#### Painting Collections in Hospitals: Humanity in Medicine

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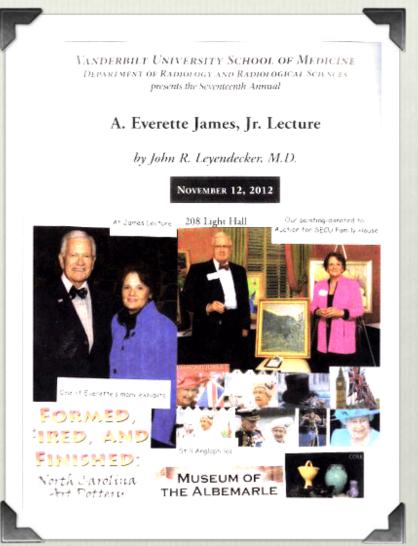
Vanderbilt University, Nashville

University of North Carolina, Chapel Hill

Collectionneur d'art

Philanthrope Romancier etc...





# Dr. Everette James & Dr. Nancy Farmer



- In this era of managed care, physicians, regulators, and patients have become concerned about the total quality of medical care delivery.
- \* Any determination of quality entails certain assumptions, and an assessment of the healthcare environment itself should be an important part of the evaluation.

- Healthcare facilities are often our most impressive, contemporary architectural structures. Massive healthcare edifices of bricks and mortar are often characterized as austere and foreboding, rather than pleasant and comforting.
- \* Inside these walls, healthcare is often provided by a nameless and impersonal "team" who may be almost totally absorbed with the technology and science of medicine, rather than its humanity.
- ❖ Patients and their families may be awed and bewildered by this environment. Our attempts to nurture as physicians can be compromised by the impersonal place in which we dispense our healing.

- ❖ Visual stimuli are very important to this analysis and much of our assessment of an environment is based upon perception. Patients decide upon their level of satisfaction with their medical care based upon their opinion of their physician's caring attitude, their assessment of the health delivery "team," and the ambiance of the environment.
- \* An art collection in a medical facility can make a significant contribution to the perception of the humanity of the experience.

- ❖ Most hospital walls are lined with nondescript art and decorations. This often reflects the inclinations and tastes of a non-physician decorator or committee that has created something sterile in an attempt to "color coordinate."
- \* The use of fine art can contribute to the nurturing of the healing process. Medicine is in an era of declining financial resources and heightened complexity, yet we must not neglect the ministry of care.
- \* Art collections in hospitals can be an important part of this humanitarian effort and have financial or commercial value as well.

- \* There may be initial objections to, and rejection of, an arts program for your hospital since fine art is viewed by some as elitist.
- ❖ Fine art is also of monetary value and somewhat fragile; thus it must be insured and some measure of security may be necessary in its display. However, these objections should not be insurmountable if one has endured the rigors of medical training, the intricacies of practice, or complexity of medical administration.
- \* The challenges will prove much less formidable if one is committed to the project and seeks advice from the experienced.

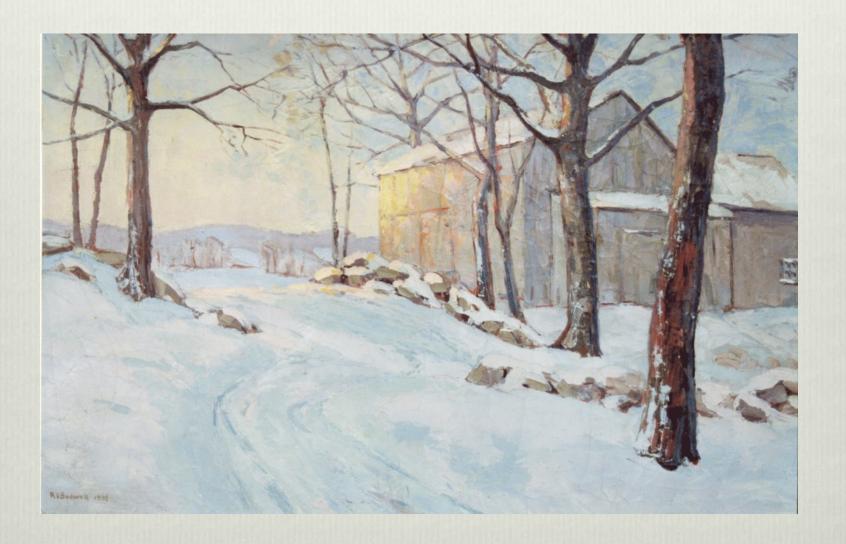
There are a number of methods that have been employed successfully to acquire and place painting collections in hospitals. For example, many hospitals have cultural enrichment programs, often including the performing and decorative arts. The hospital budgets for these programs can be supplemented by private and corporate donations, but the monies to initiate a collection should come from designated institutional funds. In fact, it is much easier to secure outside "gifts in kind" or monetary donations if there is tangible evidence of the facilities' support. Often the director of cultural affairs is the most logical and effective chairperson for the funding effort, but someone from the hospital development office should also be involved.

The gathering of the art collection should be a continuous process, and an acquisition committee or an art committee is essential for solicitation and quality assurance. The committee will serve several important functions. It will allow discussion between relevant parties regarding the type and purpose of the hospital's painting collection. A committee will also provide a balance of personal tastes. Just as our patient populations are diverse, the group accepting paintings should have diverse representation. The committee will also be helpful in the acquisition process and in refusing the offer of a potential donor. Rejections of inappropriate offerings should be depersonalized as much as practical. You should never accept a painting unless you intend to display it in a public place in the hospital. Donors, just like patients, have expectations and they anticipate that donated art will be displayed.

Another method of painting acquisition is to have a painting given to honor someone (e.g. a physician, founder, or benefactor), or given by the relatives of a former patient in appreciation for the care provided by the hospital. A hospital may be offered an entire collection of paintings, which provides an excellent opportunity to acquire a tangible asset. The gift will enhance the hospital's image as an environment where patients and their families can be healed and can increase employee pride. The donation of a collection of works may represent the opportunity to create an expression of gratitude. Designated spaces in the medical facility for the collection and the use of plaques to identify the donor and the honoree are effective in increasing patient awareness, acceptance by the medical staff, and donor satisfaction.

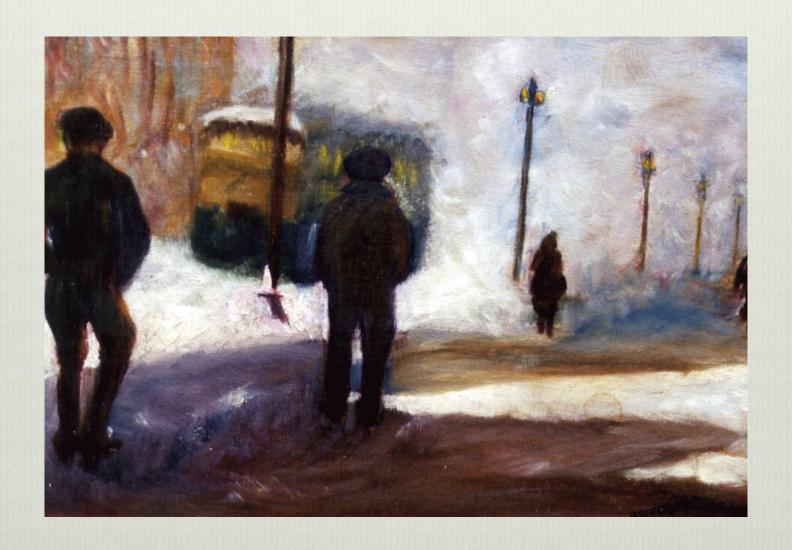
- \* Memberships in named institutional societies are increasingly common as a method of recognizing hospital benefactors and the use of paintings as "gifts in kind" can be encouraged to obtain membership in these organizations.
- Since these groups have value thresholds of giving for entry, monetary value can be used as one parameter to assure the quality of the paintings accepted. For donors, this might be an opportunity to donate a painting that has increased in value and obtain tax advantages.
- \* Hospital development offices can assist donors in realizing the full benefits of their largess.

- ❖ Decorating hospitals with fine paintings will assist in personalizing the medical experience for patients and their families.
- ❖ A patient's hospital experience may be inherently traumatic, but an appropriate environment can create the perception that the institution cares. As providers, we are very aware of the rapid and dramatic changes in the delivery of healthcare. Despite these changes, the perception of caring must remain.
- **❖** Visual evidence of this humanity can be demonstrated by pleasant images provided by paintings in our health care institutions.



# Frank Barney





# Donation to the University of North Carolina at Chapel Hill



# Donation to the Vanderbilt University

#### THE JAMES COLLECTION

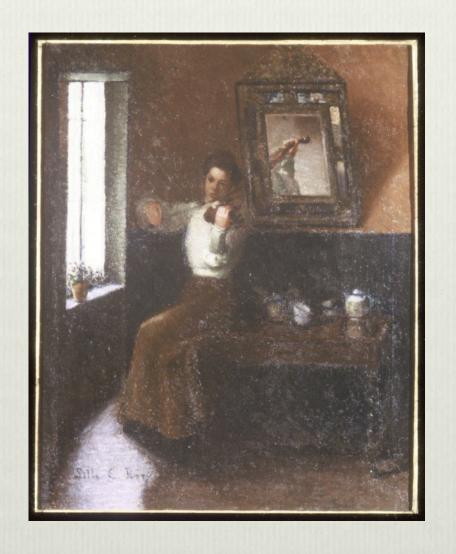


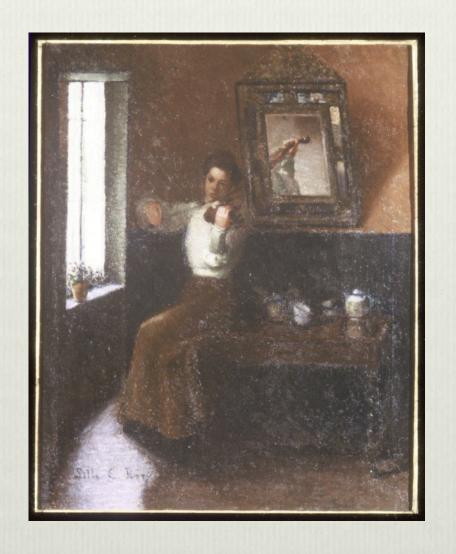
VANDERBILT UNIVERSITY MEDICAL CENTER

#### Mike Bennett

Self-taught African-American artist







## Gavel for auctions



# Mécénat d'art et hôpital en France

Jean-François Moreau

#### Pr Denys Pellerin Enfants-Malades

Tour de la Clinique Chirurgicale Infantile enrobant l'escalier de secours.

Peinture murale de l'artiste newyorkais underground

Keith Allen Haring (1958-1990)

recommandé par Michèle Barzach, ministre de la Santé dont il fut le conseiller



#### Denys Pellerin et John Feight







### Denys Pellerin et John Feight



Founder of The Foundation for Hospital Art, Inc, a non-profit organization he started in 1984.



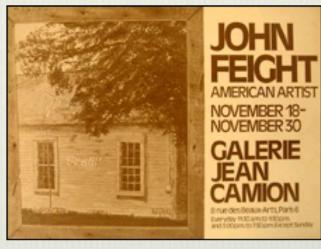
# John Feight (1940)

❖ 500,000 volunteers, over 35,000 paintings have been donated to over 2,500 hospitals, nursing homes and care facilities in 195 countries.

#### The Foundation for Hospital Art, Inc

John (1940-) and Linda Feight

❖ 500,000 volunteers, over 35,000 paintings have been donated to over 2,500 hospitals, nursing homes and care facilities in 195 countries.





#### Service de radiologie Hôpital Necker

Jean-François Moreau Arlette Souami Max Pappart

> Didier Sicard Alechinski!



## Luc Picard et André Forfert Nancy

