

The Interview

By John Koch

A CLINICAL NURSE *who is at work on fourth book, Jeanine Young-Mason, 60 uses works of art to teach compassion to nursing students at the University of Massachusetts at Amherst.*

Jeanine Young-Mason

What's the hardest thing for young nurses to confront?

They are shocked at the politics of greed rampant in health care – the pressure to get people out of the hospital before it is time to go, the denial of services. They've learned the right way to deliver health care, and then they get into that squeeze out there. And technology is like a Mack truck bearing down on all of us: While it has brought wonderful advances, it gives the illusion it can solve everything. Both of those things are pulling us away from the human relations that are crucial to healing.

Can compassion be taught?

I believe it can be. It is the essential topic in medicine and nursing. A lot of people confuse compassion with empathy, pity, charity, or this warm, fuzzy feeling one gets when one sees someone suffering and wants to be closer. But compassion is tough stuff. Things happen when a person essentially transcends all the reasons for *not* acting on behalf of another – whether it's fear, anxiety, repulsion, or ignorance. Something happens in that interchange that is incredibly creative, so when people are compassionate on behalf of those who are suffering, they are refreshed. Aspiring nurses and doctors should come to terms with the cost of it, and the rewards, and if they don't feel called to overcome indifference, then it's far better that they pull out. Don't choose a profession

which absolutely requires that you be prepared for the task of human relations. Never mind this doctor-patient or nurse-patient relationship – it's about human relationships and what it costs to be present for other individuals in a vulnerable state.

How do art and literature connect to compassion?

Serious artists are so keenly interested in and attuned to the human spirit, they have a central knowledge for people in health care about how to appreciate the human soul. There isn't a single textbook that I've seen in medicine or nursing that comes anywhere near that kind of sensitive appreciation – none. Any deep piece of literature or art surely has compassion in it. I work a lot with Tolstoy and Kurosawa: Their perspective is crucial to our understanding of the human condition. And anybody who looks at *The Burghers of Calais* [Auguste Rodin's 1889 sculpture] can see it's a very compassionate work of art.

OK, but what can nurses learn from this huge bronze of six men about to die?

Rodin had principles for working, and one is very applicable to medicine and nursing. He says that while many people think the soul is expressed through the human face and eyes, it's really expressed in all the muscles of the body. Even those who cannot speak or choose not to, or who are trying to express something

and can't articulate it, speak with all the muscles of their body. The whole body expresses emotion. Health-care practitioners should learn how, through Rodin's eyes, to read the human face and form, by studying his work. There's something else this work of art does besides teaching people visual clues to emotional states: It gives them an appreciation, an absolute visual representation, of the various emotions expressed by human beings when they are facing death. Also, when students study *The Burghers*, they start seeing scenes from their own inner lives that are drawn out of them by this profound work of art.

Don't you diminish art with this instrumental approach?

It's my heritage as well as anyone's in the fine arts and literature. These works were created for all of us, not just literary critics or history-of-fine-art people. Why shouldn't we partake of it? It enriches our lives.

Can doctors learn interpersonal skills from nurses?

Yes. They can learn a great deal about the ethic of compassion and caring. I'm not saying that some of them don't understand it, but there is a particular way intelligent nurses are present with patients. They take into consideration the entirety of a person's life and the environment that they live in and the conditions that they're struggling with, and their illness or wounds.

Are doctors well prepared to deal with dying and death?

Medical schools are getting better with that, but we have a long way to go. There's also a problem with the way in which people in health care are educated to help people of age. Just as there's prejudice against teenagers, there's prejudice and fear of the elderly. The average amount of money spent daily in the US on food for a resident in long-term care is \$2.97. That is very telling about how this country feels about the elderly. I've seen nearly a hundred nursing homes, but I've only seen one that is acceptable. From the clergy to the administrators to the people who clean the rooms, they have given in to fatalism, and it's a reason for not acting responsibly on behalf of the residents who have to live there. The patients are completely smothered by it – this sense of "Oh, well, what can you do?"

What's the percentage of men in nursing?

Nine or 10 percent.

Are women more naturally compassionate than men?

I don't think so. I have seen callousness on the part of men and women in health care, and the indifference not only shocked me, but it hurt. And I have seen compassion on the part of both men and women that was truly inspiring. □