

INTRODUCTION

The University of Missouri-Kansas City (UMKC) has an established history of interdisciplinary dialogue about the importance of the arts and humanities in society. The goal of the School's medical humanities program is to help students realize that they can understand the human condition through literature, the fine and performing arts and other humanities experiences, and that the concept of healing is much broader in its scope than the diagnosis and the treatment of illnesses. This article will describe an elective interdisciplinary course that both liberal arts and health care professional students can choose. Medical students in the 6-year B.A./M.D. program are encouraged to include it in their curricula.

The course is called "Healing and the Arts," and its stated purpose is to give students a theoretical and practical experience of how the arts can be a healing force in people's lives. Using the arts to promote healing is not a new topic for health professionals¹⁻⁸. However interweaving the metaphor of healing and the arts throughout an entire course is quite unique. The course focuses on how healing can be supported by different experiences of the arts rather than centering on one kind of art as therapy (e.g., drama, poetry, art or music therapy).

HISTORICAL BACKGROUND

In 1976, the Rockefeller Foundation convened a meeting of persons interested in medical humanities to consider the various roles of the arts in healing and therapeutic environments. "The Healing Role of the Arts," a narrative defining what the healing arts are and how they can best be employed in America, was published after this session. The point of commonality among all participants was that the arts are essential for well-being. Related discussions explored the importance of art as "process," not art with a capital "A". The use of art as a symbol of personal and/or societal struggle was seen as more meaningful than art for its aesthetic value alone. Despite differing opinions in defining the healing arts, all participants agreed that "art is an intrinsic attribute of human existence"⁹.

Later discussions at the meeting focussed on "how to measure the value of the arts." Several people expressed their frustration with being unable to translate their personal experiences into hard data. Twenty-seven years after this study, the same problem exists in academic institutions across the country. When education and "assessment" co-exist, the arts often fall short, because it's difficult to test "empathy," "positive healing," and other aspects of

artistic learning.⁹ Unfortunately, in medical education, objective measurement remains the primary goal,¹⁰ especially in determining required offerings for curricula. This should not, however, prevent educators from trying to design more sensitive ways of determining outcomes.

Another important area of conversation centered around “art beyond curing,” the notion that health care entails more than curing a specific illness or disability. One participant said that “healing” goes beyond the institutional population; therapeutic healing is a continuum and should reach everyone who needs it, not just sick people who are in hospitals⁹. As medical care moves out of hospitals into long term care facilities and homes, this conversation becomes even more important.

COURSE DESCRIPTION

The three stated objectives of the course are 1) To analyze the arts, how they function for individuals and society, what their various roles are; 2) To fully experience the healing force of the arts after gaining knowledge about the history and context of the arts; and 3) To develop empathetic responses to artistic mediums. The faculty seeks to help students “build bridges,” connecting their own lives with the art experience. For many students today, particularly those trained in the sciences, exposure to the arts both intellectually and emotionally is a “brand new” experience. They need to learn to ask what a work of art is about, as well as to learn something about its history and how it can have relevance to their day-to-day lives. The course provides tools to understand the processes artists use to communicate and to identify themes that are relevant to healing as students view and/or experience the arts.

These goals of the course relate to what P. Anne Scott says in “The Relationship Between Medicine and the Arts,” that the arts encourage whole-person understanding as well as helping students to recognize and learn from individual patient experiences. She uses the term “enrichment of language and thought” and argues that literature and the fine and performing arts can enrich the language and, thus, the thought processes, of healthcare providers in a manner that provides a wealth of concepts and ideas with which to think about healthcare¹¹. Scott concludes her article by quoting RS Downie: “Medicine and art have a common goal: to complete what nature cannot bring to a finish.... to reach the ideal...to heal creation. If we are attentive in looking, in listening and in waiting, then sooner or later something in the depths of ourselves will respond. Art, like medicine, is not an arrival; it's a search”¹².

In order to elicit students’ assumptions at the beginning of the course, they are asked to complete the following two sentences: “Healing is.....” and “Art is.....”. At the beginning of the

semester “art” evokes associations such as “emotion,” “truth,” “beauty” and “essence,” whereas “healing” is often equated with “curing.” During the semester, students are asked to describe their responses to something they've read or experienced and are reminded of their initial definitions and how they may be shifting their views. Such activity can be very useful, particularly when students are encouraged to employ a personal voice in answering such questions and writing about them. By the end of the semester, the role of art has moved from a general to a more personal aesthetic, one that has specific meaning to the student.

The shift that occurs in students' perception of “art” also occurs in their definitions of “healing.” So often, when illness occurs, the term “curing” is used instead of the term “healing.” Whereas curing makes the assumption of a positive outcome, healing presumes a whole mind, body, and spiritual approach to well being. As already mentioned, healing is a broader, more inclusive term that takes into account the larger factors of health and illness, such as the roles and responsibilities of the patient, the cultural perspectives of sickness and health and the influence of religious or moral beliefs and practices. This course uses the arts as a primary unifying principle to expand the healing concept and take it beyond the realm of medicine, emphasizing the ways that the arts have served throughout history and continue to serve as positive mediums for healing. .

The “Healing and the Arts” course is divided into three large units: 1) Art and Healing of Self and Others; 2) Art, Healing and Society; and 3) Art, Healing and Spirituality. Within these larger units are a variety of choices such as the reading of *Oedipus*, *The King*, the viewing of Frida Kahlo's artwork and learning her life story and the reading of selections from Oliver Sacks' *The Man Who Mistook his Wife for a Hat* in Unit I; discussion of society's need for Requiems, the significance of the AIDS quilt and the importance of different kinds of healing views for cancer and AIDS patients in Unit II; and the search for personal redemption in Andrew Lloyd Webber's music, spirituality in the art and ritual of Native Americans and many other ethnic groups and cultures in Unit III.

There are two faculty members, one from Theater and one from the Medical Humanities, who participate in all class sessions. In addition, there are guest speakers who bring particular strengths and abilities in specific areas of the arts. For a medical approach through literature, Oliver Sacks' clinical stories in *The Man Who Mistook His Wife for a Hat* help students come to know this person who sees himself as both a doctor and healer, thus leading them to re-evaluate their traditional methods of interpreting a “good” physician. Students who come to see that Sacks as a careful observer and interpreter of human experience can compare this approach to the more traditional scientific approach to healing, e.g., interpreting tests and giving pills. Another

example of the healing role is described by physician Kate Scannell in her book, *The Good Doctor*. She sees each patient as a “problem” that, although she can’t cure (since most of her patients in the early 1980s were dying of AIDS), she can try to heal. Another story, Richard Selzer’s *Imagine a Woman*, doesn’t have a doctor as the central character, but a patient who is dying of AIDS. This patient attempts to heal herself, but finds that many people and events around her provide the necessary healing complement.

In these, and other, examples, literature becomes an experience of healing and shows the ways that traditional medical models often ignore the less tangible or practical aspects of healing self or others. If students read about such characters and how they affect changes in their attitudes about themselves and their health, they find models to heal themselves and others. Sometimes it is more effective to use a text that has no medical characters present to allow students to see that healing is universal and takes place outside of hospitals and doctor’s offices all the time. Healing so often requires more than medical care.

The performing arts can offer a more dynamic experience to students than reading literature alone. For example, watching *Oedipus The King* challenges students to identify with the protagonist, explore their own feelings of hubris and experience the judgment of the on-lookers. A blues musician helps students understand the source and healing power of the blues and then leads them in the creation and performance of their own blues lyrics. A more personal experience can occur when students do a live reading of the play, *Journey into That Good Night*, a story about a terminally ill college student who finds comfort and healing in poetry.

With today’s generally diverse student body, it has become a challenge to find a core experience to which all students can relate, with the exception of the September 11th attacks in the United States. This shared experience has provided a powerful unifying metaphor that all students can relate to. A recent article in *The New Yorker* by Alex Ross, entitled “Requiems,” asks: “What does music give us when words are stopped in our throats? On an ordinary day, music takes us out of ourselves, allowing us to forget whatever self-invented dramas may be pressing on us. The effect is seldom lasting. But when we are all in the grip of the same emotion, music can shoulder the heaviest part of what we are feeling.”¹³ Other examples of 9/11-related artistic outpourings are included, such as paintings, poems, photographs and short stories that have addressed this tragedy in their own ways.

As with many other activities in the course, the requirement of the written assignments is included to teach students how to look at works of art and their relationship to healing. Special exhibits are chosen at nearby art galleries, and attendance at at least one play during the semester is required. Musical concerts can also be chosen. Students are required to attend and report on

two such external art experiences. Response papers require a description of the experience and what personal meaning has been gleaned. There are three longer papers that draw out some of the interrelated themes of the course, such as the roles of art in the healing of individuals and society and of the importance of the arts in the spiritual dimensions of healing. There are also three unit tests, non-cumulative, which focus more practically on analytical understanding of material. There are identification questions, as well as essay questions, that require an analysis of the readings and material presented and discussed in class.

ANALYSIS OF THE COURSE

Faculty members believe that by first introducing students to positive aspects of the arts and how they have made a universal contribution to healing individuals, societies, and cultures throughout time, and then inviting self-exploration, they are helping students learn the important balance between “knowledge” and “experience.” Without knowledge it’s difficult to understand another’s or even one’s own experiences. Without experiential connection to topics, it’s difficult to convey to students a genuine understanding of how the arts can be a healing life force. When dealing with health and illness, it is important to give students. i.e. future or current patients and healers, a battery of resources. If, for instance, some individuals are organizing a support group, they may need to choose a play, music piece, art work, or work of literature that will be most effective in focusing and sharing experiences. Also, aspects of personal healing and sharing in the healing of family and friends are always of central importance.

Many people argue that there is an even greater need for healing today, since people in a global economy tend to be segregated and less connected, connecting more to their computers, gadgets, and television sets than to each other. In the field of health, particularly, many people argue that the skill of whole body healing has been lost in the obsession with medical technology and the scientific approach to healing. This course offers a solution to that lack of balance. It provides one avenue for educators to remind students that the arts offer another way to tap into positive modes of healing. It’s important to educate ourselves and our students about creative and healing forces and to recognize how we can use these tools to help us respond to our own pain and suffering and that of others.

CONCLUSION

The arts have always functioned as a positive method for healing the mind, body, and spirit. The main purpose of the described course is to help students become acquainted with

many different worldviews of healing. A further goal is to get pre-health and healthcare students to step away from their isolationism to see the larger humanistic picture of health and illness. For pre-medical and medical students to share the class with non-medical students offers an unusual opportunity to enlarge the experiences for both. When students connect to the mainstream of people and human experiences, they find that health and illness are larger themes that encompass all of society. Since healing does not always mean staying on the side of life, but letting go of our need to control, it helps students to talk about something other than maladies. Instead, it guides them to focus on a healthy version of themselves and others that may lead each group of individuals to find their own wholeness. Faculty who have participated in this course feel that when students have understood concepts conceptually and analytically, they are then enabled to experience the practical and experiential components of healing from the arts. Thus, an attempt is made to convey knowledge about healing concepts first, before exploring these artistic mediums through reading, writing, discussing and experiencing.

It is also the intention of the course to help students experience the healing, ennobling and enriching aspects of the arts. All human beings are artists to various degrees, since they create and re-create their responses to the world. The faculty has encouraged students to identify and develop personal skills that they can utilize in their day-to-day lives and share with others.

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