CULTURES OF HEALTH AND WELLBEING: PROVOCATION ABSTRACTS

PROVOCATIONS DAY 2, FRIDAY 22 MARCH 13:45-15:00

Group 1: User-led & person-centred

Chair: Rachel Massey, Yorkshire Sculpture Park

Provocations

Gabrielle Hamilton, Leeds Museums and Galleries
Moving to one to one working and a person centred approach

I would argue that in the heritage sector we need to move away from group work in some instances and focus on the needs of the individual, sharing the model that is being used in Adult Social and Health Care, looking at adopting a person centred approach. This is admittedly time consuming and resource intensive but the benefits and rewards in terms of the individual are enormous.

In our learning and access and community engagement teams at Leeds Museums and galleries we are working with different organisations who refer individuals to us with additional support needs who they feel would thrive in a different setting. The partnerships are developed and negotiated with the relevant organisations and/or families or carers where appropriate and a work plan is agreed, subject to change as the placement develops.

I would like to present a couple of really interesting case studies where we have moved away from a ‘model of practise’ for a group and looked at a very flexible individualised coproduced plan, based on a care planning approach and explored ways in which we can use the museum/gallery to develop skills and confidence in a very safe environment.

We have mainly used this with young people with additional support needs but have used this approach with older volunteers too, providing targeted tailor made placements.

Emma Scarr, Ben Hudson & Diane Gray, Community Arts Project North East & The Cultural Spring
Home is where the heart is

All of the participants of the HIWTHI projects recognised their isolation but did not feel lonely. A person-centred approach to isolation and loneliness, particularly in older people, recognises this and attempts to address some of the issues caused by social isolation by supporting individuals to engage in artistic creativity. The art created was personal and individual in nature but the experience was communal. I would argue that the individual needs to be at the heart of any intervention as their experience is fundamental to their
engagement, but it is the sharing of their artistic creation in a communal group setting that makes it therapeutic and potentially life enhancing.

A significant number of vulnerable older people in Sunderland and South Tyneside are locked into a cycle of isolation, leading to loneliness, leading to poor health, leading to further isolation. The outcomes we hoped to achieve were; meeting new people, enjoying vivid experiences, trying new hobbies (or picking up on old ones) and a sense of improved wellbeing and enjoyment of life. In addition, by working to eliminate isolation and reduce loneliness, participants in this programme would experience emotional fulfilment through new friendships, better cognitive health resulting from mental stimulation and improved physical health.

A pilot project took place between July to November 2016. Due to the success of the pilot the Cultural Spring worked with CAPNE to submit funding applications to Trusts and Foundations to continue and expand the project between South Tyneside and Sunderland. Beneficiaries from the pilot programme were encouraged to volunteer for the new sessions and act as mentors to support and encourage new participants through the process.

In total 23 songs and 6 pieces of artwork were created by the participants and the facilitators.

Susie Hall & Adam Goldwater, Great Ormond Street Hospital for Children NHS Foundation Trust & Great North Museum: Hancock
The Heart of the Matter - a multi-disciplinary collaboration, from the perspective of a hospital and a museum

The Heart of The Matter is three-year arts and science public engagement project led by artist Sofie Layton and biomedical engineer Giovani Biglino, culminating in a touring exhibition that opened at the Great North Museum: Hancock in 2018. Through a carefully supported and in-depth participatory process cardiac patients, their families, clinicians and artists were involved in creating a fascinating and immersive artistic experience for the general public to engage with. This provocation contends that when both the health and museum sectors truly collaborate and push the boundaries of their practice there are enormous benefits, not least in diversifying and developing audiences, and exploring the idea of ‘culture’ and ‘access’ in relation to arts and health.

Kel Marie Philburn, Danny Crossley & Marco Galli | Heads & Tales, Chilli Studios
Without diverse and active community involvement, History is just preserving the story of power & wealth

Working with culture to address social inequalities to make a more inclusive heritage is one of the main project's objectives to include the Mental Health community in an history-making initiative which is imperative to fulfill representation in the nation's archive. The Mental Health community, marginalised by the society and often incorrectly represented in media, coverage, and historical records, has experienced Discrimination and Stigma because of their different social class or just because ‘different’. The project has given to its participants the possibility to narrow down gaps amongst a range of activities which aim is
to empower, build confidence and skill participants up. The "Wikipedia Edit-a-Thon" workshop is building participants’ digital skills, and pursue practices of online sharing and presence of mental health services in the North East.

The project is based on a peer-led approach which enhances sustainable social practices that are targeted to create inclusion and build participants' curriculum as well. Our bottom-up approach demonstrates that the democratisation of heritage is taking place within the process of digitising records where scanning activities attract members of the community to engage with historical documents, while creatively reinterpreting such material using creative practice to enhance peer-led support both in researching and creating.

**Group 2: Cultural hierarchies**

**Chair: Deborah Munt, Ministry of Others**

**Provocations**

**Katherine Zeserson**

**Culture isn’t fair...**

The mainstream cultural paradigm in which this field of work is developing is predicated upon the social inequalities that are embedded – and corrosive - throughout UK society. In order to address social inequalities, work with culture, health and wellbeing needs to break free of this ancestry. Rigorous critical analysis of the models of creative process, partnership dynamics and power relationships must be applied proactively to the conception, planning and provision of the work in order to combat inherent bias. Creating sustainable social practices within and through this field of work requires a radical re-thinking of roles within community eco-systems: understanding where and how which kinds of expertise are vital and valuable, how they should be remunerated, when the lived experience of participants and patients must trump the protocols of the market and so on.

Cultural practice in itself carries no guarantees of equality, respect, fairness or wellness. In order for cultural practice to have beneficial impacts upon those engaged in it, the exchange of experience must be conducted within an explicitly equitable framework. Who is this work for? Why are we doing it? How is access to such work mediated and brokered? Who decides? Where is the value negotiated? If we wish to galvanise new thinking about culture, health and wellbeing we need to broaden our field of vision to recognise that wellness and poverty are in inverse relation to one another, and that in this country the confidence to engage in community based cultural activity is often more visible in affluent communities.

Work with culture, health and wellbeing will not address social inequalities – indeed cannot – unless that work is framed within a broader critique of the dominant culture and its woeful failure to create equity.

**Ben Jones, Tyne & Wear Archives & Museums**

I don’t come from nothing. I come from something.
When Billy Connolly was nominated for a knighthood, he was asked ‘It’ll be strange for you, having a knighthood, coming from nothing.’ Connolly’s reply was, ‘I don’t come from nothing. I come from something.’ There is an assumption in parts of the ‘cultural industries’ that people who come from working class or disadvantaged backgrounds are socially/economically challenged and that museum and galleries can ‘solve this problem’. As Connolly states, as a working class man from 1960’s Glasgow who worked as a welder on the Clyde docks, he came from something. However it is argued that this working-class culture has been systematically and intentionally dismantled and that we are left with a ‘parody and nostalgia’ found in museums and archives.

This talk, through exploring the work of the health and wellbeing project, Live Well, at Tyne & Wear Archive & Museums, which worked with ‘disadvantaged’ older people to explore museum and archives, will ask how do we present and support working class cultural histories and identities not as a nostalgic look at the past but as something that is still relevant today? How can museums create situations and spaces where people can consider true working class culture and even reinvigorate it?

Emma Hollamby & Victoria Tischler, Ben Uri Gallery and Museum & University of West London

Ben Uri Gallery and Museum started as a Jewish art society in London’s East End in 1915, thereafter adapting to focus on; art, identity and migration. In early 2019, Ben Uri announced a new strategy, focusing on key strengths to formalise its commitment to creative research, operating under three core programmes: Ben Uri Research Unit – BURU, focussing on emigre art and artists, Ben Uri collection- BUC, working closely with BURU to produce scholarly exhibitions at the Gallery, and touring commissioned shows, and Ben Uri Arts and Dementia Institute - BUAD. This presentation focusses on BUAD, the first national arts and dementia research institute, dedicated to devising, delivering and testing accredited, cost-effective creative interventions in dementia care settings.

BUAD aims to benefit the health and wellbeing of those living with dementia and those at risk of the condition through its accelerated research and development programme. This is the first time a cultural organisation has committed core resources to a major public health issue, challenging disconnects between arts, health and social care sectors, and improving care and creative cultures.

Group 3: Culture & place

Chair: Chris Rolls, 64 Million Artists

Provocations

Paul Hyde, Vicky Lax & Jane Cuthbert, Whippet Up
Wellbeing creativity and community; an alternative to medical models?

Whippet Up formed as a Community Interest Company in early 2018 based in Saltburn-by-the-Sea (close to Middlesbrough/Redcar) it has just completed a 6-month pilot that has
brought together a diverse group identified through a referral network we have built (community based IAPT providers, dementia support, occupational therapy, vol sector groups etc). This helped us form a mixed group that we supported using an asset based creativity approach - what is different about the ‘Whippet Up way’ is that all weekly wellbeing sessions involve the group/group members in planning larger scale community arts projects (community meals, festivals, open air cinema, arts events, performances etc). This created a pathway that has provided a measurable route for tackling wellbeing and social isolation.

This small community based pilot has inspired us to look at how it could be replicated and where it would ‘fit’ as a model for wellbeing support that is upstream of medical models.

Our ‘provocation’ is based on the notion that for some people wellbeing prevention might be better than trying to fix it later. To support this we have quotes from people who took part in our pilot. We have also taken NHS data for Community Based Mental Health Services (the IAPT services) and looked at the published ‘recovery’ rates along with data that identify the number of GP appointments where a medical prescription was not considered appropriate.

Whippet Up want to explore how social prescribing could support innovative models that tackle social isolation, build human capital and create community networks.

**Owen Evans, Edgehill University**

**Breaking into the Temples of Culture: Can We Really Improve The Cultural Capital of Everyone within Communities?**

This provocation takes its inspiration from Baroness Kay Andrew’s *Culture and Poverty* report (2014) for the Welsh Assembly Government and draws on the findings from my own evaluation of Wakefield Council’s ‘Culture Cures’ in 2017/18, an annual cultural investment scheme run collaboratively by the Culture and Health Improvement teams which funds arts and cultural projects to deliver health and wellbeing outcomes. I would like to pose the following overlapping questions and offer thoughts on solutions:

Can we ever truly foster cultural engagement for all in communities in order to address social inequality and improve wellbeing?

Can we break down the ‘psychological barriers’ that make cultural sites and institutions ‘feel remote and forbidding’ (Andrews 2014: 16)?

How do we reach the hardest to reach in communities, so that it is not just the same small self-selecting groups who participate in arts for health and wellbeing initiatives?

Is what Andrews calls in Welsh *cynefin*, namely ‘to have both a sense of place, and time; to be conscious of identity, and of belonging’ (2014: 49), possible within multicultural communities in a post-Brexit Britain?
Julie McCarthy, Greater Manchester Combined Authority  
Culture, Health and Wellbeing at the Heart of Cities and Towns

Greater Manchester is the UK’s first city region to have made the arts and culture integral to its health strategy. The combined authority is championing culture’s role in improving health and wellbeing in GM’s first cultural strategy; to be published in spring, 2019.

Through Great Place funding (ACE/HLF) we are building on established collaborations between the cultural, CVS and health sectors, which have already resulted in the creation of new ways to meet the health needs of residents (see: The Horsfall @ 42nd Street, the Whitworth, Company Chameleon, Bolton Octagon, Imperial War Museum North).

This provocation will explore how we are building on opportunities offered by the devolution of health and social care in Greater Manchester and closer working with Children and Adolescent Mental Health, Person Centred Care (social prescribing) and a locality model for population health. It will touch on learning and cautionary tales from our experience so far and describe how we are articulating a through line from arts to health to industrial growth and prosperity.

WORKSHOP

Steve Bishop and Christine Jordan, North Tyneside Council  
Culture, Health & Wellbeing – reducing social isolation

The North Tyneside Health and Wellbeing Board through its objective, to tackle social isolation through greater cultural engagement, is exploring ways to reach those at greatest risk and utilise the cultural offer to improve mental health and wellbeing.

In the context of the APPG report Creative Health, the workshop will explore the challenges of translating national recommendations into a local context. An overview of partnership working, to promote understanding between creative practitioners with medical professionals, will be explored. Delegates will have the opportunity to share their own experience and suggest ways of linking local action to the national agenda.