Music's Healing Power
Curtis musicians help a class of medical students apply a new, needed set of skills.

BY MARY JAVIAN

What does it mean to understand music? How can music affect others and tell a person’s story? What parts of a person are we dealing with when that person is sick? Can music help heal patients and families?

I have spent my career thinking about why music matters and how it can positively influence more people. As a teaching artist, I am much better at raising questions than providing answers, particularly when I’m working with people in another field. When Dr. Horace Delisser of the Perelman School of Medicine at the University of Pennsylvania asked me what I thought a class about music could do to benefit medical students, I definitely had a lot of questions.

Dr. Delisser, the associate dean of humanism and professionalism at the medical school, first contacted me to explore this topic with him and a group of medical students and physicians, in preparation for developing a course for first-year medical students without a background in music. He told me that medical schools all across the country are looking for ways to train doctors to treat people—not just diseases. They are also looking to reduce stress and burnout among medical students. I had just returned from Japan, where I was speaking about music and health care, sharing several of the residencies Curtis has developed in health-care settings over the past few years. Dr. Delisser and I talked about a course that might help medical students develop relational communication skills and foster affective and cognitive qualities of empathy.

I met with a Penn-based team to structure the course. Several were students who had recently started the medical school’s new orchestra. Another member of the team was third-year medical student Ethan Pani, who majored in percussion performance at the New England Conservatory and is married to a staff member at the Philadelphia Orchestra. Ethan helped promote the idea that physicians need the flexibility in thinking and the sense of perspective that musicians exercise on a daily basis. Also contributing in a substantial way was pulmonologist and professor Steven Weinberger, who had just performed a Mozart piano concerto with the medical school orchestra. Once the course started, Dr. Weinberger attended all of the classes and helped the students make connections between their medical training and the concepts I was presenting through music.

In these discussions I was struck by music’s potential to help medical students develop big-picture skills such as empathy, communication, and collaboration. The topic was fresh in my mind; I had recently heard one of my mentors, Eric Booth—who essentially defined...
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The teaching-artist profession—speak about the business world’s desire to find employees who were creative and collaborative, with a high tolerance for ambiguity. These are qualities artists should have in spades.

The physicians, medical students, and I set about designing a syllabus that focused on these issues. At the final “class,” we would attend a Philadelphia Orchestra performance together. We titled the course “Humanism and Professionalism through Music.”

**A FRESH EXPERIENCE**

In our first classes, I presented basic musical concepts, giving the students a language that allowed them to talk about the music. We focused on rhythm, counterpoint, and timbre, so that students were able to play with musical elements and feel more confident in their listening skills. Curtis musicians performed for the medical students and helped facilitate their interaction with these musical elements. At these moments I stayed in the background, to challenge the students’ need for an expert to explain what was happening in the music. This encouraged them to experience the music on their own.

The class read excerpts from *Frames of Mind* by the psychologist Howard Gardner, in order to understand his influential theory of multiple intelligences. The medical students explored their own learning modalities as defined by Gardner—kinesthetic, logical, spatial, interpersonal, linguistic, etc.—and were asked how they might apply these different modalities to engage patients who would need to learn new behaviors while working through changes in their health.

The development of empathy was another of the course’s goals. Once I met these students, I noted that they were already extremely empathetic in addition to being bright and curious. (Perhaps any medical students who would opt to take such a course were, by definition, likely to be flexible and ready to accept other points of view.) When they were all in a room together with Curtis’s three Community Artist Fellows, I was intrigued by the similarities I saw. They shared intense dedication, a desire to make an impact in their chosen fields, and curiosity to reach beyond their areas of expertise.

I focused one class on an ongoing partnership Curtis has with the Penn Memory Center. This facility is one of only three federally funded Alzheimer’s disease centers in the country that include a strong focus on the caregiver as well as the patient. We explored a 360-degree case study of how doctors, social workers, artists, patients, and caregivers can address quality of life for patients suffering from a lengthy and devastating illness, as well as for their families.

Alison Lynn, the associate director of social work at the center, explained the phenomenon of ambiguous loss, as the family slowly loses the ability to communicate with their loved one and has no outlet for processing that loss. The wife of a Penn Memory Center patient talked about her experience caring for her husband over the course of five years, and how her husband’s relationship with music helped get the couple through the experience.

Then Curtis Community Artist Fellow Nick DiBerardino and two graduate students from Penn’s school of social work led the medical students through an activity that has been part of our music workshops at the memory center. Students had to interpret a graphically notated score and perform it for the class, understanding that there are no right or wrong interpretations. The students, who had never considered that they could interpret or compose music without knowing standard notation, were amazed at how effectively they could express themselves.

How will musicians and medical professionals continue to work together? I am convinced we are just beginning to understand the possibilities. At Curtis we have committed to the idea that it is our responsibility as artists to serve our society. We can use music in the field of health and well-being to expand our reach: to amplify voices that go unheard and give comfort to those in need. We continue to seek new collaborators—and we are limited only by our imagination.

Mary Javian is chair of career studies at the Curtis Institute of Music.