## Acting local, thinking global in arts and health

**Mike White**, Senior Research Fellow in Arts and Health in the Centre for Medical Humanities at Durham University, sets out the case for community based arts and health

The most resonant image, for me, from the post-modernist jamboree of the Olympics Opening **Ceremony was that of hundreds** of children bouncing on beds to the choreographed attendance of health workers from National Health Service (NHS) hospitals. Daring to epitomise our national values at a global sporting event in a concern for the health and imagination of children produced a populist tableau that will haunt the Secretaries of State for both Health and Education for decades to come. Sure there was sentiment. even some of the proud socialism in which the NHS was conceived, but it was so much more substantial and provocative than the Disney Nuremburg we've come to expect from Olympics openings. It was a massive declaration for arts and health as the bedrock of healthcare, expressed with a sweeping confidence that the viewing public would understand such an association.

My elation at the powerful advocacy that this spectacle might provide for the imminent launch of a new National Alliance for Arts and Health (www.artshealthandwellbeing.org.uk) was tempered in the week following the Olympics when news reports revealed that Great Ormond Street and other flagship NHS hospitals were franchising their excellence into private NHS clinics in the Middle and Far East, ostensibly to re-cycle profits into supporting their healthcare work in the UK. It seems the NHS is now a brand, a 'Starbucks' of international healthcare. But if arts development is to have a viable role in the monkey business of medical trading it will need to rise to the challenge of providing a rigorous evidence base of measured

impacts whilst bouncing to the tune of commercialised healthcare. In short, there needs to be both depth and dazzle in the sales pitch, but this could end up diverting arts in health from its natural course of support for patient-centred care and human flourishing.

What we should not forget is that arts in health is essentially about relational working, whether it be in acute care settings or a community health context. In looking for impact, we also should not underestimate the inherent strength of the arts to shape people's world view and influence lifestyle choice, autonomy and social engagement – all of which of course have significant effects on health. There could be common ground here for international practice and research because, whilst it is exciting to have stadium-scale representations of arts in health, in essence the work is already characterised as a small-scale global phenomenon.

The Centre for Medical Humanities at Durham University where I am based, is furthering the interdisciplinary study of international collaborations in community-based arts and health. In 2011 we created an opportunity for leading practitioners and researchers from the UK, USA, South Africa, Australia, Ireland and Mexico to come together at Durham in what we termed a 'critical mass' meeting. We explored our understandings of communitybased arts in health in a global context, identified key issues for international collaboration in both practice and research, and envisioned what success would look like in five years' time with a practical timeline to get us there.

One of the practical initiatives that are already arising from that meeting

is that we have recently supported a pilot exchange in community-based work for two artists from Yorkshire and two from Western Australia, providing placements in each other's jobs, networks and communities for eight weeks, guided by reflective practice and research. With the financial investment of Australia Council for the Arts and Arts Council England, the project has put young and emerging artists at the centre of complex communities and practices at an international level. All four artists aimed to develop meaningful connections with health population groups through arts and health processes at grass roots levels, and a blog journal of the exchange can be read on our website. The project has provided production and critical reflection avenues through which the participating artists can develop new approaches to their practice and inform the recommendations and frameworks to guide future investments in the next generation of outstanding artists working in a participatory community

The artists' exchange took place in October and November 2012. The placements offered in Western Australia to two visual artists from Yorkshire were in fieldwork projects run by the Australian arts in health agency DADAA (www.dadaa.org. au). The UK placements were based mostly at Chickenley Primary School in a socio-economically deprived part of Dewsbury, in Yorkshire. Within a supervised reflective practice framework, all the artists worked with their host communities and explored similarities and differences in approaches to community-based



London 2012 Olympic Opening Ceremony, NHS section. Photo: Shimelle Laine. www.shimelle.com

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arts in health. For the UK artists it was an eye-opener to see how DADAA delivers entrepreneurial multi-agency partnerships to improve health in remote communities and with people with disabilities. For the Australian artists it was a revelation to engage in the project at Chickenley known as Roots and Wings which is the most influential of our community arts in health and education initiatives and is now in its ninth year.

Roots and Wings is led by our Centre's associate artist Mary Robson and works year-round with pupils, their families, school staff and the wider community to foster social and emotional development and encourage cultural change through new traditions that mark significant moments in the life of the community. Many of the pupils live with violence - whether this is verbal, physical, emotional, domestic or media - on a daily basis. The children have been guided along a searching journey focussing on self, emotions, expression of feelings, and different ways to depict such complex messages through a range of art forms. Roots and Wings puts children in the driving seat to help change some aspects of local culture, prevent mental ill-health and set the scene for a more nurtured generation. A deeply held belief is that an emphasis on unconditional positive regard will lead to children gaining a perceptive understanding of alternative ways of behaving and enhance their ability to learn. These children need different choices for adulthood and some need better memories of childhood.

At the core of Roots and Wings is the art room, a space run by the children at break and lunchtimes with artist support. Children choose to make things of emotional content in these sessions. Encouragement to reflect on feelings has led to the children creating greetings cards, initially for friends and family but now also sold into craft

outlets in the town, with the proceeds providing charitable donations overseas that the children determine. Sometimes there may be as many as forty children in the art room but order emerges in this bedlam as children assist each other in realising their art from concept to appraisal. It is not just an activity room; it is a space to foster empathy, and to model and analyse relationships in a child-friendly way. The art room also provides a congenial space that has influenced the design of other areas in the school.

A number of events take place each year that are now accepted and welcomed elements of Chickenley culture. There are two annual carnivalesque parades that celebrate transition. One is with the youngest children moving up to 'big school' and the other with the oldest as they prepare to begin life at the High school. The children go on a celebratory walk from their old to their new school buildings carrying with them artworks that represent their hope and fears for transition. In addition, every March, children and their parents transform the Chickenley school grounds into a candle-lit representation of their estate for an event known as Lantern Land. Other activities include projects to raise aspirations, encourage effective thinking, and increase self esteem – and how to apply these qualities and skills to other areas of life. Every aspect of the project involves reflective practice, whether between the professional practitioners or pupils.

This seedbed of reflection is a nurturing environment for the professionals involved in Roots and Wings, and so the visiting artists from Australia were encouraged to engage in this. The children are likewise encouraged to place at the heart of everything they do a belief that curiosity is the fuel of development. Modelling congruent behaviour is constant and is crucial to the project's success. While some professional

talk will be of attainment, resilience, attendance and expectations, the quality of a project such as this is in the relationships fostered, and in the creation of a fund of memories, both individual and collective, that is helping to redefine perceptions of the community. It is hoped these insights will be relevant and applicable to community cultural development work done by artists in remote communities in Western Australia.

The objectives against which our current artists' exchange project is being assessed are, firstly, to build a connected community of UK and Australian artists and organisations in community-based arts and health that enable collaborative endeavours; secondly, to identify and compare best practice in community-based arts in health by artists working in different artforms supported by researchers from different disciplines; and thirdly, to build the profile of community-based arts and health through dissemination in peer reviewed journals and through conferences. The aim is to establish an internationally connected body of work with collaborations developing in a shared theoretical framework. In future international conference programmes – such as that planned for Bristol in June 2013 (www. culturehealthwellbeing.org.uk) - this exchange project aims to prompt interdisciplinary dialogue and mutual discovery rather than just 'standalone' presentations. This would be a significant development in the arts in health field as a whole and reveal it as innovative research-guided practice crossing boundaries, cultures and healthcare systems.

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