Editor’s Note: In this column, teachers who are currently using literary and artistic materials as part of their curricula will briefly summarize specific works, delineate their purposes and goals in using these media, describe their audience and teaching strategies, discuss their methods of evaluation, and speculate about the impact of these teaching tools on learners (and teachers).

Submissions should be three to five double-spaced pages with a minimum of references. Send your submissions to me at University of California, Irvine, Department of Family Medicine, 101 City Drive South, Building 200, Room 512, Route 81, Orange, CA 92868-3298. 949-824-3748. Fax: 714-456-7984. jfshapir@uci.edu.

On the Value of William Faulkner to Graduate Medical Education

Karl Kirkland, PhD

It is the writer’s privilege to help man endure by lifting his heart, by reminding him of the courage and honor and hope and pity and sacrifice which have been the glory of his past. The poet’s voice need not merely be the record of man, it can be one of the props, the pillars to help him endure and prevail. (From Faulkner’s address at receiving the Nobel Prize for Literature, Stockholm, Sweden, December 10, 1950.)

William Faulkner is generally regarded as the greatest American novelist of the 20th century. We read and study Faulkner to be restored, refreshed, challenged, and enlightened. Many of us, who avoided great works of literature in high school or college or who got by with Cliffs Notes, return as adult learners to study these same works with reverence. Some students, who remember Faulkner as obtuse through high school eyes, will discover rich veins deserving of years of study, as adults.

Charon et al note that the integration of literature into the medical school curriculum began in the early 1970s to help physicians develop skills in the human dimensions of medical practice and to convey the “metaphorical richness of the predicaments of sick people.” (p.599)

These authors note that there are five goals met by including the study of literature in medical education: (1) Literary accounts of illness can teach physicians concrete and powerful lessons about the lives of sick people. (2) Great works of fiction about medicine enable physicians to recognize the power and implications of what they do. (3) Through the study of narrative, the physician can better understand patients’ stories of sickness. (4) Literary study contributes to physicians’ expertise in narrative ethics. (5) Literary theory offers new perspective on the work and the genres of medicine. (p.599)

To these erudite and academic observations, it is important to add that Faulkner can be read for escape, stress, release, challenge, and personal inspiration. Faulkner can be regarded as biographer, poet, psychologist, philosopher, theologian, mystic, and sociologist. As Levinger recently observed:

What is it about Faulkner that so arouses writers, chafes and teases critics (some 1,300 books have been written about him), and moves even casual readers to love or hate his work?

Faulkner’s works are ideal for integration into the family medicine curriculum because they have endured as elite novels for the study
of human behavior and the heart in conflict with itself.

Faulkner’s major works were published in the 1920s and 1930s. The most notable for purposes of the family medicine curriculum include The Sound and the Fury (1929), As I Lay Dying (1930), Sanctuary (1931), Light in August (1932), and Absalom, Absalom! (1936). Of course, there are some 14 other novels and numerous short stories that could be added to this list.

The novels can be read and studied in depth over the course of a 3-year residency. There are several excellent commentaries as well that offer assistance in the process of delving further into the plots and themes of these novels. Given the complex nature of Faulkner’s work, some readers find literary criticism and commentary quite helpful. Faulkner’s style of writing can be instructive about human nature and the characteristics of knowledge. His literary style merges epistemology with literary method. A consistent theme concerning the nature of knowledge and truth in Faulkner’s work is that no single view or perspective tells the whole story. One cannot get at the truth from a single perspective. Accordingly, he tells his stories from the perspective of multiple characters.

For example, in As I Lay Dying (1930), Faulkner tells the odyssey of the Bundren family from the point of view of 15 different characters. This literary method demonstrates the importance of assessment of individual and family problems from multiple points of view. This 1930 novel is the tour de force saga of the death of Addie, a matriarch of the Bundren family, and the bizarre ensuing journey that her family makes to bury her in her hometown of Jefferson, Miss. The story is a gold mine for the family medicine educator in search for examples of family enmeshment, dysfunction, death anxiety, grief processing, and the heroic deed.

In The Sound and the Fury (1929), Faulkner tells the story of the deterioration of the Compson family (with psychoanalytic overtones) from multiple points of view: a retarded son (Benjy), a depressive, neurotic son who commits suicide (Quentin), a narcissistic, sociopathic son (Jason), and, finally, from the point of view of the unifying, sustaining glue of the family, the house servant/maid (Dilsey). The reader’s progression through this famous novel is from the murky consciousness of retardation, through cloudy neurosis, then cold psychopathy, and finally to a state of healthy enlightenment.

One family medicine professor, Robert L. Blake, Jr, MD, has analyzed family system dynamics in The Sound and the Fury. Dr Blake presents a genogram of Faulkner’s celebrated Compson family and uses family systems theory to explore marital dysfunction, hypochondriasis, maladaptive affilia-
tions, and enmeshment of family members. The article demonstrates that literary analysis of one of Faulkner’s best-known works can make important contributions to graduate medical education, family therapy, and family medicine.

Another educator, Winthrop Tilley, MD, has suggested use of The Sound and the Fury to teach about mental retardation and legal standards for consent for medical treatment. Faulkner begins his tale of the Compsons through the eyes of Benjy, a retarded son, who loses his legal rights and is castrated because he makes a pass at a schoolgirl. Themes of psychosexual development and family life cycle challenges abound throughout the novel.

I have used Light in August to teach about forensic psychology and psychiatry topics. This psychosocial analysis of the murder of a white civil rights activist by her mulatto lover (Joe Christmas) is replete with themes of fate, free will, sociopathy, family violence, misogyny, miscegeny, and isolation versus community. This is one of the most readable of Faulkner’s works. The novel is considered a major study in racism, an analysis of the divided self, and a profound examination of the alienation of 20th century man.

In discussing the topic of writing, Faulkner stated at the University of Virginia in 1957:

With me, the story never comes from an idea because I don’t know too much about ideas and ain’t really interested in ideas. I’m interested in people, in man in conflict with himself, with his fellow man, or with his time and place, his environment.

Faulkner’s focus on ideographic knowledge of the individual as more relevant than nomothetic or normative approaches is consistent with theoretical principles of family medicine such as thorough knowledge and comprehensiveness in the care of individuals and families. Faulkner’s works should be regularly incorporated into efforts to integrate literature and the arts in medical education.

Readers may balk at the notion of providing residents with copies of As I Lay Dying or The Sound and the Fury as assigned reading, alongside all the many other necessary required texts and journals. The process is certainly facilitated by the presence of a Faulkner lover on the faculty. However, I suggest that faculty and residents should dive in together with the promise of receiving a profound education concerning human nature. Avid readers will then find many parallels between their patient population and the inhabitants of Yoknapatawpha County.

Faulkner’s works can be integrated into an ongoing behavioral science conference schedule. A full range of psychopathology and related diagnostic categories can be encountered and explored by read-
ing through and discussing the above listed works. A book club/journal club atmosphere can heighten interest and participation. When necessary, commentary and/or literary criticism sources can be consulted to add insight and understanding. Faculty and residents alike will benefit from exploration of these classic novels, which have much to teach us about human behavior and the human spirit.

**References**


We Want Your Contribution to the “Literature and the Arts in Medical Education” Column

Are you using literary and artistic materials as part of your curricula? Share your experiences and observations with Family Medicine readers!

To submit material for publication in the “Literature and the Arts in Medical Education” column, contact the column editor, Johanna Shapiro, PhD, at jfshapir@uci.edu.

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