How does one learn from reading an article?

I have been Deputy Editor of the European Journal of Palliative Care for a few years now. I have edited many articles and do the final read of alternate issues. I am very aware that I employ different reading styles depending on whether the task in hand is to edit an article or to learn from it. It strikes me that the phrase 'active reading' might embrace what I do when my goal is to achieve learning. This prompts me to ask whether active reading and editing are conflicting or synergistic arts? More importantly, how does one learn from reading an article?

When I did the final read on this issue, I realised that I could learn a lot from the article on Roman Catholicism (see pages 18–21, *The meaning of suffering and death in the Catholic faith* by Vivian Boland). I also recognised that, to learn from it, I needed to reread it later.

Our series of articles on spirituality and religion* are packed with interesting insights into what each religion means to its followers. They prompted me to reflect on my clinical practice over the years. I recall one of the first patients that I met as a fledgling consultant in palliative medicine. He had a large open wound in his back. A devout Buddhist, he refused all analgesics, although he was clearly in pain. Advice and support from the hospital chaplaincy team to those caring for him, including myself, helped us understand his suffering in the context of his strongly held cultural, spiritual and religious beliefs. Through this, we were able to support him in ways that he could accept.

I also recall two senior religious leaders in whose care I was involved, one a mother superior of a convent (a devout Roman Catholic) and the other a bishop (a follower of the Church of England). Both were facing the prospect of their death in the not-too-distant future. For one, this strengthened their faith, for the other, it prompted them to question whether their devotion to their chosen religion throughout their life had been the right thing for them.

An understanding of different religions and cultures is increasingly important in our multicultural society. I hope that you will 'actively read' this series of articles to reflect on your practice and that you will turn to them again in future as a reference.

So where does that leave us? For me, editing and active reading conflict to some degree. When my focus is on editing an article, I rarely learn from it. Others may be different. For the few of you who regularly edit palliative care (or other) journals, ensure that you give yourself the opportunity to learn from them in whatever way suits you. We all need to employ the skills of active reading and reflection on our clinical practice to sustain us, generate new ideas and help us continue learning.

I don't think that the term 'active reading' is a recognised one. Anyone with an interest in palliative care knows the importance of 'active listening'. Conceptually, active reading is akin to active listening. Perhaps active reading should be defined as reading that prompts learning. Just as individuals learn in different ways from the spoken word, maybe we all read differently. Active reading, reflective practice and lifelong learning must be interrelated.

After all, learning is an art and lifelong learning is an art that one has to work at.

Mark Twain is reputed to have said, 'When I was a boy of 14, my father was so ignorant I could hardly stand to have the old man around. But when I got to 21, I was astonished at how much the old man had learned in seven years'.**

Carol Davis, EJPC Deputy Editor, Lead Consultant in Palliative Medicine, Countess Mountbatten House, Southampton University Hospital NHS Trust, Southampton, UK

* Recently published articles from this series are:

Is it appropriate for doctors to take a spiritual history? by Joanne Sinclair, European Journal of Palliative Care (EJPC) 16.4, July/August 2009 The meaning of death and dying in Judaism by Samuel Lebens, EJPC 16.5, September/October 2009

The role of health professionals in spiritual care: attitudes, practices and interventions by Simon Dein, EJPC 16.6, November/December 2009.

** According to the Oxford Quotations Dictionary online, this quotation has been attributed to Mark Twain by the Reader's Digest in September 1939, but not traced in his works. We all need to employ the skills of active reading and reflection on our clinical practice to sustain us, generate new ideas and help us continue learning