

## Lifeworks

## Imaging autism

The Medical Humanities Art Program at the University of Manitoba is a student-run extracurricular initiative that allows medical students to explore the emotional dimension of illness through art. Taking inspiration from the medical humanities program at Dalhousie University, where stu-

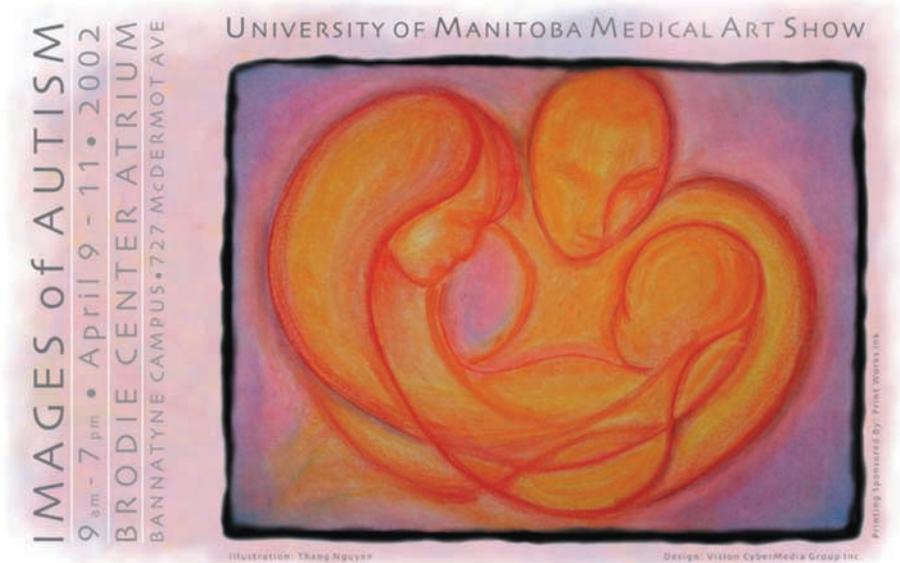


**Ainslie Mihalchuk, 2002. *Imagine that your child is autistic*. Mixed media.** The artist comments: "This sculpture [expresses] the emotions of parents who have discovered that their child is autistic. The father of the autistic child is trying desperately to find a way to penetrate the thick glass bubble of the child's autism. The mother (with her head and hands to the sky) is seeking the strength and courage to continue to work through her grieving, and to deal with the prospect of receiving a second diagnosis of autism for her expected child. The acceptance of autism and its impact on a parent's aspirations and dreams for their children takes time to develop. It is therapeutic for families to use this time to grieve. Nevertheless, there comes a point when parents are able to look beyond what could have been to find the beauty and wonder in what they have. They come to recognize that the love of a parent for a child is unconditional ... and that no challenge or obstacle is so great as to change that. The parents of autistic children are nothing short of heroic in my eyes, and I have the utmost respect for their persistence, determination, and ability to stay positive."

dents have been mounting exhibitions of art on clinical themes for the past four years (see *CMAJ* 2002;166[8]:1072), 23 first-year medical students tackled a topic with profound psychosocial implications. Their exhibition on autism, which ran April 9–11 and will have a second showing at the university's Gallery 1.1.1 in May, was the result of a five-month period in which participants learned from experts in the field, spent time meeting with parents of autistic children and, with the assistance of an art instructor, developed concepts for the visual presentation of their reflections on the lived experience of autism.

The expressed aims of the project were to enrich the students' understanding of this enigmatic condition, to raise awareness about autism and to "demonstrate to Canadians the level of compassion, humanism, and commitment to the quality of care they can expect" from tomorrow's doctors.

Certainly these students have put their best professional foot forward with the sophisticated Web site that accompanies the show, providing a permanent online catalogue. A few of the artworks and artists' commentaries are replicated here; it's worth a visit to [www.vision.ca/mhap](http://www.vision.ca/mhap) to browse through the rest. — *CMAJ*



**Thang Nguyen, 2002. *Family with autism*. Exhibition poster. Chalk pastel.** The artist comments: "Usually, when people think of autism, they immediately think of all the deficiencies of the disorder. It's easy to focus on the problems and difficulties faced by the child. So I decided to create something a little more positive. Every parent that gave a talk to my class impressed me by the amount of love they had for the autistic child. The family unit was amazingly strong, overcoming challenges even the most resilient of people would dare not tackle. So this is my little, warm, fuzzy piece in tribute to all the families with a not-so-'normal' child."

**Beverley Lee, 2002. *Reflections*. Photographic montage.** The artist comments: "One afternoon, as I observed a developmental assessment of a child with autistic features, I saw a young child who appeared a little clumsy, tripping over the doctor's foot, or bumping into furniture. Often, autistic children cannot assess how close objects are, or realize that they should be avoided. In my picture, I have taken three colour photos of furniture: a chair, lamp and table. Mirror images represent how I imagined an autistic child may see these objects: distorted, larger or smaller than they actually are. These objects may have less meaning to them; [this is] signified in black and white. In the background, there are a variety of forms of the same objects ... . Because autism can be so variable in each child, things perceived by one can be seen quite differently by another. Although all these images may look like a chaotic collage, they are still in a repetitive order of chair, lamp and table from right to left and up to down, with a chair in every corner [demonstrating] the need for repetition and routine seen in autism."



## One thousand words



When I was a medical student in the 1970s I found this photograph among a collection of photos in the possession of my grandmother. It shows an operating room of the Russian army during World War I. My grandfather, Heinrich Adrian, is at the head of the operating table, giving anesthetic. The identities of the other people are unknown.

My grandfather was not a trained physician. He was one of the Prussian Mennonites whose ancestors had been invited by Catherine the Great to settle in what had become southern Russia. Because the Mennonites were pacifists, one of the conditions of their immigration was exemption from military service; they were allowed alternatives to being combatants in war, one of which was to serve in the *Sanitätsdienst*, or health service. My grandfather served in this capacity. Apparently, one of his tasks was to bury amputated limbs at the end of the day.

He came to Canada in 1924, settling in southern Manitoba, and spent the rest of his working life farming and trading in farm goods. — *Arthur Wiebe, Family physician, Kincardine, Ont.*