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Using art and literature as educational resources in palliative care

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Summary

This case study outlines a staff seminar programme that used art and literature as vehicles to explore personal and professional dimensions of palliative care. Participating staff found the learning experience interesting and insightful.

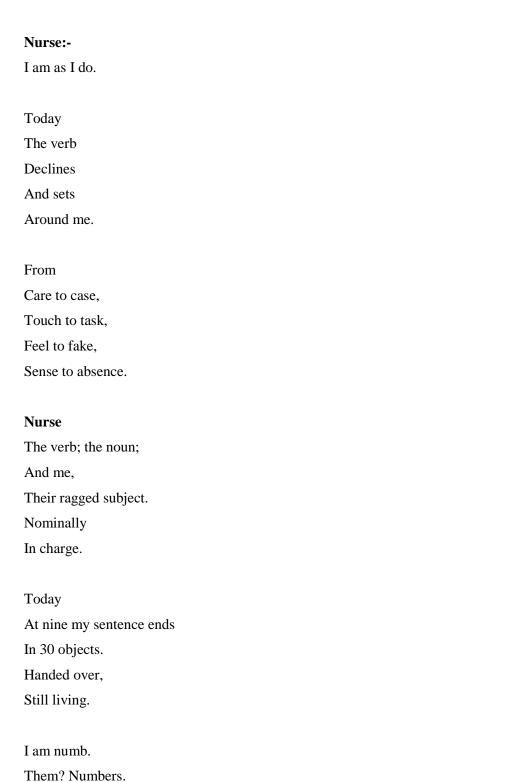
Case Study

The ethics of caring and the promotion of reflection provided the aims of a three-part seminar programme within a specialist palliative care unit. Originating in a partnership between two colleagues (one in higher education and the other in clinical practice) with shared interests in using the arts and humanities in professional health care education, sources of art and literature used provided the vehicle to explore a 'how to live ethic'[1]. This approach seeks to incorporate into dominant health care ethical discourses an enhanced consideration of the ends of health care activity (e.g. human flourishing of patients) alongside attention to the kind of person that the practitioner is, or aspires to be. Narrative is one way of exploring this approach. We hoped that this approach might encourage participants to better understand the world of patients and carers, as well as their own work in palliative care.

Each seminar was designed to explore the personal and professional dimensions of palliative care in different ways. The first session, facilitated by SL, focused on poetry and literature and six members of staff represented nursing, medicine and psychology. Four extracts were read out loud and discussion followed. Two works, in particular, prompted lively discussion. The first, Norman McCaig's poem 'Praise of a Man' [2], features a final verse which was considered noteworthy in terms of the impact that one person might make on another:

The beneficent lights dim
But don't vanish. The razory edges
Dull, but still cut. He's gone; but you can see
His tracks still, in the snow of the world

The second poem, 'Bad Day In Charge' by Colin Macduff (3) stimulated discussion on work organisation and attendant strains placed on healthcare workers. A tendency to focus on tasks, rather than on things you 'ought' to do, resonated with staff. The poem is reproduced with copyright permission.



The second session, facilitated by SL, took the form of a guided visit around Aberdeen Art Gallery with seven participants. Exhibits viewed included the installation 'There Will Be No Miracles Here' by Nathan Coley and 'Maternity' by George Hitchcock. Group discussion that followed viewing art works related to illness, life, death and our work in palliative care.

The third seminar, facilitated by SL and AMcK, was attended by eight staff members. A number of art slides were shown to illustrate and reflect upon such themes as fear ('The Family' by Paulo Rego), illness ('The Wounded Bird' by Marc Chagall), life ('A Girl's Head' by Vermeer), death ('The Call Of Death' by Kath Kollowitz), and the self ('Self Portrait' by John Bellany).

Five individuals who attended all three sessions evaluated the programme by considering this question: 'How has looking at the expressive arts helped you to understand your place within palliative care?' Five replies were received, representing nursing (three), medicine and psychology (one each). All five participants found the sessions interesting and challenging. Three key themes emerged from feedback analysis as shown in Table 1 below.

Please insert table 1 here

A first theme centred on insights gained from hearing other views about life, death and individual perceptions arising from responses to literature and art sources. The second concerned the assumptions about others that we all make as professionals and a third theme related to our emotional responses to art and literature.

The opportunity to share experiences and to acknowledge the expression of emotions is particularly relevant in a care environment where staff frequently address issues surrounding the experience of death (4). We feel that this seminar programme succeeded in providing a way of facilitating this for staff. It has contributed to an ongoing multidisciplinary palliative care education programme as well as providing us with an opportunity to consider the emerging role of narrative (patients, relatives and staff) within palliative care.

No competing or financial interests to declare

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Theme	Illustrative quotations
Insight	'Fascinating insight into value and meaning'
	'Differing views and interpretations could be
	shared'
	'Benefits patient care when other views are
	heard'
Assumptions	'we sometimes make assumptions about
	understanding and values that other people
	have about the world'
	I ' have re-evaluated in particular the role I
	have in influencing patients and 'miracle
	working' and my relative powerlessness'

	'It shows the power of narrative and person- centerdness'
Emotional responses	'Although society has changed death rituals
	throughout history, emotional responses remain'
	'The emotional responses to some of the
	work presented has been strong'