



# State of the Art:

**Creative Health Talks**

Voices from Creative Health and Well-being Stakeholders.  
Liverpool, European Capital of Culture 2008.

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# State of the Art: Creative Health Talks – Voices from Creative Health and Well-being Stakeholders. Liverpool, European Capital of Culture 2008.



## Opening Comments

There is overwhelming evidence that culture in its widest sense; the arts, sport and community, contributes to health and well-being. I have argued for a few years that not only does culture have this effect but that is its purpose.

I have a rather stern colleague who maintains that “the plural of anecdote is not evidence”, it can be when we work out whose evidence matters. This is not to knock fundamental research because it is important, but when we want to know the benefit of an activity it makes sense to ask the beneficiaries. That is what this report does and what a story it tells!

One of the joys of the last year for me has been the perpetual feedback from people participating in events about how joyful, fulfilled and moved they have been. Gladly I don't have to appreciate this second hand only. I have been uplifted, thrilled and enthused by so many things. My son's initial reluctance to see the “La Machine” – the giant spider, and then his entreaties to be allowed to stay and see her progress around the city, will stick in my mind.

Kris Donaldson, the Chief Executive of the Liverpool Culture Company wrote recently that the way Mersey Care NHS Trust had connected culture and well-being has been inspirational and its achievements “will change the way that this country views Culture as a tool to improve Health and Well-being”.

I hope reading this report will encourage us all to stay involved in this remarkable endeavour.

A handwritten signature in black ink that reads "Alan Yates". The signature is stylized with a large, looped 'Y' and a trailing 'K'.

Alan Yates  
Chief Executive, Mersey Care NHS Trust



## Ambitious plans

I welcome this report and would like to congratulate both Liverpool City Council and MerseyCare NHS Trust for the vision they showed in embedding health and well-being within the Creative Communities strand of the 2008 programme.

Liverpool Primary Care Trust was happy to support many of the projects which this partnership instigated, and we are continuing to take forward the recommendations from the Big Conversation and partners in our strategy development and delivery.

At Liverpool Primary Care Trust, we are actively looking at ways to embed the arts and culture at the heart of our practice, and to encourage our stakeholders and staff to employ creative rigour in their daily work. We are building on a history of world-class innovation in public health, 20 years of work as a pioneering European Healthy City and some recent major successes in SmokeFree Liverpool and Liverpool's Challenge to lose a million pounds.

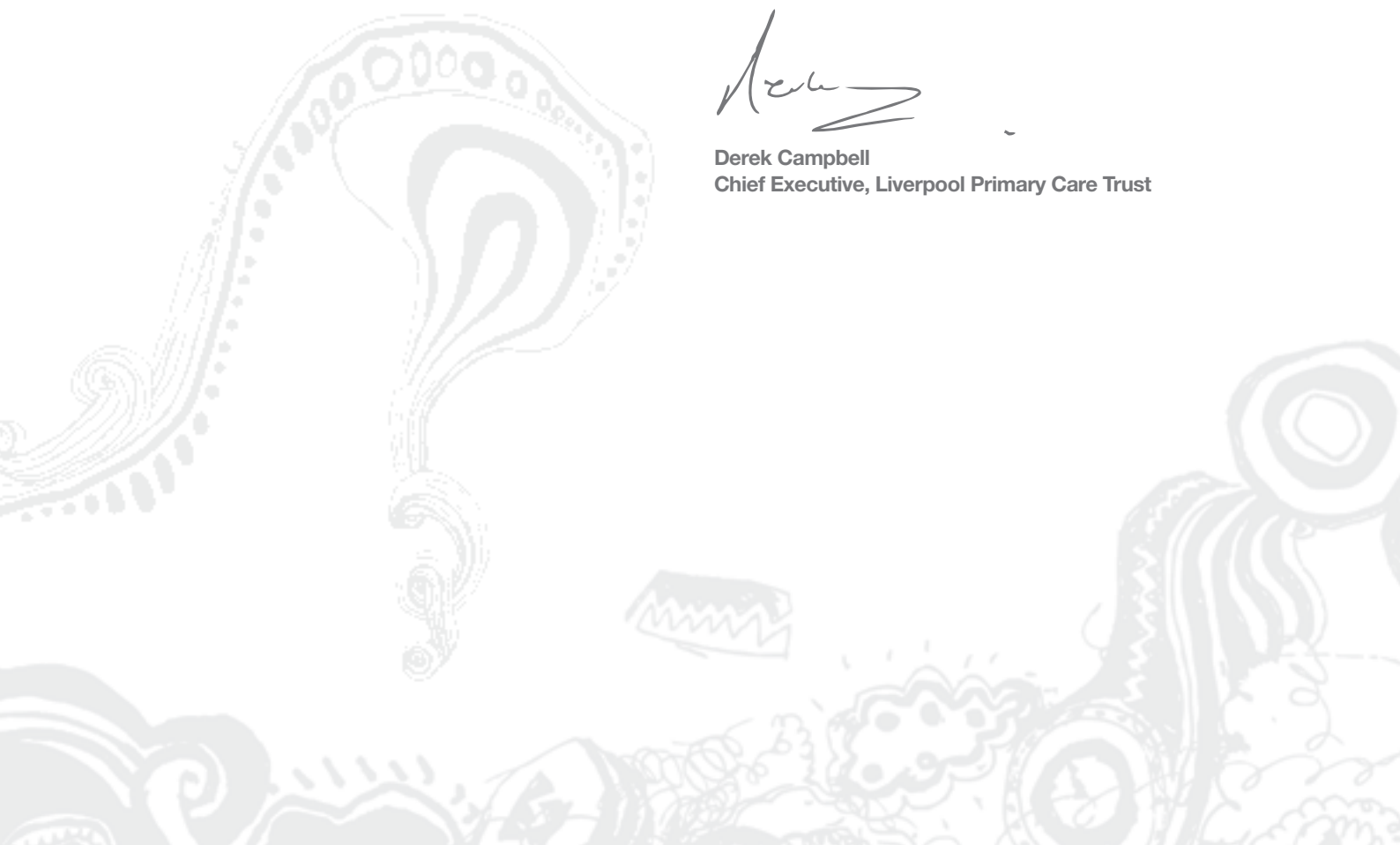
We have a unique opportunity in the short and medium-term to build on recent unprecedented investment to meet the challenge of the economic downturn and continue to improve the health of our people. During 2010 we will be focusing on how to make our public and community health systems sustainable and accessible throughout the whole city.

This report is a timely reminder of the momentum generated by Liverpool 08 European Capital of Culture. Challenges beget innovation. It is by harnessing our creative energy and channeling it to collaboratively tackle some of the stubborn health inequalities we face, that we will make Liverpool a truly thriving, international city.

I look forward to the next part of this journey and on delivering our ambitious plans in partnership.

A stylized, handwritten signature in black ink, appearing to read 'Derek Campbell'.

**Derek Campbell**  
Chief Executive, Liverpool Primary Care Trust





## Building healthier and happier lives

Creativity, arts, culture and their impact on health and well-being have been acknowledged, during Liverpool's Capital of Culture year, as making a significant contribution to Liverpool's regeneration. This work continues to grow and to be build on through partnerships across the health, social care and cultural and arts sectors by large, medium and small organisations and by many champions and passionate individuals. This document provides a resource and a useful stepping off point for what comes next. Next year, the Year of Innovation, health and well-being for Liverpool, provides a great opportunity for Liverpool's cultural sector to partner with public and third sector organisations to help communities to build healthier and happier lives.

*Warren Bradley*

**Warren Bradley**  
Leader of Liverpool City Council



## A sustainable city

Through our recent Human Futures and UN-sustainable programs, well-being and innovation are central to FACT's aims of provoking re-definition of what leadership looks like, this applies to all aspects of art and culture and how it relates to every day life, the people who live in the city, and the national and international communities with which we work.

*"Art's task is to contribute to evolution; to encourage the mind, to guarantee a detached view of social changes, to conjure up positive energies, to create sensuousness, to reconcile reason and instinct, to research possibilities and to destroy clichés and prejudices."* Pipilotti Rist, 2008, Human Futures: Art in an Age of Uncertainty, edited by Andy Miah.



*"By creating partnerships and collaborations with organisations outside health care, staff are exposed to new viewpoints and ideas that can be adapted for health services"* Department of Health, Creating an Innovative Culture.

*"It's never enough just to tell people about some new insight. Rather you have to get them to experience it in a way that evokes its power and possibility. Instead of pouring knowledge into people's heads, you need to help them grind a new set of eye glasses so they can see the world in a new way."* John Seely Brown, seeing things differently: insights on innovation.

A sustainable city needs sustainable people and this has underpinned all aspects of our longstanding collaborations and partnerships with a plethora of health and community organisations and individuals which we have truly enjoyed. Our membership of the LARC partnership has been elemental in joining up programmes, projects and shared aims and here at FACT we are keen to embed the values of collaborations in all aspects of our work.

*Mike Stubbs*

**Professor Mike Stubbs**  
Chief Executive, FACT

*Laura Sillars*

**Laura Sillars**  
Programmes Director, FACT







# introduction

Creative health in Liverpool 08 has been about many stories of individuals, organisations, groups and a city. For some the story goes back many years, for others it is only just beginning. The Big Conversation on December 5th 2008 was a point in time helping to draw together some of the rich and diverse elements of the story so far. It is hoped that this event, along with others, will help the health and cultural sectors make sense of the current picture of creative health. And HOW to provide the conditions for the story to continue and to be integral to the regeneration, health and well-being of a city and its surrounding boroughs for many more years to come. Let us remind ourselves of Liverpool's memorable year as European Capital of Culture that treated residents and visitors alike to many splendid spectacles.



*Young People's Advisory Group | The Artists Group*

A **Starr** Beatle, playing to a crowd of thousands on top of one of the finest neo-classical buildings in Europe; a Sir Beatle raising the metaphorical roof at Anfield, verified by Reuters, as home to the most successful club in the history of English football. ("Yes we've had bad times at Anfield. One year we came second." Bob Paisley) and that magnificent spider, La Princesse courtesy of La Machine, scurrying around the city streets, making use of the fast changing landscape of regeneration as a fitting backdrop.

These are just a few of the many major events that have captured the mood and explosive energy of 2008. But what else? What of the unseen events and publicity shy programmes that often find themselves out of the spotlight, hidden in the shadows of those big stories?

**Liverpool 08 provided the environment, and conditions, for the movement in culture and health to grow. Liverpool 08 an overarching theme across organisations, sectors and neighbourhoods. This theme brought together different messages which nurtured enterprise with arts and culture at its heart, including:**

- culture has a role to play wherever you live or work;
- innovation is expected and supported;
- experimenting and positive risk taking are sought out;
- new and sustained partnerships with cultural and arts organisations are essential for success and for the regeneration and well-being of the city;
- high aspirations are achievable;
- fun and enjoyment are an expected part of this process.

It is an interesting characteristic of this 08 phenomenon that love or hate it – it still included people and provided identity and meaning.



These conditions have been particularly significant for arts, culture and health to grow. The statutory health sector has duties and responsibilities that can stifle enterprise and engagement in activities where outcomes are uncertain. The 08 theme helped there to be an increased willingness “to have a go”. It allowed learning and partnerships across the health sector and new networks to begin to emerge helped by this identification with Liverpool 08.

And indeed simultaneously there has been a growing body of evidence and policy to underpin and support this work. There also seems to be synergy between the local, regional, national and international scene, so that all are nourishing and reflecting each other. Therefore innovation and enterprise in arts and health have been increasingly supported by guidance from the Department of Health, Department of Culture, Media and Sport and by research from higher education institutions.

It is worth remembering the context in which this work is taking place. In Liverpool, men can expect to live 73.2 years and women 77.9 years. This is less than both the regional and national average, and is the lowest life expectancy in England for women. There is a gap in life expectancy of 7.7 years between the poorest and the most affluent fifth of wards in Liverpool. (Community health profile for Liverpool 2006)

**Yet Liverpool has a history of innovation in public health and community life. It continues to need all of its resourcefulness to find different and more effective ways of improving health and well-being.**

There is an exciting area of research that is making it easier to assess the relationship between people's subjective experience of well-being and improvements in a range of domains such as education, crime, productivity and community life. The Mental Well-being Impact Assessment (MWIA) that was carried out on the Capital of Culture programme in 2006/7 reflects a growing interest in developing well-being indicators and scales that measure well-being and life satisfaction.

The MWIA carried out on the Capital of Culture programme demonstrates how culture can impact positively on well-being by assessing cultural activities and processes against a number of indicators for well-being.

Work such as that carried out by Dr Corey Keyes<sup>1</sup> in the US shows us how an absence of positive well-being is a contributing factor to mental and physical illness and as a consequence a burden on health care usage. And therefore relationships can be made between cultural participation, increased well-being and improved general health. However the right conditions need to be nurtured and relationships developed across the cultural, health and public sectors in order to see these benefits for health and well-being.

Cultural activity doesn't have to be consciously linked to well-being to impact positively on it – lets again consider public participation in the outdoor spectacle created by “La Machine”, La Princesse, the giant spider which walked the city of Liverpool for three days. Many people reported enjoying this experience, feeling pride in the city and appreciating culture as a citywide phenomenon. However having an understanding of what factors promote and protect mental well-being such as enhancing control, building resilience and community assets, facilitating participation, promoting social inclusion, and how these can be achieved, is an advantage in embedding a way of doing things which enhances well-being. Creativity and the arts can help to connect us with a deep need to find meaning, to learn and to gain skills and roles, to engage in activities that develop us in relationship with others and to take us to a place that is more than the material.

Until recently arts and medicine were inextricably linked, and of course in many societies this remains the case. There can be the either/or debate: the scanner or the sculpture! Humans seem a dab hand at developing conflicts between what come to be seen as opposites. There is a different frame of reference where imagination and science cannot exist without the other and where people's needs are considered broadly and as a whole.

<sup>1</sup> Keyes. CLM 2004. The nexus of cardiovascular disease and depression revisited. Ageing and Mental Health, 8: 266-274



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## Part One: Creative Health and Well-being Programme, Liverpool 08

## Part Two: One-to-one: The Interviews

## Part Three: The Big Conversation

Liverpool, European Capital of Culture 2008 presented a remarkable opportunity to enable the lives we lead, our own culture and the culture of our neighbourhoods and cities to be regarded as having the power to enhance our health and well-being. Well-being is not something that you get from somewhere else but it is something we all contribute to in what we do, where we are and who we are with. This work is about how we deliver health and how we create the conditions where we are enabled to be healthy.

**This report** is not a definitive guide to all that Liverpool, its boroughs and surrounding districts have pioneered and acted on in the area of arts and health over the last year and those leading up from the original successful bid in 2003. There is insufficient space here to adequately celebrate and acknowledge the hard work, commitment, challenge and motivation that has been necessary to bring creativity into resident's lives, by identifying all those running projects across Merseyside.

Here you will find in **Part One** a summary of the programme facilitated by the Liverpool Culture Company in collaboration with health and cultural partners. This particular viewing platform makes visible the interconnections across many different organisations and groups. Good practice is enabled to grow and become more confident in relationship with others. Relationships allow us to see ourselves, as if looking in a mirror. We can only ever see ourselves as a reflection and Liverpool 08 provided a mirror that enabled creative health to be seen, acknowledged and better understood.

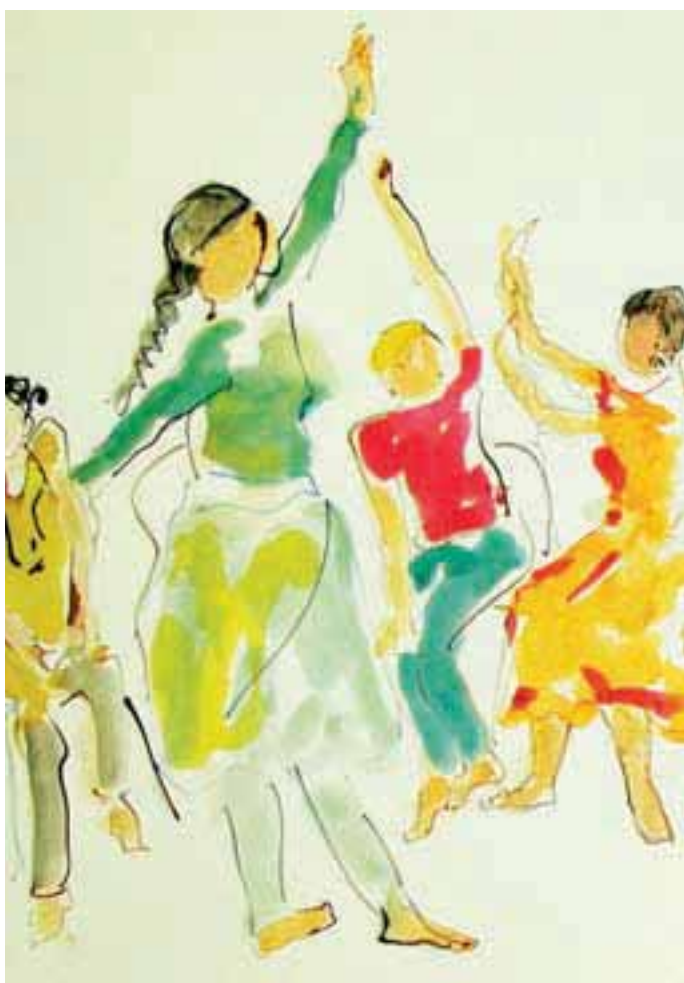
**Part Two** was compiled following research and interviews in the autumn of 2008. It shares some of the experiences of Merseyside's health and arts organisations: to capture at the close of 2008 those championing the benefits of creativity on our well-being. What such champions are doing, what they hope to do, what works and what remains a challenge has then been explored. The findings have been interwoven with research from various articles including those on regional and national strategy, by amongst others, the Departments of Health and Culture, Media and Sport and Arts Council England.

It is a random selection, thin slices of a whole, taken with a view to capturing a sense of the moment and setting this local work in the context of regional and national voices.

**Part Three** focuses on The Big Conversation held on the 5th December 2008 and the themes and recommendations arising out of this event.

**Most important of all, it is hoped this paper will be a resource, that might serve as a catalyst for a conversation about where we want to go and what systems might usefully be put in place to best facilitate that journey. It is hoped the following pages will enthuse us, in arts and health, to find out what works and encourage us to feel confident as advocates of making creative expression, and its benefits, available wherever we might find ourselves.**

As is common in arts and health, the breadth of audience for whom this report is written makes the choice of style and language a difficult one. A paper for academics, health professionals, artists, service users alike, it cannot be all things to all people and the attempt to find a universal language and format is part of the process of developing a common vocabulary in this field.



Noelle Williamson



Young People's Advisory Group | The Artists Group

## Some Definitions

Arts Council England define the arts as

**“literature and writing, theatre and drama, dance, music, visual arts which include crafts, new media, architecture, design, moving image and combined arts.”**<sup>1</sup>

... and **arts and health** as

**“arts-based activities that aim to improve individual and community health and healthcare delivery, and which enhance the healthcare environment by providing artwork or performances.”**<sup>2</sup>

During the run up to 2008, IMPACT, University of Liverpool, were commissioned to carry out a Mental Well-being Impact Assessment on the health and well-being of those affected by the Capital of Culture programme. Seeking an agreed meaning of **well-being** from participants, they offered them several alternatives and the definition clearly preferred was:

**“Well-being is about being emotionally healthy, feeling able to cope with normal stresses, and having a fulfilled life. It can be affected by things like worries about money, work, your home, the people around you and the environment you live in. Your well-being is also affected by whether or not you feel in control of your life, feeling involved with people and communities and feelings of anxiety and isolation.”**<sup>3</sup>

Here are a few more suggestions on well-being with a comment on creativity for good measure:

From a **Philosopher**:

**“Well-being is most commonly used in philosophy to describe what is non-instrumentally or ultimately good for a person.”**<sup>4</sup>

From a **Scientist**:

**“You could say that creativity is fundamental ... and what we really have to explain are those processes that are not creative.”**<sup>5</sup>

From **New Economics**

**Well-being is most usefully thought of as the dynamic process that gives people a sense of how their lives are going through the interaction between their circumstances, activities and psychological resources or ‘mental capital’.**<sup>6</sup>

From an **Art Educator**:

**“Health and well-being is about being strong in yourself, strong enough to challenge what is happening to you and what is happening around you.”**<sup>7</sup>

From an **Artist**:

**“I get up when I want, except Wednesdays, when I get rudely awakened by the dustmen. (parklife!)**

**“I put my trousers on, have a cup of tea, and I think about leaving the house. (parklife!)**

**“I feed the pigeons, I sometimes feed the sparrows too.**

**“It gives me a sense of enormous well-being. (parklife!)**

**“And then I’m happy for the rest of the day,**

**“Safe in the knowledge there will always be a bit of my heart devoted to it.”**<sup>8</sup>

<sup>1</sup> From Report of the Review of Arts and Health Working Group, Department of Health, April 2007

<sup>2</sup> Arts Council of England agree with the definition of Tom Smith found in An Evaluation of Sorts: Learning from Common Knowledge, Centre for Arts and Humanities in Health and Medicine, University of Durham, 2003

<sup>3</sup> Coggins and Cooke A (2004) Mental Well-being Impact Assessment Indicators Screening Toolkit. Lewisham and Neighbourhood Renewal Fund

<sup>4</sup> Crisp, Roger, “Well-being”, The Stanford Encyclopedia of Philosophy (Summer 2003 Edition) Edward n. Zalta (ed)

<sup>5</sup> David Bohm (Nobel prize winning physicist)

<sup>6</sup> [www.neweconomics.org](http://www.neweconomics.org)

<sup>7</sup> From Invest to Save: Arts in Health Evaluation, Exploring the impact of creativity, culture and the arts on health and well-being, Manchester Metropolitan University – download available at <http://www.miriad.mmu.ac.uk/investtosave/reports>

<sup>8</sup> Blur, Parklife lyrics





# **Part 1: Creative Health and Well-being Programme**





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## Creative Communities

The Creative Health and Well-being Manager, seconded from Mersey Care NHS Trust into the Liverpool Culture Company, led the creative health programme. This was an innovative appointment bringing a health care professional into the creative communities team.

The aims and aspirations of the Creative Communities Team as described in the Liverpool Culture Company, Strategic Business Plan, 2005 – 2009 were:

- To ensure ..that the people of the city are central to the celebrations
- That there is ....a need to use creativity to tackle and address issues such as social exclusion, the reconfiguration of neighbourhoods, environment, heritage and health

Over four years, the Liverpool Culture Company oversaw the largest public and community arts scheme in the UK – Creative Communities, through partnerships with a number of public and private sector bodies, the team delivered an £11 million grassroots programme. No other European Capital of Culture has attempted such ambitious levels of participation; the scale and reach of the programme make it unique. At the core of Creative Communities is a simple aim – to harness the creativity of Liverpool's people by making creativity an integral component of everyday life.

**Creative health and well-being was part of the Creative Communities programme.**

## Creative Health Talks

***“One young person was much disengaged with school and learning. Exhibiting behavioural problems in the classroom and consequently on the verge of exclusion. They took part in Stand Out and the teachers began to see this person in a different light; saw them achieving. The teachers saw him doing well – he was very talented, wrote comedy very well, was skilled and creative. He went on to perform in front of the whole school. His self esteem and confidence grew and the whole school saw the achievement. He went on to take part in the Young Comedian of the Year competition and did really well – made it to the final. He continues to work with us on our other programmes, keeping engaged in participation projects. He is still in school and doing better. The teachers felt we went a long way in helping that person.”***

**Jenny Liddy, Education and Community Manager,  
The Comedy Trust**



*Although the Roald Dahl Centre at the Royal Liverpool University Hospital has long engaged in creative health and arts projects, Liverpool 08 provided the catalyst for a bold and innovative programme. Entitled “Plethora,” this encompassed Waiting: Rhythms and Precious, which brought performance art and video art, respectively, into the clinic space. Liverpool 08 also enabled us to partner the Bluecoat Display Centre, the Royal Liverpool Philharmonic Hall, Liverpool Biennial and the University of Liverpool in a multi-site exhibition. New Blood enabled emerging North West artists to use work inspired by biological creativity to communicate with patients undergoing treatment for blood diseases.”*

Professor Cheng Hock Toh, Royal Liverpool University Hospital

## Outcomes – creative health and well-being

Partnerships between the arts and cultural sectors, health, social care and the third sector, demonstrate that health and well-being has been at the heart of Liverpool’s European Capital of Culture celebrations and below are a summary of the outcomes of this work:

- **Delivery of health and well-being benefits to people through culture and creativity**

Below is an extract from the speech “Five Lessons from Liverpool’s Year as Capital of Culture” delivered by Andy Burnham, Secretary of State for Media, Culture and Sport Liverpool, at Liverpool University in January 09.

*“Lesson number three: The ability of culture to contribute to the delivery of world-class public services – most particularly education and health – is under-developed in Britain.*

*“One of the more interesting developments in Liverpool has been the extent to which other public bodies have begun to consider how cultural projects can contribute to improvement in the delivery of public services.*

*“One example of that is how the Liverpool Culture Company, the Primary Care Trust, Mersey Care, Mental Health Trust and others have come together to involve patients and others in need of medical help in a whole range of creative activities.*

*“A focus on culture can add value to the delivery of public services. It can add value and drive improvement where top-down, traditional or formulaic solutions run their course.”*

- **Support the health sector as participants in the Capital of Culture celebrations**

Examples: NHS, city council and third sector organisations were involved in many 08 programmes, such as, “Go Superlambananas” in summer 08 which included NHS organisations; Aintree University Hospital Foundation NHS Trust had a “flock” of Superlambananas.

Organisations were inspired to develop their own events for the Capital of Culture year such as: an exhibition of sculpture in the boardroom of one NHS organisation and the sale of a 2008 calendar by another.

- **Provide a platform to make visible creativity, arts and culture in health care settings and to enhance well-being**

Examples: Hosting annual events such as Midsummer Dreams and The Art of Living conferences; designing and distributing brochures for Extraordinary Journey Festival and Waiting; gaining press coverage; presenting at conferences such as the United Kingdom Public Health conference Autumn 2007.

- **Develop and strengthen partnerships between health, care and arts and cultural organisations and in so doing increase capacity for creative health work to continue into the future**

Examples: There are many examples of new partnerships such as: Liverpool Institute of Performing Arts (LIPA) and Mersey Care NHS Trust developing a dance programme in In-patient acute mental health settings and the Biennial and Liverpool Primary Care Trust delivering healthy picnics to families. And examples of where these partnerships have matured and led to further initiatives such as FACT, now a significant partner in the build of new primary care NHS schemes with Liverpool and Sefton Health Partnership.

The quote below is from a small organisation, Wild Woman, which delivered creative health workshops commissioned by the Liverpool Culture Company 2005/6

*“Wild Woman bid for a contract to provide Creative Health Workshops within the health sector. It was the first time we had bid for a contract in that way. We were delighted to win the contract and the experience of the process, having a steering group etc was amazing. It helped us see the possibilities and to be taken seriously for our work which has always been powerful, effective and innovative. Since the workshops we have set up as a social enterprise and won two big contracts. We secured funding for three years and have been successful in taking creativity into areas where previously the door has been closed to artists. Our programmes are being rolled out in Greenwich and we have interest internationally in our programmes. The support of the Creative Health Programme and the vision and insight of the creative health and well-being manager gave us confidence and I know it helped contribute to the fantastic success we are now enjoying. It left us with a sustainable legacy and is now impacting on provision nationally allowing Liverpool to lead the way in innovative creative programmes.”*

Clare Campbell, Director of Wild Woman Community Interest Company [www.wild-woman.co.uk](http://www.wild-woman.co.uk)

Outcomes continued...

- **Develop programmes with other sectors – education, sport, neighbourhood and community, heritage – using the Creative Communities framework**

Example: Generation 21, a Liverpool Culture Company creative education programme which was a collaboration between education, creative partners and health.

- **Contribute to evidence base for arts, culture, creativity and health and well-being**

Example: An evaluation of Waiting, creative health programme was commissioned by Liverpool Culture Company and carried out by the Commonsense Partnership using an appreciative inquiry methodology. (See link end of Part 1)

- **Develop national and international links and projects**

Example: An 18 month collaborative programme with Stavanger, non EU Capital of Culture – Tales of Two Cities a creative partnership with Liverpool and Stavanger Culture Companies, public health, mental health services and service users. (See link end of Part 1)

- **Foster an action learning approach with health sector and cultural sector partners**

Example: The creative health and well-being strand of Creative Communities benefited from the four-year programme and there was a significant element of learning by doing. It was a period where creative innovation was encouraged and supported. The waiting programme benefited from being delivered over a two-year period. Sam Jones' quote is one person's insight from working in this way.

## Creative Health Talks

*“For the 2006 Biennial we worked with international artist Mario Navarro on the piece Two Rooms. Our group trusted us greatly and must have felt they were supported because each group member at the exhibition stood up to describe their chair in details to the large group. The chairs they had created represented their biography. In the workshop space they had practiced describing their chairs to each other in preparation for the exhibition. Through this they were able to express their brain injury – they had felt that their brain injury was affecting them more than it was – and they found out that this wasn't the case. Our aim was always to get away from the idea of brain injury as a barrier – for them to see that they have lots of ability – that sometimes they can't do something because they haven't done it yet, or learnt the technique yet – not because of their brain injury.”*

Steve Rooney and Sue Williams, Freelance Artists, TAG



*“We have delivered all what we proposed, but as this was a pioneering project we have also dealt with issues that could not be taken into account in the initial proposal and we have had to learn and respond to meet new challenges as they arose. Therefore we have gone beyond the initial proposal in terms of what had been envisaged in the delivery process. Through this process we have begun to develop a new model of delivery for sound and media work within public spaces.”*

Sam Jones, Artist and Project Lead “Wild Song at Dawn”

- Raise awareness that well-being and culture are intrinsically linked

*“Museums and galleries have a key role to play in addressing social exclusion. Music, poetry, dance, drama and the visual arts have always been important to our mental and physical well-being, and collective participation and engagement in the arts is a fundamental element of any civilised society. As E.M. Forster put it: “Art is the one orderly product that our middling race has produced ... it is the best evidence we can have of our dignity.”*

Alan Johnson, Secretary of State for Health speaking at an Arts and Health event in the Autumn of 2008

Example: A new Mental Well-being Impact Assessment Toolkit was piloted on the Capital of Culture programme during 2006 and 2007.

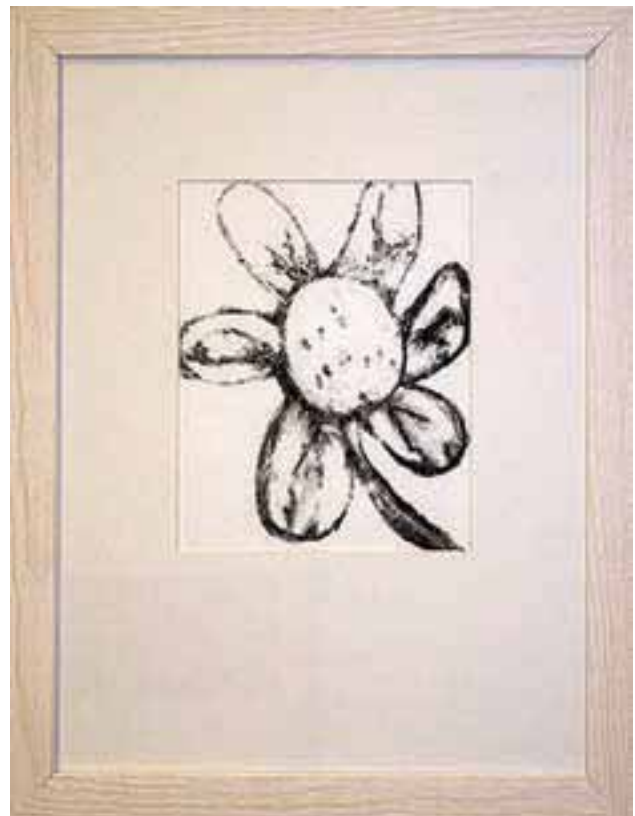


***Mental Well-being Impact Assessment (MWIA) is a way of identifying potential positive and negative impacts on the health and well-being of those directly and indirectly affected by projects and policies such as the Capital of Culture programme. The Impact Assessment results in evidence-based recommendations, which will inform decision-makers how they can increase the benefits and reduce negative effects resulting from the Capital of Culture. The Culture Company has shown an exemplary commitment to improving the mental well-being of the population by commissioning a Mental Well-being Impact Assessment.”***

Quoted from the report Liverpool 08 European Capital of Culture: Mental Well-being Impact Assessment, December 2007. (See link end of Part 1)

Mersey Care NHS Trust as the mental health and learning disabilities specialist Trust was in a particular position to demonstrate this link and its 08 annual report shows the number of cultural and creative partnerships and programmes it has developed in the years leading up to 08 to benefit the health and well-being of service users and staff.

The Liverpool Primary Care NHS Trust has developed a strategy for continued work in arts and health “Looking through the window of opportunity for a world-class collaborative cultural programme 2008 – 2013: Designed to reduce health inequalities”. There is a recognition of the contribution arts and culture make to engagement in health care, health promotion and prevention, treatment and recovery and promoting a focus on wellness rather than illness.



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## Waiting – case study

**Waiting** was a two-year programme for 2007 and 2008 and a key participation and creative health programme for Liverpool, European Capital of Culture 2008.

It provided a significant opportunity to bring together the health sector in partnership with arts and cultural organisations.

***“Waiting ... how much of our life is spent in doing just that? (This 08 creative health programme, bringing arts and creativity into health care settings) is there to make people think and brighten the place up ... it's one of those projects which may also provide a bit of discussion about why the health service should be spending money on culture, rather than say more on cancer research ... Anything that does something to brighten up the environment for patients should be supported especially if it also helps those who are there to offer support ... culture can play an important role in helping get through all life's periods of waiting.”***

**Phil Redmond, Deputy Chair of Liverpool Culture Company Board**  
*Liverpool Daily Post, March 08*

### Background:

The health map of Liverpool and its boroughs is being reshaped by building schemes with partners such as the Liverpool and Sefton Health Partnership, the changing structures within Primary Care organisations, significant new build and changes in delivery by the development of new models of care in hospitals and secondary health care services and increasing engagement and consultation by health services with communities such as reflected in Liverpool's Big Health Debate. These changes are happening when it is recognised that there are significant health inequalities in Liverpool where in some wards the average life expectancy is 10 years less than the national average and where there are higher levels of coronary heart disease, cancer and mental illness.

There is significant need to engage people in their own health in such a way as to instill a sense of hope of living a healthy life and increase a sense of control of developing a healthy lifestyle.

This programme aspired to engage people in these issues using creative approaches and that health and having fun can go arm in arm. Through the creative process we looked to explore in meaningful ways the question: **How we can live more healthily?**

### Creative partners:

The Comedy Trust, FACT (Foundation for Arts and Creative Technology), Chaturangan (South Asian dance development initiative) and other artistic partners.

### Health partners:

Liverpool Primary Care Trust, Mersey Care NHS Trust, Alder Hey Children's Foundation NHS Trust.

### Settings:

Everton Road Health Centre, Vauxhall Health Centre, Life house Brunswick Dock, Marybone Health Centre, Royal Liverpool and Broadgreen University Hospitals NHS Trust, Liverpool Women's Hospital NHS Foundation Trust, The Woodlands Hospice, Parkinson's Disease Society Support Group at the Glaxo Centre, Hesketh Centre (Mersey Care NHS Trust, Southport), St John's Hospice Wirral.

### Evaluation:

#### Waiting was evaluated by The Commonsense Partnership

The evaluation makes explicit and helps our understanding of the journey the arts practitioners have been on along side their health colleagues in the planning and delivery of Waiting. The evaluation's focus is predominantly on physical waiting spaces and explores the following themes: learning about waiting spaces, desires for how these spaces could be and mechanisms for change.

The evaluation makes valuable recommendations for creative intervention in the design, development and use of waiting spaces. The evaluation report argues for the continued investment in arts and health collaborations “to optimise the well-being promoting potential of health spaces”.

The 2008 Healthy Cities Conference took place in Zagreb and the evaluators Denise Peerbhoy and Amanda Kilroy presented The Waiting Evaluation report at this international event. (See link at end of Part 1)

### Description:

The three cultural organisations all delivered creative work linking to the theme of waiting. In some cases this meant reaching out to people physically waiting in health care waiting rooms either to see their GP or in a hospital setting. It also led to relationships being build with those who wait as a part of their health journeys, those living with long-term conditions.

Waiting gave a theme and structure to the creative and health partnerships allowing the work to grow and develop. The programme has acted as a learning space for the cultural and health organisations and has led to further initiatives.



Lawrence Brown





Simon Richardson

*For FACT the Creative Well-being programme has had a massive impact. One thing has snowballed into another. We started with one artwork and ended up working across health centre waiting rooms all across the city. Gradually we have made links with builders of these new health centres and they have invited us to propose new work for the future. We have helped them produce a Design Guide exploring what a good building needs to be healthy and we were able to bring a team of artists, health workers, architects, designers and builders together to develop this. Interdisciplinary work is central to the future of art and health and this experience has taken FACT on a journey. Our programme for 2009 shows how issues around well-being, the body and what we need to do to live well have permeated our thinking."*

Laura Sillars, Programmes Director, FACT

**The role of the cultural organisations during the Waiting programme and what came next:**

## **FACT (Foundation for Arts and Creative Technology)**

"Wild Song at Dawn", created by sound artist Chris Watson, brings the sounds of nature and the outdoors into waiting rooms.

It builds on the work already begun at Alder Hey Children's NHS Foundation Trust exploring sound and health which has led to the Blackbird Corridor installation, individual listening boxes for young patients and the development of Sonic Streams (Sound Art, Science and health). Alder Hey and FACT are now engaged in a collaboration researching the impact of sound on health.

Waiting enabled "Wild Song at Dawn" to be installed in four primary care waiting spaces and therefore enable other health settings to benefit from this experience and learning.

"Wild Song at Dawn" has led to relationships developing between FACT, Liverpool and Sefton LIFT and Liverpool PCT. FACT has been and continues to work in the new primary health care buildings along side health workers, architects, engineers and others in the design and use of these spaces.

A workshop was held at FACT in the spring of 08 about the design of health spaces and brought together artists, architects, NHS estates, NHS managers and health workers.

FACT is now also working in partnership with Mersey Care NHS Trust in the development of the use of space in the newly developed PICU (Psychiatric Intensive Care Unit) and on sound and film projects with young people with mental illness.

FACT has a key role in LARC (Liverpool Arts and Regeneration Consortium) to facilitate the role of arts and cultural small, medium and large organisations in partnerships with the health and care sectors.

[www.fact.co.uk](http://www.fact.co.uk)

## **TCT (The Comedy Trust)**

The Comedy Trust worked with people from the Everton Road area in Liverpool helping them to find the link between humour and well-being. And in a second phase of this work engaged with a group of people with severe communication difficulties.

TCT has been working in education and growing their work in the area of health and well-being. They are part of Alder Hey Hospital's cultural championship programme.

The Waiting programme led to further discussions with Liverpool Primary Care Trust about other ways that the TCT's approach might benefit people's health and well-being. Liverpool Primary Care Trust was engaging people in the Big Health Debate about the development of the delivery of health services locally. It was identified that young people had not been engaged sufficiently in this debate and TCT ran some events to help encourage and include young people's opinions about health care in the PCT's stakeholder engagement process.

These events have been formally reported back to the Health Trust and discussions continue about how TCT might engage young people about health issues over a longer period of time.

It was also recognised by the Waiting programme steering group that there seemed to be links between the interventions offered by TCT and the Expert Patient Programme – that is how humour can help people in their management and approach to long-term health conditions. Although there have been some discussions about these links, a way hasn't been found yet to move this work on further.

The Comedy Trust runs an annual conference and in June 2008 there was an installation of the Waiting programme. TCT, through its work in health care, is helping to facilitate local, national and international networks for humour, laughter and health, and those who work and are interested in this field.

[www.liverpoolcomedyfestival.co.uk](http://www.liverpoolcomedyfestival.co.uk)

## Chaturangan

Bisakha Sarker and a team of collaborating artists performed and engaged with people in participatory workshops within waiting spaces across Liverpool. These artistic sessions included dance, music, story telling, poetry and the creative use of paper craft and ribbons.

A film was commissioned "Precious" by artist Gina Czarnecki. The film was shown at The Big Conversation and in three areas of the Royal Liverpool Hospital. The film has been installed for a period in the new Biomedical Research Centre in a waiting area. And has recently been installed at Aintree Hospital.

Bisakha Sarker is the Director of Chaturangan. She came to the Waiting programme with experience of working with people with disabilities and in the area of health. Bisakha and Chaturangan had a touring dance residency as part of Cork's European Capital of Culture, health and culture programme, in 2005

During the period that Chaturangan has been involved with the Waiting programme Bisakha delivered a conference "Marks of Time". This focused on the older dancer as artist and participant and led to the opportunity of creating a film of Indian Dance influenced exercises for residential homes and over 50 groups in the Warrington area.

As a result of hearing about Waiting, Bisakha was contacted to take part in a research project called "Dignity" run by Islington Council and Help the Aged. Dignity is a training programme for nurses and care workers to explore how they can treat older people in their care with dignity.

"Animated" a dance publication published an article called "When time does not fly" which gave Liverpool and the Waiting programme national exposure.

Bisakha Sarker has shared that Waiting has greatly influenced her personally and professionally. This initiative demonstrated the development opportunities for artists working in health care.

[www.chaturangan.co.uk](http://www.chaturangan.co.uk)

## Some Facts and Figures

### Wild Song at Dawn

Delivered by FACT

Experienced by 50,558 – in waiting spaces in Primary Care settings and in Alder Hey Hospital between late Autumn 07 – 31st March 08.

Internet and press figures for Wild Song at Dawn – 390,000.

### When time does not fly

Delivered by Chaturangan

Internet and press figures – 3,000

Approximately 141 people have participated in waiting spaces.

### Humour and health

Delivered by The Comedy Trust

Comments from participants in humour and health group, who all belonged to a Breatheasy support group for people with chronic lung disease.

***"Its helped to ease the tension on a bad day."***

***"I have learned several new techniques, which could be of use to help members of the support group to which I belong. The aim of the group is to give encouragement and support to people who suffer from chronic lung disease and their carers."***



Simon Richardson

## The Health partners

### Liverpool Primary Care Trust (PCT)

As the Trust responsible for commissioning health services for the Liverpool population, Liverpool PCT is also responsible for bringing together services offered by GP's, Community and Practice Nurses and other community organisations and agencies dealing with health matters across the city.

'Waiting', as part of the successful 2008 programme, was instrumental in encouraging Liverpool PCT to take a strategic approach to investing in the arts and culture to improve the health and well-being of city residents. The collaborative approach taken by 'Waiting' in working with a number of different arts organisations and health settings is the approach which the PCT intends to take with partners to promote a citywide programme of cultural activities in health, community and cultural settings.

The PCT increasingly recognises the valuable role which the third and voluntary sector has to play in engaging with groups of people who do not access health services for social or cultural reasons.

Aligned with a new strategy for Stakeholder Engagement, Liverpool PCT commissioned several pieces of work in 2008, which took a more strategic approach to engagement with the arts and cultural sector.

The PCT's new strategy for Stakeholder Engagement will provide a range of engagement points for people closer to their homes, through new health centres, engagement shops and a model of neighbourhood-working.

Building on the Health is Wealth Commission recommendations, Liverpool PCT pioneering work by collaborating with Liverpool City Council to make 2010 a Year of Health and Well-being.

The PCT see this as a major opportunity to bring partners together to focus on delivering the outcomes we need to change the mindset of this city in looking towards a healthy future.

***"By embedding cultural projects in its strategic planning process and across its delivery programme, Liverpool PCT now is in a position to open a window of opportunity to capitalise on the positive energy that has gone into 2008, and to bring about lasting social change for the whole of Liverpool. This fact has been recognised by senior decision-makers at Liverpool PCT, an organisation that, after many years of reform, has a new team in place committed to a broad, inclusive approach to community engagement."***

***"As Chair of Liverpool PCT I am committed to partnership-working in new domains, taking some risks and valuing grassroots innovation as well as celebrating the long-standing work of our NHS partners in 2010. We are taking seriously our responsibility in joining up thinking across the City/Region and nationally to make this happen."***

Gideon Ben-Tovim, Chair of Liverpool PCT

The PCT website includes a wide range of strategy and research documents which underpin our work.

[www.liverpoolpct.nhs.uk](http://www.liverpoolpct.nhs.uk)



Lawrence Brown

### Mersey Care NHS Trust

Mersey Care NHS Trust, by funding the creative health and well-being manager post in the Liverpool Culture Company has been a leader in the development of sustainable partnerships between the cultural and health sectors.

As an organisation it continues to offer this leadership post 08, particularly in the relationship between well-being, mental health and culture.

***"Culture and health are known to be closely interlinked, especially in mental health and learning disabilities services where that indefinable feel good factor, or mental well-being, is so crucial to the success of everything we do."***

***"But 08 is not the starting point for culture and creativity across our services, more a landmark; an incentive to develop long established good practice as well as a showcase to share and join in partnership projects with others similarly enthused by all things cultural."***

***"... behind this label of "culture and creativity" are many stories of triumph, personal growth, confidence and empowerment – and not just for service users and carers. Culture has a positive effect on those who provide our services, notably through better working environments that we hope will encourage and nurture staff."***

Stephen Hawkins, Chairman and Alan Yates, Chief Executive, Mersey Care NHS Trust, annual report 2007/8



John Moores University Drama Students  
Extraordinary Journey, Royal Liverpool University Hospital

## Creative Health Talks

***“Shy people were really engaged in a lively way ... That’s what I love – when people start playing – when the inner child comes out – and they leave the session uplifted and freer – a wonderful thing to see.”***

**Jessica Bockler, Freelance Artist and Arts Officer for  
Creative Alternatives, Sefton**

## Alder Hey Children's NHS Foundation Trust

Alder Hey Hospital has been an exemplar of arts and culture in Merseyside and the North West, and ably demonstrates the impact creativity can make to health care. Its cultural champion programme has engaged with many arts organisations, which has helped to increase the capacity in the local arts organisations to deliver arts, culture and health. The programme has also helped to increase skills and confidence in health workers about the benefits of creativity and working with cultural partners.

Alder Hey's Cultural Champions: Foundation for Art and Technology (FACT), Walk the Plank Theatre Company, Mersey Side Dance Initiative, The Comedy Trust, Bluecoat Arts Centre, Metal, Royal Liverpool Philharmonic, The Windows Project, TATE Liverpool.

***“For me personally, I think the thing that will stay with me is the making of Chris Watson’s piece, “Wild Song at Dawn”. Here, for three days and nights we set up camp next door to Alder Hey children’s hospital and worked with patients, their families and staff to collect the evening and dawn chorus on super-sensitive microphones, under the guidance of master-craftsman sound recordist and artist Chris Watson. There was a family whose daughter had been in the hospital for 18 months. Every night the mother was sleeping in the hospital. Her brother and sister at home with their dad. Coming out into the park as a group and doing something simple, fun and different was clearly very moving for them. I asked them what they’d enjoyed. ‘The chance to be a family again’ the mother said. So often they are a patient and the patient’s relatives. The long nights away from each other were taking their toll on all of their relationships. This project didn’t solve that, but for a couple of hours they escaped out of these institutional roles and were able to be themselves as a family unit.”***

**Laura Sillars, Lead for Exhibitions, FACT**

### Raising the profile

Waiting has enabled the story of arts, culture, creativity and health and well-being as part of Liverpool, European Capital of Culture to be told publicly and effectively. It has opened up conversations about the impact and relevance of creative health and therefore been a vehicle, which helps to make visible a whole range of work, which is taking place locally.

Information has been shared with the Department of Culture, Media and Sport and Department of Health.

Waiting has been showcased as part of the Queen’s visit to Liverpool in May 2008 and the Prime Minister’s visit in September 08.

Waiting has featured on radio, TV, websites, in Journals and at conferences.



## Other Creative Health programmes

# Creative Health Workshops – 2005/6

### Description:

These workshops, delivered by Wild Women, were intended as a tool to engage health workers, users of health services and creative partners in an exploration of what creative health can mean in different health and community settings. The workshops created a setting for participants to explore the opportunities for creative activity and how it contributes to the promotion, enhancement and maintenance of the health and well-being of patients and visitors, health workers and communities.

### Partners included:

Merseyside Regional Ambulance NHS Trust, Royal Liverpool University Hospital, Libraries and Supported Living services Liverpool City Council, Mersey Care NHS Trust, TATE Liverpool, FACT (Foundation for Art and Creative Technologies), Liverpool Primary Care NHS Trust, Community Arts, Rotunda College, National Museums Liverpool, Wild Women and Liverpool Culture Company.

### Outcomes:

For this initial programme the workshops were very exploratory and certainly made relationships and connections, which enabled later elements of the creative health programme to emerge.



Making More Sense | The Artists Group

There was an Action Learning approach underpinning this project and the learning from this small initial programme helped to establish a way of working with multiple partners in joint projects for the creative health programme over the next 2/3 years.

***“Action learning is both to understand and to achieve as a result of trying out, perhaps more than once, some suggestion for reaching an objective; it is even more itself if, at the outset that objective is not entirely clear. Learning by doing then embraces learning what to be doing. Indeed the achievement is necessarily the understanding.”***

Reg Revans cited in *DIY Handbook for action learners* by Mandy Chivers and Mike Pedlar.

Some of the characteristics that reflected this approach to learning and doing included– agenda set at each meeting by all members, work focused on current issues, regular and in built reflection.

It was unclear in mid 2005 how the Liverpool Culture Company would respond creatively to the health and well-being agenda. This small programme brought together individuals who were prepared to start doing in this place of uncertainty. During this period confidence grew and possibilities for further action emerged out of the work of the steering group for the creative health workshops:

- Annual creative health event for artists, health workers with involvement from the local community based on networking, participation and fun – **Midsummer Dreams 2006 – 2008.**
- Annual conference to inform, invite inquiry and celebrate creativity, arts, culture and health and well-being – **Art of Living 2005 -2008.**
- The development of a strong relationship with the library services across Liverpool who continued to support exhibitions and initiatives.
- The recognition of the need for a network that informs, supports, connects across health and cultural sectors – **this continues to be an unmet need in Merseyside.** An informal network has developed as the result of the collaborative work and partnerships across the health, care and cultural sectors in the lead up and during 08. There is a regional community of practice focused on Manchester Metropolitan University Arts in Health Department. The importance of arts and health is reflected in the emergence of roles combining arts and health within health settings, cultural environments and the borough structure, which brings the realising of a more formal network nearer.

The network developed during this creative and informative period continued to underpin and be a resource for the remaining period of Liverpool 08 and for the delivery of the creative health programme. The steering group for the creative health workshops mirrored in many ways the creative process taking place in health and community settings in the workshops. Methodology and processes impact on what is delivered. A further example of this was in preparation for The Big Conversation at the end of 08. The closer the values and approaches the steering group has to the work they are responsible for delivering the greater integrity will be apparent to those participating.





Making More Sense | The Artists Group

## Midsummer Dreams – 2005/06/07/08

### Description:

A community event which ran for three years bringing together local artists, cultural partners and health, community and care workers as well as people from the local communities around where the events took place.

These events offered the chance to raise the profile of this work and make it accessible in familiar and well loved community settings.

### Partners:

Wild Woman, Neutral Spoon and St Michael's and Lark lane Community Association, Liverpool Culture Company, Aintree University Hospitals NHS Foundation Trust.

### Settings:

June 2006 St Brides Church, Catharine St Liverpool 8

June 2007 Liverpool Parish Church, Our Lady and St Nicholas

June 2008 The Old Police Station, St Michaels and Lark Lane Community Association

June 2008 Aintree University Hospitals NHS Foundation Trust ward areas and in the hospital grounds as part of the health trust's Capital of Culture programme of events.

### Outcomes:

Raised awareness of the potential of creativity in enhancing health and well-being.

Engaged with local communities

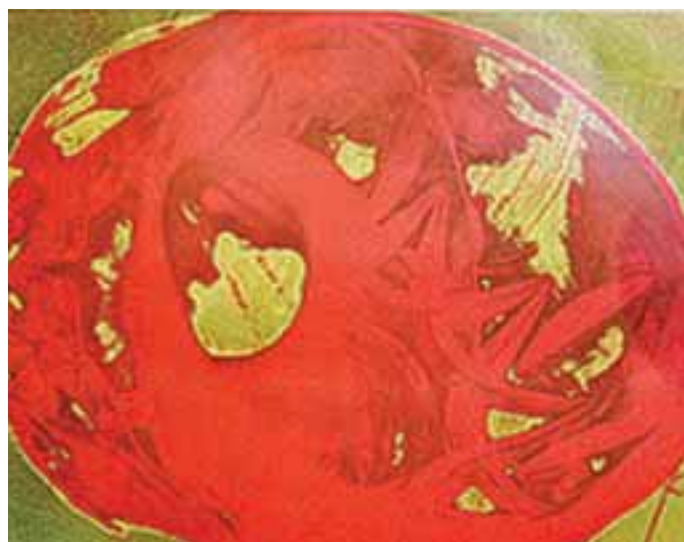
Provided an informal network

### Number of participants:

about 500 attended each day

### Number of artists:

between 50 and 100 at each event



Making More Sense | The Artists Group

## Creative Health Talks

***“One service user took part in an exercise during our Tate workshops. The exercise we did helped her to focus on something specific about how her relationships had changed. It was like a catharsis in the group for her. A moment of self awareness. We were looking at postcards of the Tate’s collection – and this person suddenly realised that new relationships had developed more positively than in the past. We didn’t expect it from this particular person – she wasn’t in that stage of recovery. The art work and the supportive nature of the group in this environment, quickly established this for her, through this art. It was the crux for her – you could see it in her face. It stands out in my career. Only ten minutes but a completely unexpected outcome. Really good.”***

**Ann Gallagher, Head Occupational Therapist, Adult Mental Health, Liverpool In-Patients Services, Mersey Care NHS Trust**

## Making More Sense 2005 – 2008

### Description

Making More Sense is the name given to an exciting three-year art project, offering people who have suffered a brain injury access to many creative mediums.

The Making More Sense workshops have been in effect, places where creativity and health come together within a proactive, positive milieu which continue to aid rehabilitation and instill a sense of well-being and ownership.

### Highlights

- Nine participants from the project collaborated with International artist Mario Navarro on his installation “Two Rooms” as part of the Liverpool’s International Biennial Art Festival 2006.
- Unfolding – an exhibition of art works created by artists Steve Rooney and Sue Williams in collaboration with designer, Damian Cruikshank, and participants of Making More Sense. Autumn ’08 – Spring ’09.

The paper sculptures were a response to the work that Steve and Sue have undertaken over the past three years with former patients of the Brain Injury Rehabilitation Centre at Mossley Hill Hospital, part of the Mersey Care NHS Trust.

All of the works were made from paper-based material – folded to form three-dimensional shapes. Each of these sculptures use geometric design to investigate different facets of the conscious mind. The facets that they explore are: executive function, memory, creative self, social self and industrious self. The sculptures were made for different rooms in Sudley House, part of Liverpool National Museums, and each piece of work was inspired by the way that room was originally used. The house and its rooms related to the brain or the mind and consequently to identity. In particular, the sculptures resonated with the idea of the self in terms of motivation, cognition, emotion and social identity.

Included in the exhibition was a series of artworks created by participants at the Mossley Hill Brain Injury Rehabilitation Centre following their visits to Sudley House during 2008, as part of the Making More Sense project.

### Settings:

Mersey Care NHS Trust

Exhibitions have been held at: the Conservation Centre; Bridewell Studios, Kensington; Liverpool, Sudley House; Liverpool Central Library.

### Partners:

Arts Council England, Mersey Care NHS Trust, Liverpool Culture Company, TAG – The Artist Group.



***I now believe Making More Sense is not art for arts sake but a therapeutic way to help us build alternative pathways in our brains which in turn helps us rediscover confidence in the essence of ourselves without which there is no foundation for future growth and improvement in our abilities. It is as though the creative part of our brain is helping the functional part to heal.”***

**A Making More Sense participant**

## Tales of Two Cities – 2008

### Description

An 18 month collaborative programme between Liverpool European Capital of Culture and Stavanger non European Union Capital of Culture.

Creative work was developed inspired by the themes – What Liverpool means to me? and, What Stavanger means to me?

Artists facilitated a creative response to these themes in Liverpool and Stavanger with mental health service users. In May 2008 a group of mental health staff service users and an artist travelled to Norway to exhibit artwork in the Dynamitt Festival. Then in December 2008 a Norwegian group visited Liverpool and joined in a creative workshop at Sudley House amongst other events and visits.

The early intervention service, Mersey Care NHS Trust, which works with young people experiencing serious mental health problems, have partnered with FACT as part of this exchange in a sound and film project called Head sound. Sound pieces were created by collecting sounds of Liverpool as understood by each participant. The Norwegian group participated in a workshop in The Box in FACT during their December 08 visit listening to the soundscapes and viewing a documentary film made of the process.



*Tales of Two Cities*

### Settings:

Individuals engaged in this programme from across Mersey Care NHS Trust settings including high and medium secure settings, in patient acute adult mental health services, older peoples services and community settings in partnership with Liverpool Community College.

### Exhibitions:

Stavanger Dynamitt Festival, Central Library Liverpool, Parklands Library Speke, NOVAS Contemporary Urban Centre Liverpool, Broadoak Unit – Mersey Care NHS Trust.

### Partners:

Liverpool Community College, Liverpool Culture Company, Mersey Care NHS Trust, TAG – The Artist Group, Stavanger Culture Company, Stavanger health services, Ingrid Toogood Norwegian artist, FACT.

### Outcomes:

Engaged services users of mental health services inclusively in cultural activities as part of the Capital of Culture celebrations.

Raised aspirations of mental health staff, service users and others.

Increased motivation for cultural activity and recognition of the importance of linking with external activities and partners to maximize social inclusion and participation.

**(See link at end of Part 1)**



*Making More Sense | The Artists Group*



# Well-being Treasure Chests – 2007/2008

## Description

The Liverpool Culture Company developed two programmes:

Friendship, a creative education programme. Treasure Chests were developed by cultural partners and toured schools across Liverpool engaging young people in creative activities.

Treasures – a creative, participant programme for all – encouraging people to gather together personal items, which held some special significance for them in their memories.

In creative health these programmes were adapted and built upon. So that during a creative and well-being event in Mersey Care NHS Trust in May 2006 participants were encouraged to consider what they might have in a metaphorical treasure chest to creatively enhance their well-being. This led to a postcard being developed bringing these images together. The postcard and a pack, which expanded the concept, further inspired a festival in 2007 through out this secondary mental health and learning disabilities NHS organisation engaging service users and health staff in conversations and creative activities around the inspiration of well-being treasure chests. In several areas Treasure Chests were created and exhibited.

This work continues as part of a treasure chest discharge and public mental health project in Mersey Care NHS Trust.

And then in 2008 a second treasure chest postcard was developed with events from the Capital of Culture Year bursting out of a treasure chest. This led to workshops, facilitated by Wild Woman, Clare Campbell, with care staff from Nursing Homes across Liverpool to enable them to locally deliver one to one and group activities about how creativity enhances the quality of life. Creative writing workshops were also offered within these settings by Capsica the publishers of the Mersey Minis, five anthologies of accumulated writings about Liverpool for Liverpool's birthday year in 2007.

## Partners:

Wild Woman, Dai Owen, Illustrator, Age Concern, Help the Aged, Mersey Care NHS Trust, Liverpool City Council, Capsica.

## Settings:

Mersey Care NHS Trust settings across Liverpool, Sefton and Knowsley and Liverpool Nursing Homes.

## Outcomes:

Extended accessibility of Liverpool Culture Company's, the Treasures Programme of 2007, to Nursing Homes and Day Centres across Merseyside.



Well-being Treasure Chest | Dai Owen

## Extraordinary Journey – Sept – Nov 2007

*“It never fails to amaze me that Liverpool really is as great as I believe it is – so many firsts, so many great ideas. The only thing is that there is still so much work to be done in the health and well-being sector, as we still lag behind other regions in terms of high levels of non-communicable diseases and poor lifestyle choices. The key has to be to empower people to make better health-related decisions.”*

Louise O'Brien, English Heritage and Extraordinary Journey Steering Group Member

### Description:

A health and heritage festival to celebrate and acknowledge the innovations and pioneers of the past in the area of health and well-being.

*“It is hoped that by learning about the extraordinary, which is within all of us, we will be inspired to make a difference, to implement changes and to create a Liverpool and Merseyside region which is a healthier and happier place to live and work.”*

Warren Bradley, Leader of Liverpool City Council

### Partners:

English Heritage, University of Liverpool, Liverpool Healthy City, PSS (personal service society), Liverpool School of Tropical Medicine, Duncan Society, Liverpool Primary Care Trust, Jepson Hughes Medical Charity, Liverpool John Moores University, Mersey Care NHS Trust, TAG The Artists Group, Terry Speake photographer, Barbara Jones artist, Liverpool Culture Company.



Aintree University Hospitals NHS Foundation Trust | Extraordinary Journey

### Settings:

St George's Hall, The Royal Liverpool and Broadgreen University Hospitals NHS Trust, Aintree University Hospitals NHS Foundation Trust, Alder Hey Children's Foundation NHS Trust, Childwall and Spellow community libraries, Mersey Care NHS Trust – Rathbone Hospital library, Liverpool Royal Infirmary Chapel, The Anglican Cathedral.

Events included; Extraordinary Journey stall at The Big History Show, St George's Hall, photographic and art exhibitions in libraries and the Anglican Cathedral, exhibition of Aintree Hospital's heritage story from fever hospital to a large, modern acute hospital, Drama inspired by Extraordinary Journey performed by John Moores University drama students, walks with Liverpool PCT Walk for health initiative on the Extraordinary Journey theme, lectures given by The Duncan Society, art exhibition of new works by Barbara Jones at the Royal Liverpool Hospital, installation at the UKPHA (United Kingdom Public Health Association) conference April 08.

### Outcomes:

The festival highlighted this important aspect of Liverpool's past, which has been undervalued and used heritage as the catalyst for sustainable public engagement in health and well-being issues throughout Liverpool.

Recognition of Health as a significant cultural component during Liverpool's 800th birthday year.

Recognition of the health community as a distinct, valuable community with a rich and often hidden history whose contribution to this city deserves recognition, raising awareness and providing a platform to highlight current innovative projects.

The use of visioning as a tool for health promotion, not only amongst health professionals but also engaging popular interest so we might consider what factors influence how we feel individually and collectively about our health.

Extraordinary Journey highlighted current innovative projects whilst celebrating Merseyside's vibrant health heritage with a legacy of strengthened relationships between different health and social care settings and the building of supportive partnerships with organisations from the cultural sector.



Intergenerational Drama Group | Extraordinary Journey



## Art of Living Events – 2005-2008

### Description:

These were free annual conferences (the exception was The Big Conversation, see part 3 of this report) that brought together health and cultural partners. The events had a mixture of speakers and more interactive and experiential sessions. The events enabled there to be a sharing and learning around particular areas of culture, arts and health and well-being.

Each event was themed. In 2005 the event was focused around the theme of laughter and humour and well-being, in 2006 the theme was dance, movement and music and in 2007 it was the theme of heritage to reflect Liverpool's 800th birthday and celebrate the end of the Extraordinary Journey Festival.

### Settings:

Royal Court Theatre, Liverpool 2005

The Liverpool Lighthouse, Anfield Liverpool 4, 2006

Crawford House, Toxteth Liverpool 8, 2007

Martin's Building, Liverpool, 2008



Matt Sephton

## Healthy Eating – at city cultural events

### Description:

The city's public health team with joint leadership from Liverpool City Council and Liverpool Primary Care Trust had a local and national high profile smokefree campaign leading up to 2008. This was one of several public health programmes including Liverpool Active City and Liverpool Taste for Health. Liverpool 08 presented an opportunity to raise awareness of some of these issues and to make significant steps to integrate healthy lifestyles into the cultural life of the city. The creative sport manager worked closely with Liverpool Active City, for example.

A small group was established to identify opportunities to integrate healthy eating options into Liverpool city cultural events. The membership of the group included a local councillor, the creative health and well-being manager, Liverpool Culture Company, the Taste for Health Lead, Liverpool Primary Care Trust, a member of Heart of Mersey (registered charity), and a Tourism representative, Liverpool Culture Company.

Examples of activities:

- a. Matthew St Festival 2006 – development of criteria for catering providers to meet delivery of healthy options linked to reduction in price of pitch at the Festival.
- b. Liverpool Birthday Packs – In 2007 for Liverpool's birthday community groups were enabled to run their own street parties. Groups could apply to the Liverpool Culture Company for party packs which included recipe cards of healthy, party food choices. Two sessions were also delivered for people in community groups taking part in the street parties to help with recipe ideas that were tasty, fun and healthy.
- c. Children's Festival, Imagine August 08. Squash Nutrition was supported in delivering healthy options at the festival and training young people in helping to prepare smoothies and healthy food.
- d. In Autumn 2008 the Liverpool Culture Company and Liverpool Primary Care Trust commissioned the Liverpool Biennial to deliver healthy picnics at two autumn events. Both events engaged with families and members of the public with a chef and artist encouraging people to enjoy eating and discussing food.

### Outcomes:

All of the above were small initiatives. However they helped to maintain a profile for this area of health concern and demonstrate the opportunities that exist for city cultural events and partnerships to help to contribute positively towards public health promotion and prevention.

The Liverpool City Council has recently contracted a company to work alongside its Events Team to deliver the catering provision, which will ensure criteria to increase the range of healthier options, and locally produced food.

## Liverpool and Sefton Health Partnership – the company delivering the LIFT projects in Liverpool and Sefton – Design Guide

The Design Guide has been developing during the years leading up to and during 08. Liverpool and Sefton Health Partnership have worked with their commissioners, Liverpool PCT, and other partners including Liverpool Culture Company, to create buildings with the highest architectural and building standards that support and enhance the purpose of these environments – to provide a range of first class health care services. There was a vision from early on that these new primary care buildings would be places to promote well-ness.

The Design Guide is intended to describe in one document what can be expected from these building schemes from technical specifications to the role of art and creativity. It is a unique and ambitious approach to ensure integrity across all the new build schemes.

As this report goes to publication the Design Guide is near to completion. Information will be available soon from the following website – [www.lshp.co.uk](http://www.lshp.co.uk)

### Creative Health Talks

***“The project was set up in schools because of all the things that are happening to the refugees school is the most consistent for the families. Also they often mistrust other services so if the service is based in schools it is something they are familiar with as there is usually an education system in every country. The service aims to help the children settle in, and meet the needs of the children both inside and outside of school. It can identify any trauma they may have suffered. We become part of the school staff. Black and ethnic minority groups do not access the mental health service traditionally but as this is community based, informal and easily accessible it breaks down barriers and is not labelled as a mental health service. The children instead are invited to tell their stories and in doing so I am able to give the school a sense of who the family is and this provides context to any behaviour challenges or difficulties for the children – makes the links and crosses the barriers for the schools.”***

**Carl Dutton, Project Therapist, The Haven Project, Alder Hey Children's NHS Foundation Trust**



Simon Richardson

The examples below are projects which form part of other creative communities programmes; creative neighbourhoods, creative education and heritage. These projects have been selected because of their clear benefits to health and well-being.

### Creative Neighbourhoods – Four Corners

Four Corners has run from 2006 to 2008 and will be funded and supported post 08. The programme brings together people from local neighbourhood communities and artists facilitated through the city council neighbourhood management structure. Regeneration is much more than physical regeneration and this project has engaged with people living through a time of significant change and upheaval where sense of community can be lost. The programme has enabled communities to express themselves creatively.

### Creative Education – Generation 21

The creative Learning Networks Programme in 2008 looked to the future and children and young people from across the city took on the role of town planners and designed a 21st century Liverpool that advocates health and well-being.

Health professionals were part of the planning for Generation 21. Health and well-being criteria were developed so that one of the school's networks, which best met the criteria would be presented with an award. The Liverpool Primary Care Trust sponsored a Superlambanana and an artist collaborated with the winning schools with a design promoting healthy eating.

### Heritage – Out of the Shadows

This was a major reminiscence project recording the memories and experiences of older people who have lived a life in “the shadows” through disability or sense of difference. Individuals stories were collected and made into a film. There was an exhibition in St George's Hall community exhibition space towards the end of 08.

**Supporting documents available on following web link**  
<http://merseycare.nhs.uk/learningzone/creativelinks.asp>

**Click onto Liverpool European Capital of Culture 2008**

Extraordinary Journey Brochure

Extraordinary Journey Log

Extraordinary Journey Evaluation Report

Extraordinary Journey Postcard

Well-being Treasure Chest Postcard

Mental Well-being Impact Assessment, Liverpool 08

Dynamitt – a triumph p1 – 4

Dynamitt – a triumph p5 – 8


Waiting Brochure

Waiting Evaluation – The Commonsense Partnership

The Big Conversation Case Study







# Part 2: One- to-one



# **The Interviews, Autumn 2008**

The benefits associated with the arts on our health and well-being are widely recognised. In his recent speech (16th September 2008), Alan Johnson, Secretary of State for Health, reminded us that “The Greek theatre of Epidaurus built in 400 BC, was a place for pilgrims to honour the God of medicine: A commentator at the time said: ‘They came to cleanse their souls with therapeutic waters and with theatre’.” So whilst arguably under-utilised the union between art and health has a long history. Poised in the centuries between those pilgrimages to the Greek theatre and the listeners to Alan Johnson’s speech this September, Florence Nightingale in 1863, in Notes on Hospitals wrote:



*The effect of beautiful objects, of variety of objects and especially of brilliance of colour is hardly at all appreciated ... I have seen in fevers (and felt, when I was a fever patient myself) the most acute suffering produced from the patient not being able to see out of a window and the knots in the wood being the only view. I shall never forget the rapture of fever patients over a bunch of bright coloured flowers ... People say the effect is only on the mind. It is no such thing. The effect is on the body, too. Little as we know about the way in which we are affected by form, by colour, and light, we do know this, that they have an actual physical effect. Variety of form and brilliancy of colour in the objects presented to patients are actual means of recovery.”*



Intergenerational drama group, Launch of Extraordinary Journey

Amongst Nightingale’s original twelve probationers at St Thomas’ hospital London, was Irish born, Agnes Jones. Agnes went on to revolutionise care in workhouses across the country, as a result of her pioneering efforts in Liverpool. When Agnes started work in Liverpool’s Brownlow Hill she was the first paid workhouse nurse in Britain. Amongst her initiatives, she brought fresh flowers on to the wards, read to patients and gave out pens and paper for them to write with. Such innovations suggest in Agnes a desire to embed a pro-active strategy of attending to the well-being of individuals in her care, as well as their medical needs. In this vein, she was the instigator of the first ever-traditional Christmas at Brownlow Hill with dinner, singing, decorations, gifts, cakes and even a magic lantern show.

Agnes’ concerns for the holistic well-being of those in her care were echoed in a recent interview with Liverpool Women’s NHS Trust Hospital, Communications Officer, Helen Gavin:

*We’re going to get a permanent Christmas tree this year – we always have one but now it’s going to be permanent and we get the schools to come and sing around the tree, it’s lovely, people love it.”*

Helen Gavin, Communications Officer, Liverpool Women’s Hospital NHS Foundation Trust

## Methodology

The quote from Helen Gavin on the previous page came from one of the last of the 15 interviews carried out in the autumn of 2008. Whilst it was impossible to interview everybody involved in this work across Merseyside, a sample of health workers and artists were selected who were known to the Liverpool 08 team and had made a significant contribution to this area of practice during this period of time. The group self selected to some extent according to availability within the time scale.

The seventeen people interviewed over 15 sessions, all work across Merseyside in very different capacities but all have experience of creativity in their professional practice. Their comments have been interwoven with regional and national strategy alongside examples of relevant contemporary supporting papers from recognised bodies working in the field of arts/health.

Interviews were carried out using an Appreciative Inquiry process.

***“Appreciative Inquiry is a way of working with people who have complimentary concerns or interests in order to:***

- ***Understand people and organisations’ view of the world and develop new and creative ways at looking at issues.***
- ***Appreciate and value the best of what people have got and then help to make it even better.”<sup>8</sup>***

**Appreciative Inquiry (AI)** is a whole system- based approach to organisation, community and strategic development, which is focused on strengths rather than problems. AI corresponds to the view that conversation and dialogue brings about change and is based on the simple principle of doing more of “what works”. By concentrating on people and organisational strengths as opposed to the negativity of “what does not work”, creative and effective organisations and processes can be developed.

This was a useful technique in this case, as this collection of individuals had very different experiences but equally important stories to tell. Through this methodology we could not only discover common issues but also celebrate achievements. The questions were carefully chosen not to be prescriptive: free from targets or preferred outcomes prior to the interviews.

The aim of conducting the interviews was to understand what works in creative health work locally and to share this learning.

NB Transcripts are not usually made available in an Appreciative Inquiry approach, as confidential interviews prompt more freedom of expression. On this occasion, for the purposes of this document, permission has been given by the interviewees to publish those responses included in this publication.

## Findings: Emergent themes

It soon became apparent that themes were emerging organically and recurring throughout the interviews. The interviews were analysed according to these emergent themes:

- Relationships,
- Merseyside arts/health co-ordinator,
- Unexpected benefits,
- Research and evaluation,
- Budget and procedural freedom,
- Person-centred approach,
- Risk-taking.

This section of the report explores these common themes.



Matt Sephton



## 1. Relationships

References to the significance of healthy relationships, their nurturing, building and growing, were a dominant feature of every interview. Here are some examples:

***“From the very beginning we shared ownership, shared goals, with mutual respect over what each party in the project wanted to achieve. Relationships that are successful are so because we have communicated with each other and reflected and learnt from our partnerships and then moved forward – essential in relationship building.”***

Jenny Liddy, Education and Community Manager,  
The Comedy Trust

***“Project successes undoubtedly come through sharing. No project is successful without some degree of consultation between all partners. You have got to talk to people before you start otherwise you hit problems.”***

Vicky Charnock, Arts Co-ordinator, Alder Hey Children's NHS  
Foundation Trust

***“Keeping a dialogue is at the heart of project successes. Communicating with each other and listening to each other.”***

Carl Dutton, Project Therapist, The Haven Project, Alder Hey  
Children's NHS Foundation Trust

***The relationship has worked well with English Heritage because I consciously link work to their regional and national agenda – so work fills their agenda too.”***

Eileen Wilshaw, Heritage and Historic Environmental Manager

***“Good partnerships understand where they are coming from in terms of arts and health and understand the dimensions. That it is very useful and powerful in helping people recover, develop and just cope with the systems ... How the clinician and artist work together is the thing to work on.”***

Ann Gallagher, Head Occupational Therapist,  
Adult Mental Health, Liverpool In-Patients Services, Mersey  
Care NHS Trust.

***“Gatekeepers – if you can find them in the local council and the larger arts organisations that's really helpful. Resources then come quickly to you, such as free workshop spaces and equipment.”***

Jessica Bockler, Freelance Artist and Arts Officer for Creative  
Alternatives, Sefton

***“It works well because there is a mutual relationship. We help each other – not a formal thing but we do meet each other's goals.”***

Kim Parkman, Gardener, Liverpool Women's Hospital NHS  
Foundation Trust

***An honest, simple partnership/relationship. Gave us credibility and them credibility. A good partnership.”***

Peter Ward, Director, Hope Street Limited.



Matt Sephton

## Creative Health Talks

***“Another guy, homeless living in a hostel saw a local creative writing workshop and just came in for the free tea – so he could get a tea. But he kept coming and ended up doing an MA in Creative Writing at Liverpool John Moores University. I haven’t got an MA in Creative Writing! ... and he graduated with a First! – all because he could get a cup of tea at a creative workshop. This man stumbled into a group of five people, not a 30 strong workshop that might have ticked all the target boxes – you can’t quantify that.”***

Dave Ward, Co-ordinator, The Windows Project

There is evidence that the movement to recognise the benefits of arts in the promotion of well-being is beginning to gather pace. This May at the Creative Communities Conference in Liverpool, Andy Burnham, Secretary of State for Culture, Media and Sport spoke as an advocate of the benefits of the arts in healthcare and the DCMS states amongst its aims in its 2008 annual report “to improve the quality of life for all through cultural and sporting activities”. In the same report the Permanent Secretary, Jonathan Stephens comments “We have continued to transform the Department in the wake of our Capability Review in order to realise our goals to offer world-class culture, media and sport, to unlock talent and improve well-being.”

And in September 08, Alan Johnson, the Secretary of State for Health, said:

***“I would like to see the benefits of participation in the arts recognised more widely by health and social care professionals... This is not some kind of eccentric add-on – it should be part of the mainstream in both health and social care. And through the Arts/Health group that’s been set up in my department, we will be looking at what more we can do to provide guidance, where to go for advice on best practice and sources of funding for clinicians and arts professionals.***

***“It’s not that we think the arts are some kind of catch-all medical panacea – that listening to the Beatles is some kind of cure for illness – but projects up and down the country that involve partnerships between arts and health professionals are demonstrating real benefits – improving self-esteem, helping people make connections and engendering a sense of community.”***<sup>9</sup>

***For one particular service user – in the month that she had been with us she told us that because she’d had such a wonderful experience making her painting she had the confidence to go out with her family for the first time in many years – the first time since her injury. She went on to attend group events and even travel to the city centre with the support of another member of the group – clearly mixing with the others as herself – not appearing to be concerned with her brain injury. So many milestones – she wished she’d joined earlier as she believes that all of her amazing progress is because of the art project.”***

Steve Rooney and Sue Williams, Freelance Artists (TAG)



Matt Sephton

## 2. A Merseyside arts/health co-ordinator

It is heartening to see Alan Johnson has set up an Arts/Health group in his department to see what more they can do to provide guidance on best practice and sources of funding. One of the significant running themes in the interviews was a call for a regional broker or arts/health co-ordinator to offer a similar role regionally to Merseyside's health and social care professionals and artists:

***“Money is really important but so is networking support from key individuals who understand the priorities of the separate Primary Care Trusts. What we need is a co-ordinator across Merseyside, an advocate who can speak to the more senior people. So we can access someone who can look over the garden fences and see how we can all pool resources and unify approach.”***

Jessica Bockler, Freelance Artist and Arts Officer for Creative Alternatives, Sefton

***“What I would like is a Merseyside wide programme that exchanges ideas, moves collections around, planned from a central point.”***

Paula O'Malley, Arts Co-ordinator and Fundraiser, Aintree University Hospitals NHS Foundation Trust

***“We need someone to work with who spans the Arts and Health.***

***“We want creativity woven into the fabric of what is going on. It's about sustainability. If you want something to work you need to keep it vital and dynamic. Keep moving it on and evolving it – work with professional partnerships. The knock on effect is that everyone moves on. ..From there all other seeds grow. We've got to create something like connections that fire each other.”***

Steve Rooney and Sue Williams, Freelance Artists (TAG)



Matt Sephton

***“It has worked having key people in the organisation driving the agenda.***

***“We could do with a facilitator who could work with clinicians around operationalising projects with artists.”***

Ann Gallagher, Head Occupational Therapist, Adult Mental Health, Liverpool In-Patients Services, Mersey Care NHS Trust

***“(In five years time) It would be good if networks were still strong between those working inside the arts organisations but also by then working alongside statutory sectors as well.”***

Belinda Kidd, LARC Thrive Programme Director, LARC is Liverpool Arts Regeneration Consortium



***I think we need a “Culture Company” with a very clearly defined role that doesn't duplicate what's already being done – a clearly defined department that is not a deliverer but can act as a facilitator and broker to access for us as cultural producers and deliverers. Developing partnerships and developing links. ... Key brokerage is what we need – a link, a facilitating role.”***

Peter Ward, Director, Hope Street Limited



***"I would want to develop a holistic response to people's needs. It's great to have arts projects, but it's even better if we can integrate and use other tools too. So that for example one lady – who loves the arts but also wants to find out about meditation – can enjoy an arts project which also features meditation exercises. We've just done one such course in 'Meditation and Creative Writing' and it was very successful. I would also like to see more cross-agency working. If we could bring them under one umbrella to fulfil this individual's cultural need that would be great. I would like to see more of that integrated, holistic approach in five years, based on people's needs. I would love to see that happen."***

**Jessica Bockler, Freelance Artist and Arts Officer for  
Creative Alternatives, Sefton**

On a similar theme:

***"There could be a really interesting course for artists with a health interest and health workers with an arts interest – working together."***

**Jenny Liddy, Education and Community Manager,  
The Comedy Trust**



Matt Sephton

## Government Policy

The confidence expressed in government publications and speeches may well have grown from several significant documents produced over the last few years. In 2005, the Department of Health began a review of its role in relation to arts and health. The aim was to understand the contribution and potential value of the arts more fully. A working group considered over 300 responses from senior NHS managers, NHS arts co-ordinators, artists, arts therapists, clinicians, charities, individual patients and users, professional bodies, academics, architects, constructors, designers and engineers. They also carried out interviews and reviewed research and supporting literature. The review reflected the Department of Health's function stated in "Creating a Patient-led NHS." The Report of the Review of Arts and Health Working Group, for the Department of Health presented these key findings:

- Arts and health are, and should be firmly recognised as being, integral to health, healthcare provision and healthcare environments, including supporting staff
- Arts and health initiatives are delivering real and measurable benefits across a wide range of priority areas for health, and can enable the Department and NHS to contribute to key wider Government initiatives
- There is a wealth of good practice and a substantial evidence base
- The Department of Health has an important leadership role to play in creating an environment in which arts and health can prosper by promoting, developing and supporting arts and health
- The Department should make a clear statement on the value of arts and health, build partnerships and publish a Prospectus for arts in health in collaboration with other key contributors

A copy of the Review can be downloaded at [www.dh.gov.uk/publications](http://www.dh.gov.uk/publications). A section on what contributors felt were the most important factors in developing and delivering a successful project, is included and provides useful information for anyone beginning their own project. It is interesting to note that many of these key factors emerged strongly in the interviews we held for this report.

### Creative Health Talks

***"Without drama, fuss, therapy, patronising do-gooding, he felt valued as a person. Lots of projects have been inspiring like that ... it's the incidentals."***

**Judith Mawer, Learning and Development Associate,  
Mersey Care NHS Trust**





Matt Sephton

The Review recommended that the arts should be recognised as integral to health and health services. In response to its findings **A Prospectus for Arts and Health**, by the Arts Council and the Department of Health was published in 2007, “to celebrate and promote the benefits of the arts in improving everyone’s well-being, health and healthcare, and its role in supporting those who work in and with the Health Service.” <sup>10</sup>

The publication shows how the NHS engages with the arts and illustrates the many different types of projects and art forms that fall under its umbrella. In the prospectus the Department of Health clearly states:

**“The Department’s policy is that the arts have a major contribution to make to well-being, health, healthcare provision and healthcare environments, to the benefit of patients, service users, carers, visitors, and staff, as well as to communities and to the NHS as a whole.”** <sup>11</sup>

and as for the co-producer of the prospectus ...

**“Arts Council England believes the arts play an essential part in creating a sense of well-being and improving quality of life, and that this, in turn, contributes to the health of individuals, communities and the nation.”** <sup>12</sup>

In its opening pages, Andy Burnham, the then Minister of State for Delivery and Quality, Department of Health and David Lammy who was the Minister for Culture, put their names to the following:

**“Some people might dismiss the arts as simply add-on activities, which have little place in a modern, technically-focused healthcare system. But this is far from being the case ... Those who are involved in the wealth of activity across the country have amply demonstrated the tangible benefits of arts and health. Hundreds of research projects, organisations and individuals are showing that the arts are an integral part of the nature and quality of the services we provide. They reveal the effectiveness and value of arts and health initiatives, and the benefits they bring to patients, service users and their carers, and to communities and healthcare workers in every sector.”** <sup>13</sup>

### 3. Unexpected benefits

During interviews, in common with some of the examples above, there often emerged the comment that some results were almost incidental, unexpected. Whilst those working in the field of arts/health knew they were likely to see positive outcomes, they were often surprised with the actual form these outcomes took.

***“It’s the unforeseen things that are valuable ... seeing people exceed their own personal expectations. You can’t include these things in aims and objectives, they happen in spite of us.”***

Judith Mawer, Learning and Development Associate, Mersey Care NHS Trust

***“Windows engages with thousands of people every year. You don’t know what you’re setting in process.”***

Dave Ward, Co-ordinator, The Windows Project

The comments above also reflect another running theme gleaned from the interviews – that such beneficial but surprising outcomes present a challenge in the setting of targets, evaluating and proving worth in the usual ways. How do you set an aim for a project if you cannot predict the extent or direction of the beneficial outcome?



Matt Sephton

## 4. Research and evaluation

*“From a Jungian perspective I am mindful of the idea of an unconscious dimension to the psyche. Certain therapies revolve around making unconscious aspects of the psyche more conscious. Integrating what is unconscious into the conscious mind; and the arts can be very helpful here. Jung's understanding was that a person's mind is fragmented – we are not fully aware of ourselves, these unconscious aspects are exerting control over us. As a child we are quite a rounded person but over time behaviour is repressed; behaviour is pushed down. Unacceptable behaviour is pushed into the unconscious. But what you've repressed is an important part of who you are and you need to enable this to come out, to make yourself a more whole person. The arts are a primary way of accessing those dimensions of the psyche. Re-introducing the stuff that's been locked for years. In creative activity ... through movement, embodiment, writing, visual art ... we bring light into the unconscious. And as we gain a deeper insight into who we are and how we function in this world, we learn to become more responsible for ourselves, and we learn to embrace all of who we are. The arts are particularly useful here because in art we primarily work through the body and with imagery - and the psyche deals in images. Arts therapy, using arts as a therapeutic medium, mostly kicked off after Jung's theories. With art no explanation is required, we can simply work on things, work through images, expressing, healing ourselves and expressing feelings. The positive changes on the surface are results of what is happening under the surface. As a result participants become happier, healthier and start to exhibit those values we usually attribute to arts and health: self-esteem, starting to make friends, eating healthier, stopping smoking and so on. All individual journeys with benefits that differ for each person.”*

Jessica Bockler, Freelance Artist and Arts Officer for Creative Alternatives, Sefton

The concept of well-being has been categorised into two key types: eudaimonic well-being which concerns personal development and fulfilment: defining good life in terms of achieving one's full potential and hedonic well-being which is about satisfaction and happiness.

*“Engaging in culture, creativity and the arts significantly improves health and well-being by engaging people in challenging activities and giving them the opportunity to be creative and experimental. This in turn gives people the confidence and capacity to see and do things differently. This leads to raised expectations, and a greater inspiration and motivation for learning and personal growth, which were felt to be central to promoting feelings of well-being.”*



Matt Sephton

*“It was acknowledged that well-being is not always about feeling good and in fact many processes of change involved experiences of great personal challenge and difficulty. In gaining the capacity to rise to those challenges, by learning and developing personally, and gaining more control and mastery of their environments, people experienced a resultant ‘Eudaimonic’ form of well-being. (Eudaimonic well-being encompasses ideas of self-development, personal growth and purposeful engagement and has an impact on both mental and physiological health (Ryff et al 2004)”<sup>14</sup>*

The proposition of two types of well-being raises questions of what is happening when we take part in creative activity or are observers of creative expression. For example, could it be that we are improving our perception of how we are feeling? Balancing out the negative experiences of our hedonic well-being (satisfaction and happiness) by improving our eudaimonic well-being (personal development, fulfilment) through creative expression? It could be argued that it is difficult to feel satisfied and happy when unwell, experiencing pain or discomfort, even boredom perhaps, separated from home, family or simply, the familiar. However can we actually balance that out with improving our exposure to more positive experiences? Can we improve our personal development and fulfilment through these experiences, helping to achieve more of our potential through mindful creativity and as a result making us feel better even though our physical health and environment remain unchanged?

*“One thing we've come across is eudaimonic well-being, meaning complete well-being – nourishing the self – it's about the self and feeling good. It's not just the benefit of a very holistic approach that we're interested in. If you feel uplifted, you can start to feel better about yourself and how you view how you feel. With brain injury, you might not get better but if you feel better about yourself, you feel you're getting better. A lot of the anxieties and fear can go, with more confidence you are able to see things more clearly.”*

Steve Rooney and Sue Williams, Freelance Artists, TAG

Other disciplines too, are working hard to find a way to evaluate this emerging area – with a view to discovering new ways of evaluating health/arts. An Evaluation of sorts: Learning from Common Knowledge by Research Associate of CAHHM, Tom Smith is an exploration of research and evidence. He argues that by dividing the outcomes and what is happening during projects into different approaches, areas and sub-sections, it becomes easier to begin to create a framework for developing research in arts/health for each of these groups by identifying measures of impact. His essay adds to the debate on how we might move forward to develop research techniques that meet needs and evaluate what is going on in this unique field.

For example, Smith has created a diamond figure showing different clusters of activity, with many dimensions on the diamond. Impact that could be evaluated varies across each of six approaches he identifies in his essay and these approaches all have a place on the diamond:

- **Creative expression is intrinsically healthy:** Aiding expression (seen as central to health), developing individuals sense of their own health.
- **Art is therapeutic:** Enhancing individual well-being, reducing stress. Individual health improvement.
- **Supporting and Improving healthcare:** Easing burden on staff, improving recuperative environment.
- **Creative Learning:** The development of more engaging information about health (arts as a perspective, messenger and research tool) for communities and health services.
- **Community arts:** Influencing health behaviour, through raising awareness/exploring health issues in communities through creative activity.
- **Social arts:** Improving self-assessed health status, strengthening relationships, producing positive social experiences.

**Better understanding of these different dimensions will:**  
**(a) help make more sense of a diverse field, (b) shows more clearly the potential contributions of the arts to health and (c) inform future research on health impact.** <sup>15</sup>

It would seem that this critical essay is one of a number of useful resources to clinicians and artists alike:

**“What interactions do arts afford that others do not? What exactly do projects add to health, however defined? Why should the guardians of public resources support this activity over any other? ... While it is common to blame practitioners for being resistant – an accusation not without foundation – researchers themselves must face the limits of the methods they bring with them and reflect on how efforts can be shaped differently. Community-based arts/health is an emerging field that is without a clear knowledge base.”** <sup>16</sup>

Tom Smith's evaluation is part of the work of The CAHHM, Centre for Arts and Humanities in Health and Medicine, established in 2000. This is a research centre based in Durham University's School for Health, working closely with Arts Council England, Department of Health and the Department of Culture, Media and Sport on policy development in arts in health and health care environments. There are lots of relevant reports available to download on their website <http://www.dur.ac.uk/cahbm/>

Dr Rosalia Staricoff of the Chelsea and Westminster hospital is another key figure in research. Her Arts in Health: A review of the medical literature (2004) is intended to “strengthen existing anecdotal and qualitative information demonstrating the impact that the arts can have on health.” Dr Staricoff's review is another important document for those interested in clear examples of projects and their outcomes. The review played a significant role in the development of Arts Council England's first national arts and health strategy.

Amongst those already working in this field however, there is an understandable fear that a rigidly structured evaluation process might itself impact on the outcomes and delivery of the work.



***I enjoy the variety and flexibility in my role. I have control to develop ideas and this is not really a traditional mental health role which would be restrictive and I would feel stifled by the traditional system. The freedom allows me to run with things and test them out.***

***“I would like to remain as flexible as now – to not get constrained by government pressures to perform in a specific way. Don't know what will happen in the future but I want our projects to remain as flexible and creative as they are now.”***

Carl Dutton, Project Therapist, The Haven Project, Alder Hey Children's NHS Foundation Trust



***“I like the freedom to develop projects – like the fact that there are generally no time constraints. Things can be allowed to develop organically and slowly.”***

***“We have the time to let the arts projects grow organically. It happens gently, we take our time with projects.”***

Vicky Charnock, Arts Co-ordinator, Alder Hey Children's NHS Foundation Trust

But this resistance is about inappropriate methodology interfering with results. Those working in this field are equally embracing and pioneering appropriate research. Vicky Charnock's comment on freedom above is matched by enthusiasm for quality research:

***“It has been quite surprising to find the birdsong CD is being used on patients before procedures – before theatre to calm down. We will be carrying out research in January 2009 using clinical trials to see what's happening when this is being used. It has been a useful tool. The outcome could be very exciting.”***

Vicky Charnock, Arts Co-ordinator, Alder Hey Children's NHS Foundation Trust

And from others:

***“***

***On research – UCLAN are conducting research on one of our programmes. It is being done as part of the LIPA dance programme. We use a lot of film as part of the evaluation. When the staff, senior clinicians and other volunteers, service users' representatives, sceptical senior clinicians – when they see there is not formal therapy, formal therapeutic activity, they were worried in case we were opening up a can of worms.”***

Ann Gallagher, Head Occupational Therapist, Adult Mental Health, Liverpool In-Patients Services

***“***

***One thing I would like to do is get an evidence based research project going. I have three sisters in medicine. Their background is in evidence based medicine. It is important we start measuring actual benefits to students, staff and patients.***

***“A good research programme is what I want.”***

Paula O'Malley, Arts Co-ordinator and Fundraiser, Aintree University Hospitals NHS Foundation Trust

***“With expert voices in research and evaluation arguing for greater clarity, we can hope to find the means and evidence to further improve the credibility of arts/health and take another step towards making it's practice an integral part of our thinking on healthcare and improving the prospect of commissioning.***

***“We need to continue without medicalising creative arts – we need to keep it fluid, working at different levels.***

***“We need to acknowledge the creative arts as part of the treatment – not in a medical way – but that it is important to recovery and in order to support clinicians in being creative in their use of budgets – to trust clinicians.”***

Ann Gallagher, Head Occupational Therapist, Adult Mental Health, Liverpool In-Patients Services

***“The research agenda for arts/health should be shaped by both arts and health sectors. Questions that are explored have to be central to the health agenda, because if they are not, why would health be interested in supporting this activity.”*** <sup>17</sup>



Matt Sephton





Matt Sephton

UCLAN mentioned in Ann Gallagher's quote on the previous page is the University of Central Lancashire, like CAHHM, they work in the field of Arts and Health research and evaluation. Another prominent player in this area is Arts for Health at Manchester Metropolitan University, who in partnership with Arts Council England, Arts Council North West and the Department of Health, Public Health Team Northwest, are working to strengthen the capacity of the North West Regions' Arts and Health Community through networking and training opportunities and building the evidence base as to the effectiveness of creativity, culture and the arts on health and economic outcomes.

An extremely useful resource: reports, events, blogs and research can be found on the Manchester Metropolitan University website on [www.artsforhealth.org](http://www.artsforhealth.org)

CAHHM, UCLAN and Arts for Health, offer valuable examples of the many bodies working to forward this emerging field, with useful resources for those interested in this area.

## Creative Health Talks

***"There have been some lovely little things. Particularly proud of Kaleidoscope Community Singers. They came together doing one of my programmes at Liverpool Lighthouse on heritage. The group that had come to do the workshop sang on stage at the end of the day with a professional singer. It went out live on radio, unknown to them and three days later they had bookings as a singing group. They have been performing in pubs, were representatives of Liverpool Capital of Culture at the Houses of Parliament and have performed in Sheltered Housing. It's been a new life for them, new experiences, lots hadn't been to London before. Empowerment and people from Anfield coming together to sing through a community archive project."***

**Eileen Wilshaw, Heritage and Historic Environmental Manager**



Making More Sense | The Artists Group

## 5. Risk taking

Risk taking was brought up several times by those interviewed and always cited as a positive: an ingredient for stimulating change –

***“It has been good to be seen as the service that takes the risk, the forerunner to arranging such things operationally for our service users. We have reaped the benefits and are watching the things we have done spread to different areas in the Trust. Like a mushroom effect. Allowing the service users to be challenged. Taking positive risks.”***

Ann Gallagher, Head Occupational Therapist, Adult Mental Health, Liverpool In-Patients Services, Mersey Care NHS Trust

***“The first time we held workshops in Alder Hey, we were working on new ground. It was trial and error the first time we delivered a workshop with the play specialists but the energy and positive attitude at Alder Hey made our job a lot easier.”***

***“All the cutting edge, innovative work has acted as a catalyst for everything else we’ve done. It has been the most enjoyable and the work I am most proud of.”***

Jenny Liddy, Education and Community Manager,  
The Comedy Trust

***“The hospital likes to take risks. It also relies on the artist giving and the health professionals taking a bit of a risk. I’ve seen attitudes change in the two and a half years here. It was difficult when I first came. But people now see things happening and money being put in. People know the dance project is running for example, that it happens and is great. Now more staff are wanting to get involved.”***

Vicky Charnock, Arts Co-ordinator, Alder Hey Children’s NHS Foundation Trust

For an international insight into the health/arts debate, news on arts and health/social care can be found from the IFACCA, the International Federation of Arts Councils and Culture Agencies who describe themselves as “the global network of arts councils and ministries of culture” with a vision for “a dynamic network, sharing knowledge and creating understanding to enrich a world of artistic and cultural diversity”. A search engine on their site <http://www.ifacca.org/> allows you to get to grips with an international perspective on the area of health/arts. In response to the interest in this “fast-emerging field” the IFACCA also announce the launch of a new peer-reviewed journal Arts and Health: An International Journal for Research, Policy and Practice in 2009.

Keeping an international flavour, a special edition of the Journal of Health Psychology was published by Sage, USA in March 2008 entirely dedicated to articles exploring the links between health psychology and the arts, as this is “one area that remains under-explored”.

This lack of understanding might for the moment, in this era of pioneering projects, bring with it some benefits. Many of those interviewed felt their success was in part due to a certain amount of freedom to develop projects and allow them to evolve without interference.



Matt Sephton

### Creative Health Talks

***“On performance day, one lady, who always lay prone, seemingly asleep, almost comatose ... as the Shakespeare monologues started by the young people the other patients were rapt with attention and this woman, this one lady struggled and struggled to get up and say how wonderful it was.”***

Paula O'Malley, Arts Co-ordinator and Fundraiser,  
Aintree University Hospitals NHS Foundation Trust

## 6. Budget and procedural freedom

The appreciation of flexibility with regard to budget and procedure isn't about a resistance to financial control and governance but rather a way of working in an emerging field. A person centred approach prevents anticipation of budget allocating in a traditional structure because the arts projects develop as needs emerge. This improvised system is likely to become more structured as budget and procedural ways of working are developed to suit all parties collaborating in this discipline and if the arts and health movement is to become embedded in our health organisations.



Matt Sephton

***"I have in the past enjoyed the freedom in the budget to be creative – allowing practitioners to have control but this has changed and I feel like my hands are tied because there is no flexibility on budget anymore. I am dependent on my manager on understanding the benefits of creative arts."***

A clinician

***"We have had a lot of freedom to develop our work as we see fit. So our work has really been able to respond to the needs of our clients in Sefton. We can develop the budget as we see fit, reallocating monies and trying new approaches, as well as building on that which works. And we have flexibility in the content of the programme. This has meant that artists can truly respond to their groups and letting ideas and work practices evolve."***

Jessica Bockler, Freelance Artist and Arts Officer for Creative Alternatives, Sefton

***"Having the creative freedom is really important. Another privilege of this almost unique position is the ability to talk to the Chief Executive – have the potential to influence. I feel I've used this constructively and respectfully but also radically. The Chief Executive has been very supportive of the agenda but I'm happy to knock on doors and ask for funding or try something new."***

Judith Mawer, Learning and Development Associate, Mersey Care NHS Trust

***"I like the flexibility, working with people – opening up new opportunities."***

Dave Ward, Co-ordinator, The Windows Project

***"I have more or less complete independence. I can think of a kernel of an idea – no more and talk to artists, staff, stake holders and it can become a great big huge thing that's important to everyone. Freedom of job and freedom of ideas."***

Paula O'Malley, Arts Co-ordinator and Fundraiser, Aintree University Hospitals NHS Foundation Trust

***"Evidently some NHS employees, working as advocates or managers/co-ordinators of arts and health projects, have found that whilst this part of their work falls outside the core provision of the NHS, they are not eligible for certain grant applications because they work for the NHS and this has proved a frustration:***

***"Some funds are fairly difficult to access for a health authority."***

Ann Gallagher, Head Occupational Therapist, Adult Mental Health, Liverpool In-Patients Services

***"It would be good to have some access to funds that we wouldn't normally have. Funds that might pay wages. Eleanor Rathbone have been very supportive. It would be good for us to be able to access funding streams easier as we are not always eligible."***

Carl Dutton, Project Therapist, The Haven Project, Alder Hey Children's NHS Foundation Trust

Arguably this is why the work of organisations such as the CAHHM is vital for the growth of a co-ordinated effort to integrate art into our healthcare, rather than to continue to be satisfied with pockets of successful projects. It might be that new ways of evaluating and identifying benefits might not restrict, but instead allow funders and those as yet unclear of the benefits to better understand what is going on by discovering a language that expresses with more clarity, intuitive and dynamic projects that are developed specifically for a particular group of people, with a unique set of needs, in a specific environment. So that the development process is not changed but its benefits are more clearly identified thereby perhaps setting some of the more illusive funding machinery into motion.

***“The Comedy Trust is charitable so we bring in funding from various trust funds and charitable organisations to deliver our work. We have a successful history in finding funding. I think because they can see real impacts there, because we evaluate our work. These funders need tangible things.”***

Jenny Liddy, Education and Community Manager,  
The Comedy Trust

***“Investment is necessary, it is important the money is secured to deliver. Arts organisations cannot just be service providers. Not just tender writers. There has got to be some level of funding.”***

Peter Ward, Director Hope Street Limited



Matt Sephton



***There is a general funding issue within the whole of the NHS for non direct patient care which ‘the arts’ is part of.***

***“However some areas do work together in an organised and efficient way. It has worked elsewhere LIME in Manchester, Glasgow has a system, a more integrated system.***

***“I’d like to see something like that here a sharing of Arts and Health assets across Merseyside.”***

Paula O’Malley, Arts Co-ordinator and Fundraiser, Aintree  
University Hospitals NHS Foundation Trust

***“We decided to seek partners and target groups ourselves and often fundraise ourselves. They are completely artist led initiatives but it would be good to have more commissions.”***

Steve Rooney and Sue Williams, Freelance Artists, TAG

The running theme of freedom from budget controls or procedure was always tempered in the interviews with a further running theme of a person-centred approach. Of all the reasons for success alongside effective relationships, a person-centred strategy was cited as the key ingredient for a successful project.



## 7. Person-centred approach

Many of the interviewees were of the opinion that attention to the specific requirements of a group of individuals during project development was vital for success. In some cases, being ready to sensitively react to the dynamics of a particular group from session to session was felt as important. An understanding of the group's needs and interests was repeatedly quoted as a key element of the research and development stage of the programmes. A health professional interviewed felt that artists working in partnership with clinicians were very good at responding to changing needs. The last of the running themes, the quotes below on the person-centred approach take us to the final section of this paper: a summary on the landscape of creative health and well-being at the close of 2008.

***“On the work we did with Everton Football Club and with young refugee lads – 14-18 years old who had made it to Britain on their own. In 04-05, the lads asked me to put on some coaching sessions during the summer. I contacted Everton’s Alan Johnson, the Development Officer and very much appreciated his support. Coaching sessions were put on with some five-a-side matches. A local primary school gave their pitch for free as did Alan Johnson with his time. At the end of the sessions the lads wanted to do more. They wanted to learn how to coach themselves so they could offer this to the younger children from their community via their churches.*”**



Matt Sephton

***“EMTAS based in the city Council provided funding for their first level coaching badge with a presentation day at the end of the course.”***

Carl Dutton, Project Therapist, The Haven Project, Alder Hey Children's NHS Foundation Trust

***“It is possible to turn a difficult, challenging project around by putting people that are supposed to benefit at the centre of what happens. I totally believe in getting all the ideas and the lead from the people I work with. Gathering their creative ideas.”***

Eileen Wilshaw, Heritage and Historic Environmental Manager

***“Often the system tries to make the service users fit into the service but we should be doing the opposite.***

***“It is often difficult for service users to talk. The creative arts remove language barriers, they help people to express how they're feeling or cope with circumstances. Ask service users what they are interested in and they will list the arts, dance, music, cooking, gym, gardening etc... It could be service user driven – if we really listened to the clinicians and service users and didn't view this as a low priority.”***

Ann Gallagher, Head Occupational Therapist, Adult Mental Health, Liverpool In-Patients Services

***“Success is back to relationships, taking the time to see for myself what is needed to make things happen. It's a vanity to inflict from what you alone think. You need to check the fit is right and don't bully people into something they are not ready for.”***

Judith Mawer, Learning and Development Associate, Mersey Care NHS Trust

***Listen to health professionals' needs and patient needs where possible – and listen to artists and about what they can do.***

***“Undoubtedly share. No project should be run without some degree of consultation between the partners. You've got to talk to people before you start otherwise you hit problems.”***

Vicky Charnock, Arts Co-ordinator, Alder Hey Children's NHS Foundation Trust

## A postscript ...

During the writing of this there has been some sense that the term arts and health itself no longer encompasses this field. That by quantifying the work in this way we are limiting its real place – that art is not confined to health but should be integral to our lives in a holistic way – that health just happens to be another facet of our lives where art can be experienced and as usual enhance our quality of life.

***“We are creative beings – creativity is something that is important to people being – we should reflect that in mental health.”***

Ann Gallagher, Head Occupational Therapist, Adult Mental Health, Liverpool In-Patients Services, Mersey Care NHS Trust

***“The aim is to increase the role of the cultural organisations in civic leadership, in order to increase understanding of the role of culture in social and economic renewal.***

***“Participating in the arts opens up new experiences. Helps you make sense of the world. It might not always feel comfortable at first – but might help you in the end – to feel comfortable in your own skin.”***

Belinda Kidd, LARC Thrive Programme Director, LARC is Liverpool Arts Regeneration Consortium



Matt Sephton

## Creative Health Talks

***“I came here as grounds maintenance and worked on my own for five years at which time my boss, the Head of Estates, was very keen on developing things after the builders had gone. At first I had to submit my planting ideas to the Chief Executive but after a few goes they just said I could get on with it. The volunteers developed in response to what was going on and then the networking developed.***

***“At the moment Breakthrough UK have provided three or four volunteers and they are very supportive. We are invited to their initiatives and they come to ours. Liverpool City Council and Social Services support us too. Include, who stimulate employment in the local area by helping young people have just won the tender for the grass cutting on site. Not because of who they are, they won the tender fairly and the grass is the best we’ve had it. Merseyside Youth Association have workdays here. The NVQ assessors use the grounds for particular units to be assessed so various groups can take their NVQs here in the hospital grounds if they would like. We’ve made links with a local school, the Caribbean Centre and even a local prison. We have strong links with Mary Seacole House and get their bedding plants for them.”***

Kim Parkman, Gardener, Liverpool Women's Hospital NHS Foundation Trust.



Matt Sephton

*"I think creativity is something at the core of what makes us human. What drives us forward is not just technology but culture, story, why we are here. Creativity is not just play and entertainment, though of course it is that as well, but what are we creating for ourselves, our community, the world? What creative potential do we each carry within and how can we set it free?"*

Jessica Bockler, Freelance Artist and Arts Officer for Creative Alternatives, Sefton

*"Instead of a typical response to a single issue, say obesity, I've seen in my mind the 26 disused allotments in Liverpool and there is an opportunity here to make them into social spaces that improve health and well-being, intergenerational policies, cooking and eating together, growing food together – a green space – with micro businesses, biennial exhibitions, performance, arts – they could be really beautiful. Exporting what's going on in the city centre to the neighbourhoods. To do that we need to come together in consortiums to give whole strategic packages that might have a number of programmes running within it, in response to the big health issues."*

Michelle Gibson, SHIFT Director

*Fundamentally as an "unarty person" (probably more than other people) creativity is something that takes you out of your everyday life – something that makes you look at the world differently. It does help people "jolt out of the everyday". Anything that does this has a positive impact on you."*

Ruth Melville, Programme Manager IMPACT08

*"Being creative is good for you. Challenges you and rewards you. Stretches you – and the rewards can be quite amazing."*

Steve Rooney and Sue Williams, Freelance Artists, TAG

The resistance to be limited by a term of arts and health was expressed by Tom Smith in An evaluation of sorts, where he warns:

*"The search for an agreed definition of arts/health is a red herring. It runs the risk of constraining its evolution. Defining this area before it has developed risks limiting and denying some perspectives. The field is connected by an aim to broaden and deepen ways in which we as a society understand health and seek to improve it. Core to all is an aim to encompass an artistic perspective on the aim of improving health, regardless of which dimension is targeted."*

So perhaps the next question is, if not arts and health, what is the language we need to express this movement?



*La Machine's exciting mechanical spider was a keynote event during Liverpool's 2008 European Capital of Culture year.*

## Summary

This section of the report illustrates some of the important work going on at this particular moment in Merseyside's history. There is evidence that more room is being found in our health, community and social care organisations for attention to wellness, as well as illness, recognising the whole person and not just the individual as a patient, a customer, a service user ... a statistic. The research involved in creating this report has clearly identified a national groundswell towards a more holistic approach to our healthcare.

Many thanks for the valuable time given over by those who kindly agreed to take part in this interview process, the seven themes of relationships, a Merseyside arts/health co-ordinator, unexpected benefits, research and evaluation, budget and procedural freedom, person-centred approach, risk taking clearly emerged from their professional expertise.

There were too many fascinating case studies and insights to cite here, including such interesting themes as our health buildings, arts in medicine training and the effect of arts on staff and retention. It is hoped however, that by giving voice to some of the issues, this section might

- provide some insight into the experience of those already working in the field of creative health and well-being
- raise questions about how this growing area of expertise might become more embedded in our lived experience
- encourage more workers, both in arts and health and social care, to explore further for themselves the benefits of this work
- result in those already working in the field feeling encouraged by the statements of support from the Department of Health, Department of Culture, Media and Sport as well as Arts Council England
- serve to celebrate the many successful projects in this discipline across Merseyside during 2008 and the run up from the bid for European Capital of Culture in 2004.

NB: Additional information from these interviews is available on the web link

<http://merseycare.nhs.uk/learningzone/creativelinks.asp>

Click onto Liverpool European Capital of Culture 2008

Click onto Interviews – autumn 2008



**8** *Tim Slack, Appreciating People*

**9** *From the speech by the Rt Hon Alan Johnson MP, Secretary of State for Health, 16th September 2008, Arts and Healthcare Event – “Open to All” Mental Health, Social Inclusion and Museums and Galleries.*

**10** *A prospectus for arts and health, produced by the Arts Council and The Department of Health, Arts Council England, 2007 – in the statement by Harry Cayton, National Director for Patients and the Public, Department of Health and Peter Hewitt, Chief Executive of Arts Council England.*

**11** *A prospectus for arts and health, produced by the Arts Council and The Department of Health, Arts Council England, 2007*

**12** *A prospectus for arts and health, produced by the Arts Council and The Department of Health, Arts Council England, 2007.*

**13** *A prospectus for arts and health, produced by the Arts Council and The Department of Health, Arts Council England, 2007*

**14** *Amanda Kilroy, Charlotte Garner, Clive Parkinson, Carolyn Kagan, Peter Senior. Invest to save: Arts in health Evaluation. Exploring the Impact of creativity, culture and the arts on health and well-being, 2007*

**15** *Smith, Tom, An evaluation of sorts: Learning from Common Knowledge, CAHHM, 2003*

**16** *Smith, Tom, An evaluation of sorts: Learning from Common Knowledge, CAHHM, 2003*

**17** *Smith, Tom, An evaluation*





# **Part 3: The Big Conversation**



**5th  
December  
2008**





## The Big Conversation

**arts should be recognised as integral to health, healthcare provision and healthcare environments"**

Review of the Arts and Health working group  
Department of Health 2006

On 5th December 2008 a World Café event saw delegates from a wide range of health settings, arts organisations, local government and the local community, come together on the 8th floor of Martins Building in Liverpool city centre, to engage in a Big Conversation on creativity, health and well-being.

Delegates came from diverse backgrounds, bringing with them different experiences and expertise:

Liverpool Primary Care Trust, Mersey Care NHS Trust, Local Government representatives from across Merseyside and the North; Libraries, Supported Accommodation; GPs, Hospital Doctors, Nurses, Arts Co-ordinators, Music Therapist, Kings Fund, Adult Mental Health, Service Development; Day Service; Evaluators, NHS North West Health Care Libraries Unit; University of Liverpool; Kensington Regeneration; The Comedy Trust; Reader Organisation; Clore Fellow; Creative Activities Officers; Arts in Health Officers; Liverpool Museums; Strategy and Partnerships NHS; Biennial, Lime, Service Users, Dance students; small and medium arts organisations; freelance artists; Duncan Society, Rotunda.

Using the process World Café, participants reflected on the following Appreciative Inquiry styled questions:

- What is the connection between art, creativity, culture and health and well-being?
- How do I know it has worked?
- If this was 2012 and you were looking back at the success of the arts and health practice, what would it look like and describe what had been achieved?
- If you were asked to suggest simple and effective arts and health actions what would they be and what would be your contribution?

**"What if conversation is how things get done?"**

Margaret Wheatley



Dai Owen

**World Café** works on the assumption that:

- people have the capacity to work together, no matter who they are
- diversity is valued as different perspectives are essential to make good decisions
- anyone present might make a contribution that sparks a collective insight
- listening is an integral part of the process
- movement from table to table encourages the leaving behind of roles and preconceptions
- carefully formed, open questions encourage exploration and discovery of new insights in an energetic and meaningful conversation.

(This is a précis from the introduction by Margaret Wheatley from: 'The World Café, Shaping our futures through conversations that matter' by Juanita Brown with David Isaacs).

Appreciative Inquiry based interviews formed a part of the process of preparing for The Big Conversation with a small number of significant individuals from key stakeholder organisations having been interviewed between September – December 08 by Tim Slack of Appreciating People. These interviews helped to inform the questions asked at The Big Conversation during the World Café sessions and provided valuable background information for Afta Thought who performed short sketches throughout the event based on issues and themes pertinent to arts and health.

Over 100 delegates deliberated four questions during six hours of conversation, simultaneously writing their thoughts in felt-tip pen on over 20 tablecloths producing hundreds of statements, comments, suggestions, diagrams and sketches.

Faithful to World Cafe philosophy, one delegate noted on their tablecloth

***“talk about what we want ... and not about what we do not want”***

Following the event, the tablecloths were transcribed and analysed.

This article focuses on what was wanted.

## **Suggestions from The Big Conversation fell into the following 11 key areas:**

1. Communication
2. Tips for success in arts and health projects
3. Costs and Funding
4. Evaluation
5. Embedding arts and health into existing structures
6. Training in arts and health
7. A local arts and health network
8. Young people and creativity
9. Buildings and environment
10. A healthy, creative community
11. The Creative Life: The Good Life?



Dai Owen



Dai Owen

## 1. Communication

Early conversations centred on the desire to develop a mutually clear, professional language between those working in the arts and health sectors. Whilst some artists expressed the advantages of adopting the professional vocabulary of the health service in order to convey the benefits of what they had to offer, comments suggested that both the arts and health worlds could be jargon-rich. There was a general plea for a more accessible common language that would recognise the benefits of each taking the trouble to translate the professional shorthand and terminology in their corresponding disciplines.

As regards the use of words, **Arts and Health**, there was the suggestion that **creativity** should be used in preference to **Art** thereby avoiding pre-conceived ideas of **Art** as either elitist or meaning just visual art. Some also suggested a focus on “well-being rather than health”.

A number of delegates expressed concern at the lack of positive PR, commenting on a need to better communicate the benefits of creative health projects by taking advantage of media opportunities and pro-actively developing a marketing strategy. One remark called for the appointment of artists onto strategic boards of stakeholder organisations with the responsibility of keeping publicity on the agenda. Other Public Relations suggestions were:

- to develop a shared “art is good for you” type branding
- to invite the press to write positive news stories by introducing journalists to “real people” involved in transforming projects
- to hold a bespoke workshop in a hospital or other health setting for the local media to experience in a real setting how creativity is being used to benefit the community’s health and well-being
- to advertise creative health community events in high profile, accessible venues such as supermarkets, ensuring events are well and accurately advertised.

It was suggested that artists involved in the delivery of creative health programmes should approach Patient Groups to talk to them about their work and the benefits of taking part. The idea being that such direct contact with potential participants, or those representing other service users, would encourage confidence and create demand.

## 2. Tips for success in arts and health projects:

Several of the observations noted on the tablecloths offered guidelines for successful projects:

- take time to develop flexible creative programmes that enable those taking part to relate to the art on offer
- talk with health and care staff and proposed participants before embarking on a project intended for them
- vital to engage health care staff for project success
- research and learn from others who already have experience in the area where possible
- bring professional artists into the health system to deliver and develop a custom-built or already proven creative health project
- ensure that participants/patients/service users understand and actively choose to take part in a project
- monitor and evaluate from the outset

Two schools of thought were present concerning the development of projects:

### Safety and Risk

**Safety:** a warning from some to avoid trendy new things and current fashions. A request to concentrate efforts on what is known to work and grow what is already thriving.

**Risk:** alongside these comments, in equal measure, were those embracing an element of risk. These opinions called for bold leadership; encouraging people to take chances; to expect risk in artistic endeavours. That such risk-taking was a welcome trait in order to progress the discipline.

**“For me, the most exciting part of working at Metal is being able to invite an artist into residence and offering them the time and space to think, dream, to stretch their imagination. We never insist on ‘product’ at the end of this process but in almost every instance there is a wonderful outcome.”**

Ian Brownbill, Director of Metal, Liverpool





### 3. Costs and Funding

The credit crunch and looming implications of recession provoked a handful of comments:

***Money is needed to improve health before people can get involved in the arts. Economic reality and poverty impact on people's health and art can't address this.***

Someone drew an elephant in the room on one of the tablecloths – perhaps another comment on the current economic climate.

Another noted, ***“the credit crunch is an opportunity to question our fundamental values.”***

It might be pertinent here to mention that in many cases, attendance to cultural events and activities actually goes up during really difficult economic times. It is thought by some commentators that during a recession the value of what art can provide is more keenly appreciated: a refuge from material things.

However, justifying the funding of art and medical intervention from the same pot in a period of underfunding and cutbacks seems inadvisable. Nonetheless as one delegate commented ***“this should be seen as a complimentary process – part of the care plan; some projects are not paid for by any health budget – the funding comes from elsewhere. It isn't always either/or.”***



Dai Owen



## 4. Evaluation

Effective evaluation proved a significant recurring theme throughout the day. Delegates wanted an officially recognised means of evaluation that would satisfy the needs of potential funders but at the same time engage creative thinking in its development. The challenges of finding the right methodology for such organisations as the NHS were a hot topic. Any wariness from artists working in the field was not due to lack of confidence in the outcomes but rather that the process of evaluation itself might interfere and impact on the delivery and benefits. One statement read **“having to measure adds obstacles.”**

Nevertheless, it is unreasonable to expect funders to rely on trust and hearsay. Clearly this is an area that needs the development of an appropriate and acceptable means of documenting value so that opportunities for funding can be improved. For creative health initiatives to become mainstreamed as part of a person's care, **“projects need someone to measure and deliver the measurement in ways recognised and valued by the NHS.”**

The health sector has its part to play in making it clear what it needs to know? What evidence is required in terms of benefits to service users, before they feel comfortable to engage in projects? The following techniques were widely suggested as being part of the answer to effective evaluation:

- find a method of providing an acceptable assessment of narratives and case studies from onset
- qualitative and quantitative (where possible) measuring
- research evidence around occupational science
- self-reporting e.g. imaginative evaluation through autobiographical diaries, film, photographs which can be integrated into the creative elements of the project process itself
- recording attendance
- can stories be turned into data? Using self esteem and an improved sense of self as a measure/outcome, thus giving validity to people's experiences?
- **“use social return on investment to convince PCT it does work.”**
- One delegate considered the usefulness of developing psychological tools to graphically represent the benefits of participation in a creative health programme, by proposing a wheel of well-being based on a person's response to 50/60 words laid out in diagram form so that when the words are joined together it creates a shape easily displayed and analysed according to the pattern created.

It appears we need to become more adept at defining a baseline of outcomes at the onset of a creative project by considering the motivation behind its instigation? What are we specifically hoping to achieve for a group/individual through creative engagement in a proposed project? Then whilst recording any fulfilled baseline outcomes during a programme, all the unexpected and spontaneous benefits, those who work in this field know surface during the process, can be included as additional outcomes.



Delegates expressed an interest in sharing completed evaluations to see how others approached this challenging area and also so the NHS might ascertain how closely or not current methods of evaluation meet their requirements and work with artists in developing new ways of evaluating and monitoring projects. The Primary Care Trust might consider: What do we need to know? How do we want to receive that information? Who do we want to gather this information for us and from whom? What needs to be added to the current evaluation techniques to make them fit our requirement?

It was suggested that decision making should take into account short-term and long-term benefits. This would necessitate a re-visit to participants to establish any long-term benefits from involvement in projects. Perhaps in the form of a follow up diary of changes/improvements to their quality of life? Was it sustained or did the help experienced carry them through a specific difficult period.

Others wanted health practitioners to be engaged in the evaluation process, recognising that a clinical input is needed as well as artistic. Co-evaluation then presenting itself as another key element to an optimum partnership between health sector and professional artist. Practitioners might also benefit from seeking advice from researchers already exploring developments in the evaluation of arts and health. It would seem that in order to promote the embedding of creative health projects into mainstream health and social care, the subject of evaluation and monitoring is fundamental.

## 5. Embedding Arts and Health into existing structures

Arts and health champions are found equally in the health and artistic sector. The Big Conversation saw advocates from diverse professions, equally passionate in the value of creativity and its ability to enhance an individual's quality of life.

Included in the comments from the day were many specific suggestions on how to integrate arts and health into existing local government and public sector organisations:

- include a Primary Care Trust or other health sector representative on any emerging local government cultural company board post 2008
- develop a network of neighbourhood cultural committees, using local area partnerships as a driver
- introduce a Liverpool Champion Arts and Health Steering Group for effective art intervention and to encourage creativity. To be a body that works for the recognition of the contribution the arts make to health and well-being and the role culture and creativity could play in change and how choices are made
- appoint a brokerage team or individual to act as an intermediary so artists and clinicians can interact on a level footing. A post that can assist with marketing, evaluation and collation, administration and maintenance of a database of practicing arts and health professional artists
- many requests for ***“an individual who is recognised as independent of organisations but manages to cross work between health and culture – so can represent them all.”*** For example a Merseyside Arts Officer linking creative health activity in the Mersey boroughs
- every health organisation could actively seek and appoint from within a recognised ***“creative”*** individual to effect change and promote inter agency working
- where possible every health setting should employ an individual to specifically deliver arts projects in response to need. These champions in the medical sector could offer and promote the full gambit of interventions and recommend cultural activities. They would represent the official emphasis on patient experience, supporting the medical intervention and finding nurses and other health sector workers with creative skills as partners to maximise sustainability and value
- such individuals might then be in a position to build cross Trust working between Primary Care and other health and social sectors to share information and develop potentially value enhancing cross-border projects. In this way, even when the role falls alongside their traditional job roles, such champions might nurture co-working and co-ordination thereby helping to bring arts and health into the mainstream
- beware that mainstreaming does not lead work to evolve in a straight jacketed form that reduces diversity and the variety of projects engaged in
- the embedding of creative professionals as artists within health structures might help to build awareness and change the culture from within

- an artist in residence approach or an affiliated arts team in health organisations
- health university staff to support artists by showing their work and exhibiting projects in the University buildings to raise awareness of the value and current work locally
- art therapists in every psychiatric hospital and arts co-ordinators in every hospital

**How can a brokerage position be developed that works independently for everyone and who will finance that and still ensure an independent agenda?**

***“Across Merseyside there are common cultural needs and demands, there are similar communities with similar cultural issues. Artists and communities don’t need to recognise local or health authority silos, we should aim to join our efforts up to ensure that the best of Merseyside Arts and Health projects, programmes and practice become available across ‘the City Region.’ Working together will surely bring more evidence of impact and then opportunities for further enhancement of limited resources.”***

Merseyside Arts Officer



Dai Owen



Some observations remarked on evidence of a changing culture within the NHS. For example recognition that some GPs are actively referring their patients to arts and culture activity with confidence. However other contributors maintained that GPs need encouragement to embrace the work that is on offer and that a more active effort should be made by artists to inform GPs of what's available and what the benefits are. Suggestions included inviting GPs to experience reading groups or to visit an established Arts on Prescription session (Arts on Prescription is a programme of various artistic/creative activities run by arts organisations and prescribed by GPs). One delegate proposed that engaging GPs in the benefits of arts and health activities **will give more people, more opportunities to engage in more creative activities via health centre access**".

**Would it be useful when training new GPs, to include a unit of study, with a practical element, on the subject of arts on prescription and other creative activities in general practice?**

**How can we start training programmes for health staff and artists? Who will drive this forward and pay for it to be set up and delivered?**

## 6. Training in Arts and Health

The subject and cost of training was also discussed with requests for:

- more training for activity co-ordinators in hospitals
- value training, e.g. a health visitor who referred service users to creative activities taking part in the workshops in order to understand the experience on offer
- Continued Professional Development for artists, to give them confidence to approach health organisations
- programmes combining Continued Professional Development for both health and cultural sector workers to undertake together, along with those from other public service sectors
- training programmes for artists in how to manage difficult and unexpected situations
- training programmes for health professionals in creative arts engagement
- also in a broader sense the use of arts in medical training itself, encouraging creativity in staff development
- putting on creative sessions for staff (staff retention) using such sessions to connect staff and the health sector community
- where arts co-ordinators in place, consider facilitating internships for arts students



Dai Owen

## 7. A local arts and health network

There were many requests for a Local Arts and Health Network to provide: regular and effective means of communication; put on events to bring people working in this area together; formalise a health and arts community. One note referred to the network across Manchester that links into the national network and Manchester arts and health as an example. Another delegate remarked on the **“reluctance to learn from other authorities e.g. Manchester, very frustrating – don’t always listen to colleagues and neighbours.”** There was a similar recommendation: **“There is already a bi-monthly open meeting in Manchester that “could come to Liverpool.”**

The Big Conversation clearly reflected a desire for the formation of a forum that could share models of good practice and disseminate information for its members, with a dedicated website to build a knowledge base with links to other available project evidence plus an on-line magazine, how-to publications and toolkits.

There is always a question of who would fund such a forum and at the Liverpool Culture Company we found that a desire to create an Arts and Health Network was not enough to make its realisation achievable. However, it might be an interim solution to approach an existing arts network website such as Kin. This website is “for people working in creative businesses in Liverpool and Merseyside.” Designed for individuals or larger organisations working as a creative team, Kin provides opportunities to connect with other creative people, share ideas and access new contacts, news, advice and information. This might prove a ready-made platform to connect with a creative health community.

Some delegates felt that formalisation of creative health activity would be furthered if artists adopted a more business orientated

approach and a network might be able to offer such appropriate advice, including the sharing information on how to access funding by keeping abreast of **“who’s in the know”** alongside effective bid writing. There were several requests to pool cash in the creative field and for the introduction of **“one form for grant applications”** from the big funders Arts Council England, Heritage Lottery Fund, Primary Care Trust, NHS – **“with one pot for things such as preventative projects.”**

It was pointed out that such a forum would help focus the creative health movement and promote interworking between projects in health care settings and out in the community. The forum might work towards facilitating and encouraging partnerships between arts and health champions at work in the community and those working on projects in hospitals, health centres and other clinical health settings. Such a body might be able to track a patient’s journey from community to GP to hospital and back into the community in order to discover if there is viability or value in changing the pattern of short-term projects that do not interlink. Equally delegates were eager to find a way that patients could continue arts activity once an artist is no longer involved, perhaps by helping people to see their own creativity and their capacity to work individually or the opportunities available to continue with other groups, during their arts and health project.

On the other end of the community spectrum participants insightfully recorded that accessing an individual can access a community: pointing out the use of creative approaches in preventative strategies and also the capacity for arts activity to be a social peg, bringing people together, sharing ideas and facilitating reconnection of communities. There was a real sense that any arts and culture network should include amongst its remit a wider responsibility inter-linking with other social structures e.g. housing and education ...

**Could a network help to keep abreast of, and give advice, on business development, funding pots, appropriate grants and where to find them?**



Dai Owen





## 8. Young people and creativity

A number of delegates expressed a concern that arts should be introduced earlier in education. One commented, **“an early connection to arts establishes lifelong links which can enhance well-being.”** Other participants recommended an open access policy to cultural events and activity for children and young people with specific slots in education. It was felt that by actively exposing young people to the cultural environment or by funding projects such as free loan instruments, they pass on their enthusiasm to their families, helping to break down the mystique of the sometimes intimidating art world.

Another suggestion was to use the arts to help parents become more playful and creative themselves and in so doing use the arts as a catalyst for desired outcomes, an opportunity to dispel myths around what an artist is. Others expressed a desire to be able to put on exciting arts activities into Children’s programmes.

It is heartening to see such work being initiated by the Find your Talent and Schools of Creativity schemes. (Details of both can be found on [www.creative-partnerships.com](http://www.creative-partnerships.com))

Outside of the education system, the view was aired that more money was needed for youth clubs and similar organisations so young people can engage in creative activity outside of the school gates. Amongst these though a warning that care should be taken to offer activities young people want to go to. Another delegate felt that creative expression allows people a voice and could prove a very significant focus in the lives of disaffected youths, with engaging in arts activity having the opportunity of promoting self-esteem, value, self-worth, meaning and potentially producing the welcome by-product of positive young role models in our communities.

It was also suggested that the opportunity to engage with families might **“open up people’s minds to realise that everything in their lives can impact on their health and therefore they can change it and help themselves i.e. housing, jobs etc ...”** Another delegate reflected **“there is no need to impose a notion of culture – it’s already there.”**

Many of the Big Conversation comments generated the feeling that creativity can lead to a recognition of self-sufficiency, personal responsibility and might in turn be useful in terms of both recovery for bespoke group-centred creative programmes and prevention by **“promoting and supporting active citizens.”**

## 9. Buildings and environment

A huge topic not really reflected in this conversation was the question of buildings and environment on health. There is lots of research in this area suggesting that our environment has a significant impact on our well-being and quality of life. Comments that did arise on this subject were:

- gardens are important
- 1% of budget for new builds should be set aside for art – which is already a guideline
- include art design in building design – LIFT examples
- **“still important to look after buildings in terms of cut backs” “value existing spaces”** that can be renovated
- bring in teams of artists and local people along with the engineers and architects when there is a new build design
- NHS procurement should support local builders and craftspeople and adopt local purchasing policies



## 10. A Healthy, Creative Community

A healthy, creative community was a recurring theme and the significance of work by the grassroots was mentioned repeatedly **“grassroots really important”** and **“give people at grassroots a way of knowing what they can do.”**

There was also a reminder that **“community isn’t just about deprived areas – community exists in all areas”** and that sometimes communities are drawn together from people with shared interests and not by economics, geographical areas or other defining markers.

Suggestions to blur the line between the community and the medical profession saw the following:

- GP surgeries and GP referred art sessions in The Bluecoat, supermarkets and even off-licences
- creative engagement can offer an alternative to addiction and play a part in recovery
- use community art workers experienced at recruiting hard to reach people who might benefit from arts and health programmes
- create a buddy system in the arts for people with mental health problems
- arrange well-marketed art and music sessions for supermarkets, funding for festivals and picnics, community sing-a-longs, street festivals that include active workshops, link arts and sport
- develop a link between mental health patients and museums, perhaps as volunteers rather than participants
- mainstream health into arts and not just arts in health
- a shared community space in which to hold workshops/events – workers in the field are finding there are not enough community spaces available to use
- the emergence of an Art Clinic or Literary Salon
- exchange projects between different community projects
- many calls for arts on prescription
- churches, schools, GP surgeries and health centres as creative hubs
- a small art workshop room in hospital new builds so a more flexible open access programme across the patient community could run alongside specific, focussed programmes and allow people once formally engaged in a project to continue to work with an artist in residence on their own projects – encouraging self-sufficiency in their creative endeavours post hospital stay.
- mini art rooms in hospitals for service users to exhibit and visit
- writer-in-residence in a health setting



Dai Owen

## 11. The Creative Life: The Good Life?

There was a resounding sense that creativity should be seen as part of normal life, not just used in health and social care settings. That any supporting arts projects in hospital should be seen in the wider context of the patient’s life and an individual should have the opportunity, where it would be useful, depending on the needs of the person, to continue in another vein once back in the community. Therefore it was considered important to offer people follow-up projects in the community, making it necessary for agencies to work together with training where appropriate. Several delegates wanted creativity to be part of an individual’s medical package, with art and health ACTIONS and care plans to include creative activities that offer pathways back into the community and the development of posts which result in arts and health advocates working in wider partnerships exploring a variety of partnerships using different art forms.

**How can we join up projects; facilitate cross-agency working so that we as a community can maximise the benefits and offer something on-going that makes a real difference in a holistic person-centred approach?**

## What next?

Whilst this World Café experience at the close of 2008 affirmed the presence of an arts and health movement across Merseyside and the North West, with a real desire to find a way to remove obstacles and forge links, there was also an acknowledgement that space and time was an important consideration. There was the suggestion that a sensitive moving forward was an appropriate approach as perspectives continue to shift on the viability and benefits of arts and health in existing structures. Such room to grow would allow confidence in and time to develop systems to facilitate new approaches, leading to more professional artists working in partnership with health professionals in hospitals and health and social care settings, building on what's already there in the community with a view to improving holistic health care in all areas of life.

Finally there has been much talked about the 08 effect and there is evidence to suggest there are positive tangible benefits in having themed years to enable lots of different organisations to align agendas and work towards common goals.

Both the Health is Wealth Commission and people participating in the Big Conversation recommended that 2010 become a Year of Health and Well-being. The PCT is taking this on wholeheartedly in partnership with Liverpool City Council.

### Message from Gideon Ben-Tovim, Chair of Liverpool PCT

We are currently building a programme of cultural and creative events which can focus minds on partnership and be catalytic in delivering improved health in the long-term for Liverpool people.

This year will link the theme of Liverpool's Year of Innovation, which is central to our presence at the Shanghai World Expo, with the theme of Health and Well-being. So in January 2010 we will make the transition from:

**Our City, Our Planet: Liverpool's Year of Environment**  
to  
**Our Bodies, Our Health: Liverpool's Year of Innovation**

Dialogue is key to us delivering on this, and we are exploring with healthcare partners, artists and arts organisations new ways of engaging with people at a neighbourhood level. This is why we're opening up an Ideas Bank from July-September 2009 for people to feed in ideas for the 2010 programme to ensure that our decision-making processes are ideas-driven.

Some collaborative programmes which the PCT are committed to developing in partnership with the arts sector in 2010 include:-

- A citywide participatory arts programme linked to GP surgeries
- Five engagement shops to provide welcoming hubs of creative activity
- A Merseyside Arts and Health Post and Programme working across the Liverpool City-Region
- Building collaborations to celebrate the 'We Play' Cultural Olympiad Festival in 2012
- Visualising health pathways to inform, support and involve people living with long-term conditions

The arts has the ability to provide us with exciting and aspirational visions as to what health and environment in Liverpool could look like in 2024. This is a time for acting on our convictions to build a vision.

At Liverpool PCT we look forward to continuing and acting on these conversations.

Ideasbank@liverpoolpct.nhs.uk  
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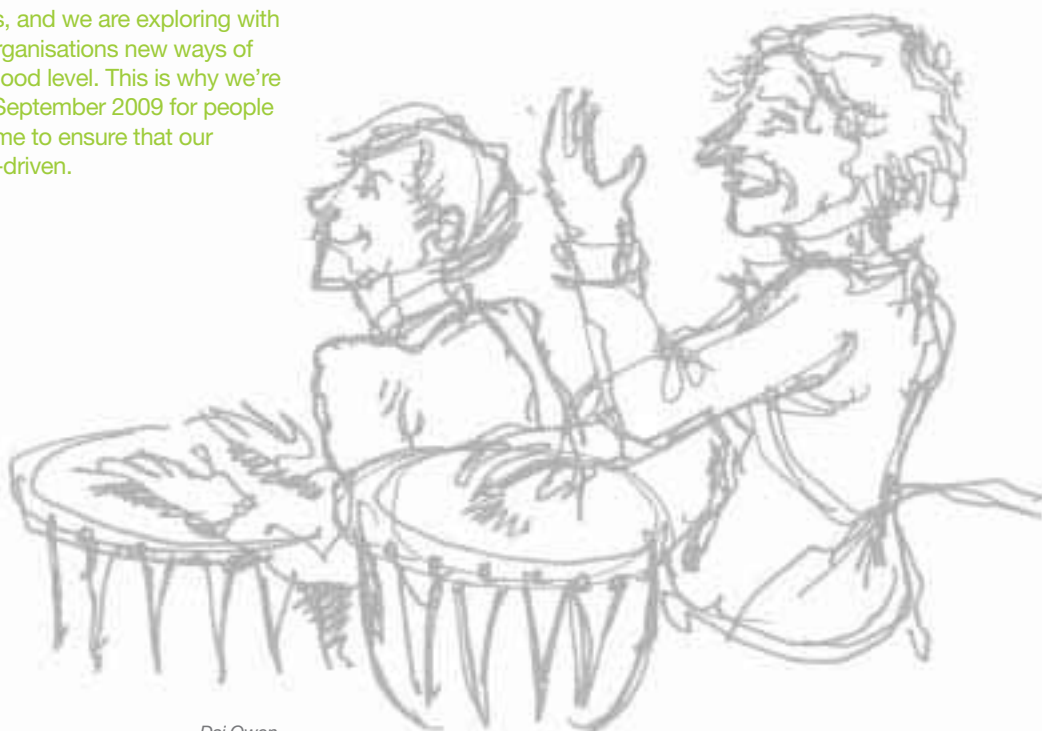
### Thank you

NB: Additional Information about The Big Conversation available on web link

<http://merseycare.nhs.uk/learningzone/creativelinks.asp>

Click onto Liverpool European Capital of Culture 2008

Click onto The Big Conversation – additional information



Dai Owen

## And finally.....

Compiling such a report is never easy! And to write this at a time of such significant change, as Liverpool transitions from delivering the BEST EVER CAPITAL OF CULTURE YEAR, to aspiring to meet the demands of 2008's legacy, has been particularly challenging. The agenda is shifting and with it organisations and individuals. However perhaps this also simply reflects the fast moving and fluid world that we all live and work in today.

Therefore this report is not comprehensive of The State of the Art in and around Liverpool at this time. It is a contribution, through the voices and experience of those working in and benefiting from creative health, in understanding some of the content and issues that make up this "movement" in arts, culture and health and well-being, at the end of 08 and early 09.

It challenges what we mean by health and how we "do health". Arts and culture offers a range of partners, approaches and understandings that combined with medical, therapeutic and educational expertise help to connect with people in a different way about "what it is to be healthy". Creativity encourages participation and therefore helps in our journeys to becoming experts in our own health. This doesn't mean we know everything! However it encourages openness, relationship building, questioning, awareness of our environment and surroundings, sense of identity and sense of worth and value that assist us in our journeys to live healthy and happy lives.

With especial thanks for her time and consideration, in acting as a critical friend, in commenting on this report,

Lynn Froggett, Professor in the School of Public Health and Clinical Sciences, University of Central Lancashire

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