

ARTS

COMMUNICATION VIA VISUAL ARTS

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A WORKSHOP FOR HEALTH PROFESSIONALS

Relevance

The research explores whether a Visual Arts Intervention programme (VAI) that includes works of art objects and paintings placed in a redecorated ward could have an effect on psychological and physiological outcomes of clinical significance. The research project will investigate a different angle. It will produce quantitative and qualitative evidence whether there is a therapeutic effect by the integration of the VAI programme into the health care environment. The integration of this extensive arts programme into hospital environment will provide the ideal setting for answering the question of whether the VAI programme can play a meaningful role in healthcare. The need for a scientific evaluation has long been recognized.

The European Charter on Environment and Health declares that good health and well-being require a harmonious environment in which aesthetic, social, physical and psychological factors are important. Similar points of views are expressed by Theorell (1995; 2000). The integration of the VAI programme into healthcare environments can play a crucial role in achieving these objectives. Evidence is needed to demonstrate that this integration could include beneficial psychological, physiological and biological patient outcomes, support staff and visitors and produce cost-effective benefits.

Background and state of the art: The meaning of aesthetics

The meaning of aesthetics has been formulated by ancient philosophers who saw a natural link between art and life. Painting, drama, dance and music were obvious parts of every day life, and they were regarded as a cure of body and mind. The meaning of aesthetics for physical and psychological health as it has been described by ancient philosophers like Aristoteles, (1988) is to be found in the research of today. (Croze, 1912/63; Bell, 1914/39; Bullough, 1957; Gardner, 1973; Hirn, 1902; Langer, 1957; Nightingale, 1959/92) For instance, aesthetic forms of expression for elderly individuals can mean discovering, preserving, or developing possibilities for a meaningful life. In several controlled intervention studies, (Wikström, 2000, 2002) reported paintings elicited beneficial effects in elderly individuals. Dialogues generated by reproductions of works of well-known artists had a positive impact on elderly individuals' perceptions of their life situation and social interaction compared to a control group in which dialogues were about events of the day and the elderly individuals' hobbies and interests. In a survey of living conditions, Bygren, Konlaan and Johansson (1996) interviewed 12,675 people and then conducted follow up with respect to survival. The results showed attendance at cultural events, which included visiting museums, art exhibitions, theatres or concerts, reading books, and singing in a choir, had a positive influence on survival rates.

Maslow like Dewey, dealt with human experience. Both viewed aesthetic experiences and peak experiences as particular kinds of experience. Dewey argues it is an interaction between a human being and some aspects of the environment. Reflecting on an experience after its occurrence, according to Dewey is neither emotional nor intellectual alone. Rather, an aesthetic experience is an intensified form of an ordinary experience that belongs not only to the museums but also to general experiences that culminate in aesthetic experience. (Dewey, 1934/58) Maslow (1970) spoke of aesthetic peak experiences as moments of joy and temporary loss of time and self-awareness. For instance, individuals could feel a day passing as if it were only a few minutes. In such moments, reality is perceived as good and desirable, and the experience could be so valuable as to make life worthwhile. There are many beneficial after-effects of aesthetic peak experiences; individuals' views of themselves, others, and the world might be changed in a healthy direction.

Aim

The aim of the present study is to increase the understanding of communication via visual arts and its effects on physical and psychological health parameters in elderly care. Visual art was used as a medium which can help the elderly to communicate their own intentions as well as to communicate with the creator of the visual art and his or her intentions. Visual art objects in hospital settings must advance from decorative to include health promoting aspects.

Theoretical framework

Research on the effects of different factors such as design, colour, music and visual art indicate a link between poor architectural design and patients' increased levels of blood pressure and anxiety (Fridell, 2002; Dilani 2001) A controlled study showed that exposure to visual stimulation including views of nature, in intensive care units promotes positive outcomes on patients recovering from open-heart surgery (Ulrich, 1982). Architects and designers recognize that buildings should promote wellness by creating physical surroundings that are psychologically supportive (Ruga, 1989; Fridell, 2002). The literature also presents the findings of experimental and controlled studies designed to explore the use of visual art dialogues as a way to influence psychological and psychological well-being. (Wikström, 1992; 1993; 1994; 2000; 2002)

New studies in the context of basic research within the field of caring science support new approaches to mental health. One example is the thesis of Erna Lassenius (Lassenius, 2005) where the aim is to develop a theoretical model of space from the caring science point of view.

The approach might especially be used in an analysis in the way visual arts and music are integrated in a health program.

New results can be achieved within health and the arts, as several new, collaborative art practices has emerged. The aim is to combine art and life, in opposition to the traditional, modernist ideal of art; art for arts sake. (Bourriaud, 2002; Bishop, 2006; Mazanti, 2006; Bull, 2007) Collaborative art projects can develop identity both on an individual level, by the user and on a collective level, in the institution. Identity and function is relevant in the Swedish Research project, HumanTechnology. New objects have been developed for mental health services. These are different assistive devices, enabling the users to gain power of their own lives by becoming more secure, independent and more active in every day life (Eskel Grönberg, 2004). The project can contribute to this knowledge.

Collaborative research in practice is based on a humanistic, psychological ground, pointing towards the local community as a target, and where goals and values are defined in an interactive process. (Hummelvoll 2003, p.24)

Method

To take into consideration the aim in the present study, focus was on qualitative methods. To reach understanding of a complex and intersect border area triangulation between and within qualitative methods was practiced. To improve the validity of the study there was different data sources and methods of a single phenomenon, the meaning of art. (Denzin, 1970)

Visual art are varied in both techniques and content, we must investigate if the art we are proposing for sheltered ward units are in fact producing the results we intend. We searched for visual art objects that took into consideration that one heals better in an

atmosphere that reflects respect for the patient. In this context, the arts, as the way the patients can express their feelings and stories.

A visual art object can stimulate almost any experience and skill in a person and help recalling memories from the past. In addition it is important to remember that a visual art object functions as part of a wider phenomenon. A person has two realities, a psychological reality consisting of dreams, feelings, thoughts, experiences and wishes, and an external reality consisting of things and living creatures. To contemplate a visual art object is to be between these two realities. The visual art object is a connection between the spectator's psychological reality and his or her external reality. The onlooker is secluded from reality and free to express and develop his or her imagination and associations without consequences for his or her daily life. The effects of visual art object stimulation are full of nuances compared to those of stimulating specific social or psychological functions.

Visual art objects implementation in the wards

An artist's visual arts objects were used. The placement of the visual art objects will consider the possibility to make the environment harmonious. Therefore parts of the ward might have to be repainted and redecorated. The changes are done in a dialogue with the users of the department. They will influence the choice and environment of the art works. Visual art objects for the wall will be developed. These are images with different levels of abstraction, made by porcelain. The placement will be in dialogue with the architecture, and in relation to analysis of movement flows in the space. Other art works will be sculptural seating objects made by concrete and porcelain tiles. They are designed to create communication and social interplay. There are words, images and colours on the objects, and in use the objects can reflect identity. The objects can function as a statement in accordance to what text or object the user choose to sit on, or interact with. The seating objects will be put in places in such a way that it might increase social interplay.

Project Plan

Visual Art Intervention Programme

The visual art intervention (VAI) programme constitutes of three parts: a workshop for health professionals, a pedagogical model for visual art communication, and degree of complexity in the chosen art works. The VAI programme has an aim to develop communication in the department:

A workshop for Health Professionals

Before implementing the VAI programme as a strategy for conversations, health professionals, nurses, and nurses assistants took part in a residential workshop. They was informed of the result of a study in which health professionals used visual art as a

communication tool with elderly. (Wikström, 2000) They was also be informed about different art forms such as music, dance visual arts and their connection to physical and psychological health. During the workshop, the participants discussed elderly persons' visual art preferences, formal aspects of paintings, and the meaning of representation in paintings. Finally they practiceed how to use visual art as a communication tool.

Visual art intervention

During the intervention period each patient had visual art dialogues with a special trained health professional. The art conversations took place once a week and last for 15 to 20 minutes. However, some of the patients to took part in a five minutes dialogue. Relatives to the patients have the possibility to contemplate the visual art objects, alone or together. In a similar way staff members can contemplate the visual art object.

A pedagogical model for visual arts communication

When health professionals use visual art as a conversation instrument in the contact with elderly persons the elderly person's fantasy, experience, and knowledge will be decisive. The role of the health professional will be to support and encourage the elderly person to combine earlier memories and experiences with new impressions from the visual art object. It must be the elderly person who decides how to interpret the painting and the direction of the conversation. The conversation will last for approximately 15 to 30 minutes. Health professionals gave the following four instructions to the elderly persons:

- I am interested in showing you some of the visual arts objects at our ward that you and I can have as a topic of conversation
- Which of these visual art objects capture your interest?
- Describe the visual art object, what it represents!
- Pretend you are the artist and know all about it, what it brings to your mind!

The visual art object is intended to provide the elderly person a scene for a mental walk. Decisive for this adventure is the elderly person's knowledge, fantasy and experiences. The role of the health professional is to support and encourage the elderly person to get closer to the visual art object and combine earlier memories and experiences with new impressions from the visual art object. During the conversation the elderly persons' own resources will be in focus and the conversation will be conducted in a free and independent form. This model has been tested in several studies as well as practiced by health professionals. (Wikström, 1992; 1994; 2000; 2002) In addition; the model has been practiced by health professionals. Their experiences of visual art as a conversation tool with elderly persons are that this form of dialogue is helpful in order find topics to be discussed. Recommendations on how health professionals could practice conversations to stimulate elderly persons to take an active part in conversations are

presented in a study by Wikström (2003). In the present study some aspects of this pedagogical tool will be used.

Degree of complexity in the chosen art works.

Visual art objects will be chosen for the programme on the basis of reactions to and perceptions of works of art as described in the history of art. (Barron, 1951/52; Child, 1962; Berlyne, 1971; Sandström, 1977; Wikström et al., 1993) It will be based on the premise that pattern are judged to be interesting if they contain information that could not be absorbed immediately, but seemed likely to be absorbed relatively quickly both perceptually and intellectually. It will be important that the level of uncertainty, which included complexity, ambiguity and variability, was neither too high nor too low, i.e. in balance with the viewer's ability to perceive it. (Berlyne, 1971; Wikström, 1992) An important aspect reported by Smith, Carlsson and Sandström (1985) and Wikström (2001; 2004) and complementary to Berlyne's research. The degree of realism, the lack of sharply outlined forms and the angular structure will vary. In addition the quality of the subject matter, active/passive colour effects and the degree of dramatic action will vary as well. Three of the chosen visual art objects will be selected to suite the spectator's taste. The remaining visual art objects will have an increased degree of difficulty. In addition, art is not always peaceful and tolerant in attitude. On the contrary, some art is expressly designed to convey emotions of hatred and prejudice. Therefore the selection of visual art objects must be made with care, in collaboration with the onlooker.

The following data collection sources will be used in the staff group:

Personal background, art interests, The Wheel Questionnaire (Shalit, 1978, 1979; 2001), Focus group interviews (Wibeck 20.).

The Wheel Questionnaire

The Wheel Questionnaire, a semi-structured questionnaire. The Wheel Questionnaire instrument measures aspects of perception such as structure, motivation and degree of emotional investment indicating a feeling of control (Shalit, 1978, 1979). It will be used to collect qualitative as well as quantitative data.

Focus group interviews

Focus group interviews were used in the staff group to discover subjects' beliefs, perceptions and expectations of the art intervention program. Sessions was audio taped and transcribed, and themes identified through an immersion- and crystallisation process. Concept maps were prepared to aid understanding (Wibeck, 2000, Thomsson, 2000).

Health and environment

There is little documentation in psycho geriatric ward, and in particular not in the mental health for elderly people. This is in spite of that empowerment has been a major area of focus the last years. Norwegian government foundation for architecture, design and urban planning (Norsk Form) has a program for design and environment, with a specific focus on mental health for elderly people. They found that experimental research designs should to a greater extent be applied in this field of health and environment. (Hammerstrom, 2007).

A Nordic perspective - network building

A Nordic cross disciplinary perspective is established in the research group. The team members are Britt-Maj Wikstrom, PhD, from Karolinska University in Stockholm Sweden and Full Professor at Akershus University College, Mette Holme Ingeberg, associate professor in mental health at Nursing Education at Akershus University College, and Arild Berg, Doctor of Arts Student at School of Visual Culture, University of Art & Design Helsinki, and Akershus University College. This collaboration enables a cultural exchange between countries, both in art and nursing care. The research project can contribute to develop networks on a national level with Norwegian Form.

Strategic basis: arts and empowerment

Empowerment is a research focus at the Faculty of Nursing at Akershus University College. In the communication with the elderly person the present study will focus on how the elderly persons interact together with other persons and with him or herself. It could create a feeling of healing and recovery (Vatne, 2008).

Arts for the sake of empowerment are not new. Art therapy has been used extensively since the 1940s. The Arts have potential to empower us and become agents towards the healing and empowerment of others. Arts provide a person to master the complex tasks, challenges and issues that are integral to membership in society in our complex world. Studies show that visual art can be used as a way to empower marginalized confidence, optimism and self-esteem and the lifelong skill of self expression. Te arts can empower young people to test themselves as individuals and provide them with opportunities for self expression. Studies have shown that arts programmes can develop young people's awareness of and ability to plan for their own future and increase self esteem (Rappaport, 1987).

Through the arts a individuals can explore their world, express themselves creatively, and learn new talents they did not know they had.

Ethical considerations

The Ethics Committees of NSD and RER were contacted. Participants received the usual assurances about anonymity, confidentiality and right to withdraw at any point without

prejudice. (Hermerèn, 1978) The purpose and procedure of the visual art dialogues was carefully explained to health professionals before their use. An ethical issue that could arise from elderly persons participating in the present study could be that the elderly persons are in a state of dependence in relation to relatives and health professionals. In addition, some of the participating patients could have a diagnosis that makes it difficult for them to understand the meaning of the visual art programme.

When visual art objects was chosen for the present study it have to be considered that some visual objects, more than others, could cause emotions of anxiety and dislike. This aspect was well thought-out and important and therefore was built into the pedagogical structure of the visual art programme. The programme took into consideration that some of the visual art objects could convey emotions of dislike and anxiety. In order to have a conversation it was important to carefully and respectfully take into consideration the elderly persons' cultural background and personal values and meet the elderly persons recognition and insult appreciative communication not to tell another person about a feeling of (Kirkevold, 2008).

Communication with the users: Health, environment and empowerment

The user influence in a health program can be enhanced by the use of art and design. Art objects might initiate activity on both a psychological and physiological level. If the users are too ill to take part in planning a program, someone can be their representatives. The users can be represented by staff, family or people who have recovered from their illness. The arts can even help people who are not ill, to stay healthy. To enable people to life quality which prevents illness is an aspect of empowerment. Empowerment can generally refer to people's possibility to acquire understanding and control of their own personal, social, economical and political abilities. These abilities can be used to actions which develop their own life situation (Israel: 1994, p.152). The nurses and family can enhance the ability to communicate in an accepting and confirming way, about older patients views of who they are, and would like to be (Vatne, 2006). "Empowerment for a community" is when people, both as individuals and as a part of their organisation, in interaction give each other the possibility to solve their needs (Israel: 1994, p.153). The knowledge about the interplay of art practice and health care can be transferrable to other local communities.

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