



Supporting

The Baltimore Museum of Art has partnered with the Johns Hopkins University School of Medicine to better prepare medical students.

By Susan Witmer Wolffe and Margaret S. Chisolm

Here's what we know: at least 40 years of research tells us that art museum and medical school partnerships can hone medical students' observation and verbal description skills and support growth in empathy, collaboration, tolerance for ambiguity, and appreciation of difference. In a field in which knowledge acquisition is frequently privileged over bedside manner, mastering these competencies is nonetheless necessary for patient-centered treatment. At their core, museum and medical school programs focus on building clinically relevant skills to improve the health and wellbeing of patients.

However, the medical students themselves—who are preparing to serve others in a field with high rates of exhaustion, depression, and anxiety—are too often not centered in these partnerships. They must make quick sense of symptoms in order to diagnose and treat or prevent disease while simultaneously dealing with increasing workloads. To be better doctors and provide more humanized care to their patients, medical students must consider their own wellbeing.

To tackle the crisis of burnout, health professions educators increasingly recognize the role that arts and humanities can play not only in the wellbeing of patients but also in the flourishing of medical students. Visual art, studio art, creative and reflective writing, film, and performing arts are increasingly incorporated into medical education. In fact, in 2017, the Association of American Medical Colleges (AAMC) began an initiative to promote greater integration of these fields in medical education.

In an effort to support this work, the Baltimore Museum of Art (BMA) is one of a group of cultural partners in the Baltimore area working with the Johns Hopkins University School of Medicine (JHUSOM) to prepare medical students to thrive personally and professionally. Over the past five years, the BMA and JHUSOM have partnered to pilot and offer medical students an elective course on human flourishing.

What the Course Entails

In partnership with Dr. Margaret S. Chisolm, Professor of Psychiatry and Behavior Sciences and of Medicine, and Director of the Paul McHugh Program for Human Flourishing at JHUSOM, the BMA has supported an elective for up to 15 third- and fourthyear medical students called "Professional Identity Transformation." The highly interactive four-week, full-time elective has four topics relevant to human flourishing—family, community, work and education, and self-care—each of which is explored for one week and at a different institution each day. Collaborators have included Johns Hopkins University Museums, Walters Art Museum, Cylburn Arboretum, Baltimore Mural Program sites, the American Visionary Art Museum, and more. Themes are introduced weekly at the BMA and investigated through artwork-based exercises that focus on a limited number of objects for an extended period of time. Following each exercise, students participate in a clinical translation debrief in which they reflect on what the activity asked of them and what they found to be personally and clinically relevant.

Facilitated by Chisolm, the course aims to facilitate student reflection on:

- What it means to be human, to be a physician, and to lead a good life (for oneself and one's patients).
- Their sense of self in relation to their family, community, work, and education experiences.
- The ways in which family, community, education, and work experiences offer opportunities



Art Museum-Based Health Professions Education Fellowship, Harvard Macy Institute harvardmacy.org/courses/museum

Ruth Slavin, Ray Williams, and Corinne Zimmermann, Activating the Art Museum: Designing Experiences for the Health Professions, 2023

rowman.com/ISBN/9781538158548/Activating-the-Art-Museum-Designing-Experiences-for-the-Health-**Professions**

Harvard continuing medical education course on visual-thinking strategies

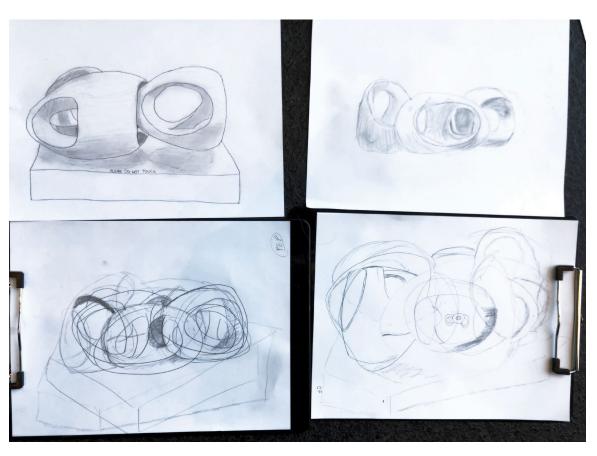
cmecatalog.hms.harvard.edu/training-our-eyes-minds-and-hearts-visual-thinking-strategies-health-careprofessionals

Margaret S. Chisolm, Margot Kelly-Hedrick, and Scott M. Wright, "How Visual Arts-Based Education Can Promote Clinical Excellence," Academic Medicine, 96(8), August 2021

pubmed.ncbi.nlm.nih.gov/33264111/

Ray Williams and Corinne Zimmermann, "Twelve Tips for Starting a Collaboration with an Art Museum," Journal of Medical Humanities, 41(4), 2020

philpapers.org/rec/WILTTF-8



Reflection on the importance of multiple perspectives in clinical work begins with a comparison of student drawings.

for improving their life satisfaction and happiness, physical and mental health, character and virtue, meaning and purpose, and close social relationships.

- The role of the arts and humanities in mastering skills, appreciating multiple perspectives, gaining personal insight, and supporting social advocacy.
- The ways in which the arts and humanities can support self-care and wellbeing.

During the session dedicated to the theme of family, students may take part in a gallery activity in which a group of paintings, sculptures, and furniture are imagined as members of a family unit. Each student selects an artwork and, using assorted materials, creates a gift to support its emotional or physical wellbeing. During the debrief, students are asked to consider both how they assisted their anthropomorphized object in becoming a healthier participant in the family group and what they found personally and clinically relevant.

To explore the topic of community, students may create a shared definition of the term and list their interest groups—cultural, religious, and other. Then follows close looking, sketching, and discussion of D'mba, the "Great Mother" headdress from the Baga peoples of the Guinea coast. Over 4 feet tall and weighing 80 pounds, the massive headdress is understood as a representation of ideal female behavior and comportment and symbolizes specific cultural expectations created by the Baga people. Students return to their affinity group lists and discuss the expectations for proper behavior in each, and who or what enforces those expectations. It is not difficult to recognize the relevance of this exercise for students who are considering their roles in the medical school community.

The work and education theme may be explored through a drawing exercise in which students reflect on the importance of their individual contributions to a whole. Participants position themselves around a sculpture and sketch what they see. The drawings are then placed side by side—their similarities and

differences noted—and studied as parts of a collective understanding. Students then reflect on the relevance of multiple perspectives personally and in their clinical work.

The class may be asked to consider characteristics that make a good physician. For the "Draw What You Hear" exercise, student pairs create a blind drawing, in which one person faces a painting and describes it to their drawing partner, who can't see the artwork or ask clarifying questions. Partners then switch roles and work with a different object. During reflection, participants are asked what their partners did well. High on the list are giving the big picture first and using language that is easily understood and moderately paced. Students are asked how careful word choice and pacing affect what others hear and how these lessons apply to the bedside and life outside medicine.

The final topic of the elective is flourishing, which focuses on personal wellness. The group participates in exercises to slow heartbeat and recenter themselves, activities that can be practiced in a medical setting or elsewhere. While focusing on breath work, the group is given prompts to create mindfulness drawings based on works of art. They also participate in body scans meant to draw awareness to areas of their bodies that hold tension.

The course is evaluated qualitatively, through reflective essays and structured interviews conducted after the course, and quantitatively, in surveys before and after the course that assess its clinical relevance. Results suggest that "Professional Identity Transformation" helps learners: (1) reconnect with individual characteristics and interests that had been neglected during medical education; (2) better appreciate other perspectives; (3) develop identities as physicians; and (4) engage in quiet reflection, renewing their sense of purpose. Students showed statistically significant increases in capacity for wonder and tolerance for ambiguity after the class.

The Future of Museum-Based Medical **Education**

Given the overwhelmingly positive response to the course, in early December 2023, JHU and Chisolm organized "Being Human: Envisioning the Future of Museum-Based Health Professions Education." This

was a JHU-funded international convening of select health professions education leaders that, in partnership with the AAMC and Georgetown University's Center for Innovation and Leadership in Education, sought to expand museum-based learning to humanize health care.

Participants included deans of medical and nursing schools, professors of medicine, chairs of medical departments, clinical professors, deans of medical education, leaders of international medical education organizations, museum education leaders, and more. The agenda featured seven interactive activities including personal response tours, visual thinking strategies discussions, and creating group poems—in five Washington, DC, museums. Participants shared their experiences and discussed the challenges and solutions to integrating museum-based teaching in health professions education.

We know the rewards of museum-based learning to medical students, but how do museums benefit from these partnerships? One answer lies in creating connections with young adults through sustained, multi-session programs that support individual self-expression. In these programs, artworks stand in for human experience as opposed to being objects of study for which one could be penalized for not knowing the correct answer. By providing experiences that foster human flourishing and allow for reflection and decompression away from an often-stressful environment that can be regimented, exacting, and sometimes dehumanizing, we can create positive associations with museums and, in turn, cultivate the next generation of visitors and donors.

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THE IMPORTANCE OF PARTNERING WITH **MUSEUM EDUCATORS**

By Margaret S. Chisolm

The course discussed here began when I was selected to be among a group of 12 international health professions faculty to be design partners in the inaugural year (2019) of the Harvard Macy Institute Art Museum-based Health Professions Education Fellowship. A model of collaboration, the fellowship aims to cultivate health professions faculty expertise in museum-based pedagogical methods, encourage scholarship, and create a community dedicated to museum-based education for health professionals (MBE-HP). All fellows complete a project, which they develop with a local museum partner.

I reached out to two museum educators at the Baltimore Museum of Art actively engaged in gallery teaching. Together we designed a set of experiences for a four-week course to support medical students' flourishing. Planning sessions included gallery visits to consider activities, after which the museum educators developed outlines of possible course sessions. We tried these out with student volunteers who offered feedback before the course debuted in 2022.

Throughout the course, I share my own feedback—as well as students' comments and written reflections with the museum educators, which allows us to improve the course. We have sustained our teaching partnership (most recently with a new course for pre-medical students) and collaborate on peer-reviewed publications about our work in hopes of bringing more visibility to the field of MBE-HP.