Hello everyone,

As you know, March 8 was International Womens Day. I have been thinking that much of what is written about women’s silence, is also relevant to the hidden curriculum and silence in medicine. Here is the feminist poet Audre Lorde.

My silences had not protected me. 
Your silence will not protect you.
But for every real word spoken,
for every attempt I had ever made
to speak those truths for which I am still seeking,
I had made contact with other women while we examined the words to fit a world in which we all believed,
bridging our differences.
In her essay collection *The Mother of All Questions*, Rebecca Solnit writes about the history of silence. She points out that "silence and powerlessness go hand in hand." The Guardian newspaper featured a brief extract here. Well worth the 5 minute read.

Continuing this theme, the #MeToo in Medicine movement is growing to include voices from students, residents and physicians. The CBC radio program *White Coat Black Art* recently featured heartbreakingly stories of abuse and silence due to fear of reprisal. Recording, transcript and commentary here. The audience was warned that the graphic content may be disturbing. It is; but one can only imagine how traumatic it was to actually experience these abuses.

Senator Marilou McPhedran commented on the importance of these narratives;
...because in medicine, we do such a poor job of recognizing issues like sexual assault, like wellness, that if these things aren't brought to the forefront, we'll just keep on silencing them."

"If there was a way we could safely talk about this, without fear of reprisals ... 
and for harassers to safely seek counselling ... 
then I think more of us would talk." 

Abuse victim

For confidential help and support at the U of A please contact the [Learner Advocacy & Wellness Office 780 492 3092](https://www.ualberta.ca/learnersupport/advocacywellness)
Reading and writing about these issues has been viscerally disturbing for me. If you have followed the links so far you may well share my feelings. So let's take a brief pause for a deep breath, humor and some gentler words from the world of children's picture books.

Rebecca Solnit suggests that silence is what is imposed, quiet is what is sought.

For those of us with small children who would seek quiet if we could remember what it is ... **The Quiet Book** by Deborah Underwood, illustrated by Renata Liwska describes many kinds of quiet from a child's view.

First one awake quiet

Jelly side down quiet

Sleeping sister quiet

Thinking of a good reason you were drawing on the wall quiet

Best friends don't need to talk quiet

What flashlight quiet?

The Quiet Book is in our Edmonton Public Library. More on Maria Popova's site here.
Breaking silence or choosing to remain silent around the hidden curriculum in medicine is an issue for men too. Some brave men have publically spoken out around medical student deaths, emotional connection and mental illness.

Hissan Butt at Queens wrote about the silence regarding the recent deaths of 2 Canadian medical students. "Remaining silent is a choice. However, we should understand its price before we make that choice." Full article CMAJ blogs here.

Dr Scott Winner recalls the impact of a patient he met while performing an ultrasound 20 years ago. "What I encounter is ancient, transcendant, fearful, beautiful. Read Tumors and Transformations in NEJM here.

Out of the Straitjacket is the devastating but ultimately hopeful story of a US trauma surgeon, Michael S. Weinstein who suffered severe depression. "I feel compelled to share my story, which I've found offers others an opening to express their own suffering." Full article in NEJM here.

I congratulate the CMAJ and the NEJM for creating a space to publish these narratives. Anesthesiology also publishes personal reflections, poetry etc. Do you think it would be useful/interesting if the CJA invited personal narratives or other writing?

Meanwhile there's always Twitter .....!
"Hi, I’m Sue. It’s been four months since my last tweet.”

GAS Cafe TUES 27 MARCH  1900 - 2100  Square One Coffee

Our GAS Cafe encourages face to face conversations and connection with our anesthesia colleagues from all sites. Sharing experiences encourages us, (literally, to find the courage) to speak up and speak out against the hidden curriculum of shame, stigma and fear that harms us all. And the coffee's pretty good!

"What I most regretted were my silences ...
And there are so many silences to be broken.”  Audre Lorde

Please feel free to break the silence around any issue meaningful to you! All constructive feedback welcome.

Thank you for reading, Sue

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