

Looking for a Mind [and Body and Heart] at Work

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The phrase “looking for a mind at work” entered the vernacular through Lin Manuel Miranda’s explosively popular musical, *Hamilton*, but the phrase owes its genesis to an earlier cultural phenomenon: Aaron Sorkin’s US television program *The West Wing*, in which Sam Seaborn, Deputy White House Communications Director for a fictional White House, says, “I look for anything. I look for a mind at work” (2002). Academics, similarly, can readily act as minds at work, looking for and at other minds at work—a focus on intellectual perspectives and contributions that is critical but can also sometimes obscure or neglect to consider the full human context of their own or others’ intellectual contributions. Academics with an interest in the rhetoric of health and medicine have a somewhat unique opportunity to consider the broader contexts of bodies as well as minds at work through their content focus, but may still neglect to consider the full spectrum of human conditions each scholar experiences. A mind is never at work on its own: minds are always operating within and inseparably from full humans with complex interpersonal, bodily, and emotional intersectionalities. This issue honors not only the minds, but also the bodies and hearts at work in scholarly pursuits.

A crucial component of consistently considering bodies and hearts, as well as minds, arises in opportunities to offer scholarly feedback to one another. In “RHM Generosity,” J. Blake Scott, Lisa Melonçon, and

Editors' Introduction

Cathryn Molloy (2020) described an orientation within the RHM community writ large and the *Rhetoric of Health and Medicine* journal, specifically, to being both “careful and generous with the feedback we give others” (vii). They note that “feedback takes on many forms,” including “conversations over email or at conferences, social media responses, mentoring conversations, as well as the more formal process of peer reviews” (vii). To that important list of feedback forms, we add here the more public feedback provided orally and in writing across academic pursuits, including public presentations, book reviews, and editors' introductions. We believe scholars within and beyond RHM have a responsibility to not only offer cogent, respectful critiques of one another's ideas—the work of their minds—but to do so in ways that respect and care for one another's full humanity.

We two editors have been fortunate to occupy fields and subfields with relatively good reputations for respectful, grounded critique and mindful disagreement absent personal attack, but we've also noticed cracks in that civil veneer. Infelicities have crept into some of our spaces—unkindnesses that suggest some scholars may be neglecting to consider the person behind the work, whether present in real time behind, say, a podium or present across time and space as the writer behind a document. While personal attacks or less-than-well-founded critiques can emotionally and/or physically affect a scholar, those personal effects are rarely publicized. Occasionally, though, they are. Alexandra Hidalgo (2021) modeled a beautifully human public response to a critique of *constellation*, the journal for which she serves as editor-in-chief. She included details forcing the reader to notice her not simply as a name on a masthead, but as a living, breathing person—“I woke up with an asthma attack”—with familial connections and responsibilities—“Dinner with my husband Nate and my sons (nine-year old William and seven-year-old Santiago) was an emotional affair”—and quite real and embodied feelings—“Later, I sobbed”—about the piece that sparked her response.

While Hidalgo offered significant evidence of a “mind at work,” she did so by consistently making clear her awareness that that is not all she, or any other scholar, is. She related a lesson she offers new graduate students about the “deceptively small field” they are entering. The lesson resonates for our purposes here. She described asking students to imagine, when they are citing a scholar or discussing their work, to:

Hensley Owens and Molloy

imagine that they are sitting across from that person, uttering the very words they wrote about them and holding their gaze, seeing their reactions as their words settle. At some point, they are likely to end up at some committee, panel or dinner with any living person they cite. That doesn't mean they can't disagree with them. Disagreement is the soil upon which much of our scholarship bears fruit. However, I ask them to disagree in a way that acknowledges the hours of sweat and metaphorical—and not-so-metaphorical—tears that go into our work. Obliterating someone else's vision and vilifying them as we disagree with them only serves to stop, not forward, the conversation.

Scholarly conversation is, of course, at the heart of the enterprise in which we all find ourselves, and as Hidalgo pointed out, in her response and to her students, it is dependent not only upon engaging with a mind's work by expressing disagreement or critique, but also upon simultaneously recognizing and considering the full personhood of the scholar who created that work.

Hidalgo's lesson for graduate students is particularly well-placed. Those at the start of their careers, learning to be "minds at work," can be unwittingly positioned to deride work rather than engaging with it in context they don't (can't) yet have. Before one learns the contours of a field or meets many of the humans who occupy it, thoughts dashed off for a seminar response, for example, might be less than careful. With some graduate seminars requiring public blog posts instead of class-bound response papers, the prickly thoughts of new graduate students can occasionally live forever online. I (Kim) discovered my starring role in one such post after an old friend Googled me. When she got in touch, she said, "Like the second hit for your name was someone saying they hate you." The blog post she'd seen, "Why I don't like Berube (or Kim Hensley Owens for that matter)," still shows up when *anyone* Googles my name. This serves as a relatively mild example, but the title, which indicates dislike for me—not for my work, a piece I wrote in 2009, but for *me*—and includes my full name, but not Michael Bérubé's infinitely better-known full name, still stings.

Without careful training to consider scholars as full people—such as that Hidalgo models—hasty or unfounded criticism could become go-to strategies as academics develop, rather than among the understandable

Editors' Introduction

stumbles we all have and hopefully move beyond as we develop as scholars and as humans. Hidalgo reminds readers that academic work is “the result of countless hours of hard labor that is rarely financially compensated, not to mention celebrated.” As editors, we take these invisible hours of labor—labor we recognize as emotional and physical as much as it is intellectual—very seriously.

RHM's founding editors began with a mission of “manifesting a scholarly dwelling place” for the field, and did so by consistently publishing work that draws on a variety of methodologies and overlapping, interlocking disciplinary perspectives; by remaining open to controversy and growth; and by keeping visible their consistent consideration not only for the minds, but also the bodies and hearts of those doing the work. We continue to strive to ensure that the journal is not only a repository for published scholarship, but a scholarly collective and voice for and of the field. In “Caring for Diversity and Inclusion,” Scott and Melonçon vividly reiterated and more deeply entrenched the character of the journal, writing that “transparency and rigor must be accompanied by care as a defining value of our work” (2019, vi). That emphasis on care as a core value aligns with our focus today on the physical and emotional, as well as the intellectual, and has resulted not only in articles that focus on care specifically in terms of ethics, whether those of *RHM* scholars arguing for or against a specific code of ethics for our field (Baldwinson 2018, Lynch 2020) or examining the ethics of medical researchers (Marback & Barton 2019), but also articles whose focus on care is more implicit, such as in Karen Kopelson's (2019) exploration of the values inherent in physicians' narratives about patients “dying well.”

The founding editors were consistent in their willingness to explore and expose their thinking-in-progress about complicated issues confronting the field and in requests that invited and inspired others to think through those issues with one another and with them. As co-editors, we are eager to continue this vigorously reflective and collaborative stance to confront issues surrounding accessibility, diversity, ethics, racial justice, and systemic oppression, and to continue the visible, social shaping of the journal's commitments to the field and various other stakeholders. One illustration of this commitment is that we editors are among the 198 signatories so far on “Anti-racist scholarly reviewing practices: A heuristic for editors, reviewers, and authors” (2021), and together with our founding editors offered suggestions for that document's revision as well. Important to note is that *RHM* was already employing many of the suggested practices from its founding and

that we are committed to continuing to evaluate and adjust our processes to enhance inclusivity at the journal. We see these goals as inextricably aligned with an understanding of academic work as a fully human endeavor, more than just the product of minds at work, and involving people across differences.

Our stewardship of this journal seeks to continue its trajectory of exposing and expanding the myriad methodologies and matters RHM can address; of providing a scholarly home and touchstone for scholars who may be separated by distance and/or training, but who share commitments to both understanding and improving communication about health and medicine; of continuing to strive to ensure that all thoughtful scholars are included in the conversation; and of working to expand RHM scholarship's potential to serve every human.

We want to express our deep gratitude for *RHM* reviewers who so consistently model careful, respectful critiques, and whose invisible, time-intensive labor helped the following authors produce the work that comprises this issue.

Introduction to the work in this issue

The lead article in this issue comes from Amy Koerber (she/her), who analyzes the 2014 Michigan State University Title IX report. "The Rhetorical Infrastructure of Sexual Misconduct in Michigan State University's Abuse Scandal" takes up that report as "an important component of the rhetorical infrastructure that enabled Amanda Thomashow's account of [Dr. Larry] Nassar's inappropriate touching of her to be understood as something that any reasonable person who possesses the proper amount of medical expertise should see as a normal part of 'medically appropriate' treatment." Koerber deftly analyzes the language of the report to illustrate that its purpose was to argue that the victim, while traumatized by Nassar's actions, "simply did not understand what was happening to her" when she came forward with abuse allegations. What has come to light in the years since firmly illustrates that Thomashow accurately identified abuse: the report's conclusions were false beyond a shadow of a doubt.

Koerber demonstrates that the Title IX report "wields power because it exists within a network of other rhetorical artifacts, practices, and deeply entrenched patterns that had worked together, for many years prior to this report, to constitute the infrastructure that protected Nassar for a

Editors' Introduction

distressingly long period of time." Koerber argues that behind institutions lies a complex rhetorical infrastructure whose networks of power can act to protect the guilty; she makes the case that instances of sexual harassment and assault are steeped in legal language that automatically offers credence to "experts" while a "lack of credibility [is] granted to those who speak as victims." Her analysis illustrates how seemingly innocuous phrases like "medically appropriate" can be wielded within those systems in ways that protect abusers and institutions and strip power from individuals and victims. The piece models the value of broad rhetorical analysis and points to the need for transformations to institutional rhetorical infrastructures.

Continuing a theme of those in power needing to learn to listen to those not, Elizabeth A. Hintz (she/her) tackles the controversial topic of sterilization requests by young patients in her article, "Childfree Sterilization: A Normative Rhetorical Theory Analysis of Paradoxical Dilemmas Encountered by Childfree Patients and Providers." Addressing conceptions of feminine and masculine identities and the ways each are differently connected to parenthood, Hintz confronts hypocrisy within the medical community. Specifically, while pointing out that "ethical guidance recommend[s] the privileging of 'patient reproductive autonomy,'" she notes that "young, childfree patients who request sterilization from medical providers often experience the repeated denial of these requests," a denial "at odds with [that] ethical guidance."

Emphasizing the identities of "childfree patients," Hintz explores how patients "denied sterilization, particularly if the potential for regret is cited, often feel that their *childfree identity is being questioned*." She recommends robust recognition of various views on sterilization, warns against inadvertent bolstering of problematic heteronormative and pronatalist attitudes, and recommends providers change how they discuss these issues on their path to more fully recognizing patients' different standpoints and to bringing about practices in better keeping with the patient-centered orientation ethical guidelines already recommend.

Sara Press (she/her) continues a focus on whole-person care with her article, "The Politics of Standardized Patienthood," which offers a kairological analysis of the Simulated Patient Program (SPP). Press traces changes in its language over time to illustrate how medical training and patients have been positioned and viewed at various points. Engaging as both actor and scholar in the Simulated Patient Program, Press offers an intimate, embodied view of how patients themselves have become standardized and how

that standardization complicates outcomes. Among the complications that her analysis of the SPP reveals is a tendency for actors simulating patients to revert to “certain patient types, be it ‘the compliant patient,’ ‘the hostile patient,’ or ‘the patient from another culture.’” Press investigates how these patient stereotypes are formed and examines how various institutional biases contribute to negative stereotypes. Her attention to language shifts over time and uncovers important insights into current practice that affect whether patients are received positively or negatively by health providers—both of which affect health outcomes.

Press’s work ultimately seeks ways to counteract standardization, which “overlook[s] the place-based needs of distinct patient populations operating within irreconcilable health care systems.” To that end, she concludes with an introduction to the Indigenous Simulated Patient, which seeks to “represent and serve Indigenous peoples in medical pedagogy and practice.” That program, she argues, seems to offer patients an empowerment and an opportunity to advocate for their communities that is not present in the standard SPP.

The last article in this issue is Katie Swacha’s (she/her), “‘I could probably live to be 100’: An Embodied Approach to Action-Oriented Research with Vulnerable Populations,” which zooms in on small, specific moments of research and living, examining the embodied elements of complex problems. Swacha identifies three tiers of questions about accounting for “micro-moments” within research about people’s lived experiences: theoretical; methodological; and practical. She seeks more impactful ways to improve the lives of vulnerable populations through rhetorical research. One of the questions Swacha poses is “How can we account for multifaceted rhetorical ecologies with attention both to their larger structural complexity and to their lived specificity (in other words, without losing sight of [an individual participant in a study] as a singular, living, and breathing human being in the process)?” Swacha offers “rhetorical plasticity” as one possible answer to that question, through which scholars can notice the details of what individuals are doing, even (or especially) in small moments, as a form of rhetorical work that is deeply embedded in their particular contexts. By positioning rhetorical plasticity as a path to troubling “the notion of an ‘expert’/non-‘expert’ binary,” Swacha offers this detailed focus as a potential solution to hierarchical issues that persist in action-oriented research.

Taken together, the articles in this issue are about trusting patients and research subjects to know their own bodies, hearts, and minds; to listen to

Editors' Introduction

each of them; and to encourage medical providers and rhetoricians alike to understand them and support their receiving appropriate care that respects their full humanity and their differences.

As always, this issue extends to our online space, where readers will find reviews of two important recent books in RHM.

Beth Topping offers a cogent take on Kimberly C. Harper's (2021) *The Ethos of Black Motherhood in America: Only White Women Get Pregnant*. The review shows how Harper traces the history of Black mothers from slavery to modernity and connects those histories to fertility policies affecting Black women still today: "Harper explains how racism was baked into the very formation of modern reproductive medicine." While the first three chapters provide historical, medical, and legal background, Topping describes the fourth chapter as "the theoretical crux of the book," in which Harper works through various foundational texts to develop her argument about maternal ideology's connections to national ideology, ethos, race, and class. From there, the book shifts to a focus on reproductive justice, including detailed analyses of images and histories and offering specific, rhetorically robust strategies for continued and improved reproductive justice.

Closing out this issue is Bryna Siegel-Finer's review of John Lynch's (2019) book, *The Origins of Bioethics: Remembering When Medicine Went Wrong*, carefully walks readers through his arguments about the development of bioethics over time, the historical (and consistent) blurring of lines between medical treatments vs. medical experiments, and a complex rhetorical analysis of how historical events are remembered in various spaces and contexts and what the effects of those rememberings are. The review details Lynch's concept of "minimal remembrance", which he describes as "the crafting of memories sufficient to address historical and ongoing outcry about an event, yet thin enough to minimize harm to the institution's reputation" (p. 15). Siegel-Finer suggests that this important book, with its detailed analyses of the Tuskegee syphilis study, the Willowbrook State School hepatitis study, and the University of Cincinnati radiation studies, "could easily serve as an enhanced model of the CITI [IRB-required ethics training] program . . . to give readers an in-depth view of the perils and pitfalls of Human Subjects Research."

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Hensley Owens and Molloy

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