

# CREATE | DISPLAY

## AN INNOVATIVE ARTS IN MEDICINE PROGRAM

BY BECKY DEKAY, MBA

As we all know, a cancer diagnosis and its subsequent treatment takes a heavy toll on the individual with cancer and his or her family. This is especially true of patients receiving infused chemotherapy. Accordingly, those of us who work at a community cancer center seek to provide comfort and support to patients and their families. Creation of a “healing environment” can provide comfort through the use of nature, for example, with a meditation garden or an indoor water feature; through music, perhaps with a soothing pianist outside the waiting area; or through integrative therapies such as a seated massage. Many community cancer centers use art to improve the patient experience. For patients receiving cancer treatment at Feist-Weiller Cancer Center, our Arts in Medicine (AIM) Program is one tool we use to “brighten” the lives of our patients.

Developed in 2002, our AIM Program is led by spouses of faculty members and community volunteers. This unique art program offers patients who wish to work with a palette of color and a paintbrush the opportunity to paint or create a piece of wearable art while they receive IV chemotherapy or other treatment(s). Now part of our Integrative Oncology Program, our Arts in Medicine Program has produced more than 200 works of art by adults and 100 works of art by children in the St. Jude Children’s Research Hospital Domestic Affiliate Program at Feist-Weiller Cancer Center.

### Art for All

Cancer patients receiving treatment in both the inpatient unit and outpatient clinic setting have the opportunity to recreate works of art by the Grand Masters, such as Van Gogh, Matisse, O’Keefe, and others—including contemporary art-

ists. And because individuals being treated for cancer do not need a critique of their artistic talent, our AIM Program makes it easy for anyone to create a work of art—regardless of skill level.

The process is simple. An AIM volunteer will approach the patient while he or she is receiving treatment. The volunteer will show the patient a copy of the piece of artwork the coordinating artist, Darlene Whitaker, has chosen to work on that day and ask if he or she would like to participate in this activity. Previously, the coordinating artist has sketched the work of art across multiple grids (canvases). One challenge: finding paintings in the public domain that, when sketched into grids, will have “activity” in each panel. It’s important to select paintings that incorporate vibrant colors that help lift the spirits of patients. Once painted, all of the grids will be assembled into a single art display.

If the patient wants to create an original artwork instead, the coordinating artist can also sketch this onto a single grid. These individual paintings may be taken home by the patient.

The AIM Program volunteers deliver individual grid(s), paints, brushes, and other necessary supplies to patients and, occasionally, caregivers. Participants paint while they receive chemotherapy or while they are hospitalized for cancer treatments. Volunteers are careful to tell patients

# HEAL

that they cannot ruin a grid. In fact, the use of different colors or less than perfect lines simply adds to the charm of the finished piece. And because patients paint “by numbers” on the grids, whatever they paint blends beautifully into the larger finished piece. Most cancer patients can finish a grid in a two- to three-hour session.

With all the grids painted, the coordinating artist assembles the entire work on foam core. The completed work of art is matted and framed—along with a plaque listing the names of the participants.

Completed paintings are displayed in the hallways, clinics, and lobbies of the Feist-Weiller Cancer Center, the Hematology and Oncology Unit, and the Oncology and Bone Marrow Transplantation Units at LSU Health Shreveport, where they are viewed by patients, friends and families, staff, and the general public. Participants are particularly proud to have their names on the plaques attached to each work of art. In addition, our staff reports that the artwork display fosters a sense of camaraderie and belonging, allowing patients to know that they are not alone in this journey. Some works of art have been purchased by patients and family members; occasionally a hospice patient will request a particular painting that provided them comfort while receiving curative treatment.

Finally, each participant in the AIM Program receives by mail an 8x10-inch color copy of their “painting.” This packet also includes a description of the piece of art and a brief history of the artist.

Because some patients find it hard to put their brushes down, our AIM Program also offers individual grids that patients can paint by themselves. Patients choose their colors and take the paints and grid home to complete, frame, or display on their refrigerator (we affix a magnet to the back of the grids). Among the take-home grid options are a variety of fleur-de-lis patterns and Mardi Gras masks.

Most recently, our AIM Program volunteers have begun to collect large buttons from patients and staff members. By adding sparkling beads, colorful gemstones, and a loop or pin, the button is transformed into a piece of wearable art. We’ve found these buttons to be especially popular with can-

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cer patients during the holiday season as they make good gifts for friends and family.

Anecdotally, our staff has heard from patients and families that the opportunity to paint or create a work of art can reduce stress and provide a new dimension of comfort while they receive treatment.

## Funding the AIM Program

Our AIM Program would not work without our volunteers, who typically work for a three-hour session once a month. Scheduling of the AIM Program activities varies each month to coordinate with volunteer schedules. Our AIM Program volunteers are often the only non-medical persons the cancer patients see during their treatments. This group of long-time volunteers allows us to keep program expenses to a minimum.

In addition to our dedicated volunteers, we employ a part-time AIM coordinator (the coordinating artist) who works 15 hours per week on the Arts in Medicine Program. Today, this coordinator also works with a growing number of middle school and high school students who sketch simple projects off-site for our cancer patients.

Supply budget for the AIM Program is less than \$10,000 a year. This includes paints, brushes, illustration boards, foam core, framing with matting and Plexiglas, and miscellaneous expenses.

Feist-Weiller Cancer Center has a 10-year history of acquiring grants and community support to pay for its Arts in Medicine Program, including grants from the Shreveport Regional Arts Council with funding from the City of Shreveport and the Louisiana Division of the Arts. The Junior League of Shreveport and Bossier City is sponsoring the Alphabet Alley in LSU Children’s Hospital (see “Growing the Program,” on page 36). The Jo Jane Ladymon Children’s Art Program was



# THE VOLUNTEER PERSPECTIVE



One long-time volunteer tells a story of a patient who came in for treatment with a frown on his face and who scowled when first asked if he was interested in participating in the AIM Program. Undeterred, the volunteer showed him the painting another patient was working on. Her eight years of volunteer experience with the AIM Program helped her to recognize that the patient was a bit overwhelmed by the detail on the individual grids. So instead she gave the patient a simple fleur-de-lis and a few paint colors from which to choose. The patient first selected black. After leaving him alone for several minutes, the volunteer asked the patient if he wanted to use any other colors. He chose purple. About 30 minutes later, the patient waved his arm for the basket of paint colors. This time he chose bright lime and magenta. With words of praise from the nurses, other patients, and the AIM Program volunteer, the patient left with a bright and cheerful work of art.

In the volunteer's own words: "I didn't change his life, disease, prognosis, or pain, but that patient came in with a frown and left with a smile. And that made my day. I give so little, and I get so much. That's why I'm an Arts in Medicine volunteer."

established to ensure the continuation of the AIM Program in the St. Jude Clinic through memorials made in the benefactor's name.

Grant funds are used to pay the contract part-time artist, to purchase some supplies, and to cover the cost of framing the artwork and engraving the plaques.

Another revenue source is the artwork itself. Paintings are available for sale after they have been displayed at Feist-Weiller Cancer Center for a minimum of six months. We typically sell two or three paintings each year.

Our Arts in Medicine Program has helped us reduce the stress of our cancer patients by offering a brief respite from treatment-related concerns and challenges. An unexpected bonus of the AIM Program has been the beautiful artwork our volunteers, staff, and patients have created. Perhaps the best part of the program, however, is the joy on a patient's face when he or she proudly points to his or her painting. Create, display, heal. These words have become the very foundation of our Arts in Medicine Program.

## Growing the Program

When the AIM Program was first taken into the children's treatment area, the first pieces of art created were cartoon characters that all children love—Cookie Monster, Big Bird, Cinderella, Scooby Doo, along with a wide range of fun, childish art. More recently in the St. Jude Clinic, an artist will sketch a portrait of the child. The child then chooses his or her own colors to paint the portrait.

Our "Wall of Fame" in the pediatric clinic now features these amazing portraits of smiling faces and hair of all different colors—white, black, green, purple, and so on. Enjoying their turn as a "celebrity," the children are always excited to have their pictures hung and admired by other patients, family members, and staff.

The next project for our pediatric cancer patients will be for them to paint a series of the alphabet and a corresponding medical word. For example, H is for Hospital, or X is for X-ray. The 16x20-inch canvases will be displayed at LSU Children's Hospital in the pediatric rehabilitation department. Staff will use the pieces of art to inform and educate the children: *Let's walk to the letter "I" which stands for the IV that holds your medicine.* 📺

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## References

1. Nainis N, Paice JA, Ratner J, Wirth JH, et al. Relieving symptoms in cancer: innovative use of art therapy. *J Pain & Symptom Management*. 2006;31(2):162-169.
2. Wood MJM, Molassiotis A, Payne S. What research evidence is there for the use of art therapy in the management of symptoms in adults with cancer? A systematic review. *Psycho-Oncology*. 2011;20(2):135-145.

# ART'S IMPACT ON CANCER PATIENTS

Cancer patients are often hospitalized for long stays or spend long days as outpatients in the chemotherapy clinic. All too frequently these patients are sapped of energy, in pain, and depressed by their illnesses. Our cancer program staff has noted that these symptoms are often lessened or even alleviated by participation in the AIM Program. During the 10 years our AIM Program has been in operation, we have found that patients who immerse themselves in a creative activity seem more hopeful and happy and report feeling better and having less pain.

The literature also supports the benefits of art therapy for cancer patients. For example, one study published in the *Journal of Pain and Symptom Management* found that art therapy can reduce a broad spectrum of symptoms related to pain and anxiety in cancer patients.<sup>1</sup> According to Judith Paice, PhD, RN, director of the Cancer Pain Program at Northwestern Memorial Hospital and one of the study authors—“Art therapy provides a distraction that allows patients to focus on something positive instead of their health for a time, and it also gives patients something they can control.”<sup>1</sup> The most surprising study finding: patients participating in art therapy reported a reduction in fatigue (tiredness). In fact, cancer patients reported significant reductions in

eight of nine symptoms measured by the Edmonton Symptom Assessment Scale (ESAS) after spending an hour working on art projects of their choice.

Wood and colleagues conducted a systematic review on the use of art to manage symptoms of adult cancer patients.<sup>2</sup> Their findings demonstrated that: “Art therapy is a psychotherapeutic approach being used by adults with cancer to manage a spectrum of treatment-related symptoms and facilitate the process of psychological readjustment to the loss, change, and uncertainty characteristic of cancer survivorship.”<sup>2</sup>

## The Patient's Perspective

Prior to our AIM Program, many cancer patients had either never held a paint brush or had very little experience with art. These patients, in particular, enjoy the AIM Program's guided introduction into the world of painting and creativity. In the words of a patient who participated in the Arts in Medicine Program, the benefits are numerous:

*With much trepidation I entered the front door of Feist-Weiller Cancer Center for my first visit. I'd been stunned by my diagnosis and remained virtually numb to everything around me. I wondered if I could actually make it through the maze of paperwork and people to get to the doctor without my daughter's help. Making my way to the receptionist desk, I stopped dead in my tracks to take in the beauty of the paintings before me. I lingered for a brief moment of delight, and then went about the serious business at hand.*

*As I waited on the second floor, I noticed more paintings displayed up and down the hall. I thought to myself: “Is this an art gallery or a medical clinic?” I glanced at each one as I walked down the hall to the dreaded doctor's visit.*

*I told my daughter about the fabulous paintings hanging throughout the cancer center, so when she came with me on my second visit, we took time to study and enjoy each one. To my complete surprise, I could see that they were not painted by professional artists, but instead were done by patients in the Arts in Medicine Program.*

*I now participate in the program in a small way. I find that as I paint I am removed from the world of worry, sadness, pain, cancer, chemotherapy, needles, and more, and transported to a world of bright colors and pleasure. This program has inspired me to paint again. My favorite subject is sunflowers—the happiest flower. The process is bringing me much joy as I go through the most difficult of times.*

