

EDITORIAL

COMMUNITY SPIRIT

Timothy H. Wideman, Editor-in-Chief

School of Physical and Occupational Therapy & Programs in Whole Person Care, Faculty of Medicine and Health Sciences, McGill University, Montreal, Quebec, Canada

timothy.wideman@mcgill.ca

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It is springtime in Montreal, and the park is absolutely packed. Leaning against a tree, I feel winter finally slip away as a light breeze and sunshine reach skin that has been hidden beneath layers for more than half a year. There's a magic in the air that makes new connections effortless – a joyful ease with others and one's surroundings that is ineffable, but feels like home. This feeling of renewal and belonging reminds me of the first time I attended a Whole Person Care congress, some seven years ago.

At the time, I was navigating the tenure application process – a tumultuous period in an academic career. This uncertainty drove me to sign up, on a whim, for the Congress. I did not know what to expect but was hoping to find something – anything – that might help make my post-tenure work more exciting and meaningful. I still remember the trepidation that I felt before joining the opening plenary of the Congress. *What am I doing here?* The question screamed through my head as the escalator slowly pushed me from my professional comfort zone, toward a wall-sized *ensō* poster.

But then Rana Awdish started her talk. She simultaneously spoke with the full confidence of a seasoned medical expert and the wounded vulnerability of a patient who – like too many others – had been traumatized by her experiences in the healthcare system.[1] She outlined a vision for how we, as a healthcare community, must move forward with more compassion, humanity, and, dare I say, love. It was like the fresh air of spring, the sunshine after the long winter. And it seemed to float me to the microphone as she wrapped up. I rarely speak at these types of gatherings, but found myself talking about the vague sense of longing that I had been experiencing and my gratitude for Rana's message, which seemed to point

a precise finger at what I had been searching for. *Where did that come from?* This became a recurring theme throughout the weekend – connections with others that continued to inspire an unfiltered openness that felt both surprisingly novel and natural.

Since that congress, I've found a deep sense of community within Whole Person Care; a sense of place that is incredibly rare in my professional world. There is a groundedness. A sense of comfort and familiarity. A loss of self-consciousness. That ineffable, home-like feeling of springtime in a park.

I've learned over the years that, in many ways, this spirit of community is no accident. But, rather, our group has been blessed with gifted leaders who have thoughtfully fostered and nurtured this sense of place and belonging among so many. Balfour Mount pioneered palliative care and, together with Tom Hutchinson, developed McGill Programs in Whole Person Care. Their contributions have shaped a generation of health professionals and helped transform patient care. This journal would also not exist without their leadership.

Lately, however, our community has been in transition. Bal died last fall and Tom retired in December. Our group has also been navigating important funding cuts that have contracted our work to the bare essentials of our mandate in teaching and scholarship. My hope with this issue was to try to put a finger – perhaps, as Rana did for me – on what we've been missing and where we might go from here.

Bal and Tom

People loved Balfour Mount. He was a visionary and charismatic leader. I never met Bal, but I continue to feel his presence throughout the Whole Person Care community. Last fall, the McGill Palliative Care program that he founded (and that, decades later, cared for him at the end of life) hosted a touching memorial in his honour. The event was full of people who had been forever changed by Bal – a testament to his gifts in creating community. A small anecdote from one of his colleagues stands out. Bal had booked a meeting with a fellow organizer for the upcoming palliative care congress that they were planning. Just prior to the meeting, which was typically held in a hospital conference room, Bal insisted that they needed to relocate to his home. Upon arrival, the fellow organizer was ushered into his den and asked to sit on a couch and don a set of headphones. Bal then proceeded to play a track from Pink Floyd's *The Wall*. He had apparently been contemplating the perfect closing anthem to the upcoming congress and wanted a second opinion. A simple story, among many, that provides a window into Bal's effort and detail in crafting a desired atmosphere that might help open others to new insight and inspiration.

Tom has a similar gift. The numerous community-building events that he led were always a unique mix of science and art. He has a special way of breaking with convention to deepen relationships. I remember a meeting he organized to help introduce our leadership team to another group that had a complementary focus. We met in their hospital-based research centre and, just as we were settling in, Tom pulled out a

large bottle of whiskey and suggested that having this conversation over a drink might be just the thing to inspire new collaborations. He also has a unique capacity to use the arts to inspire a whole person approach to practice. For years he led a film series event that invited members of the public into reflection and discussion about whole person care. Similarly, at the recent launch of his memoir, *The Craft of Medicine* [2], his skills were on full display. The local independent bookstore (which had long been a supporter of our events) was filled to the brim. Tom started his address by reciting an intriguing poem, “Fire” by Judy Brown, which he deftly integrated throughout his address. The room was filled with a rich sense of fellowship – it was clear that everyone in attendance felt deep affection and gratitude for Tom, and for his many contributions.

Cultivating a Spirit of Community

The number of submissions that we received in response to this issue’s call was unprecedented – clearly, community means a great deal to people drawn to whole person care. This makes sense to me. In many ways, to practice whole person care is to work somewhere near the margins of mainstream health care culture. It involves holding onto values, forms of attention, and ways of being with patients that are not always easy to name, measure, or defend. It involves a belief that health care can be more human, more relational, more attentive to suffering, meaning, and personhood. But carrying this belief alone can be untenable. The pieces in this issue speak to this tension in different ways. Together, they remind me that community is not simply a pleasant complement to whole person care, but rather an essential piece of what sustains this work.

During this period of transition within our own Programs, I have been trying to better understand what goes into creating this kind of community. My sense is that, at its centre, there needs to be a feeling – a spirit, if you will – that inspires comfort, trust, joy, and openness with others. There are, of course, practical structures that give a community form – meetings, journals, seminars, budgets, leadership roles. Without these, community can quickly become too disjointed to sustain. But structure alone is not enough. As Judy Brown suggests, tending a flame requires attention not only to the wood itself, but also to the spaces between.

Bal and Tom seemed to understand this. Their gatherings had form, but also openness. They created containers, but left room for surprise. A song, a poem, a film, a shared drink – these were not ornamental details. They were small invitations to enter the work differently. They helped people lower their guard, notice one another, and become more available to the possibility of connection.

I am still learning how to do this. I am learning that community requires more than admiration for those who know how to create it. It asks something of all of us. It asks for time, attention, and effort. It asks for a

willingness to show up before we are certain of the outcome. It asks us to risk small gestures whose value may never be captured in a report, strategic plan, or annual review.

Moving forward, I hope to keep stepping onto escalators that carry me out of my comfort zone. I hope to keep trusting that not all essential outputs are tangible. And I hope to help create spaces where others can experience something like what I felt during that first Whole Person Care Congress – a sense of recognition, possibility, and belonging that I had not quite realized I was missing.

As you read this issue, I invite you to reflect on the communities that have sustained your own work. Where have you found a sense of belonging? What helped create it? And what small role might you play in helping to create that spirit for others? ■

References

1. Awdish R. *In Shock: My Journey from Death to Recovery and the Redemptive Power of Hope*. New York: St. Martin's Press; 2017.
2. Hutchinson TA. *The Craft of Medicine*. Tom H. Hutchinson; 2025.

Biographical Note

Timothy Wideman is a physical therapist and associate professor at McGill University. His research aims to help clinicians better understand and address suffering associated with pain, and to improve how future health professionals are trained to care for people living with pain. He has been serving as Editor-in-Chief since 2023.