Five questions for Tess Jones[1]
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At some point in our lives, we are patients.

“When that happens,” says Therese “Tess” Jones, “we want cutting-edge treatment, the best surgeons and world-class researchers. We want all of that, the science of biomedicine, but we also want the arts and humanities. We want to be heard, we want our stories acknowledged, and we want recognition of the complexity of our human needs and those of our families.”

Some people “think of medical humanities as frivolous or simply enrichment, but over the years, I’ve witnessed a strong political and social advocacy in which the arts are critical,” she says.

Jones is associate director of the Center for Bioethics and Humanities[3], director of the Arts and Humanities in Healthcare Program[4] at the University of Colorado Anschutz Medical Campus, and an associate professor in the School of Medicine’s Department of Medicine, teaching health humanities and disability studies.
[5]

Along with writing, teaching, scholarship and service, she has developed curricula and educational programs; oversees the Art Gallery at the Fulginiti Pavilion, and the publication of the center’s literary and arts journal, The Human Touch [6]; is the faculty adviser for the Music in Medicine Initiative; and is the editor of the Journal of Medical Humanities? and lead editor for the Health Humanities Reader.

Jones has won numerous awards and accolades, including a 2014 CU Thomas Jefferson Award[7], which honors those who advance the ideals of Jefferson.

“It was such a major honor and recognition for me, and it is more special because now I am on the committee that reviews the nominations,” she says. “The award meant a lot to me because it is a democratic award, given by the students and staff and faculty. I have to say that in my long career and in this environment, it has meant the most to me.”

Away from work, Jones is a runner, loves cooking and is a painter.

1. How did you transition from degrees in English to medical humanities?

I started my Ph.D. in English at CU Boulder in 1982. I was working in American literature, in modern and contemporary drama and gender studies at the time. I began to become aware of a terrible, and, at the time, lethal new disease, which eventually became understood and labeled as HIV-AIDS. Biomedical science did not have a clue as to what was going on, but what I saw were the arts filling in a lot of the gaps in information and addressing concerns and stigma. It was immediate and it was incredibly diverse and relevant. Theater became a sort of public forum for not only informing people about what was happening as we knew it in real time, but also humanizing who was affected. It was an epiphany. I began to see how cultural materials were as significant as biomedical research or medical care in understanding and addressing a terrible epidemic. And that is how I moved from a traditional discipline like English to something very interdisciplinary and applied like medical humanities.

After I finished my Ph.D. in ’90, I was teaching at Boulder in the humanities department. I started a course on AIDS and American culture, one of the first of its kind at a major university. I crossed paths with a psychiatrist who said I was doing medical humanities, and in 1994, I went to a medical school in Ohio for a three-year postdoctoral fellowship in medical humanities.

I came back to CU in 1997 and joined the Center for Bioethics and Humanities. It was a relatively new program and very focused on bioethics, but it had added humanities, and so they needed someone like me. I was recruited to another institution in 2002. Happily, in 2009, I was recruited back here to develop the Arts and Humanities in Healthcare Program. I guess I just can’t leave the University of Colorado. Every time I stray, I come back.

2. You mentioned that as patients, we want caregivers to hear us. How does focusing on humanities prepare students to become better medical professionals?

In my field, there has always been a question of, “Why?” Why, in an already packed School of Medicine curriculum, do we have humanities classes and programs? What instrumental value do the humanities and the arts bring?

I’ll give you an example in terms of observational skills. We have two required sessions with medical students that we have developed with staff from the Denver Art Museum. Our students look at works of art in order to become better and more conscientious observers. Those skills are important when they are thinking about relationship building, understanding why a patient is seeing them or what a patient may be saying or not saying.

The art sessions are interesting because it immediately makes us all aware of how differently we see things. You may see something that I didn’t see at all. Maybe my eyes went somewhere else, or I didn’t pay attention to a particular piece of visual information. It’s important because practicing medicine is a team sport – it takes a lot of different observers and a lot of different critical thinkers. Everyone on the health care team brings a certain skill or perspective or expertise to a situation.

Perhaps more indirectly, when it comes to arts and humanities, is that a deep engagement with them models and sharpens critical thinking skills and offers opportunities to foster empathy and compassion.

In the current issue of Academic Medicine, there’s a piece about 21st-century medicine and artificial intelligence (AI) and the fact that patients have access to a lot of information that is brought into patient-professional interactions. But the one thing the author keeps coming back to is compassion and how compassion is crucial and integral to the professional-patient relationship even as we rely more and more on AI.

The arts and humanities are a way into compassion and understanding because they offer opportunities to tell stories or hear stories or to learn from stories to understand different ways of being. Besides sharpening clinical skills like observation, communication and narrative competence, the humanities and the arts remind of the mystery of human experience. They help us cope with the vicissitudes of moral and mortal life.

One example of this was a project with fourth-year medical students that I was involved with. They went into the Emergency Department with 3- by 5-inch cards. On the top of the card was the question: What worries you most? At the bottom was age, gender and a scale about the acuity of the problem.

Students later talked with the patients and found that more than 90 percent were not worried about what brought them there; it was other things. It was, for instance, how to pay for the visit or whether their daughter would go back to drugs, or the Trump administration. We created an exhibit at the gallery with those cards. Then we made cards available to visitors who could fill them out and clip them to wires we placed on a wall. The silent conversation that took place in the gallery was amazing and we are doing a publication on the project. People weren’t worried about seeing a physician or being in the ER; they were worried about their families, their finances, their children, where they would sleep and whether they would be able to make it another week.

We can talk about how people have complicated lives, but this was a startling reminder that what we think is going on may not be what is going on at all. The humanities and arts offer the opportunity for more understanding and empathy and deeper exploration, because healing is the result of much more than what is on the electronic medical records or what the lab tests say.

3. How do you choose what is shown in the gallery and are there other ways you engage students and the community in the arts?
[8]

We have a curator of exhibitions, Simon Zalkind, who has long been an independent curator in the city, and who was part of the initial conversation about this building, which is an incredible and unique facility, not just for CU, but for the majority of health science centers in the country.

For the most part, Simon and I invite artists to show in the gallery. We don't have a budget line; we operate the gallery through gifts or university support. We do have a mission statement that describes the art we exhibit as having some connection to the human experience of illness and disease or the history of biomedical research, but we don't take it too literally. We have exhibited work that in many ways serves as an opportunity for healing in the broadest sense of the word for patients, families, faculty, staff and students. We have had exhibits that focus on the devastating history of biomedical research, such as what happened in the Holocaust or that tell the visual stories of wounded soldiers, and we have brought in beautiful works of art so that the gallery is a place to seek solace and comfort and celebrate the human imagination.

We opened in 2012 and we have welcomed approximately 65,000 visitors. We have three major exhibits every academic year and then we open it up in the summer for special local exhibits. Right now, the Aurora Artists Guild is in the space, and the Art Gallery has become one great way for the campus to reach out to and collaborate with the community. Last summer, the Department of Surgery commissioned an artist, Arturo Garcia, whose life had been saved by a surgeon in the department, to create incredible portraits of different individuals whose lives were changed, transformed or saved by our surgeons. We brought those portraits into the gallery and it was an extraordinary exhibit for the former patients and their families. At the opening, the chair of surgery talked about the importance of balancing the art of medicine with the science of medicine.

We tend to be entrepreneurial and practical in our choices and are always looking outside for diversity in arts. In March 2020, for instance, we'll exhibit the work of Daisy Patton, who has created needlepoint portraits of minority women from the 1970s in California who were sterilized by force. Many of their stories have been lost.

4. How has health care humanities evolved over the years?

In the late '60s and early '70s, the development of technology was an important element in health care and with that technology, we had to grapple with end-of-life issues, beginning-of-life issues, organ transplants, and reproductive technologies. That's when the field of bioethics really developed. Medical humanities grew up with bioethics, although it wasn't as prominent. But there was a concern among educators that medicine was becoming so technological, the humanistic piece of it was getting lost.

The notion was that bringing people like me into medical education would be a corrective, that teaching literature, visual arts and philosophy, was crucial. Some medical schools saw more value in that than others but teaching and scholarship usually fell to a single faculty member such as an English professor or religious studies professor. When I entered the field, it was still growing in terms of education and scholarship, but we were still very marginalized within health sciences.

That has changed. The humanities have become a place in which cultural conversations around values, cultural and sexual identity, and disability issues can be explored and brought into a focused and rigorous medical education.

The other thing that is different is that the days when students had to choose either humanities or bioscience are past. Universities have fostered interdisciplinary learning, in part because of the very nature of the students coming in who are interested in the social and political elements of health care.

Finally, I would say that the American Association of Medical Colleges, which is the credentialing body of all the medical schools in the United States and Canada, has made it a priority in the past few years that the humanities and arts in medical education are as important as the social sciences and biosciences.

5. What are some of the programs or curriculum you have developed at the university?

One of the things that I have been engaged in, especially since I've been back at the university, is developing programs. The Health Humanities minor has been a successful collaboration with the College of Liberal Arts and Sciences at CU Denver. I take such joy and pride in that program, which is the most popular interdisciplinary program on the downtown campus. Six of our entering medical students this year were Health Humanities minors. The students in that program are not just premeds, they are in public health, physical therapy and psychology.

The Graduate Certificate in Health Humanities and Ethics has been wonderful as well, especially because of its diversity. We have retired physicians, medical students, artists, staff members and social workers around the table in seminars in ethics and humanities to explore issues.

I'm also doing more in terms of advocacy, which takes me back to where I started. I taught a new film course last fall on health care and advocacy and I truly loved it. I'm also cooking up a big publication project on media and health care.

I teach a course on film and mental illness to medical students and graduate students and have found a lot of excitement and a lot of curiosity in terms of media representations and the intersection of media and health care, especially as an advocacy tool.

The question I like to ask is how these representations reinforce stigma. Misrepresentation not only transmits bad information to the viewing public, but it also affects public policy. In some cases, misrepresentations can even affect treatment. As an example, we have a long history in American film – "One Flew Over the Cuckoo's Nest," for example – surrounding electroconvulsive therapy (ECT) and how it is represented as torture. It's shown as this terrible, primitive thing done to patients. That image is so prominent in people's minds that some providers in places like California don't offer the treatment, and it is actually a very successful treatment for serious depression.

Regent Carson won't seek second term on board[9]
[10]

Regent John Carson, a Highlands Ranch Republican first elected to the Board of Regents[11] in 2014, today announced he won't seek a second term in 2020.

His statement:

"I am announcing today I will not be a candidate for CU regent in 2020. I have been honored to serve my community, state and alma mater for what will be 14 years total of public service (eight on the Douglas County School Board and six on the CU Board of Regents). Along with family and career, public education has been a passion of mine. However, it is time for me to focus on new endeavors and to enjoy more time with family and friends.

"I have enjoyed serving my community, university and state and working with my colleagues on the Board of Regents. I look forward to the remaining year and a half of my term of office as regent. I will keep my focus on the regents' civics initiative, tuition affordability, and working with President Mark Kennedy as he leads the development of CU's strategic plan for the years ahead. The University of Colorado is a leading academic and economic engine in our great state, and I will continue to support it as a CU parent and alumnus."

Carson[12] represents Colorado's 6th Congressional District, which encompasses a wide swath of the north, east and south metro area. The district's congressional seat is held by Jason Crow, D-Aurora, who in 2018 defeated Republican incumbent Mike Coffman.

Voters in the 2020 election will choose three board members, each of whom serves a six-year term. District 7's Regent Irene Griego, D-Lakewood, the current vice chair, and District 2's Regent Linda Shoemaker, D-Boulder, are eligible to run for reelection.

An attorney in corporate practice in Greenwood Village, Carson earned bachelor's and law degrees at CU Boulder and a tax law degree from Georgetown. In 2005, he was elected to the Douglas County Board of Education, a group he later served as president, from 2009 to 2013.

Turn in your Tuition Assistance application and go back to school[13]
[14]

It's never too late to go back to school. Whether employees are looking to take a course on management or begin their college experience for the first time, tuition assistance is available. The University of Colorado's Tuition Assistance Benefit[15] provides eligible employees with tuition for up to nine credit hours per academic year (fall through summer) or a 30% tuition discount for CU Boulder dependents.

Faculty and staff who want to save money on their or their dependent's fall tuition bill may begin submitting the Tuition Assistance Benefit through the employee portal[16].

Erica Fukuhara received her master's degree in public administration last spring at CU Denver's School of Public Affairs, after using the Tuition Assistance Benefit for four years. The benefit provides employees nine credits per academic year toward eligible courses at any CU campus. In total, Fukuhara took 36 credits at nine credits an academic year over a four-year period.

"Pursuing a graduate degree was always a longtime goal of mine. When I heard about the Tuition Assistance Benefit, I felt it was too good to pass up," said Fukuhara, business operations and strategy manager at CU system Employee Services. "The benefit enabled me to make education a higher priority in my life."

While attending CU Denver, Fukuhara took classes in the evening, weekends and online to balance a full course load while working full-time in a leadership role. She experienced unintended professional benefits from her experience as an employee and a student.

"It was great to understand the student perspective on campus changes and policies," she said. "When making decisions in my everyday workload, I am able to take into account impacts on students personally."

Fukuhara's advice to those considering using the benefit: Review and follow the tuition application process, and be sure to take advantage of campus resources.

"My adviser was extremely helpful in finding the classes for me to enroll in and balancing work/life," she said. "My academic adviser at CU Denver asked me, 'What do you have to lose? Start now and in four years you will have your degree. Don't start, and you won't have your degree in four years.'"

To get started on an application, visit www.cu.edu/tab[17].

Link in to professional growth with a LinkedIn account[18]
[19]

The learning platform Lynda.com will upgrade to LinkedIn Learning in September. This enhanced tool acts as an online resource with videos and courses aimed at developing workplace skills. Access will expand to all University of Colorado students.

While nearly 35,000 people at work at CU, only 4,500 are connected on LinkedIn. For the best LinkedIn Learning experience, Employee Services recommends faculty, staff and students create a personal LinkedIn profile.

Here are the top three reasons employees should open a LinkedIn profile:

Personalized growth

Faculty and staff have the option to connect their personal profile to LinkedIn Learning. By doing so, they'll get video,

course and training recommendations based on job title, personal interests, professional growth and career goals.

In addition, supervisors will be able to share collections of assets to supplement employee growth. According to LinkedIn, 56% of employees say they would spend more time learning if their manager suggested a course to improve skills.

Build an online resume

A LinkedIn profile acts as a personal online resume, a great way to share professional accomplishments. Whether someone recently received a promotion or became certified in project management, these career growth milestones can be included in their LinkedIn profile.

When an employee finishes a course in CU LinkedIn Learning, a badge will be awarded and can be displayed on their profile.

Connect with colleagues and build your network

Networking strategies have changed, thanks to LinkedIn. Similar to other social media networks, employees can connect with former classmates, coworkers and supervisors to build an ever-growing professional network. With their connections, users can share their personal career accomplishments and latest industry news.

Visit this Employee Services webpage to learn more about the update and create a profile. [20]

Congressional hearing on campus highlights CU Boulder climate change leadership[21]

Hybl Center marks construction milestone with installation of final piece of steel[22]

UCHealth University of Colorado Hospital again named nation’s best for respiratory care and No. 1 hospital in Colorado[23]

Curiosity and courage push boundaries of innovation[24]

Wei Named as History Colorado’s State Historian [25]

Shay to step down in 2020[26]

NSF grant allows Yi to continue work on computer software optimization technology [27]

DiStefano presents at University Climate Change Coalition Summit [28]

Data in demand [29]

Pay equity among faculty a priority in diversity measurement[30]

The CU Board of Regents and administration plotted a course toward addressing big-picture diversity issues by articulating two areas of focus that will measure in part how the university is progressing.

Regent John Carson, who chairs the Diversity Task Force, said he expects recommendations in November for how CU is faring in both traditional diversity measures and viewpoint diversity.

“What we put together needs to be specific and it needs to be measurable,” Carson said.

The focus on measurement for traditional diversity will initially manifest itself with a review of gender pay equity among faculty. It also includes ongoing traditional measures such as demographics among faculty, staff and students, enrollment, yield rates, retention rates and graduation rates. Viewpoint diversity will be measured in part with questions on a benchmark climate survey that is repeated annually.

The effort will take some time, particularly given the large task of assessing pay equity, said Vice President for Administration Kathy Nesbitt, who serves on the Diversity Task Force with Carson, Regents Irene Griego and Sue Sharkey, and Vice President for Academic Affairs Michael Lightner. Nesbitt said the idea to pursue the gender equity issue emerged after the task force had a detailed presentation from the Department of Medicine on the issue and discussions with other key stakeholders. Nesbitt said it’s likely the university will engage a vendor to help with the effort.

CU President Mark Kennedy told the board he intends to hire a chief diversity officer at the system level to oversee the initiatives. The position, which will report to him, will also be responsible for ensuring diversity efforts in the system office (it will have a dotted-line report to Nesbitt in that capacity). It will identify metrics, oversee an annual climate survey, review and facilitate best practices across the system, and benchmark CU’s efforts against other universities.

“It will identify where we’re doing well and where we’re not,” Kennedy said. “This can help address the full range of diversity that we are trying to achieve.

“Some might say it’s that person’s job. In reality, it’s all our job,” he said.

Kennedy said in the lead-up to his July 1 start date and the time since he started, he has met with chief diversity officers on each campus, as well as chancellors and their senior teams, to discuss diversity issues. He said it’s clear that the growth of CU’s student population is coming in students from underrepresented populations and those who are Pell eligible. He also said diversity plays a key role in preparing students for life after graduation, where they will increasingly work in a diverse world on diverse issues.

The new position will also play a role in outreach to diverse groups and communities. A job description is being developed and it's expected to post soon. Kennedy said he is sensitive to adding positions, but stressed enhancing diversity is a university priority.

"I'm only adding a few select positions and looking for efficiencies elsewhere to respond to regent priorities," he said.

He also said he will pull together a diversity advisory committee with people from inside and outside the university to provide perspective.

Links
[1] https://connections.cu.edu/spotlights/five-questions-tess-jones[2] https://connections.cu.edu/sites/default/files/5q_jones_01.jpg[3] http://www.ucdenver.edu/academics/colleges/medicalschool/centers/BioethicsHumanities/Pages/news.aspx[4] http://www.ucdenver.edu/academics/colleges/medicalschool/centers/BioethicsHumanities/ArtsHumanities/Pages/Arts%20and%20Humanities.aspx[5] https://connections.cu.edu/sites/default/files/5q_jones_the-human-touch.jpg[6] http://www.ucdenver.edu/academics/colleges/medicalschool/centers/BioethicsHumanities/ArtsHumanities/Pages/The-Human-Touch.aspx[7] https://www.cu.edu/oaa/recognitions/thomas-jefferson-award[8] https://connections.cu.edu/sites/default/files/5q_jones_art.jpg[9] https://connections.cu.edu/stories/regent-carson-won-t-seek-second-term-board[10] https://connections.cu.edu/sites/default/files/2019_carson.jpg[11] https://www.cu.edu/regents[12] https://www.cu.edu/regents/john-carson[13] https://connections.cu.edu/stories/turn-your-tuition-assistance-application-and-go-back-school[14] https://connections.cu.edu/sites/default/files/tuition-assistance_top.jpg[15] https://www.cu.edu/tab[16] https://my.cu.edu/[17] http://www.cu.edu/tab[18] https://connections.cu.edu/stories/link-professional-growth-linkedin-account[19] https://connections.cu.edu/sites/default/files/linkedinlearning.png[20] https://www.cu.edu/employee-services/career-advancement-learning/lyndacom-upgrading-linkedin-learning[21] https://connections.cu.edu/stories/congressional-hearing-campus-highlights-cu-boulder-climate-change-leadership[22] https://connections.cu.edu/stories/hybl-center-marks-construction-milestone-installation-final-piece-steel[23] https://connections.cu.edu/stories/uchealth-university-colorado-hospital-again-named-nation-s-best-respiratory-care-and-no-1[24] https://connections.cu.edu/stories/curiosity-and-courage-push-boundaries-innovation[25] https://connections.cu.edu/people/wei-named-history-colorado-s-state-historian[26] https://connections.cu.edu/people/shay-step-down-2020[27] https://connections.cu.edu/people/nsf-grant-allows-yi-continue-work-computer-software-optimization-technology[28] https://connections.cu.edu/stories/distefano-presents-university-climate-change-coalition-summit[29] https://connections.cu.edu/stories/data-demand[30] https://connections.cu.edu/stories/pay-equity-among-faculty-priority-diversity-measurement