

ART OF MEDICINE

Sustaining the Lives of Art Objects

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Abstract

This article explores the complex process of sustaining the lives of art objects and considers ways in which conservation efforts in art museums parallel cultural humility cultivation among health care professionals. Conservators and scientists at the Art Institute of Chicago grapple with a number of ethical questions that emerge when preserving and caring for objects with complicated histories and entangled networks of stakeholders. What follows is an examination of these issues in relation to objects in the Art Institute's collection and the larger histories of art museums and medicine.

Conserving Art Objects

The mission of the Art Institute of Chicago (AIC) includes 3 critical endeavors: to collect, to preserve, and to interpret works of art. The endeavor to preserve artwork, the focus of this essay, manifests in ways both visible and invisible to visitors' eyes. Museum lights are adjusted at precise levels to decelerate the natural deterioration of art objects, hygrothermographs—mechanical instruments discreetly placed in corners of galleries—monitor humidity, and various written invocations to look but not touch underscore the vulnerability of artworks to contact with human bodies. Other elements of preservation are less visible to visitors. The AIC's Department of Conservation and Science¹ maintains behind-the-scenes storage systems designed to maximize objects' longevity, analyzes works in the collection to better understand their physical properties, and undertakes careful treatments of damaged and deteriorated artworks.

Some parallels between the fields of medicine and art conservation are direct, such as the use of advanced technologies to improve methods of care and to develop [close observation skills](#). Historically, conservators and physicians have adapted tools from science, like x-radiography, to look beyond an art object's surface to its internal structure.^{2,3} Other comparisons are more abstract. Cybele Tom,⁴ Andrew W. Mellon Fellow in Objects Conservation, has offered her perspective on conservation as related to the anthropomorphization of art objects and their lived histories.

Artworks are not breathing, metabolizing bodies, but, like human beings, they bear both material and immaterial⁵ characteristics that shift, accumulate, and fade.... They acquire meaning; they give rise to other

creative acts. So if you think of life not only as a characteristic of biologically living bodies, but as a feature of entities and systems that are dynamic in that they change and grow in response to external stimuli and are even generative, then conservation very much endeavors to sustain the “life” of artworks. Its technology is to combine visual acuity, historical and cultural knowledge, and analytical science to make that happen (C. Tom, written communication, September 28, 2018).

Caring for Sacred Objects

Just as ethical decisions about whether and when to use life-sustaining technologies in health care are rife with complicated issues, sustaining the lives of artworks is rarely straightforward. Quandaries and dilemmas arise within the complex and at times conflicted network of stakeholders invested in an object’s life. These stakeholders can include an artwork’s original creator(s), museum curators tasked with overall care for collections, the conservator responsible for preservation, and communities linked to objects through shared artistic practice, heritage, identity, or spirituality.

Take, for instance, a helmet [mask](#) possibly made in the early-to-mid-1900s in West Africa. This object shaped like the head of a wild animal was intended to be worn only by members of Kono, a secret society based in Mali that was responsible for guiding the community’s moral codes. Designed to be used during specific rituals that allowed Kono members to identify solutions for problems in their communities, the helmet mask contains material references to both the terrestrial and the supernatural. Its base has been crafted from wood and covered with a mud-like layer; attached horns and quills render an image of a powerful, polymorphous animal. The helmet mask has also been covered with a thick, supernaturally charged crust, sometimes called a sacrificial patination.⁶ Objects such as these were never meant to be studied or exposed to the wider world. But now in the collection of the AIC, the helmet mask has raised questions about display and preservation. Conservators often work in collaboration with scientists to identify an object’s materials and physical properties, which then helps direct a plan for preservation or treatment. However, the desire to examine—with the aim of preserving—the helmet mask might be at odds with the object’s original purpose and its sacred dimensions, prompting a re-evaluation of what and who should constitute ethical conservation practices.

Conservators and art historians have approached the preservation of West African helmet masks from a variety of perspectives. They have solicited feedback from members of living communities and secret societies who venerate these objects, devised minimally invasive approaches to examining helmet masks, and carried out treatments while expressing ethical values of humility and respect.⁷ Yet queries about competing values remain. Tom, who was tasked with examining the helmet mask and extracting a small sample for analysis, commented on cultural and ethical tensions in the process of studying and preserving non-Western ritual objects.

For many of these artifacts, the process and materials of their making are guarded secrets, and their handling and viewing is highly controlled. Is it then ethical ... to apply a conservator's or scientist's methods—which can involve invasive sampling of material with a scalpel (albeit microscopic amounts), x-radiography, or other technical imaging that reveals things unseen to the naked eye—to the study of an object whose secrets are surely to be exposed as a result? Do these acts, usually lauded in our society as a kind of noble act done in the name of knowledge and education, become acts of cultural colonialism? It's very complicated and messy. It is also a false assumption to say that all people from the originating culture are of homogeneous opinion. Such issues are a part of what makes close work with objects of cultural heritage fascinating (C. Tom, written communication, September 28, 2018).

Lessons From Art Musea for Medicine

Accusations of neocolonialism should not be ignored. Encyclopedic museums like the AIC were founded upon ideals of the Western European Enlightenment, which fostered scientific discovery and humanistic progress, as well as ushering in an era that normalized ideas and practices supporting the worst of human practices: slavery and colonization. In the fields of medicine and anthropology, scientists produced “empirical” studies to justify European racial superiority and [colonialism](#).⁸ Encyclopedic art and natural history museums were established to collect, classify, and showcase cultures of the world, with objects like West African helmet masks entering a new context of display. From the perspective of colonized communities, conserving these works can perpetuate colonialism's legacy, but preserving material culture might also be read as an act of subverting imperialist ideologies.

Historically, humanities scholars have prized written records as markers of great civilizations: Greek poetry, Egyptian hieroglyphics, Babylonian law inscribed in stone. Western scholars in the 18th and 19th centuries often regarded civilizations that encoded ancestral knowledge through nonwritten methods, like oral history, as primitive. Yet we know that civilizations like those in the Andes also developed complex nonwritten processes of recording history.⁹ In some Andean cultures, about which much remains to be learned, extant materials like textiles and ceramics tell stories of their makers. Rather than sustaining the lives of these civilizations primarily through the writings of Spanish conquistadors who colonized the Andes, prioritizing artifacts' preservation asserts an ethical discourse of objecthood that provides an alternative to colonizers' written records. But even reifying the ethical value of a particular object through its preservation requires care. That is, while championing the value of preservation, musea must also acknowledge the relationship between historic objects and their living communities, as well as the potential for well-intentioned preservation efforts to be experienced by members of these living communities as a neocolonialist source of cultural trauma.

In the context of health care, patients, too, benefit from their professional caregivers' awareness of their power in patient-clinician relationships. Just as the same tools can be used in both medicine and art conservation, physicians' and conservators' practices of care and humility can aid both patients and museum visitors in making meaning of their experiences.

Ultimately, health care professionals and conservators are engaged in practices of sustaining lives. By preserving and studying the materiality of an art object, conservation functions as a crucial agent in sustaining the lives of objects and their lived histories. As Tom notes,

If not cared for, studied, and documented, these unique objects can very quickly slide into physical incoherence and dissolution of meaning. Some change is inevitable—again, mirroring human life.... Conservation is about weighing competing values and making decisions that are intended to let the artwork continue to be authentically experienced. There is not a single right way.... The field of conservation has itself changed in recent decades. We no longer think of our role in terms of halting change and preserving an artwork in time but as managing and documenting change to help it endure, with all its history, through time (C. Tom, written communication, September 28, 2018).

The Art Institute's mission to preserve and care for the material embodiments of people potentially silenced by time and history remains critical—as does the medical field's call for greater cultural competence¹⁰ in understanding multilayered ethical debates about the uses of life-sustaining technologies.¹¹

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Editor's Note

Visit the Art Institute of Chicago [website](#) or contact Sam Anderson-Ramos at sramos@artic.edu to learn more about the museum's medicine and art programming. Browse the *AMA Journal of Ethics* [Art Gallery](#) for more Art of Medicine content and for more about the journal's partnership with the Art Institute of Chicago.

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