medicine is a part, can be used to advocate for health equity across populations. Put another way, arts and humanities can help bring the “care” back into healthcare.

Icons from pages 1 and 2 based on those by these artists, from NounProject.com

- Trample by Jonathan Segura Espinosa
- Magnifying by fuad hasan
- Flag by The Icon Z
- Up by Tanguy Krl
- Disruptive by Ralf Schmitzer
- Accessibility by Fatahillah

Author's Note

I have used a hand-drawn, “sketchy” aesthetic to produce my graphic submission. This was a deliberate choice. The act of putting pen to paper emphasizes the immediacy with which I am creating this comic and directly relates to the urgency with which the content needs to be examined. The hand-drawn aesthetic also lends a feeling of accessibility and approachability. It allows the reader to consider that they, too, could draw their own comic – opening the door for broad dialogue on the topic. Finally, hand drawn lines are intimate – there is something poignant about being able to trace over lines drawn by one human hand with your own. My hope is that this intimacy will help strengthen the connection readers have with my story.

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Editors' Note

This work is part of the Rapid Responses: Comics In and Of the Moment Special Collection, edited by Jeanette D'Arcy and Kay Sohini, with Ernesto Priego and Peter Wilkins.

Competing Interests

The author has no competing interests to declare.

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