

Haikus of General Practitioners: A 10-Chapter Pedagogical Tool.

Chapter 5. Family-Centered Care

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Abstract

The value of family medicine/general medicine lies in its distinctiveness from academic medicine. It replaced categories with process and relationships. In its scientific method, emotional experience plays an important role. General medicine is unique in the medical field because it transcends the mind-body duality. Therefore, general practitioners should be encouraged to use a non-conventional approach when addressing the problems that arise in the consultation. Fostering reflective practice is an integral part of continuing professional development and training in general practice. Poetry is a method of reflection that can allow physicians to reflect on concepts and experiences. Haiku is a form of traditional Japanese poetry. It consists of a short poem, generally composed of three lines of five, seven, and five syllables, respectively (although this meter is flexible, and in English, syllable count is based strictly on pronunciation, not spelling). It is unrhymed and aims to express, in just three lines, a brief and sincere feeling, usually arising from the contemplation of nature or from feelings about love, death, illness, pain, or any lived experience. Using haikus in medical education is an excellent resource for activating critical thinking and humanizing medicine. In the end, medicine and poetry share the same thing: the art of observing and listening attentively. In this article, an illustrative case is presented that gives rise to six haikus to reflect on the basic concept of family medicine of "Family-Centered Care."

Key words: poetry; family care; metaphor; general practice; emotions; knowledge

Introduction

General/family medicine is unique in the medical field because it transcends the mind-body duality. Therefore, general practitioners should be encouraged to use unconventional ways of acquiring knowledge. Poetry can be a source of knowledge by providing us with perspectives on reality, and in this sense, it can also have a cognitive impact on us and our understanding of the world. Science and poetry have more in common than most people realize. Both rely on metaphor, which is as crucial to scientific discovery as it is to lyrical description [1-3].

Haikus is a traditional Japanese form of poetry. Using haikus in medical education is an excellent resource for activating reflection on concepts and experiences, critical and ethical thinking, creative abilities, and the humanization of medicine. Because they are such short texts, they require students to fill in the gaps with their own clinical judgment. For students heavily focused on linear, detail-oriented facts haikus act as an outlet to stimulate creativity and process feelings encourage to identify the most salient features of difficult topics (such as the fundamental concepts of general medicine) and pair them with supporting scientific evidence; It is a beautiful project to use haiku writing to help students process the emotional weight of clinical care, explore practical challenges, and

articulate the essence of health and illness [4-9]. In this article, 6 haikus are used to reflect on "Family-Centered Care", a basic concept of family medicine.

Clinical Case

Andy, 16, comes to the clinic complaining of recurring abdominal pain with no apparent organic cause after multiple tests. Upon reviewing the family history, you discover that his mother is undergoing advanced cancer treatment and his father suffers from severe reactive depression.

Haikus For Thought

Different branches, yet sharing nourishment now from the same deep root.

The same heavy plague traveling through the family tree of the chosen heirs. (Old and heavy pains transmitted in complete silence from parent to child.

I know all your kin, inside the home we can heal sorrow much better.

Threads made of pure blood weaving the fabric of health in our memory.

Bonds made of true blood, stories that cross each other in the clinic room.

Pedagogical Key

Usefulness of the genogram. The impact of the family life cycle.

Discussion Questions

Is the adolescent's symptom their own, or is it a manifestation of the suffering of the entire family system? How does a genogram help us diagnose somatization?

Concept Of Family-Centered Care

Among the fundamental tools of the general practitioner's clinical work, an important one is knowledge of the family health history. This data is essential for the comprehensive study of the patient. The family is the primary and determining context for the physical, emotional, and intellectual development of each of its members and is the primary social context for treating illness and promoting health. The family life cycle is an organizing concept that allows us to understand the sequential evolution of families and the transitional crises they experience as their members grow and develop. The genogram is an instrument or tool of the biopsychosocial model that provides information about the patient, their family, and their context, which implies prognostic value and useful information for the consultation. Creating the genogram fosters a therapeutic bond with the family, which implies a qualitative change in the relationship [10-18].

References

1. Harvey K., (2023), The Power of Poetry: Editorial to accompany: Capturing grief in older people through research poetry. *Age Ageing*. 52(1): afac281.
2. Padel R., (2011), The science of poetry, the poetry of science. *The Guardian*.
3. Turabian JL., (2021), The doctor as a poet. *Hist Philos Med*. 4(1):3.
4. Anthony ML., (1998), Nursing students and Haiku. *Nurse Educ*. 23(3):14-16.
5. Biley FC, Champney-Smith J., (2003), "Attempting to say something without saying it ...": writing haiku in health care education. *Med Humanit*. 29(1):39-42.
6. Pollack AE, Korol DL., (2013), The use of haiku to convey complex concepts in neuroscience. *J Undergrad Neurosci Educ*. 15;12(1): A42-48.
7. Huang C-D, Novita Asdary R, Septi Mauludina Y, Huang Y, Monrouxe L., (2025), The influence of narrative medicine on medical students' readiness for holistic care practice: A realist synthesis. *Medical Education*. 60(3): 230-246.
8. Bethany W, Macgregor K, Cooper M, Sornalingam S, Okorie M., (2022), Can Poetry Help GPs and GP Trainees to Develop Their Reflective Practice? *InnovAiT*. 15(6): 323-329.
9. Takemoto EK, Lee YJ., (2024), Shakuichi and Haiku Reflection: Their Role in Enhancing Health for Older Adults. *Hawaii J Health Soc Welf*. 83(9):257-259.
10. Hostler SL., (1991), Family-centered care. *Pediatr Clin North Am*. 38(6):1545-1560.
11. Hriberšek M, Eibensteiner F, Bukowski N, Yeung AWK, Atanasov AG, Schaden E., (2024), Research areas and trends in family-centered care in the 21st century: a bibliometric review. *Front Med (Lausanne)*. 11:1400-1577.
12. Kuo DZ, Houtrow AJ, Arango P, Kuhlthau KA, Simmons JM, Neff JM., (2012), Family-centered care: current applications and future directions in pediatric health care. *Matern Child Health J*. 16(2):297-305.
13. Lisa A. Bueno Fernandez, Caroline Schoo, Sunny P. Aslam, Audra S. Rouster., (2026), Family Dynamics. [Updated 2025 Dec 13]. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing.
14. Turabian JL., (2024), A Fundamental Tool of The General Doctor: Knowledge of The Family Life Cycle. *J. General Medicine and Clinical Practice*. 7(19).
15. Turabián JL, Báez-Montiel B, Gutiérrez-Islas E., (2016), Type of Presentation of Coronary Artery Disease According the Family Life Cycle. *SM J Community Med*. 2(2): 10-19.
16. Turabian J L., (2025), Storytelling, biography, and genograms. *BMJ*; 390: r1771.
17. Turabian JL., (2017), Family Genogram in General Medicine: A Soft Technology that can be Strong. *An Update. Res Med Eng Sci*. 3(1).
18. Turabian JL., (2023), A Biopsychosocial Instrument to Study and Intervene in the Complexity of Changes and Stability of Family and Community System Health: The Genogram. *Arch Health Sci*. 7(1): 1-8.



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