

An Informal Description of the Beginning of *The Art of Observation*

It all began with a simple request for a reproduction of a 17th century Dutch painting, *The Doctor's Visit*, by Hendrick Heerschop. Stephanie Brown Clark, an MD, PhD on the URMC faculty in the department of medical humanities, had recently learned about collaboration between a medical school and art gallery and she was intrigued about its possibilities for medical education here. Stephanie first approached the Gallery in the fall of 2002 having read an article in the *Journal of the American Medical Association* about a program at Yale Medical School. Irwin Breverman, a dermatologist at Yale concerned that his residents relied more and more on technology and less and less on their own powers of observation, collaborated with the Yale Center for British Art to engage his residents in more thoughtful/active looking. Breverman noted a 10% improvement of observational skills among the students who participated in this program--a statistic that impressed Dr. Brown Clark.

A flurry of excitement at the Gallery followed Dr. Brown Clark's initial inquiry, and an interdepartmental meeting was convened. The earliest brainstorming sessions included Stephanie Brown Clark, Jules Cohen, a medical student Rachel Kowal, Nancy Norwood and me. Out of these discussions came a new offering in the department of medical humanities: an elective in the 2003 spring term on the Art of Observation--an eight week course that offered alternating sessions at the Gallery and the medical center focusing on observing art one week and observing a patient the next. There were about 14 first-year students in this class. Stephanie coordinated the class, Jules Cohen--a cardiologist on the faculty--was the master clinician, and I coordinated the gallery sessions. I led the four gallery sessions and Nancy Norwood participated in one meeting serving as an expert consultant, in the tradition of inviting a medical specialist for their discerning expertise.

The following fall--October 2003--we offered the next installment of this class--this time to about 14 second-year students. The Gallery and clinical sessions were coordinated thematically in this class. For example, portraits (reading expressions and body language) were paired with psychiatry; signs of aging in works of art, with a visit to Monroe Community Hospital's gerontology division; looking at prints with looking at pathology specimens.

Both these classes have been very enthusiastically received and the anecdotal responses and assessments from the students is that the discipline of thoughtful looking at a work of art has had a direct application to the development of the students' observational skills in clinical settings

What we've developed on MAG's end is a version of the same methodology that we use in helping everyone--from kindergarten students to docents--learn to look. Everything begins with extended looking and a basic inventory of elements in the work. Next is adding description to these inventories--learning to define verbally what is essentially visual. (This initial part goes very slowly because the natural tendency is to jump to conclusions--jumping to "premature closure" as I've learned from medical lingo.) At this point, the process of interpretation begins--and the question that is always asked is, "What evidence do you have that supports that idea/conclusion/diagnosis?" The next stage of the process is to add historical information--more often than not this confirms what was deduced visually. The final part of the process is a period of self-reflection--identifying anything in the work of art that triggered personal reactions that might have colored the viewer's response. The works of art used in this program are carefully selected for their narrative content, many because of an embedded issue that is emotionally charged. Particularly successful for engendering conversations are John Koch's *Interlude*, 1963, with its

subtle references to racial issues; Jerome Myers, *Sunday Morning*, for socio-economic concerns related to early 20th century immigration; Lilly Marin Spencer's *Peeling Onions*, for discussions about the women's issues.

We began the class thinking we were primarily building skills of observation--encouraging seeing greater numbers of details, etc. We came to understand more and more clearly that this process had tremendous power in helping viewers focus on internal issues--developing descriptive skills, honing self-awareness, encouraging self-disclosure in a safe environment. This feature of the process has led to increasing numbers of requests to use this methodology for diversity training. Looking at works of art in small groups is a wonderful way to reinforce diversity of opinion. There is no single truth in understanding a work of art. While the facilitator gently always insists that all statements are backed by evidence, over and over again it is revealed that the same evidence can be interpreted differently. The process also stresses very clearly that no single viewer ever sees it all. One of the program's mantras has become, "We're smarter together." The collective vision is always richer and deeper. "We're smarter together" also applies to the combined MAG/ URMC team. This program has grown enormously over these past two years, in breadth and depth thanks to the combined disciplines of art and medical education, art history and medical humanities.

In addition to the two electives in the Medical Humanities curriculum, over the past two years the MAG/URMC team have hosted all 100 first year students during their initial orientation week, engaging them in an introduction to looking at art as an introduction to looking at patients; led sessions for psychiatry and psychology residents; sessions in understanding diversity and community for pediatric residents; participated in three What's Up, Doc? programs introducing high school students to medicine as a field; hosted a weekend event for the family and friends of medical students; and participated in a summer seminar for high school biology teachers. Recently, in response to growing requests for these experiences, we have begun to train past students in this program and retired physicians to serve as facilitators of the art looking process. What began a little over two years ago as an exploratory project is quickly growing into a program of its own.

Still to be determined are statistics that irrefutably support the significance of this new approach in medical education. But all anecdotal evidence--past students frequently reporting that they *are* seeing more than other classmates in clinical settings--and the growing enthusiasm for this training approach suggests that the art of observation is serving its audience well. And if medical students and young professionals are well served, the ultimate beneficiaries are their patients.

Susan Dodge-Peters Daiss

September, 2004



Support for the Gallery's 2006-07 school programs is provided by Dominion, Bank of America, and the Mary W. Clark Trust. Additional support is provided by Mr. and Mrs. Thomas F. Judson Jr., the estate of Estelle B. Goldman and an anonymous donor for the McPherson Director of Education.

The Art and Observation/Problem-Based Learning
Teacher In-service
February 7, 2007

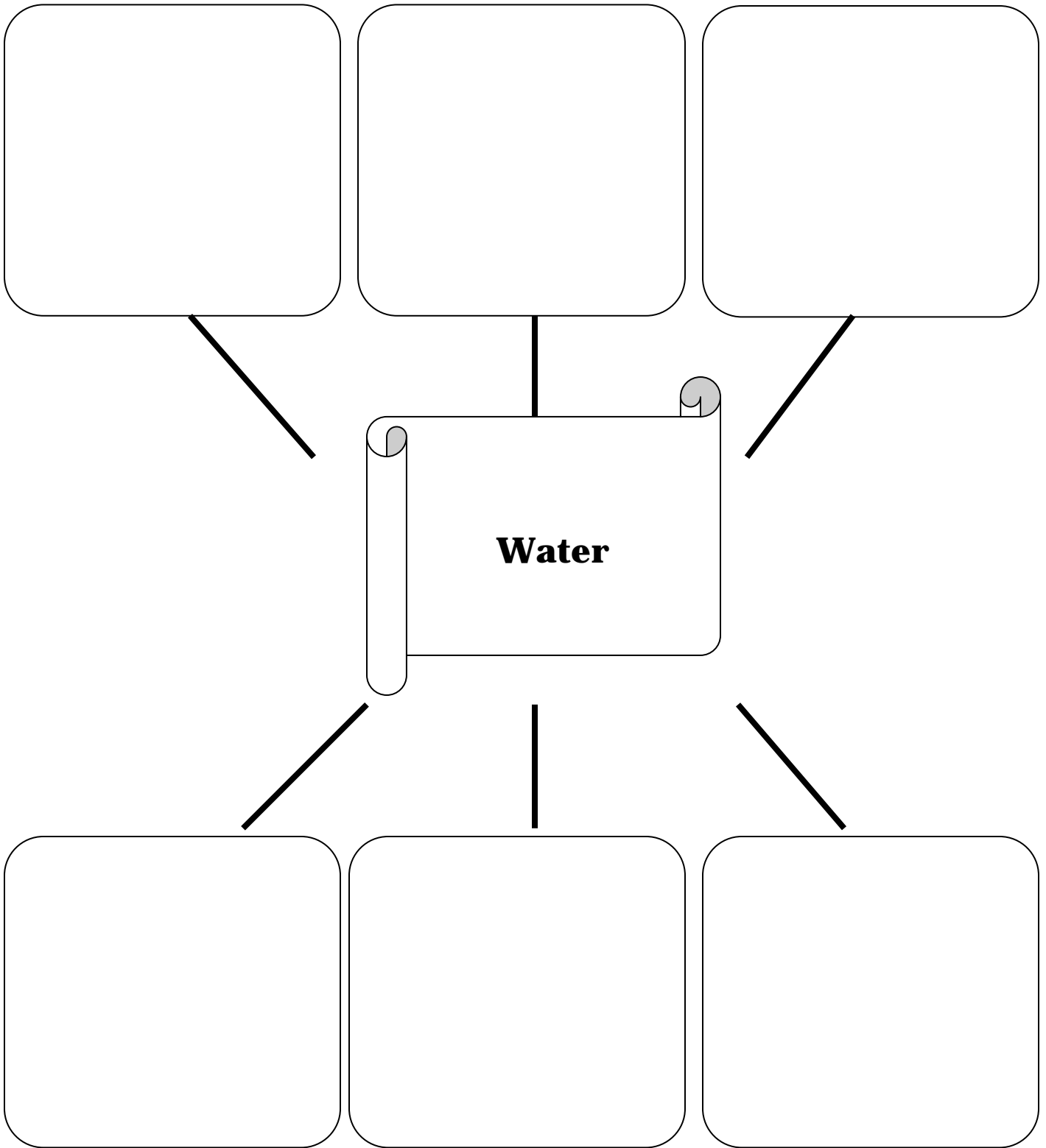
Parallels between Art and Science	Visual Arts	Science as Inquiry
<p>Observation—initial inventory</p> <p><i>What do you see? What more do you see?</i></p>	<p><u>Observe Details</u>—quantitative</p> <p><u>Scan the entire canvas</u>—corners, top/bottom; sculpture—see in the round</p> <p><u>Look for and list</u> colors, lines, shapes, evidence of artist’s hand (brushstrokes, chisel marks, etc.)</p> <p><u>Inventory elements of scene</u>—number of figures, gender, positions, setting, time of day, season, etc.</p>	<p><u>Gather data.</u></p> <p><u>Look</u> for specific details as well as the larger picture.</p> <p><u>Ask questions.</u></p> <p><u>Verify</u> your assumptions.</p>
<p>Description—describe observations.</p>	<p><u>Enrich inventory with descriptive language</u>—add layers of observation</p>	<p><u>Organize information:</u> categorize, sequence, prioritize.</p> <p><u>Clarify and specify</u> your observations.</p> <p><u>Check for accuracy</u> of observation.</p>
<p>Interpretation with internal evidence—what do you think is going on here? As you develop sense of meaning, begin to distinguish significant from insignificant details.</p> <p><i>What is your hypothesis?</i> <i>What evidence do you have for this interpretation?</i></p>	<p><u>Move from observation to possible meaning, using visual evidence to support your interpretation.</u> “I think ….”</p>	<p><u>Use critical and analytical thinking</u> to determine relationships between data and interpretation.</p> <p><u>Devise and examine a variety of rationalizations.</u></p> <p><u>Evaluate your conclusions</u> based upon the collected data.</p>

Parallels between Art and Science	Visual Arts	Science as Inquiry
<p>Integration of external information—what additional information would strengthen your conclusions? Identify questions. Brainstorm possible sources for answers. Identify areas that remain unresolved—problematic details that challenge interpretation. Identify areas beyond current capability for interpretation.</p>	<p><u>Identify questions that can't be answered definitely from simple observation.</u></p> <p>“What historical information would be valuable? How might knowing the date focus my understanding?</p> <p>Do I need to know the actual identity of these individuals? Is identifying the precise setting important?”</p>	<p><u>Compare</u> your conclusions with other sources of information?</p> <p>“What did other people see? What interpretations do they have? What does the label say”</p> <p>What questions still remain? What do I need to do next?</p>
<p>Self-reflection—what does this remind you of? Previous experiences? Professional? Personal?</p>	<p><u>Identify affective connection with this piece—personal and professional.</u></p>	<p><u>Identify any biases or pre-conceived assumptions that might have influenced the inquiry process.</u></p>
<p>Synthesis--Thinking about the experience of looking thoughtfully for an extended period at a single work of art, what conclusions have you drawn? Any outstanding aspect of the experience that stands out in your mind? Any lingering questions? Where might this experience lead you?</p>	<p><u>Final assessment:</u></p>	<p><u>Conclusions:</u></p>

Art and Observation: Do You See What I See?

The Washerwomen, 1886
Leon-Augustin Lhermitte
Collection of Memorial Art Gallery,
37.2

Art and Observation: Do You See What I See?



The Art of Science; the Science of Art
February 7 and March 7, 2007
Teacher Resource Center
Memorial Art Gallery

Resources for the Classroom

Books:

Ars Medica: Art, Medicine and the Human Condition.

Diane R. Karp. Philadelphia, PA: Philadelphia Museum of Art, 1985.

Art of Healing: Medicine and Science in American Art

William H. Gerds. Birmingham, AL: Birmingham Museum of Art, 1981

In the Name of Art, in the Name of Science: Considerations of Conservation

Nancy Menty. Toronto: Art Gallery of Ontario, 1992.

Leonardo on the Human Body.

Leonardo da Vinci, translation and introduction by Charles O'Malley.

New York: Dover Publications, Inc., 1983.

Moon Journals: Writing, Art and Inquiry through Focused Nature Study.

Joni Chancer. Portsmouth, NH: Heinemann, 1997.

Science Within Art.

Lynette Rhodes. Cleveland, OH: Cleveland Museum of Art. Bloomington, IN: Indiana University Press, 1980.

72 pages organized by Life Sciences and the Material Sciences

The Visible World: Observation in Art and Science.

Education Department, Los Angeles County Museum of Art, April, 1999.

Teacher materials from an Evening for Educators.

Books for Young People:

Art and Technology Through the Ages.

Paul Wilkinson and Jacqueline Dineen. New York: Chelsea House Publishers, 1994.

Art Fraud Detective Spot the Difference, Solve the Crime.

Anna Nilson. New York: Kingfisher, 2000.

Art of Science: Pop-up Adventure in Art.

Jay Young. Cambridge, MA; Candlewick Press, 1999.

The Color of Nature.

Pat Murphy and Paul Doherty. San Francisco, CA: Chronicle Books, 1996.

Joseph Cornell Secrets in a Box.

Alison Baverstock. Munich; New York: Prestel, 2003

The Joy of Art: A Creative Guide for Beginning Painters.

Serge Clement and Marina Kamena. New York: Harry N. Abrams, Inc., Publishers, 2000.

Making Books that Fly, Fold, Wrap, Hide, Pop Up, Twist & Turn.

Gwen Diehn. New York: Lark Books, 1998.

Pocket Paper Engineer: How to Make Pop-Ups Step-by-Step.

Carol Barton. Glen Echo, MD: Popular Kinetics Press, 2005.

What It Feels Like to be a Building.

Forrest Wilson. Washington, D.C.: The Preservation Press, 1988.

Why Design? Activities and Projects from the National Building Museum.

Anna Slafer and Kevin Cahill. Chicago, IL: Chicago Review Press, Inc., 1995.

Posters:

Interdisciplinary Connections: Art and Science, Natural Environments.

Aspen, CO: Crystal Productions, 1999.

Take 5 art reproductions and teacher guide

Videotape:

Art + Science = Conservation

Department of Education Resources. Washington, D.C.: National Gallery of Art, 2001.

19 minute Videotape