

SEPTEMBER 1998

AMERICANS FOR THE ARTS

# MONOGRAPHS

VOLUME 2 NUMBER 6

## ARTS IN MEDICINE **linking culture to care**

*Former U.S. Surgeon General C. Everett Koop is surrounded by four and five year olds eager to show him the panels they made for the "healing quilt" for display at the Dartmouth-Hitchcock Medical Center's daycare program. Nearby, a musician sings folk songs to patients in the Transitional Care Unit, while upstairs in the Surgical Care Unit a volunteer circulates an "art cart" with prints and posters for new patients to choose from for display on their walls.*

by Naj Wikoff, Director of Healing and the Arts, C. Everett Koop Institute at Dartmouth University, and Nancy Langan, Director of Arts Education and Community Development, Americans for the Arts

### INTRODUCTION

Over the last 15 years, there has been a growing interest in incorporating the arts into health care settings and treatment. In more and more communities across the country, the arts humanize hospitals, treatment facilities, senior care centers and rehabilitation programs, and provide an emotional outlet for patients and families during illness and recovery.

The use of the arts in healing is not new. Hippocrates understood the importance of uplifting the patient's spirit. The Greek mathematician Pythagoras discovered harmonics in music; he founded a school that, among other things, trained students to release worry, fear, anger and sorrow through singing and by playing musical instruments. In 1283, a hospital in Cairo provided its sleepless with soft music and storytellers weaving fables. In 1511, Henry VII commissioned the finest architects and artisans to design and furnish the Savoy Hospital in London. Patient rooms had ceilings painted with magnificent murals, and staff wore brightly colored uniforms.

This issue of *Monographs* looks at the value of arts and healing partnerships and illustrates the many ways to build alliances between the arts and the health care field, and includes:

- ★ A discussion of trends and issues contributing to the growth in arts and health care partnerships.
- ★ Profiles of effective, and adaptable, program models.
- ★ Ideas to connect the arts with hospitals, clinics and community health care settings.
- ★ Steps for establishing and sustaining programs.
- ★ A reference guide to books, articles, networks and conferences.

*MONOGRAPHS* is one of the benefits of membership in Americans for the Arts. To discuss ideas for submission, contact Mara Walker, Programs and Member Services, Americans for the Arts, 1000 Vermont Ave, NW 12th Floor, Washington, DC 20005; tel 202.371.2830.

### THE GROWTH OF ARTS IN HEALTH CARE: HOW AND WHY

After World War II hospitals expanded, creating a maze of corridors and wing after wing. As a result, hospitals became more dreary for patients and staff alike. Also during this post-war period, scientific advances led to many treatment interventions, which depersonalized medical care; doctors began to treat illnesses, not people.

Over time, however, society has realized that pills and advanced technology are not the complete answer for patient well-being. Many medical professionals have begun to understand that patients are more than physical symptoms and that mental and emotional elements play a part in the patient's and family's road to recovery. The arts can help pave the way.



Every year, music and theater professionals help Duke University Medical Center employees create an original performance.

Medical research has shown physiological benefits to patients exposed to the arts, such as a decrease in blood pressure, lowered anxiety and fear and elevated mood. Early on, hospital volunteer service units changed what were sterile environments by putting art on the walls. Across the country, bands of artists, arts administrators and enthusiasts started programs in hospitals; in one example, Hospital Artists Inc. in New York City took patients to performances by filling unsold seats in concert halls.

In the 1970s and 1980s, a number of these hospital arts activists began to network, and formed both the Society for the Arts in Healthcare, a national service organization dedicated to fostering the role of the arts in healing, and the Center for Health Design, an association for promoting life-enhancing health care environments. At the same time, Americans for the Arts (at that time the National Assembly of Local Arts Agencies) and the Association of Performing Arts Presenters established committees on the use of the arts in healing, with a particular focus on AIDS, a growing epidemic. These networks have created an active information exchange, technical assistance and increased links between the arts and healthcare fields.

Arts-medical partnerships are not traditional arts therapy, nor are they its replacement. They are a complementary approach that has the power to develop programs that will positively shape the physical and emotional environment of healthcare facilities. These programs can transform institutional settings by incorporating the arts into space and building design. Arts and healthcare efforts make the arts accessible to patients, family members, doctors, nurses and support staff.

#### DUKE UNIVERSITY LEADS THE WAY

The Cultural Services Program (CSP) at Duke University Medical Center (DUMC) has inspired countless local arts and healthcare partnerships. It is one

of the oldest and most comprehensive arts and healing programs bringing the arts to the various populations of the medical center. CSP had a modest start, with one artistic performance each month in the hospital courtyard. Today the CSP's budget is \$100,000, derived from hospital revenues. The hospital dedicates a percentage of patient fees to support the CSP: approximately 43 cents per day per patient.

The program began with a physician on the DUMC staff, Dr. James Seman, who believed the arts had a role in uplifting and comforting patients and the Medical Center community. Inspired by New York's Hospital Audiences Inc. (HAI) program, he contacted the organization for advice. HAI had recently received a grant from the National Endowment for the Arts to provide free consultations to other communities interested in replicating HAI's efforts. This initial consultation led to the creation of a monthly performance series, a collaboration between DUMC and the Durham Arts Council funded by a local foundation.

A feasibility study followed to determine the best strategy for integrating the arts into the whole hospital community. The study led to the establishment of CSP, which operates much like an arts council within the hospital and serves patients, visitors, medical staff, medical students and technicians, as well as administrative and housekeeping staff.

The CSP has grown to include arts programming on the patient-television channel; a poet-in-residence; informal weekly brown-bag discussion on poetry or short stories for students and staff; performances in the hospital courtyard; "Room Service," a program of strolling musicians on patient units; a collection of traditional quilts as well as 2,000 paintings and prints in patient rooms and waiting areas; sculptures and the commission of site-specific artwork, as well as the ongoing incorporation of artists' work into the design of spaces and new structures.

#### **SMALL PROGRAM MAKING A BIG DIFFERENCE**

Most programs do not have the scope of CSP, focusing mostly on a specific issue or population. The Musical Interludes (MI) program, for example, brings musical performances into the homes of terminally ill and housebound patients. Since 1986, the Camden County Cultural and Heritage Commission (CCCHC) in New Jersey has brought teams of musicians into homes, often bedside, to patients whose access to the arts has been limited due to a debilitating or terminal illness.

The Executive Director of a local hospice agency contacted CCCHC in his search for a musical group to play for hospice patients. The first performance was a success, and Musical Interludes was born. This year, homebound patients benefited from more than 160 performances.



Musicians play for ill and homebound seniors at a low-income apartment complex—a program of the Camden County Cultural and Heritage Commission.

When flutist Ronna Ayscue started in the MI program 10 years ago, she often performed by herself. Today musicians work in ensembles of two or three and perform several times at a patient's home before rotating to others. Short-term group performances address the problem of repeated attachment and loss musicians tend to experience working with frail and terminally ill patients. Musicians also receive training from a music therapist and a clinical coordinator to prepare them for working with this special audience.

Prior to playing, the musicians present background information on the composers and the compositions to the patients. Each visit ends with refreshments with the patient's family. The musicians feel that these intimate and profound settings help them learn more about their craft, as they are acutely aware of the power and beauty of their art. Of the 20 musicians working in the eight ensembles, many are retired persons, some are music teachers.

To help deliver the program services, the Commission partners with the two visiting nurse associations, two hospice agencies, social services and an AIDS coalition. Musical Interludes is funded by a grant from the state arts agency, the county government agency, the county library and private contributions. The program recently expanded to serve long-term care facilities and convalescent homes. This year, MI also began to perform for homebound seniors living in low-income apartment complexes. With a relatively small annual budget of \$28,500, MI reaches about 5,000 people a year.

#### **DANCERS HELP PHYSICIANS HEAL THEMSELVES**

Health care professionals are trained to help others, but these same people are often overwhelmed by the stress of their own jobs. "Caring for the Caregiver" is a movement and expression workshop developed to assist health care professionals cope with this stress, which can be brought on by the loss of a patient to the demands of managed care. For many healers it is an unsought but welcome chance to follow the admonition: "Physician, heal thyself." The workshop is led by the artistic directors of the Stuart Pimsler Dance & Theater (SPDT) in Columbus, Ohio. Caring for the Caregiver grew out of an extended residency at the Shands Hospital in Gainesville, Fla., and has since been held at the Donwood Institute in Toronto and the Sylvester Comprehensive Cancer Center in Miami, among others.

Brad Feinknopf



The Stuart Pimsler Dance & Theater Company develops workshops to help doctors and nurses live with the stresses of caregiving.

Through the integration of movement, voice, memories and stories, the workshops offer health care professionals a creative outlet for the emotional stresses they encounter in their work. “Caring for the Caregiver” residencies, which are specifically designed for each community, may include 10 workshops a week, and residencies may last as long as four weeks, reaching the staff of many hospitals and medical centers in one community. The program may also include the creation of a commissioned performance work for area healthcare providers.

A healthcare professional who experiences the power of creative expression in his or her own life can be a strong ally in bringing the arts to healthcare institutions. That was the case with Susan Le Tourneau, a nurse in Columbus who first participated in the dance company’s workshop at the National Congress of the Oncology Nursing Society. She sparked an effort to host “Caring for the Caregiver” workshops in 10 Columbus-area healthcare facilities. Funding for the project came from the Academy of Medicine and the Franklin County Foundation, the Ohio Arts Council, the Greater Columbus Arts Council and two local foundations.

Other communities that have hosted the “Caring for the Caregiver” residency also have found support from community arts organizations. The communities have targeted a mix of funds from local healthcare facilities, social service agencies and pharmaceutical companies.

#### PROGRAM IDEAS TO ADAPT FOR YOUR COMMUNITY

Arts and healing activities take place in hospitals, hospices, clinics, doctor’s offices, medical schools, homes or a community’s “alternative spaces.” Below are some ideas for integrating the arts into these various settings.

#### HOSPITAL, HOSPICE AND CLINICS

- ★ Musicians performing in patient rooms.
- ★ An orchestra comprised of health care staff and medical students.
- ★ Lunch time poetry and prose readings.
- ★ Rotating exhibits on hospital walls and in display cases.
- ★ A collection of paintings from which patients can select to hang in their rooms.
- ★ Arts and crafts activities for patients and staff.
- ★ Murals on the walls and ceilings.
- ★ A poetry wall featuring poems created by patients and staff.
- ★ Visiting storytellers.
- ★ Quilts or tiles used to create a wall of healing images.
- ★ Arts activities in waiting rooms and common areas.
- ★ Healing and sculpture gardens.
- ★ Concerts broadcast to patient rooms via in-house television.
- ★ Artists available to custom-decorate patients’ casts.
- ★ Arts programs at drug treatment clinics.

#### IN MEDICAL SCHOOLS

- ★ Arts and humanities electives such as Literature in Medicine, Creative Writing, Improvisation and Life Drawing.
- ★ Medical students working with artists in hospitals.
- ★ Actors to help teach communication skills and role playing to pre-med and medical students.
- ★ Efforts to aesthetically improve a medical school.
- ★ Film series on medical issues.
- ★ Choir of medical students performing in hospitals, hospices, retirement centers.
- ★ Clowning workshops with subsequent performances in a hospital.

#### CARE IN THE COMMUNITY

- ★ Street musicians performing in shelters.
- ★ A play written and performed by people who are living with a chronic disease (e.g. cancer, AIDS), who are homeless, learning disabled, etc.
- ★ Arts projects (or writing) as a means of helping people to express loss.

- ★ Local artists creating posters that celebrate good health.
- ★ Children in daycare painting to express the feelings related to sickness and health.
- ★ A quilt made by senior citizens filled with healthy images.
- ★ A storefront center for at-risk youth run by artists and art therapists.
- ★ A community mural.
- ★ Artists visiting homebound patients or the elderly.
- ★ A book of poems by hospice patients.
- ★ Events to help a community express loss.

#### PROGRAM EXAMPLES

Arts and healing may be focused on an individual—a patient, family member or health care worker—or groups, such as medical students, recovering heart patients or a community experiencing a form of loss brought on by sudden tragedy or natural disaster. The possibilities are as unique and varied as the patients and communities themselves. Local arts agencies are uniquely positioned to bring together artists, health care professionals, volunteers and others to create activities in or outside a hospital setting. Some examples:

##### ANGELS IN OKLAHOMA CITY

The bombing of the Murrah Federal Building in Oklahoma City stripped many local residents of their sense of security. At the rescue operations headquarters, morale was devastated as more injured and dead bodies were recovered. The Oklahoma City Arts Council commissioned a mural: blue masking tape affixed to the walls shaped images of winged men, women and children soaring in a symbol of rebirth. This early effort opened the door to other community mural projects, including one at the local children's hospital for the youngest survivors of the bombing.

##### ARTS IN THE FROZEN NORTH

Earlier this year, a devastating ice storm in New England left hundreds of thousands of people without power—many for weeks at a time. Across the region, volunteer fire stations, schools and community centers became emergency centers. In Maine, at the request of the governor, jugglers, mimes, storytellers and other artists used their talents to lift the spirits of those families forced from their homes.



At Oklahoma City bombing rescue headquarters, artists work on a mural symbolizing hope and recovery.

**HEALING IN HARLEM**

In a Harlem hospital, artist Bill Richardson established an arts studio for teenagers, many of whom are victims of violence. The program extends to outpatients as part of their recovery process. Richardson has motivated young people to paint, and many even show and sell their work at exhibitions. Some participants have even gone on to careers in the arts.

**BREAST CANCER ART SHOW**

The American Association of Retired Persons' Breast Cancer Program and the Lombardi Cancer Center at Georgetown University joined together to present an art show by breast cancer patients and survivors. Titled "New Light From My Gallery," it featured paintings and sculpture related to the cancer experience of five exhibited women artists, and included recordings of the artists' statements on their work.

**HAVE ORCHESTRA, WILL TRAVEL**

Patients and their families, health care workers and volunteers at a local medical center in Philadelphia have benefited from a partnership with the Philadelphia Orchestra. The result: a series of free lunchtime concerts at the hospital. Performances have ranged from string quartets, excerpts from operettas such as H.M.S Pinafore and belly dancing to a vocal ensemble drawn from those on the hospital's staff.

**THE HEALTHY HEART CAMPAIGN**

In Gateshead, England, the local arts council, local library and Celebratory Arts for Primary Healthcare teamed up to launch a series of creative arts and health events to educate the public about the connection between healthy living and a lowered risk of heart disease. The collaboration resulted in a poster series as well as a workshop where people of all ages create lanterns for a parade and festival.

**GRACE IN THE GREEN MOUNTAINS**

Grass Roots Art and Community Effort (GRACE) is a Vermont-based arts organization dedicated to cultivating the artistic voices to those who typically do not have access to the arts. GRACE began working with a regional mental health agency in a six week pilot project for people with developmental disabilities. It now presents more than 500 workshops each year in nursing homes, mental health agencies and senior centers.

**WALK ACROSS AMERICA**

At the Vanderbilt University Medical Center in Nashville, Tennessee, patients participate in a unique arts and exercise program: a 30-minute audio-visual tour developed for the patients in the hospital's cardiac unit. Twelve photographs depicting images of the United States are hung at various sites along the corridors, and patients are given a recorded tour that compliments the photographic images, making required walking exercises a more visually and mentally stimulating experience.

**MEDICAL SCHOOL MICHAELANGELOS**

At Dartmouth Medical School in New Hampshire, first and second year medical students are invited to participate in life drawing classes as part of their education. The classes may be taken for credit and are available to any student regardless of artistic experience. The students are also offered classes in literature, improvisation, dance and creative writing and can elect to work with artists at the hospital who teach them artistic projects for use with their patients.

### ESTABLISHING AN ARTS PROGRAM IN A HEALTH CARE SETTING

When creating an arts program in a health care setting, first consider the place and purpose for this activity, and who should be involved in the planning process. Good research, which will help you set goals and priorities for the program. Lastly, proper training and communication is critical to a successful program.

#### PLANNING PROCESS

- ★ Form a planning team; keep it small but diverse.

- ★ Include key decision makers (i.e. in a hospital, a staff doctor or administrator).
- ★ Agree on goals and objectives.

#### RESEARCH

- ★ Check web sites of existing arts and healthcare programs.
- ★ Read up on articles and other resources on arts and health care.
- ★ Visit existing programs for ideas but keep in mind that simply replicating a program may not work; a successful program addresses the needs of that particular community.

#### SETTING GOALS AND PRIORITIES

- ★ Document issues of concern and expectations.
- ★ Draft a belief and mission statement, as well as a list of desired benefits.
- ★ Identify a place to start and the audience for the program(s).
- ★ Set goals, objectives, method, time frame, budget and evaluation procedures.

#### TRAINING AND COMMUNICATION

- ★ Train art volunteers on the do's and don'ts of a hospital, as well as what to do in case of an emergency (who to contact, etc.).
- ★ Establish a system for sharing experiences.
- ★ Evaluate the program on an on-going basis.

It is okay to start small, and build your program over time. Simply improving the physical space may be a good place to begin. As a program begins to develop, it is important to remain sensitive to institutional structures already in place, adapting to existing programs, needs and budgets. It is also important to address the issue of staff and patient morale so that everyone is on board and understands the purpose of the program.

#### SMALL BUDGETS, LARGE RESULTS

- ★ At the Duke University Medical Center, the Cultural Services Program has ongoing arrangements with art galleries and the local potters' and weavers' guild for exhibits at the Medical Center—at no cost to



Duke University Medical Center  
Cultural Services Program



the program. "We consider it a trade off. The artists get good exposure to a wide cross section of the community; we get good art," says CSP's Director Janice Palmer.

★ In Florida, the Brevard Cultural Alliance exhibits artwork at the regional hospital. Artists are eager to participate in the rotating exhibits that often result in sales of their work. The program is successful with only \$1,200 in funding from the hospital with the artwork provided by the artists.

Many arts and healing programs work with musicians and choirs from local churches, schools and universities. Arts magnet schools, university arts departments and outreach programs of performing arts organizations, such as operas, symphonies, theaters and dance companies, are additional resources for artistic talent.

#### HEALING AND THE ARTS RESOURCES

The increase in arts and healing initiatives is reflected in an expanding number of regional, national and international resources. These include conferences, books, articles, as well as existing programs in health centers and medical schools. Below are some excellent sources of information:

#### ORGANIZATIONS

##### The Society for the Arts in Healthcare

45 Lyme Road, Suite 304  
Hanover, NH 03755-1223  
Tel: 603-643-2315  
FAX: 603-643-1444  
E-mail: HealthArts@aol.com  
Web site: www.societyartshealthcare.org

*The Society for the Arts in Healthcare (SAH), the national organization of artists, arts administrators, health care professionals, architects and others involved in the use of the arts in medicine. SAH hosts annual national and regional conferences, publishes a newsletter and supports professional development.*

##### Healing & the Arts

The C. Everett Koop Institute  
7025 Strassenburgh  
Dartmouth College  
Hanover, NH 03755  
Tel: 603-650-1450  
Fax: 603-650-1452  
E-mail: Naj.Wikoff@Dartmouth.EDU  
Web site: www.koop.dartmouth.edu

*The C. Everett Koop Institute was founded by the former U.S. Surgeon General to improve health care, the delivery of health information and the training of health professionals. Healing and the Arts is a program of the Koop Institute developed to explore the role of the arts to improve communication between doctor and patient, to support healing, to help health professionals address job related stress and to communicate health information*

##### International Arts-Medicine Association

3600 Market Street  
Philadelphia, PA 19104  
Tel: 610-525-3784  
E-mail: IAMAorg@aol.com  
Web site: members.aol.com/iamaorg/IAMA.html

*The International Arts-Medicine Association (IAMA) was founded to provide a forum for interdisciplinary, international communication between arts and health professionals. IAMA publishes a quarterly newsletter and a magazine, the International Journal of Arts Medicine.*

##### The Center for Health Design

4550 Alhambra Way  
Martinez, CA 94553-4406  
Tel: 510-370-0345  
FAX: 510-228-4018  
E-mail: CTR4HD@aol.com  
Web site: www.HealthDesign.org

*The Center for Health Design is a nonprofit advocacy organization that provides research data, educational programs, publications, and free technical support services to professionals around the world committed to life-enhancing healthcare environments. The Center hosts an annual symposium on healthcare design.*

**MANUALS/BOOKS****The Hospital Arts Handbook: A Resource for Arts and Humanities Programs in Health Care Settings***by Janice Palmer and Florence Nash*

Hospital Arts Handbook  
 CSP Box 3017  
 Duke University Medical Center  
 Durham, NC 27710

**From Artist to Artist-in-Residence: Preparing Artists to Work in Pediatric Healthcare Settings***by Judy Rollins and Carmel Mahan*

Rollins & Associates, Inc.  
 1803 Monroe Street, NW  
 Washington, DC 20010  
 E-mail: rollinsj@medlib.georgetown.edu

**Patient-Focused Architecture for Health Care: an illustrated study***(companion video available)*

Arts for Health  
 The Manchester Metropolitan University  
 All Saints, Oxford Road  
 Manchester M15 6BH England

**VIDEOS****Jessica Kingsley, Publishers**

116 Pentonville Road  
 London N1 9JB

*The Arts in Health Care: A Palette of Possibilities,*  
 by Charles Kaye and Tony Blee "Healing Arts," a 28-minute  
 video featuring a series of interviews with artists and doctors  
 along with profiles of successful programs.

**The Doctor is In: Healing Arts**  
**Department of Visual Arts**  
**Dartmouth-Hitchcock Medical Center**  
 One Medical Center Drive  
 Lebanon, NH 03756  
 Tel: 603.643.7400



Duke University Medical Center  
 Cultural Services Program

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