

**Jillian Gates**

BFA(Hons), is a PhD candidate, Film & Digital Art, Sydney College of the Arts/Medical Humanities, University of Sydney, New South Wales. [jgat9093@usyd.edu.au](mailto:jgat9093@usyd.edu.au)

# An inquiry

## Aesthetics of art in hospitals

Historically, art has served a significant purpose within hospital waiting rooms. However, in recent times we have experienced cuts in funding and less interest in improving the aesthetic of art displayed in Australian hospitals. This article briefly discusses the history of art in hospitals and explores a methodology for researching the preference of Australian patients today. Potentially, Australians waiting in hospitals and medical clinics could benefit from art works that reflect their preferences; this may help to ease the pain, anxiety, and boredom of waiting.

■ **Waiting in hospitals is a moment we all dread. We tend to be preoccupied with finding a chair away from the sick, avoid all eye contact, and wonder why the woman with three children who arrived 20 minutes after you, has managed to lure the first doctor seen for 3 hours. After feeling rejected, we wait, the anxiety builds, and the man coughing into yesterday's newspaper makes you feel nauseous. Your 3 year old daughter's fever climbs to 39°C and small red spots start to glow and multiply each second you double check that she is still breathing.**

Waiting for my first pregnancy check ups, accompanying my children to our doctor's surgery and later, sitting with my mother in palliative care, I was acutely aware of the lack of thought and organisation behind the display of visual imagery and signage. As an artist, I wondered who decides what images will be displayed in waiting areas of health clinics and hospitals and why they make those choices? Welcome to an inquiry regarding the aesthetics of public art in hospitals.

### An historical perspective

Greeks who were sick or wounded gathered at healing temples in response to the plague that infected Athens in 420 BC, as did soldiers and civilians surviving the Peloponnesian War between Athens and Sparta in 431–404 BC.<sup>1</sup> Public art within these temples reflected the belief systems of the people. There were statues of Apollo, Asklepios and Hygieia – deities of wellbeing, healing and medicine. There were architectural friezes in relief sculpture that illustrated the function of these buildings, including the ritual of being bathed and cleansed by the healers or doctors before being admitted for treatment.

Frescos were painted in many monastic hospitals in Italy from the tenth to sixteenth centuries. The Santa Maria della Scala in Siena exhibited the most significant works of art, indicating a clear intention toward creating an environment conducive to healing. Domenico di Bartolo painted the fresco 'The care of the sick' as a series of episodes to represent the history and life of Santa Maria della Scala (*Figure 1a, b*). The subject matter and narratives of the fresco are

intrinsically linked to the daily activities of the hospital. The rector of Santa Maria della Scala commissioned di Bartolo, Lorenzo Vecchiette and, briefly, Priamo della Quercia to apply their new renaissance style to reflect the power and prestige of the hospital.<sup>2</sup>

### Art and audience response

Although I had discovered that art in hospitals may reflect the health or religious beliefs of a community, the daily life of a hospital, or may be an attempt to promote a healing environment, my primary concern was with the quality of artwork and how the images displayed resonated with the other waiting patients. Specific 'art-in-hospital' projects such as Scher and Senior's 'Exeter Health Care Arts Project', responded to the preferences of patients from The Royal Devon and Exeter Hospitals in the United Kingdom.<sup>3</sup> They examined art and audience, whereby audience responses to specific works of art were measured and formulated to give a positive or negative rating. The questionnaire used a series of paintings and sculptures exhibited in different locations within the hospital. It identified whether patients valued and noticed the selected artworks.

### Australian waiting room patients

In my waiting time, I started to observe other patients, and quickly realised a large portion were elderly, reflecting both the increased health issues in the elderly and the increasing number of elderly people within our communities. I thought their opinions and preferences were vital in considering the imagery placed in waiting rooms. So, I conceived a study to investigate the perspectives of elderly patients. This study was a comparative case study, using both qualitative and quantitative methods, of elderly patients attending the allied health waiting room in Wyong Hospital and

the general practice waiting room at Balmain Hospital (both in New South Wales). The waiting room in Wyong Hospital is allocated for dementia patients, speech therapy and audiology. Balmain Hospital's waiting room also acts as an emergency department. Family members accompany almost all of the patients in Wyong Hospital, compared with half of the patients from Balmain Hospital. This research project drew on a mixed methodology to determine whether the quality and subject matter of the imagery displayed can assist in alleviating the pain, anxiety and boredom of waiting in hospital waiting rooms.

Elderly patients and their family members were approached and invited to participate in sharing their waiting experience and art preference by filling out a questionnaire. Stage one of this project determined the preferred art genre for patients at both hospitals and also established whether the patients felt anxious, in pain and/or bored. Stage two (yet to be completed) will compare art preference and rate the level of interest generated from the new art displayed.

Fifty participants from each hospital were recruited, divided into 25 from each hospital for stage one, and 25 from each hospital for stage two. The questionnaire was designed to explore the personal narratives of patients and to measure their interest in art and any feelings of pain, anxiety and boredom on a 10 point Likert scale.

Outcomes from stage one of the study indicate a strong preference for art in hospitals. Further, while participants indicated a moderate level of interest in contemporary art, 76% of participants from both hospitals preferred landscape images of their local area.<sup>4</sup>

About 8% of participants at Wyong Hospital experienced pain, compared to over 60% at Balmain Hospital, which may reflect the different patient populations. Half of the patients at both hospitals experienced anxiety. Over 60% of patients experienced boredom at Balmain Hospital and about 25% at Wyong Hospital.

The methodology applied to this study is limited in the sense of how subjective aesthetics can be, and also of how one rates the intensity of pain, anxiety and boredom. However, the method identifies the complexity of the waiting experience for patients and acknowledges the varying degrees of angst felt within waiting rooms.

Anxiety is likely to decrease pain tolerance and increase discomfort. Boredom may signal information overload, a fading interest or a loss of meaning within any context. The results suggest there is room for improving the

Figure 1a, b. Domenico di Bartolo, *The Care of the Sick*, 1440–1, Santa Maria Della Scala. Siena: Commune di Siena



aesthetic within waiting rooms to reduce the discomfort of the body. The patients' levels of interest in art, and in landscape art in particular, signals a possible way forward.

### The significance of landscape

The essence of spirituality within the landscape is embedded within cultural memory, 'Landscape and memory are a way of looking or rediscovering what we already have'.<sup>5</sup> The way our culture remembers and feels is intrinsically linked to popular culture, the visual language of photography, television, cinema and advertising. The patients' preferences for landscape imagery of their local area also reflects the original intention of art in hospitals.

### Conclusion

The preference for landscapes has tapped into the essence of what elderly patients find reassuring within their discourse. If elderly people feel this way, then this could be applied to waiting rooms within any general practice. Why not display imagery that depicts the specificity of a local area and its community? It may suggest that general practitioners care about where they work, and their patients' community. Patients may experience less stress if they are waiting within a setting that depicts a sense of familiarity and belonging.

Conflict of interest: none declared.

### References

1. Compton MT. The association of Hygieia with Asklepios in Graeco-Roman Asklepieion medicine. *J Hist Med Allied Sci* 2002;57:312–29.
2. Henderson J. *The renaissance hospital*. New Haven: Yale University Press, 2006; p. 147.
3. Scher P, Senior P. The Exeter evaluation. 1999. Available at [www.rdehospital.nhs.uk/EHCA/report.htm](http://www.rdehospital.nhs.uk/EHCA/report.htm) [Accessed 26 April 2006].
4. Gates J. Public art in hospitals. An analysis of the production of art in hospitals. *International Journal of Interdisciplinary Social Sciences* 2007;2:359–68.
5. Schama S. *Landscape and memory*. London: Harper Collins, 1995; p. 530.