

Art Therapy with Interactive Viewing Will Bring Empathy Leading to Health and Care

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Abstract

Integrative medicine (IM) has attracted worldwide attention in recent years. From the perspective of art therapy, there will be some changes in art in hospitals, medicine, medical practice and medical education. Authors have developed art in hospitals using masking tapes. Originally, hospitals and museums have a lot in common. There is professional in the museum, a curator which is from the Latin word curare, meaning care. Through interactive viewing, natural empathy would be obtained for the feelings and thinking of other people. Empathy would be a high-level “caring” in the clinical setting associated with stable logic and objectivity

Keywords: Integrative Medicine Japan (IMJ); Art therapy; Art in hospitals; Interactive viewing; Empathy

Commentary

Integrative medicine (IM) has attracted worldwide attention in recent years. It is an area that combines the strengths of Western Medicine (WM) and Complementary and Alternative Medicine (CAM). Their practice range has been rather wide, and several factors are included such as music therapy (MT), art, and so on. The authors have continued to develop some components of IM as Shikoku island division of Integrative Medicine Japan (IMJ) [1]. One of them is music therapy [2]. Formerly, the author had taken the role of the chairman of 9th Annual Congress of Japan Music Therapy Association (JMTA). The activity of MT includes various sessions for several subjects, such as elderly healthy people, patients with dementia, malignant disease, handicapped, intellectual disabilities and others [3]. In these situations, we have given some lectures about how to take most advantages of IM and MT for daily life [4]. The other is related to art, where we have continued the activities of art in hospitals. At first, we held the art works at Tokushima University Hospital, which has the longest history of University hospital in Shikoku Island [5]. The works have been made using masking tapes with various design and colors [6]. Subsequently, these activities have been developed in other hospitals. In this paper, we will describe some topics from the perspective of art in IM. From the perspective of art, there will be some changes in art in hospitals, medicine, medical practice and medical education [7]. The interactive appreciation will strengthen the sensibility. Consequently, the ability to “observe” various matters is developed. In recent years, art in hospitals, art education, and interactive appreciation have been in focus for the IM field.

The question of art education with the predominantly knowledgeable aspect was raised. On the other hand, a method of interactive appreciation was developed in the New York Museum of Modern Art (MoMA) in the 1980s [8]. The content is an appreciation method, where a person can feel new awareness by interacting with each other. In recent years, there have been not only emphasis on knowledge, but also sensitivity training in recent years in medical education. These are often conducted for the purpose of improving observation ability and verbalization ability that tended to be overlooked so far. Originally, hospitals and museums have a lot in common [9]. In human beings, the existence of the physical body is exposed as it is, or it is impressively transformed. From a mental point of view, they include the treasure trove of emotions in all patterns, and the specific place where love and suffering are visualized, and life and death exist next to each other. There are professionals in the museum who are in charge of planning, organizing, and managing the exhibition. The

occupation has been called a curator [10]. Formerly, there was the Latin word *curare*, that means to care. During the Middle Ages in Europe, curators were the profession of clergy giving a spiritual care or charge. The curator has been a custodian of a museum collection for long throughout the 20th century [11]. The depth of the relationship between art and medicine, especially human-centered medicine, has been suggested from this. In other words, medicine and art, which treat “people” from various perspectives, have a various matters and points in common.

When people can appreciate art works, it is rather believed that knowledge and information would be necessary such as the history and techniques [12]. However, as science advances day by day, the knowledge and information about art has been updated daily. Therefore, if you look at the work only on the basis of previous knowledge, the judgment will be changed with misunderstandings as times go by [13]. Once we have some knowledge, we conventionally tend to understand the work, but such judgement seems to be inadequate. On the other hand, in the interactive appreciation method, people at first carefully examine the work in detail with their own eyes [14]. Then they think about what they have noticed and the questions. Furthermore, they will share the meaning with other people and work together to generate the meaning of the work. Repeat the above routine process, including the following.

- A. **See:** Pay attention to every corner.
- B. **Think:** Value intuition and at the same time look for the basis for your thoughts.
- C. **Speak:** Communicate to others with accurate words about discoveries and questions.
- D. **Listen:** Listen and speculate what the person is trying to say.

In mathematics and physics, there is one correct answer to a problem. However, there are often no fixed answers to a given problem in the medical field. In such cases, the process is important. In other words, there are countless correct answers because there are countless kinds of problems [15]. We can only answer one matter when we look at only one aspect. Out of all the aspects, we should know what is the question now being asked, and what are the questions not being asked now. Thus, we need the ability to articulate where and when we exist at present. Such a perspective can be learned through the experience of interactive appreciation. If various perspectives are present through interactive viewing, natural empathy would be obtained for the feelings and thinking of other people. However, “empathy” does not mean simply sympathizing with the feelings of the other person. It is important to understand and trace the cognitive framework and process of the person just in front of you. When a person becomes more conscious of empathy, one can obtain experiential approach to adequate design, who had created healthcare environments [16]. Appreciating a work is a dialogue with oneself. Even if we feel that

an artwork is beautiful, the artwork itself is not beautiful. In fact, it is our own values in our heart that recognize the artwork beautiful [17]. It is indispensable to analyze one’s feelings when appreciating an artwork, calmly, objectively and logically. By continuing this process, one will develop metacognitive ability and further improve one’s empathy [18]. What is empathy in the clinical setting? It is a high-level “caring” to imagine and feel close to the patient’s feelings in front of them [19]. At the same time, the feeling would be maintained with stable logic and objectivity.

In summary, IM has been applied to several occasions, and the involvement of art was discussed in this article. For art therapy, art in hospitals will be spread in various situations for future. By utilizing mutual communications, it is expected to contribute to the maintenance and promotion of people’s health.

References

1. Nakanishi A, Bando H (2019) Development of health resort casino system in integrative medicine. *Int J Conf Proc* 1(5): 1-3.
2. Yoshioka A, Nishikiori Y, Bando H (2020) Music therapy session with various elements for clinical effects and comfortable mood. *Biomed Sci J* 1(1): 1-5.
3. Nishikiori Y, Bando H, Yoshioka A, Fujita M, Kusaka Y, et al. (2020) Trials of Additional Effective Movements for Music Therapy Session for the Elderly. *Curr Res Complement Altern Med* 3(1): 1-2.
4. Bando H, Yoshioka A, Nishikiori Yu (2020) Future research direction from the perspective of music therapy. *Art Human Open Acc J* 4(2): 54-56.
5. Tanaka K, Nagahiro S, Bando H (2020) Beneficial art in hospitals with masking tape initiated from university hospital. *Biomed Clin Case Rep* 3(3): 186-190.
6. Kamoi company: Masking tape (MT), Japan.
7. Waller D (2014) *Group interactive art therapy: Its use in training and treatment*. (2nd edn). Routledge, London, UK.
8. Graves JA (2017) Education, administration, and class struggle at the museum of modern art, 1937-1969. *Studies in Art Education* 58(1): 17-27.
9. Chatterjee H, G Noble G (2016) *Museums, health and well-being*. Routledge publishing, London, UK.
10. Arnold K (2018) Houses for the Curious. *Museum Worlds* 6(1): 17-31.
11. Muir J (2017) Curator as lead artist. Emily carr university of art and design. A thesis support paper submitted in partial fulfillments of the requirements for the degree of master of fine arts in visual arts. Emily Carr University.
12. Wald HS, McFarland J, Markovina I (2019) Medical humanities in medical education and practice, *Medical Teacher* 41(5): 492-496.
13. Orr AR, Moghbeli N, Swain A, Bassett B, Niepold S, et al. (2019) The fostering resilience through art in medical education (FRAME) workshop: A partnership with the Philadelphia museum of art. *Advances in Medical Education and Practice* 10: 361-369.
14. Wang F (2020) Art in Medicine: A powerful aid to modern medical education. Brigham Young University Scholars Archive, pp. 1-14.
15. Chappell KB, Sherman L, Barnett SD (2018) An interactive faculty development workshop designed to improve knowledge, skills

- (competence), attitudes, and practice in interprofessional continuing education. *Medical Teacher* 40(9): 896-903.
16. Gilfilen CC, Portillo M (2015) Designing with empathy: Humanizing narratives for inspired healthcare experiences: *HERD* 9(2): 130-146.
17. Spicer L (2018) Exploring the relationship between alexithymia and empathy: The role of emotion recognition and metacognitive ability. University of Tasmania.
18. Bonvils KA (2015) The roles of emotion regulation and metacognition in performance-based empathy. Faculty of Purdue University.
19. Hojat M (2016) Empathy in health professions education and patient care. Springer International Publishing, Switzerland.

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