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THE USE OF PORTRAITURE TO FOSTER HUMANISTIC CARE

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t has been said that a picture says a thousand words, that art should speak for itself. Within the social sciences, there is recognition that images are not merely illustrations, but "texts" that can be read, studied and interpreted in different ways: they are visual narratives. When we look at a work of art, we respond with our own thoughts, feelings and ideas about what it communicates.

When we look at a portrait specifically, we are not just looking at a picture of an individual, we are looking at a picture of someone being looked at. It is a visual record of an interaction, as much as a likeness of the person. The artist-sitter relationship has much in common with the doctor patient relationship involving trust, attention, and an openness to ambiguity and creativity. As clinicians that are tired and feeling overwhelmed, we may objectify patients. Engaging with art can help hone our skills to consistently see the whole person. It provides freedom to sit with ambiguity and maintain curiosity and can help us become more flexible in our thinking, to hold multiple possibilities in mind at the same time. Viewing art in a group provides opportunities to understand and appreciate others' perspectives.

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Drawing on multiple portraiture projects related to pediatric epilepsy, youth mental health and dementia, this presentation will provide constructive ways in which portraiture can be used to foster humanistic, patient centred care, and to understand the power of distributed cognition.