Providing Compassion through Flow

Lydia Royeen

Western Michigan University - USA, lroyeen@gmail.com

Follow this and additional works at: https://scholarworks.wmich.edu/ojot

Part of the Occupational Therapy Commons

Recommended Citation
https://doi.org/10.15453/2168-6408.1201

This document has been accepted for inclusion in The Open Journal of Occupational Therapy by the editors. Free, open access is provided by ScholarWorks at WMU. For more information, please contact wmu-scholarworks@wmich.edu.
Providing Compassion through Flow

Abstract
Meg Kral, MS, OTR/L, CLT, is the cover artist for the Summer 2015 issue of *The Open Journal of Occupational Therapy*. Her untitled piece of art is an oil painting and is a re-creation of a photograph taken while on vacation. Meg is currently supervisor of outpatient services at Rush University Medical Center. She is lymphedema certified and has a specific interest in breast cancer lymphedema. Art and occupational therapy serve similar purposes for Meg: both provide a sense of flow. She values the outcomes, whether it is a piece of art or improved functional status.

Keywords
occupational therapy, lymphedema, breast cancer, flow

Credentials Display
Lydia Royeen, MOT, OTR/L

Copyright transfer agreements are not obtained by The Open Journal of Occupational Therapy (OJOT). Reprint permission for this Occupation and the Artist should be obtained from the corresponding author(s). Click here to view our open access statement regarding user rights and distribution of this Occupation and the Artist.
DOI: 10.15453/2168-6408.1201
“Oh, that’s a good question!” Meg Kral, MS, OTR/L, CLT, the featured cover artist for the Summer 2015 issue of The Open Journal of Occupational Therapy (OJOT), states as we conduct our interview over dinner. The question is about an overall message that she would like for readers to take away from the article. “Being compassionate and passionate,” she replies, after taking a moment to ponder the question and collect her thoughts. Her message pertains to being an occupational therapist, an artist, and to a viewpoint on how to approach life. This is not a surprising answer from Meg, since both in her personality and client interactions she exudes compassion for her clients and passion for her work. An example of this was given by a former client of Meg’s, who stated how Meg transformed her life by improving her function through the thoughtful nature of her care and interventions.

**Becoming an Artist**

Meg’s passion for art started at a young age and has grown at every stage of her life. She first took formal lessons from a neighbor, Carla, using colored pencils for drawing and shading. Throughout high school and college, Meg sporadically took art classes between her academic and sport endeavors. Life came full circle when Meg and Carla reconnected at Rush University Medical Center (Rush), when Carla was visiting a family member. Meg discovered that Carla had moved to Chicago and started an art studio. Since 2009, Meg has taken weekly semi-private oil painting art classes from Carla.

Meg has greatly valued participating in art throughout her life. For Meg, engaging in art is a way to get lost in an activity. It is a stress reliever, a way to redirect anxiety related to work and life into an activity that can produce a beautiful outcome. Art is an occupation that provides flow for Meg. According to Csikszentmihalyi (1990), an individual experiences flow when he or she is engaged in an activity that is challenging and requires a high skill level, and which possess a timeless quality (Larson & von Eye, 2010).

A study conducted by Larson and von Eye (2010) found that activities that were both intellectually and emotionally engaging produced effects that made time appear timeless when compared to other types of occupations. Being engaged in a meaningful and challenging activity that is timeless (Larson & von Eye, 2010) refers to the process where an individual is lost in an activity. Meg describes experiencing this timeless feeling when creating art or an intervention, as she finds both art and occupational therapy (OT) emotionally and intellectually engaging.

**Becoming an Occupational Therapist**

Meg was drawn to OT for the multidimensional components the field offers. An occupational therapist improves health and well-being by looking at an individual as a unique whole. Meg says that being an occupational therapist allows her to “make a difference in people’s lives that is extraordinary.” She not only treats the physical disability, but also improves the overall function of the individual.

Meg received her Bachelor of Science in Health Leisure and Sports Studies with an emphasis in therapeutic recreation in 2002 from the University of Iowa. She worked for a year as a...
recreational therapist, and in 2004 she enrolled in the OT school at Rush. Since her graduation in 2006, she has worked at Rush in Chicago, IL. She began in acute care and her outpatient caseload slowly expanded, specifically after she became lymphedema certified. Currently, she is the supervisor of outpatient services at Rush. She is in the process of expanding services geared toward breast cancer lymphedema.

**Occupational Therapy, Lymphedema, and Breast Cancer**

Lymphedema is a specialized field in which occupational therapists can become certified. Other allied health professionals, such as physical therapists, can also become lymphedema certified. Lymphedema is the collection of lymph fluid in the soft tissues of an individual’s body (“Lymphedema”, 2015). This occurs when there is disruption in the lymphatic flow of the body. Causes include infection, cancer, scar tissue, or an inherited condition (“Lymphedema”, 2015). The treatment goal is to reduce the swelling (National Cancer Institute [NCI], 2015), and, specifically for an occupational therapist, to improve function. Treatment strategies for lymphedema include, but are not limited to, pressure garments, bandages, compression devices, skin care (NCI, 2015), and manual lymph drainage (National Lymphedema Network Medical Advisory Committee, 2011).

Meg’s interests are currently focused on breast cancer lymphedema. The Surveillance, Epidemiology, and End Results Program (SEER) estimates that in 2015 there have been 231,840 new diagnoses of breast cancer and 40,290 breast cancer related deaths (SEER, n.d.). The 5-year survival rate is 89.4%; in addition, approximately 12.3% of women will be diagnosed with breast cancer in their lifetime (SEER, n.d.). Lymphedema is a common side effect after radiation and surgery interventions for early stage breast cancer (Lee, Kilbreath, Refshauge, Herbert, & Beith, 2008). According to Tsai et al. (2009), having a mastectomy, as compared to a lumpectomy, increased the risk for lymphedema. In addition, an axillary dissection increased the likelihood by 300% (Lee et al., 2008).

Due to Meg’s experiences, she relates well with her clients who have breast cancer. In 2007 Meg had a benign breast tumor. She describes the experience as a “frightening process that opened up [her] eyes.” She believes this experience allows her to have a connection with her clients and to build a rapport that establishes a lasting impact. Lymphedema treatment not only decreases edema, but also allows clients to achieve higher functional outcomes by enhancing engagement in meaningful ADL’s and IADL’s. An example of lymphedema treatment provided by an occupational therapist is decreased edema in bilateral upper extremities that has allowed an owner of a transportation service to re-engage in driving.

While working with clients, Meg is vigilant to use a holistic approach in order to improve their functional status; however, she does not underestimate the value of the biomechanical approach when working with clients. According to Flinn, Jackson, Gray, and Zemke (2008), a biological approach focuses on physiological principals, which include range of motion, strength, and endurance deficits that impede functioning. A biological approach provides a foundational...
framework for Meg in order to create a treatment plan that is client centered to promote engagement in meaningful activities. She believes it is important to touch patients, as the body tells a story. Meg stated, “When I touch radiated tissue, I can tell it is tight and they can’t put their shirt on.” This allows her to identify the greatest areas of deficits and respond accordingly.

Integration of Art and Occupational Therapy

Creating OT interventions is similar to how Meg creates art: She examines the greater picture and desired end outcome and identifies the steps needed to create her next piece of art. Art and OT have a similar process for Meg; she puts forth great effort in accomplishing a designated goal. Both OT and creating art are stimulating for Meg. They are emotionally and intellectually engaging occupations that provide a sense of flow and possess a timeless aspect (Csikszentmihalyi, 1990; Larson & von Eye, 2010). She appreciates the challenge it provides and the sense of accomplishment once completed.

Meg takes prides in a high quality outcome when fabricating a splint or performing a wrapping. Meg has a similar experience with art. She takes great time and care when creating her pieces during the art lessons with Carla. She is currently working on a picture of Rush. Throughout the interview, Meg demonstrates a sense of compassion and passion when speaking about art or describing interventions with clients. The manner in which she describes her art or intervention strategies reiterates her innate nature of having compassion for her clients and passion for art and OT. It is important as an occupational therapist and artist to have both characteristics in order to give great thought to produce a high quality outcome.

Meg’s Featured Art

Meg demonstrated these traits when creating the cover image of this issue of OJOT. The unnamed oil painting is of a beach she vacationed at with her boyfriend and his family. The piece of art is a re-creation of a photograph taken while on that vacation. She completed the painting during her weekly art class and then gifted the artwork to her boyfriend’s family as a fond reflection of the memories they created. Meg appreciates dimension in her artwork, and she used ground pumice stone to add texture to the sand. Another photograph featured in the art gallery is of her late sister and niece during an intimate mother-daughter moment. The piece of art is a re-creation of a photograph Meg came across after her sister’s death. For Meg, it represents the person who her sister wanted to be, as substance abuse was a predominant component of her sister’s life. Meg was inspired to create the piece of art for her niece, to provide a keepsake of her mother she can cherish.

To view a video and samples of Meg’s art work, visit: http://scholarworks.wmich.edu/ojot_occupationandartist/
References


