

# Survive & Thrive: A Journal for Medical Humanities and Narrative as Medicine

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Volume 5 | Issue 1

Article 1

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2020

## Editors' Note to Vol 5: Issue 1: On Publishing Survive and Thrive: Journal of Medical Humanities and Narrative Medicine During the 2020 Global Pandemic

Steven B. Katz

*Emeritus-Clemson University*, [skatz@clermson.edu](mailto:skatz@clermson.edu)

Suzanne Black

*SUNY Oneonta*, [suzanne.black@oneonta.edu](mailto:suzanne.black@oneonta.edu)

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### Recommended Citation

Katz, Steven B. and Black, Suzanne (2020) "Editors' Note to Vol 5: Issue 1: On Publishing Survive and Thrive: Journal of Medical Humanities and Narrative Medicine During the 2020 Global Pandemic," *Survive & Thrive: A Journal for Medical Humanities and Narrative as Medicine*: Vol. 5 : Iss. 1 , Article 1.

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**Editors' Note to Vol 5: Issue 1:  
On Publishing *Survive and Thrive: Journal of Medical Humanities  
and Narrative Medicine* During the 2020 Global Pandemic**

We publish this issue of *Survive and Thrive* in the middle of a raging global pandemic. COVID-19 has swept across and devastated the world. Those who can are still in self-quarantine and working from home. But whole economies have been severely damaged and/or shut down, some for a second time. Businesses open and close again. Parents and school boards are scrambling. Out of desperation and exhaustion, bad decisions are being made everywhere. The number of infected individuals and the death toll—now nearing 200,000 at the time of this writing—are still rising and surging and spiking in different parts of the country. And new infections are breaking out, even in countries and states that seemed to have “flattened the curve.”

Most countries, including the United States, were not equipped to deal with a novel pandemic. In the U.S., there is a continuing lapse if not absolute absence of federal leadership, organization, and supply: no national plan; a limited number of beds; a severe shortage of testing kits, PPEs (Personal Protective Equipment), and ventilators; and an abuse of experts, common sense, and moral intelligence. After six months of this plague, the virus has become a hot ideological issue, and the simple wearing of masks to slow the transmission of the virus has become highly politicized. States, localities, and hospitals are on their own. The initially asymptomatic infection renders this virus even more insidious, and world-wide it reappears in areas where it seemed to have been brought “under control.” There is no sign of the virus disappearing except in very streaky patches, with hope pinned on the discovery of a vaccine in the near or distant future.

The world was not emotionally equipped for a pandemic either. Perhaps it never is. At every level—global, national, state (the social, economic, and political), and the personal—the trauma of sudden haplessness and horror, helplessness and pain, devastation and death, hits each hospital and individual simultaneously and differently. While some states/people still proclaim the virus to be a hoax, the mounting death toll, even among the detractors, should be a strong convincer. We do not celebrate their deaths. Like others, we mourn. By necessity, the worst afflicted must die alone, without their family but perhaps with a health-care provider whose burden of stress is multiplied exponentially. For the rest of us, the continued spread of the virus, the suffering and economic hardship, are heart-wrenching, terrifying, and traumatic. And yet we applaud (and grieve) the heroes—the “frontline” workers who continue to put their lives on the line to make the medical system and the basic economy work (nurses and doctors, delivery drivers and mail providers, grocery clerks and migrant farmers, meat and poultry packing plants, police and protesters...).

It is against this background that we publish Vol 5, Issue 1 of *Survive and Thrive: A Journal of Medical Humanities and Narrative Medicine*. Obviously, we did not plan for the coincidence of this issue with the pandemic. In fact, we have been working on this issue for over a year. (We did plan Vol 5, Issue 2, a special issue on "Diversity and Community in Narrative Medicine and the Medical Humanities," which will be coming

out soon.) However, in the light of the pandemic, this issue reads differently, takes on other, extra meanings. Kenneth Burke referred to writing, rhetoric, and literature as “equipment for living.” We humbly offer this issue of *Survive and Thrive* as “equipment for living” in the grips of a pandemic, and after.

The issue opens and closes with artwork from Rex Veeder that captures the isolation and loneliness so many of us feel, but also the solace of silence and meditative solitude so many of us need. Also by Rex, the first poem, “If You Do This Work,” reflects on the skeptical reception and (figurative) isolation of those who would commit to art, to the medical humanities or perhaps to interdisciplinary work more broadly. (One of the editors wishes to thank Professor Veeder for letting her undergraduate editing students try out their developing skills on this poem). Anna Weaver’s poem “on showing up at open mic five days after plastic surgery” also exposes our vulnerability, this time as a performing poet. Weaver places in parallel the artist’s acceptance of her scars and holes with the audience’s acceptance of her performance. (We don’t often think about poetry as a community effort. But increasingly it is, especially on social media. Zoom readings, like the one Anna hosts and that we acknowledge here, the Tongue and Groove Open Mic in Raleigh NC, and virtual meetings and classes and shopping have become the new norm.)

Several submissions grapple with the loss (enduring, recent, or impending) of a sibling. Rayda Joomun’s poem “It’s Complicated” reminds us of the persistence of grief, still felt two years after a death. Steve Popkin’s “Emery in Repose” describes a “retired high school mechanical drawing teacher” in the ICU, visited by estranged siblings. Mari Ramler’s “Swim Lesson” memorializes the speaker’s brother Rico through memories of swimming and metaphors of drowning.

*Survive and Thrive* has often reflected on the hospice experience, particularly apt now when nursing homes have been ravaged by this novel coronavirus. In this issue Arno Bohlmeijer’s medical poetry explores both the nature of memory and the lived experience of dementia, as well as the “soul medal”s of Maarten van der Weijden, distance swimmer and leukemia survivor. Michal Coret’s “Institutionalization” is written from the confused perspective of a vulnerable patient, handcuffed and shackled to machines that stifle the patient’s voice. More optimistically, Coret’s “Her Hand” alternates perspectives of a young volunteer and her hospice patient, allowing them to converge in a shared smile at the end of the story.

The ill or “disabled” physician has long figured in medical narratives. Coret’s poems find an echo in Annmaree Watharow’s essay advocating for deafblind and other “dual sensory impaired” patients. Drawing on her own experience “on both sides of the stethoscope,” Watharow argues for taking the time to organize a communication team and situation that will allow patients (and physicians) like herself to feel safe and respected. Rachel Yestrebi’s “Once Upon a Clerkship” recounts the struggles of a medical student with mental illness seeking to survive the “hidden curriculum” of medical school’s third year. This theme—the vulnerability of health-care providers—has become tragically literal in the current pandemic.

Those weary of illness and vulnerability might turn for hope to Dr. Joomun's poem "Pretty Again," which celebrates the hoped-for recovery of a patient from trichotillomania (or compulsive hair-pulling). Charity Gibson's essay explores the healing power of allowing women to compose and share their own birth narratives. David Beard's "Cancer and the Time of Waiting" reminds us that confronting illness has always entailed a necessary and frustrating balance between urgency and patience. Finally, Barry Brummett's poetry offers at once warnings—of the fate of unicorns who did not hear the call to board the ark—and optimism, promising us that "something true is coming out of darkness."

The editors thank the authors for their patience during the COVID-19 crisis. While not a direct response to the current pandemic, the content of this issue is nevertheless a human response to a contemporary and dire human reality, and to our medical condition as organic, conscious beings, so precarious in any age.

Help. Hope. Heal.

**The Editors at *Survive and Thrive***