

From a music therapist perspective I am going to talk about the unique role the arts bring to health and well-being at the end of life; how we might facilitate access to the arts earlier in illness and finally the role of the arts in palliative care education and training.

'Living until you die' is a central theme of holistic care at the end of life. But for many, normal 'living' is no longer possible, which has a huge detrimental impact on health and well-being. The arts and arts therapies have a unique role here for they are flexible, adaptable and can be made accessible. The different art forms can foster creativity and fresh experiences, they can facilitate self-expression, and with that new understandings and insights. They can also offer the potential for pleasure, transcendence and beauty. Conversations that matter can be the norm, the art forms providing opportunities for shared understanding. Communication at depth can take place with, or without, words. More than one patient has told me that they are living more with illness than they did before it.

Two examples:

A family group in a patient's room, where there is little left to say, share the intimate, gentle and moving experience of listening to a flautist play for them. A young vulnerable widow, now a single parent, writes and sings a love song to her husband. She notices the song contains glimmers of hope for the future, for a meaningful life lived without him there in person.

Here music's role in health and well-being is both in the moment and in the future; for one family there are positive memories of a profound shared experience; for the widow a song to remind her how far she has travelled since his death.

I want to argue that patients and their families would benefit from input from the arts and arts therapies much earlier than in the final weeks or short months that is typically possible in hospices where these practitioners are usually found. Should they not also be available for oncology, neurology, or cardiac patients. If the arts and arts therapies could be prescribed in the same way as GP's can now prescribe exercise, could there even be an economic benefit alongside a patient's health and well-being?

Finally we are in danger of the science almost completely displacing the art of medicine in medical education. My experience, in contributing to medical humanities and end of life courses, is that exposure to experiential ways of learning through the arts can lead to important shifts in self-awareness for participants and also contribute to their own long-term well-being and resilience. Shouldn't we be increasing the use of the arts and insights from the arts therapies in end of life training and education?