



## Taking a pause: a narrative perspective on teaching and attention

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I stand on the podium before a sea of faces. All, it seems, are looking at some version of a rectangular device, not at me. I have been replaced by a metaphorical cat video. As a teacher of 33 years, this takes its toll on me. Human 'selective' attention has been waning for over a century, while 'sustained' attention is variable. Controversy exists as to the exact time 'limit' we have before selective attention begins to wane, but 10-18 minutes seems the commonly accepted period before the eyes begin to glaze.[1-3] Popular media sensationalize the fact that we now seem to have an attention span of less than a goldfish, but no evidence exists to support it. Attention is complicated. Indeed, in education some of the evidence points to the *method* the teacher is using rather than the student's *ability* to attend.

Pedagogy has been used for generations to convey medical information, but perhaps its usefulness has come to an end. The term "edutainment" has been gaining ground and popularity in education and may help to increase student engagement. [4] Current social media platforms such as

TikTok, X, Instagram, and Facebook have reduced information to sensationalized sound bytes and flashy clips, with multiple visual and auditory stimuli. Indeed, user experience with these platforms drives the content. Students want a 'user experience' in medical school lectures that mimics the quick attention-grabbing content of a social media platform, all while learning the key ingredients necessary to becoming a doctor.

I teach in a discipline that takes time and requires focus. I teach palpation skills in medical education, something that requires a sense of fine tuning; an art form some might say. Ten years ago, I began seeing students struggle to attend and often just 'go through the motions' instead of learning the skills. In today's society of instant information, sound bytes and constant demand on our visual systems, I was not surprised.

We as humans are bombarded with information, some of which requires decisions, some which is just background noise. My thought at the time was how do I

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'hack into' a system already in overload? Inspired by a 2015 "TED talk" by Vanessa Ruiz titled "The spellbinding art of human anatomy",<sup>[5]</sup> I began shifting perspective and tried using humanities to 'hack' the human brain. I started initially with including anatomy art into my lectures, like those seen in the TED talk by Ruiz. This simple change opened a dialogue about how the art made students feel. It was a successful change from didactics, and student engagement soared.

Emboldened by these attempts I decided to give each student a writing assignment, a Haiku poem, prior to the start of one class. The topic was 'Physician Burnout', and I chose Haiku because they have been historically used to help manage stress.<sup>[6]</sup> Below is an example of one student's work (anonymous; used with permission):

"A morel mushroom, I sprout,  
Out of the compost which I've become  
To feed my dying soul"

Some students took the writing assignment seriously, while others thought it a waste of time - but regardless, it caused a shift in perspective and allowed the student a time to reflect. Reflection on burnout is the best way to prevent it.<sup>[7]</sup> Doctors and students are notoriously bad at self-reflection, choosing to focus on 'others' since they are healers, but not on themselves. Humanities education can help provide access to a deeper understanding of the human condition, and humanities education programs are cropping up in many medical schools to reflect and combat burnout.<sup>[8]</sup>

My next idea I found while strolling through a bookstore during an airport layover. I discovered a simple toy that I thought would engage proprioception and help students understand the structure of fascia. A collapsible toy called 'Skwish', it is commonly used as a rattle for infants. You can view an image of the toy on the Manhattan Toy website.<sup>[9]</sup> Using the

principles of tension, hard elements are held in place by elastic cords which produce a stable but collapsible structure. This toy is similar to microscopic images of fascia, with its microtubules and supports. In my experience, it provides an excellent example of how fascia can respond under pressure when collapsed.

While kinesthetic learners immediately understood the reference, others just used the toy as a stress reduction tool, which provided a 'pause' to the overloaded brains of the typical "type A" medical student.

Waning attention is also linked to physician and student burnout, which is rampant in medical school. The amount of knowledge required in just the first two years has often been equated to 'drinking from a firehose'.<sup>[10]</sup> Medical students often feel in a perpetual state of overwhelm as they must prioritize what to focus on based on what test is coming up. It can generate a state of anxiety, which interferes with attention. In the book 'Stop Physician Burnout; What to Do When Working Harder Isn't Working', Dike Drummond MD talks about a 'door knob exercise' in which the physician - before seeing the next patient - stops a moment with hand on the doorknob to take a deep breath and figuratively let go of the last patient.<sup>[11]</sup> Mindfulness is a tool in the prevention of burnout, whether in students or in practicing physicians. Many medical schools have embraced teaching mindfulness curricula in various ways, with two 'stand outs' in mindfulness-based stress reduction education being the University of Rochester Medical and Dental School (USA), and Monash Medical School (Australia). Students who participate in these programs experience decreased psychological distress and improved quality of life.<sup>[12]</sup>

Ultimately, I feel these efforts in mindfulness-based stress reduction and humanities education help students become more aware of when their attention

is lapsing, as well as why. In my field, long term ability to repeat a task requires muscle memory and engagement. Dealing with psychological stress is one way to improve engagement.

So, if you are like me - engaged in teaching medical students in a curriculum which requires students to focus their attention to learn - humanities education, mindfulness-based stress reduction, and kinesthetic learning can help. I am moving into a new

era of teaching, keeping my lectures shorter while engaging attention through 'art, humanities, and mindfulness-based stress reduction pauses'. Students have given feedback that they like these 'pauses' and would like them to continue. Ultimately, keeping engagement is hard, but taking a pause can help students find peace in their surroundings, understand themselves, and offers a method for controlling future physician and student burnout.

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## References

1. Bradbury NA. Attention span during lectures: 8 seconds, 10 minutes, or more?. *Adv Physiol Educ.* 2016;40(4):509-13.
2. Davis BG. *Tools for Teaching.* San Francisco, CA: Jossey-Bass, 1993.
3. Unplugged. The goldfish myth: Are our attention spans really that short? Available from: <https://unplugged.rest/blog/are-our-attention-spans-really-that-short>. [Accessed on 26 April 2024].
4. Mehrotra P. Edutainment in dental curriculum-A systematic review. *J Oral Biol Craniofac Res.* 2020;10(4):417-21.
5. Ruiz V. The spellbinding art of human anatomy. Available from: [https://www.ted.com/talks/vanessa\\_ruiz\\_the\\_spellbinding\\_art\\_of\\_human\\_anatomy](https://www.ted.com/talks/vanessa_ruiz_the_spellbinding_art_of_human_anatomy). [Accessed on 26 April 2024].
6. Massey MS. Promoting emotional health through haiku, a form of Japanese poetry. *J Sch Health.* 1998;68(2):73-5.
7. Showalter SE. Compassion fatigue: what is it? Why does it matter? Recognizing the symptoms, acknowledging the impact, developing the tools to prevent compassion fatigue, and strengthen the professional already suffering from the effects. *Am J Hosp Palliat Care.* 2010;27(4):239-42.
8. Meakin R. Education and debate: Developing the place of medical humanities in medical education from school to the consulting room. *Med Humanit.* 2001;27(1):50.
9. Manhattan Toy. Skwish Classic. Available from: <https://www.manhattantoy.com/collections/grasp-rattle-teethe/products/skwish-classic>. [Accessed 26 April 2024].
10. Marinelli R. What a first-year medical school student can expect. Available from <https://www.usnews.com/education/blogs/medical-school-admissions-doctor/articles/what-a-first-year-medical-school-student-can-expect>. [Accessed 26 April 2024].
11. Drummond, D *Stop Physician Burnout; What to Do When Working Harder Isn't Working.* Heritage Press Publications, November 2014.
12. Dobkin PL, Hutchinson TA. Teaching mindfulness in medical school: where are we now and where are we going?. *Med Educ.* 2013;47(8):768-79.