

Nurturing personal and professional conscience in an age of corporate globalisation: Bill Viola's *The Passions*

Thomas A Faunce

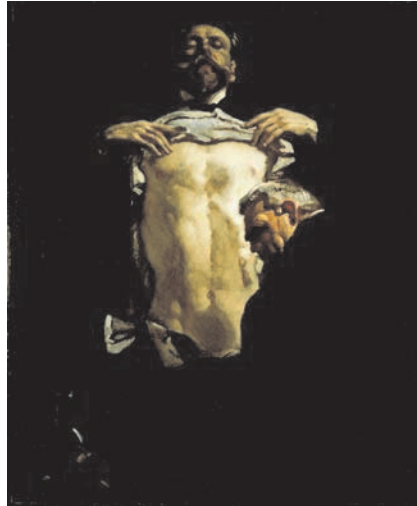
Exploring the “norms” or principles of bioethics, health law and international human rights is central to personal and professional development courses of contemporary medical schools. Despite the increasing popularity of using the insights of fine art and literature (particularly through resources such as the New York University Literature, Arts and Medicine Database¹), how these dovetail with the former objectives remains something of an academic puzzle. Further, curricula use of the medical humanities often meets with scepticism and disinterest from exam-oriented students.

Teaching application of principle through medical humanities

The Personal and Professional Development course at the Australian National University Medical School has taken a unique approach. The course aims to teach not just the relevant norms or principles of bioethics and health law, but to encourage their consistent and practical application throughout a medical career, despite personal, collegial and institutional obstacles. This process may be linked to a tradition of scholarship known as virtue ethics, as its aim is character development rather than intellectual recall of abstract rules.² I have argued in a previous publication that medical humanities has “normative” (or “principle-developing”) aspects, particularly when linked to a process of reasoning that strives to achieve coherence between laws and fundamental social virtues, such as justice, fairness and respect for human dignity.³ This process of reasoning is designed to give students the capacity not only to critique and weigh compliance with such norms or principles, but to assist in developing them, be they derived from ethical, legal or human rights traditions.⁴

Over the first 2 years of the course, each fortnight four students are required to develop and present a collaborative half-hour PowerPoint analysis of a staff-selected contentious issue in bioethics, health law or international human rights. These include the standard components of bioethics and health law, but many of the presentations relate to a major theme of this course — that, while corporate globalisation may enhance efficiency and innovation, its “lobbying” principles and strategies may be having a major adverse impact on

1 Chesham Street



George Lambert, *Chesham Street*, 1910. Oil on canvas. National Gallery of Australia, Canberra.

current health policy and on the foundational medical virtue of loyalty to the relief of patient suffering.⁴

In addition to using selected online resources and nominated experts, the students are required to incorporate in their presentations imaginative insights and arousals of conscience gained from examples of fine art, including visiting a nominated work of art at the National Gallery of Australia. Thus, in addition to the well accepted works from the medical humanities canon (eg, Edvard Munch's *Death in the Sickroom* [Nasjonalgalleriet, Oslo, c. 1893] and George Tooker's *Corporate Decision* [private collection, 1983]), students are asked to consider, with expert guidance from the gallery staff, selected works from the National Gallery of Australia; for example, John Longstaff's *Motherless* (1886), Anselm Kiefer's *Twilight of the West* (1989) and George Lambert's *Chesham Street* (1910) (Box 1).

Bill Viola's *The Passions* and medical, personal and professional development training

The course recently took advantage of a relevant temporary exhibition. Between 29 July and 6 November 2005, the National Gallery of Australia exhibited a collection of architectural video installations, *The Passions*, by the artist Bill Viola. Viola's art uses actors in slowed video performance of narrative moments eliciting heightened emotions, disturbances of consciousness and a search

2 Dolorosa



Bill Viola, *Dolorosa*, 2000. Colour video diptych on two freestanding hinged LCD flat panels. © Bill Viola. Photo: Kira Perov.

Medical School and Law Faculty, Australian National University, Acton, ACT.

Thomas A Faunce, BA/LLB, BMed, PhD, Senior Lecturer.

Reprints will not be available from the author. Correspondence: Dr Thomas A Faunce, Medical School and Law Faculty, Australian National University, c/o Law Faculty, Fellows Road, Acton, ACT 0200. Thomas.Faunce@anu.edu.au

3 Emergence



Bill Viola, *Emergence*, 2002. High-definition video rear projection on a wall-mounted screen. Commissioned by the J Paul Getty Museum, Los Angeles. © Bill Viola. Photo: Kira Perov. ♦

4 Observance



Bill Viola, *Observance*, 2002. Colour high-definition video on plasma display mounted on wall. © Bill Viola. Photo: Kira Perov.

Medieval devotional works were created in an intellectual climate that emphasised the instructional value of the vices, as well as the virtues. The traditional seven capital vices are: *superbia* (pride), *ira* (anger), *invidia* (envy), *gula* (gluttony), *lusura* (lust), *cupidita* (greed) and *accidia* (sloth).⁷ Many works in Viola's *The Passions* likewise resonate with this tradition, particularly *Observance* (above) where such vices appear in expressions shared between those passing each other to observe a person who has died. Viola's work from this perspective might encourage medical students to present reflections as if these people were delegates of the World Trade Organization discussing enhanced regimes of intellectual property rights; or chief executives of a multinational pharmaceutical company considering the profit outcomes of a research and development strategy, or how to alter a nation's public health system to maximise their organisations' financial growth. ♦

for meaning in the face of tragedy. His art provided a good example of how our students are encouraged to use the medical humanities to incorporate, within their conscience, career-long respect for implementing principles of bioethics, health law and the international right to health in the face of challenges, such as those posed by corporate globalisation.

This approach goes beyond suggesting that such works merely heighten clinical observation skills.⁷ It attempts to enhance professional loyalty and normative thinking toward individual patients in the face of the unique contemporary pressures created by corporate globalisation. Such contexts include tragic narratives involving:

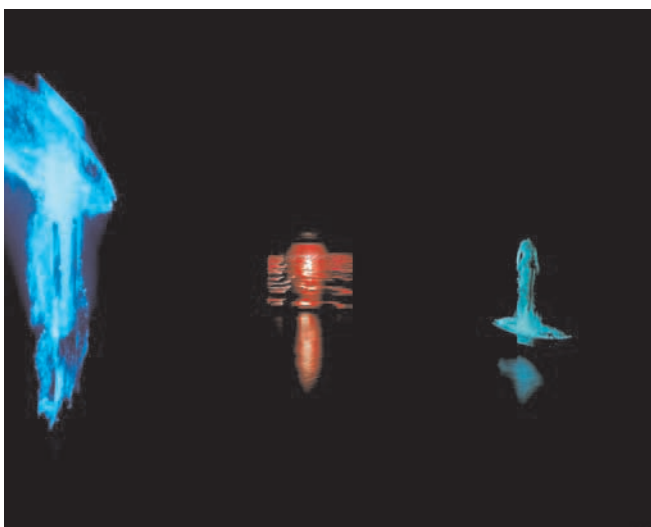
- breaking bad news to a couple (Viola's *Dolorosa* shows the grieving faces of a man and woman [Box 2]);
- assisting a mother and her daughter grieving about the death of their son and brother (*Emergence* depicts the dead Christ emerging from a tomb and being laid to rest by two distressed women [Box 3]); or
- watching relatives view the body of a loved one who has just been removed from life support⁶ (*Observance* displays a procession of 18 people slowly taking turns to confront a disturbing sight and expressing and sharing emotions [Box 4]).

Viola's *The Passions* were developed, primarily from a tradition of Christian iconography, during a residency at the Research institute of the J Paul Getty Museum in Los Angeles in 1998. Viola's *Emergence*, for example, draws upon *Descent from the Cross* by Rogier van der Weyden (1435, The Prado, Madrid, Spain). His work, *Observance*, has artistic roots in *The Four Apostles* by Albrecht Dürer (1526, Alte Pinakothek, Munich). The use of such representational narrative paintings for private devotion was a dominant feature of 15th century art. Such treatises instructed the laity to participate empathically in the picture, to become a meditative "co-sufferer". The medieval artist, as does Viola, strove to overcome complacency in matters of spiritual development, the

art arousing heightened emotions which could then be harmonised in prayers for forgiveness and by redemptive grace.⁸

Viola's exhibition also draws on Hindu and Zen spiritual traditions. This is particularly evident in his depictions of hand "mudras", and in *Five Angels for the Millennium*, a video projection with stereo sound in which five large simultaneous videos depict

5 *Five Angels for the Millennium*



Five Angels for the Millennium, 2001 (detail, from left to right: Departing Angel, Fire Angel and Birth Angel). Five channel video projection with stereo sound. © Bill Viola. Photo: Kira Perov.

What imaginative “normative” resonances do these images have for medical students when loyalty to the relief of patient suffering is considered in the context of the challenges produced by corporate globalisation? ◆

the human shape distorted in light, fire and water within a darkened, cloistered space, with accompanying sound crescendos as the human forms gradually appear (Box 5). This evocation of the meditative human spirit may also resonate with our students who commence each personal and professional development session with a five-minute, staff-directed relaxation exercise, lacking overt religious elements. A medical version — “Five Angels for the Medical Millennium” — could shape the following particular resonances for students studying the pressures on patients from corporate globalisation:

- the recrudescence of scholastic dogmatism and lack of local industry support, which is inhibiting stem cell research;
- the regulatory panics over pharmaceutical patents associated with emergent infectious disease;
- persecuted whistleblowers nonetheless leading quality and safety in an increasingly privatised health care system;
- the frequently blasted expectations associated with lucrative artificial reproductive technology; and
- the uncertain legitimacy and health care values of entrepreneurs directing public health policy through the principles and strategies of corporate globalisation.

The task of discerning and then assisting the fallen angels among this collection, those least likely to enhance the foundational professional virtue of loyalty to the relief of patient suffering, seems a worthwhile challenge to the conscience of many medical students and health professionals.

Conclusion

By so viewing an exhibition such as Bill Viola’s *The Passions*, it is hoped that one practical, normative outcome of the emotional resonances evoked in our students may be to encourage them to challenge the

role of corporate multinationals in setting global public health policy, while at the same time appreciating their contributions to efficiency and innovation. They could then begin to play a medical regulatory version of Hermann Hesse’s eclectic, nation-ruling and character-shaping “Glass Bead Game” (from the Nobel Prize winning novel of the same name). In the novel, student monks in a fictional country of Castalia are taught to play an extremely complex game in which aspects of diverse intellectual traditions are interwoven. Strategic “Renaissance-type” thinking could suggest:

- Constitutional, lobbying and professional regulatory measures countering profit-driven moves to dismantle universal health services and medicines delivery systems⁹ in favour of user-pays health savings accounts¹⁰ and medicines savings accounts;¹¹
- Trade agreement provisions facilitating improvements in socially responsive, cost-effectiveness evaluation of allegedly “innovative” pharmaceuticals before government reimbursement;¹² and
- Educational strategies assisting capacity building in this area by teaching students to have pride in Australia’s role in promoting the public good of cost-effectiveness evaluation by the Pharmaceutical Benefits Advisory Committee in the context of its social justice origins and the multinational corporate pressures upon it.

Acknowledgements

Bill Viola: *The Passions* (National Gallery of Australia, Canberra, 29 July – 6 November 2005) was organised by the J Paul Getty Museum, Los Angeles. Thanks to Lucina Ward, Lisa Cargill and Robyn Daw at the Gallery for their dedicated assistance with this article. Thanks also for research assistance to Stefan Baku, graduate medical student, ANU Medical School.

Competing interests

I am the Project Director of an Australian Research Council (ARC) grant to investigate the impact of international trade agreements on access to medicines in Australia. The ARC was not involved in the preparation of this article.

References

- 1 New York University Literature, Arts and Medicine Database. Available at: <http://endeavor.med.nyu.edu/lit-med/lit-med-db/about.html> (accessed Oct 2005).
- 2 Pellegrino ED. Toward a virtue-based normative ethics for the health professions. *Kennedy Inst Ethics J* 1995; 5: 253-261.
- 3 Faunce TA. Normative role for medical humanities. *Lancet* 2003; 362: 1859.
- 4 Faunce TA, Gatenby P. Flexner’s ethical oversight revisited? Contemporary medical education and the health impacts of corporate globalization. *Med Educ* 2005; 39: 1066-1074.
- 5 Morani AD. Art in medical education: especially plastic surgery. *Aesthetic Plast Surg* 1992; 16: 213-218.
- 6 Hunter KM. *Doctor’s stories: the narrative structure of medical knowledge*. Princeton, NJ: Princeton University Press, 1991.
- 7 Bloomfield MW. *The seven deadly sins. An introduction to the history of a religious concept, with special reference to medieval English literature*. East Lansing, Mich: Michigan State University Press, 1952.
- 8 Lloyd WB. *The empathetic relation of the observer to image in fifteenth-century Northern art*. Chapel Hill, NC: University of North Carolina, 1974.
- 9 US Department of Commerce, International Trade Administration. *Pharmaceutical price controls in OECD countries. Implications for US consumers, pricing, research and development and innovation*. Washington, DC: US Department of Commerce, 2004. Available at: <http://www.ita.doc.gov/td/chemicals/drugpricingstudy.pdf> (accessed Nov 2005).
- 10 Robinson JC. Health savings accounts — the ownership society in health care. *N Engl J Med* 2005; 353:1199-1202.
- 11 Barr MD. Medical savings accounts in Singapore: a critical inquiry. *J Health Polit Policy Law* 2001; 26: 709-726.
- 12 Faunce T, Doran E, Henry D, et al. Assessing the impact of the Australia-United States Free Trade Agreement on Australian and global medicines policy. *Globalization and Health* 2005; 1: 1-15. Available at: <http://www.globalizationandhealth.com/> (accessed Nov 2005).

(Received 8 Oct 2005, accepted 13 Nov 2005)

□