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Introduction

Obrist (2014, p.79), quotes Christian Boltanski (1944 – 2021) who's guiding principle in curating is that exhibitions "should always invent a new rule of the game". Obrist points out that only exhibitions that conceive a new display feature are remembered by people, and that this should be the aspiration for any new exhibition.

That the arts and health are "important bedfellows" is evidenced by interest and investment in the perceived positive contribution that Arts and Health have made in the National Health Service in Wales (Welsh NHS Confederation, 2022). However, Ronson (2013) highlights the risks of confirmation bias and the how humans disregard information that threatens previous decisions (Kappes et. al., 2020, p.130). Evidence Based Practice (EBP) approaches may have introduced confirmation bias focussed on the potential positive health gains from introducing arts into the health care environment (Broderick 2011, p.95). There may be advantages to reducing negative outcomes or highlighting the vulnerability of patients in the health system through more qualitative and seemingly antithetic approaches.

This imagined exhibition is presented within the context of a modern healthcare environment which serves to stimulate affects which highlight the potential negative consequences of health care as a counterpoint to its potential to improve people's lives.

Exhibit 1

The Doctor, Sir Luke Fildes (1887)



'The Doctor', an acclaimed painting by Sir Luke Fildes (1887), denotes a scene where a child is recovering from a serious illness, watched over by the family doctor and the child's working-class parents. The painting symbolises "quiet professional devotion" and the perceived social status of doctors (Birchall, 2003). Moore, 2008 observes that Fildes painting symbolises the abiding image of the General Practitioner in the Victorian era, often used nowadays to portray the expected qualities of a doctor.

Ivan Illich challenged the illusion and mythology of medical effectiveness in his seminal book and prominent medical journals in the mid-seventies asserting that medical practice had developed into a "major risk to health" (Illich, 2003). In his book Illich (1975, P.16) also noted that patterns of disease in the preceding century were affected no more by doctors, than by priests. More recently, O'Mahoney (2019) excoriates the loss of medicine's "golden age" and "the corruption of a profession".

The location of Fildes' work in the resuscitation area of the emergency department serves to challenge the myth of total professional devotion and highlight that doctors are human beings, with all the possible human faults, inadequacies and biases that accompany the messy condition of humanity in health as well as sickness (Offri, 2023, para.15)

Exhibit 2

Cut Piece, Yoko Ono (1964) Film of Live Performance at Carnegie Recital Hall. Viewed by the author at Tate Britain, February 2023.



Marcel Duchamp argued that the creative act often begins in isolation within the artist's studio (Lydiate, 2007), but the act is incomplete until viewed by others in the context of the external world.

The audience at the performance of *Cut Piece* (Ono, 1964) participated by taking turns to cut off and keep small pieces of Ono's clothing whilst the artist sat impassive and motionless on the stage. The audience's interpretation of the instructions and the artist's submissiveness, but obvious discomfort, raised questions for the author about submission and vulnerability. Reckitt (2012, P.60) observes how the work emphasises reciprocity between viewer and object and demonstrates how "viewing without responsibility has the potential to harm or even destroy the object of perception".

Performing is a creative act distinct from role playing. In health, the most common “medical role-players” are doctors with a bedside manner, “where charm or sympathy is often switched on as a deliberate technique” (O’Donnell, 2005, p.323)

Exhibiting the film of Ono’s performance on a screen in the staff rest room at the emergency department could potentially highlight the risks of hospital staff participating in a ‘performance’ of medical care and the real vulnerability of patients in difficult and frightening circumstances.

Exhibit 3

Jacob and the Angel, Joseph Epstein (1940) Stone (Alabaster) Sculpture



Jacob and the Angel is an alabaster carving weighing more than 2.5 tonnes, depicting a chapter from The Book of Genesis in a primitivist style (Horlock, 1997) which describes a delirious night-long struggle between Jacob and an unknown aggressor who sets upon and wrestles him (BFBS, 2011,

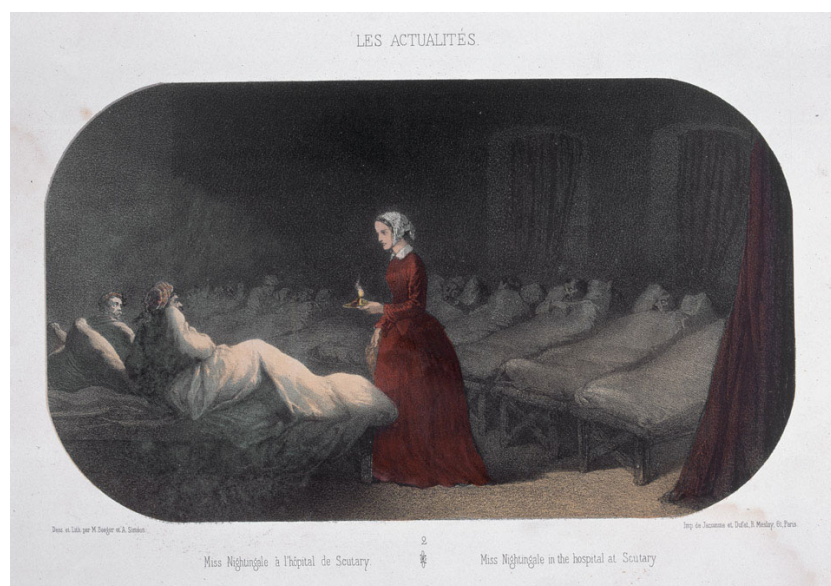
Genesis 32:24-32). When Jacob awakes, he understands that he has fought with God as well as his own conscience.

Delirium (Oxford Concise Medical Dictionary, 2020) is defined as “an acute disorder of the mental processes characterized by fluctuating levels of consciousness, responsiveness, and cognitive ability”. Health professionals fail to detect more than fifty percent of delirium cases (Boucher et. al., 2019). Boucher highlights the multifactorial causes of delirium in elderly patients, emergency department (ED) overcrowding and research suggesting that delirium can be caused by protracted exposure to the ED environment. Inouye (2018) describes a career in medicine and as a geriatrician and their observations of older adults being ignored and undervalued, especially when they were confused.

The location of this piece, described by Horlock (1997) as “monumental”, at the ambulance entrance serves as an immovable reminder of the challenges of ageing, signifying the struggles of the elderly and a call for a unique focus on enhancing the quality of life for older people (Inouye, 2018)

Exhibit 4.

Miss Nightingale in the Hospital in Scutary [sic.] Beeger and Beeger (circa 1856). Coloured Lithograph.



This coloured lithograph by depicts Florence Nightingale (1820-1910), renowned for her work during the Crimean War and later for her use of statistics to evidence better care (Fee and Garofalo, 2010). Army doctors were dismissive of Miss Nightingale's ability to help with her team of volunteer nurses at the hospital in Scutari, Turkey. After the hospital was overwhelmed with the sick and injured the doctors were unable to cope and accepted Nightingale's help (National Army Museum, 2023).

Soldiers were in terribly insanitary conditions, wounded, and dying mainly from poor care, lack of medicines, and infectious diseases, so the nurses set about organising and improving hygiene, food, cleanliness, and comfort. The symbolism of 'The Lady with the Lamp' arose through the sight of Miss Nightingale checking all was well carrying a lamp at night (Florence Nightingale Museum, 2023).

Florence noted that "The effect in sickness of beautiful objects, of variety of objects, and especially of brilliancy of colour is hardly at all appreciated." (Nightingale, 1859).

The image will be displayed in the clean procedures room and printed onto the wrappings of sterile equipment; on the backs of toilet doors; pasted directly onto sluice units; printed onto toilet paper to encourage staff, patients, and relatives to think carefully about cleanliness and hygiene in the accident and emergency department.

Exhibit 5

The Stone Operation (Allegory of Touch) Rembrandt van Rijn. (circa, 1624-25) Oil on panel.



Allegory of Touch portrays a dark and unprofessional scene, in a barber-surgeon's room, where he is holding a scalpel and about to 'cut the stone' from a patient's head. The scene is lit by a candle held by a wrinkled and severe elderly woman and the patient is grimacing and clenching his fists (Libby et. al., 2017)

One of a group of satirical paintings by Rembrandt van Rijn the work characterises the Dutch idiom of 'van den steen snijden' (to cut off/out the stone). It was believed that removal of the allegorical "stone of folly" would cure symptoms of mental illness where a person was said to "have rocks in one's head". Unscrupulous barber surgeons took pecuniary advantage of this belief to cheat patients out of their money (Ip, 2016).

Carr (2017) asserted that many people could be receiving unnecessarily risky and costly surgery, citing trials in which traditional practice was compared with fictitious versions of the same surgical procedure. These trials found no significant benefit compared to placebo for a range of surgeries. Carr highlights the vested interests of communities and the resistance of surgeons to accepting this evidence.

Allegory of Touch is mounted in the ENT examination area of the department to signify, through satire, the folly of believing that surgery can cure everything.

Synthesis

Lankston et. al. (2010) acknowledged the positive medical benefits that visual art in hospitals can provide, and the generally positive view of art that patients take. However, Lankston noted that the evidential quality is not consistently high.

Broderick (2011) highlights the distinction between arts therapy and the practice of art explaining that the practices of arts therapist and artist are different and suggests opportunities for further analysis beyond “causal positive health gains”. Demanding space to discuss contemporary arts practices in the conversation on arts and health Broderick suggests active and engaged analytical activities on both. Giving an example, Broderick’s view is that this discourse could generate views on the evolving liaison between medicine and society. Arts practice does not seek therapeutic health gain and is very different in substance to arts therapy, but the distinction between them could provide valuable insights. Using an antithetical, or contradictory approach to the exhibition and display of art in the health care environment could help to stimulate these insights. Furthermore, attention to the “art of medicine” and qualitative approaches to evidence might provide a balance to the role of evidence-based practice (EBP) which relies on randomised control trials (Parker et al, 2009, p.970)

Conclusion

Data from Welsh Health Boards and Trusts shows that between April and September 2022 more than 10,500 complaints were received. About 5% of complaints were referred to the Public Health Services Ombudsman for Wales (PSOW, 2023). A balanced approach to evidencing arts in health may be important to ensure that public funds are well spent and that outcomes are effective. Awareness of the tendency to confirmation bias and the need for methods of evaluation that recognise this bias is also important. New approaches to exhibition of art in the health environment that appear antithetical in the current context could ultimately be helpful in a balanced approach.

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