

Advocating for the Inclusion of Fine Arts in the Healthcare Education Curricula: The Lived Experience of an Art-Loving Healthcare Educator

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Abstract

The incorporation of fine arts into the healthcare education curricula could enrich students' overall learning experiences, enhance cognitive and emotional development, and prepare them for the diverse, dynamic, and stressful workplace. In this paper, I will offer my lived experience of using the arts to engage nursing and health sciences students' participation. The paper begins with a brief definition and scope of the arts to anchor the discussion and a variegated collection of literature scan. I will present the various cognitive and professional benefits of integrating the arts into healthcare curricula. I will append photos of several past and contemporary international artists' works, including personal communications to reinforce my assertion. In addition, I will include anecdotes from students and others who shared their insights on the integration of the arts in learning. I will also discuss practice implications and recommendations for including the arts in curriculum development.

Keywords: Arts, humanities, diversity, equity, inclusion, social determinants, emotional intelligence, transformative learning, ethical contemplation

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Acknowledgements. Cindy would like to thank all the living artists, their agents, licensing agencies, her friends who are artists, and Tobi Bruce (Head, Exhibitions and Collections and Chief Curator) and Andrea Howard (Interim Collection Registrar) of the Art Gallery of Hamilton, Ontario, Canada, as well as the representative of the American Psychological Association who graciously granted permission to use the images in this paper and guided the copyright permission process. Most of all, Cindy would like to thank copy editor Nicholle Carriere, who tirelessly offered feedback and supported the revision of this paper.

Introduction

The incorporation of fine arts into healthcare education curricula could enrich students' overall learning experiences, enhance cognitive and emotional development, and prepare them for the diverse, dynamic, and stressful healthcare workplace. In this paper, I will offer my lived experience of using the arts in lectures to engage nursing and health sciences students' participation, resulting in positive learning outcomes.

The paper begins with a brief definition and scope of the arts to anchor the discussion, which includes a subsection of knowledge synthesis that is a scan of a fulsome but diverse collection of literature. I will present the various cognitive benefits, such as emotional, social, communication, and empathetic skills development; fostering holistic care approaches; and professional advantages, including collaboration and preparation for healthcare careers. I will append my own photos various international artworks of past and contemporary artists, including their personal communications, for consideration. These pieces and artists' statements will reinforce my assertion to include the arts in the healthcare curricula. In addition, I will include

anecdotes from students and others who shared their insights regarding the integration of the arts in learning, with some last names removed for privacy reasons. I will also discuss healthcare practice implications and recommendations for including the arts in curriculum development.

Definition and Scope

For the purpose of this paper, art is broadly defined to include all forms of online and in-person viewing and the creation of visual arts such as paintings, sculptures, designs, architectural installations, photography, street art, museum and cultural centre exhibitions; performance arts such as music, dance, films, theatre, culinary arts, and spoken word; literary arts such as poetry, prose, and art history, as well as fiction and nonfiction in any language, including translated works. It is also inclusive of all culturally specific arts as they relate to any of the aforementioned and beyond, as is personal participation of doing or engaging in creative art making. In addition, the terms “arts” and “humanities” are used synonymously, since many universities globally categorize and house these subjects in the department or faculty of arts and humanities.

The scope of this paper is to advocate for including the arts in healthcare curricula, whether it be in the form of electives or as subsumed components in professional growth and development courses. My hope as a healthcare educator is to influence post-secondary healthcare programs to support the importance of art appreciation as a pedagogical element because

it could be a catalyst for furthering holistic views and ways of knowing for health sciences students.

Knowledge Synthesis

A plethora of information validates the vital influence arts and arts courses have to enhance education from kindergarten to the post-secondary level. Over the past 25 years, medical schools internationally have woven in arts and humanities courses to expose students to subjects that promote the development of a well-rounded and balanced professional identity for medical students. An overwhelming number of articles present researchers' findings that support the idea that the process or act of inquiry and discussion of the arts can improve medical students' overall critical thinking, observational and communications skills, team collaboration, empathy, acceptance of uncertainty, creativity, and resilience. Remarkably, there are significantly fewer authors from other healthcare disciplines who address the subject of including the arts in their curricula. I will present and expound on the articles I evaluated as the most useful and appropriate to illustrate my position.

Literature Review

An initial search without a custom range of years using general search phrases such as "fine arts as electives in post-secondary healthcare programs" and "arts-based medical / nursing / healthcare electives" generated a voluminous number of articles that offered overarching insights

into using the arts as therapy for patient care, the arts of healing, or the state of the arts in healthcare technologies and medical interventions. Medicine is the discipline with the most authors writing about the importance of promoting medical student enrolment in elective arts and humanities courses (Cerceo & Vasan, 2023; Cohen et al., 2023; Emanuel, 2020; Gelgoot et al., 2018; Kagan et al., 2022; Mann, 2017; Mi et al., 2022; Moniz et al., 2021; Petrou et al., 2021; Pories et al., 2018; Ramalho et al., 2020; Shumylo, 2019; Stouffer et al., 2021; Tackett et al., 2023; Yaden et al., 2023).

For example, Boston physicians Cohen et al. (2023) investigated whether the arts serve to improve surgeons-in-training. They concluded that incorporating visual arts in the curriculum for medical students could be beneficial because it will “improve critical thinking, observation, communication, perspective taking, cultural awareness, and empathy, which are all directly related to core competencies of surgery” (pp. 404–405). Vincenza Ferrara, the Director of the Laboratory of Art and Medical Humanities at Sapienza University in Rome, Italy, and her team of researchers concur that arts and medical humanities courses should be mandatory in medical curricula because they will enhance “reflective thinking and the development of empathy” (Ferrara, 2023, pp. 27–28).

In impartial agreement, Nijim et al. (2023), in their electronic survey of 185 medical schools in the US, indicate that 79%, mostly those in the Northeastern U.S., support and incorporate art experiences courses in their curricula, either formally or through virtual online means. The authors do not

explicitly discuss or promote the benefits of including the arts in medical curricula; rather, they recommend further exploration to evaluate the long-term impact of incorporating arts-based experiences into medical education. The objective attitude in which the authors share their results is noteworthy; that is, without an overture of cheerleading to promote the inclusion of art. Nijim et al. write in a reassuring voice that calls on enthusiasts to consider feasibility, accessibility, funding, sustainability, and potential administrative issues such as liaison agreements with the fine arts department within their institution, local galleries and museums, and artists.

Moreover, Ramalho et al. (2020) and Petrou et al. (2021) assert that many medical students recognize the importance of humanities courses so long as they fit into their schedules and could easily boost their grade point average (GPA). Emanuel (2020) warns that, as a way to resolve the crisis of the shortage of physicians, medical schools in the United States may need to shorten the preclinical education period or move certain courses online. However, many critics responded to Emanuel, adamantly declaring that the move would be detrimental for students' critical-thinking skills, development of professional identity, and character development with respect to the nurturing of students' humility. Therefore, if Emanuel's prediction is correct, it would be nearly impossible for students to take any non-medical electives.

Subsequent database searches using PubMed, the Cumulative Index to Nursing and Allied Health Literature (CINAHL), the Education Resources Information Centre (ERIC), and Google Scholar, as well as search engines from

the libraries of University of Toronto alumni access and Brock University in Canada, were accessed using the following search terms: fine arts courses in (and) healthcare education, arts in (and) healthcare, arts in (and) nursing education, arts courses as electives in (and) healthcare education, arts in (and) clinical labs and practice, the importance of arts in healthcare (education), and healthcare (and) nursing students' choice in electives. The following were the inclusion criteria for article selection:

1. Must be peer reviewed
2. Should highlight the inclusion of arts in health sciences programs such as nursing and medical schools
3. Must have been published in English from 2019 to 2024
4. No grey literature

This resulted in over 300 articles; a total of 56 articles and two books supported the discussions of this paper. Of these, 28, the majority, were specific to medical education and spoke to the role of arts and humanities courses in medical programs, and 11 were interprofessional perspectives articles. Only 14 articles with a nursing focus were published between 2019 and 2024.

An additional 18 nursing articles from prior to 2019 were immensely informative. However, the idea of considering the arts in nursing as a pedagogical approach appears to be a newer area of interest because the supportive evidence is scarce prior to year 2000 based on the reference lists and my verification (Casey, 2009; Elhammoumi & Kellam, 2017; Hegedus, 2006;

Inskeep & Lisko, 2001; Jensen & Curtis, 2008; Özcan et al., 2011; Pavill, 2011; Robinson, 2007; Pardue, 2004; Rieger & Chernomas, 2013; Smith et al., 2004; Wikström, 2000a; Wikström, 2000b; Wikström, 2001a; Wikström, 2001b; Wikström, 2003; Wright, 2006).

I included four publications from between 2000 and 2012 because one writer, Billings (2007), is a retired registered nurse who also has a Master of Fine Arts degree, Rieger and Chernomas (2013) present a Canadian perspective, and Wikström (2000a, 2000b) includes the painting *The Sickbed* by Swedish artist Lena Birgitta Cronqvist Tunström (1938–2000) as an integral part of her study. Wikström’s work speaks to me because I, too, am including photos of various artists in this paper.

The inclusion of arts in medical programs is mainly attributed to the artist Michelangelo Buonarroti (1475–1564), who studied the human body and presented it with precision in his artwork and thus influenced early medical anatomy textbooks (Eknoyan, 2000; Elkins, 1999, Hajar, 2011; Sealy & Lee, 2020; Szladits, 1954). The rationale for the lack of curriculum integration of the arts in nursing and other healthcare disciplines is unclear. Although each profession has their own distinctive identity, they are complementary disciplines that share many training and practice similarities such as assessment and clinical skills, therapeutic-relational and communication skills, problem-solving and critical-thinking skills, patient-centred care and advocacy, and ethical principles and conduct (Burgess et al., 2020; Warren & Warren, 2023).

Naturally, there are differences culturally and geographically by regions or nations. For example, Portuguese and Brazilian authors Santos et al. (2014) and Martins et al. (2021) respectively discuss the cultural similarities and differences between nursing training in Portugal and Brazil, providing an analysis on teaching ethics and moral fitness to medical and nursing students. American scholars Dinh et al. (2020) in their systemic review provide a cross-disciplinary perspective on teamwork processes in health care, emphasizing the agreement in effective communication and collaboration and noting some potentially problematic disciplinary differences such as the processes in transfer of accountability in care and action-oriented procedures. Delgado Bolton et al. (2022) are Spanish researchers who discuss empathy and lifelong learning as two key professional competencies for nurses and physicians, irrespective of place of origin. Indisputably, to a large extent, medicine, nursing, and other healthcare disciplines share many alignments, increasingly so in current complex and team-based healthcare systems (Burgess et al., 2020; Warren & Warren, 2023). Therefore, the integration of the arts in healthcare curricula could promote diversity in care and encourage different perspectives and ways of knowing.

Arguably, a more valid case could be made for nursing to incorporate arts in the curriculum because nurses generally spend more time with patients in direct care (Hopeck, 2024; Kwame & Petrucka, 2021). Hence, it is discernibly noteworthy that so few nursing publications are available pertaining to the topic of integrating the arts into the nursing curriculum.

Salm et al. (2021) in their substantive systematic review and thematic analysis conclude that the term *global health* transcends borders because it is a “multidisciplinary, multisectoral, and culturally sensitive approach for reducing health disparities” (p. 12). Undeniably, healthcare professionals share many global similarities, with the common goal of providing safe, culturally and individually sensitive, and quality care to patients. Thus, integrating the arts into the healthcare curriculum is one approach that could bridge the gap in the development of soft skills such as emotional intelligence, critical-thinking skills, resilience, adaptability, tolerance, and cultural competence.

Overview of Supportive Articles

Medical Programs. Numerous authors present articles that support medical schools’ inclusion of arts and humanities courses as electives or mandatory courses in their curricula. Shumylo (2019), a senior lecturer at the Danylo Halytsky Lviv National Medical University in Lviv, Ukraine, emphasizes the importance of elective courses outside of medical programs because they enable students to develop other cognitive interests, thereby broadening their perspectives which improves critical-thinking, reasoning, interpersonal, and communication skills. Shumylo does not specifically promote arts and humanities courses; rather, Shumylo advocates for non-medically related topics. The author also suggests that medical students should take elective courses in their pre-clinical years before they are too busy or overwhelmed by clinical pressure. Mukunda et al. (2019) from the School of Medicine at the

University of Pennsylvania in their narrative review concur with Shumylo's recommendation that pre-clinical exposure to visual arts promotes empathy, observational and diagnostic skills, collaboration, communication skills, reflective mindfulness and self-care skills, resilience, and cultural awareness. The authors propose partnering with arts educators, local galleries, and museums to ensure successful implementation of including the arts as electives in medical programs. Subsequently, Hoy et al. (2020) launched Rx/Museum: Art and Reflection in Medicine, a free, open-access, interactive, web-based, 52-week medical humanities resource course. The course was developed by physicians and educators at Penn Medicine, University of Pennsylvania, and provides opportunities for students, clinicians, and patients and their families to explore health care through the lens of artful themes and consider the nuances of uncertainty in medicine (Rx/Museum, n.d.).

Correspondingly, Xu et al. (2023), a physician, researcher, and educational programs officer who, in partnership with the Montreal Museum of Fine Arts and the Faculty of Medicine and Health Sciences at McGill University, report on the success of their health humanities initiatives—the Physician Apprenticeship and Narrative Rehabilitation electives. The two courses require students to look at any given artwork for a minimum of 10 minutes in silence, read about the artist(s) and the work, and then answer reflective questions. Students experience an intentional interpretation that is “deep seeing ... disrupt[ing] habitual ways of paying attention often dominant in clinical contexts” (p. 6). Xu et al. discuss the notion of cultivating and

embodying an “interpretive consciousness” (p. 5). That is, moving away from traditional deduction or pattern recognition and towards being in the moment with the patient, which “might mean the difference between the choice of an appropriate treatment or not, between the creation of a healing moment or its nullification” (p. 14). Xu et al. state that these courses force medical students to slow down in their learning process. The authors also underscore the vital pedagogical role museums have in medical training.

Dalia et al. (2020), Ferrara et al. (2020), Ferrara (2023), Rezaei et al. (2023), and van Woezik et al. (2023) echo all the benefits identified by Shumylo (2019), Mukunda et al. (2019), and Xu et al. (2023) in promoting the inclusion of arts in medical programs. Ferrara et al., Rezaei et al., and van Woezik et al. are the only three longitudinal studies that follow the same cohort of medical students: Ferrara et al. at the Medicine and Surgery programs of Sapienza University in Rome, Italy; Rezaei et al. at the Baylor College of Medicine in Houston, Texas; and van Woezik et al. at the Radboud University Medical Center in the Netherlands. The authors of all three studies strongly advocate for the inclusion of the arts in medical programs because they believe in the clinical relevance of arts and humanities in cultivating empathy and open-mindedness so that students can appreciate multiple perspectives. In addition, Ferrara et al. assert that exposure to art history and visual arts will promote students’ abilities to apply “artful thinking” or “visual-thinking strategies (VTS)” (pp. 2–3). Ferrara et al. also express that

observation of fine arts can “increase clinical visual skills,” which ultimately improves critical-thinking, reasoning, and observational skills (p. 13).

Yaden et al. (2023) are American and Canadian psychiatrists and medical researchers who provide a systematic review of arts and humanities courses in psychiatry education. The authors identify 1,287 articles dating as far back as 1979 that inform the roles of arts and humanities courses in medical education and specify that the momentum of these publications began in 2010. Yaden et al. utilize 35 publications dating from 2015 with global agreements by medical researchers from the United States, Canada, United Kingdom, Italy, Germany, and Singapore. The writers conclude that arts and humanities courses increase medical students’ empathy, observational skills, and, specifically in psychiatry, these courses inspire the reduction of stigma towards patients who live with mental health conditions.

Moniz et al. (2021) are Canadian and American physicians and medical science educators who provide the results of their scoping review of arts and humanities in medical education across Canada and the United States. The researchers identified nearly 22,000 articles. They ultimately included 769 English-language publications ranging from 1991 to 2019 within Canada and the United States, reviewed 255 medical programs, and interviewed 15 stakeholders. Discussing the substantive analysis of this scoping review is beyond the scope of this paper; suffice to say, the researchers’ extensive investigation of the diverse and abundant supportive literature corroborates and reinforces the findings of the aforementioned scholars that there are

multiple benefits to including arts and humanities subjects in health sciences curricula. Furthermore, the accompaniment of the semi-structured interviews with the 15 stakeholders is *sui generis* to the scoping review because the insights from the stakeholders identified a gap that had not been ascertained by others; that is, the voices of the artists and those who teach and develop the curricula but have not published their lived experiences.

Thus, my endeavour in this paper to include my own collection of photos, reflections of integrating the arts in some of my lectures, and the feedback of students and others will bridge the gap Moniz et al. (2021) mentioned. Moniz et al. do not focus on the benefits of non-medical electives because they view it as an obvious conclusion. Rather, they emphasize a few major gaps in terms of how medical programs should use arts and humanities courses, such as where and when to fit them into the curriculum, the consideration of the types of courses, the inclusion of the voices of artists and non-medical educators, and more meaningful evaluation of students' feedback post-course. One key question Moniz et al. ask is "What are the arts and humanities trying to do in medical education?" (p. 1219). A critique of this question may be to reframe it as "How will arts and humanities support health sciences education?" Or "How do we ensure that healthcare students are exposed to arts and humanities courses?"

Similarly, Alkhaifi et al. (2021) from the University of Toronto, Canada, provide a systematic review of 23 studies of visual arts-based training in medical programs internationally and report consistent findings with the

aforestated and ensuing researchers in terms of improving empathy, communication skills, collaboration, and cultural appreciation, as well as the reduction of burnout and the promotion of well-being and resilience. In addition, Alkhaifi et al. briefly mention the utilization of social media platforms for students to generate dialogue and feedback on their visual arts experience, share other interesting websites, and post their own artwork while ensuring protection against breaches of students' personal information and copyright.

Comparatively, Smydra et al. (2022), from Oakland University, Rochester, New York, in their narrative review, examined 34 English-language articles from 2011 to 2020 by international researchers in Australia, Canada, Columbia, France, Hong Kong, India, Italy, Korea, Nepal, New Zealand, Nigeria, Sweden, United Kingdom, and the United States who offer descriptions of their medical curricula that incorporate arts, inclusive of fine arts, music, films, theatre, dance, art making, literature, poetry, social sciences, and humanities topics. Smydra et al. report similar themes such as improving exposure to interactive teamwork, resilience, empathy, and communication skills. They emphasize that although the results are promising, it is difficult to measure the true long-term impact because of the subjective nature of integrating the arts and humanities as an instructional pedagogical approach in medical education. This position aligns with Moniz et al. (2021), who call for more substantive evaluation. Smydra et al. recommend more longitudinal studies and the use of more objective assessment tools such as Objective Structured Clinical

Examination (OSCE) tests, standardized patients' evaluation of students, peer assessment" (p. 1273).

Rotating first authorship, Stouffer et al. (2021), Kagan et al. (2022), and Tackett et al. (2023) are medical doctors and researchers from Johns Hopkins University and a clinical research associate from the Albert Einstein College of Medicine in New York. Stouffer et al. describe a one-week online visual arts course that includes elements of literature, reflective writing, dance, film, music, philosophy, and religion with 18 second- to fourth-year Johns Hopkins medical students. Kagan et al. chronicle a pilot integrative arts and humanities course that comprises four weeks of six two-hour art museum-based sessions with 18 third- and fourth-year medical students. Tackett et al. document a hybrid four-week, arts-based elective with five clinical medical students that included 12 in-person sessions at art museums and other cultural centres, and five online sessions. These authors conclude in resounding agreement with previously mentioned researchers that arts and humanities courses have clinical relevance as well as personal and professional benefits. Tackett et al. highlight that their findings support the formation of students' identities as future practitioners and that the experience was "transformative for the students" (p. 4). Although the sample sizes of all three studies were small, the students' anecdotes and reflections confirm similar themes as Cohen et al. (2023), Ferrara (2023), and Ferrara et al. (2020), which include the following:

1. Reconnecting with individual characteristics and interests that had been neglected during medical education;
2. Better appreciation of others' perspectives;
3. Developing identities as physicians; and
4. Engaging in quiet reflection, renewing their sense of purpose (Tackett et al., 2023, p. 4).

Concurrently, Srivastava et al. (2022), from the Harvard Medical School, report the advantages and disadvantages of an online elective fine art-based medical humanities course Training the Eye: Improving the Art of Physical Diagnosis. The course, introduced in 2004, began as a traditional in-person experience, and the first online version launched in 2020 shortly after the COVID-19 pandemic began and was attended by 29 medical students of unidentified year. The authors note some of the expected technical issues such as restricted camera angles and distances, lack of personal connections with colleagues, and issues with internet connectivity. Otherwise, feedback was unanimous with respect to the advantages of the online platform, such as the convenience of learning from home, full engagement with no dropout or course failure, and the students' ability to gain a parallel appreciation of telehealth medicine and virtual patient meetings and examination. They note disadvantages such as the absence of tangible and tactile senses, including students not being able to walk to and from the art galleries together, thus missing the "smells, echoes, ambiance, and being together in that space, [which] was unfortunately not recapitulated in a virtual environment, nor was

the true experience of many pieces of art, whose scale, texture, and dimensions could not be translated to a flat screen” (p. 158). The authors and course directors state that the core goal of exposing medical students to fine arts to hone their social and soft skills was not lost by the forced online modification of the successful in-person course. Hence, in agreement with Tackett et al. (2023), Srivastava et al. acknowledge that a hybrid course may be a win-win and deserves further exploration. Since the World Health Organization (WHO) declared COVID-19 an international endemic on May 5, 2023, the original course is now back to in-person attendance at Harvard Medical School. Moreover, corresponding author Dr. Ingrid Ganske of Srivastava et al. confirmed that there is a fully synchronous online continuing medical education course titled Training our Eyes, Minds and Hearts: Visual Thinking Strategies for Healthcare Professionals designed for and available to medical doctors and advanced practice providers worldwide (I. Ganske, personal communication, November 22, 2024).

Accordingly, authors whose work was published between 2023 and 2024 reiterate similar findings and sentiments regarding the inclusion of the arts in medical programs internationally. For example, Guth et al. (2023) developed Art in Medicine, an art museum-based course at the University of Colorado School of Medicine, Aurora, Colorado, in collaboration with experts from the Centre for Bioethics and Humanities, as well as an art historian and educator from the Denver Art Museum. They highlight what they refer to as the “translational skillsets” that the students acquired, such as empathy,

communication, and observation skills, echo those identified by other researchers (p. 587). Lazarus et al. (2023), from the David Geffen School of Medicine at UCLA, describe a similar advanced clinical skills elective for senior medical residents that exposes students to fine arts appreciation at local museums and results in improved clinical reasoning and observation skills.

Furthermore, Noorily et al. (2023), at the NYU Grossman School of Medicine, report on the positive impact of The Art of Seeing, their visual arts elective course, which includes the enhancement of well-being, mindfulness, and self-awareness, and the lowering of stress levels of medical students. Likewise, Orchard et al. (2024), researchers at the College of Medicine and Public Health, Flinders University, Adelaide, Australia, derive equivalent themes in their critical interpretative synthesis of 56 articles regarding music in medical education, including the improvement of students' well-being.

Notwithstanding, Ong et al. (2024) are the only authors who communicate lukewarm feedback from junior palliative doctors from a qualitative exploratory study. Ong et al. are Singaporean physicians and medical education researchers who collaborated with an art therapist and a clinical psychologist. Their study utilized collage-making sessions with junior palliative doctors to foster a sense of well-being. Although the junior doctors accepted the notion of art, art making, and art therapy to promote physicians' well-being, they questioned program and operational feasibility, personal preferences, privacy and confidentiality, and the lack of time in their already

overflowing timetables. The authors list the junior doctors' realistic barriers while underscoring and acknowledging other published scholars' optimistic findings.

Common Themes of Limitations in Medical Programs. Almost all the aforementioned authors report some form of administrative red tape or departmental hierarchy as a limitation to advocate for arts-based courses. Arranging for collaboration with art galleries and museums to accommodate regular visits and lectures is not a simple task. In addition, the debate for a compulsory arts-based or humanities course continues because all the authors herein note the profusely full schedules of the medical curriculum to be the one major barrier. Van Woeziek et al. (2023) also mention that some students are not interested because they are "narrow-minded" about the clinical relevance (p. 53). Rezaei et al. (2023) supportively express the challenge to "deliver clinically relevant content without diluting the intrinsic value of being exposed to the arts and humanities ... to balance making explicit connections to medicine for students to consider and allowing them to make these connections on their own" (p. 6). Tusoni et al. (2024) explore the reasons why medical students take or do not take humanities courses in a cross-sectional study of 260 medical students. The reasons not to include a lack of time and/or interest and anxiety levels related to not being able to fully engage in project activities, thus compromising their overall GPA. Rezaei et al. concur and state that medical students feel "compelled to constantly build clinically relevant skills" (p. 6). Admittedly, Stouffer et al. (2021)

acknowledge that medical educators have varying perspectives and biases regarding the importance of exposing students to arts-based or humanities courses. Hence, the lack of a united view could contribute to challenges navigating bureaucratic procedures to include the courses as electives.

Interprofessional Programs. Based on the articles presented from the medical discipline, it is irrefutable that the inclusion of arts-based and humanities courses are beneficial to students' overall professional and personal-emotional development, including improving critical-thinking and communications skills, interpersonal skills, empathy, and well-being. From an interprofessional perspective, the results of my literature search generated a few articles published between 2019 and 2024 regarding the topic of including arts and humanities content in the curricula. There are seven conspicuous articles: one pilot project poster presentation in which the authors assert similar advantages and the promotion of including of arts-based subjects in healthcare education, and a workshop that promotes using arts and humanities in health profession education. In addition, I included one article by Jin and Ye (2022), who do not specify healthcare students in their cross-sectional study with 376 undergraduate students, but emphasize that the inclusion of fine arts education "positively and significantly influences psychological well-being, creativity, and self-efficacy" (Jin & Ye, 2022, p. 8). All the authors are advocates and call on healthcare programs to consider weaving arts and humanities content into their curricula.

Mitzova-Vladinov and Torrents (2020a, b) advocate for the role of visual arts in healthcare education. The authors present their points of view from an interdisciplinary perspective, highlighting their multidisciplinary healthcare education programs at the University of Miami that implement visual-thinking strategies (VTS) and utilize art-based discussions to improve communication, problem-solving skills, and team building. The authors also underscore that VTS provide a safe space for students to disagree, agree, and practise embracing and respecting the notion of ambiguity that is often part of the complexity in the healthcare environment.

Ferrara et al. (2022) use a pre- and post survey to measure the educational impact of VTS and arts with 50 Italian undergraduate nursing students and 34 medical students. The appeal of this study is that the participants enjoyed the workshops and lectures in the splendour of the National Gallery and the National Etruscan Museum of Villa Giulia in Rome. The authors also feature several paintings within the article for readers to imagine or simulate a VTS experience. They conclude that VTS and the arts as a tool could improve skills in healthcare workers such as observation and clinical attention, critical-thinking and problem-solving skills, and linguistic expression, as well as reduce burnout. They firmly recommend using a VTS and arts method as part of the curricula for healthcare professions.

In agreement, Costa et al. (2020), in their qualitative case study, explore the advantages of arts and humanities courses with 14 participants from Canada's first Health Humanities baccalaureate program from the University

of Toronto. This program was launched in 2014 for students with one or multiple majors in healthcare fields and offers students opportunities to critically investigate the intersecting elements that health care shares with the arts, literature, philosophy, and the social sciences. Costa et al. address students' anxiety, such as the fear of failure, unfamiliarity with the subject matter, and extra workload. Nonetheless, the students also identified the perceived application to health, enjoyed the novelty, and appreciated the relationship to humanities. The authors concluded that the ability for healthcare professionals to critically understand the role and purpose of arts and humanities will ultimately affect their "life course" in their professions (p. 1222).

Also in Canada, Han et al. (2024), health sciences researchers and professors from the McMaster University Health Sciences Program for Interprofessional Practice, Education, and Research, presented a pilot project, *The Anatomy Lab: Where Arts and Health Sciences Intersect*, at the Anatomy Connected 2024 conference. The pilot integrated the arts into an existing interprofessional practice education anatomy dissection elective where 28 health sciences and 16 studio arts students studied anatomy and drew together. The overwhelmingly positive results included students appreciating the details through dissection, fostering a newfound respect for human dignity and the human body that is beyond facts and science, thus bridging the cognitive dissonance between students' personal and professional understanding and beliefs about death. The researchers assert that "art

informs science, and science informs art ... this project elicited a shared space that furthered learning beyond what could be achieved separately” (Han et al., 2024, poster presentation). According to the director of the Education Program in Anatomy, Pathology, and Molecular Medicine at McMaster University, this activity is ongoing and evolving (B. Wainman, personal communication, November 26, 2024).

Orkibi et al. (2023) report on their pilot study that was part of a more extensive project by the European Community Action Scheme for the Mobility of University Students, also known as Erasmus, titled *Death Education for Palliative Psychology*. The pilot involved healthcare researchers and students from Austria, Israel, Italy, Poland, and Romania from 2019 to 2022. A two-month online palliative and bereavement care course using drama therapy with 22 creative arts therapy students was piloted at the University of Haifa, Israel. The authors conclude that an in-person format of such a course may be more beneficial. Nevertheless, arts-based learning is useful in bridging the death bereavement gap by providing a platform for emotional release and creating a safe space to discuss subjective experiences. This element is similar to the findings of Han et al. (2024) regarding students’ transformed attitudes towards death.

Flavin and Bates (2023) present a comprehensive literature review of arts in healthcare education and practice from 2000 to 2022. The authors analyzed 91 peer-reviewed, academic articles by international researchers who reported on the effects of arts and healthcare education and practice.

Flavin and Bates confirm that my search was exhaustive because they also note only 10 quality articles since 2020 that provide an appreciation of current research and practice with potential strategies and ideas for next steps. Besides the already-mentioned benefits that arts-based and humanities courses offer to healthcare students, Flavin and Bates feature Atayero et al. (2020), who suggest designing arts-based courses in collaboration with artists and students. In addition, Pohjola et al. (2020) examine the healthcare educators' experiences of using the arts as a pedagogical approach. These notions are echoed by Moniz et al. (2021), as indicated earlier in this paper.

Finally, at the 2024 Australian & New Zealand Association for Health Professional Educators Conference, Darbyshire and Smith-Han (2024) facilitated a workshop that focused on using arts and humanities in health profession education. The facilitators emphasize in their peer-reviewed abstract that part of providing quality patient-centred care is the healthcare providers' ability to embrace different "ways of knowing" (p. 9). Darbyshire and Smith-Han state that arts and humanities can also support the development of professional intuition, relational awareness, and "illustrate and illuminate the complexity of human experience and responses to health, illness, disease and disability, and the most appropriate health care approaches" (p. 9).

Nursing. The discovery that so few nursing authors wrote about the topic of the arts and humanities in nursing education and practice within the search range of 2019 to 2024 is astonishing. I classified Ferrara (2023) in the

“Medical Programs” section above since she mentions nursing as part of the medical education sector. Similarly, I categorized Mitzova-Vladinov and Torrents (2020a, b) in the “Interprofessional Programs” section because the authors advocate for the role of visual arts in healthcare education from an interdisciplinary perspective. Obara et al. (2022) are Canadian nursing scholars and researchers who present a substantive literature review on using arts-based pedagogy in nursing education. They argue that including arts-based teaching could enhance and support students’ learning experiences and development in areas such as critical-thinking skills, team collaboration, empathy, compassion, as well as the fact that arts-based pedagogy has historical, philosophical, and theoretical groundings in other educational disciplines.

I would have been remiss not to include four articles published between 2000 and 2012 because of the authors’ individual unique artistic contributions to the nursing profession. Two of the articles are by Billings (2007) and Billings et al. (2012); Billings is a retired registered nurse who also has a fine arts degree. Another is by Rieger and Chernomas (2013), who represent a Canadian perspective, and the last is by Wikström (2000a, b; 2001a, b; 2003), who includes the painting *The Sickbed* by the Swedish artist Lena Birgitta Cronqvist Tunström (1938–2000) as a constitutive part of her discussions. Since these articles are outside the search years’ range, the writers’ inputs are interspersed throughout this paper.

Nursing and Art Making or Art Participation. Shields and Phinney (2020), MacGregor et al. (2021), and Baş et al. (2022) effectively discuss how creativity is essential in cultivating critical-thinking skills. Shields and Phinney and MacGregor et al. are Canadian nursing scholars. Shields and Phinney report on a collaborative research project between the Emily Carr University of Art and Design (ECUAD) and the University of British Columbia (UBC) School of Nursing titled Making Art for Making Place. The project did not involve nursing students, but rather arts students who were requested to help decorate a temporary space for people living with dementia. Twenty undergraduate fine arts students collaborated with an unspecified number of nurses to create art for a transitioning facility for people living with dementia. Shields and Phinney explore how art may benefit dementia patients, the impact of the students creating art specially for people with dementia, and the roles of art in society. The anecdotes from the students in the post-project group discussions are overwhelmingly heartwarming. They particularly enjoyed listening to the nurses' experiences in offering their expert lens when caring for patients living with dementia. The themes of their findings besides the chief purpose of art-creating for people living with dementia in the facility are as follows:

1. The appreciation of community collaboration through meaningful discussions among the nurses, students, and researchers regarding their experiences;
2. The promotion of individual reflections on art making and the impact of the art on others; and

3. The amplification of raising broader, deeper, and more crucial discourses regarding “the functions and roles of art” in our society (Shields & Phinney, p. 215).

Shields and Phinney did not discuss why the nurses did not participate in the art-making. Presumably, the facility managers requested that the artwork on the walls be made by art students. The authors conclude that more research is needed to support arts-based research in the positive fostering of students’ learning experiences. The themes are easily generalizable to nursing and students in healthcare fields.

MacGregor et al. (2021) strongly advocate for an “arts-informed” pedagogical approach at the graduate nursing level by using a quilting activity at Toronto Metropolitan University, formally known as Ryerson University (p. 1). Graduate nursing students in a leadership course were invited to participate in a non-mandatory quilting activity during the last week of the course. Willing participants applied their personal philosophies and understanding of their evolving professional identities in an artistic expression in a 4 × 4-inch quilt square that was incorporated into a full-size quilt consisting of 63 pieces. The course and the project were anchored in Carper’s (1978) four patterns of knowing that include empirical, ethical, aesthetic, and personal knowing. Chinn et al. (2022) introduce a fifth pattern, emancipatory knowing, to challenge social inequities and propel social change. Thus, students who participated in this quilting activity were able to metaphorically integrate and express their patterns of knowing that combined their empirical

scientific knowledge, theoretical understanding, and personal-creative-aesthetic-reflective knowing. MacGregor et al. agree and cite the work of numerous researchers who believe that a robust educational and scholarly experience needs to be holistic and experiential to guide and support students' andragogical journey towards the enhancement of their professional development. MacGregor et al. state that arts-informed pedagogy was inspired by John Dewey's *Art as Experience* (1934) and introduced into education in the 1980s. Hence, although it is not a novel idea, it is less than 100 years old and still coming of age, and is thus worth further exploration. Unfortunately, attempts to contact the corresponding author were unsuccessful, and it is unclear from the program website whether the quilting activity has continued or not.

Turkish PhD nursing professors and researchers Baş et al. (2022) present a most enjoyable and culturally unique read describing a decorative arts course that implements the ancient Islamic art of *tezhip* ("gilding" in English) that uses gold or different colours to create art patterns or motifs (p. 3). The authors do not specify the name of the university in Turkey but indicate that a decorative arts elective course has been available for third- and fourth-year nursing students since 2021, and students are welcome to take the course for both years. Baş et al. conducted a descriptive study using the Critical Thinking Disposition Scale (CTDS) developed by Semerci (2016), and the Marmara Creative Thinking Dispositions Scale (MCTDS) developed by Özgenel and Çetin (2018). Their online questionnaires support the SPSS

evaluation of a total of 74 items such as open-mindedness, facing errors, self-disciplines, risk taking, tolerance, and courage. One hundred forty-one third- and fourth-year nursing students from two universities participated in this course over seven months. The results strongly suggest that participation in art making enhances critical thinking, flexible thinking, problem solving, and coping skills. Creativity also improves inquisitiveness and the ability to interpret and translate knowledge and ideas. Baş et al. resolutely advocate for the integration of art into nursing curricula.

Equally pleasurable to read is a qualitative descriptive study of a dance workshop by Italian nursing educators Dimonte et al. (2021). In the undergraduate nursing program at the University of Turin, Italy, a mandatory first-year humanities dance workshop was developed in 2015 that consists of two five- to eight-hour sessions. One hundred and thirteen first-year nursing students in the 2018–2019 academic year participated in this study. Dimonte et al. describe the following three themes related to learning: “learning happens through the experience of competences, learning happens through corporeality, and learning takes time” (p. 4). Through creative choreography, which includes the physicality of their own bodies as well as touching and holding others, the act of mirroring each other in movements, counting rhythms together, and sometimes missing or going off beat, students reported their appreciation of linking the relationships between the theoretical concepts of communication and relation skills, and nursing practice. The authors report that this workshop is helpful for preparing students for the

relational part of clinical settings and suggest further research to test its efficacy. As far as I can tell from the University of Turin Nursing website, the workshop is still in place.

Nicol and Pocock (2020), professors from the University of Birmingham Nursing department in the United Kingdom, also present a qualitative descriptive study that reports on an art-based workshop that assists third-year nursing students to explore death and dying. Forty-eight third-year nursing students participated in viewing 16 pieces of artwork that illustrated the notions of death and dying. One hundred percent of the participants responded to a long-answer questionnaire. The results remarkably confirm that the activity encouraged open and honest discussions and reflection on the interpretation and understanding of death and dying, while at the same time enhancing critical-thinking skills and compassion. Nicol and Pocock believe this exercise to be generalizable and valuable to all healthcare disciplines and professionals.

Timpani et al. (2021), Australian nursing educators, reviewed 13 international papers in which nursing students engaged in storytelling, specifically verbal, written, and drawn narratives. The authors describe students who narrated their clinical experiences in terms of their interactions and communications with patients, supervisors, each other, senior nurses, and students, as well as listening to and reading others' narratives. Timpani et al. conclude that storytelling is beneficial to students in clinical settings and facilitates the development of communication and relational skills and

improves the overall learning experience. Clinical educators were also better able to meet individual students' learning needs based on the narratives and support a more holistic teaching-learning approach.

Choi et al. (2022), South Korean nursing educators, integrated VTS with 60 second-year nursing students in a health assessment skills lab course at Yonsei University South Korea. Instructors curated free online art resources for students to view and contemplate and invited them to respond freely on their experiences. Students reported that the VTS sessions were easier than traditional lectures, albeit students struggled with the autonomous format that seemed unstructured and unfamiliar. Overall, students appreciated being able to consider diverse perspectives as well as the fact that VTS is a form of sustainable learning, one that is potentially much more cost effective and accessible. Choi et al. believe that integrating VTS is part of the future of healthcare education that will positively result in facilitating students' engagement. The authors recommend more randomized controlled trials to compile evidence to support the advantages.

Rieger et al. (2020a, b; 2021) are Canadian nursing professors and researchers who present evidence to support that arts and arts-based learning have a place in nursing education. They insist that scientific and technical knowledge are not enough to make good nurses, and arts-based learning that encourages students to participate, perform, create, observe, and discuss the arts will generate positive learning processes and outcomes. Rieger et al. (2020a) recognize the "over-saturated" nursing curriculum and

those students and instructors who disagree with the relevance of arts in nursing education (p. 250). However, they also call on educators and researchers to acknowledge the undeniable size of the emerging body of research in recent years that validates the significant impact that arts-based learning has on students' professional and personal development. Rieger et al. (2020a, b) suggest that multimedia arts are beneficial and impactful in influencing students' engagement and learning, and have immense potential to broaden students' comprehension of evidence-informed practice. The authors recommend that educators design accessible arts-based assignments and lesson plans, evaluate different factors to adjust learning goals and outcomes, and consider students' differences in navigating their creative process.

Liberal Arts and Nursing Education. In academia, the term "liberal arts" has become ambiguous and broad (Schlect, 2022). As a traditionalist, Schlect proposes a practical definition, elucidating a thorough history and explanation of pure liberal arts while recognizing the existing overlap with the humanities and social sciences. For purists like Schlect, the differences are vast and definitive, and thus meandering away from its exactitude borders on sacrilege. Regrettably, it is beyond the scope of this paper to elaborate on the evolution and definitions of the liberal arts that generate ongoing debates among scholars and researchers. To the chagrin of Schlect, nursing scholars Byma et al. (2023), Copeland (2022), and Yeh (2023) present a modern and integrated interpretation of liberal arts.

Byma et al. (2023) conducted an integrative literature review that resulted in 227 titles published between 2017 and 2022, ultimately including 19 articles that discuss humanities- and liberal arts–based activities in nursing education. The main theme Byma et al. identify is that humanities topics are closely connected to Carper’s (1978) aesthetic knowing in nursing. Additional themes echo those of many other authors, such as enhancement of overall learning experience, nurturing emotional growth and development, and improving communication skills.

Copeland (2022) regards liberal arts topics, especially ethics education in nursing, to be lacking, as nursing scholars tirelessly work and advocate to establish nursing as a recognized scientific discipline. Unfortunately, Copeland believes that nursing is becoming “increasingly medicalized and empirically based” (p. 74). Copeland asserts that nursing’s drive for recognition as a science is a pitfall because it “sacrificed its emphasis on the human experience as lived in exchange for scientific explanations of cause and effect” (p. 74). The results of Copeland’s cross-sectional descriptive online survey of 218 nursing programs in the United States reveal the disconnect between the liberal arts content and nursing education, while ethics content is either embedded or threaded throughout the curriculum or as a standalone course. Copeland reports that “less than half of the average number of pre/co-requisite liberal arts credits for baccalaureate students were devoted to the arts and humanities,” and ethics content is mostly embedded into the curricula, rather than being a standalone course at both the baccalaureate

and graduate levels (p. 81). Although Copeland focuses on the need for nursing education to update its ethics content, she broadly discusses the importance of integrating the liberal arts and humanities in nursing education, arguing that they support the nurturing of a more profound understanding of the human experience.

Yeh (2023) concurs with Copeland regarding the speed of medical science and technology development that pushes nursing to hyper-focus on keeping up with the sciences and innovations. Yeh does not promote arts and humanities courses as important electives for nursing students. Rather, Yeh discusses and describes a framework for a nursing humanities program as a way for students to cultivate their own character development and enhance their understanding of humanism in their own lives and work. In essence, Yeh encourages nursing curricula to integrate the appreciation of the arts, gallery works, literature, music, and experiential learning opportunities such as narrative writing, discussions of current affairs, and sharing experiences through motivating dialogues as part of the program in non-clinical courses.

The Lived Experience of an Art-Loving Healthcare Educator

This section features photos I took in various galleries and museums throughout my travels and personal communications with artists and curators who educated me as I continue my own journey to appreciate and include arts in my pedagogical approach.

I have been teaching nursing and applied health sciences students for over a decade. My love for the arts and literature impelled me early in my teaching career to utilize well-known poems such as Dylan Thomas's "Do Not Go Gentle into that Good Night" (1951/1993) and "The Road Not Taken" (1915) by Robert Frost to discuss grief and hope. I provide a synopsis of classical literature such as Fyodor Dostoevsky's *Crime and Punishment* (1866/2017), John Steinbeck's *East of Eden* (1952), George Orwell's *1984* (1949), or William Golding's *Lord of the Flies* (1954) to grapple with social and ethical issues. As a sidenote, discussing translated works also supports conversations with students regarding the diversity in languages and communications. Students are aware that many medical terminologies are in Latin and ancient Greek; thus, a snapshot of selected translated works reinforces the evolution of languages and their cultural relevance in our society. I also use contemporary authors' work such as Kazuo Ishiguro's *Never Let Me Go* (2005) and *Klara and the Sun* (2021) to compare and contrast the progression and unfolding of ethical beliefs and positions.

In addition, I incorporate listening to a variety of musical genres to elicit emotions and creativity, as well as offer mindfulness meditation to reduce students' anxiety. For example, the online exhibition sound project *Migration Sounds* (Cities and Memory, 2024), created by Stuart Fowkes in partnership with the University of Oxford, features a recorded collection of 6,000 unique sounds from more than 120 countries with contributions from over 1,800 international artists in the span of one year. The researchers aim to

refashion and humanize the dialogues regarding the human migration experience. From protests to prayers to the banging of metals while erecting a border wall, each sound is “accompanied by the story ... and what it means to the person who recorded it ... includes moving stories of ordinary daily life as immigrants in countries all over the world and how sound helps to tell those stories” (Cities and Memory, 2024). Many students in my classes are immigrants and/or have parents and grandparents who came to Canada with harrowing stories. The sample sound clips reinforce students’ understanding of the significance of diversity in the world, the relevance of the social determinants of health, and the urgent need and advocacy for ongoing social and policy change. I am cognizant of the fact that the focus of the courses I teach is not the arts. Therefore, every morsel of information offers students a taste in the hope of inspiring them to learn more on their own. I always post “Professor’s Picks,” a recommendation list of books, films, and artists, as a complementary resource.

When I first included a few photos of random paintings in healthcare ethics, professional growth and development, and diversity, equity, inclusion, and accessibility (DEIA) courses, the purpose was a gentle prelude to ensure that students appreciate and respect that there would be different thoughts and understanding of the issues and topics, and to deter any potential conflict that may be beyond the scope of the course. An auxiliary purpose was to provide students with a brief mental break from their heavy courseload to contemplate, see, and experience the beauty of the human conditions in the

arts. After a few semesters, I realized that viewing and contemplating the arts had a much deeper meaning in achieving the course objectives based on students' feedback and reflections, including informal post-lecture conversations, individual emails, and thank-you cards. Students' comments mostly demonstrated their improved sense of empathy and appreciation of the other, as well as a reduction in stress levels (Billings, 2007; Rieger & Chernomas, 2013).

Whenever I introduce any type of artwork, my prologue is that the arts are expansive and infinite; therefore, nobody can know everything, and there is no need to feel intimidated or anxious because the learning and appreciation of the arts is a lifelong journey. Many students expressed appreciation for my purposeful verbalization of "nobody knows everything" because one main factor of anxiety is feeling as though they must know everything. Moreover, I always keep in mind that exposure to the arts has the potential to trigger negative emotions or memories. Students have the option to leave the classroom and speak with me regarding any concerns.

Lynda Billings is a retired nurse educator who also has a Master of Fine Arts degree and wrote her doctoral dissertation on developing an arts-based curriculum for the Texas Tech University Health Sciences Center School of Nursing. Billings (2007) and Billings et al. (2012) insist that there are multitudes of values to integrate into the study of the arts in nursing education, such as to "encourage self-analysis, promote reflection, and stimulate debate on difficult issues, such as death, dying and the grief

process, psychological and physical pain, psychological and physical dependence, and guilt and anger” (Billings, 2007, p. 5). Billings and Billings et al. also emphasize how arts can stimulate students’ awareness and intentional reflections of their own psychological and emotional responses, thereby improving their appreciation for the responses of their patients. Canadian nursing researchers and professors Rieger and Chernomas (2013) concur and affirm that the integration of arts-based learning in nursing is congruent with Carper’s (1978) original work regarding the aesthetic way of knowing.

I regularly use a few selected paintings from Pablo Picasso’s Blue Period to illustrate sadness and depression in my lectures. The students are palpably moved based on their intent attention, body and facial language, and thoughtful questions and comments. The photos I took from the Museu Picasso in Barcelona added to the students’ enthusiasm and interests because they appreciate that the photos were taken by me. *The Blind Man* (Picasso, 1903) (Figure 1) inspired a lot of reflective questions and discussion. Students wondered about how the man feels. Is he sad? What is he thinking? Is he facing a view that he is imagining in his minds’ eye? Perhaps he is not sad after all, but he must be since the painting is from Picasso’s Blue Period. Perhaps the Blue Period only refers to the artist’s own sadness and not that of his subjects? Similarly, many students resonated with the copper-and-tin sculpture *Melancholie* (2012) (Figure 2), created by Romanian artist Albert György after the death of his wife. One student burst into tears because the

sculpture helped him “see” the sense of emptiness his patients and families must feel when they are grieving. Photos of such artworks support explanation and dialogues surrounding the concepts of grief and complex grief as they relate to individual and cultural differences of the ways in which people process and manage their grief (Billings, 2007).

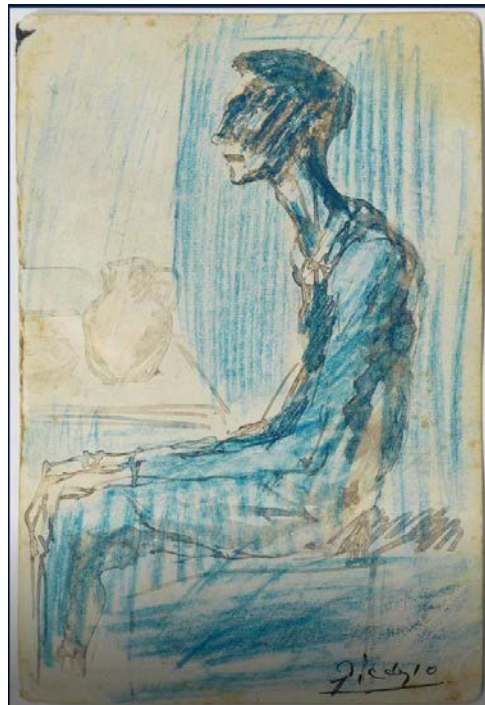


Figure 1. *The Blind Man* (Picasso, 1903). Exhibited at the Museu Picasso in Barcelona, Spain.

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Figure 2. *Melancholie* (2012) by Albert György

Note. Photo of artist Albert György with sculpture. Copyright 2012 by Albert György. Reprinted with permission (see Appendix).

The Dead Woman (Picasso, 1903) (Figure 3) also generates an appropriate pause in silent respect. When we discuss Medical Assistance in Dying (MAiD) in Canada, this painting offers students a sentient simulation of a patient's death in the classroom and removes the attitude that we are merely discussing the topic of MAiD, its criteria, and patients' choices. Wikström (2000) uses the Swedish artist Lena Cronqvist's (2000) painting *The Sickbed* as part of a visual art program to explore the observational competence of nursing students. Eighty percent of the students' responses to Wikström's lessons involve an enhanced sagacity of caring as they imagined the patient's "distress, loneliness, powerlessness," and evoke the students'

own sense of “sadness, uneasiness, discomfort, disgust, and uncertainty” (p. 185).



Figure 3. *The Dead Woman* (Picasso, 1903). Exhibited at the Museu Picasso in Barcelona, Spain.

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Nightingale (1859/1992) emphasizes the importance of observational skills for nurses to gather patient information, communicate, and identify changes in patients’ status to inform clinical decisions. Therefore, the viewing and contemplation of artwork is an advantageous strategy for improving

students' "powers of observation" (Wikström, 2000a, p. 182). When students observe artworks, they are in essence interacting and engaging in formulating meanings and tangential ideas, regardless of whether those interpretations and experiences are intended by the artists (Billings, 2007; Billings et al., 2012; Wikström, 2000a). Thus, students are able to activate both sides of their brains while studying the sciences—the left side for logic and reasoning and the right side for imagination and creativity, cultivating compassion, empathy, and humility from the arts (Billings et al., 2012; Shmerling, 2022; Wikström, 2000a). For those who need more convincing that the arts are not unscientific, students often experience an "ah-ha" moment when I present them with Salvador Dalí's *Galatea of the Spheres* (1952) (Figure 4). Dali synthesizes Renaissance art and atomic theory to exemplify the definitive disjointedness of matter, as the spheres represent atomic particles (Charalampous & Trigoni, 2020). This painting prompts students to consider not only the relationships between arts and science, but also patients who might be living with dementia and Alzheimer's and the gaps they experience in their memories (Shields & Phinney, 2020).

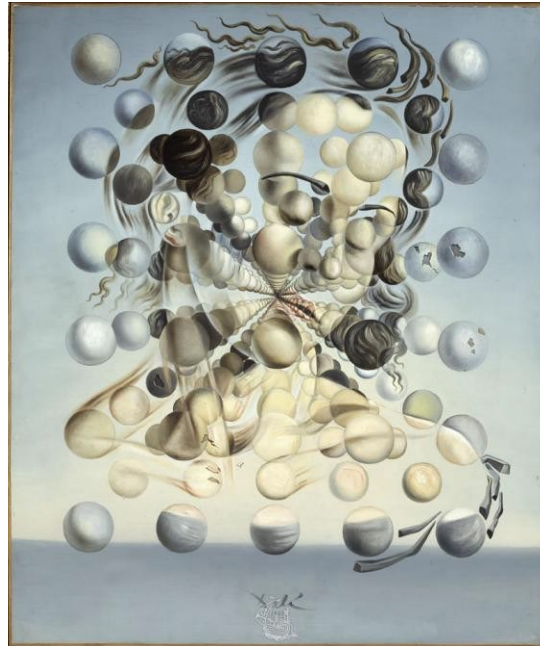


Figure 4. *Galatea of the Spheres* (Salvador Dalí, 1952)

Note. Image from Charalampous, C., & Trigoni, T. (2020). Surreal science and scientific surrealism: Dalí and the fundamental building blocks of reality. In M. Baßler, B. Hjartarson, U. Frohne, D. Ayers, & S. Bru (Eds.), *Realisms of the avant-garde* (pp. 139–152). Mouton de Gruyter. Used with permission (see Appendix).

Another of Picasso's paintings that is of particular interest depicts the dancer and entertainer Blanquita Suárez (Figure 5). I use it to inform the students of Picasso's treatment of and attitude towards his female muses. Picasso was married twice and had four children with three women; art historians categorize him as a misogynist (Delistraty, 2017). This conversation invites students to consider the notions of duality and the multilayer of perceptions. Is it possible to admire the artist's immense talent and

simultaneously abhor his treatment of women? How do we continue to appreciate such a brilliant artist while we study DEIA topics, which include women's rights issues, feminine ethics, and the historical oppression of women? How do nurses and healthcare providers position themselves and reconcile their emotions when we are in moral conflict with patients' choices in their care decisions? What happens when they have occasion to treat patients who are serving prison sentences? Would they be able to objectively triage a drunk driver who sustained more severe injuries than the people they hurt? In my healthcare ethics courses, paintings such as the *Blanquita Suárez* not only support debates of the rightness and wrongness of things, but more importantly diffuse any anxiety students may have when they disagree with me or each other; thus, the artwork serves to preface a safe and respectful space for more serious ethical discourses.



Figure 5. *Blanquita Suárez* (Picasso, 1917). Exhibited at the Museu Picasso in Barcelona, Spain.

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Students are the most captivated by the installations *Out of My Body / Cell* (2020) by Japanese artist Chiharu Shiota (Figures 6a–d), which was exhibited at the Museum Haus Konstruktiv, Zürich, Switzerland, from January

6 to October 9, 2023. The installations were made with blood-red-coloured ropes and red-dyed pieces of cowhide and goat skin, with glass and wire representing organs and a case with used books and a white dress signifying the absent body and second skin. Shiota has a preoccupation with “life, death, and everything in between” due to two experiences with undisclosed types of cancer (Haus Konstruktiv, 2023). The following quote by Shiota (2020), reprinted with permission by Shiota (2025), was read aloud to the students, either by me or by a student volunteer after they viewed the photos without context, then the students viewed the images again:

“My body and my art have changed since I was diagnosed with cancer. When I was in the hospital, everything felt very sterile, like I was on a conveyor belt. My body removed, broken, and put back together. I felt like, where is my soul? and where does it go when my body is gone? I thought my soul would disappear when my body is gone. I wanted to express this feeling of the fragile body with my art, it is often difficult to explain my feelings—that is why I need to make art.

The glass objects resemble organs that are wrapped in wire. The wire restricts the glass and at the same time shapes the glass into a new form. It is an embodiment of the physical stress my body experienced during my chemotherapy. Cancer cells once growing in the body, removed, and new cells regrowing. The glass is fragile but at the same time so durable that it can be shaped into a new form. Old cells dying, and new cells created with every breath of life.

My thread installations are usually discarded after the exhibition—they only exist in the memory of the viewers. When I was faced with death, I wanted to work with materials that would remain after my body was long gone. I made casts of my arms, hands, feet, and legs. I wanted to scatter my body parts on the floor. My body is broken, but at the same time every single body part expresses much more emotion than my whole body could. When I was informed that my cancer had returned, the ground fell beneath my feet. In the hospital, my body was not my body anymore. My body was handed through a system, broken apart and put back together until I was whole again. My body has healed again, and now when my feet touch the earth, I feel connected to life. I have wondered how often one is able to experience death in a lifespan. But maybe the strength of life is reached by the confrontation of death. To be alive means to endure suffering, it is part of our existence. This is our story.

We are all going to die someday. But death is not a limitation of our existence or memory. It belongs to the cycle of life as a new state of being. It is like moving to a bigger universe where our thoughts and memories remain. In the end, I transformed my suffering to create something new, which made me feel hopeful.”

The responses from students usually include requests for copies of the photos along with Shiota’s quote, more time to view the photos in silence, and comments that demonstrate a renewed sense of empathy and softness in

attitudes. One student who shared his experience with childhood cancer expressed that the installations and the artist's words "complete the circle of my cancer journey" (Anonymous, personal communication, 2024). He went on to indicate that Shiota's installations and words articulate how he felt as a cancer survivor, and the observation of the photos solidified his desire to work in oncology.



a.



b.



c.



d.

Figures 6a–d. *Out of My Body / Cell* by Chiharu Shiota (2020). Exhibited at the Museum Haus Konstruktiv. Photos by Cindy Ko. Used with permission (see Appendix).

Closer to home, at the Art Gallery of Hamilton (AGH), Ontario, Canada, an exhibition in 2023 featured *The Art of Creation*, from a study led by Dr. Deborah Sloboda at the Sloboda Lab at McMaster University in which visitors were invited to consider the strong links between science and art. This project included a collage by artist Vanessa Crosbie Ramsay and *The Art of Creation* participants to explore the meaning of being pregnant in Hamilton (Figure 7). In addition, Vanessa Crosbie Ramsay created a sculptural mixed media mobile, *Happy Accidents* (Figure 8), depicting how improving the early life environment for new humans leads to better health over a lifetime (2022). Ramsay stated, “Inspired by a child’s mobile, the hanging tree branch broadly represents growth, nature, and the environment ... interacts with air and light, reflecting how our chance circumstances (and those of our parents and grandparents) can cast long shadows over our lives” (Courtesy of the artist, Art Gallery of Hamilton, 2022). Furthermore, the *Garden of Wonder* (2023) (Figures 9a–c), conceived by the artist Denise Tenio as a programming space adjacent to an exhibition called *Wonder, the real, the surreal and fantastic*, included flowers that were reproduced by Stephen Altena’s paintings and drawings. The exhibit occupied an entire floor of interactive art space where visitors chose cardboard flowers from six categories representing interpersonal relationships, religious and spiritual beliefs, media, cultural and

social expectations, science, and identity and personal experiences. Guests were invited to arrange their flowers from the most to the least important and to hang them up on any hook of their choice. Students were enthralled by these photos and enjoyed the simulated choosing of their flowers in the classroom. Many reported visiting the AGH as a group in the following weeks. More importantly, these installations gave students a deeper understanding of the social determinants of health as well as appreciating differences as they engaged in the activities as participants.



Figure 7. Artworks by *The Art of Creation* participants. Collage (2023) by Vanessa Crosbie Ramsay. Photo by Cindy Ko. Used with permission of the artist and the Art Gallery of Hamilton.



Figure 8. *Happy Accidents* (2022) by Vanessa Crosbie Ramsay. Photo by Cindy Ko.

Used with permission of the artist and the Art Gallery of Hamilton.





b.



c.

Figures 9a–c. *Garden of Wonder* (2023) by Stephen Altena. Photos by Cindy Ko.

Use with permission of the artist and the Art Gallery of Hamilton.

Likewise, at Galería Juana de Aizpuru in Madrid, Spain, I was privileged to experience a private tour of the gallery in October 2024, as they were preparing for its permanent closure. The 92-year-old director, Juana Dominguez, was retiring after 54 years and did not plan to sell or pass on the

gallery; rather, she planned to return the artworks to the artists or auction them. Pamela (last name withheld by request), one of the gallery's agents, showed me the collection *Between Heaven & Earth* (1995) by Spanish photographer Cristina García Rodero (1949–) (Figure 10). The collection explores cultures and religions around the world as they relate to life, death, and pain. The photo of the grieving mother who “looked up as the camera clicked” evokes human tenderness, love, suffering, and strength (Pamela, personal communication, October 22, 2024). Similarly, Alberto García-Alix (1956–2024) was a world-renowned Spanish photographer whose black-and-white photos document social issues such as sexuality and gender inequity that are often critiqued as raw or provocative. For example, García-Alix's (2008) self-portrait *Autorretrato. Mi lado femenino* (*Self-Portrait. My Feminine Side*) (Figure 11) is one of his many photographs that “shamelessly tells the world to accept gender fluidity and calls on governments to create better social policies for the 2SLGBTQ+ people” (Pamela, personal communication, October 22, 2024). Like the photos from the AGH exhibition, these images prompt students to consider the social determinants of health from global and diverse perspectives and to contemplate their own experiences with privilege or lack thereof. One student who identified as gay stated that García-Alix “makes me feel braver and safer to be who I am” (Anonymous, personal communication, 2024). Another student who supported a patient during a stillbirth said that García Rodero's photo helped her to process the patient's grief because she felt so helpless at the bedside.



Figure 10. *Between Heaven & Earth* (1995) by Cristina García Rodero. Photo by
Cindy Ko.

Used with permission of Magnum Photos New York.

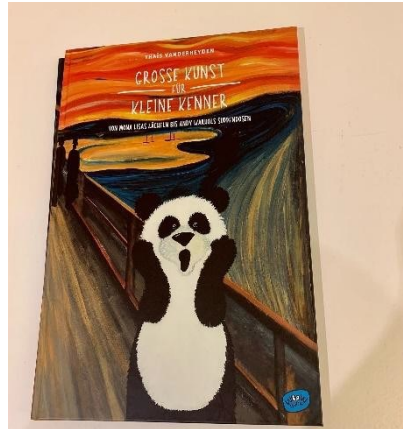


Figure 11. *Autorretrato. Mi lado femenino (Self-Portrait. My Feminine Side)* (2008) by Alberto García-Alix. Used with permission of the artist.

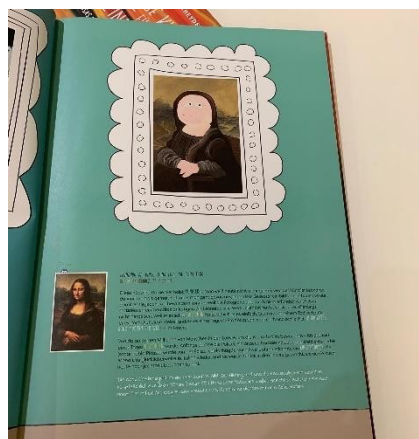
In addition, when time permits, I would either show some photos from the contemporary Chinese artist and human rights activist Ai Weiwei's exhibition *According to What?* at the Art Gallery of Ontario (August 7–October 27, 2013) or encourage students to Google him to learn about why arts could be political and therefore important in social justice issues as they relate to health and health care. Many students who have enjoyed living in a democratic country such as Canada have minimal knowledge about the lack of human rights some people experience in other nations or parts of the globe. Introducing artists like Ai sparks the beginning of understanding regarding the intersecting elements that the arts share with the politics of health care, social justice, and environmental issues for many students who may have yet to explore and experience the world and find their place.

It is encouraging when students request more photos or recommendations to learn about other artists. The most engaging feedback is when students reciprocate by sharing the artists or artworks they know, or when they use literature and poetry in their reflections. For example, one student used Emily Dickinson's poem "If I can stop one heart from breaking" to illustrate her sense of social responsibility and choice to work in the healthcare field. Another student located a famous line written in a letter by Dickinson, "I am out with lanterns, looking for myself," as a metaphor to describe working with people living with mental health conditions.

Hence, the key is to take away the intimidation because many people believe that the arts are only for those with trained eyes, a strong desire to study, gifted talents, or privilege (Costache & Kunny, 2019). When I visited Kunsthau, Zürich, in 2023, I found a children's art book, *Große Kunst für kleine Kenner: Von Mona Lisas Lächeln bis Andy Warhols Suppendosen (Great Art for Little Connoisseurs: From Mona Lisa's Smile to Andy Warhol's Soup Cans)* (2022), at the gift shop. Author Thaïs Vanderheyden presents famous paintings using fun animal pictures. Under each piece of art or on the opposite page, the original painting is included for comparison, as well as interesting facts about the artist, some history, and descriptions of mysterious thefts. Images from the book are shown in Figures 12a–c (Museum giftshop clerk, personal communication, 2023). This showcases how the arts are for everyone. Unfortunately, the writers and publisher have no plan to publish this book in other languages, so it remains available only in German.



a.



b.



c.

Figures 12a–c. Cover image and sample pages from *Große Kunst für kleine Kenner: Von Mona Lisas Lächeln bis Andy Warhols Suppendosen* (Great Art for Little Connoisseurs: From Mona Lisa’s Smile to Andy Warhol’s Soup Cans) (2022) by Thäis Vanderheyden. Photos by Cindy Ko.

Recently, I began using photos and videos of international culinary artist and scientist Charles Michel in my lectures. Michel is a chef who studied at the Institut Paul Bocuse in Écully, France, followed by classical training in Michelin-star restaurants in Europe. He was the chef-in-residence at the Department of Experimental Psychology, University of Oxford, in the United Kingdom, from 2013 to 2016. He continues to study gastrophysics,

teaches masterclasses online and in person, and publishes prolifically, including a TED Talk on the future of food and conscious eating (Michel, 2019). In my DEIA classes, I use Michel's videos and photos to discuss human and cultural connections to food (Michel et al., 2015; Velasco et al., 2021). Michel states on his Instagram account, "When food becomes art, our connection to the elements that feeds us becomes sacred" (December 7, 2024). Students are encouraged to consider how and why food and culinary art are, in fact, advocacy, activism, and political. Michel's illustrations and exploration in food arts, coupled with thought-provoking explanations and analogies, enthrall students' imaginations and creativity. Many students would enthusiastically share their own favourite cultural foods, comfort food ideas, or unique spices and ingredients. Prior to the COVID-19 pandemic, one of the options for an assignment in my DEIA course was for students to reflect on experiencing a new cultural cuisine or food item. Students were asked to explore the associations between food, history, and culture, and their relevance in health care. It was a popular and enjoyable assignment for the students.

Anecdotes from Students, Healthcare Educators, and Their Children

My pedagogical goal is to give students a taste of the arts and pique their interest in the hope that they will continue to explore and learn on their own. This section comprises students' reflections and various personal communications through informal conversations with students, colleagues,

and their children, gathered over 12 to 16 months while I was completing this paper. The rationale for including a snapshot and comments from elementary and secondary school students is to emphasize the message that the study of and exposure to the arts should begin early to cultivate students' growth and development of soft skills, emotional growth, sense of wonder and curiosity, appreciation for the arts, awareness of cultural and social issues, and right brain activation (Billings, 2007; Hegel, 1835/1975; Kisida et al., 2018; Winsler et al, 2020). The comments included below are supportive of my assertion:

- An elementary school teacher with over 20 years of experience said the following about the Ontario elementary school system: “[I]n terms of creativity at school, it is up to the school and teacher to an extent. There are curriculum expectations that should be completed, but it does not mean that they are, and every school is different” (A. Ribbles, personal communication, November 28, 2024). Sadly, this suggests that the teaching of art or art making is inconsistent at the elementary level.
- Jasmine, age 9, stated in agreement that they “do art only once a month,” and she likes it because she can “add stuff to it” (personal communication, November 5, 2024).
- Grade 6 student Tyler agreed with Jasmine in terms of being able to add to his work: “I really like when they give you a rough outline and you get to add your own creative twist. But I don’t like when they put

on an art tutorial ... and they all end up looking the same” (personal communication, November 5, 2024).

- It seems that John, grade 9, has an increased opportunity in middle school to experience art making, stating, “In high school, you have to take at least one art credit. That could be visual arts, drama, or music. I am taking music throughout high school. I have always enjoyed art class, and even other teachers try to incorporate art and other creativity into the class. In English, I made some posters and a makerspace project. In science, we can do creative models” (personal communication, November 5, 2024).
- Grade 10 student Molly is an accomplished contemporary dancer from the Niagara area of Canada who has been dancing since she was two years old. I have had the pleasure to attend a few of her performances. She manages school and dance expertly. One of Molly’s achievements includes representing Canada on the Team Canada dance squad in Poland for Show Dance at the International Dance Organization competition in 2022. Molly stated on her website that dance helps her “develop crucial skills and succeed in school.”

At the university level, some reflections from students include the following:

- Student 1: “I’ve never been particularly drawn to art, nor did I fully understand its appeal, but our discussions in class have changed that. Art ... can evoke a range of emotions, from joy to sadness, and

- its meaning often depends on the viewer's perspective. One of the most memorable moments was analyzing works of art that contained multiple images within them. Initially, I could only see one image, but once the other was pointed out, it completely changed my perception. This exercise highlighted how perspective can transform understanding in profound ways" (A. Simpson, personal communication, November 29, 2024).
- Student 2: "I did not realize the impact that art has ... until Dr. Ko showed us a few examples in class. Art is an amazing way to express one's feelings and emotions. I believe that art is so special because it opens up a space for us to explore and share different meanings and perspectives from one piece of work. I am very grateful that Dr. Ko presented us various forms of art to help express key points as well as giving us the opportunity for meaningful learning through the arts. As a dancer, I have been connected to the arts, [but] this course has allowed me to see art in new ways. I love the arts because it can express ideas and concepts that sometimes cannot be captured by using words" (E. Battista, personal communication, November 29, 2024).
 - Student 3: "The exhibits were vulnerable and thought provoking, and it organically inspired deeper consideration in me for what they were communicating. Seeing the lives of others through their eyes is such a beautiful and humanizing experience that I truly loved. I am

excited to establish art as an aspect of my life that speaks to my passions and that encourages me to think differently” (J. Bartlett, personal communication, November 29, 2024).

Costache and Kunny (2019) adamantly underscore the importance of arts and art making in all levels of education internationally. They strongly believe that the arts are pedagogical interventions that could connect people and effectively balance global views across disciplines to promote fruitful student engagement and contribute to their personal and professional development. The authors acknowledge that many medical schools are incorporating arts into their medical humanities curricula, as evidenced by some examples indicated in an earlier section. Costache and Kunny urge decision and policy makers in higher education to align their curricula in all disciplines to include arts as a vital component.

As presented in the literature scan section, medical schools are the only discipline that have historically and consistently included arts and humanities courses. Locally in Ontario, I was able to confirm that it is a gap in other healthcare disciplines such as nursing. For example, electives are not listed on the University of Toronto accelerated two-year Bachelor of Science in Nursing (BScN) program information and academic calendar website. At York University, the four-year direct-entry Nursing program requires students to take two non-nursing electives or general education courses at their discretion, but they must be at the first- or second-year level (L. Seto, personal communication, September 12, 2024). At McMaster University, where

there are three different BScN programs, the Associate Dean of Undergraduate Nursing Programs indicated that their electives “are both nursing and health sciences. Students can choose from these or go outside the Nursing program and take courses in other faculties. ... electives vary from four to five courses” (J. Pierazzo, personal communication, November 26, 2024). At Niagara College, the four-year BScN program that was launched in September 2024, has two electives, and students must choose from another degree program, which excludes diploma programs such as Acting for Film and Digital Media, Photography, Baking and Pastry Arts, Winery and Viticulture, and Horticulture (H. Ordeman, personal communication, November 26, 2024).

Moreover, many scholars discuss the various reasons students do not take arts or humanities electives, some of which are because they are not interested, do not believe they would be helpful to further their careers, are unable to appreciate clinical relevance, are concerned about projects that might lower their GPA, or are frustrated by navigating the administrative red tape required to take courses from other departments (Rezaei et al., 2023, Tusoni et al., 2024; van Woeziek et al., 2023). My informal conversations with many students suggest that they select electives based on the value they may add to their practical knowledge of skills and academic learning, and most feel it might not be a good use of their time, effort, and money to take a course from the Fine Arts department. Some universities, in fact, require students to obtain permission to take arts courses if they are not in the Fine

Arts department. World-renowned Canadian visual artist, Amy Friend, who teaches in the Brock University Department of Visual Arts and is the former Chair, commented that the number of admissions for non-arts students is limited per semester; only the Dean has the authority to override and admit students from other departments (personal communication, October 6, 2024).

These are valid but unjustifiable reasons given that the research and anecdotes overwhelmingly confirm that studying arts and humanities topics enriches students' personal and professional lives (Costache & Kunny, 2019). The Associate Dean of Nursing at Niagara College indicated that she took art history as an elective in her undergraduate years and found that it has made her a much more well-rounded person (C. Evers, personal communication, 2024). A Master of Nursing graduate from McMaster University expressed that she took Greek mythology and winemaking in her undergraduate years to explore different areas of interest, and it was “the best thing” she did because those courses exposed her to different knowledge that she believes has made her a more “well-rounded” nurse (personal communication, 2024).

Perhaps one of the most interesting anecdotes I gathered features former student Chris Riley, who is a psychiatric nurse and well-known Canadian artist based in St. Catharines, Ontario, Canada. Chris insists that he is not known outside his hometown, but he has sold his artwork to an international audience. In class, Chris requested to fulfill an assignment in a painting format (Figure 14). I suppose he asked the right professor! Chris wrote his paper on elements of mental health conditions that could influence

patients and nurses. He painted a melancholy forest with deep red leaves and flower petals hanging from the trees, the red colour of the petals representing hope. On each petal, he used removable sticky notes to write different mental health components. When he presented this to the class, he invited his classmates to add to the petals. The painting is hanging on a wall in my home office. Chris's other exhibited pieces at local galleries also have social justice elements, and not surprisingly, he is a nursing work-life balance advocate and serves as a union representative at the hospital where he works.

Figure 13. Untitled painting by Chris Riley (ca. 2017). Owner Cindy Ko. Photo by Cindy Ko.



Implications for Healthcare Curricula

Healthcare programs are overburdened with clinical and scientifically driven courses, and students tend to choose science-based courses as electives for reasons mentioned earlier. Many authors presented in this paper call on post-secondary education institutions to consider realigning healthcare curricula and eliminating administrative protocols to include and/or offer more arts and humanities courses. Professors may plan to be more intentional in weaving the arts into appropriate lectures or creating self-directed online modules to stimulate interest. Nonetheless, more research is required to measure more objectively the benefits of including the arts in healthcare education; that is, the exact “dose required for an effect” (Mukunda, 2019, p. 6). Researchers also recommend that more precise measurements are required to evaluate more explicitly how the arts are directly linked to enhancing healthcare students’ overall learning in areas such as observation and diagnostic skills, sense of empathy, collaboration and communication skills, well-being and resilience, and diversity sensitivity (Dalia et al., 2020; Moniz et al., 2021; Mukunda, 2019). Furthermore, Moniz et al. advise that additional research is necessary to explore the appropriate types of arts and humanities courses and topics that are best suited for healthcare curricula. More randomized controlled studies are also required to reinforce the rich collection of literature within the last five to 10 years on this topic (Choi et al., 2022; Moniz et al., 2021).

There is also a need to dismantle the narrow-minded notion that ethics, DEIA, and other humanities subjects are “balderdash” and “piffle” based on

opinions and carefree leisurely discussions in class to fill up time because the focus ought to be on the science and clinically relevant courses (Freedman & Hernández-Hernández, 2024). For example, I would advocate vociferously for neurodivergent students in the healthcare fields, arts, and humanities courses, especially those that incorporate activities such as field trips, art making, and expert guest speakers or demonstrators, as these are proven to be beneficial to meet their learning styles and needs (Johnson, 2022; Rieger & Chernomas, 2013; Vasquez, 2022). Emphatically, Hegel (1835/1975) asserts that art is fundamental to a human's capability and ongoing journey to gain self-consciousness; that is, the development of self-awareness and emotional intelligence. Hegel does not view art merely for the sake of artistry and enjoyment, but also to appreciate the perception of the observers. He invites us to question the purpose of the arts that is beyond the intention of the artists. He asserts that the arts are all means and not ends, for they are emotions, aspirations, ideas, lessons, and communication.

Therefore, it is worthwhile for academic leadership in health care to consider viable options to offer students opportunities to explore the arts as part of the curriculum. Healthcare program coordinators may consider collaborating with museum and gallery representatives, and consulting with academic managers from the arts and humanities department to develop partnerships. In institutions where the liability and safety issue for students to travel may be a concern, they may evaluate the potential for a waiver and consent form. Alternatively, since the COVID-19 pandemic, there is no shortage

of online immersive opportunities offered by various galleries and museums around the world, and most have active and informative Instagram accounts and websites that students can follow. Students should be encouraged to participate on their own, perhaps with some incentives such as bonus points, extra credits, or assignment options.

Afterword

Borrowing Costache and Kunny's (2019) idea for an afterword instead of a conclusion, I wholeheartedly believe the end of this paper is, in fact, the beginning because the arts are infinite. An obvious limitation of this paper is my personal bias to promote the integration of arts and humanities topics into healthcare curricula. Notwithstanding, I believe I have identified a gap where medicine is the only discipline that consistently incorporates non-science or medical courses into their programs and reports benefits to students. The antecedents to students' willful engagement in selecting electives in the arts and humanities is an encouraging learning environment and conducive messaging. Indeed, I seek to evoke and provoke healthcare curricula administrators, colleagues, and students to consider the intrinsic value of integrating the arts into the curricula, rather than at the periphery.

Dr. Randy Boyagoda (2024), prolific author, professor of English and Vice-Dean, Undergraduate, in the Faculty of Arts and Sciences, as well as Provostial Advisor on Civil Discourse at the University of Toronto, discussed the purpose of a university on the Canadian Broadcasting Corporation (CBC) Radio show *Ideas*. Boyagoda stated that the role of the university is "to think out

loud together and to stay open to the possibility [that] being wrong is key to a productive discourse.” He called on us to check our assumption and advises the following:

“... our lived experience, well-formed arguments, or even knee-jerk responses are all there is to any given matter. We know what we know... but we don’t necessarily know all that there is that needs to be known. The discipline of being skeptical of the ultimacy of one’s own beliefs, convictions and opinions, while remaining open to other points of view may at times be impossible.”

Hence, the classroom is a place where we can think out loud together to examine the differences in our thinking and beliefs. In an earlier *Ideas* episode titled “The meaning of education,” guest scholars, including Canadian author and physician Dr. Gabor Maté (2024) discussed the Prussian philosopher Wilhelm von Humboldt, who was believed to have created the world’s first formal education system. The German term *Bildung* was also highlighted in this episode to denote the concept of people’s personal and cultural development that could be closely associated with education and philosophy. Von Humboldt believed that everyone should have an opportunity in education to cultivate our human potential. This prompts me to remember an Indigenous student who requested that she be permitted to knit or draw while listening to lectures because it helped her focus and grounded her anxiety. At the time, it created some discussion among my colleagues, who initially viewed it as a distraction, and one thought my approval usurped

others' decisions to prohibit it. In the end, the student's art making during class was not at all a distraction but succeeded in spurring meaningful conversations with her classmates and me about Indigenous arts, heritage, and traditional healing practices.

The healthcare disciplines are focused. I am not arguing for or promoting that the arts be compulsory in the healthcare curricula. Rather, I aim to advocate for some exposure that could make art a part of healthcare programs to support the cultivation of well-rounded practitioners who will embrace the art of sitting with their patients just as they engage in sitting with a beautiful vase or contemplating a painting. I once imagined the vulnerability of an ancient Greek vase sitting on a narrow display stand that could easily fall off and shatter, and so I was reminded of the patients who are on the edge of death and illness, and at the margins of their vulnerability. In paintings and visual arts, the simple complexities of lines and colours can convey so many emotions. In films and performance arts, the brilliantly written dialogues, nonverbal body language, or eye contact could help us appreciate the art of therapeutic communications. A dish that has ingredients from diverse nations or the history of a wine could have cultural and political meanings that teach us about culturally competent care. The arts and humanity are inextricably linked. Just as we are drawn to different people, we can be drawn to a particular piece of artwork. Whether it is the melody of a song, the words on a page, the form of a design, or the shape of architecture,

they are all inherently linked and inspire us to consider the wide spectrum of human life experiences that are above and beyond medical diagnoses.

My hope is that one day, I will not need to slip in art time in my lectures, but instead assign students a day to visit museums and galleries, attend poetry or literature readings at libraries, experience theatre and cinema, watch a ballet, or engage in interactive dining experiences as part of my courses. Ongoing technological advancement means the opportunities and possibilities for integrating the arts across disciplines are endless. I am committed to advocating for healthcare students to engage with and take ownership in arts learning, as well as cultivate and normalize a lifelong appreciation of the arts as part of life. I invite you to join me.

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Appendix A

Permissions for artworks featured in the article.

For the three Picasso works:

From: Marcia Lea <administration@cova-daav.ca>
Sent: Thursday, May 15, 2025 2:09 PM
To: Cindy Ko <cko@brocku.ca>
Subject: RE: estate requires images

Hello Cindy,

I have received an answer from the Picasso administration which I will paste below.

They are willing to approve the use, and I can provide you with a quote for the use, but they will need you to submit a correct layout with improved image quality and the proper credit line. She has included links where you see the images.

The copyright credit line should read:

© Picasso Estate / CARCC Ottawa 2025

The royalty for each image will be \$56.44 per image

Total : \$169.32 plus tax.

Original inquiry sent to the Museu Picasso, Barcelona, Spain. Their associate redirected me to SOCAN, whose representative redirected me to CARCC.

RE: Permission to use photos



SOLE BARDALET, NURIA <nsoleb@bcn.cat>
To: Cindy Ko

Follow up. Start by Friday, April 25, 2025. Due by Friday, April 25, 2025.
You replied to this message on 5/13/2025 10:32 AM.
This message is part of a tracked conversation. Click here to find all related messages or to open the original flagged message.



Tue 4/22/2025 3:33 AM

We couldn't recognize this email as this is the first time you received an email from this sender nsoleb@bcn.cat

Dear Cindy,

Thank you very much for your interest in our collection.

In principle, if the purpose is educational, there should be no problem with you using works by Picasso for your paper. However, unfortunately, the Museu Picasso is not the institution that grants authorization for such use because we are not the owners of the Pablo Picasso's rights.

To obtain the necessary reproduction rights, you should contact SOCAN, the agency that manages Pablo Picasso's copyright in Canada. Here the info:

SOCAN
33 Rue Milton #500
Montréal, QC
CANADA H2X 1V1
Tel. : 514-844-8377
arts@sodrac.com
www.socan.com

Please, do not hesitate to contact me for any further question.

Best regards from Barcelona,

Núria



Núria Solé Bardalet
Arxiu- Centre de Coneixement i Recerca
C/ Montcada, 15-23, 08003 Barcelona
T. +34 93 256 30 47
museupicassobcn.cat

For Albert György's *Melancholie*:

RE: Please grant permission, Dear Mr. Györgi



Albert Gyorgy <gyorgy_albert@hotmail.com>
To: Cindy Ko

You replied to this message on 12/22/2024 11:16 AM.



Sun 12/22/2024 7:24 AM

Hello,

Yes of course, I allow you to use any image you'd like to. Feel free to use the one you want.

Best regards, Albert Gyorgy

De : Cindy Ko <cko@brocku.ca>

Envoyé : samedi, 21 décembre 2024 01:28

À : gyorgy_albert@hotmail.com <gyorgy_albert@hotmail.com>

Objet : Please grant permission, Dear Mr. Györgi

Dear Mr. Györgi, Sir

I am a university professor at Brock University and Niagara College Canada, in Canada. I am writing a paper on arts and healthcare education. I would like to use an image of your sculpture, *Melancholie* (2012). There are many photos of it in Google, so of-course if I could use one from your website, it would be even more lovely.

Would you be able to grant me the permission, please? A simple reply to this email will be great.

Thank you for making the world a better place with your artwork!

Thank you

Sincerely,

Cindy

Esse Quam Videri



We Rise by Lifting Others - Robert Ingersoll

Cindy Ko Ph.D., LL.M., MN., RN.
905-348-3871 (mobile)

For Salvador Dali's *Galatea of the Spheres*:

Re: Permission please



Charalampos Charalampous <charis.charalampous@urv.cat>

To: Cindy Ko; Efhalia Trigoni

You replied to this message on 12/23/2024 3:15 PM.



Sun 12/22/2024 6:15 PM

Dear Dr Ko, dear Cindy, if I may,

Thank you for your kind words! Please, use any material from the chapter as you see fit.

With all good wishes to you and yours,
Charis

From: Cindy Ko <cko@brocku.ca>
Sent: 22 December 2024 17:53
To: Charalampos Charalampous <charis.charalampous@urv.cat>; Efhalia Trigoni <thalia.trigoni@urv.cat>
Subject: Permission please

Hello Dr. Charalampous and Dr. Trigoni,

My name is Cindy Ko. I am a university professor. I teach in the health sciences at Brock University and Niagara College in Canada. I am writing a paper about arts and healthcare education. I would like to use the photo of *Galatea of the Spheres (Salvaor Dali, 1952)*, from your book chapter. Please kindly provide me permission.

The chapter is a fascinating read. Thank you so much.

Charalampous, C., & Trigoni, T. (2020). Surreal Science and Scientific Surrealism: Dalí and the Fundamental Building Blocks of Reality. In *Realisms of the Avant-Garde* (pp. 139-152). Mounon de Gruyter.

Thank you

Wishing you both a peaceful Winter season and a healthy 2025.

Sincerely,

Cindy

Esse Quam Videri



For Chiharu Shiota's work:

AW: Permission to use photos, please



Presse <presse@hauskonstruktiv.ch>

To: Cindy Ko

Follow up. Start by Friday, April 25, 2025. Due by Friday, April 25, 2025.

This message is part of a tracked conversation. Click here to find all related messages or to open the original flagged message.

Translate message to: English | Never translate from: German | Translation preferences



Tue 4/22/2025 8:02 AM

Dear Cindy Ko,

Thank you for your request.

Museum Haus Konstruktiv will gladly allow you to use the pictures for your paper, as long as this is okay with Chiharu Shiota. (If you haven't already asked her permission, you can reach her via office@chiharu-shiota.com or press@chiharu-shiota.com.)

Best regards from Zurich,

Pascal Schlecht

Presse und Kommunikation
Museum Haus Konstruktiv
Limmatstrasse 268
CH-8005 Zürich
Tel direkt +41 44 217 70 99
Tel zentral +41 44 217 70 80

Re: Permission to use images, please



Rosalie <rosalie@chiharu-shiota.com>

To ○ Cindy Ko



 Follow up. Start by Friday, May 16, 2025. Due by Friday, May 16, 2025.

You replied to this message on 5/16/2025 6:40 PM.

If there are problems with how this message is displayed, click here to view it in a web browser.

This message is part of a tracked conversation. Click here to find all related messages or to open the original flagged message.

Dear Cindy,

thank you for your patience. I finally have feedback from Chiharu and she said you are welcome to use your photos for your academic paper.

Please let me know if you need anything else.

Best wishes,

Rosalie

ATELIER CHIHARU SHIOTA

Rosalie Pfleger - Media and Publication

Kühnemann str. 51-69

13409 Berlin

Tel.: +49 30 2797 8584

rosalie@chiharu-shiota.com

www.chiharu-shiota.com

For Alberto Garcia-Alix's photo:

Re: Permission please



Alberto García Alix <info@albertogarciaalix.com>

To ○ Cindy Ko

Cc ○ info@albertogarciaalix.com

 Follow up. Start by Friday, May 9, 2025. Due by Friday, May 9, 2025.

You replied to this message on 5/9/2025 2:17 PM.

If there are problems with how this message is displayed, click here to view it in a web browser.



Autorretrato. Mi lado femenino. 2002 copia.jpg
4 MB

Hello Cindy, I'm Alberto García-Alix. Nice meeting you.

Of course you can use my photograph for your paper, with educational purposes only.

I'm sending attached a high resolution file, jpg format, in case you need it.

Best regards and best wishes,

Alberto

From the Art Gallery of Hamilton:

From: Sloboda, Deborah <sloboda@mcmaster.ca>
Sent: Sunday, April 20, 2025 4:28 PM
To: Cindy Ko <cko@brocku.ca>
Cc: Vanessa Crosbie Ramsay <vanessa@litfilms.com>
Subject: Re: Please give permission to use

Hi Cindy

Thanks for reaching out about your paper.

No problem in recognizing the pieces in your paper - I will just ask that you refer to the work as "...The Art of Creation, a study led by Dr Deborah Sloboda at McMaster University..."

And also acknowledge the Art of Creation participants in the collage as "...By Vanessa Crosbie Ramsay and the Art of Creation participants..."




Best of luck with your manuscript.

Best wishes

Deborah M Sloboda, PhD
Canada Research Chair in Early Origins of Health and Disease
Professor & Associate Chair Research

Dept of Biochemistry & Biomed Sci
Member, Farncombe Family Digestive Health RI
Associate Member, Depts ObsGyn & Pediatrics
1280 Main St West
McMaster University
Hamilton, ON, Canada, L8S 4L8

Re: Please give permission to use

 Vanessa Crosbie Ramsay <vanessa@iiltfilms.com>
To:  Cindy Ko;  Sloboda, Deborah

  Reply  Reply All  Forward  



Mon 4/21/2025 1:43 PM

 Follow up. Start by Monday, April 21, 2025. Due by Monday, April 21, 2025.
You replied to this message on 5/23/2025 2:21 PM.
This message is part of a tracked conversation. [Click here to find all related messages or to open the original flagged message.](#)

Thanks Cindy. From my end, there are a couple requests as well. My artwork is called Happy Accidents (ending with an s, as it's plural) and it was completed in 2022. Instead of referring to the work just as a mobile, perhaps you could say a 'sculptural mixed media mobile' instead. I've attached the wall didactic just so you have all the info.


Thank you! I look forward to reading your paper.
Vanessa

Re: Please provide permission

 Stephen Altena <saltena9@gmail.com>
To:  Cindy Ko

  Reply  Reply All  Forward  

Fri 4/18/2025 8:06 AM

 Follow up. Start by Monday, April 21, 2025. Due by Monday, April 21, 2025.
If there are problems with how this message is displayed, [click here to view it in a web browser.](#)

Hi Cindy!

Thank you for the email.





Yes, you have my permission to include photos of the Garden of Wonder installation.



The flowers were scanned from my original paintings and drawings.


Thank you for your interest in the project.

All the best!

Stephen

 Tobi Bruce <Tobi@artgalleryofhamilton.com>
To:  Cindy Ko;  Andrea Howard;  Melissa Neil

  Reply  Reply All 

 Follow up. Start by Monday, April 21, 2025. Due by Monday, April 21, 2025.
You replied to this message on 4/16/2025 2:45 PM.

Hi Cindy,

I'm aware of Vanessa's work in Art of Creation but what is the Happy Accident work by Stephen Altena? Can you confirm the context of that work?

As long as the Art Gallery of Hamilton is credited along with the correct work titles and artist names, we agree.

Thanks. Tobi

For Cristina García Roderó's work:

Re: Permission to use a Photo, please



Sophia Hadesian <sophia.hadesian@magnumphotos.com>
To: Cindy Ko

Follow up. Start by Friday, April 25, 2025. Due by Friday, April 25, 2025.
You replied to this message on 5/7/2025 10:47 AM.
If there are problems with how this message is displayed, click here to view it in a web browser.



Tue 4/22/2025 1:53 PM

We couldn't recognize this email as this is the first time you received an email from this sender sophia.hadesian@magnumphotos.com

Hi Cindy!

I'd be happy to help with this request. If this paper is only for education purposes and will not be circulated publicly, we can provide you with the high-res file.

Please just be sure to credit the photographer and Magnum Photos.

Best,

Sophia

Sophia Hadesian
Archives & Editorial Licensing Coordinator

Magnum Photos New York
12 W 23rd St
4th Floor
New York, NY 10010
+1 212 929 6000
sophia.hadesian@magnumphotos.com
pro.magnumphotos.com

On Tue, Apr 22, 2025 at 12:43 PM Cindy Ko <ccko@brocku.ca> wrote:

Hello and to whom this may concern,

My name is Cindy Ko. I am a university professor from Canada. I teach at Brock University and Niagara College Canada. I was redirected to you by Ms. Pamela Hernández, *Asistente de Juana de Aizpuru, PA to Juana de Aizpuru* at the *Galeria Juana de Aizpuru*, in Barcelona, Spain.

I'd like to use the photo I took of *Between Heaven & Earth (1995)* by *Cristina Garcia Rodero* for a paper I am writing. I took the photo of *Between Heaven & Earth* while I was at *Galeria Juana de Aizpuru*.

The photo will be used strictly for educational purposes and NOT for commercial use. (I would invite you to please read the abstract below to understand my intentions). It will be published in a Canadian healthcare educational journal only.

The reason I would like to use the photo I took of Ms. Garcia Rodero's photo is because all the photos I included in my paper are taken from my travels as a component of my phenomenological perspective; that is, the act of me (the writer) taking the photos of the artists' work is a part of my embodied lived experience.

Please provide permission – thank you.

From the APA:

Re: Please help answer...



SM Journals Style Expert <SJournalsStyleExpert@apa.org>
To: Cindy Ko

Follow up. Start by Friday, April 25, 2025. Due by Friday, April 25, 2025.
You replied to this message on 4/23/2025 8:06 PM.



Wed 4/23/2025 7:51 PM

We couldn't recognize this email as this is the first time you received an email from this sender SJournalsStyleExpert@apa.org

Hi Cindy,

A photo that you took yourself in your paper, you do not need a release to use. However, I commend you for checking with the artists of the art you took a picture of at the gallery. Also, if the gallery owns the property at the time of your photo, having a release from the gallery should suffice. I do think it is kind of you to provide credit to the artist in your writing.

Hopefully this helps!

Respectfully,
Candace Pierce
APA Style Expert
American Psychological Association

Further to the email response from APA rep, according to APA 7th ed., p. 230 S. 7.30, "If you took a photograph yourself, no citation or copyright attribution is required in the figure note." Also in chapter 12, sections 12.14–12.18 discuss

copyright or attribution of images. Along with the permissions obtained, the images in this paper satisfied the section that speaks to Fair Use on p. 288:

- It is for use in an academic work, and not for profit (e.g., paper for a class, article in a scholarly journal).
- Reproducing the work will not hurt the market or potential market for the original.