

2014-2015 Annual Report





The Medical Arts Program is an initiative of the University of Michigan Medical School.



The Medical Arts Program would like to thank the following campus partners:













EXECUTIVE SUMMARY

The Medical Arts Program uses the visual, theatrical, musical, and literary arts to enhance the clinical skills of medical students and house officers. The Program focuses on essential but often overlooked skills such as empathy, awareness of social context, and comfort with the ambiguity and uncertainty that are a pervasive element of clinical care.

Experiences with and analysis of the arts can connect society and medicine with an intensity and fidelity that may be unavailable through other means. The Medical Arts Program is designed to enhance the ability of medical students and house officers to provide high-quality patient care. To that end, the Medical Arts Program has four specific aims: (1) To develop a curriculum that enhances learners' ability to provide humanistic clinical care through experiences and analysis of the musical, dramatic, and visual arts; (2) To evaluate the curriculum's success; (3) To achieve program sustainability; and (4) To disseminate the results.

During the 2014-2015 academic year, 124 learners participated in 6 arts events. Experiencing art through visiting an exhibit, attending a performance, or reading a literary selection, learners participated in intensive small group discussions about the art and its relevance to health care. The discussants included performing artists, writers, composers, and content experts such as museum curators, literary scholars, or musicologists. MAP engaged closely with other University of Michigan (U-M) programs such as the University Musical Society, the U-M Museum of Art, and the U-M School of Music, Theater, and Dance. We assessed each event using both qualitative and quantitative metrics. Learners found that the discussions enhanced their appreciation of the art and noted the close connections between the events they attended and the medical world.

In 2015-2016, the Medical Arts Program will continue to pursue the central goal of using the arts to enable medical students and house officers to become better physicians. We will involve learners in a wide range of events, including a diverse representation of international arts, as we continue to gather data on MAP's impact on learners and prepare manuscripts based on these findings. We continue to explore opportunities for external support and look forward to another productive year.



THE MEDICAL ARTS EXPERIENCE

THE PROGRAM

Although medical schools provide their students with the scientific knowledge necessary to deliver technically proficient care, far too many physicians do not do a particularly good job at delivering humanistic patient care. Patients too often feel that their caregivers do a poor job of communicating with them or understanding the larger impact of their disease.¹

One powerful way for medical trainees to better understand these elements of health care is to consider works of art. Artists have long explored issues central to health care; their work often contains thoughtful reflections on human joy and suffering, pestilence and prosperity, devotion and despair, and impending death. Artists have often grappled with the sorts of profound questions that illness so often brings to the fore, such as the nature of human relationships and the purpose of life. Other artists have powerfully reflected on their own sickness, disability, and aging. In short, the arts can offer insight into the nexus between society and medicine with an

intensity and fidelity that may be unavailable

through other means.

The arts may also be helpful in moving from understanding to action. The Institute of Medicine defines patient-centered health care as "care that is respectful of and responsive to individual patient preferences, needs, and values and ensures that patient values guide all clinical decisions."² Students and residents need to learn how to listen to their patients - a task requiring more than simply hearing the information shared. Physicians need to be attuned to the subtleties of body language and must understand that different people see and experience the world in different ways. One way that learners can gain this understanding is through increased exposure to the arts. In addition, we care for our patients in a complex world. Artistic experiences teach us that



there are often multiple ways to solve a problem. Often, there is not one clear solution to a specific problem, and in those cases, tolerance for ambiguity serves an essential function in patient care. Physicians in training must learn to navigate this uncertainty.



- 1. Lown, BA et al. An agenda for improving compassionate care: a survey shows about half of patients say such care is missing. Health Affairs 30: 1772-8, 2011.
- 2. Institute of Medicine. (2001). Crossing the Quality Chasm. Washington: National Academies Press, 2001.

LEADERSHIP

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ACTIVITIES IN 2014-2015

During the 2014-2015 academic year 124 learners participated in 6 arts events. Those events included a wide range of artistic experiences. We define the arts broadly, to include visual art, musical and theatrical performances, and literature. In addition to experiencing the art, learners participated in intensive small group discussions about the art and its relevance to health care. Performing artists joined the group of learners as part of a panel or as individual discussants. Whenever possible, those artists have joined physicians on ward rounds or in the outpatient



clinic, thus enhancing their ability to draw connections between art and medicine. Writers (often themselves physicians) sometimes joined the group to discuss their works; other times we invited content experts, such as museum curators, to help with the discussion.

Table 1: Medical Arts Events 2014-2015

Event	Date	Venue	Speaker
"Three-Part Inventions for Dance on Screen"	October 29	NCRC	Peter Sparling, Rudolf Arnheim Distinguished University Professor of Dance
"Music and Meditation, a Mindful Perspective" with the San Francisco Symphony	November 14	Hill Auditorium	Barbara Bogatin, cellist, San Francisco Symphony
Helen & Edgar	January 8	Arthur Miller Theater	Edgar Oliver, playwright and performer
Sculpting Workshop	February 7	Steiner High School	Elizavetta McFall, Elena Townsend-Efimova, Margot Amrine, and Sudee Taomina, instructors
Piano Salon Concert	February 22	Joel Howell's Home	John Dunkersloot, M4
"Being Mortal" Discussion	June 23	Vineology	Mary Blazek, MD, Geriatric Psychiatrist

PARTICIPANTS

Some 124 learners participated in the 2014-2015 Medical Arts Program. Most of the learners were medical students. Many learners attended multiple events. Despite our efforts to accommodate as many people as possible, we were unable to accommodate all of the people who wanted to attend. Still, we did our best to ensure that each individual who wanted to participate was able to participate in at least one event throughout the year. While several attendees came to these events having had previous experience as artists, others came with limited exposure to the arts.

SURVEY RESULTS



Surveys: Surveys were distributed to learners following each event.

The open-ended responses were especially informative. Not only did learners share the aspects of the events that were most salient to them, but, more importantly, they indicated how the events changed their perception of themselves, the world around them, and the process of delivering quality health care. Responses from the events illustrated a variety of themes explored by learners throughout the year. Many of the participants described how the events contributed to improving their medical education and their ability to be better physicians. Some of the most important themes included improving communication with patients, networking and hearing the varied experiences of other medical students and house officers, increased understanding of the importance of self care, and strengthened observation skills. Below we offer select quotations from learners' qualitative responses.

"Three-Part Inventions for Dance on Screen"

- Watching the dance pieces was incredibly moving and valuable for me. I enjoyed watching the MFA students dance in solo pieces and with each other. It was fun to see bodies moving in such creative ways, so many different ways from the few ways in which we normally move our bodies in day to day medical student life.
- I very much enjoyed the discussion because of the diverse perspectives that were represented. It was nice to meet new people and to have an opportunity to connect in a language outside of medicine.
- I felt the entire piece took us through the creative process of dance -- the initial setup of the stage and video; the layering of increasingly complex, chaotic, and crowded dances; the exploration of depth, space, and new places; and the revelation of a finished piece. I believe the artistic process of preparation, exploration, and refinement can be easily applied to other settings, including the practice of medicine.
- Watching dance reawakens in me a greater awareness of my own body, a sense of
 proprioception of my arms and legs, a keen awareness of my lungs breathing, a different
 perspective on the ways that my entire body communicates outside of everyday language.



This performance left me thinking more about the everyday things that I see, the daily ways that we move our bodies, the ways that our bodies move themselves. Overall, it was incredible that this moving experience of watching dance stayed with me beyond the performance.

• I also found the opportunity to meet and discuss the performance with the choreographer and main performer to be an incredibly



unique opportunity. This provided greater insight into the work that enhanced the experience.

"Music and Meditation, a Mindful Perspective" with the San Francisco Symphony

I found it to be particularly useful as meditation can be applied to medicine and speaking
with patients/families. My natural tendency is to fill silence with conversation perhaps due to
discomfort, although I've come to learn that silence itself can sometimes be more
therapeutic as patients process information and respond on their own terms. I could envision

how meditation might make me more comfortable with silence and using it as a tool in clinic.

- The session reminded me about the importance of self-care as I continue my medical training and eventually start my career. As a medical student, I spend a lot of time studying, thus sacrificing my physical, mental, spiritual, and emotional well-being. Even if it is just 30 minutes a day, I need to take the time to center myself spiritually and mentally so that I can better care for patients.
- Mindfulness can have huge implications for health, as is currently being demonstrated through a variety of modalities including fMRI.



- This event renewed my passion for offering mindfulness as a tool for my patients. It also helped me to continue thinking about ways to employ mindfulness as a practitioner- pausing outside the door before each encounter, and taking a moment to check in with myself and my surroundings, particularly during busy or stressful times.
- I really enjoyed when she discussed how she has learned to practice practicing; and then tied her mindfulness meditation into her ability to continue improving her performance.
- It is easy to draw similarities between developing expertise for an instrument, and developing surgical techniques or further medical knowledge. As a fledgling in the medical profession, I have still have a large body of material left to learn and will need to continue to perfect and adapt my knowledge to growing understanding. This will require more than mindless participation in clinical duties, but active practice and mindful introspection into my strengths/weaknesses and how to best continue my education.

Helen & Edgar

- The show itself provided an interesting window into life in a household characterized by a mental disorder.
- I found the entire experience to be mesmerizing. I felt that I was transported to Savannah, Georgia, and into the lives of Helen,



Edgar, and their mother. It also helped me to learn about the perspective of those living with a loved one suffering from mental illness.

- I was surprised by how much our conversation with Edgar did not touch on aspects of his mother's mental illness. Our lack of discussion surrounding this topic I think can be attributed to two things: 1) it's a sensitive topic to broach with people and 2) something that Edgar said about his mother not being 'mad' may have led us to believe that we did not interpret his mother's behaviors in the same way that he did. It is interesting because it gets at the fact that growing up with parents who suffer from psychological disorders probably gives one a very different view of mental illness.
- As medical students, we are always asking patients to "tell their story." It is our responsibility
 to listen attentively and learn as much as we can not only about their past medical history
 but about how their past experiences shape who they are today. Likewise, patients come
 from diverse backgrounds, and we as physicians must respect our patients and remember
 to approach every patient with an open mind.

Sculpting Workshop

- I thoroughly enjoyed the process of sculpting. I feel as though sculpting body parts taught
 me a lot about both these body parts as well as the process of art creation. This was an
 equally challenging and rewarding process.. It was fascinating to me that in sculpting these
 body parts, I learned so much more about the anatomy and reflected about the multiple
 functions of these body parts. Some things can only be learned through the artistic process
 of creation.
- It was a wonderful break from studying and really valuable to me because it engaged other parts of my brain and tactile senses.
- It was incredible. I forget how amazing it is that we can create things. I don't spend enough time doing that during the school year.
- I think being able to take a step back and focus on the whole of something rather than obsessing over parts of it is something that does not come naturally to us in patient care but remains very important. I also found the tension between control and letting go, or control and acceptance, very telling and illustrative of a key struggle in medicine.

Piano Salon Concert

- It was a very relaxing evening, which I needed because I had a very hard exam earlier that day. It helped me forget my medical school woes and put life in perspective. Additionally, hearing John play and thinking about how he managed to balance medical school and piano made me reevaluate how I spend my free time and reflect upon changes I can make to help have a more balanced life.
- I think that the composers of the various pieces had to draw from their own emotional experiences when creating their music, using it to reflect their mental state, whether it was bright and eager or somber and gloomy. As physicians we also go through a wide range of emotions, often in the same day, from the joy of a patient whose life we improved, to the sadness of an ill patient passing away. The music gives us an outlet to externalize these emotions, whether we are the performer or the audience.



Attending this concert reminded me of how rich the human
experience can be. I feel like I get so focused on day to day life on the wards, studying,
talking about medicine, and thinking about medical topics that I forget that most people have
interests or professions in totally different fields. I think that music is something that can
connect me with those people.

"Being Mortal" Discussion

• It was interesting to hear about the different experiences that people have had dealing with end-of-life issues. In particular, I enjoyed hearing the personal anecdotes that the clinical



students shared about caring for patients with terminal illnesses. I came away from the conversation with the insight that everyone lies on a spectrum when it comes to thinking about death and the end of life. As a physician, we might not succeed in convincing every patient to think about their wishes for the end of life but we might make it easier for the next health professional to bring up the issue.

• I believe that this book opened my eyes to some of the additional complexities in end-of-life care, namely the challenges and the numerous points of consideration when on nursing home care. It helped me to better understand the transition from being an independent adult to a dependent senior and how to have more open conversations about end of life care.

MAP 2015-2016 GOALS

In 2015-2016 the Medical Arts Program will continue to pursue the central goal of using the arts to enable medical students and house officers to become better physicians. We will

involve learners in a wide range of events, including a diverse representation of arts, as we continue to gather data on MAP's impact on learners and prepare manuscripts based on these findings. We continue to look for external opportunities for support and are excited for another productive year.

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MAP Website

Please visit our website at http://themedicalarts.med.umich.edu for more iinformation about our leadership, funders, and purpose, and descriptions of all Medical Arts Program events.