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EDITORIAL

HEALING SPACES IN MEDICINE

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The word “healing” comes from the Anglo-Saxon word *haelen*, which means to make whole. Healing spaces can promote harmony of mind, body, and spirit.

I invite you to allow an image of a healing space to emerge. What do you see, hear, smell? How do you feel? Can you venture there when the need arises?

Next, I ask you to picture being an *inpatient* in a modern hospital. If you could create the ideal environment for healing, what would it be? A single room with a view and plenty of light? Quiet? Providing an aroma, such as lavender, to offset medicinal odours or toxic cleaning products. How about adding a plant and pictures of loved ones? What else could enhance your recovery?

If you are a physician, nurse, or allied health care professional what do you need to heal *yourself* in such a high stake, stressful workplace? Would you enjoy strolling in gardens nearby on your lunch break? Perhaps spending time in a lounge where you can relax or debrief with colleagues. Having healthy food and snacks available may propel you through long shifts. Would you choose to attend onsite meditation sessions for hospital staff?

Healing can be an internal experience that does not depend on how the room is arranged or seeking refuge in a hospital chapel. Some patients find peace through prayer, meditation or simply being fully in the moment. While this may seem unrealistic in a busy, crowded hospital, it may be facilitated by providing periods when the patient is not disturbed by staff or visitors entering their room unexpectedly.

Healing, nonetheless, may be influenced by the external environment. Noise (e.g., ICU monitors) may affect patient and staff stress levels and emotions. Music may soothe frayed nerves. Other aspects of the external environment matter as well; examples are: clear directions so people can find their way through the hospital, wall colours (soft tones), artwork displayed in hallways, patients' rooms decorated with meaningful items, a view of nature through a windowpane.

We, the faculty of McGill Programs in Whole Person Care, consider that the relationship between a patient and health care provider can be considered a type of "healing space." This volume of our journal is dedicated to healing spaces in medicine in a broad sense. I have gathered essays from five countries (Lebanon, France, Canada, the United States, and Australia), each considering what a healing space may or may not be.

When submissions arrived, I noted that a few authors described spaces that were *not healing*. As the Editor I mulled this over and considered how to include them. I realized that they spoke directly to the challenges inherent in medical settings. For example, Dr. Moukarzel laments how the burn unit in her hospital in Lebanon was suffocating for her patient. She suggests improvements that would render the setting better for her patients and herself. Dr. Spodenkiewicz finds himself consulting with adolescents seeking mental health services while sitting side-by-side on a volcanic rock in Réunion, a French island, for lack of rooms in his unit. Dr. Farzin describes another type of impediment to healing – red tape hindering access to psilocybin used to assist a palliative care patient's journey towards death with dignity and inner peace. Once administered, his patient was able to take the "trip" of his life while safely lodged in his beloved country cottage. Dr. Dobkin views healing space from the perspective of Buddhist psychology pointing out that the mind can be where transformation occurs. Dr. Lijoi, a family physician, shares how Narrative Medicine sessions for residents and faculty provides space for healing through examining literature, artwork, and stories. Dr. Monshat, a psychiatrist from Australia, proposes that small groups who gather in circles invite connection and heart-felt exchanges between people as a place for healing. Dr. Hutchinson compares the inner lives of characters portrayed in two books. Analogous to Dr. Dobkin's essay, he examines how healing can take place in one's mind. He recognizes, like Dr. Lijoi, how powerful narratives can be, albeit in a negative or positive way.

I chose as the theme for my final volume as Editor-In-Chief of this journal what I believe represents the essence of our work at McGill Programs in Whole Person Care i.e., promoting healing in those who seek our care. The manuscripts published herein are a testament to that aspiration. It has been a joy to gather and publish authors' reflections from around the world for the past eight years. ■