Editorial

This latest issue of *Ars Medica* has become, quite unexpectedly, an extraordinary one. We publish it amid a global pandemic, which has profoundly changed our lives—in some ways permanently, even if we do not yet recognize all the ways they will change. COVID-19 spread due to complex networks that link our societies together. We attempt to mitigate its effects through physical distancing and other measures that require forms of isolation antithetical to contemporary life.

Many of us recently emerged from that isolation to respond to the socio-cultural disease of anti-black racism. The murder of George Floyd by police officers in Minneapolis, U.S.A, was a catalyst for protests around the world against racist violence and other discrimination against racialized peoples, not just in the U.S.A, but everywhere. The dilemma over whether it is more important to adhere to public health guidelines that discourage or prohibit mass gatherings, or instead to publicly demonstrate our rejection of a racist status quo and demand meaningful changes in our societies, is important to discuss. Yet it is also evident that these protests continue to gain momentum because too many of us have allowed this familiar disease to persist due to indifference and/or inaction. For some, the dilemma is a false one.

The poems, short stories, and essays collected for this issue were composed before we knew the name of George Floyd or the term COVID-19. The temptation to attribute greater significance to
these works in the context of this historic moment is unnecessary. They stand on their own merit, inviting us to feel, think, and believe differently through perspectives often very different from our own, which, as Marshall Gregory (2009) notes, can serve as a foundation for developing the empathy to advocate for others. Through them we gain not only vicarious experience, but also ethical models that can guide our actions in a troubled world. That is an enduring value of creative expression.

James Baldwin (1962) emphasized this point sixty years ago at a pivotal time during the American Civil Rights movement when he insisted that artists (broadly defined) “must understand that your pain is trivial except insofar as you can use it to connect with other people’s pain. And insofar as you can do that with your pain, you can be released from it, and then hopefully it works the other way around too: insofar as I can tell you what it is to suffer, perhaps I can help you to suffer less.”

Suffering is a complex phenomenon in life, literature, and medicine. It is inescapable and often unmentionable. It is not necessarily ennobling or productive, nor should it be. Talysha Bujold-Abu’s “What I hear i keep,” the “cover” image for this issue, is striking because it conveys a feeling that may be difficult to describe, but which we can still recognize as rooted in suffering caused by racism. Our shared experiences of suffering also help us to recognize other manifestations. For example, we observe the disconnect between the sterile rhetoric of institutional policy and the lasting memories of
the people whose lives this policy is meant to dignify in Andrea Lee Fry’s “Advance Directives.” The protagonist of Christopher William Blake’s “Seven-Oh-Seven” faces a benign suffering of the ego when he learns his “special” relationship with a patient is not unique. Yet readers will likely recognize that the storyworld, in which the patient is deemed “too sick to go home, but not sick enough to go anywhere else,” is our world too, and that this paradoxical situation contributes to the prolonged suffering of the many patients whom this man represents.

Our hope as editors—and Baldwin’s challenge—is that by connecting with the pain expressed in these texts (among other emotions and experiences they narrate), at least some readers will not only feel released from their own suffering, but also act to change the systems that perpetuate it.

References

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