

Cultures of Creative Health

Temporary Contemporary

Vol. 4

[10.5920/culturescreativehealth.fulltext](https://doi.org/10.5920/culturescreativehealth.fulltext)

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Published by University of Huddersfield Press
University of Huddersfield Press
The University of Huddersfield
Queensgate
Huddersfield HD1 3DH
Email enquiries R.Bailey@hud.ac.uk

First published 2025

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A CIP catalogue record for this book is available from the British Library.

ISBN: 978-1-86218-238-7 [Print]

ISBN: 978-1-86218-239-4 [ePub]

Design: A.N.D. Studio, www.and-studio.co.uk

Photography: Special thanks to Laura Mateescu, images reproduced courtesy of the artists.

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Introduction to Cultures of Creative Health

Rowan Bailey

This year's Cultures of _ programme has focused on **Creative Health**. The School of Arts and Humanities has hosted a 12-month public realm programme featuring guest speakers, artist residencies, knowledge and cultural exchange projects, exhibitions and live briefs with staff, students and communities. A lot of the work undertaken has been collaborative and driven by creative experimentation, which has included the development of new partnerships, relationships and an ever-growing network of creative health advocates. This book documents the outcomes of these projects alongside a range of interviews, position pieces and case studies of Creative Health from across the region of West Yorkshire.

What is Creative Health?

According to the 2023 Creative Health Review Report, Creative Health involves 'creative approaches which have benefits for our health and wellbeing' (<https://ncch.org.uk/>). This can involve activities across all kinds of creative practices (visual arts, performance, crafts, film, literature, music) and extend into nature, through gardening, swimming, bathing, walking and running. The Creative Health Review also suggests that creativity can change health and care services for the better, through co-production, education and workforce development.

Creative Health essentially means non-medical approaches that use arts, nature, sport and outdoor activities. It is becoming clear that medical interventions and responses have limits and cannot tackle the social problems and pressures underpinning the causes of ill health. There is increasing recognition of the value of Creative Health approaches, especially in response to the crises in mental health and the pressures placed on NHS services.

The Creative Health context in West Yorkshire

Our engagements with Creative Health have been shaped by previous Arts and Humanities Research Council (AHRC) funding which involved gathering stories from people with lived experience to consider the benefits and potential of Creative Health approaches in West Yorkshire (research team: Barry Percy-Smith, Rowan Bailey, Nic Stenberg, Liz Towns-Andrews, Deborah Munt, David McQuillan & Claire Booth-Kurpnieks, see [Creating Change - University of Huddersfield, 2023](#)).

In December 2023, the Mayor of West Yorkshire, Tracy Brabin, and Chief Executive of the West Yorkshire Health and Care Partnership Board, Rob Webster, announced a Creative Health System for West Yorkshire, the first of its kind in the UK. This new system represents all the local authority districts (Bradford, Calderdale, Kirklees, Leeds and Wakefield) in the region and each district offers unique and distinct forms of Creative Health provision.

This research and the activities of Cultures of Creative Health have contributed to the development of a new Creative Health Hub at the University of Huddersfield. The Creative Health Hub aims to support the Creative Health infrastructure across West Yorkshire. We intend to work in collaboration with a consortium of external partners to raise the visibility and awareness of Creative Health and develop new forms of provision in place. Community and cultural engagement for creative

health is key to this collaborative working and aligns to the West Yorkshire Creative Health System.

Health inequalities in place

Our experiences of health and wellbeing are local and place specific. When we refer to health inequalities, we mean the systemic and unjust differences of living as experienced by people in place. These disparities are often determined by social, economic and environmental factors (see Marmot Reviews, 2010 and 2020).

Systemic inequalities come in different forms. People from low-income backgrounds often struggle to get good healthcare, healthy food and safe places to live. This can lead to worse health. In rural or underserved urban areas, there are fewer healthcare facilities, making it harder to get the services people need. Discrimination can limit access to different kinds of care support. People with lack of pathways to education often have a harder time understanding health information, which can impact on making good health choices. Job security, work conditions and health risks at work also greatly affect overall health. Stable housing, support from friends and family and community safety can influence our access to health and social care.

In the 2020 World Happiness Report, produced by Gallup, the Oxford Wellbeing Research Centre and the UN Sustainable Development Solutions Network, cities have been ranked and aligned to the impacts of rapid urbanisation. The report states that approximately '4.2 billion people, more than half the world's population (55.3 per cent), are living in urban areas today' and in '2030, a projected 706 cities will have at least one million inhabitants' (De Neve and Krekel, 2020). The report also explains that cities, on the one hand, serve as 'economic powerhouses: more than 80 per cent of worldwide GDP is generated within their boundaries' (The World Bank, 2019). And yet, on the other hand, urban environments present challenges with lack of affordable housing, public transport infrastructure and rising congestion and pollution levels, including use of the world's energy consumption and greenhouse gas emissions. And with rapid urbanisation, we experience 'increased pressure on public open spaces such as parks and urban green areas, which provide space for social interaction and important ecosystem services.' (De Neve and Krekel, 2020).

It is with the recognition of these factors and their impacts on people's lived experience, that we can better understand how places shape health and wellbeing. And particularly, in this context, how Creative Health strategies might be developed to address and reduce health inequalities, through the redistribution of resources, opportunities and wealth.

Culture with and for Capabilities

In *Radical Help: How Can We Remake the Relationships between us and Revolutionise the Welfare State* (2018), the social designer Hilary Cottam discusses four capabilities that help us to have a good life: work/learning, health/vitality, relationships and community. Cottam offers an approach to design innovation in communities which begins by being embedded in place to better understand what

the challenges are in neighbourhoods and at local levels. Cottam explains that relationships are key to the development of other capabilities within us (p.205).

The role of culture in enabling and supporting these capabilities is fundamental. Current evidence shows that social prescribing can take pressure off the NHS by reducing the need for GP appointments and for medical prescriptions (National Academy for Social Prescribing). Many socially prescribed activities are run by charity, voluntary and community organisations. These organisations are vital in the way they connect people with services and activities. But not all places have a portfolio of Creative Health offers and some only a limited selection of choices.

Culture helps people to cross the threshold into new experiences. These encounters build confidence, curiosity, energy and life force. Cultural experiences can develop new learning, work or volunteering, increase the inner drive to be well and healthy, or motivation to be socially engaged or indeed, create a sense of belonging or connection with communities in a place. This is why we need culture on the high street and in local neighbourhoods. It is a threshold into the development of our capabilities. These capabilities are not given. They are learned. They are part of lifelong learning.

Furthermore, artists, creatives and facilitators working in Creative Health also require support to help to develop their skills. There are many kinds of training and development that could be further designed to support practitioners, particularly sessions on cultural inclusivity, facilitation and engagement, community co-creation techniques, guidance on trauma-informed practices and how to evaluate social impacts. Some of our pilot projects with hoot creative arts for our Cultures of Creative Health programme have involved the delivery of sessions in these areas with creative practitioners, the documentation and evaluation of which can be found in this publication.

This publication not only documents the projects developed through this public realm programme it also evidences the extraordinary range of case studies in Creative Health from across West Yorkshire. These contributions provide deeper insights into how we might think about the cultures of Creative Health in place. Underpinning this understanding is an idea about culture as a mechanism or infrastructure for the development of Creative Health capabilities in people's lives.

A curatorial focus for this book

We have ensured that the work featured in this book is curatorially aligned to *culture with and for capabilities*. In this respect, there are several ways in which this idea is mobilised in and through the work selected for this publication. Firstly, as a School of Arts and Humanities we engaged with Creative Health as part of our public realm programme, in which we have curated a range of activities and collaborations, including:

- An online guest speaker series featuring academic researchers, health and social care professionals, creative and cultural providers, people

with lived experience and community organisations. These talks are available to listen to on Spotify. See: <https://open.spotify.com/show/4PPLM3pWHhZxOUQ6DdJBkQ>

- Pilot tests of continuing professional development workshops with hoot creative arts, focusing on support for creative practitioners working in or seeking to work in the creative health sector.
- Knowledge and Cultural Exchange Projects with external partners across West Yorkshire.
- Solo and group funded creative research projects on health and wellbeing.
- A range of creative practitioner residencies at the Toast House Galleries (University of Huddersfield).
- Embedding Cultures of Creative Health into our undergraduate and postgraduate curriculums with live briefs and exhibitions.

Secondly, we were keen to ensure that the publication was exemplary of the breadth of cultural experiences that Creative Health may offer. We issued a call for contributions out across West Yorkshire to invite submissions.

Together these submissions include:

- **Case studies** of good practice in the area of Creative Health.
- **Interviews** with key practitioners and sector leaders who may bring new insights to bear on the value and importance of creative health.
- **Exhibition and residency showcases** documenting the Cultures of Creative Health public programme.
- **Knowledge and cultural exchange projects** exploring collaborative and co-creative projects between academics and non-academic partners.
- **Position pieces** that reflect on the challenges and opportunities of Creative Health for the West Yorkshire region, and the Creative Health sector more broadly.

These contributions serve as evidence of Creative Health approaches and their potential impacts. For example, many of the case studies and projects included in this publication focus on the significance of strong **cultural ties and community bonding**. These social connections can enhance wellbeing and provide a sense of belonging. Other contributions focus on the **celebration of culture**. It is important that each of the five districts across West Yorkshire have delivered a year of culture, or as in the case of Bradford2025, a city of culture status. These years have successfully embedded health and wellbeing activities within cultural programming, providing more condition of opportunity for people to gain access to Creative Health on the high street. Many projects in this book are focused on fostering **community engagement** and providing people with a platform to voice their experiences. This participation is empowering. The impacts of Creative Health activities also reveal a **holistic view** and understanding of what it means to be well (physical, mental, social and psychic benefits). The range of perspectives presented are **place-based** and **place-specific**. They point to **what works**, but also what the Creative Health sector in West Yorkshire needs to become in order to provide **condition of opportunity** for communities and practitioners to thrive.

We thank all the communities and partners who have been involved in this research programme and look forward to further collaborations and opportunities. A special thanks to Dr Laura Mateescu, Dr Claire Booth-Kurpnieks and Aidan Nolan for helping to produce this publication.

Cultures of Creative Health is dedicated to Pippa Plock.

Dr Rowan Bailey is a Reader in Cultural Theory and Practice with an interest in place-based thinking and making in the public realm. This includes collaborative partnership working with different creative communities. She is also Director of the Centre for Cultural Ecologies in Art, Design and Architecture at the University of Huddersfield and Principal Investigator of the Creative Health Hub for West Yorkshire.

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Case Studies

Leeds Arts Health and Wellbeing Network Fran Coard

Leeds Arts Health and Wellbeing Network (LAHWN) is a mechanism that supports people in creative arts, culture, health, care, and academia to work collaboratively, share ideas and maximise resources.

Leeds's Health and Wellbeing Board established LAHWN in 2018 in response to recommendations by the All-Party Parliamentary Group enquiry into arts and health and the 'Creative Health' report (2017). The network is funded by the city's Health and Care Partnership.

LAHWN is open to all individuals and organisations interested bringing arts, health, and wellbeing closer together and currently has over 730 members from a wide range of disciplines across Leeds. Governance is provided by a dedicated management group made up of key stakeholders in the city including Health Partnerships team, Leeds City Council's Adult Social Care, Public Health and Culture Teams, University of Leeds and Leeds Beckett University, freelance artists and Thackray Museum of Medicine. The network employs one part time member of staff to manage the network activity, hosted by the Cultural Institute at the University of Leeds.

LAHWN produces a monthly newsletter sharing information across the network about opportunities in Leeds and beyond to support and develop arts and health activity. LAHWN connects to other networks in the city, regionally and nationally to help drive collaboration by sharing information, resources and increasing connectivity. LAHWN has led events and forums to promote the cross pollination of ideas and resources across sectors.

LAHWN's vision is that arts and creativity support Leeds to be a healthy city, where people who are the poorest improve their health the fastest. Our values reflect our approach to this ambition as we aim to **Connect, Support and Champion** arts and health in Leeds. There are three key themes to the work: mental health and wellbeing, creative ageing and workforce wellbeing.

Find out more: www.lahwn.co.uk

Join our network: [Leeds Arts Health and Wellbeing Network \(list-manage.com\)](https://list-manage.com)

Fran Coard is the Creative Development Manager at Leeds Arts Health and Wellbeing Network. She has worked in the third sector for over 20 years and is passionate about co-production, lived experience inclusion and the role that arts and creativity can play in supporting wellbeing.

South West Yorkshire Partnership Foundation Trust's Creativity and Health programme

David McQuillan

The South West Yorkshire Partnership Foundation Trust (SWYPFT) is the mental health service that covers Kirklees, Calderdale and Wakefield. It covers acute inpatient services as well as community-based approaches, for example Creative Minds. The Creativity and Health programme was set up in response to the All Party Parliamentary Group Creative Health report in 2017, initially piloted in Calderdale and then broadened over the rest of SWYPFT's footprint.

Projects initiated by the Creativity and Health programme try to cover the whole life course. Examples of projects include:

The Lullaby project

The Lullaby project is designed for new and expectant parents, developed in partnership with Live Music Now. The project works with perinatal mental health services and health visitors to identify people that might be at risk of postpartum depression or other kind of mental health conditions. It puts together expectant parents with a professional musician. Through a process of writing and talking about their hopes, dreams and fears about this new person they're bringing into the world they work together to write a personalised lullaby. The musician records it, but the parents can join in and it's composed to be in their register so that they can sing it too. It's a creative, positive process that has long standing results about increasing parent child bonding and reducing postnatal depression.

Music in Care

A big project in residential care homes in Calderdale is called Music in Care, developed in partnership with Live Music Now, after the pandemic where it had obviously been an incredibly difficult time in care homes. It started with a pilot of two homes and then we got funding to do about half of the homes in Calderdale, which is about 42. The aim is to cover all of the homes in Calderdale and then work across West Yorkshire. Existing staff in the homes were also offered training and a qualification in music in care, leaving a permanent legacy of staff who have the confidence and skills to integrate music into everyday care as well as running their own sessions.

First Songs

First Songs follows on from the Lullaby project, it began from looking at health inequalities and the health and well-being strategy in Calderdale around early years and school readiness. We found the levels of children being ready for school at age 5. For example language development, personal and social development and nappy training, were reduced in areas of high deprivation. We worked with Professor Adam Ockleford at the University of Roehampton, who devised a method of targeted music making for young children with complex needs, along with musicians and artists to create something in an area of disadvantage that would enhance early years development and improve school readiness in those areas. We worked with a children's centre and a school nursery and then ran open sessions in a library to



co-produce some amazing resources. After 12 weeks it showed a profound impact on the confidence and the language development of the kids that were involved in it. In order to create something that could be incorporated by early years practitioners and parents in day-to-day life with their kids we worked with a children's book illustrator and the musicians to create a series of illustrated cards and videos that will go out to early years settings and parents in Calderdale. We are currently seeking funding to run this project in different areas with different community demographics in Calderdale and in Kirklees.

Other projects are focused on how SWYFT engages with its service users, using creativity to address a challenge in the system, for example:

Create and Bloom

A soon to be launched project that aims to encourage more people to be creative on a day-to-day basis developed out of a conversation during the pandemic with a social prescribing link worker and the challenges of prescribing any kind of creative health activity when everything was closed and people had to stay in their houses. We commissioned the app called Create and Bloom, which works like a creative version of Couch to 5K.¹ It starts with four courses of content developed by Everybody

Arts, Curious Motion and Arvon Foundation at Lumb Bank: drawing, creative writing, dance movement and mixed arts. You pick whatever theme you want to do and there are 30 days of creative content of 5 - 30 minutes of activity a day to help you build up a practice with a wellbeing focus. The app can also signpost you to local groups or activities in your area to continue developing your practice.

Creative Care Workforce & Creative Care Plans

Creative Care is a large and complex project delivered with Everybody Arts, working with acute psychiatric wards across the SWYFT footprint to explore what a creative care workforce might look like. These can be quite challenging, unpredictable and busy environments to work in. We wanted to explore the shared language and skills between the practices of good, compassionate, personalised care and skilled creative artists, actors or practitioners working in community settings.

We are piloting 8 FTE artists and creative practitioners to work in the acute, psychiatric wards, running activities on the wards, to see whether that would have a role in reducing violent and aggressive incidents on the wards. This is not a revolutionary pathway as SWYFT has been bringing practitioners in to do activities on wards for many years, but this has put more resource into it and worked with the wards to run it at times identified by them. The aim is to expand this to identify how the creative practitioners can work one to one with in-patients on the ward to develop creative care plans, which would help people to develop a creative practice, but also to understand how it helps their mood or their well-being and how they can use that or utilise that in their recovery. They then would work with discharge coordinators, Creative Health partners in communities, social prescribing link workers and the Create and Bloom app, once it has launched, so that when people are discharged from services they can carry on accessing something like it in their community. We often find when we talk to people that have left our services that they've received a really high standard of care and have recovered up to the point where they've been discharged back into the community, where they can be discharged back into an environment that's part of making them ill in the first place, which can lead to readmissions and relapses in their condition. In the long term we hope this project could impact the average length of stay on wards through improved recovery rates as well as a reduction in re-admissions so that people can stay better for longer out in the communities.

This case study was compiled based on the interview between Dr Rowan Bailey and David McQuillian (see pages 61 to 67 of this publication), edited by Claire Booth-Kurpnieks.

Image credits

Images 1-2: Illustrations for Create and Bloom app. Illustration by Michaela Lesayova, commissioned by Everybody Arts.

Endnotes

- 1 See <https://www.nhs.uk/live-well/exercise/get-running-with-couch-to-5k/>



Herd Farm Residential, February 2024

Friends of the Future

'The totality is not, as it were a mere heap, but the whole is something besides the parts' — Aristotle

Friends of the Future Collective CIC started as an informal collective of artists, educators and psychotherapists who came together to discuss how arts and culture can be used more effectively as a public health and wellbeing resource.

The founding members of Friends of the Future (FotF) first met in a garden in the summer of 2020, seeking connection during lockdown with a need to articulate a collective response to the crises experienced in national health and social care systems in the UK - particularly the surge in complex mental health problems prior to (and during) the pandemic.

FotF responds to the changing structures of contemporary British society, increasing public awareness of environmental issues, health and social care crises, the government's Creative Health agenda, and the move from gallery-oriented to socially-engaged contemporary arts practices. It has four areas of focus:

1. Peer Support and Knowledge Exchange
2. Education and Research
3. Experimental Projects
4. Consultancy

An immersive Open Space Residential

In February 2024, Friends of the Future hosted its second residential creative knowledge exchange at Herd Farm, Leeds, building on discussions from the previous year's event at Braziers Park, Oxfordshire.

28 artists and therapists from across the region (and beyond) met to explore themes including: power, healing, art, intersections, politics and what professionals working creatively in local communities want and need.

Using the Open Space method (SessionLab, n.d.), the event had a participant-led agenda and relaxed workshops, with good food and spaces for connection and solitude. The event fostered new connections and perspectives, and the results reflect the knowledge/skills of the participants, including those with lived experience.

The event was developed and facilitated by Georgia Cooper a Yorkshire-based (born & bred!) psychotherapist & artist. It was part-funded by The Northern School of Contemporary Dance, where Georgia has supported the emotional wellbeing of dancers in training for over 20 years.

What is Open Space?

“Open Space” (SessionLab, n.d.) is an innovative meeting structure designed to harness energy and facilitate change - it has no agenda, just an invitation. We invited colleagues, friends, and associates, to discuss art, mental health and how the two connect, intersect, overlap and intertwine.

Participants come together in a circle, with no items on the agenda and a blank wall to create one. After an agenda-setting exercise, the group self-organises into workshops to discuss the themes raised:

- Art & Collective Healing
- Photography Walk
- Mental Health & Textiles
- Music and Breathwork
- Who has the Power?
- Relational Practice & Creative Process
- Academia vs Creativity
- Art Therapy or Therapeutic Art
- Embodied Practice

Art & Collective Healing

Healing can come from being ‘seen’ by others. Creative workshops foster belonging, connection, and empowerment in disenfranchised communities. Sadly, these are often overlooked by government agendas, leaving arts and community groups to facilitate this support.

If we start a process of connection through community, how do we continue responsibly when budgets end? How can we enable communities to self-sustain creativity? Creative expression generates vulnerability that requires careful consideration and appropriate support.

There is a distinction between “therapy” and “therapeutic”, both of which are essential. Art Therapy is a specific intervention, but how can we describe a holistic/hybrid approach that pulls from creative practice and therapeutic theory? Community Art? Therapeutic Art Intervention? Creative Connection? Creative Group Work?

And how do we create projects that are ‘fit for purpose’ as the Creative Health Agenda develops? Some ideas:

- Plan for endings with care, managing relationships appropriately.
- Participants can be left with a void so aftercare is crucial, though often unfunded.
- A need for signposting and follow up - how to continue whatever the project started?
- Creative health professionals often work in isolation and in communities with complex needs – they need support to build resilience.

- Ensure that creative professionals/artists are working within BACP guidelines when delivering creative health opportunities.
- Artists do not currently have a regulatory body and are not subject to ethical practice frameworks - discussion to ensure psychological safety is key.

Photography Walk:

The workshop encouraged participants to engage with the outdoors through a Photography Walk, promoting self-regulation and self-reflection in a judgment-free environment. It created joy and playfulness, allowing therapists to break free from their usual structured routines.

Mental Health & Textiles:

This stitching workshop considered the significance of textiles in identity and culture and offered regulation/stabilisation through the rhythm of making. We pondered links between textile language and mental health e.g. 'I'm hanging on by a thread'.

Music and Breathwork:

Our breath can affect how we feel and our body's response to stress. We used a breathing exercise as a grounding tool and listened to musical notes. What does sound offer in terms of bodily regulation and connection? See Stephen Porges's "Safe and Sound Protocol" (Porges et al., 2014). There is potential for music & imagination to offer healing, even via non-traditional ways of creating music.

Who has the Power?:

Art can challenge hierarchical structures... but who holds the power and finances? Funding often prioritises output or wellbeing, neglecting the value of the creative process. Therapeutic artistic endeavours are frequently undervalued due to the lack of measurable outcomes. Simply putting a person, or a community, at the heart of what we are doing will start to address the power imbalance.

Relational Practice & Creative Process

'...not everything that can be counted counts, and not everything that counts can be counted.' — William Bruce Cameron

How do we keep relational practice at the heart of creative processes? How do we 'plant a creative seed and let it grow', when most funded work has time pressure and set outcomes? How do we communicate the value in taking time to figure out the best approach to the people holding financial/commissioning power?

Artists often feel pressured to justify their value. How do we measure the transformation/value of "I never knew I could write/draw/paint" to "I can if I choose"?

Often the outcome is not the vision of success you had at the outset, but creativity is organic and the result (and the process) has its own value. We can never know the impact of projects 20 years in the future – but it's the ripple effect that's felt by families for years to come, from being seen and having a voice for once in their lives.

Art Therapy or Therapeutic Art

Art enables expression and understanding beyond words. In an Art Therapy Group, art serves as a tool for experiential learning, allowing participants to reflect on their creations and make important connections themselves. The focus is on the process of communication rather than the final artwork.

Art in its broadest sense can give us permission to experiment in ways other disciplines do not. Artists are often driven by a need for self-expression, which is perhaps linked to mental health or emotional wellbeing more than we currently acknowledge.

Academia vs Creativity

Creativity doesn't have the same system of measurement that academic practice has. Drawing, stitching, music are all language – but words dominate, leaving some at a disadvantage.

Neurodiversity vs Neurotypical. Academia represents a neurotypical (and privileged) perspective that prioritises 'write ups'. Academia is exclusive, whereas creativity is inclusive – you don't need exams to go on a creative journey!

The School of the Damned is a great example of a widely respected yet informal institution, set up by unfunded art students. Each year, the leaving cohort interview/decide on the next year's members - recognising creative practice outside of educational norms.

Embodied Practice

Embodied practice describes an intersection between dance and therapy. Therapists often work with emotions that manifest in the body. Sometimes words can't describe it, but it can be explained/released physically. Techniques like Bilateral Movement Drawing can be used to engage both brain hemispheres, while Feldenkrais is somatic movement therapy that improves mind-body connection.

What's Next?

Themes from the weekend included:

- The dynamics of power in art and therapy, its impact on individuals and communities...and the creative health agenda.
- Recognising the value of art as a fundamental human activity.
- The need for connections among practitioners for mutual support.
- How to get funding that offers communities the right kind of opportunities?
- An immediate need for a professional network of creative practitioners and therapists using creativity in their work.

Following this, we formed a Community Interest Company (CIC) in August 2024. As Friends of the Future Collective CIC, our goal is to support Mental Health

Professionals and Community Artists, who provide psychological support and emotional connection, via creative activities.

The CIC will offer training, resources, and events to enhance connection and build ethical practices, ultimately benefiting individuals with mental health challenges by equipping creative professionals with better resources and resilience.

Find out more at www.friendsofthefuture.org.uk

Georgia Cooper is a Family Psychotherapist, Artist & Activist

John Cussans is Head of Art & Psychology BA Hons at University of Worcester

Charlie Fox is an Artist, Writer & Curator

Vic Leeson is a Poet, Psychotherapist & Activist

Chris Madden is a Psychotherapist

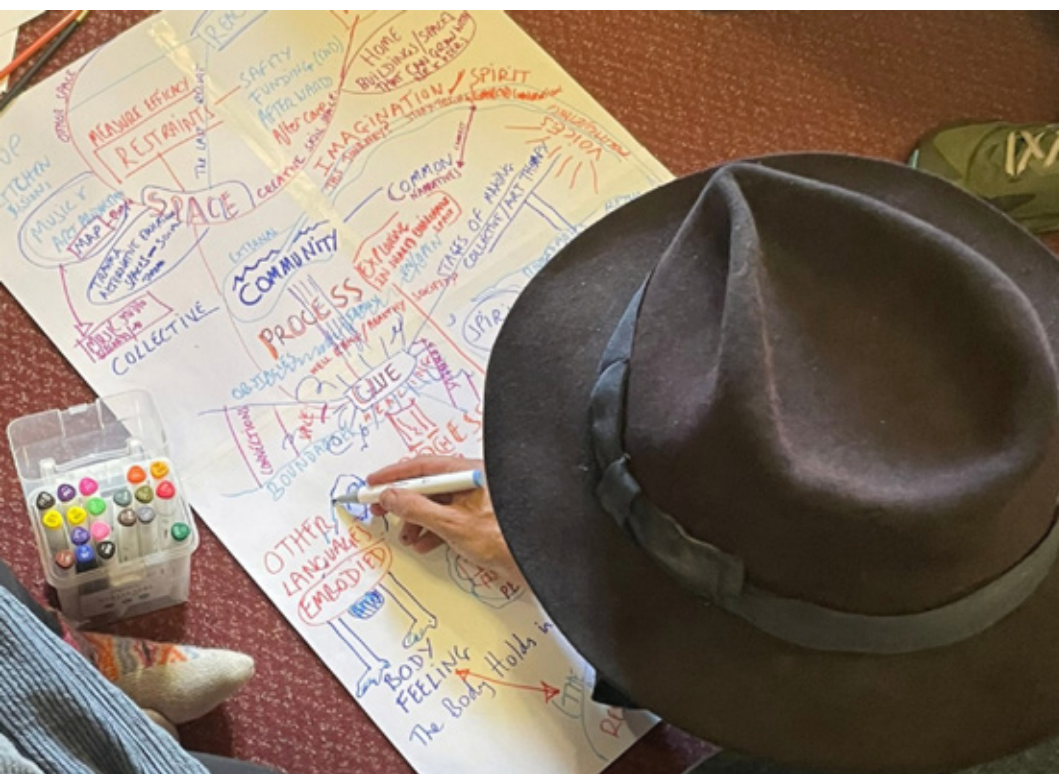
Helen Madden is a Musician & Composer

Image credit

Image 1: Friends of the Future Herd Farm event. Photograph courtesy of the author.

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Our Creative Connection - Sensory Stories

Chris Chinnock

Sensory Stories is a project delivered by Our Creative Connection and funded by Arts Council England & Macauley Moat Foundation. It explores plant based photographic methods to creatively engage the senses of people with learning disabilities and young people from diverse communities in Huddersfield, Dewsbury, Keighley and Skipton.

Using plants and natural ingredients to make photographs and prints invites people to engage in a tactile, tangible experience of 'making' a photo rather than 'taking' a photo by collecting and preparing ingredients such as leaves, stalks, flowers, berries & roots. These materials are used to create solutions for developing photographs, and in the context of *Sensory Stories*, provide additional sensory stimulus with our environment & surroundings as well as the tactile nature of the process.

It is a multi-sensory process combining:

Touch: Making a photo using analogue printing methods involves using your hands to carefully place and develop the image. You can feel the textures of the paper and the chemicals as you work.

Smell: The process releases the unique scent of the plants we are turning into developing solutions, chemicals and paper, creating a sensory memory.

Sound: As you expose and develop the photo, you can hear the soft swish of liquids and the click of equipment, offering an auditory experience.

In this way it is accessible and engaging to people across a range of senses and provides an opportunity for everyone to get involved.

Following the words of writer and philosopher Wendell Berry that 'the community... is the smallest unit of health, and that to speak of the health of an isolated individual is a contradiction in terms' (Berry, 1994), *Sensory Stories* is an approach to Creative Health that is grounded in the principles of Asset Based Community Development. Creating opportunities for people to be alongside each other, celebrating strengths and having shared creative experiences that build confidence, trust and connection.

All of the people taking part live with economic, health and social inequalities that impact their wellbeing. Some participants have profound and multiple learning disabilities, others are autistic or have learning difficulties. The thing that they all share is that they are often marginalised, misrepresented or missing from the public discourse. This project has been designed from a position of togetherness and a perspective that isolation and loneliness are real barriers to broader health and wellbeing. By creating spaces where connection, friendship, fun and feelings of wellbeing and belonging can flourish- everyone can take up their rightful place in their community.



Chris Chinnock is a socially engaged Photographer specialising in Participatory Photography. He founded Our Creative Connection, a Social Enterprise that uses Photography as way to amplify the voice of those who are often unheard, encourage critical conversations that bring about change, support health & wellbeing through creative expression and to promote inclusion, cohesion & connection.

Image credits

Image 1-2: Plant-based photography workshop. Photograph by author.

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Yorkshire Youth and Music
Gail Dudson

Yorkshire Youth and Music works across the whole of Yorkshire with children and young people who experience trauma and multiple disadvantage. We work in partnership with health and education professionals in Secure Children's Homes, psychiatric and hospital services, a Young Offenders Institution, and in the community. Young people who come to us may be looked after, neuro-divergent, have learning difficulties, severe and complex needs, be victims of criminal exploitation or of crime, or display challenging behaviour. We meet young people in many different settings and situations; what they share is often a sense of not being able to live in the world as it presents itself to them because of their experiences so far.

We want young people to be inspired to lead creative musical lives, because we believe that 'music makes lives better', and that well-planned and properly supported creative activities are beneficial to young people's well-being.

Young people's voices are at the heart of our practice and their creative development is our goal; we're musically all-embracing, we value musical skill, knowledge and understanding, and our workforce of flexible, adaptable excellent musicians have specialist training to work effectively with some of the country's most vulnerable young people.

We're not musically naïve; if music has power, then that power is not inevitably positive; it is part of our identity, can portray or communicate intense feelings, and can affect emotional state and regulation, and all those characteristics can be beneficial, or not. We invite young people to express themselves creatively, to tell their own story and articulate their thoughts and experiences, which can be helpful to the health, education or care professionals who work with them. At the same time, we're very careful about how that expression is done. There are many music genres where darkness, violence, misogyny and even direct threat abound; our work with young people starts from where they are and works away from content that would put young people at risk. A very straightforward ground rule, right from the start, is that we would never give a young person a copy of a recording they'd made in a session which was a risk to their own and other's safety and wellbeing. Unsurprisingly, that can meet with some initial resistance from young people, though it rarely prevents them from attending.

Our in-session approaches also consider:

- The amount of talking, which can be almost none and can be plenty. Some knowledge (e.g. how key signatures work and relationships between keys), or structuring and shaping a song, need word-based explanations alongside musical examples
- The amount of music-making; we have a 'learning by doing' philosophy. Some of our sessions are exclusively musical, with every signal and interaction a musical one.

- Permission to explore; we have a wide range of kit, from Macs and controllers to trumpets and drum kits, and we place a high value on young people finding their own favourites to work with.
- The safe place to 'play' – developing musical skills is hard work, with many slips along everyone's path. We find digital music making a great liberator for some – false starts are dropped into the recycle bin easily.
- The nature of the music leader's contribution; our musicians are sensitive to the range of roles they need - leader, guide, coach, adviser, and boundary setter.
- Finally, we work on the basis of 'quick wins' to begin and more input from music leaders. As young people gain skills and confidence, the music leaders change their role to coach and collaborator.

Here are examples from participants:

'I attended a session with my YP at the music studio. The YP had pre written his lyrics and due to his fascination with gangs and violence the nature of his lyrics were not suitable. Louis (YY&M Music Leader) who lead the session with the YP was able to challenge the YP in thinking deeper regarding his lyrics and the message he wanted to send. The YP often finds challenge difficult and will often persist with his narrative around gangs and violence, however Louis was able to redirect him and continue to engage him at the same time. The YP stated that he enjoyed the session after the session and as a professional who witnessed the session I was in awe of the way Louis managed the YP. I myself was worried prior to the session that the music studio sessions would further feed the narrative the YP has of himself in terms of gangs and violence. However witnessing the initial session not only put me at ease but left me feeling the music studio would be highly beneficial in challenging the narrative the YP has of himself and also make the YP ponder deeper regarding this narrative and the impact it has on himself and others around him.' (written by the Young Person's Social Worker, May 2024)

'I'd start by saying "I want more studio time" but "want" is an understatement, music is one of the most productive ways I've learnt to express myself and I've always wanted to be able to experiment with music. Music is the solution to all my problems, whether I feel sad, angry, happy, or just feel like I'm not having the best day I write music, it's something I have a passion for and always had to turn to when I felt incomprehensible since a child, and now that I've been given the facilities to work on my craft I feel ecstatic but I feel I need more as music gives me something to do to stay out the way from other not so appealing things going on in my environment, I've felt like risking my potential and talent many times but always had music to turn to when I felt that way, the question I ask myself now is what happens when music isn't an option, Which is why I urge you to alleviate me with more studio time, as I feel I can be successful with music and make something of my life, all my life I feared being a nobody and now I have the chance to be somebody, all I need is music, the one thing keeping me going.' (Young Person, September 2024)

'X, a young woman, was resident at Becton Centre for X months with a history of violent self-harm. An elective mute, she found it very hard to engage in group and

education activity, spending most of her time in the residential unit in her bedclothes. She was encouraged by her fellow residents to come to education and try a music session, and for the first few sessions, she remained sat in the corner, quietly observing the activity, and then, on a day with very few other young people engaged, she found the courage to approach the synthesisers and experiment with sounds. Staff and one other young person began to musically improvise around her using limited verbal encouragement.

Over following weeks she learnt quickly and gained confidence to create melodies, rhythms and harmonies on a variety of instruments, increasingly showing pleasure in the activity and making more and more eye contact. Other young people showed their delight with her abilities and progress and it was clear that she valued this very much. Though she struggled with most other education activities, music was always a session she would never miss.

By the time she left the centre, she had become a vital member of a small group of musicians, and made it known that music was an activity she wanted to continue from home and from Alternative Provision.' (Music Leader, written in 2023)

This case study was adapted from a Cultures of Creative Health Presentation at University of Huddersfield, July 2024

Gail Dudson is the Director of Yorkshire Youth and Music
<https://www.yym.org.uk/>



The National Day of Art in Care Homes is an annual event taking place on 24 September championing, promoting, and encouraging arts engagement in care settings and highlighting the health and wellbeing benefits for all involved. In celebration of the *The National Day of Art in Care Homes 2024*, 100% Digital Leeds developed an engaging programme of creative workshops open to care providers in Leeds, free of charge. This programme was open to all care settings including residential care homes, day services, supported living, recovery hubs, hospices, and unpaid carers giving one-to-one support.

The programme included a range of art forms and cultural activities, and all sessions were suitable to the needs of people being cared for, such as older people, people living with dementia, and people with learning disabilities. Now in its third year, the week-long programme gave organisations the opportunity to deliver sessions to care recipients engaging with arts and cultural activity across the programme.

The 100% Digital Leeds Programme is led by the digital inclusion team in the Integrated Digital Service at Leeds City Council and Leeds Health and Care Partnership NHS West Yorkshire Integrated Care Board. The team works with partners across the city in many different settings – third sector, public sector, health and care – to strengthen digital inclusion infrastructure in communities to increase access, engagement and participation.

100% Digital Leeds is working with the Leeds care sector to improve digital inclusion for staff and residents. Digital skills, confidence, and motivation are identified as sector-wide barriers to digital inclusion. Engaging with care settings through participatory projects is a way for the 100% Digital Leeds team to further understand the barriers the sector faces to engaging with digital and to explore what cross-sector support the team can offer at a strategic local authority level. The digital arts participation programme helps to position digital as an enabler to the care sector's priorities, in a recognisable and accessible context.

Arts and creativity can motivate care staff and residents to build their digital skills and confidence, leading to future engagement with digital learning. This can result in increased wellbeing outcomes through using digital to enable increased social interaction, engagement with the wider world and the ability to access information and to make decisions about their own care.

For example, a Lovell Park care home resident commented on their experience:

'I have never watched ballet or opera before. The ballet was beautiful and I would like to see one in the theatre now.' (Care home resident)

In previous years the programme has included contributions from organisations such as Aspire CBS, Leeds International Piano Competition, Leeds Libraries,



Opera North, People Matters and Yorkshire Dance. The 2024 programme saw six organisations deliver ten sessions, with over 150 care recipients engaging with arts and cultural activity across the week. The organisations were from a variety of sectors including arts and cultural organisations such as Ascendance, Northern Ballet and RJC Dance, charities such as the Canal and River Trust and individual artists like Richard and Honey.

In 2024, 100% Digital Leeds team also partnered with The National Activity Providers Association (NAPA), the organisation that runs the National Day of Art in Care Homes, to hold an online bingo session delivered by Aspire CBS, open to care settings across the country.

The Arts in Care Digital Programme steering group is made up of care, arts and cultural organisations and Creative Health professionals who provide their expertise and support to the digital inclusion team when designing and delivering the programme. Working with this steering group allows 100% Digital Leeds to ensure that the programme realises its objectives while addressing barriers to engagement for all involved. As Pam Johnson, Head of Culture Programmes, Leeds City Council explains:

The arts and cultural sector is uniquely placed to champion digital inclusion to bring in new audiences to engage with work digitally, to upskill those facing barriers to digital inclusion, and to demonstrate the benefits of being able to access provision digitally.

Age UK's Index of Wellbeing in Later Life (2017) highlights the importance of maintaining meaningful engagement with the world around you in later life, with participation in enjoyable and relevant activities being the biggest direct factor for wellbeing. Within the care sector access to in-person professional arts participation is at best infrequent and at worst non-existent. Arts and cultural activities can be used within care settings to facilitate multiple health and wellbeing outcomes and access to digital tools can enable those opportunities. As the Good Things Foundation and Arts Council England guidance on digital inclusion explains:

Digital delivery has the potential to enhance inclusion within the arts and cultural sector through providing opportunities for people to enjoy content and experiences that they would not be able to access in person. It also provides the opportunity to maximise the social benefits of engaging with arts and culture.'(Arts Council England and Good Things Foundation, 2021, p. 1)

Taking part in the programme gives arts and cultural organisations the opportunity to try something new in a low-risk environment and to test remote digital ways of working with audiences. This gives them the opportunity to reach audiences that they may not have worked with before, and audiences who face multiple barriers to accessing partners' venues or the work they deliver. As Rachel Wesson from Ascendance explains:

Partnering with 100% Digital Leeds, we Zoomed into [the] Care Home, offering a digital dance and movement class. Programmes like the Arts in Care Homes Digital Programme mean that, as an organisation, we are making a difference where opportunities to engage are small and where local communities need us the most.

Jennifer Rhodes is Assistant Digital Inclusion Officer at 100% Digital Leeds.

100% Digital Leeds Programme - [100% Digital Leeds programme](#)

National Day of Art in Care Homes - [The National Day of Arts in Care Homes 2024 - NAPA Activities \(napa-activities.co.uk\)](#)

Working to improve digital inclusion in care settings - [Care settings – 100% Digital Leeds \(digitalinclusionleeds.com\)](#)

Image credit

Image 1: Canal and River Trust at Laurel Bank Day Service, Leeds. Image courtesy of the author.

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Arts Council England and Good Things Foundation (2021) *Promoting Digital Inclusion with the Arts and Cultural Sector and Beyond*. Arts Council England, <https://www.artscouncil.org.uk/lets-create/strategy-2020-2030/investment-principles/investment-principles-resource-hub/promoting-digital-inclusion-arts-and-cultural-sector-and-beyond>

Give a Hoot! – a MindWell campaign

Gemma Johnson

Give a Hoot! was a year-long community-driven campaign by MindWell, a mental health and wellbeing resource for adults in Leeds. The campaign encouraged people to create owls from low-cost, accessible materials, such as recycled paper or items they could find at home. The only requirement was that each owl fit in the palm of the hand. The idea for *Give a Hoot!* grew from a request for MindWell to provide a wellbeing activity for the *1001 Stories* initiative at Leeds Playhouse in 2023. Rather than relying on traditional engagement methods like distributing leaflets, the team were asked to create a more interactive and memorable experience.

Recognising that many people are uncomfortable discussing mental health publicly, they chose origami as a low-cost, mindful, and accessible activity that would offer a different way to approach the topic and raise awareness of MindWell's online resources. The campaign was designed to make creative wellbeing activities accessible to all, particularly those who are digitally excluded or uncomfortable discussing mental health in public spaces. It offered an informal way to encourage self-reflection and spark conversations about mental health in a safe, inclusive and creative environment.

Inspired by Sadako Sasaki's story of 1,000 cranes, the team set the goal of making 1,000 origami owls, tying the campaign to Leeds' rich heritage – where owls are well-known symbols in the city's Coat of Arms and can be spotted all around the city on buildings and signs. These were later exhibited at Leeds City Museum during Mental Health Awareness Week, highlighting the role of creativity in promoting wellbeing and mental health awareness.

Workshops and community engagement

MindWell partnered with local textile artist Jane Gibson to run workshops in community spaces, teaching participants to fold origami owls. During these sessions, participants were asked to reflect on what they 'give a hoot' about - writing their hopes for the future in a guestbook or directly on their owl.

To extend the campaign's reach, MindWell produced an online campaign page and downloadable pack, encouraging people to make owls at home or host their own Give a Hoot! sessions. The prompts given were:

If I could change one thing about Leeds, it would be...

For a better future, we must...

I hope that in future...

Responses included positive wishes like '*celebrating our differences*', '*equality and respect for everyone*' and '*for nobody to live on the streets*', as well as humorous responses like '*maybe a better football team!*' Practical wishes included calls for '*better transport and more family-orientated events*' and '*more activities like this for older people...to help with feeling less lonely*'.

Collaborations with Arts and Minds Network, Leeds Libraries, Leeds City Museum, and local wellbeing groups helped promote the campaign across the city. ‘Give a Hoot!’ pop-up workshops featured at public events like the Kinder Leeds Festival and the Mental Health Marketplace, and 12 community libraries hosted ongoing drop-in stations for those making owls at home. Owls were publicly displayed at Leeds Playhouse as part of the *1001 Stories* takeover event (May, 2023) and at Leeds City Museum for *Mental Health Awareness Week* (May, 2024).



Impact and lessons learned

Supported by a Leeds Inspired small grant and in-kind support from partners, *Give a Hoot!* successfully engaged a diverse range of participants, including disabled individuals, older adults, asylum seekers, people with mental health challenges, and families. The campaign provided a creative outlet, fostered social connections, and increased awareness of mental health resources and signposting on MindWell.

The final exhibition at Leeds City Museum of approximately 800 owls showcased the collective creativity of the community. MindWell is now exploring how to build on the project’s success for future initiatives. Key lessons included the importance of activities being:

- Low-cost and eco-friendly
- Accessible and inclusive
- Scalable for wellbeing facilitators
- Connected to Leeds’ culture and heritage
- Relaxing and mindful
- Able to bridge digital and real-world interactions
- Appealing to a broad audience
- Collecting meaningful data
- Empowering and giving voice to participants
- Underpinned by a creative and inspiring concept
- Featuring an engaging end goal (e.g., create 1,000 owls)



About MindWell

MindWell is an NHS-funded online resource, committed to providing accessible mental health and wellbeing resources for adults in Leeds. Whether for yourself, someone you care for, or someone you manage, their website offers a range of support, advice, and information. Their directory also connects people to local and national services for mental health, as well as practical issues like housing, money concerns, and peer support.

The project was led by the MindWell team (Gemma Johnson – Content and Communications Manager, Siobhan Drane – Engagement Specialist & Volunteer Manager, Gillian Schofield – Content and Social Media Officer, and Zoe Merity – Business Administrative Manager), with support from Leeds Libraries, Leeds City Museum, and various community groups. Workshops were facilitated by artist Jane Gibson.

Useful links

www.mindwell-leeds.org.uk/news/give-a-hoot-make-an-owl/

www.mindwell-leeds.org.uk/about-mindwell/

www.leedsowltrail.com/owl-map

www.instagram.com/diva_jane_gibson/

Gemma Johnson is the Content and Communications Manager at MindWell, where she works to remove the barriers to accessing mental health and wellbeing support for adults in Leeds. With a passion for holistic, trauma-informed mental health approaches, she leads community projects that help raise awareness and support mental health across diverse communities.

Image credits

Image 1: Photo of the first 'parliament' of owls displayed at the Leeds Playhouse as part of the 1001 Stories event. Photograph courtesy of author.

Image 2: Bag of owls. Photograph courtesy of the author.

Building Healthy Communities in East Leeds: A Practice-based Case Study from Nowell Mount Community Centre

Dr Kerry Harker

Crescent, Parade, Grove, View, Mount... these are among the names of streets all prefaced with 'Nowell' that make up this singular neighbourhood in East Leeds, where the East Leeds Project has been working with local people and partners for the past three years. Characterised by densely packed back-to-back workers' housing, The Nowells, as this area is known, lies marginally on the boundary between the modern-day local authority wards of Gipton & Harehills and Burmantofts & Richmond Hill. On the eastern fringes of the latter, around a mile from the booming city centre, The Nowells doesn't quite feel part of the neighbouring local centre of Harehills and is marginalised in other ways that cut deeper than simple geography.

According to recent data available through the Leeds Social Progress Index [SPI], a tool implemented by Leeds City Council to measure progress against its Inclusive Growth Strategy, Burmantofts & Richmond Hill ranks 31st overall among the 33 city wards, considered against the Index's three overarching themes of Basic Human Needs, Foundations of Wellbeing, and Opportunity.¹ Of most relevance here, focusing in on the second of these reveals acute issues in relation to life expectancy from birth (the lowest in the city), much higher mortality rates than the city average, and specific challenges in relation to smoking-related conditions such as chronic obstructive pulmonary disease, diabetes and severe mental ill health.

Our work here began through a partnership with Bellbrooke GP Surgery in Harehills, already known to our Communities Director whose lived experience as a long-term local resident provided a crucial 'in' to a conversation. Happily, the surgery's forward-thinking Business Manager and Mental Health Champion already saw the potential of creativity for improved wellbeing, particularly in relation to mental health which is an acute issue for this part of the city. Coupled with the Surgery's immediate access to health sector funding with devolved decision-making powers, pilot activities were enabled to get up and running quickly without the protracted and uncertain application processes of arts funders that might have supported this work.

Initially, creative workshops with small groups of adults, led by professional artists in our networks and utilising our *KIOSK* mobile makerspace took place within a multi-use space on the first floor of the Surgery.² Due to the logistical challenges of operating within this busy context and absence of space for messy activities, the workshops were relocated to the nearby Nowell Mount Community Centre where many locals are registered with the Surgery. As relationships with people using the Centre began to develop and we learned more about the space and its potential, *KIOSK* workshops gave way to a weekly Art Group, initially for local men but now open to all, led by experienced artists with the relevant expertise in socially engaged practice. Since April last year our work at the Centre has expanded to include Healthy Holidays provision, combining healthy food with creative activities, for ages 5-16 during school holidays after securing additional funding distributed through Leeds Community Foundation.³ The partnership with the Surgery extends

far beyond finances: volunteer 'Patient Ambassadors' regularly attend sessions and can signpost to services beyond those we can provide as an arts organisation, helping to keep health and wellbeing at the forefront of our delivery and referring vulnerable individuals where appropriate.

Relationship building takes time. Three years in, we have invested heavily in getting to know the community living around the Centre, working closely with the group of strong women, including the Chair of its community group, who ensure its vibrancy and maintain its centrality at the heart of local life. A wider set of partnerships enable this work to take place: alongside the Surgery, we benefit from the support and encouragement of Leeds Community Spaces, who manage the building on behalf of owners Leeds City Council, as well as Council officers and members, from the staff who run the weekly Gypsy, Roma, Traveller group with which our work intersects, to the Safer Stronger Communities team and ward Councillors. Initially a broader network of freelance artists came in and out of focus in this work, but over the years and broadly through a process of self-selection, this has evolved into a smaller group who are thoroughly dedicated to this place and its people. We work together as a tight and mutually supportive team, and have got to know regular attendees well. The artists bring their own lived experiences, including of local life, to the work, while the diversity of the team creates positive representations for children and young people, in particular those attending Healthy Holidays.

Investing so deeply in a particular place obviously brings rewards and challenges. The work brings access to privileged information about local people and the challenges they face, such as intimate details of their mental and physical health, their encounters with authorities, their domestic and familial situations. Three years is long enough to watch children visibly grow and change and to gain a level of understanding about their hopes for their own futures. Time and familiarity inevitably begin to blur the boundaries between the personal and professional, occasionally requiring some renegotiation. For example, this summer brought specific new challenges relating to local events in Harehills (widely reported by national media) and a febrile atmosphere as the aftermath of the murders in Southport seeped into conversations and interactions at home in Leeds, reigniting historic tensions within the community. This work is about relations of care, for the community and for each other. We recognise that there are also boundaries between the conditions we can ask our team of artists – not social workers – to work under, and those we can't. Getting it right requires the support and buy-in of key people in the community who set the tone for acceptable behaviours. But when it all comes together, we know everyone benefits and we grow the community together. As one participant in the weekly Art Group puts it:

I live close and it's difficult to access things close to home but this is perfect. Good opportunity to develop a new skill with an amazing art tutor. Great chat with other participants about health, local issues, hobbies which helps take the mind off problems. With a brilliant home cooked meal which is difficult at home. Love this group. (Anonymous Art Group participant, September 2024)

What is the future of this work? As an organisation with a focus on art as social action, we support the community's longer-term ambition to take over management of the Centre and can see a role for our team's creative skills in helping to secure a more sustainable future led by local decision-making. A major barrier from our perspective is the short-termism of many funding streams: the Healthy Holidays programme was funded by the Conservative government only to the end of 2024 and we await news of the Labour administration's plans for it. Beyond finances, we need greater relations of trust between funders and arts organisations, particularly funders whose specialisms lie outside of the arts sector, and that respect the different working practices of creative initiatives while also recognising the slower pace of change in communities like The Nowells. This requires relations of mutual respect, genuine collaboration and long-term investment to enable models of good practice exemplified by the innovative partnership between the East Leeds Project and Bellbrooke GP Surgery, to grow and thrive.

Dr Kerry Harker is the Founder and Artistic Director of the East Leeds Project.

Image credit

Image 1: A carnival costume made during Healthy Holidays, summer 2024. Image courtesy of the author

Endnotes

- 1 Leeds Social Progress Index is available at <https://www.inclusivegrowthleeds.com/leeds-social-progressindex>
- 2 KIOSK was designed and fabricated by artist Emma Hardaker, commissioned by the East Leeds Project in direct response to barriers to engagement presented by the Covid-19 pandemic. Small-scale, modular and mobile, KIOSK can be easily transported to deliver creative workshops directly within spaces such as community centres that are already known and trusted by local people.
- 3 Healthy Holiday is funded by the UK Government through the Department for Education's HAF (healthy activities and food) programme. See <https://www.gov.uk/government/publications/holiday-activities-andfood-programme/holiday-activities-and-food-programme-2023>



ART IS THE AXE THAT BREAKS THE FROZEN SEA¹

Arts & Minds Network, Leeds

What do they do?

Arts & Minds Network (AMN) is an arts and mental health partnership project, funded by Leeds & York Partnership NHS Foundation Trust (LYPFT) that has been running since 2005. They work with a wide range of cultural partners and artists to initiate creative projects in mental health services that promote recovery and wellbeing. They also undertake a wide range of community-based activities that enable service users to participate in the cultural life of Leeds.

What are their aims?

AMN mission is to champion the vital role of creativity in promoting inclusion, recovery and mental well-being by:

- raising awareness of how creativity can support mental wellbeing
- helping their members connect with the cultural life of Leeds
- challenging the stigma of mental illness

Who's involved?

AMN co-ordinate a network of over 1500 members that subscribe to their aims to promote creativity for recovery. Free membership is open to anyone over 18 who lives, works, or volunteers in Leeds and who subscribes to AMN aims. Their membership includes service users, carers, mental health workers, artists, arts organisations, and mental health organisations. People recovering from mental health issues are at the heart of Arts & Minds Network and are actively involved throughout both in their development and implementation. AMN helps their members participate in the cultural life of Leeds by working with cultural partners that promote social inclusion to enable members to build their own creative networks.

How does the partnership model work?

Partnership working is key to all Arts & Minds work. They are supported by partners from the arts, mental health, community, education, and business sectors whom they have steadily built relationships with since the project's inception. Partners include Leeds Museums and Galleries, Skippko arts organisation, Artlink West Yorkshire (closed in 2024), Cloth Cat music organisation, Leeds University, Swarthmore Education Centre, and Leeds Mind. Engaging with partners is crucial to enable AMN and their partners to reach a wider audience and maximise their impact. This approach also brings added value to this exciting work, both in terms of resources, skills, and expertise.

Example of work with one of our partners: Leeds Museums & Galleries

Leeds Museums & Galleries (LMG) is a partner with whom they have worked for 19 years to develop a programme of workshops, exhibitions, festivals, and conferences that focus on mental wellbeing. AMN has worked with LMG in their vibrant spaces, enabling deeper engagement with new audiences. This process has enabled AMN



members to participate in quality creative projects that combat loneliness and isolation and introduced them to cultural venues and new experiences.

Projects have included: Leeds Discovery Centre workshops during COVID (online creative workshops responding to natural science collections, with partners Skippko Arts); Leeds City Museum (exhibition created in response to the museum's collection, in partnership with lived experience arts collective, Mixed Notes); and Leeds Art Gallery - books of poetry and illustration, and another in photography, created in response to their current exhibitions.

Leeds Museums and Galleries (LMG) is the largest local authority-run museum service in England, with eight sites including country house estates, historic mills, museums and an art gallery. Its community engagement team is run according to three guiding values: wellbeing, creativity and belonging.

Partnership work is hugely important to LMG as it allows them to reach a wider audience and work together to better understand how they can use their sites and collections to help people in Leeds improve their wellbeing. It is very important to LMG that they *learn* from the people they work with, and therefore a flexible approach is important. Sometimes they host Arts and Minds groups, sometimes they run bespoke projects, or sometimes they use the vast Arts and Minds network and experience to ask for opinions or share news and opportunities. An important element of the partnership is that it opens all LMG sites to Arts and Minds members, as the work is not tied to one site or staff member.

What's the impact of this work?

LMG often conduct non-intrusive wellbeing surveys after their engagement sessions (beyond the Arts and Minds groups) and these have shown a tremendous uptake in attendee wellbeing. Attendees are given statements compiled from the Five Ways

to Wellbeing (NHS, 2022), and, out of 5, average scores of over 4.8 were returned for ‘I feel safe’, ‘I feel welcome’, ‘I feel happy’ and ‘I enjoyed the company of others’.

Why is their work good practice?

These partnership projects act as a vibrant catalyst with often unexpected outcomes. This is due to the synergy of the values and aims each brings to the table: AMN understands mental health and creativity, while LMG have incredible cultural venues, and their curators/community workers have lots of knowledge and skills. Together, the partners are stronger and can achieve their shared goals: to be seen as a real asset to the wellbeing of Leeds’ residents (LMG) and to enhance participants’ wellbeing through creativity (AMN).

Arts and Minds Network www.artsandmindsnetwork.org.uk

Linda Boyles is Development Manager for Arts & Minds Network, where she has worked for 19 years. She has 34 years’ experience of arts and mental health work, in both the statutory and mental health sectors. She has a degree in Fine Art, a diploma in Occupational Therapy, and an MA in Cultural Policy and Management which have all informed her practice. She is a passionate advocate of the benefits that creativity can bring to people’s mental wellbeing.

Esther Amis-Hughes is Community Engagement Manager at Leeds Museums and Galleries, where she has worked in various roles for 16 years. Esther believes that museums and galleries, as places of conversation and care, can transform lives.

Image credits

Image 1: Curator Talks. Photograph courtesy of the authors.

Image 2: Reflection Books. Photograph courtesy of the authors.

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Endnotes

1 A book must be the axe for the frozen sea inside us. That is my belief.” – Franz Kafka (Letter to his friend Pollak January of 1904)

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Creative Voices: A co-creation based community project with members of the older LGBTQ plus community in Leeds

Minoti Parikh

Creative Voices is an arts project co-created with older adults from the LGBTQ plus community in Leeds and Creative Producer Minoti Parikh. This project is delivered, thanks to the support of Yorkshire MESMAC and various other funders.

Creative Voices was born out of a need to bring to life the connection between creativity and health. As a co-created group, we use creativity to express ourselves, our lives, find our voices, build friendships and take care of our mental wellbeing. Over the past few years, Classical Indian dancer, Minoti Parikh, has been working with members of the older LGBTQ plus group in Leeds. The group was formed with the purpose of introducing arts (specifically, classical Indian dance) to the members. While the initial purpose was to introduce this dance and movement practice as a way of improving our overall health and wellbeing, it was clear that the group benefited from this creative space, beyond just the dance. The impact of these sessions on the members' personal health and overall wellbeing inspired us to develop *Creative Voices* and build something that is community led and that has a health impact at the heart of its existence.

We have been meeting since 2021 and we formally started working towards building *Creative Voices* in 2022. Since then, the group meets regularly to explore, learn and share new creative skills, learn new art forms and work towards performances. In the past two years, we have produced two community-based events that have been attended by over 100 community members.

The project's main purpose is to give members the opportunity to build a safe space to engage in the arts to improve overall mental health. Most members lead extremely isolated lives with various mental health issues. We are extremely proud to create a community of individuals who have seen a positive change in their overall health and life because of *Creative Voices*. Throughout the past three years, we have ensured that the group grows and is led by the members of the LGBTQ plus community. We have been extremely responsive to the needs of the group and continue to welcome new members to join us, ensuring that new voices can contribute to the growth of the group. We have explored a wide range of creative skills - dance, drama, spoken word, creative writing, lino printing, puppet making, song writing amongst many other creative, playful activities.

Some testimonials from our core members include:

- Susan - *'the meditation helped me to be aware of my breathing and switch off with what was going on around us. I thought it was beneficial for me beyond our sessions as well.'*
- Margaret - *'I moved to Leeds in lockdown - hard to get out and find new friends and create a new life in West Yorkshire. Creative Voices took that to a new level and has given me a sense of belonging.'*

- *Graham - 'It has, overall, had an uplifting, feel good effect and helped me through the process of grieving for my Mum.'*
- *James - 'It's been very good for avoiding "low Mood" But that makes it sound like medicine! It's not healed my feet, though my mind is better.'*
- *Maureen - 'I feel I am a more confident person, and it has brought such laughter into my life.'*
- *Michael - 'Those who were strangers and acquaintances are now all friends having supported each other and come to treat each other with genuine warmth and kindness. The whole experience has been an absolute joy and I believe all involved have felt a real boost to their wellbeing, I certainly have.'*

Creative Voices has been funded by various funders, including Leeds Inspired, National Lottery Funding and Wade Charity.



Projects such as *Creative Voices* help fill a massive gap that exists within the Creative Health sector and plays an important role in treating the effects of social isolation. We have already seen the impact that social isolation has on the mental health of individuals during the pandemic. Sadly, while the world has 'opened up' and is back to normal, members of the older disadvantaged LGBTQ plus communities continue to be disadvantaged and live in extreme social isolation. Feeling safe and included has a direct impact on our overall health and wellbeing. A project such as this, enables not just members to meet and build relationships but also gives them a purpose to live and to get out of their houses.

We exist to create a space for joy, laughter, positivity and belonging and we have already seen a few members, because of their participation in *Creative Voices*,

reignite estranged relationships with their loved ones. Beyond that, *Creative Voices* has helped reduce the stress and anxiety that many of our members suffer from, by providing a safe space to be themselves without the fear of stigmatisation.

Creative Voices acts as a constant 'live' reminder of the positive impact that creative spaces can have on the overall quality of our lives. We are proud of being one of the few success stories of co-creation-based groups that exist in the city of Leeds.

Minoti Parikh is a classical Indian Dancer and a creative producer, designing and delivering programmes that introduce creativity as a form of practice that helps improve overall health and wellbeing. Minoti introduces movement-based wellbeing activities, performances and workshops to increase the overall health and wellbeing of members representing underserved or underrepresented communities. Minoti is based in Leeds and has worked with individuals and communities including refugee and asylum seekers, those with learning disabilities, and those suffering from dementia to access diverse cultural art forms like Indian classical dance. Minoti seeks to increase public engagement with the creative arts, build the overall mental health of participants and create better integration of creativity and health practices.

Links to Creative Voices and other projects:

www.youtu.be/st_a31X_w9U

www.youtu.be/KaK9qVkgHSU

Image credits

Image 1: Creative Voices Dance Workshop. Photograph by Box Media.

Image 2: Creative Voices Performance. Photograph by Box Media.



Curious Motion – The Welland Activator Samantha McCormick

In late 2022 Curious Motion set upon launching their first multi-year project, *The Welland Activator* - a three-year initiative to tackle loneliness and isolation in and around the town of Elland, Calderdale. Focused on supporting under-served communities in the area, including older people, refugees and asylum seekers, young people, and those living with long-term illness or impairment, *The Welland Activator* provides an array of co-created Creative Health experiences for and with local people on their doorsteps, including sessions and workshops, a podcast, performance opportunities and events.

A key aspect of the project has been a focus on place. Curious Motion's offer is a direct result of many years of deep listening, care, and respect for the people of Elland and nearby areas, working in a way that is relationship-driven, which Sam and her team of professional artists embed into their practice and the organisation's overall approach.

Loneliness and isolation have become areas of core focus for both the project and Curious Motion as an organisation. This is due to Sam and her team's experiences as artists working with dance, an art form that is inherently social and can offer a holistic approach to wellbeing. People of many different ages, backgrounds, and life experiences engage with Curious Motion's work; a dance and creative offering that helps to transcend communication barriers, break down assumptions and misconceptions, and connect people more deeply to themselves and each other. This has enabled the project to bring people together who may not ordinarily meet and explore social constructs and cultural experiences to find more meaningful and impactful ways to gather. Their approach considers the whole person, removing the focus from labels or diagnoses to just being together in a meaningful way.

The Welland Activator is now over half-way through its three years, and learnings are happening throughout. The project measures 'connection', 'belonging', and 'overall wellbeing' using various methodologies and informal processes (including many cups of tea!). Key learnings include:

- The deep sense of value experienced by participants, particularly those who regularly engage with the project's sessions and workshops. Curious Motion's focus on connection and belonging through artistry and expression supports people beyond purely rehabilitation, recovery, or integration, nourishing the whole person and positively impacting them in ways they, and the people around them, may not have expected. Importantly, participants report a deep sense of togetherness and support, and a deeper understanding of themselves and their bodies, which creates impact across their lives.
- New friendships have been established, people have joined other initiatives and groups as a result, some have been inspired to explore creative career pathways, and some have undertaken their first volunteer role. Other professionals involved in the lives of Curious Motion's participants,

such as NHS staff, are beginning to learn more about the contribution of Creative Health too.

- Access has also been a strong focus. Curious Motion has its roots in a community that has experienced significantly less access to arts and culture than some other areas of Calderdale. By being present on people's doorsteps, coming to them wherever possible, they have been able to meaningfully engage under-served communities, change mindsets around who the work is for and why, bring people together who may not ordinarily meet, and they hope to inspire others to do the same. Access is now embedded throughout the company's processes, including within their artistic practice alongside models of working that remove financial barriers and prioritise inclusion. This builds genuine trust and long-lasting relationships with the community that form the foundations of Curious Motion's work.
- *The Welland Activator* has also significantly supported Curious Motion's sustainability as an organisation. The project enabled the company to secure Sam's role for the first time, enabling her to use her time and skills fully within the organisation, welcome new team members, and offer greater reliability and consistency to freelance artists and creatives, many of which are local people themselves. Fully supporting the wellbeing of the organisation's people also forms the foundation of how Curious Motion operates, which includes ensuring freelancers are appropriately paid and supported, team members have regular access to professional mental health support and building trust from within.

The essence of *Welland* has existed from the day Curious Motion was founded; a desire to support both the town of Elland and its neighbours in living well together, alongside impacting the wider cultural fabric and health of our society through Creative Health practices, ethics, and values that are centred around deep care for ourselves, each other, and the world around us.

As Curious Motion enters the final portion of *The Welland Activator* project, this exploration continues to evolve. New opportunities are also on the horizon, including bringing their practice to hospital settings and other NHS services, and building on partnerships with the wider voluntary and cultural sectors.

Feedback from participants include:

- *'Feels like you are the glue that can join people to others.'*
- *'Curiosity in me has awakened my playful self and for this I'm grateful!'*
- *'Thank you everyone for making me come through to a beautiful brightness after being in a long corridor of deep darkness.'*

Curious Motion is a non-profit arts organisation using dance and movement to tackle loneliness and isolation. The organisation was founded in 2019 by dance artist Samantha McCormick, who has worked in Creative Health in the UK and internationally for almost 20 years. Curious Motion has grown organically from the

relationships and experiences Samantha has developed and nurtured from living and working in the Elland area, and the organisation is dedicated to making long-term social change; they are on a mission to enhance the cultural fabric of their community for a fairer, more compassionate world.

www.curiousmotion.org.uk

Image Credit

Image 1: The Welland Activator. Photography by Mark Flynn.





#1001 Stories- Touchstone's Sikh Elder's service

Sarbjit Kaur

Introduction

Touchstone's Sikh Elders Service is delivered by a dedicated Punjabi speaking team that has worked within the heart of the Sikh Community in Leeds for over 17 years. The team aims to improve the health and well-being of older Sikh people by supporting them to live independent, fulfilling lives. One of the ways we do this is by providing new opportunities to connect people of different ages, sharing the gift of the experience, knowledge and skills of the Elders.

There is a dearth of empirical research that relates to South Asian older people's engagement with cultural exchanges and their emotional experiences of cultural participation. However, over the years we've recognised that when our service users engage or participate with creative projects or facilitated workshops, particularly when sharing life stories, they experience beneficial physical outcomes and report a greater sense of happiness and wellbeing. We have numerous examples of co-producing interventions centered around cultural exchange; from publicly performing a play based on the Elders' first experience of flying when migrating to the UK in the 50s, 60's and 70's, to visiting a care home of predominately White British Elders and demonstrating how to wear a sari. These activities have resulted in Elders citing universally positive emotional experiences such as increased self-confidence and self-esteem along with heightened feelings of being seen and heard.

Here we share examples of our projects showing older Panjabi adults being actively engaged with knowledge transfer and the wellbeing outcomes and social benefits of participating in cultural exchanges gained as a result.

Cultural exchange at Leeds Playhouse in May 2023 as part of 1001 stories project
Sikh Elders Service were approached by the Leeds Playhouse as part of the 2 weeks #1001Stories takeover by older adults in Leeds¹. The team facilitated two workshops.

The questions from the audience ranged from 'What did you bring with you from your homeland?'; 'how did you feel about travelling alone to marry a stranger?' and stress around saving and sending money back to their families. There was a good flow of conversation through their answers and sharing of common experiences in the room.

Poetry & storytelling by sikh elders:

A colorful display of cultural items were placed together to educate and tell a story. A phulkari embroidered dupatta with ancient family heirlooms and heritage objects bought with elders from the 1960's were exhibited.²

Traditions and identities connected to the items were shared to the audience and what they were used for within their culture. The service users talked about the history of items displayed some of which were handmade and originated from their birthplace.

Service users used personal stories of their experience of migration. How they left families and home behind to start a new chapter in life, of being newly married and moving to a strange country. Stories were shared about feelings of isolation, depression and homesickness; the responsibility of starting work and sending money back home to support extended families; and with the struggle of raising children in a different environment.

Service users chose their own poetry topics to read. They read the poem in their first language Panjabi and translated each line or summarised the poems meaning in English. The poems explored the emotions of their first experiences of living and working in Leeds. The poetry connected and found our Elders with shared struggles and the challenges of settling in the UK. They shared their trauma and healing stories. The audience heard the service users' expressions of losing their original cultural identity, separation, loss of familiarity and support networks, lack of belonging and sense of place – facing multiple losses at once.

We ended our story telling/poems by singing a song which is often sung before the bride leaves her maternal home to move with her husband.³ The morning session ended with a question time, followed with lots of different cultural experiences and engagement with the audience.



Roti (chapati) making workshop:

The Team & Service Users introduced the audience to their cultural food – the roti. They also provided stories and knowledge of the rotis importance in history, traditions in their religion and culture.

They started off by kneading the flour, then demonstrating how to roll the Rotis. The audience was invited to have a go at rolling their own Roti. Their rolled roti was then cooked on the hot pan and then they tasted their roti with the vegan potato curry which we had prepared in advance.

The roti making workshop was engaging and interactive for all participants. We had approximately thirty elders from the community that attended the workshop. They were given tips on how to make soft and fluffy nutritional roti on a low budget.

Comments from participants of the roti demonstration:

- *'I really enjoyed teaching how to make a roti. I had so much fun with them too'*
- *'Super!! Can't wait to have a go.'*
- *'I am going to make rotis at home. I did not know it was so easy and delicious!'*
- *'I was nervous and anxious about participating in the roti demonstration with the public. I felt comfortable talking and answering questions in English. I enjoyed myself and would like to do it again'*

Some of the reflections and feedback from those involved and attended the workshops:

What was the impact on service users being involved in cultural sharing in the community?

- Improvement in their ability to preserve their Punjabi language and speaking in front of new people in English.
- Building confidence to stand up and be heard
- Overcoming anxiety and willingness to take on responsibility to deliver the workshop and enjoying the process.
- Increased involvement in social, community or voluntary activities to share cultural knowledge, experiences and heritage stories.
- Strengthening existing community networks and creating new networks.
- Fostering the development of common or community goals for the common good.
- Producing transformational experiences for learners, the community or a group within the community.
- Making new friends and having more in common in the community.
- Decreased sense of isolation and more enjoyment of life by interacting and talking.
- Engaging in a productive and enjoyable activity.
- Empowerment of cultural learning, involving mutual respect, reflection, caring and group participation with a focus on societal integration, sharing of knowledge of skills.
- A feeling of satisfaction of personal achievement – using abilities and hidden talents.

What were the barriers or challenges of participating in cultural heritage sharing in the community for our service users?

- Fear of not being understood, seen and heard – will audience practice active listening.
- Will service users and volunteers be able to engage and connect so that people can relate better.
- Will our “cultural awareness” sharing develop more meaningful interactions with others around us in the community.

- Will our celebrations, heritage and differences and similarities build respect and empathy.
- Trying new experiences outside service users and volunteers comfort zones.
- Will the cooking skill sharing encourage others to learn something new and save costs making roti at home.
- Will learning about where our service users came from, what their traditions are, and what they struggle with help with more cultural connection and a sense of belonging.

Our staff and service users are enthusiastic and passionate about delivery and helped others around them to embrace cultural differences and make a connection through food, stories and words. Leeds Playhouse were delighted with the interaction and buzz at the workshops. We got positive feedback from the Managers/ Directors and the Team were offered 8 tickets to watch a play by The Performance Ensemble at the Playhouse in appreciation for our involvement. The stories and workshops were uploaded on Social Media and we had lots of likes and feedback from followers. Instagram: [@Sikhelders](#)

About Touchstone:

Touchstone was born out of an identified need for friendship and community in South Leeds in 1982. A Social Worker, Sylvia Landells, and CPN, John Clare, saw that large numbers of vulnerable people were left isolated and distressed out of hours and at weekends, so they set up a “weekend club” which was to grow into Touchstone.

More than 30 years later, we provide mental health and wellbeing services to over 10,000 people a year, whilst also working across communities to grow their confidence and capacity to demand the services and positive experiences they are entitled to. www.touchstonesupport.org.uk/

Sarbjit Kaur is the Service Manager at Touchstone’s Sikh Elders Service.

Image credits

Image 1: Roti making talk & demonstration. Photograph courtesy of the author.

Endnotes

- 1 1001 stories was a collaboration between The Performance Ensemble, Leeds Playhouse, Leeds Museum and Galleries and Leeds Older People’s Forum for LEEDS 2023, a revolutionary two-week takeover where older people perform, exhibit and express their stories of lives lived to the fullest.
- 2 Phulkari means flower work - a type of embroidery originally made throughout the Punjab. A Dupatta is a long shawl-like scarf traditionally worn by women in the Indian sub-continent
- 3 Madanian - sad song based on a girl leaving her parents’ home to live with her in-laws.

CLEAR Men's Talk
Stuart Hawkes

Men's Talk were involved in a research project at the University of Huddersfield that aimed to explain why community arts projects are so effective at supporting people to live well with serious mental illness. Through interviews and sharing artworks and films from Men's Talk, the Creative Communities Framework was developed based on their good practice and success. This framework provides guidelines for other organisations to seek funding for their projects or develop interventions that are as successful as Men's Talk. In this way Men's Talk have contributed to a wider understanding of the importance of such community arts projects within the academic realm.

Dr Louisa Peters

Men's Talk is CLEAR's creative advocacy project for men who have experienced mental health issues; established in 2018, with the aims of reducing stigma and encouraging men to talk about their mental health, the project uses film making and applied theatre to enable the men to gain confidence, develop new skills and create original material.

Men's Talk is a 35- minute performance created with and performed by men with lived experience of mental health issues. Premiered in March of 2023, the show has successfully toured to over 25 venues, across the north of England in the last year.

Men's Talk began, with the delivery of a series of taster workshops in the summer of 2018. By the following October, five men who had never been on stage before anxiously faced an audience of nearly 300 at the John Smith's Stadium in Huddersfield. Five years later, Men's Talk is part of the commissioned CLEAR service, contracted and supported by Kirklees Council.

Initial sessions focus on confidence building, working as a group and developing performance skills. These sessions are a mix of gentle exercise and relaxation, drama games and lots of laughs.

The next stage involves generating the material for the piece: sharing stories, exploring source materials and agreeing the shape and content. At the end of this stage, the men are asked if they would like to be in the show. A script is then produced and parts allocated. The men are asked to commit to learning lines and attending the rehearsals.

As well as attending and delivering a presentation at a Suicide Prevention Action Group meeting, (attended by representatives from across the VCSE, Police, NHS, DWP, Public Health etc) the men created marketing materials and filmed an excerpt from the show for potential bookers. Articles were produced for professional publications and community newsletters. As a result, the piece was hosted by local authorities, colleges and universities, the NHS, the Ministry of Justice

and at a range of conferences. Men's Talk has also been widely seen throughout the community with performances hosted by Dewsbury Rams, Lawrence Batley Theatre, Leeds Playhouse and Fox's Biscuits.

It is not unusual, at the end of a performance, regardless of the audience, for at least one of them to have a conversation about their own, or a loved ones' mental health. Men's Talk gives audiences language, context and permission to talk about men's mental health.

The power of applause is palpable within the group. The men talk about being "high" for the rest of the day:

- *'It's great, it feels like a really good, well done!'* (Participant)
- *'There's a recognition that we've come together as a team and achieved, it's quite satisfying'* (Participant)
- *'The applause at the end, it's kind of addictive – it shows we're doing something useful, something that has an impact.'* (Participant)

The men were asked to reflect on what being involved in Men's Talk meant to them and what elements benefit their mental health:

- *'It's the whole thing, the group, the structure, the routine of coming on a Tuesday, it's given me purpose, given me a focus, a distraction from negative thoughts. It's given me some self-esteem, some pride in what I'm doing'* (Participant)
- *'It's given me diversions from self-harm. I've not had any suicidal ideation since I've been with this group- which is tremendous.'*(Participant)

Putting men, who have experienced anxiety, on stage, doesn't sound like the best idea, but the men identified how it helped:

- *'I still get nervous before performances, but managing that anxiety helps me to manage the bigger challenges in my life.'* (Participant)

They identified that the project not only gives them a sense of purpose, but social capital:

- *'When people ask me what I'm doing, I've got something to talk about. I tell people I'm part of this mental health group, that is forward facing – it gives me social worth, it gives me a sense of value and achievement.'* (Participant)

Commissioners and bookers were invited to reflect on the impact of hosting a performance:

- *'I have never seen as many managers at one time pay so much attention and put down their phones and close laptops, such was the impact that Men's Talk had when they performed at Kirklees Councils Social Care senior*

managers meeting'. - Tony Bacon, Partnership Commissioning Manager, Kirklees Council.

- *'The work of Men's Talk continues to be an inspiration to me and others in our team and our NHS Trust/'*- Alex Feather, Creative Minds
- *'Such performances are important to humanise psychology within education and remind students of the real people on which research and education is based'*. - Dr Louisa Peters, Leeds Trinity University
- *'The delivery of this performance was a breath of fresh air. It's clear for all to see how safe and supported these men are.'* - Samantha Lindl, Wellbeing Advisor, Calderdale and Huddersfield NHS Foundation Trust.

Further information:

www.commlinks.co.uk

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Stuart Hawkes has over 30 years' experience of delivering applied theatre projects, formerly Director of the National Association of Youth Theatres and HQ Arts.

Community Links Engagement and Recovery Service (CLEAR), is a group-based wellbeing service for adults who live in Kirklees, providing a range of activities designed to help people to acquire new skills and strategies to effectively manage emotions and navigate life's challenges.

Image Credit

Image 1: Men's Talk. Photograph courtesy of the author.



Interviews

Creative Health in West Yorkshire: An Interview with David McQuillan

This interview between David McQuillan and Rowan Bailey took place in September 2024. It provides insight on the development of a Creative Health programme from within the health 'system', the challenges and barriers that face people's health and wellbeing (and how Creative Health may help to overcome these challenges), and how new creative health initiatives or a Creative Health system might benefit communities and neighbourhoods in West Yorkshire.

David McQuillan is the Creativity and Health Programme Manager hosted by South West Yorkshire Partnership Foundation Trust (NHS).

Dr Rowan Bailey is a Reader in Cultural Theory and Practice and Research Lead in the School of Arts and Humanities, University of Huddersfield.

RB *How did your role as Creativity and Health Programme Manager develop?*

DM My role started in Calderdale's Creativity and Health programme, which was set up over a couple of years whilst I was still working in the arts sector in Calderdale, in response to the APPG Creative Health report in 2017. It was funded for one year and it was in the middle of the pandemic and COVID and was a really challenging time, but it was really successful in reaching people through projects, inspiring people in the health and care system and leaders and importantly, bringing in funding to extend the programme for more than one year and then spread geographically. We've been hosted by SWYPFT (South West Yorkshire Partnership Foundation Trust), so I started working across its footprint, including Kirklees and Wakefield. The role has also spread through working with the Integrated Care Board (ICB) in West Yorkshire and research work with the University of Huddersfield. I am still involved in the creative health system in West Yorkshire and then also involved in a network, which is quite exciting, called M10, which is a collection of all the sort of devolved regions and the combined authorities there. This is a network of creativity and health programming in 10 different regions around the country.

RB *How do you define creative health?*

DM There's a really simple answer that will vary slightly person to person, but it is around how we define creative health professionally in terms of non-medical approaches, whether that's painting or whether you include gardening or cooking. It tends to be non-medical approaches that people utilise with a well-being focus, and particularly if they're referred to provision by the health and care system. I think that's the simple definition of what we mean by creative health activities. But having worked in the arts sector for nearly 20 years and now working in the health sector, I think there's a sort of broader meaning that's around how you use some of those creative approaches in the health and care system to achieve different results.

For example, a project we did in Calderdale around encouraging more people on the severe mental illness register to attend their annual physical health checks used creativity to address a challenge in the system. When we started the piece of work about only 14% of people on that register were attending a physical health check and it is designed as a set of measures and a check in on people every year. Working with a group of people with lived experience and artists, we redesigned all of the communication materials, including the envelope. It looks inviting so people are not anxious about opening it to know what it's going to be and all the information's there. [It's part of] a bigger piece of work that's raised awareness of the importance amongst clinicians and care coordinators, but the uptake is now 71% up from 14%. So, bringing in some kind of creative methods into the healthcare system I think is part of it as well. Creativity as a core skill and something that should be involved at all decision making.

I think probably the definition of creative health goes wider than that even, one of the things we need to look at to have the most impact is what would be the population health impacts of everybody embracing creativity in their day-to-day lives, everybody having time for it or understanding the importance of it. Creative health in terms of, what is the health of our creativity? We want to develop that same common-sense understanding for creativity and health as there is for diet and exercise. You know, have you eaten your 5 a day? Have you done 30 minutes of exercise today? Have you done something creative for you? Have you done something beautiful today? That's an important part of our health and how creativity can play a part in it.



RB It's about embedding creativity into decision making into systems, isn't it? And into our daily lives.

What are the challenges that you think face people and their health and well-being, with a focus on the context of West Yorkshire, if they're specific, or more broadly?

DM We spent a lot of time working in the field of health inequalities. We unfortunately live in a very unequal society and it's become more unequal over the last 10 or 20 years. I think you can see that in just the raw postcode data of life expectancy across Calderdale, we know there's a 10 -20 year difference in life expectancy in terms of post codes, those areas that are identified by the Index of Multiple Deprivations and more disadvantage areas. I think that we should all be appalled by it.

It's the "distance from necessity". So somebody who is facing substantial financial pressures or time pressures are going to have less time to dedicate something that will benefit their future health. If their distance from necessity is smaller, they have to spend more of their cognitive, and actual, time just dealing with really pressing financial concerns or housing concerns. They're going to have less time, potentially less money as well, to invest in that's something that would benefit their future health. I really like the Hungarian psychologist Mihaly Csikszentmihalyi, who did the work on flow and that thing about how important an activity that gets you into a sense of flow. I think a lot of us live in the kind of state, where it's you do this and then it's on to the next thing there's always something going on, and we don't take that time to stop. That is more acute in the postcodes that have been identified as disadvantaged. The pressures on their time and therefore their ability to access activities that might help is sometimes more challenging than it is for people in other areas. And what we see is something like over 1/3 of GP appointments are non-medical in nature, so they are linked to isolation, financial pressures or stress. But we also know how closely linked mental health and physical health are, so if the underlying causes of those problems aren't addressed, they do become medical in nature. Constant exposures to kind of stress and stress hormones will result in medical conditions. So, I think that's the challenge facing people.

RB *You've already gestured towards some of this with this idea of the flow state, but how does creative health help people to overcome health challenges?*

DM I think one of the really useful things that that creative health report did in 2017 was document all of that evidence in an almost inarguable and unavoidable way. [We can use] the standard measures used in talking therapies and any other kind of medical interventions in mental health to put this work in the same kind of frame, framework and context as other interventions that [are] associated with more rigorous testing methods.

What that report also points out is the physiological benefits that are associated with that and what impacts that has. That can be as simple as changes in heart rates or lowering heart rate, lowering levels of stress when people engage in creative activities regularly. There are research studies referenced in it that show that creativity in health can have an impact on reducing cardiovascular disease, for example, and

ultimately through all the things it does it can have an impact on life expectancy, which is really important.

But I think it has real profound benefits for us as humans, beyond the measurable medical scientific measures that are categorised in that report. I'm really interested in the philosophy of why this works, why this is so effective rather than the question of does it work? I think we should be past that now. Each individual project can have its own metrics and measures and that's important in terms of evidence, but in terms of the overall agenda of creativity in health, it shouldn't be *does it work?* I think it's very interesting research thing about *why does it work?*

My hypothesis here might just be really personal, but I think that a project that's centred around something artistic and creative is more beneficial than, say, a running group, and I find running really beneficial. But I think that there's something different about what happens in a creative process. Before I read all about this I'd thought about it in terms of connection and vulnerability. I think there's the connections that you form with other people, and in a creative activity you are really vulnerable. So you're kind of coming together in this shared vulnerability that I think makes those connections deeper. Being creative is an area where you have to be much more open to nuance and reflection and consideration.

RB Absolutely. To riff off the philosophy thing, I think at the core of what philosophy is, it's about understanding how thinking works and I think we are thinking beings that aren't just a head, we're in a body and that body is in a world. So there's a strange kind of set of complexities and entanglements [and] I think artistic experiences or engagement with creativity gives us exposure to that condition of experience, and exposure to the condition of experience then broadens one's insights into who we are, why we're here and how we navigate our relationship to each other in the world. So that's the journey of exploration that maybe gives you a space to process.

So how might communities get involved in creative health initiatives?

DM I think one of my main answers to this question is if we could drive demand and an increase in access to this by not just by going to the GPs or social prescribing link workers and encouraging them to refer to it but going direct to people in the general population and getting them to go and ask their GP about it, or ask a social prescribing link worker and say 'I've heard about creative health approaches'... I think a mixture between a really amazing arts marketing strategy and an old style public health campaign to drive a message of: this is what it is, this is what it can do for you; go and ask about it.

This work is going on everywhere. It's the visibility and the sustainability of it that's the challenge. The world isn't short of people running amazing creative projects and creative health projects. It's about connecting to your community, talking to arts organisations, but I'm aware that those things are easier for some people than they are for others. So whether that's a lack of social capital or its financial,

they need the opportunity, they need to have the time to do it. And I think there's a wider kind of system leadership thing that needs to look at those areas. But I think raising awareness is the first key step.

RB *So following on from that, are you able to talk about the newly formed Creative Health system in West Yorkshire in terms of what it is, what its potential might be?*

DM It's really exciting that towards the end of last year it was announced that West Yorkshire would be a creative health system. I think the first of its kind. I think "what it is", is near impossible to answer at the moment other than I think what it represents is a really exciting commitment from the highest level that this is really important and it's something that is effective and should be embedded. I think the potential of it is vast because of that very reason. It is unspecified what it actually is at this stage and I think that that's really important, it is a huge opportunity with lots of possibility. And for those of us involved, I think it's about being a guardian of that concept. I'm aware that kind of system and infrastructure things can be quite dry and they can have meaning to people that are within the system, but for this to be meaningful beyond that, and I'm not saying it will happen quickly but in a year or three years, I think you need to be able to walk down the street and ask anybody that you see what it means, what difference has the creative health system for West Yorkshire made and they will be able to answer.



And I think in order to do that, you need to have representation and involvement and equity. We might be the guardians of this as an idea but it needs to be owned by the communities that we work with. So it's about how do we get the power and the money or the commissioning and the projects to that level. There's lots of possibilities and it's about keeping hold of that and making sure that those possibilities are developed

with the people that are going to benefit and making it meaningful at just a level of, as I said, walking down the street. Everybody knows that it's made an impact on them or somebody they know.

RB And in some sense to ensure that communities are active agents in co-leading. This is the shaping of the system and the content of the system as well, isn't it? So that it's not an abstract entity, but it's lived and experienced and shaped by all the people who want to use it or work within it.

What new creative health initiatives would benefit communities and neighbourhoods in West Yorkshire?

DM I think this is again, it's not a cop out, but I think the answer to this doesn't come from me or people like me, it comes from the community. So again it comes back to that question of how do we do this boring, but important, work of devising an infrastructure and a mechanism that means that those voices have got power, and they lead to making decisions and work being developed and work being funded?

I think what [is needed] in creative terms, is a kind of a breadth and a depth of offer that is sustained over a long period of time, and I think particularly when you look to social prescribing, which I think is definitely for me just one small part of creative health, but it tends to be the part that people go to first in their sort of understanding. I think it's an amazing idea and I want people to walk into the GPs and ask about it, but I think in some ways it's really difficult to implement at the moment without looking at how that work is funded, and if even a fraction of the budget for medical or pharmaceutical prescribing went to it, you'd see a massive change. Where we've tried to trial work like this in the past it's so hard to do it because the opportunities were so limited and that you had to be free at a certain time to go and do them.

So I think the key is, how do we create database of what's on offer? How do those people that are connecting people to opportunities or social prescribing link workers know what's on offer in their community? And, you know the difficulties of creating a sort of functioning database are huge because projects start and projects stop, and I think that's part of it as well is that we need significant investment in the arts organisations and the cultural organisations [so that they can] run activities so that they're consistent so that a social prescribing worker doesn't have to learn every six weeks. And then how the funding goes to the grassroots community organisations that run things and raise awareness. And each person can build up at least a kind of living database or their own database, if there isn't one kind of collective database.

That's the part of it that we haven't quite got to the bottom of: what's the health of our creative sector in terms of their workforce and their staffing and the support for them in terms of supporting referrals from the health system into creative activity? How does the money flow with that in a way that obviously it does if people are prescribed a drug, there's a financial transaction that happens, it's a big, big money industry, and social prescribing isn't a free alternative to that. The people that I work with in the [community] work incredibly hard. And it's an incredibly precarious

environment to work in that is very funding driven and they need our support to put on the activities that will benefit the people that we're working with.

RB *What do you hope for the future of creative health in this region, particularly in relation to the joining of partnerships and funding for this sector, which I think you've just started to kind of touch upon?*

I think it's funding to sustain that offer, I try to make sure that there's a sustained offer for people and for arts organisations. Everything is kind of 6-12 months, and it's a real challenge not just for the arts organisations and the people that are going to refer into those activities, but for the people themselves, I can remember being in that workshop that we did with the university where somebody stood up and said it took years of trauma and ill health for me to get to the state that I'm at now and it's unrealistic to expect that to go after six weeks of a painting course. I think we need to be funding creative organisations in a way that makes it easy for people to have creativity as an ongoing part of their lives. Whether that's a creative health approach or it's their own creative practice.

It would be massively beneficial to think in more visionary terms. There's amazing Creative Health work going on across the country, obviously I'm really passionate about Calderdale and West Yorkshire and I think there is fantastic work here, and I think we should rightly be recognised as one of the national leaders in this field in how we bring it all together, how we place value on it by initiatives like the creative health system, how we put a value on it by how we fund it, and how we look after the staff and the workforce. But importantly, how healthy our communities are because of it, how happy they are and how connected they are to each other. That would be the real measure of success I think.



Image Credits

Image 1 -3: Illustrations for SMI Calderdale project. Illustrations by Ekaterina Sheath.

Town Island, a Pre-Show Interview with Artist Benaiah Matheson
Dr Janine Sykes

Introduction

Artist Benaiah Matheson presented *Town Island* at the Venice Biennale (20 April–24 Nov 2024) working in partnership with Yorkshire Contemporary. Now, together with Huddersfield Art Gallery, and the University of Huddersfield, Matheson brings the exhibition to The Sovereign Design House (25 Jan–22 March 2025) at the University of Huddersfield.

Benaiah Matheson's practice 'TOWN ISLAND' explores the cultural resonance between the two places he calls home: Carriacou, a Caribbean island, and Huddersfield, a northern English town. Born to Carriacou parents and raised in Huddersfield, Matheson works across drawing, painting, textiles, installation, and social practice to illuminate the profound connections between these distinct cultures.

Dr Janine Sykes is a Curator (Visual Arts, Kirklees Museums and Galleries) and Lecturer (School Art and Humanities, University of Huddersfield). She recently achieved a PhD formulating a new model of Blended Curation practice, designed to achieve high-quality public engagement.

Using a Blended Curatorial approach, the Huddersfield iteration of *Town Island* brings new work, interpretations, and a participatory programme to explore how the themes of co-creation, dual-identity and belonging connect to health and wellbeing, as part of the Cultures of Creative Health Programme (2024).

The participatory programme also includes the launch of The Cultures of Climate Programme (2025). During the exhibition at the Grenada Pavilion in Venice hurricane Beryl hit Carriacou (1 July 2024) devastating all the structures on the island, affecting its entire population. The following interview with Matheson took place on the 24th July 2024 in Huddersfield, in the aftermath of the catastrophic event, providing *Town Island* in Huddersfield the opportunity to highlight the plight of the Carriacouan people, who like others living on small Islands around the world unfairly face the brunt of climate change caused by larger nations. *Town Island* is a co-created art project, evidencing strong polyvocality as Matheson co-produced the installations with diverse community groups and educational institutions (in Grenada and Kirklees, UK). Dr Janine Sykes is part of the Town Island curatorial team, and this pre-show interview provides a unique opportunity to explore the healing and place-based properties of the Town Island artworks, as they reveal insights into Huddersfield and Carriacouan identities through sensuous form.

JS *Please describe the processes, stages, and places of Town Island? Because it is quite nomadic, isn't it?*

BM Yes, the processes themselves are quite broad. There's the specific processes as to how things were actually put together, yes, but then there's a

contextual process and understanding and connecting with that. So, the process here is about wanting to build in the materiality of the two locations. The town and the island. And...when I looked into that side of things it felt vague, because I was trying to figure out like, what materials are specific to Huddersfield and specific to Carriacou, Grenada. And, I think that's where the idea of scent came in. So that's where I worked with Ezra-Lloyd Jackson who is a scent artist, to create a specific scent for the space [...] walking into the space and the immersive aspect of experiencing the work. Like experiencing the physical work is one dimension, but then what about the space and the unsaid contextual space?

JS Yes, it's the other, sensory.

BM Yeah. And like food, scents are very important to Carriacou people, to Grenadian people. Because everything you cook with has a fragrance and a scent and it's something that maybe I am anosmic to in Huddersfield, that maybe people who come from other places in Huddersfield maybe, they'll be able to pick up on scents. Whether obviously if you go out into the Dales, you're going to smell the animals, but there'll be scents that are connected with Huddersfield, but I didn't know what to hold on to there.

JS Engineering oil?

BM Yes, yeah.

JS But then that's changed.

BM That's a contextual thing in itself. If you go into the mills, if you're going into engineering, then you'll connect to those scents, but, then on the physical side of things I knew that cotton was going to come into play and then there was light, and then there was wool, and wool and cotton are very similar and very different in their scents. I mean wool is definitely from Yorkshire. But then the connection between cotton and the landscape of the slave trade, the Atlantic slave trade, and the connection between, Britain, Yorkshire and the Caribbean that's a material that is synonymous with that. But then there's the water in between, and the Atlantic. So, there's this travelling backwards and forwards and knowing that these pieces that are going to get woven together to make sails, and that's the travelling backwards and forwards.

The wool was specific because the tufted pieces of *Town Island* were made using Yorkshire wool. They were made in Halifax at McAndrew's Textiles, and I know that in the 50s and 60s there would have been people from Carriacou working in the mills in Halifax in Huddersfield, literally working with the wool. One of my Great Aunts used to work at work at Gannex in Elland. They made beautiful coats and jackets, for the royal family. So, beautiful pea coats and dresses and all kinds of stuff. That was based in Elland, but she lived in Huddersfield.



JS There are still some quite high-level textiles cloth still made here isn't there? With contracts with Savile Row?

BM Yeah. I remember there's a mill called Pegasus, and they do all the swatches for the mills in Huddersfield. And I remember early on in my relationship with them, they were making a series of fabrics for Dior. Yeah, and Ozwald Boateng, he's a Saville Row tailor. He's been spotted in Huddersfield coming to get fabric from here. And if you go to Savile Row and you want a suit, the most expensive suits are the ones that have 'Made in Huddersfield' on the fabric. So, if it's made in Huddersfield, it's that top, top tier. It still is that. So, it was the materials in both places and the pieces of materials that connect both places, that were important and so the pieces that were made in Grenada, the inks that are used over there, I use pomegranate leaf. I use Sorrell, which is a very cultural drink. So, you have the flower, the Sorrell flower, and we make this really beautiful drink with the flower itself. You boil the dried flower, or the fresh flower and it makes this deep like magenta colour and then you add sugar and spices in there and it's really nice.

JS ...and pretty, probably?

BM Yeah. Beautiful. But also, if you spill that on your clothes, it's not coming out. It's going to stain. So, I knew this was something that would stain and then turmeric another one that is another root, spice and connection material wise. While we use it a lot as food, but again if you if you spill that on your fabric, on your clothes, it's not coming out.

JS It is going to dye it.

BM Yes, so I used dry turmeric, fresh turmeric, Sorrell and pomegranate leaf, ink and then on top of that, I use acrylics, but the majority of inks used in Grenada with TAMCC college over there and their workshops, that was with natural pigments and some acrylics. But then when I came back to Huddersfield and did the town aspect of the works I used mainly light and cotton as a material. I used light in the sense that there was a special ink called SELA type, and that is a light sensitive and light reactive paint. So you have to coat it in the dark, which is interesting in-itself, if you think about the dark and the unseen and the context of how people perceive darkness, in the positive and the negative sense, but then when it's exposed to the light it changes the different shades of blue. So, the blue in the works is actually a light reaction to the SELA type, then there were the motifs that were made out of cotton stencils with Netherhall Learning Campus, and Conscious Youth and We Infront the walking group, and other members.

JS Three different places around Huddersfield. Am I right in saying it was first in Huddersfield?

BM Yes. So, some of the pieces were part of a previous body of work which was exploring the idea of a flag that represented the Carriacou community in Huddersfield.

And some of those pieces were woven into this as well because it made sense in terms of like the context of this being a flag and sail.

JS So, we've got to where we're clear about the processes. The stages starting in Huddersfield, then going over to Grenada, and then working with TAMCC College
BM ... which is short for T. A. Marryshow Community College.

JS Yeah. And you worked with the community there. Co creatively. Making them together. So, did you do a series of workshops there?

BM We only did one, but it was because the group wasn't a big enough group to do more than one, and it made sense. So we did a workshop there and an installation at the National Museum in Grenada, as well as at a different art gallery.

JS Right. So, it's already travelled from...well Town Island as a whole, has travelled from Huddersfield to Grenada ...and Grenada being the mainland and Carriacou a Grenadine Island. So, were there any workshops on Carriacou, or were they all in Grenada?

BM No, it was all Grenada. I'd like to go back and do some, and continue the Town Island works, in Carriacou.

JS But because of the nature of the Islands, it's not seen as separate, really.

BM Yes, and there was some who were from Carriacou that made the pieces. But I should also say that once the work had come back to Huddersfield, this is when the largest part of the works happened with Netherhall Learning Campus, and Conscious Youth and We In Front. So, there was an initial phase over here, and then a significant phase in Grenada and Carriacou, and then the main phase coming back and...

JS ...it's got bigger. So, it's expansive...

BM Yeah, and then it was all pieced together here.

JS Got you...Made in Huddersfield.

BM Yes, but it was also pieced together with another artist, a friend of mine, Desiree Shaw she is Town/Island in her existence, as she is dual heritage. So, her mum is from Huddersfield and her dad is from Carriacou. Which you get a lot of in this town. So, we and we're using the wool physically to bind the sections of fabrics together.

JS So, it's working on different meta levels here, it has different metaphors, working right the way through it.

BM Yeah. So, she's actual Town/Island. I'm Town/Island in a very different way. Like, I'm born and raised here, but my ancestors and my heritage come from there. But I connect with both. So that was the full-on process. The initial start here, and then going over there and making the body of works with TAMCC, then coming back and working with the three organisations and schools and then making a larger sail and exposing it to Huddersfield light. Do you know what I mean, the light in Huddersfield, in Yorkshire.

JS Place-specific. That's important.

BM So, the blue is Huddersfield blue, not because the tones in Huddersfield, because of the light in Yorkshire and Huddersfield.

JS *Which communities co-created Town Island and why were they chosen?*

BM The community in Grenada was chosen because I received funding with The Tetley [now Yorkshire Contemporary] and the British Council to go over and connect with the community over there, and the areas that their remit could facilitate was Grenada. TAMCC was chosen because it's the main college and art isn't taught to a high-level in a lot of areas in the Caribbean. So, it was an opportunity to go and connect with art students over there and start the initial phase of being able to go back and help facilitate more workshops. And I had existing relationships with Netherhall Learning Campus by doing talks and workshops with them over the years.

JS Just clarify, where is Netherhall?

BM It's in Rawthorpe, Huddersfield. Yeah, it's not too far from Tolson [Museum], really.

JS So, it's not far from the centre of Huddersfield?

BM No, not at all, it's just the top of the valley, on the edge. So, the town is in the middle of the valley.

JS So, you used your connections with the college and community groups in Huddersfield.

BM Conscious Youth, which is a youth community group, they're based right in the in the middle of Town. They work with youths from eleven up to eighteen and I think it's six days a week that that youths after school or college go there, they have different programmes on there, lots of facilities and they do lots for that age range all over Huddersfield. So, and it's multicultural by default as well, because you find that in Huddersfield. Most schools and colleges have a very wide array of ethnicities.

JS Yeah, and music is very important to this town and multicultural music.

BM Yes, which is also included in the work as well.

JS *What health benefits do you think co-creating with different communities has for the people within them?*

BM I think there's a core part of this which is by default, but in the way that my own personal anxiety with knowing that this town is really multicultural, and seeing lots of people, but not always knowing how to connect with different cultures here. It has become part of my practice. Where my connection with Carriacou and the Carriacou community in Huddersfield, means that I have to commit with all the other cultures in Huddersfield because everyone else is also in the same Town. So, like the works hasn't been sectioned into people specifically from Huddersfield and people specifically from Carriacou, Grenada. It's about those people who make up those places by default. So me knowing that that's something that I'm exploring through this, helps my social anxiety or social awareness, is healthy for me, and I know that that should hopefully be helpful for other people that they get to learn about the other people in their community. But then not knowing that most of the black people, or at least fifty to sixty percent of all the black people they see in this town are from this one specific place, and it's kind of like a twin. There are both hilly green places that are smaller, and a lot of people have not heard of, but they've been a part of each other, for almost 80 years now.

JS But why don't we know that or why? Why? Why is it?

BM The more you know about people around you, the less ignorance there is, the more connection there is, because there's understanding there. So that is the core of the work. But it's also really healthy for everyone involved. When I was speaking at the schools and colleges and the walking groups and the Community group. Speaking to them about the dynamic of what the work is about and the geographical, the cultural, the multicultural landscape of the work, but then also wanting to find out where everyone else is also from, helps everyone to understand that this is like a wonderful soup.

JS Yes. Yeah, yeah. And we're all part of it.

BM We're all ingredients in the same soup.

JS *Thinking back to the actual acts of making, how is that communal making that different to [individuals' making], and good for people?*

BM Well, they all know that they've had a hand in this. When they see the work physically, it's not a work where it could have been done in a completely different way, and where I go around and I speak to people, I get the ideas I record, take pictures, and then I go away, and I physically go and make some work. But, it didn't feel right to go about it like that...Whereas this way, they physically can see. "Oh, I made that piece", or "we made those areas" and so they physically have their own energy in the pieces.

JS Is that healthy? Do you think it's good for people to make things together?

BM Yeah. It made me break out of my comfort zone. Because I'm used to creating, for a lot of my years I was creating by myself. I'm in my bedroom. Or I'm in the studio and I'm creating by myself, but for all of this work, like 95% of it, was made by being around other people, explaining, connecting and then they're making a work, and I don't physically know exactly what's going to come out, but it's not about that. It's about our connection together and what they've made.

JS So, they're conversations that were naturally, organically happening with people. Is that good for people?

BM Yeah, it is. It's good for them...

JS Social bonding.

BM Yeah. They all know that they've made this work. They've all connected at the same time, and they can go away, remembering and not remembering it until it's reignited again that, oh I was part of this.

JS Yeah. Do you think it's blurring also, the kind of artist/audience a little bit? They're taking part in the art.

BM Yeah. They're taking part in the art. But then they're also part of something that they might not have experienced before.

JS *There is a legacy of oral history recordings in Kirklees with the diaspora communities in Huddersfield, some projects aiming to raise self-esteem. What benefits could the spoken-form art in Town Island have for the people of Huddersfield today?*

BM So that's multi-layered, as well, like the impact that the audio could have on people in Huddersfield today and in the future because it helps those who are from Huddersfield and Carriacou, who are of dual heritage like myself or biracial, that they can actually hear the words of someone who is from their community, speaking about their existence, their experiences after the fact, so you don't know, until you hear about these things. So, it's planting seeds for the future that people could connect with. And not just in a book. They can actually sit and hear these things. They connect in a different way... So, by recording the audio, it really helps solidify that for future generations. It also in the same respect empowers the confidence in elder generations, I don't see it as something that is only for the younger generations. It's for anyone who experiences it. It helps to recontextualise the landscape of how people perceive Huddersfield, having been born and raised in Huddersfield, from whatever background you're in, you're understanding the layers of this because you could be listening to someone who is 100% from Yorkshire, or part Ukrainian, or part Polish, because there's an old Polish and Ukrainian community here going back to like the 1800s.

JS Specifically, to Huddersfield?

BM Specifically, to Huddersfield yeah. So, you're just hearing the voice of people here, and you can't place a skin-tone on that. But anyone can listen to it and understand that I'm from Huddersfield. This is someone from Huddersfield, and these are the layers that made this place that I'm from.

JS *How do you think a greater knowledge and understanding of identity and sense of belonging, achieved through co-creativity can impact people's well-being can be achieved?*

BM You know what I think? The greater knowledge is seen in how people treat each other and the greater the knowledge the less room there is for people to have any ignorance or fear within their own personal dynamic, their own personal character and perspective. Because if you understand the landscape, and the multiculturalism, and the layers of the community that you live in, then you're just connecting with all of that, as opposed to seeing a person and not knowing anything about them. It's easy to stay away from them and form your own opinions, but you form your own opinions in a vacuum. You need to understand the people around you; it is healthy when you do... and a lot of methods in society don't actually want you to do that, or aren't targeted in a way where it allows you to do that, so by going out speaking to people, it helps everyone to understand a lot more.

JS Yeah, and that impacts on your well-being. If there's less fear.

BM Then you just see neighbours as kin...you have more empathy for people.

Image credit

Image 1: *Town Island* Grenada Pavilion at the 60th Venice Biennale. Installation View. Photograph copyright Benaiah Matheson, reproduced with permission.



'The Grief Series'

Ellie Harrison and Dr Anni Raw

This is a conversation between arts and health researcher Dr Anni Raw and artist Ellie Harrison, a short extract of a larger wide-ranging interview from 2023. In the conversation Anni and Ellie discuss aspects of Ellie's highly regarded 13-year work *The Grief Series*.

The work is a sequence of seven projects, with audiences engaged as participants and co-creators. Each instalment is a collaboration with other practitioners working in different fields, including video artists, designers, embroiderers, death doulas, historians, funeral directors, chefs and fairground sign writers. Informed by rigorous research with academics, clinicians and the public, the series aims to create safe spaces where notions of grief and bereavement can be discussed and expressed openly through a range of empowering creative practice. The seventh and final part of the series 'All That Lives', culminated in a nine-day festival in Leeds, including a large exhibition and the presentation of a funeral ritual for the work itself, in November 2023.

Ellie Harrison is a disabled performance maker and artist living in Leeds and working internationally. She is artistic director of Polite Rebellion and the acclaimed *Grief Series*, a sequence of seven arts projects that open up spaces to talk about bereavement and end of life. Ellie lectures on her practice, writing articles, giving talks, performances and workshops at universities internationally including University of the Arts London, Sorbonne Paris, UAM Mexico City. In 2015 Ellie won A Love arts award for her work on *The Grief Series*. Working on *Grief Series* has seen Ellie travel to Prague, Paris, Mexico City, Sibiu Festival and Timisoara Romania. The projects in *The Grief Series* have gained national press attention. She has been invited to speak on Radio 4's Women's Hour and has been included in Lynn Gardner's theatre pick of the year.

Anni Raw has been active in community and participatory arts for 35 years, initially as a singer/community musician, and for the past 24 years in evaluation and research roles. Anni's Arts and Health PhD from Durham University Centre for Medical Humanities explored community-based participatory arts and health practice, with 40 expert practitioners in the UK and Mexico across the spectrum of arts disciplines, to develop a shared articulation of this work. Over three decades she has developed expert specialisms in participatory evaluation practice and demystifying 'evaluation' processes and methodologies; teaching reflective practice; academic and non-academic research and analysis using a range of approaches; developing creative learning systems including developing toolkits for dissemination. She continues evaluation, research and publishing in the UK, Brazil and Mexico, and presents her work nationally and internationally, within and beyond the academic world.

The conversation looks at the genesis of this unique and profound creative journey, and the participatory aspects of the series, in which local people were able to engage creatively with their own grief experiences. Through a focus here on Part Three:



'What is Left?' we consider the nature of Ellie's practice as a powerful example of arts and health work, in which aesthetic excellence combines with care and highly ethical participatory arts practice. Ellie reflects on the origins of the work and shares moments that distil how participants responded, as well as critiquing her own practice through considering its emotional impact on her, at times.

While this extract can only spotlight a small amount of Ellie's extensive, epic work, there are rich insights here that are relevant to a broad spectrum of Creative Health practice, and that show the enormous importance for our wellbeing of working creatively, and *care-fully* with grief.

AR *We're talking about the Grief Series, from the point of view of who you are, Ellie Harrison, and how you relate to the work. You've created it, you've held it, you've curated it for thirteen years. What's been your role? And what parts of you are in the work?*

EH The *Grief Series* wouldn't have happened if I hadn't been bereaved. I started making the *Grief Series* because I lost lots of people - primarily my mum and my brother, but also my dad, and two half-brothers and then some friends. When I was a teenager I had a very close group of friends, and we all seemed to get bereaved one after the other. It was really unusual. It was very isolating and there was no one holding my hand to tell me how to do things. I had to figure it out for myself. And actually, a lot of the approach that I've taken in making in *Grief Series*, I can realise now, is because of that time.

When I was 11 I got glandular fever, but I didn't recover, I got chronic fatigue and the school didn't believe chronic fatigue existed. And so I just really boldly opted out of education. From 11 onwards I was barely there. I think I chose to educate myself

at home while I was sick. And it was me, a house, a load of art books and the TV. And I remember discovering that [at] the library you could get out seven films a week. So, I was watching things, like Nicolas Roeg, and Brian De Palma, and I had an awareness: "I don't understand it, but it's great. I'll keep going. I'm never going to understand it if I don't allow myself to learn to understand it." This was before my mum died. She would be in and out of hospital quite a lot. And when she went into hospital, I would be at home.

I think that the *Grief Series* fundamentally grew out of a deep sense of loneliness, of being on my own and feeling lonely and not good enough. So, part of the reason for trying to build this chosen family - the *Grief Series* has created a chosen family around the work - was to address that sense of loneliness, and identify it for other people who might be feeling in a similar way.

My mum had grown up very affluent, [but] was left alone a lot as a child. I realise that she ricocheted from having physically and emotionally abusive parents, to then living with her physically and emotionally abusive husband, to then being sexually assaulted by my dad. And so, I was brought up to constantly de-escalate and minimise - I think I was brought up by someone whose survival had depended on their ability to be quiet, and be polite, and be warm, and host: as a survival strategy. And so now when I think about the notion of Polite Rebellion or polite intervention it is a trauma-informed strategy, it's something that has come through generations of trauma, in some ways.

[When] I lost my mum, me and my sister organised her funeral. I was 17. Mum left us lots of notes, instructions, which really helped. They said, 'don't spend lots of money on the coffin, spend the money on the food, make sure that people that have travelled from far away have something to eat that is actual food.' She wanted people wearing bright colours... I think because I'd never been to a funeral, I didn't have that sense of 'should', what I *should* do. I just had a sense of what would fit a celebration of her life.

[It was] massively stressful. And I sang at her funeral as well, which she asked me to. And it was a fantastic funeral I think - I didn't realise how good until I went to my dad's and it was awful!

So life was quite chaotic. And I'd tried auditioning for drama school [just after mum died], just not getting in anywhere, and just having the most horrific time. I felt like "I've lost the person that believes in me ... and I'm being told I'm not good enough. And home is chaos." It really made me feel quite worthless.

Then in the first term of my school leaver gap year I got pregnant with a dreadful guy and had an abortion. And then, in the second term my brother drowned. And I had to apply for drama school. So I think I had my first audition something like two days after my brother died...

But Bretton Hall were interested in the students, not just as actors, but as makers or thinkers or commentators. And I think Bretton recognised my ability to use my lived experience and bring it into my practice, use it as an empowering thing and reclaim that space, reclaim that voice.

[Later] on during my Masters at Leeds Beckett I made 'Etiquette of Grief', which then toured for 9 years. *The Grief Series* wouldn't have happened unless I'd made 'Etiquette of Grief'.

AR You're talking about a massive tree, the roots are a huge part of that... And it's a very strong root - it goes right back, into your entire life.

Case study focus: PART THREE 'What is Left?'

EH In Part Three we worked with 48 people, plus myself and photographer Roshana. We took a portrait of each person with an object they'd inherited from someone they'd lost, and we interviewed them about the object and audio recorded it. So you'd see the portrait and hear the voices of the people through headphones, [with] a transcribed text. 'The Reservation' (Part Two), having those conversations one to one that were confidential, prepared me to put people's stories out in the public realm for anyone to listen to.

We spent 18 months trying to come up with an ethical way of people participating in the project, but not doing call outs, because if we did a call out we'd lay ourselves open to the risk that we would be oversubscribed, then we would have to reject people's grief. And that's not good. I didn't want to exacerbate a feeling of loss and rejection that may already exist. So that meant that we had to build it one by one, one at a time until we found the right people. And we also had to make consent reversible.

So we would have a participant launch, the day before we launched every exhibition, where they could come and see their work. And bring their families. And yeah, celebrate. But we said at that point 'if you don't feel comfortable' (because it's a new thing to see your face blown up, put in a picture frame, and to see other people listening to your voice and your experiences... particularly because people were emotional when they told us their stories, there were tears, vulnerable things) you know, 'even if at that point it feels too much we'll take your portrait down and you don't need to worry, that's an option.' This was quite high risk for us as artists, because we could have ended up with nothing to show.

AR *How did it work out in practice?*

EH No-one withdrew.

AR No-one withdrew? Very interesting.



Ellie & Mum
What is Left?



EH But we did get the feedback that because they knew they were able to, it actually helped them be brave. They said if there hadn't been a mechanism for them to withdraw, they might have withdrawn ...

AR But the fact that nobody did says something about how they felt their stories were handled. It communicates that there must have been a deep sense of trust and respect .

EH Yes, we were really transparent about what it was going to entail. We met with all the potential participants four times – first to have a coffee with them and talk them through the process, answer any questions or meet any concerns they might have. Then we'd come back and would take the portrait, and do their interview – and we would always take the portrait *after* their interview, so that things that might rise to the surface while they spoke could be then incorporated into the portrait. Then we would go back to their homes and give them a print of their portrait at domestic size, and a copy of their transcribed text. And then they would be invited to the participant pre-launch, and *then* the work would opened to the public. So there was a lot of care taken, and a real effort to be very transparent from the very beginning, so that people could see the whole journey, not just the next step in front of them.

There was quite a lot of pressure on Roshana: she used film, so she couldn't see what she was capturing. It's not like with digital [photography], where you can look back at your photos and go 'Oh great, I've got one'. You have to wait till the film comes back from the developer. She used a medium format camera so you would only get 18 or 20 shots in a roll of film, so it was one roll of film per participant, and if she didn't get it... she had to get it, had to get something.

I also noticed the artfulness of how she put participants at ease... there was a sort of choreography that we developed between the two of us, I would facilitate the interview, the conversation, and then Roshana would take the portrait and I would be her assistant - so I would do things like hold screens or move lights. It would be three of us, the participant, me and Roshana sitting round in the person's home, eating biscuits or drinking lots and lots of cups of tea - or in one case John plied us with bubbly, it was great (laughing) – and he still got a good photograph!

So ... it was really relationship building, and I'm still friends with a lot of the participants on Facebook, I see the way that their lives are evolving and changing, and they see the way my life is evolving.

AR That's big! I mean that's interesting and unusual, very unusual I think. You know, for participatory arts processes there's often - usually - a cut-off point, that sort of feels right. But what you're saying is you still have that connection, that bridge.

EH I still get to like it when Greg makes an amazing curry on Facebook, and I still get to cheer when Angie does something incredible, which she does all the time.

AR So they're part of your chosen family in a way as well?

EH Yeah absolutely, and in fact the year after, I had a text from some participants on my birthday, and they said 'We're in the Cove pub in Portland having a pint for you!' And there were two people who'd met on the project and they lived very close to each other but didn't know each other, so they met at the participant launch and then realised that one of them had accidentally photobombed the others' photographs: we were being shown somebody's photo album and we said 'Oh! Do you know somebody else from the project is in that photograph in the background!'



AR So it's like a little network there. [Yes] We're looking at all sorts of different ways that you're holding the work, the process of developing from one stage to another, but also other people's real lived experience: which is what you talk about all the way through. And you've said in the archiving process that actually what is very precious to you is finding a way to retain the reality of those people's stories.

EH Yes, and as well as all the alive people I've met through the *Grief Series*, I've also been introduced to some amazing dead people! And so actually there's twice as many participants as we think, because for every alive person who we're hearing, we're also hearing the person that they've lost. And now there are people that I have never met because they died before I met their loved ones, but I feel like I know them, or honour them. So ... Steve told me all about his brother Paul, and now I will see things that will remind me of Paul. I've never met Paul! (laughs).

AR That is fascinating. It's like echoes... and we talk about what is someone's legacy when they do die, part of the legacy is how they're carried by other people

[yes]. So actually in some ways what your work is doing is increasing the legacy of those other people.

EH Scattering my mum's ashes - me and my sister went and did it, completely illegally, at a National Trust property with two of my mum's friends – who are sadly dead now. But I found it such an underwhelming experience. So instead of scattering her ashes, the *Grief Series* has been a prolonged way of scattering her legacy, of sharing all the beautiful drawings she did, and sharing all of the beautiful things that she taught me, with audiences.

AR That's beautiful, thank you so much Ellie, and so much more to explore with this incredible piece of work.

The Archive of The Grief Series is being donated to Special Collections at the Brotherton Archive, Brotherton Library, at University of Leeds.

For further information

www.griefseries.co.uk/thinking

History workshop journal <https://www.historyworkshop.org.uk/memory-emotions/contains-emotional-baggage/?fbclid=IwAR3M0pfXVIhoB4HoDW37m9UFM-WKEnpnM7G467pLzR-dhvmhCySgO1MMXkY>

Reservation review here <https://www.theguardian.com/stage/2012/nov/05/the-reservation-review>

Theatre as therapy <https://www.theguardian.com/stage/theatreblog/2012/nov/12/solace-theatre-find-answer>

Image credits

Image 1: Publicity image from the documentary 'Ellie Harrison's All That Lives'. Photograph by Matt Rogers

Image 2: What is Left? mood board. Work by Ellie Harrison. Photograph by Matt Rogers.

Image 3: The Ofrenda from All That Lives 2023. Work by Ellie Harrison. Photograph by Matt Rogers.

“Changing the paradigm: Reflections on the challenges of innovation and culture change in developing Creative Health”: An interview with Phil Walters and Steven Michael
Professor Barry Percy-Smith

Introduction

There is increasing recognition of the value of creativity in helping people to live well. However, in spite of developments in terms of social prescribing, the potential of Creative Health approaches is still yet to be realized. Whilst evidence from people with lived experience boldly illustrates the value of Creative Health approaches (Percy-Smith et al. 2023), the NHS has yet to fully embrace and incorporate these approaches into its organisational culture, ethos and resultant approach to service delivery. As West Yorkshire declares its aspiration to become a Creative Health zone (West Yorkshire Combined Authority, 2023), it is timely to learn lessons from existing and past initiatives for realising the potential of Creative Health and the importance of culture change and innovation.

This paper is based on a conversation with **Phil Walters**, Strategic Lead for Creative Minds, a charity developed and supported by South West Yorkshire Partnership Foundation Trust (SWYPFT) and **Steven Michael**, Chair of Creative Wakefield and of ImROC (Implementing Recovery through Organisational Change) and former CEO of SWYPFT. Steven was instrumental in supporting Creative Minds at its inception (2011). Interviewed by **Professor Barry Percy-Smith**, Director of the Just Futures Centre for Child, Youth, Family and Community Research, University of Huddersfield.

This conversation took place on 16/09/24. The ideas in this paper are taken solely from that interaction, but do not purport to be the totality of thinking or views from the participants. Instead, this conversation provides a candid snapshot of unadulterated reflections which are shared here to invite others to engage with and reflect on the issues, questions and challenges at play in bringing about cultures of Creative Health across public sector organisations and communities.

BPS *So let’s start off by opening up thoughts from your experience about how we realise the value of Creative Health and why culture change is needed?*

SM I think if I start with the question ‘why is culture change needed?’. The prevailing view from many people who are using mental health services, or trying to access mental health services, is that the current system is fractured and failing. It’s not delivering what people really need. It then begs the question, what is wrong with the current system? And why would culture change be needed?

We’ve become locked into a prevailing culture of mental health service provision being fixed in what is often called a clinical model of pharmacological intervention, diagnosis and talking therapies.

PW There is a lot of talk about listening to the person who is using the service and a lot of the time they say, you know, the creative stuff is good for them and do more of it when you're not well. That is the reason why we set up Creative Minds. The stigma associated with attending mainstream activities is quite prohibitive and you lose your confidence and it's hard to access. So, what we find baffling is, if people want creative alternatives more and more, why is the medical model still the dominant offer from the health service really? And that's the culture. Backed up by the Royal Colleges (Psychiatry, Nursing), because people that work within the system are trained in a medical system.

SM Yes and the first part of the question - how do you realise the value of Creative Health? With great difficulty. Because you've got a lot of people who are in policy systemic leadership type roles, who are advocating very strongly from central government, right down to the regional levels for Creative Health approaches, but seemingly not able to confirm that what that requires is a paradigm shift. And that includes a funding shift to something that would actually create a more sustainable platform for this. And that hasn't been achieved as yet despite the voices being very clear and very loud for this to happen. [The system] is rooted in a scientific (positivistic) paradigm. Creative Minds, has done wonderful work, but it's very difficult to fit that into an RCT (Randomised Controlled Trial).

BPS *So, Steven, are you suggesting then that creating a Creative Health system is not just tied in with culture, but it's also tied in with cultures of research and evidence?*

SM Without a doubt. We've constantly been asked for evidence collected in certain ways. And you're thinking, well, actually, life, art, creativity doesn't exist in those forms. We wouldn't have art if you had to measure it. But I think getting beyond that is a challenge to people's identity. There is a place for biomedical approaches but they are not an end in themselves, as the system currently sees them. That's the bit we have to be able to fund, support [and] sustain ...

PW The All Party Parliamentary Group (for Creativity, Health and Wellbeing) were saying there's a lot of evidence for this. You know it works. Get on with it.

SM But then qualified it by saying, but it's not the job of government to change culture, nor are we changing policy, nor are we changing funding streams.

PW It's about a different way of seeing the world – community-orientated, actually supporting communities, making communities better places to live. We should be gearing funds towards supporting communities. And what came out of it was 'helping people to live well in their community and reach their potential'. And for me, every day that Creative Minds started to develop, I wouldn't say a day went by when I didn't quote that and say, look, this is what the trust's mission is. And that has a big effect on culture change because you've got some kind of statement that's saying "Let's move in this direction".

SM Yes we revisited the mission on the basis [that] we should operate with local communities, we talked to about 2500 people in different communities and that's what they said they wanted.

BPS *So what you are saying is, that actually part of the challenge of cultural change is to go beyond the restrictions of the system and start to work much more proactively with non-NHS partners in communities?*

SM There's going to have to be a degree of brinkmanship within it where you actually take people to look over the edge and say we're going to have to make this change. It's giving the system some permissions to look into this in a way that it's never done before.

PW When we started with Creative Minds, the prevailing feeling of third sector organisations, community organisations, community groups, was that the NHS is a fortress. You can't get in there, they don't want to particularly work with us, and they put lots of barriers up and it was the procurement system...

SM You're working in such a highly regulated system that the rules have to apply everywhere. We had to try and keep Creative Minds away from the main organisation and the main system to allow it to grow until we were fully confident, but nonetheless we know we have to invest in it.

BPS *So, how did you manage that as CEO of SWYPFT with the Board and leaders?*

SM There was a philosophy of recovery that people were beginning to support and we, as an organisation, were looking to support that. As Creative Minds emerged as a very powerful mechanism to promote community involvement and recovery there's a self-evident element of so many people reporting that "this is what we want". We had financial freedoms and flexibilities, particularly in the area of innovation, to invest. Creative Minds was reflective of that mission so was easy to support for the board.

PW And they really liked the match funding model that changed things financially - for every £100 we invest, we get £100 back in match funding.

BPS It's interesting what you were saying about investing in creating space for innovation to happen in a way that enabled you to breakthrough that culture and create that space for change. *What's the possibilities for doing that nationally at scale?*

SM It's huge. It takes a bit of bravery. If we look at the development of the recovery movement within mental health, certain organisations embrace it automatically. We did in SWYPFT because ideologically it (helping people to live well in their community) was what we believed we should do, but some don't operate with that model. There is enough of a critical mass of organisations willing to

embrace the recovery model, but there is a vacuum at the heart of mental health policy development.

PW Another turning point was recognising the blockers in the system. Steven got a lot of them in the room and said, 'I want a can-do attitude to this'. So leadership is crucial, it suddenly started to free up a bit of movement.

BPS *How important is the era we are living in with declining public sector investment in providing the context for change?*

SM I think it's pretty significant. The state can't play the role that it did and if that's the case, then you're either going to leave the state as the provider of services, or you're going to have to embrace communities in a different way. But over 15 years we have seen continued diminution of state investment without any really hard thought about what you replace that with. You've got to kind of reimagine the role of the public sector in a very different way. And I think we generally try to do that through Creative Minds.

BPS Maybe the shrinking state has unwittingly created a new opportunity to mobilise communities.

PW Yeah, and I suppose [Creative Minds] fitted with a social enterprise model, but the narrative for a long time has been that community, the voluntary sector, is free. [But] you need an infrastructure to support that, and I think that was ignored.

SM Clearly one of the big drivers was to take the pressure off the GPs, but then the problem was 'with what?' Voluntary sector services were perceived to be free, but it doesn't work like that. I think it links to how particularly the NHS perceives innovation predominantly in terms of [measurable] product, process and procedure, rooted in a strongly scientific paradigm. We should be talking more around a paradigm in innovation, which is about how do we shift the underlying mental models, about what organisations and systems are there for and why they exist. So it's about what do we mean by innovation? And I think it's about changing mindsets.

PW A lot of this was being done covertly before Creative Minds ... I remember people taking people fishing and not telling the system because it might have been seen as risky. But when we got Creative Minds up and running this was embraced.

BPS *But, in terms of challenging this culture, is it possible to place more emphasis on professionals being responsible for change by saying this approach you're using is increasingly not working for a lot of people, here's evidence about another approach, how can you justify continuing to deliver your service in that way?*

SM There is a mental health approach in Colorado in the USA which works on a solution-focused model, very similar to a recovery-based approach, and they re-authored the roles of people in the team, using talking therapies, working with individuals on a self-realisation programme that was all about goal setting and them

having to improve their lives. Setting their own goals with some peer support, and I thought that's great, and they saw the bigger public health benefits in that system e.g. reducing suicide rates.

BPS *We're talking about a recovery approach, could you clarify how you understand a recovery approach?*

SM It's about recovery of a meaningful life beyond mental distress and diagnosis.

PW For me it links to spirituality and compassion – so it's about restoring hope, meaning and purpose to people's lives. And I think that's really fundamental to the Creative Minds approach. When you are ill you can lose hope and the meaning and purpose in life starts to wane as well. If you lose your job, you lose you. But finding a talent that you didn't know you had: how life transforming is that?

SM There are some fundamental problems that need fixing here and recovery is seen as the solution. But what I find peculiar is instead of having recovery as a way to fix a problem, recovery is a solution to begin with [i.e. living well].

PW I think the difference is the judgmental element to the medical model and the non-judgmental element to creative approaches and recovery, I think people can be themselves. People say you can have a laugh, you can relax a bit, you can be yourself and that is a compassionate environment really, not being judged all the time. People don't always want to talk about the problems, they just want to come along, they want to sing a new song with the group. And if they're having a bad day, there might be somebody who they can have a chat with. But it's not a structured, regimented way of supporting someone.

SM People are very rarely symptom free. They just manage those symptoms differently to be able to live a better life. It's a very different philosophy for an organisation or system.

BPS So what seems to be coming out here is that actually we're talking about recovery, but we're also talking about the recovery of a system too.

SM It goes back to one of your questions before Barry, in that it kind of requires some fundamentally large conversations that I'm not sure people are willing to have.

BPS We're talking about the challenges of changing a culture both in terms of how the system operates, but also in terms of how interventions work and we see a lot of the drivers of this are coming from arts and humanities, so I am wondering *how significant is that cross sector approach for culture change in the health sector to happen?*

SM I think it's pretty fundamental because we're all socially conditioned to understand the world as we understand it. When we look at the creative process itself and understand how people live in relation to creative processes, it's just fundamentally powerful. If you join a community group, you join it as an artist first, you don't join as a patient. I've watched that power of the creative process kind of reset those power lines, if you like, within conversations. And that's a great strength. The ability to talk about a person's fundamental right to well-being as opposed to tackling their illness. This is something that supports well-being.



BPS So I'm just wondering, *in terms of organisational culture change, is part of the goal to innovate communities as well as public service systems?*

SM The power of communities taking greater responsibility for their self-reinvention is huge. And I think that when we look at Creative Minds, they couldn't have existed if people weren't doing that.

PW The champions that come forward, the best people were the support workers in the system who knew their community inside out. Going to a game of football, you're monitoring their well-being, doing things that are very skilled, you know, but just doing ordinary things.

BPS We've talked about how SWYPFT enabled Creative Minds to develop and thrive. *What learning can you take from that journey to inform change now?*

PW Modelling good practice and developing it further, and the relationship with ImRoc. Modelling how to work with communities and showcasing how this can start to build a different system. The context now is probably stronger than it was five years ago, and I think there are, you know, there are more drivers now to help us do that, and linking to the University as well. And I think, where it's owned, it [should be] owned in each community. And I think that's quite important really that real change actually happens at grass roots. It's almost counterproductive if you get some diktats from on high, they're more likely to disincentivise people. From a mental health perspective, you know, I think that lesson needs to be part of it really. It's people who are passionate about their own area.

SM I think there's something around creating the necessary conditions to allow for those conversations to emerge at different levels across West Yorkshire. There is not a clear solution to what is quite a deep-rooted problem. And I think that can't be owned by policymakers, it has to be owned by communities, and it has to be owned by the statutory services. I think it's a conversation, and I think we are having a series of those conversations. I think that will lead to a change in how we view infrastructure. If we are going to be honest about this, something's got to shift. I think there's something around learning from places like Wakefield where we are having those conversations quite actively, applying theory and evidence to support change. About doing things with people, not to them and having the university on board with that is critical to support with learning and knowledge transfer. Moving beyond the rhetoric and stopping the ongoing treadmill of endless evidence seeking, having a single point of reference and thinking about funding streams and commissioning approaches in the new landscape that is something the ICB might have to get a grip with. At the moment, we're still on the periphery of that and if we had a proper budget, a proper resource you could really do a lot.

And there's something about new workforce models around peer support and shared learning. We've got to look more critically about sustainable workforces. What is the genuine role of the voluntary community social enterprise sector? What is the role of peer support? I think that's a big challenge because that's an infrastructure challenge as well. I think we've just got to be honest about that.

So there are possibilities, but I think we're going to have to do it in certain areas more than others and there is an important role for those people – champions for this work - who are involved in the conversations and work in a respectful way towards communities rather than telling people what to do. That's about creating

the necessary conditions and a different form of leadership by hosting conversations rather than trying to create heroics.

But at West Yorkshire level there is a recognition and ambition to move from a position of potential performative rhetoric to meaningful and tangible action leading to genuine systemic change. I think we've got to be brave enough to enact this paradigm shift.

BPS It's interesting that some of the things you have highlighted were at the heart of our AHRC project about developing a Creative Health system.¹ Such as using different research approaches and creating space for different conversations, for challenge, for critical reflexivity, for asking critical questions, for looking at systems and practices and going beyond the rhetoric. It's all enabled by the action research paradigm we adopted.

SM Part of it is being able to have those conversations with people to make something like this work. You've got to be fairly agile. You've got to really understand how things work.

PW I think one of the elements is that this stuff takes time. If we learn from our mistakes then it might make change come a bit quicker.

Image credit

Image 1: Creative Health in West Yorkshire. Illustration from Creative Health in Communities report (2023). Illustration by A.N.D. Studio.

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Endnotes

1 The research project '*Creating change: A collaborative action inquiry approach for integrating creativity and community assets into Integrated Care Partnership responses to health disparities*' was funded by the Arts and Humanities Research Council as part of its Mobilizing Community Assets to tackle Health Inequalities funding stream. See <https://research.hud.ac.uk/institutes-centres/cacs/projects/creatingchange/> for further information.

Zine making, Empowerment and Place: A Conversation on Participatory and Trauma-Informed Approaches

Jean McEwan and Heather Bullen

Introduction

This article explores zine-making practice through a dialogue between Jean and Heather. Zines are self-published magazines, often collage-based, using images and words (Sou and Hall 2023). Zines support self-expression of people both individually and collectively, foreground lived experience and within participatory practices.

The conversation focuses on Jean's participatory and place-based approach to zine-making, within Bradford and Keighley, exploring how her approach to zine-making evolved. The importance of place in creative processes is explored with Jean, considering ways zine-making can support collective expression.

The later discussion surrounds a recent collaboration with both authors in another place. This was a Research England-funded project with the University of Liverpool, exploring creative expression through zine-making with the women's group of Asylum Link Merseyside, a grassroots organisation supporting refugees and asylum seekers in Liverpool. Zine-making allowed choice and control over creative decisions, fostering agency and emotional safety within a trauma-informed research framework (e.g. Shankley et al 2023, Trimboli 2022, Witkind and Robjant 2018).

Jean McEwan is a visual artist, organiser and facilitator who has been working across visual, collaborative, research and socially engaged practices for 20 years. Jean uses collage and zine-making in her participatory work as democratic and inclusive ways of exploring meaning, stories and messages with people. Jean's zine-making practice is rooted in West Yorkshire, although she also makes zines that are not in - or of - this place.

Heather Bullen is an occupational therapy lecturer at the University of Liverpool. Meeting Jean at the International Creative Research Methods conference, Manchester, led to her artistic facilitation of a research project exploring creativity with female asylum seekers in Liverpool, through zine-making.

HB *What inspired you to pursue zine-making?*

JMcE My zine epiphany was when I stumbled upon a zine fair in a gallery in Bradford in around 2010. There was such a variety of zines, encompassing the political and the personal from the artistically-put-together, to very basic, rough-and-ready styles. Being able to encounter voices that were completely unmediated was so refreshing, and I knew it was something I wanted to explore.

HB *And what were your next steps?*

JMcE I sent a call-out around the Bradford creative networks. We formed a collective named Loosely Bound, consisting of people already familiar with zines, and those curious to find out more. I was working as a community artist in Bradford at that time, and zine-making felt a valuable method to bring communities together to explore issues or ideas, being so accessible.

Zine-making fits with my priorities as a participatory artist, which is to empower people to express themselves on their terms. You don't need artistic skills, and, as you know from our project with Asylum Link, often when you sit around a table cutting and sticking, you have fantastic conversations and really get to know people.

HB *How did your zine-making practice evolve in Bradford?*

JMcE Bradford is the place that has had the most influence on my zine-making. It has a radical grassroots culture, a tradition of using arts for activism, and therefore a natural place for the things that I'm interested in, a place to 'do' zines.

I got a bit of seed funding from a local charity to develop my community arts practice. I'd always been interested in working in markets as diverse, vibrant public spaces. I set up a stall in Kirkgate Market, calling it 'Wur Bradford' (Wur is slang for 'our' or 'we are'). I was able to be experimental and open and respond to the energy and ideas from people who came into the space, who were generally shoppers who saw some interesting-looking stuff going on and could, if they chose, become part of the community.

Through this, I developed a very horizontal way of working that was about trying to make a democratic space where people could have friendships and meet together. I began to see how it was possible to de-centre yourself, to empower people to embrace creativity in their own way. The marketplace project gave me confidence to advocate for that approach in my future work.

HB *How do you use zine-making with different communities?*

JMcE I've been able to explore zine-making with many different communities in Bradford. Early on, at Wur Bradford we started to be approached by community organisations who had specific groups that they wanted us to work with, cultural groups or geographical communities.

At the Bradford Refugee Festival we ran zine-making workshops, with 'mini zines', little books for children. This was very poignant. I remember doing a session with Syrian kids drawing pictures of their flag, talking about their country. They loved being able to make this little book that was their own, without needing words. It was a bit like the Asylum Link project, very easy, accessible, we just provided some materials. It was such a simple thing to offer, but powerful.

HB *Did you draw on this experience with the Asylum Link project?*

JMcE I would say so. Bradford was one of the first places in the UK to be officially recognised as a City of Sanctuary (<https://bradford.cityofsanctuary.org/>). It's got a long association of supporting asylum-seeking communities and refugee people, that ethos is very much part of the city. I have worked with and met people who are refugees over the years, so I had some awareness and sensitivity about what their experiences might be. This informed our planning for the Asylum Link project.

HB *How do you select materials for zine-making?*

JMcE That is such an important part of this practice. The materials are developed in response to each group, and each context, and are completely bespoke to each zine project - whether they are found (for example from books, magazines, other paper materials) or created (such as drawn or printed images). I aim to curate materials that could be engaging, relevant, resonant and inclusive for the people I am working with. I spend a lot of time really considering what people like, and what might their lived experience be.

I'm really aware when I'm working with people that have experienced stigma and trauma such as asylum-seeking people, that there's so much misrepresentation, and harmful representation out there in print media, and how cultural differences might guide what images people may or may not feel comfortable using, for example figurative images.

It's not just the words and images, but the quality of the paper and the other art materials that is important. I try to bring good quality things in, as part of offering care. That gives a message of saying, you're valued; we're not just using the cheapest materials.

HB *Could you share some of your plans for Keighley?*

JMcE Keighley doesn't have a prevalent zine-making culture at the moment, although there are lots of very creative people. It's a much smaller place than Bradford so the approach to zine-making needs to be different. In Bradford I would do a callout for people interested in attending a zine fair, as people are happy to travel far and wide for this. As Keighley is a small town, it felt important to try to generate zine-making culture locally.

I'm therefore talking to colleagues at Keighley Library where I've done a lot of creative work, about putting on a programme of events where we will host workshops with groups that already use the library, as well as some open public sessions where people can turn up, discover what a zine is, and make it about whatever they want. After that, we'll host a zine fair with people who have been involved.

HB *Can you talk about your facilitation of zine-making in Asylum Link?*



JMcE It was so interesting, because we imagined a certain process, in the early planning stages. But when we began we realised that we needed to do things differently. This is often the way with projects. You make a plan and then you go, oh, it's not like we thought. Nothing ever is, we have to be able to respond.

We saw how stretched Asylum Link staff are, and the pressure on rooms. There were women arriving at different times on the day or who weren't there physically at a particular session, but were part of WhatsApp conversations afterwards. So, we had to consider different ways of introducing the concepts. Fluidity had to be part of the experience.

HB You introduced zine-making in a very graded way in Asylum Link.

JMcE We realised that it was important to introduce collage in a gradual, staged way and planned that together. It was a very gentle, careful approach. A student occupational therapist, Ayra, a volunteer within the women's group was key in this. We started by supplying some ready-made sticker shapes to make mosaics, then stepped forward to the next stage where we provided different collage materials and templates to work into. I sent Ayra some packs of materials to use with the group. We only later introduced the concept of zines.

HB We had to be so responsive on the zine-making day.

JMcE We envisaged the day itself as being a certain length of time but had to keep changing that as things arose. Although I had planned the session carefully, thinking about offering choice and multiple 'ways in' for the women to make their zine pages, because of the nature of everything going on, we had to really seriously improvise on that day, we were all just trying to make it work together. It was a funded piece of research, meaning there was certain information that we needed and things that had to happen from the University perspective. There was a tension between embracing fluidity, but knowing that certain things needed to happen.

HB It was hugely rewarding to be part of.

JMcE Aside from all the labour involved, which was a lot more than any of us expected, we were all completely invested in trying to make it as safe and as good an experience for the group as possible. I felt we were coming from that ethos, that place of love, if you like, which is present in Asylum Link, in the women's group and in the staff supporting the group, with everyone just wanting it to be a good space for the women.

In terms of the collective zine, we managed to make some decisions on the day (such as the cover and the title) and afterwards I created a draft of the zine and you and Ayra then shared it around. There were some small changes requested but not many.

HB Launching the collective zine celebrated the women as artists.

JMcE We had a lot of conversation back-and-forth about who might be the audience for that day. Was it public-facing or more of a community celebration with the women at the centre? It was agreed with the women's group that it should be more of an intimate event. You and Ayra organised some visitors, and dressed the room. There was a lot of care put into making the room beautiful, and the women arriving and being so proud.

We tried to centre them, to show them that they were the important people in the room. Two women had written a speech, and spoke their own words. I can still remember how it felt, listening. They were just so loving and spoke so beautifully. I can still feel the sense of pride that the women had from making the zine, and from feeling seen and valued. Those things are important to hold and to think about.

HB *I wonder how you feel 'place' came into this project?*

JMcE There's a sense of solidarity that is strongly present in Liverpool. It feels the norm to care, that of course you're going to look out for people, of course you're going to challenge racism. Liverpool has that long history of commitment to social justice. It was amazing to do a project like this, in this city where there's a socialist heart and such a feeling that people genuinely care.

Acknowledgements

Ayra Yoosufani, Masters student, Occupational Therapy programme, University of Liverpool was an integral part of the research team for the Asylum Link project.

Further Information on Zines

Read the zine made by the women's group at Asylum Link Merseyside here:

<https://archive.org/details/every-woman-art/page/n39/mode/2up>

Doing It Together was funded by UK Research and Innovation. This un(guide) will be of interest to anyone thinking of using zines in their own work and practice.

<https://changingrealities.org/zines/doing-it-together-an-unguide>

Image credit

Image 1: Zine making at Asylum Link Merseyside. Photograph taken by Asha Panjwani, volunteer, Asylum Link Merseyside.

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Exhibitions

Cultures of Creative Health Group Exhibition (1/11/2024-11/1/2025)

Curatorial overview: Dr Rowan Bailey and Laura Mateescu

The group exhibition *Cultures of Creative Health* marked the end of our public realm programme which ran for 12 months from January 2024 – January 2025 out of the School of Arts and Humanities at the University of Huddersfield.

We curated a range of activities and collaborations, including:

- An online guest speaker series featuring academic researchers, health and social care professionals, creative and cultural providers, people with lived experience and community organizations. These talks are available to listen to on Spotify.
- Pilot tests of continuing professional development workshops with hoot, focusing on support for creative practitioners working in or seeking to work in the creative health sector.
- Knowledge and Cultural Exchange Projects with external partners across West Yorkshire.
- Solo and group funded creative research projects on health and wellbeing.
- A range of creative practitioner residencies at the Toast House Galleries.
- Embedding Cultures of Creative Health into our undergraduate and postgraduate curriculum with live briefs and exhibitions.

A lot of the work undertaken has been collaborative and driven by creative experimentation. Academic researchers in the School of Arts and Humanities collaborated with key external partners including Other Ways to Walk, Men in Sheds, Creative Wakefield, Mondays at the Museum, Children’s Art School and Support to Recovery (S2R).

This research and the activities of Cultures of Creative Health have contributed to the development of a new Creative Health Hub for West Yorkshire. The Hub is the first of its kind across the region and will work with a consortium of external partners to raise the visibility and awareness of creative health and develop new forms of provision in place. This work aligns to the West Yorkshire Creative Health System; a collaboration between Mayor Tracy Brabin and the West Yorkshire Health and Care Partnership Board.

We thank all the communities and partners who have been involved in this research programme and look forward to further collaborations and opportunities. If you would like to find out more about Cultures of Creative Health, please contact: culturesof@hud.ac.uk

Dr Laura Mateescu is Research Assistant and Exhibitions Officer for the Cultures Of programme, and freelance photographer and videographer based in Huddersfield, UK. Her research explores identity formation processes with Romanian communities in post-Brexit Britain, in and through a socially engaged photographic practice. Her work has been showcased in exhibitions in the UK and Romania.



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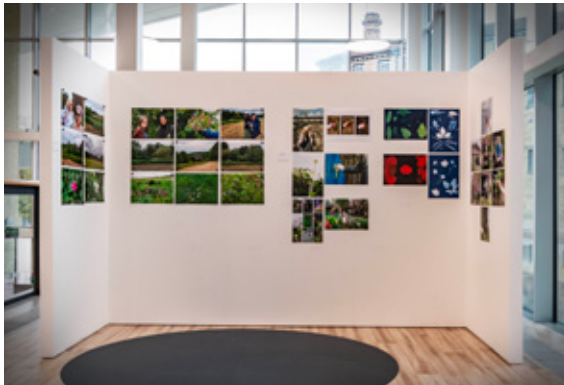


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Dr Rowan Bailey is a Reader in Cultural Theory and Practice with an interest in place-based thinking and making in the public realm. This includes collaborative partnership working with different creative communities. She is also Director of the Centre for Cultural Ecologies in Art, Design and Architecture, University of Huddersfield and Principal Investigator of the Creative Health Hub for West Yorkshire.



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Image credits

Image 1: Creative Health Illustrations, Image 2: Leather outputs with Men in Sheds, Image 3: Creative Health Wakefield Exhibition, Image 4: Staff Wellbeing Workshops exhibition, Image 5: S2R in Dewsbury and Birkby. All Photography by Laura Mateescu.

OTHER WAYS TO WALK NATURE CONNECTION MANIFESTO

BY MARIANNE LEE

NATURE CONNECTION BRINGS US INTO CLOSER
RELATIONSHIP WITH OURSELVES AS PART OF THE NATURAL
WORLD. THIS HAS HEALING BENEFITS FOR US.

PEOPLE WHO ARE MORE CONNECTED TO NATURE SHOW
GREATER COMPASSION TOWARDS IT.

NATURE CONNECTION COULD HELP US ALL FEEL BETTER AND
BEHAVE IN WAYS THAT ARE MORE IN TUNE WITH THE
PLANET'S NEEDS.

WHERE WE FIND OURSELVES:

OUR RELATIONSHIP WITH NATURE IS FALTERING.

Research shows that our connection to nature is declining, and our relationship with nature is becoming more distant. This is a problem because nature connection is essential for our well-being and the health of the planet.

WE DON'T PROTECT WHAT WE DON'T KNOW OR CARE ABOUT.

When we don't understand the value of nature, we don't care about it. This is why it's important to learn more about the natural world and the benefits it provides for us.

CLIMATE EMERGENCY.

The climate crisis is a global emergency that has been declared by the scientific community. It is a result of human activities that have led to a rapid increase in greenhouse gas emissions.

THE CHANGE WE NEED

Individuals, communities, and nations must take action to address the climate crisis. We need to reduce our carbon footprint and protect the natural world for future generations.

We must take action to address the climate crisis. This includes reducing our carbon footprint, protecting the natural world, and supporting policies that promote sustainability.

SIX ACTIONS WE CAN TAKE

1 Imagination

Imagination is the key to creating a better future. It allows us to see the possibilities and work towards them. Use your imagination to think of ways to reduce your carbon footprint and protect the environment.

Seek out people, animals, birds, plants, etc., even, places that nurture your imagination.

Use your imagination to create art, stories, and other creative works that inspire others to take action.

Use your imagination to find solutions to the climate crisis.

Use your imagination to create a better future for all.

Use your imagination to create a world where everyone has a chance to thrive.

Use your imagination to create a world where everyone has a chance to live.

3 Become Engaged

Engagement is the key to creating a better future. It allows us to work together and make a difference. Get involved in your community and work towards a better future for all.

Show others of hope, beauty, and connection with those who have a different perspective.

Share your perspective and ideas.

Use your voice to make a difference.

Use your voice to create a better future for all.

Use your voice to create a world where everyone has a chance to thrive.

Use your voice to create a world where everyone has a chance to live.

5 Put in Time

Time is the key to creating a better future. It allows us to work towards our goals and make a difference. Use your time wisely and work towards a better future for all.

Plan times to slow down and experience wonder in nature.

Use your time to create a better future for all.

Use your time to create a world where everyone has a chance to thrive.

Use your time to create a world where everyone has a chance to live.

Use your time to create a world where everyone has a chance to thrive.

Use your time to create a world where everyone has a chance to live.

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Other Ways to Walk: Exhibition Review

Stephen Hibbert, David Lake, Rob Lycett, Rachel Massey, Jake Mehew

Other Ways to Walk is a knowledge exchange and collaborative project exploring the connection between walking, mindfulness, creativity, and wellbeing in natural spaces. Across 2 gallery spaces in the Sovereign Design House and Bath House Galleries at the University of Huddersfield, the exhibition combines research and practice from artists and academics, aiming to promote a deeper understanding of the health benefits derived from engaging with nature. This interdisciplinary initiative, led by Rachel Howfield Massey, involves the participation of University of Huddersfield researchers who developed various works on the theme of walking as a mindful practice.

In Gallery 3, central to the exhibition is Massey's *Manifesto for Nature Connection*, which urges a re-evaluation of our relationship with the environment. It addresses concerns about the decline of biodiversity in the UK and calls for greater awareness of the intersection between environmental health and social justice. The manifesto proposes itself as a framework to recognize our responsibility in the face of the climate crisis, to rethink the ways in which we interact with nature and the environments that host us. This is accompanied by *The Window* – a video piece stitched and displayed in a pillow, which challenges traditional encounters and ways of thinking about natural environments.

Several artworks in the exhibition explore the impact of walking and nature connection on creativity and mental health. David Lake's *York (YO7)* project documents the benefits of prescribed walking in rural spaces. The photographic series, displayed as a multi-narrative grid, captures seasonal changes in the landscape, drawing attention to the subtle yet significant shifts that occur over time. Lake's work reflects the sense of being present in nature, exploring how photographic practice and walking can transform perceptions of familiar surroundings.

Rob Lycett's *crows.circling.somewhere* focuses on the relationship between experiences of place and language. Lycett uses chance-based arrangements, including algorithms, to visualise how these elements can convey the randomness and unpredictability inherent in nature. The work takes the form of a map, annotated with random three-word locative tags, inspired by Ted Hughes' *Remains of Elmet* and the language associated with the landscape. This map is paired with a series of text-drawing performances, *when.rain.comes*, which use water from the Upper Calder Valley to manipulate aquarelle pencil writings. The works examine the tension between structured representations and the fluidity of memory and experience in relation to place.

Stephen Hibbert's *The Intermixed Journey* utilizes immersive film techniques to present a mediated experience of walking in a natural setting. His work investigates the relationship between physical spaces and digital representations, where technology can offer new ways of engaging with nature, without altering its essence. This considers the role of technology in how we experience the world around us.

Another key element of the exhibition is *Radical Rest Retreat*, an audio installation by Jake Mehew (Gallery 1). Using quadraphonic sound technology, this work simulates natural environments such as forests and beaches. This sensory experience is designed to promote relaxation and mindfulness. The installation highlights the therapeutic potential of sound in fostering wellbeing, drawing a connection between auditory experiences and the benefits of being in nature.

Other Ways to Walk invites visitors to consider their relationship with nature, and the ways through which walking and nature connection can support both personal wellbeing and broader environmental awareness. Through a diverse range of works spanning sound, painting, video and photographic practice, this exhibition considers walking beyond the scope of a physical activity, shaped as a tool for healing and wellbeing.

Image credits

Image 1: Manifesto by Rachel Massey Howfield, Image 2: Video installation stitched into a pillowcase, Image 3: Photography grid display by David Lake, Image 4: Water-color paintings by Rob Lycett. Photographs by Laura Mateescu.

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(Re)Imagining Huddersfield's Narratives Toward a Better Future Dr Danilo Di Mascio

The title of the exhibition *(Re)Imagining Huddersfield's Narratives Toward a Better Future* identifies the theme of ongoing research aimed at exploring, generating, developing and disseminating ideas, reflections, design approaches and proposals. The exhibition event showcased work and ideas developed with Year 2 and Year 3 students in Design Studio modules during the second year of their BA Architecture programme (academic years 2022-23 and 2023-24).

The exhibition (curated with my colleagues Dr Ahmed Hassan and Dr Tamiris Capellaro Ferreira) was open to the public from the 8 March to 5 April 2024 in the atrium of the Barbara Hepworth Building in the School of Arts and Humanities at the University of Huddersfield. The display presented a selection of boards from students' portfolios.

Since 2017, in my Design Studio modules, we have been exploring how to reimagine our inhabited world and its narratives through design projects in and around Huddersfield; the aim of these projects has been to support and improve people's daily lives by promoting more inclusive and sustainable lifestyles. All the design briefs are connected to art, culture and nature in various ways and hence, all have links to aspects of creativity and health. The projects developed so far have explored different typologies and a variety of scales, from a small 'culture pod' to a town centre neighbourhood.

The exhibition presented a selection of student work connected to the following project briefs:

- (Re)Imagining Huddersfield as a Walkable Town
- Arts, Culture and Community Centre
- (Re)Imagining Huddersfield's Narratives: Visions for Turnbridge
- Office for a Video Games Company
- Centre for Heritage Studies
- Centre for Food Studies

The ideas I have been developing and exploring at the University of Huddersfield since 2017 are in response to various contemporary challenges that have social, environmental and economic effects. These ideas have proved to be even more relevant following the COVID-19 pandemic, which highlighted and confirmed that many aspects of our private and public buildings and places could be improved, including our relationship with nature.

All the projects showcased in the exhibition tried to imagine better public and private buildings and places. Creativity and its positive impact on citizens' daily lives and health were considered in multiple ways. For example, the project '(Re)Imagining Huddersfield as a Walkable Town' explored how specific streets of

the town centre could be improved to delight passers-by, hence improving their experience of walking. Another relevant idea that all projects tried to explore was that artistic, creative and cultural activities should be easily accessible by everyone, and to reach this goal, it is essential to scatter such activities in multiple locations around the town. Although the ideas were based in Huddersfield, this approach could be applied to any town or city. For example, the concept of the '15-Minutes' city (Moreno et al, 2021) highlights the importance of being able to access all basic services within a short distance, but it does not provide an in-depth exploration of connections between artistic, creative and cultural activities and venues, and their availability within residential areas. While it is valuable to have a concentration of activities in the centre of an urban settlement, it is also important that the entire population, including children, the elderly and those from disadvantaged groups, can easily access art, culture and creativity within walking distance of where they live. This is why Marsh, a suburb of Huddersfield, was selected as the location for the 'Arts, Culture and Community Centre' project. Such a venue could improve residents' lives by providing a place where locals of all ages can meet for various educational and cultural activities, and the centre would encourage dialogue, creativity and artistic practices. A purpose-built arts, cultural and community centre would therefore enrich the selected place and sense of community identity through architecture, creativity, art and culture. In addition, it would help to make the area safer and more inclusive.

All the projects also tried to explore new relationships with nature, again based on creativity and health. Some of them included, for example, a small vegetable garden / urban farm on the rooftop of a research centre or office block. Each project aimed to positively contribute to creating a stronger identity for the selected neighbourhoods and the town, and hence, to building healthier and stronger communities based on creativity and culture.

All the students' work was developed using a holistic approach and an iterative process through tutorials and reviews. Design ideas were explored, developed and presented using a variety of analogue and digital media. Students were encouraged to explore and apply principles of contemporary architectural design and technology, including biophilic design. Furthermore, each project required them to address a selection of the United Nations Sustainable Development Goals and RIBA sustainable outcomes. For example, the 'Arts, Culture and Community Centre' project addressed Goal 3 (ensure healthy lives and promote wellbeing for all ages), Goal 4 (ensure inclusive and equitable quality education and promote lifelong learning opportunities for all) and Goal 11 (make cities and human settlements inclusive, safe, resilient and sustainable).

The exhibited work and the research activities (still ongoing) that informed it also explore innovative relationships between architecture, urban design, narrative and sustainability:

‘Our daily life can be told as a story, and spaces and buildings are not a mere background, but active contributors that can support, improve or negatively affect every single event. Buildings and places, and their arrangements, could suggest specific lifestyles, behaviours and experiences’(Di Mascio & Darnell, 2023).

These relationships can encourage alternative ways of living, based on creativity and health, and make our villages, towns and cities more liveable.

Dr Danilo Di Mascio is a Senior Lecturer in Architecture, researcher and registered architect. He joined the School of Art, Design and Architecture at the University of Huddersfield in September 2017. Before that, he was Postdoctoral Research Fellow at Northumbria University and Research Associate at Newcastle University. Danilo has been actively involved in academic activities, including conference presentations, organisation of workshops, research projects, design critiques and guest lectures, in over twenty countries worldwide. Danilo’s academic research focuses on relationships between architecture, urban design, narrative and nature, considering multiple connections in terms of design, analysis, representation and sustainability. His work also explores architectural and digital heritage, and relationships between architecture and video games (theories, technologies and design). Danilo was the Chairperson of the 15th European Architectural Envisioning Association Conference, entitled ‘Envisioning Architectural Narratives’, hosted (virtually) by the Department of Architecture and 3D Design, School of Arts and Humanities, the University of Huddersfield, United Kingdom, 1-3 September 2021, <https://doi.org/10.34696/x3n-d030>

Image credit

Image 1: (Re)Imagining Huddersfield Exhibition. Image courtesy of the author.

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The Nature of Play – Cultures of Creative Health

Fiona Pattison (Inter-Arts)

As part of the Cultures of Creative Health programme Inter-Arts were commissioned to work alongside students in the School of Arts and Humanities, University of Huddersfield to produce and create an exhibition. In the project, Inter-Arts director Fiona Pattison facilitated a series of sessions for students to produce and create work which included: A Photo Walk, Paint & Draw Big, Create with Nature, Relationship with Self. In each 2-hour session, work was produced by the students, and this was shown in the exhibition - *The Nature of Play*. A series of Creative Mentoring Sessions with Fiona was given to the students to help support them, as their work was developed for the exhibition.

The Nature of Play was an exhibition about play, nature and the environment we live in during Mental Health Awareness week (May 9th – 22nd) in the Barbara Hepworth Building Mezzanine Gallery. Offering a space to rest, play and open your senses to everything within, showcasing artworks in a range of mediums including installation, stop motion animation, poetry, photography and performance, drawing on community and fashion. It featured works by Nyakeh David, Niamh Feeley, Katie Bowers, Zeph Brierley, Mackenzie Cale and Laura Mateescu. A series of events took place including: a private preview of the exhibition and a meet and greet with the artists, featuring a reading from *How I Felt*, performed and written by Mackenzie Cale, photography by Zeph Brierley; a photo Walk with Inter-Arts founder and creative practitioner, Fiona Pattison; a stop motion interactive workshop 'A Sense of Play' with Katie Bowers; and the 'Whispers in the Dark' event with Nyakeh David.

'The Nature of Play exhibition really tuned into being comfortable to create from your true nature and to not be afraid to express who you really are, it is within play where we really get to see what is happening on the inside. It is important to feel free and allow our freedom to have space and a voice, it is within this, that our true creative power is seen. To allow true authenticity to shine, is a window into our potential, this is where the magic happens, and new work is produced. Work you may have never imagined doing, but with trust and play, it is released.

The students involved within this project really valued the process and taking part in the experience, before we did any of the sessions we came together and did a group meditation. I think this really helped to support the group field and the mentoring sessions helped to keep the students focused and together. Creative Health is so important within our daily process and work, as it encourages us to listen to ourselves and others and enables a safe environment for the work to be produced, which is so important.' (Fiona Pattison, Director- Inter-Arts)

Here are a few testimonials from the students involved In *The Nature of Play*, for Cultures of Creative Health:

'I joined Inter-Arts as a way of breaking free from my studies, while experimenting on something new. My work largely consists of narrative pieces, concerning love,

apocalyptic conventions, caring for the planet and creatures on it, mental health issues, and self-worth. I do this not only to create conversations between my audience, but also to inspire those who need a push, and to say: "You're on the right path, just keep moving and always enjoy the journey". My work with Inter-Arts has been really empowering and gave me the courage to explore without the need to put pressure on myself for that work to be acceptable. My work since has been a little more experimental, and joyful, as I've realised beauty in the small things: in the act of doing art, in the feelings I get when I'm doing it, of how people interact with it, and not how they react to it. Fiona Pattison, founder of Inter-Arts, has been there every step of the way, facilitating, mentoring, and aiding us in the production of our pieces, with kind-words, a free attitude, and an honest and caring opinion. She has my thanks for giving me this opportunity, and well-needed break from the strict planning, and pressure of University coursework; now I feel as though I can go into my final year with clarity, and as a clean slate. I highly recommend anyone and everyone to take part in Inter-Arts, not only for their artistic journey, but also for their mental health.' (Participating Artist- Katie Bowers)



'I am Autistic. I have struggled with mental health issues since I was 12 years old. I am now 21. To cope with life and all that it brings, I have always romanticised life; to put it in simple terms to me, my life is a Disney movie. If I were a Disney character, my sidekick would absolutely be my dog, Spud. He's my best friend and helps me to cope with my emotions, unfortunately my anxiety rubbed off on him, so now we are both anxious. I take inspiration from nature so going on dog walks can be very inspiring to me. Two of my favourite things in nature are blossom on trees and butterflies. To me both things represent change and new beginnings and for someone who doesn't cope well with change, they remind me that change is okay. As an artist I struggle to just 'do' without having an idea to create from. I used the photos (from the Photo Walk) as inspiration and from this, experimented with prints

and other techniques to paint it in the Big Paint/Draw session. I chose this image of greenery and florals escaping over the wall and a door through to the garden as I much prefer green fields to busy roads, and this represents my constant desire to escape urban life. Inter-Arts has allowed me to be creative without boundaries or the impending doom of my work being graded. I have stepped out of my comfort zone to complete this project and learnt a lot about myself in the process.' (Participating Artist- Niamh Feeley)

The Nature of Play went through the whole experience from experimenting and creating work, finding your artistic voice and showcasing this in an exhibition, and learning how to promote yourself and others. If you would like to know more about this project for Cultures of Creative Health and about Inter-Arts Company please contact Fiona Pattison at:

Interartsfestival@gmail.com

www.interartsfestival.com

About Inter-Arts

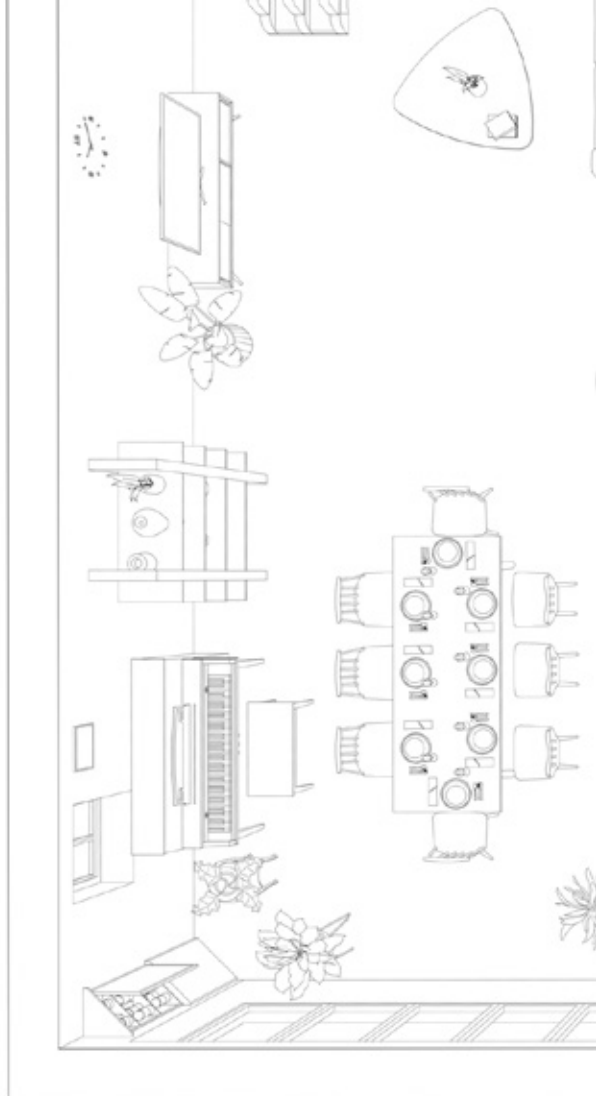
Inter-Arts Company is an organisation based in the Calder Valley, West Yorkshire that brings creatives together to create events, festivals and exhibitions to promote creative arts, health and well-being. Inter-Arts was founded in 2016 by Creative Arts Practitioner, Fiona Pattison after the devastating floods in the Calderdale Valley and her father's sudden death, she thought it was a good time to bring people together and create opportunities in the valley, after a time of great loss and devastation in the community.

They have a class every first Wednesday of the month at ACDC Art School at Dean Clough, Fletcher's Mill, in Halifax for creative sessions and support to talk and share ideas about their work and practice. Founder and Director, Fiona Pattison, works on a holistic level and every session always begins with a meditation and checks-in on people's mental health, before beginning any creative workshop encouraging and supporting creative health in their practice.

Fiona has curated and produced several festivals with Inter-Arts creative artists, including, Art Through Trauma (2018), Mental Health Awareness Festival (May 2019), Festival of Childhood (August 2019) at Artsmill, Hebden Bridge and more recently 'Invisible Made Visible/ Hope Faith Belief' in 2023 at Everybody Arts Gallery in Halifax.

Image credits

Image 1-2: The Nature of Play exhibition. Photograph by Fiona Pattison.



Friday 8 March 2024, Barbara Hepworth Building, University of Huddersfield

The exhibition organised by the Sustainable Living Research Centre (SLRC) showcased the relationships between place, healthy living environments & climate change. The display sought to engage the public, including local communities and wider representation, such as refugees and immigrants, living in cities and towns in Yorkshire. There were three sections to the exhibition, featuring a rich variety of drawings and photographs. By showcasing these projects, the exhibition aimed to:

- **Highlight the power of collaboration** between academic institutions and local communities.
- **Spark inspiration** for further innovation and action towards a more sustainable future.
- **Demonstrate the potential** of design thinking in addressing complex social and environmental challenges.

Section 1: Public Engagement and Climate Change

Dr. Yun Gao, Professor Adrian Pitts, Dr. Ensiyeh Farrokhirad

This display showed the relationship between buildings and interiors, and how they interconnect with the lived experiences of residents, with the aim of fostering dialogue among attendees from diverse cultures and refugee backgrounds. Drawings and photos shown in the section include those created in the workshop entitled *Public Engagement and Climate Change* organised by the SLRC in February 2024.

The workshop involved group discussions on current living arrangements of attendees. Value cards were used to illustrate and measure the impact of architectural spaces, facilities and settings on the quality of the environment. Photos sent by refugees about the challenges posed by lighting, temperature, and humidity in homes and neighbourhoods were also shared. Attendees were introduced to practical tools for measuring surface temperature and humidity, and some pragmatic methods to monitor and manage indoor environmental conditions.

Through the diverse perspectives of local communities, refugees, and immigrants, the workshops served as a meaningful platform for knowledge exchange, community engagement, and practical skills-building by bringing together individuals from diverse backgrounds. It facilitated a rich dialogue on pressing issues related to climate change and housing challenges, underscoring the importance of collaborative efforts in promoting sustainable practices within our communities.

Section 2: Design Solutions from the Next Generation of Architectural Designers

Sarah Bradshaw, Alexandru Bulbucanu and Andrew Raine (M.Arch 2 students at Huddersfield)

Student work from the M.Arch 2 design module in the School of Arts and Humanities at the University of Huddersfield explores the theme of Creative Health. Design projects in this section developed creative and practical solutions to enhance the comfort and wellbeing of residents within their homes, promote sustainable practices within the community and foster a sense of inclusion and cultural exchange between people. Student work included designs by Sarah Bradshaw (Living among us), Ioan Bulbucanu (Saltaire train station farmer's market), and Andrew Raine (Community & Arts Centre, Mabgate, Leeds).

Section 3: British Asian Space and Heritage

Dr. Xiang Ren, Jing Qiao, Hedy He, and Evelin Putri. Architectural designer: STUDIO CLOUD (studio-cloud.co.uk)

This display presented three architectural design research projects for three ordinary British Asian families in three northern cities: House M (built in Manchester in 2019), House L (built in Sheffield in 2020), and House Y (to be built in Rotherham in 2024). The drawings and models trace and translate the ways three British Asian families use and move around their domestic space and landscape in their everyday lives, narratives and imaginations. Together, they illustrate how British Asian heritage influenced the spatial design and use of homes in the multicultural north of England. This exhibition offers an architectural-anthropological insight into British Asian's complex socio-spatial realities, experiences and perspectives of their space, heritage, and broader inclusion into British society.

Dr. Yun Gao works as an academic and an architect. She is a Reader in Architecture, Subject Leader for Architecture and Built Environment, and Director of Sustainable Living Research Centre at the School of Arts and Humanities, University of Huddersfield. Her academic research explores design of socially responsible and environmentally sustainable built environment, and traditional and cultural changes reflected in architectural and urban development in developing countries. Yun is also a Chartered Architect of the Royal Institute of British Architects and Architects Registration Board Registered Architect. She is author of numerous refereed journal papers and edited book chapters, and a number of books including *Architecture of Dai Nationality in Yunnan, China and Creative Villages in SW China*. She has completed another co-authored book, entitled *The Temporality of Building: European and Chinese Perspectives on Architecture and Heritage*, to be published by Routledge in 2025. She has been a recipient of research grant awards such as a British Academy/Leverhulme Research Grant and AHRC grants and is the International Corresponding Editor for the *Journal of Architecture* (UK). She has held a Visiting Professorship at the Yunnan Arts University in China and was awarded the title of Distinguished Professor in Chongqing Jiaotong University.

Adrian Pitts is the Emeritus Professor of Sustainable Architecture in the School of Arts and Humanities at the University of Huddersfield. Adrian has taught and researched as a member of staff at Huddersfield and also the University of Sheffield and Sheffield Hallam University over a career spanning more than 30 years. He has

also held visiting positions at several other university internationally. He is author of well in excess of 140 published and refereed research papers and four books. His interests span all areas of teaching and researching themes of sustainability in the built environment and have involved practical/experimental research in real buildings/laboratory settings as well as simulated/theoretical studies. One of his key interests in recent years has been research into sustainability of buildings and built environments in places such as UK, Vietnam and China.

Dr. Ensiyeh Farrkhirad worked as the Research Fellow at the Sustainable Living Research Centre at the University of Huddersfield between 2022 and 2024. Ensiyeh's research subject focuses on nature-based solutions to reduce the negative consequences of the climate crisis. She was an international candidate, fully funded to attend the Department of Architecture of the University of Naples "Federico II," within the thematic areas of Sustainable Technologies. Her Ph.D. research was part of the PRIN 2015 Adaptive Design and technological innovation for the resilient regeneration of urban districts under a climate change regime project. In her Ph.D. thesis, research has been conducted to standardize the design process of vertical greening systems to improve efficiency and reduce errors, thereby enabling the widespread use of this kind of green system. She was visiting researcher at Hochschule Neubrandenburg/Germany.

Image credit

Image 1: House M, Studio Cloud. Image courtesy of authors.

Residencies

Green and Blue Residency
(supported by Cultures of Creative Health and Everybody Arts, Halifax)
Michaela Lesayova

This residency focused on green and blue spaces situated within the region of West Yorkshire, however with some exceptions of projects situated in South and North Yorkshire and Scotland. As an artist I felt they were valuable examples of good practice and established projects which can offer useful and conducive knowledge and cultural exchange for this residency.

I was encouraged to follow my own interests and pursue a desire to showcase an exciting and diverse selection of practices and projects working in the field of Creative Health and focused on green and blue spaces. I approached other artists and practitioners to gather a variety of creative practices including photography, creative writing, storytelling, coaching, flower arranging, cordage, weaving, herbalism and foraging amongst others. The organisations and projects I approached represent a selection of formal long-established arts organisations, community projects, permaculture farms, wild swimming sites, growing sites functioning as social enterprises or experimental sites for movement and dance.

As part of this residency and through my own creative input, I have collaborated with other artists and practitioners, which has also led to some co-creative workshops and activities, some of which will take place in green and blue sites. I was interested in not only understanding more about other artist's processes and creative methods but also observing and learning from my own creative responses as a recipient of other practitioner skills.

Creative pedagogy is a core embedded element and key component for every practitioner and project represented in this artistic research. This is an integral component to the body of work I have generated and is something I believe is crucial to pay attention to. From my own engagement and observations, I recognise my drive and the drives of the work of other artists to learn from and with the land, almost as a deep desire to unpack and find answers about the results of the traumas of industrialisation and subsequent post-industrial collapse in the UK.

Creative recovery also seems to be rooted in the practice of all the artists and organisations I have engaged with. The seemingly intuitive way of working is a response to something happening - an emergence. I personally feel that this emergence is fuelling the rising curiosity about recovery and our experience of the present moment. All of the artists and projects seem to be practising active learning, which if located in the green and blue spaces, is a way of re/connecting learners and service users to their local places, their cultures and histories. In reciprocal, almost magical ways, this is a way of re/connecting people to their bodies and themselves on deeper levels (emotional, somatic, spiritual).

Aside from the wellbeing and physical health aspects, engaging with green and blue spaces seems to give people their power back in different ways, whether this

is giving them words for what has been felt and lived, often for generations, or in providing avenues for how to process grief and loss which are very closely tied to the effects of industrialisation and land rights.

Michaela Lesayova is an interdisciplinary artist who operates at the intersection of ecology, wellbeing and neurodiversity. Her art practice focuses on examining closely and deeply her hyper-local environments and our creative connection with the land and plant world. She primarily works with natural colour and textiles, but often explores and experiments with natural resources as her primary mediums.

Everybody Arts is an artist-led, community arts organisation that provides opportunities for people to develop their artistic skills and exercise their creative potential in order to achieve positive change for people and communities.

Image credits

Image 1: Portrait of Dr Alison Smith, (Time to Think Coach and Facilitator), Yorkshire Dales, <https://www.earthandbloom.uk>

Image 2: Photos of rocks in the landscape - Bryony Good/ In a Land, Hebden Bridge (Photographer) <https://www.bryonygood.com/inaland>





Cultures of Creative Health residency

Lucy Wright

Traditions are good for us. This is my belief. Coming together with others, marking the passage of time, celebrating rites of passage—in our increasingly secular society, these things can be key factors in a life well lived.

As an artist and researcher who has spent more than ten years exploring lesser-known folk arts and customs—especially those led by women and other marginalised people—I'm aware this idea might be counterintuitive to many of us raised in the times and places that we were. Traditions are sometimes presented and enforced as a kind of straitjacket, tightly laced, to hold us down, keep us in our places. But traditions shouldn't be dogmatic or suffocating. They should be infinitely stretchy and expansive, like gentle creative prompts—springboards for imagination and connection, which invite us to join in, join together and make things our own.

In 2023 I created a new folk tradition, aimed at people who might otherwise be excluded from the spaces of English folk arts. *Dusking* is a virtual, participatory performance project designed as the counterpart to the morris dancing that takes place on 1 May each year, to welcome the summer. Cognisant that no comparable tradition exists to mark the darker half of the year—and the parallel, equal gifts of rest, reflection and replenishment they can offer—I invited people to join me, wherever in the world they might be, in performing a short 'hedge morris dance' (another invented term which I use to describe morris outside of an established group or tradition) at sundown on 31 October.

Studies suggest that SAD affects approximately 3% of the population (BBC Scotland, no date), and 10-20% of people with depression (Medline Plus, no date), demonstrating the need for new ways to approach and conceive of the shorter, darker days. Brief instructions were provided for those who wanted them, but others pogo-ed, pole danced and vogued their way into the winter months in a gamut of home-made costumes. Some participants created beautifully stage-managed and choreographed performances which they captured on film. Others waved a couple of tea towels in their kitchen and took a photo on their mobile. More than 100 people shared their experiences and responses on social media. Take-up was especially high from people with disabilities and chronic illnesses who are often overlooked in community celebrations of all kinds.

During my residency at the Huddersfield of University, I undertook a period of intensive R+D for *Dusking* 2024, including creating content to support others who would like to take part and the devising of my own *Dusking* performance to share.

I worked with deaf performer and artist, Kylie Darling to translate the 13th century song 'Mirie it is'—one of the two earliest secular songs in the English language, which talks about the onset of winter—into British Sign Language and we then explored incorporating the signs into a dance, with costumes sourced from local charity shops and market stalls.

At the end of the residency, filmmaker Jonny Randall visited the photographic studios to create a video piece, which will be shared as my own contribution to this new tradition on 31 October.

Lucy Wright is an artist based in Leeds, UK. Her practice sits at the intersection of folklore and activism, often using as source material her 10+ years of cited research into lesser-known contemporary and female-led folk customs.

www.lucywright.art



Image credit

Image 1: Lucy Wright, Dusking, 2024. Photograph by Leonie Freeman.

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Rassam: Customs, Ceremonies & Celebrations

Hardeep Singh Sahota

Rassam is an exploration of dance, movement, and cultural traditions found within the South Asian diaspora. Dance forms, such as Bhangra and Giddha, have a rich history, and are celebrated by communities across the world. They have many layers of meaning and can be found at the heart of various joyous occasions. Weddings are a notable celebration that gives the opportunity to explore these dance practices and traditions, otherwise known as 'Rassams'.

Bhangra and Giddha have a rich cultural tradition and many layers of meanings, story-telling and folk-history. Communities from the South Asian diaspora living here in Kirklees are now in their third and fourth generations. These dances are still being celebrated with gusto, although, the wealth of knowledge and deeper meanings of the movements and songs are being lost to time. Through oral-history interviews from leading experts around the world, this project has delved into various Rassams, (cultural traditions) that are shown through examples such as dance, poetry, songs, textiles and body art such as Henna.

The Rassam project has also utilised the prism of mental health and well-being to give new perspectives to these cultural traditions and dances.

Cases such as 'Mehndi' or 'Henna' were explored and how its application to the body reflects the mystical link between henna and human culture since ancient times. There has always been a strong association between the use of henna, fertility and marriage celebrations in many of the countries around the world. There is evidence of the continuous henna use for celebrations such as marriage in the eastern mediterranean since the Bronze Age.

Henna has observable benefits to humans and has properties that deter and relieve human discomfort from fungal infections of the skin, and sunburn; henna also has an analgesic and anti-inflammatory effects on skin. This 'cooling' effect is what makes it a perfect paste to apply to the hands and feet of a bride-to-be to calm her nerves. The traditions of henna used for wellness is now being explored by academics and medical science. Increasing investigation by researchers into the uses of henna, and its therapeutic properties for skin care, and its diverse biological, potent, anticancer properties are now taking place.

The Rassam project was exhibited in the summer of 2024 at 'Sovereign Design House' and at the Lawrence Batley Theatre curated by Hardeep Singh Sahota. Photography was by John Slemensek-Thorne of Studio Bokehgo.

With Kind Support from: Arts Council England, Lawrence Batley Theatre, University of Huddersfield, Studio Bokehgo and Evoke Kirklees.



Hardeep Singh Sahota is a multidisciplinary artist, who has been exploring his identity and heritage with an array of projects over the last two decades. Much of his research has been undertaken in the field of Bhangra, and this was also the focus of his Masters-by-Research degree. During this process, as with any body of research, it opened new lines of enquiries which he wanted to explore further.

His academic and creative outputs aim to re-address an unbalance within the perceived hierarchy of traditional folk, contemporary and classical dance. His acclaimed project [The Bhangra Lexicon](#) compiled in 2021, was the world's first 'visual dictionary' of Bhangra movements.

Image credit

Image 1: Photograph from Rassam, Hardeep Singh Sahota. Photograph by John Slemensk- Thorne.

Knowledge and Cultural Exchange projects

Evidencing Creative Health: a Partnership Journey Between Creative Wakefield and the University of Huddersfield

Dr Steven Michael and Dr Rowan Bailey

Context

Partnerships between health and social care and the creative sector have gained greater interest and political support over recent years. *Creative Health: The Arts for Health and Wellbeing* (2017), sets out a framework to support the development of Creative Health. More recently, at a West Yorkshire level, the Mayor of West Yorkshire has voiced her strong support for such approaches as has the Chief Executive of the Integrated Care Board, both advocating for West Yorkshire to become a leading light nationally in this area.

Creative Wakefield is currently West Yorkshire's only cultural compact. Supported by the Department of Culture, Media and Sport, Arts Council England and Wakefield Council, Creative Wakefield seeks to harness the potential of the creative sector, working in partnership with a range of institutions and stakeholders to enhance the lives of people living in the district, including supporting social and economic regeneration. Over the past year the compact has identified three priority areas: Creative Digital, Public Art and Creative Health. All are inter-related, but each require a focused and targeted strategic approach. This piece of writing concentrates on the work of Creative Wakefield relating to Creative Health.

An exciting partnership between Creative Wakefield and the University of Huddersfield has been forged seeking to develop a strong evidence base for Creative Health with a view to supporting long term sustainability. This partnership seeks to support the approach advocated by West Yorkshire Combined Authority and the Integrated Care Board for West Yorkshire, providing a key pilot area and point of reference. The approach taken will be of particular interest to those seeking to either research such innovation or to develop this in practice.

There are significant creative assets existing in Wakefield, from the prestigious Yorkshire Sculpture Park and the Hepworth Wakefield to smaller but highly effective community based creative organisations, operating at scale across the district. The relationship between health and creativity has been long established through initiatives such as Creative Minds, an innovation involving partnerships between the NHS and community based creative providers. The full potential, however, has arguably not been fully realised to the extent that creative health has become established as part of a recognised mainstream offer of service.

Such innovation in the area of Creative Health is reflective of an increasingly urgent need for entrepreneurial approaches to public sector delivery in the face of increasing demand and societal complexity (Liddle and McElwee, 2019). Following well over a decade of austerity and associated reduction in public service funding, the need to act entrepreneurially has never been greater. As place- based strategies emerge in a new political landscape, new opportunities are manifesting in such spaces, where Creative Health innovation can play a major role.

Developing a Partnership Between Creative Wakefield and the University of Huddersfield

As the work of Creative Wakefield progressed in the area of Creative Health, the importance of developing a sound evidence base for future development was identified as a key consideration. The University of Huddersfield, through its Centre for Cultural Ecologies in Art, Design and Architecture, has undertaken significant work in recent times in relation to community health innovation through its programme Cultures of Creative Health (Centre for Cultural Ecologies in Art, Design and Architecture, n.d.). This presented an opportunity to create genuine synergies between the two parties resulting in an agreement to formalise the partnership in early 2024. This led to a co-designed project of proposed research activities, supported by funding from Creative Wakefield and Impact Accelerator funding (AHRC) from the University of Huddersfield.

A first milestone in the new partnership was to co-commission a piece of work seeking to map the current position relating to Creative Health across the Wakefield District. Given the scale of this task and to make the commission workable, it was necessary to undertake some initial scoping in terms of Creative Health activity in the Wakefield District.

The first step was to identify links between key partners and organisations now leading the development of Creative Health innovation. The partners selected for the case study were identified as being a good starting sample for the proposed co-commission. All have a strong commitment to supporting health and wellbeing and have been active in creating opportunities for people from local communities to participate in a range of creative activities. In essence, the organisations identified provide a portal into the wider Creative Health networks developing within the district. A brief description of the detected cases are outlined below:

Yorkshire Sculpture Park (YSP)

Formed in 1977, Yorkshire Sculpture Park (YSP) is the largest sculpture park of its kind in Europe and is both an independent charitable trust and registered museum. Situated in the 500 acre, 18th century Bretton Hall estate, it is host to a collection of contemporary sculptures including work by Barbara Hepworth and Henry Moore, as well as important pieces by contemporary artists including Damien Hirst. In seeking to grant, nurture and sustain interest and debate around contemporary art and sculpture, it mounts a year-round temporary exhibition programme and seeks to reach out and enable open access to art, including access for those whose participation in art is not habitual or familiar. This has included great initiatives with a number of community groups and institutions, including the NHS. YSP is placing greater emphasis on providing wellbeing through the process of art and was very kindly host to a recent Creative Health event alongside Creative Wakefield and the University of Huddersfield.

The Hepworth Wakefield

The Hepworth Wakefield opened in 2011 to house Wakefield's art collection and to continue the ambitious and forward-thinking legacy of Wakefield Art Gallery,

as well as hosting major works by Barbara Hepworth and Henry Moore, both born in the district. The gallery exhibits work of other modern British makers including: Ben Nicholson, Eileen Agar, Jacob Epstein and Graham Sutherland. In addition to hosting a series of contemporary exhibitions, the Hepworth Wakefield Garden, designed by Tom Stuart-Smith provides a new open space for the local community and visitors to the district. The Hepworth is committed to working with communities and families and supports Creative Health approaches with key sections of the community including children and young people.

Creative Minds

Creative Minds is an innovation which has been supported and encouraged by its host, South West Yorkshire Partnership NHS Foundation Trust. Launched in November 2011, it has enabled over 500 creative projects and its sports events which integrate creativity with mainstream health and wellbeing practice. Since its inception Creative Minds has seen over 6,500 people per year benefitting from the work. Partnership working with local creative practices is central to the approach, seeing around 130 formal partner organisations working across the localities of Barnsley, Calderdale, Kirklees and Wakefield. In 2015 Creative Minds was the winner of the Health Service Journal, Department of Health sponsored Award for Compassionate Care. Creative Minds is Creative Wakefield's NHS partner.

Theatre Royal Wakefield

Built in 1894 and designed by the famous Frank Matcham, The Theatre Royal Wakefield hosts a varied programme of produced and touring work. In addition, it provides a busy learning and participation programme, working regularly with young people, socially isolated older people, refugees and asylum seekers and adults working to improve their mental wellbeing.

Spectrum People

Founded as a registered charity in 2013, serving the population of the Wakefield district, Spectrum People works to embrace the life experience of those finding themselves vulnerable, provides a complementary offer to mainstream provision and seeks to expand community regeneration and creation of social value. Key activities include Appletree Community Garden, providing a range of projects and resources and specific Creative Health projects, including: art therapy, drama, dance, music, poetry and creative activities. The charity has gained national recognition, for example, by achieving the Green Flag Community Award for the work of Appletree Community Garden and winning the 2022 BBC Radio 4 All in the Mind Group Award.

The Art House

The Art House is a registered charity established in 1994 by disabled and non-disabled artists who were trailblazers in creating a space for creatives to work alongside one another without any segregation or discrimination. In 2008 The Art House moved into its current premises, and in 2013 extended into the Grade II listed library next door. The building houses artists' studios, accommodation, meeting rooms, exhibition spaces and specialist Maker Spaces for ceramics,

printmaking and photography. The Art House hosts a varied programme of exhibitions and delivers a wide range of projects aiming to connect to the community including the Re-Emerge Arts and Health programme, the UK's first Studio of Sanctuary supporting those seeking asylum and refuge and a Gallery of Sanctuary, awarded in 2023.

One to One Development Trust

One to One Development Trust has a 30-year history of producing groundbreaking films and digital work. An arts charity using digital media to work with communities, they have gained recognition within the Wakefield district, the wider region and nationally to this innovative work. Current projects in the Creative Health space include Powering Up, where One to One Development are working with young people and doctors from around the UK to radically reorganise health and the delivery of healthcare.

National Coal Mining Museum (NCMM)

Located at Caphouse Colliery within the Wakefield district, the Yorkshire Mining Museum opened in 1988 and in 1995 was granted national status. The museum seeks to advance the education of the public in the history of mining in England. Its rich source of material, linked to its industrial heritage, provides a significant educational and creative resource for the Wakefield district. The ability for the community to understand its heritage and the rich cultural and creative assets associated with this, provides the NCMM with a unique opportunity to contribute to the Creative Health agenda.

Mental Health Museum

The Mental Health Museum is the successor organisation to the Stephen G Beaumont Museum founded in 1974 at the Stanley Royd Hospital in Wakefield, which focused on the history of the hospital which opened as the West Yorkshire Pauper Lunatic Asylum in 1818. In 1995, the museum moved to Fieldhead Hospital in Wakefield in 2014, and following an exercise conducted with Leeds University, "Change Lab", South West Yorkshire Partnership NHS Foundation Trust reimaged the museum resulting in the opening of the Mental Health Museum. The museum continues to work with mental health service users, staff and the wider community to challenge, shape and develop an understanding of mental health histories. In doing so, it charts the development of contemporary and innovative approaches to mental health care, including the role community care plays in mental health recovery and wellbeing.

Wakefield Museums

Achieving and celebrating the rich history of the district, Wakefield Museums provide a valuable resource enabling communities and emerging generations to appreciate and participate in the maintenance and development of understanding the district's history, heritage and people. This offers significant potential in terms of supporting wellbeing, for example, in younger people through participation in schools and educational programmes.

Our co-commission project, fully titled: ‘The Co-Commission – Creative Health in Wakefield/Evidence of Impact’ was designed to specifically understand the evidence of impact of Wakefield’s creative sector in improving the quality of people’s lives and centred around the 10 organisations discussed above. A decision was taken to put the commission to open tender with initial funding being identified by Creative Wakefield/Wakefield Council and then matched by the University of Huddersfield. The objective of the work and brief for the commission was to impact Creative Health work in each of the cases, gather evidence of impact and establish a baseline for future measurement.

The extended outputs were identified as follows:

- A summary report of combined impact, including methodology, analysis, conclusion, recommendations and how this aligns to relevant research.
- Increase revenue e.g. by accessing large-scale funding and dedicated posts.
- Influence policy development e.g. regional/central government (creative/health sectors).
- Establish Wakefield as a place of national excellence in this field.

Following completion of the tender process, a successful candidate was appointed, a consultant with significant experience and skill in working on projects in the creative sector with a specific focus on community engagement and impact. Timescales for the work were indicated as being from May to November/December 2024.

A second milestone for the partnership was to hold an event hosted by Yorkshire Sculpture Park in September 2024 on the theme of Creative Health. This afforded the opportunity to highlight the nature and work of the partnership between Creative Wakefield and the University of Huddersfield. The purpose and vision of Creative Wakefield was articulated and specific examples presented regarding Creative Health work. Similarly, the university described the key aspects of work relating to the Cultures of Creative Health programme, including links to the new National Health Innovation Campus. The first draft of findings of the co-commissioned work was also presented. This provided a platform for group discussion among key invited guests regarding the future potential for innovation and partnership in Creative Health.

Some of the initial reflections on Creative Health provision in Wakefield were generated in response to a set of core questions about working in partnership and collaboration to deliver new experimental forms of creative health provision. This included sharing examples of green and blue creative health offers that might be mobilised, ways in which culture in Wakefield might better enable capabilities in people’s lives (including health/vitality, work/learning, relationship and community building), and how we might support more participation in creative health at hyperlocal levels, in neighbourhoods and through community engagement. The event in itself was important in adding to the richness of debate and strengthening of the evidence base.

Next Steps

Moving forward, the partnership will be seeking to understand how, through the work and outcomes of the co-commissioned study, opportunities for sustainable innovation can be realised. This is arguably reflective of the fundamental challenges facing Public Sector Entrepreneurship. As Liddle and McElwee note: 'It is vital to understand how communities and constellations of interest now occupy the spaces that government traditionally occupied and how entrepreneurial they can be.' (Liddle and McElwee, 2019, p.1319).

As the first phase of the co-commissioned study concludes, opportunities for further reflection by key stakeholders are significant. An event is planned for the autumn/early winter of 2024 to assess the findings of the full report. In order to do so, key contributors will need to assess the findings and seek to identify further opportunities for innovation, system improvement and impact.

It is hoped that establishing a stronger baseline of evidence will provide further opportunity to progress a second phase of partnership working which involves targeted postgraduate and doctoral research placements where impact can be greatest. With a view to sustaining development in the next phase, a large-scale Creative Health Partnership Summit is planned for Spring 2025. Hence, the intent is to build on the findings of the first phase of research, to deepen understanding of how the greatest socio-cultural impact can be made, learn from one another to seek to understand how innovative approaches can be further adopted, spread and diffused into local neighbourhoods and communities. This, in turn, can feed into evidence gathering and research across the wider West Yorkshire platform.

Through the partnership between Creative Wakefield and the University of Huddersfield described here, it is believed a significant contribution can be made not only to the evidence base concerning creative health, but to the wider process of informing such innovation at scale as part of the wider strategic development in this important area.

We would like to thank Creative Wakefield, Ros Hill and network members and partners for their contributions to the field of Creative Health.

Dr Steven Michael is Independent Chair of Creative Wakefield and also Chair of Spectrum People, a Wakefield based charity and Imroc, a national/international mental health recovery charity. He is passionate about finding ways to sustain creative health innovation in complex systems through interagency collaboration and research.

Dr Rowan Bailey is a Reader in Cultural Theory and Practice with an interest in place-based thinking and making in the public realm. This includes collaborative partnership working with different creative communities. She is also Director of the Centre for Cultural Ecologies in Art, Design and Architecture, University of Huddersfield and Principal Investigator of the Creative Health Hub for West Yorkshire.



Image credit

Image 1: Drawing at the Appletree Community Garden (Spectrum People).
Photograph by Laura Mateescu.

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Men in Sheds – Craft for Wellbeing Dr Charlotte Goldthorpe

'Involvement within the shed gives a purpose and sense of belonging missing after retirement'. (Participant, 2024)

Men in Sheds is a charity organisation which provides opportunities for men and women to 'connect, converse, and create' (Home - UK Men's Sheds Association, 2018). The community at my local West Yorkshire branch is made up of mostly retired local people. The shed is open on Tuesday, Thursday and Saturday for members to socialise and make items to sell at local craft fairs and events. They also work with other local charities and initiatives to provide making services, such as bird boxes for local parks and stained-glass decorations. Both help to raise funds for the running costs of the shed. The shed was started in October 2019 and officially opened in 2020, which frustratingly found itself closed a month later due to the global pandemic. Following the re-opening, I was asked to teach two basic leatherwork workshops for an open day which aimed to encourage people to become new members of the shed and in turn help to combat community loneliness. Since my initial workshop, the shed has almost doubled in size and now consists of three work areas that house wood, upholstery and glass work areas.

Being a regular visitor to the shed in the following years I proposed a further series of leather workshops over a four-week period in June and July 2024. These workshops were designed for shed members and aimed to develop relationships with participants to understand the significance of the Men in Sheds community and how creative activities support their physical and mental health. When asked to describe what members were looking for when they joined Men in Sheds answers such as *'companionship and to learn new skills'* (Participant, 2024) were prevalent.

The process of art (and craft) as therapy, as well as allowing for the unburdening of emotions, leads to the creation of new meaning and redirection in vulnerable moments (Buser, Buser & Gladding, 2005, p. 180). Engaging conversations during the making process developed an understanding of how community crafting is a lifeline to support individuals in need of support and friendship, but also gives retired individuals *'a sense of wellbeing', 'increased confidence to try new things'* and *'a reason to get up in the morning'* (Participant, 2024).

Six participants, all retired and over 60 signed up for the four-week workshop. Workshops are an effective method for engaging participants and facilitating social interactions and as one participant described it they are *'easy going and a relaxed atmosphere with skilled advice'* (Participant 2024).

The first week saw participants start learning the leather working tools, each being named, shown and passed around. We were positioned around a table, with me at the head then the participants were two per side. As this was happening phrases such as "spit and polish" were used, and then reflected on, with the participants talking about past jobs in the fire service and cleaning boots. The first task was using

the decorative punches to understand designs by hammering the patterns into a piece of leather. Starting with a basic, yet fun and easily gratifying, task allowed the participants to engage in upbeat conversation. The conversation allowed stories to unfold of past jobs and relationships between the pairs of participants started to evolve. Where one participant struggled with the weight of the hammer another helped. Some of the participants had attended the session with me in February 2022 so had experience of stitching. I recapped how to punch holes, draw lines with dividers and thread two needles for saddle stitch. Once stitching was underway, the workshop was notably quieter with concentration. When participants found their rhythm of stitching, they then began to chat again.

Making a belt to tie skills together proved to be a fun and engaging activity. Making the belt consisted of fitting a buckle, stitching the belt keep and buckle in place and polishing the leather edges. Some participants struggled with threading needles and instead of always asking me, they started to ask each other. Participants agreed that workshops are an effective method for engaging and facilitating social interactions stating it's '*easier in a structured environment*' and where people have a shared interest, they can get support from others if they struggle. Concentration was noticeable at the beginning with less conversation, until people again found their rhythm. This is in keeping with both Richard Sennett's thinking of how crafts are learned and mastered and Walter Benjamin's idea of when makers get into the rhythm of work, stories flow and are retold and suggests that workers can become 'self-forgetful' as they are embodied in the making experience (Benjamin, 1999, p. 91).

The afternoon of week one saw participants finishing the belt and feeling proud at what they had accomplished. This showed what could be accomplished and the experience of making something outweighed the experience of buying a finished product. Both craftsmen, Peter Korn and Richard Sennett express this same feeling of wonder that making can rouse; the idea of filling a space with 'something where before there was nothing' (Sennett, 2008, p. 70). With the knowledge gained nearing the end of the session, confidence had grown and discussions were held around if belts would be a viable product to make and sell alongside the other items created at the shed. It was heartwarming to see how quickly they had taken to leather work and that it could also benefit the shed and help attract new members.

Homework was to start to think of a larger project for the following week. Five participants opted to make a bag, two of these designed them themselves. One ended up being titled "The Funeral bag", which she designed with handles and a clasp that she could use for funerals as they were becoming 'more frequent'. This caused a few laughs and was an instant conversation starter. Other members designed 'man bags' with contrasting stitching to 'match the sofa' in one case. All members developed their unique style as the workshops went on. One participant became so engrossed with leather stitching that she wanted to take it home. She had recently lost her husband and so wanted to carry on developing her newfound skill to fill up her evenings. She frequently updated me on her progress through WhatsApp pictures and asked for advice on certain elements.

She stated the importance of friendship and support from other members of the shed. She went on to create a second bag for her daughter that allowed her to deepen her knowledge of leatherwork and start developing her own way of working.

Over the four weeks at the shed the lunch breaks were where everyone came together round the big table to eat. Discussions involved funny experiences, how people had met their wives and then what was happening at the shed the following week. These conversations on a Saturday gave members purpose and structure for the rest of the week, a job role as such, with tasks such as applying for grant funding, collecting donations such as wood or tools and arranging events: *'Involvement within the shed gives a purpose and sense of belonging missing after retirement'* (Participant 2024).

Through the process of learning new skills and making artefacts, participants found a cathartic way to connect and share stories. Glenn Adamson sums up the connection between making, learning and the self perfectly; as you shape the material, it shapes you right back. You are learning the process the whole time that you are engaged in it (Adamson, 2018, p. 28). According to Sennett (2008, p. 53), 'the workshop is the craftsman's home' and members of the Men in Sheds community have built this through their dedication. The workshops were a great success in developing the idea of crafting together and also encouraged new ideas to develop and flourish. I finished my series of workshops working at a family fun day on the Men in Sheds stall. We offered a leather keyring decoration opportunity to encourage people to find out more about the shed and become members.

This collaboration has shown the importance of learning new skills at any age and the benefit it can have when delivered within a community setting. The members now hope to find further funding for leather work to continue at the shed and develop products that they can sell as an addition to their inventory. Most importantly, it has shown how craft brings people together and can be used as a tool to combat loneliness and improve wellbeing.

Dr Charlotte Goldthorpe is a Senior Lecturer in Fashion and an ECR at the University of Huddersfield, UK. She is a practice-based researcher in the fields of fetish, craft, and social history, who uses a mixed method approach.

Image credit

Image 1: Leather workshop with Men in Sheds group. Image courtesy of the author.

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Growing Art for Good: An Exploration into Creative Health within Wakefield

Dr Lydia Czolacz, Guy McKelvey, Patrick McEntaggart, Bridget Gill, Diane Saxon and Emma Spencer

Creative health involves creative approaches and activities that promote positive health and wellbeing such as making, visual arts, crafting, performing, or simply being in nature, and green and blue spaces to promote good health and manage long-term conditions. According to the National Centre for Creative Health (n.d) health is considered in a holistic sense, 'a state of complete physical, mental and social wellbeing' thus enhancing overall quality of life and a sense of meaning and purpose. This research highlights Wakefield as a primary location where 70% of the district is designated as a green space (Wakefield Council, n.d) and creative health is adopted through various communities to promote positive physical, mental and social wellbeing.

This piece of writing collates the findings of a research project, funded by Cultures of Creative Health, collaborating with three sites in Wakefield: Appletree Community Garden (run by Spectrum People), Yorkshire Sculpture Park and The Art House. The sites, though differing in their approaches, are linked by the belief in the benefits of Creativity Health, working in parallel to deliver benefits across all levels of culture. Our project focuses on primary research gathered through qualitative observations and interviews. We discuss public engagements with the three locations as case studies. Utilising Wakefield Council's The State of the District Report 2024, the case studies comment on their impact within the economic, educative and health sectors. We also highlight the benefits of bringing creative health arts to wellbeing practices through a plethora of activities such as workshops and gardening. By linking art practice with green spaces our research comments on the impact of forming creative and social communities within the wide district of Wakefield.

We chose to focus on three key sites in Wakefield that promote wellbeing through the arts and green spaces; Appletree Community Garden, The Art House and Yorkshire Sculpture Park. As a year-long research project facilitating knowledge and cultural exchanges we considered the impact on users, employees and surrounding areas. Each place of interest recalls our immersive experiences of observing and talking to members at each site.

1. Appletree Community Garden

Appletree Garden was created by Wakefield Council and Spectrum People with the intention of improving health and wellbeing for people in Wakefield, especially targeted at marginalised and community groups and young people through gardening focused creative experiences (UNA, 2021; Appletree Allotment and Community Garden, 2020). It is located in Agbrigg, a residential area two miles from Wakefield city centre. The gardens and allotment, the size of a small football pitch; a large polytunnel, a cabin office, a summerhouse for one to ones and a community meeting area are key structures within the space. The rest of the space is given over

to raised beds, vegetable patches, planted herbs, trees of varying types (including apples) and seating areas, all visited by free range, rescue chickens.

A qualitative deductive research approach was undertaken to gain insights in how Appletree Community Garden operates and if and how this was beneficial to the creative health of the residents and community of Wakefield and district. Yin (2015) suggests that there are only four key areas of data collection within qualitative research. These are interviewing, observing, collecting, examining, and feeling. We have worked with all these approaches within this study.



We visited the community garden on a typical spring day in March where the first shoots were appearing interspersed with rain showers. This added to our experience of the site. Four diverse groups of users of the garden were observed and interviewed as we interacted with the garden. Then four observations and interviews took place with a paid employee at the site, a volunteer, two art therapists running classes and a local women's group consisting of ten members that day. Each interview lasted for a minimum of ten minutes through to forty minutes and allowed for a free-flowing discussion from the participants.

Each of the participants had a clear story to tell of the benefits of creativity in outdoor spaces, from building relationships between mother and daughter, dealing with grief, enjoying a new addition to the family and the most poignant from a volunteer who previously suffered depressive suicidal thoughts and believes the creativity and space of Appletree were key factors in helping him positively refocus his life. We also asked each participant to say the words or phrases that summed up Creative Health and Appletree for them, as listed below:

Key Phrases: *Community, environment, purpose, friends, physical, talk, confidence, focus, my happy place, time to breathe, sense of belonging and community, peacefulness, calmness, contentment, therapeutic, enjoyable, being in the moment, connect back to nature, mindfulness and belonging.*

2. The Art House

The Art House is a vibrant visual arts centre in the heart of Wakefield. It is a registered charity founded 30 years ago by disabled and non-disabled artists to promote 'equality of access and higher diversity in contemporary visual arts practice' (The Art House, u.d). The organisation's initial aim was achieved in 2008 when The Art House opened its building, exemplary in terms of physical accessibility, offering artists' studios, accommodation, meeting rooms and community spaces. Over the years, The Art House has been successful in securing funding, especially in April 2012 when it was recognised by Arts Council England as a National Portfolio Organisation and in September 2013 when the European Regional Development Fund facilitated an extension of the premises into the Grade II Listed library next-door, becoming home to more artists' studios and other community spaces. Today, The Art House actively engages artists and audiences through a plethora of creative opportunities including artist-led workshops, exhibitions, artist residencies and in their specialist Maker Spaces - print studio, ceramics studio and a darkroom.



Like Appletree Gardens, a qualitative deductive research approach was undertaken to analyse the ways in which The Art House further promotes a sense of community and wellbeing through the arts. Furthering Yin's (2015) key areas of data collection within qualitative research, we observed a working day within The Art House and were given a tour of the central coffee house, the gallery, the impressive range of Makers Spaces, the converted library-to-artist's-studios spaces, flexible hireable space and the well-maintained garden terrace. Interviews were conducted with the curator, the arts and health programme manager, as well as two participants of the Maternal Journal programme that focuses on perinatal mental health through creative journaling. Maternal Journal is a global movement founded in 2017 by a London-based artist and midwife after being struck by how many people had nowhere to put their new emotions and experiences (Maternal Journal, n.d.). The researchers were also invited to observe members in the Studio of Sanctuary, a programme that brings together asylum seekers and refugees with the wider Wakefield population to create art together and learn about each other.

In summary, wellbeing is at the forefront of The Art House. Participants shared personal stories of the Maternal Journal programme, some even coming early before the workshop starts to sit in the coffee house, or the garden terrace in warmer months, to spend time in the building. The environment offers a sense of calm, allowing members to switch off, bringing nostalgic memories of practicing arts at school. The participants stated they never would have seen themselves returning to art practices if it wasn't for the group. Learning about journaling, as well as ceramics and printing in a safe space allows the freedom to express without judgement. This connection has extended the support group to a privately organised social media group where members keep in contact throughout the week. Other interviews revealed concerns over funding in the arts that keeps groups like these afloat whilst also considering the positive working practices at The Art House, not only promoting wellbeing through art in the specific groups, but also by its employees.



Key Phrases: Community, friends, support network, express, learn, understand, calm, talk, confidence, mindfulness, togetherness, crazy, quirky, supportive, organic, friendship, group, therapeutic, creative.

3. Yorkshire Sculpture Park

Yorkshire Sculpture Park (YSP) is a unique site and museum dedicated to contemporary art and sculpture, the largest of its kind in Europe. Opened in 1977 the site consists of 500 acres of Yorkshire countryside which was once part of the historic Bretton estate, and now includes indoor galleries and amenities. The park is experiential, art inhabits the landscape and nature inhabits art. People and animals alike wander amongst the sculptures. Across the landscape YSP displays works by Henry Moore and Barbra Hepworth, alongside a diverse programme of exhibitions that showcases important national and international artists. Interconnected with the exhibitions are events and activities through which YSP engages audiences with art and sculpture, in particular audiences it describes as those 'for whom art participation is not habitual or familiar' (YSP, n.d).

As with the other sites explored in this research, a qualitative deductive approach was used. Our research sought to establish a sense of how everyday activities and engagements within YSP positioned participants with both art and wellbeing/health. We focused on the importance of 'being there' and sought to experience what participants were experiencing. This approach is in the spirit of what Sizesmith, Boneham and Goldring describe as being key to negotiating trust and access with participants when conducting such studies where there is a need to '...get as close as possible to people's lived experience' (Sizesmith, Boneham and Goldring, 2003). The YSP activity chosen for the focus of the field activity was a facilitated adult and baby group entitled 'Sculpture Baby'. These kinds of groups have been shown (Hanna et al., 2002; Baydar, et al., 2003; Hickey et al., 2020) to have positive impacts on the lives of participants. Moreover, it is an example of how institutions in the arts can use art to give such groups a unique experience. In this case babies are treated as cultural participants, the activity is an acknowledgement that they have their own preferences and experiences in relation to art (Erdman et al., 2022; Danko-McGhee, 2016).

We uncovered that participants in 'Sculpture Baby' consistently described the session as a chance to break out of the everyday settings that can often be filled with demands on their attention. For them it was a chance to 'be present', 'slow down' and 'be in the moment' with their baby. There was a strong sense that this presentness was coupled with a sense of community and the social; what might start in the group continued beyond to other settings and times, where friendships were fostered. This sense of connectedness was underpinned by comments from the facilitator who described one of the aims as a sense of 'authentic connection' and that participants were being asked to be 'brave' since the group happens in an open public space. Key terms and words below are drawn from the research to summarise and provide an essence of the research.

Key Phrases: *Empowerment, meaning, connection, spontaneity, resetting, energising, reminder of who I am, slowing down, being in the moment, fully be here, socialise, community, get away from pressure, explore, bonding, wholesome, nostalgia, question things, see things that are different.*

Conclusion

The benefits from the work, community and developments these organisations are involved with, offer both physical and mental wellbeing to participants. This provides visible and hidden long-term benefits even though the services are pressured with the severe cuts to arts and Creative Health funding nationally and locally. Education and health are closely linked, and each site offers a unique experience yet shares a very important community sentiment. Appletree Community Garden educates how gardening in a green space can foster new friendships and bring a sense of togetherness through pride of achievement. The Art House promotes wellbeing by encouraging attendees to try new practices through different workshops catered to specific groups. Furthermore, Sculpture Baby combines the vast green area of

Yorkshire Sculpture Park with exhibition spaces, promoting arts and healing through holistic practice and community engagement.

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Image credits

Image 1: Apple Tree Community Garden. Photograph by Laura Mateescu.

Image 2: Maternal Journal session at The Art House. Photograph by Laura Mateescu.

Image 3: Sculpture Baby session at Yorkshire Sculpture Park. Photograph by Laura Mateescu.

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Co-Producing Knowledge and Cultural Exchange Projects with Support to Recovery (S2R)

Dr Janine Sykes, Charlotte Dobson and Dan Commons

Introduction

Support to Recovery (S2R) is an independent mental health and wellbeing charity, providing support across Kirklees through social wellness opportunities. The charity is part of the consortium developed through the Cultures of Creative Health Programme, helping to address health inequalities in West Yorkshire.

Starting from a position of learning, photographers Charlotte Dobson, Dan Commons and (Curator) Dr Janine Sykes, together with Jason Kerry (Manager, The Great Outdoors Project, S2R) and Project Workers, produced two Creative Health Projects with participating members of the charity. The aim of the projects was to work creatively, alongside members through the production of a body of work (photographs) and by doing so, evaluate how these cultural and creative activities impact on their wellbeing. This written piece summarises the approaches used in two Creative Health activities, along with the knowledge and cultural exchanges that took place between January-July 2024.

The projects took place in Dewsbury and Huddersfield, located in Kirklees, which is currently an area of deprivation, and such conditions have proven to have detrimental effects on the health and wellbeing of the people that live there. It is clear however, from just a brief survey of the architecture and history of the towns, that this situation of decline has not always been the case. By exploring and sharing historical narratives, undertaking walks, creating photographs, and studying nature we may experience shifts in how we collectively perceive places and ourselves. These latter thoughts were tested in two Creative Health projects *A River Walk for Creative Health in Dewsbury* and *S2R Activity at Birkby and Fartown Library* documented and critically discussed below.

Project 1: A River Walk for Creative Health

Dr Janine Sykes and Charlotte Dobson

This Creative Health activity was a place-based research project, co-produced with a group of S2R members and Waheeda Kothdiwala (S2R Project Worker). The walk idea involving storytelling, and a mindfulness photography workshop was conceived collaboratively with S2R staff during a series of meetings. The researchers refined the activities through joining S2R as members and taking part in the S2R programme, enabling an exchange of knowledge, and well-being objectives, using the WHO 5 scale. This section describes the aim, methods and what happened in project 1. After which, a discussion of the findings including the knowledge exchanges that occurred through working with S2R are summarised in a joint conclusion with project 2.

The aim of the 'Creative Health River Walk' project was to find out if place-based storytelling together with mindfulness photography could enhance a communal

walking experience and impact positively on mental wellbeing. To gauge the effectiveness of the creative intervention (within an already established healthy activity of a weekly walk) a mixed-methods approach using action research, autoethnography (participant observation) and focus group discussion was selected. Although the scope of the research findings is narrow and limited to a particular context (with no control group) the findings resonate with relevant literature and theories that came to the fore through our exchanges.

Starting at *Create Space* in Brook Street Huddersfield (S2R, HQ) Kerry explained that the co-productive approach is used by the charity to design programmed activities 'with' members. Many S2R activities are nature based, which resonates with the PhD research of Dobson, whose photography practice explores the healing characteristics of nature. One of the S2R weekly activities is a walk starting from Dewsbury Public Library, alongside the River Calder, and the Hebble and Calder Canal.

The Dewsbury activity was selected and a plan to work co-productively was forged. It was important for the researchers to be part of the group, so Dobson and Sykes attended several of the 'Friday Group' walks, from April to July 2024. Observations included noting the anecdotal stories, local and global topics of discussion, alongside nature watching. One story concerned the decline of Dewsbury town centre, another a humorous one about someone dropping their phone in the canal during one of their walks. Other members had helped to retrieve it by holding him by his trouser waistband to stop him falling in. This resonated with a historical story that Sykes had recently read about Patrick Brontë, who, during his Curacy in Dewsbury had dived into the river Calder to save a local boy who was struggling in the water. This led to the idea of sharing a Brontë narrative with the group, as much of the interpretation found by the river and canal in Dewsbury is about (male) 'local heroes', so the storytelling activity was to include Charlotte and Anne Brontë, who had also lived and worked in Dewsbury.

On 14 July 24, Sykes shared that walking by the river Calder was Patrick's Brontë's favourite walking route, while he lived in Dewsbury (1809-1810) - a walk we retraced that day, which Kothdiwala helped organise, along with a picnic. The storytelling was delivered first, and Sykes made a link with the humorous story the group had shared previously and gave out more information in handouts; a 19th century Charlotte Brontë (1816-1855) portrait and a series of 19th century maps of the river and canal (from Kirklees art collections and archives). Dobson then demonstrated how to use cameras (hired from the University) and invited members to take photos during their walk and practice mindfulness. The walk down the river that day was captured in a hundred and four photographs taken by fourteen participants. Nine members then took part in a focus group discussion which was captured by Sykes and Kothdiwala (14 July 2024) and summarised below:

JS & WK Did you find that the creative activities enhanced the walking experience?

A resounding "Yes!", apart from one new member, who had joined that day.

JS & WK *Did the activities help you think differently about Dewsbury?*

“Yes, learnt more about it. I didn’t realise how close these walks are to the history”

JS & WK *Did the creative health activities enhance your wellbeing in some way?*

“It was a new experience using a nice camera and doing a walk”.

JS & WK *What could we have been done better?*

“Perhaps we could have started from the blue plaque about Patrick Brontë being the curate at the minister in Dewsbury. We will walk to the blue plaque one day”.

JS *In your experience of facilitating and leading on creative health projects, what does a successful (creative health) project/activity look like?*

WK When we start an activity, everyone starts off chattering ... then gradually there is a moment when everything goes comfortable, calm and silent and everyone is engaged with the work there is this flow that takes over.

JS *How do your notes (the process) help /serve you and S2R create future projects?*

WK By keeping notes S2R can also use them to improve their services and know what is working and what isn’t.

JS *In what ways was the storytelling and mindful photography activity a successful S2R activity, for the group’s mental health and wellbeing?*

WK The story gave the group a connection to the place we usually walk, and it gave them a different perspective of somewhere they are familiar with. As everyone had a go at taking pictures, they all were helping each other with the cameras and sharing ideas on what picture they should take, it created a sense of community.

Project 2: S2R Activity Birkby and Fartown Library Garden

Dan Commons

I chose to participate with S2R for many overlapping reasons. Academically, my own research is concerned with using photography to document and explore community and place. The activities facilitated by S2R seemed an ideal way to test various approaches within a group dynamic and within specific types of space.

Additionally, a personal reason I was drawn to S2R was in recognising the importance of the project for those involved and especially for its users and its beneficial impact on mental health. Photography has had positive mental health impacts on myself, so incorporating it into an activity at S2R seemed especially apt.

I chose to collaborate with users of the garden at Birkby and Fartown Library primarily as I wanted to understand it as a social space and its relationship with the users of the space. I was interested in how the users congregate and use a space that is seemingly static and fixed, how that use of space impacts the participating members and what changes occur as the seasons change within the garden.

Over several weeks I attended the activity, collaborating with (S2R) project workers Elizabeth Judd, Cherry Styles and the members of the garden. It was important that photography, and the camera as an entity, was introduced in an ethical way within the group. I also wanted to distance myself as an influence, encouraging the participants' sense of intuition with the apparatus, only assisting with the technical aspects of using a medium format camera.

As such the photography activities were split into three separate themes, designed to introduce the playful nature of photography (disposable cameras) to reflect on the relationship with the garden itself physically (cyanotypes) and to depict the positive impacts of being in the space of the garden (portraits using a medium format camera). Each approach was demonstrated before allowing the participants to make their own informed creative decisions.



The variety of results reveal a great degree of engagement and creative intuition from the participants. The introduction of backdrops, the floral arrangements made into cyanotypes and the composition of medium format portraits showcase positive relationships with space (tactile and meditative) and serve as records of the dynamic impact on the participating members:

'By directing and setting up shots together we've tried to capture the essence of this unique community space. The garden in high summer offered us a palette all of its own, and the portraits reflect the trust and care that are so central to the group' Cherry Styles, S2R Project Support (personal communication Aug 30, 2024).

Conclusion

For brevity, this conclusion summarises where the project findings overlap. We found that all the creative activities resulted in the participating members having an increased sense of community within the group. This was observed by the researchers, project workers and members themselves, the benefits of a sense of belonging to people's well-being have been well-documented in previous research including the *Creative Health Report* of 2023.

All researchers found that integrating with groups prior to organising the creative activity was of vital importance, so that a sense of trust was established, and this was vital to the co-production process. This meant however that when new members joined the group during the workshops, they were not expecting a creative activity. So, some individuals did not find the workshops as enjoyable as others. However, most voices from the groups found the activities enjoyable.

In project 1 changes in the group behaviour to a state of flow was observed as well as shifts in their perspective about the place they live. In project 2, Commons observed that the members of the groups were indeed engaged, and displayed characteristics of flow, particularly in the cyanotype activity. The therapeutic effects of 'creative flow,' are well-documented by Keith Sawyer (2008) and others.

Despite the design of projects being varied, co-production was at the heart of both. In project 1, both researchers found that working co-productively with members, entwining their stories from the communal walking experience informed the nature of the activities. In project 2, the researcher designed the workshops around three themes, providing a space for improvisation, and in this way the outcomes were co-produced. Therefore, the design of both projects provided parallel structures for co-production to occur, where participant members made informed creative decisions within the programmed activity. As Kerry observed, in his experience, when creative activities are presented to adults, they 'often feel they can't be creative, but when you do a parallel activity like the library project, they'll join in and do something that surprises us' (personal communication Aug 28, 2024).

The photographs created by both groups are to be displayed in forthcoming exhibitions at the University of Huddersfield and the libraries where the Creative Health activities took place.

Dr Janine Sykes is a curator in Visual Arts at Kirklees Museums and Galleries and Lecturer in Visual Arts in the School Art and Humanities, University of Huddersfield.

Dan Commons is a photographer and practice-based researcher currently undergoing a place-based PhD scholarship in the Centre for Cultural Ecologies in Art, Design and Architecture at the University of Huddersfield.

Charlotte Dobson is a lens-based photographer and new media installation artist currently undertaking a PhD in the Centre for Cultural Ecologies in Art, Design and Architecture at the University of Huddersfield.

Waheeda Kothdiwala is a project worker at S2R, facilitating creative, outdoor and well-being workshops.

Support to Recovery (S2R) is a local mental health and wellbeing Charity, supporting individuals, their families, carers, and communities across Kirklees.

Image credit

Image 1: Cyanotype Created by Participant. Photograph courtesy of authors.

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Stitching together with Louisa Pesel: Connecting Past and Present in Creative Health
Dr Claire Wellesley-Smith

Together with Needle and Thread: Legacies of Louisa Pesel, a project in Bradford in 2022-2023, was based at Hive, a community arts charity, and at locations in the city, supported by a Culture and Heritage grant from Bradford Metropolitan District Council and featured in a publication (Wellesley-Smith, 2021). It researched the Bradford connections of embroiderer and educator Louisa Pesel (1870-1947), and her work with vulnerable communities during the First World War. The project worked with volunteer researchers and craft and wellbeing groups to map locations in Bradford significant to her life, using collections including the Pesel archive, and creative textile making with a textile group.



Pesel and Bradford

Louisa Pesel was born in Manningham, Bradford in 1870 into an affluent and politically active family. Following a design education in London and work teaching overseas (Pesel, n.d., p. 2) she returned to Bradford in 1913 shortly before the outbreak of the First World War. She was a founding member of the Refugee Relief Committee, set up to support over a thousand Belgian refugees who came to the city from October 1914. The Belgian Institute in central Bradford opened in November 1914 and provided craft workshops for carpentry, millinery, toymaking and dressmaking, offering ways for the newly arrived to earn money towards their eventual return home.

In 1917 the Abram Peel Hospital opened in Bradford to treat the increasing numbers of returning soldiers experiencing shellshock. Working with Dr Hawkesworth, the nerve specialist in charge, Pesel devised a Bradford Khaki Handicrafts Club (BKHC) and 'curative crafts' for his patients. In daily sessions the men learned textile crafts including netting, basketry and handloom weaving and made lampshades,

string bags, belts, and ties. Pesel taught canvas embroidery believing this to be the most therapeutic of the textile crafts. She quotes a soldier, 'I like cross-stitch best, because if my work is right, why then it as good as anyone else's' (Pesel, n.d., p. 6). Pesel reflected on her long experience of textile work with groups like this, in later life having settled in Winchester where she continued writing and lecturing on embroidery and where she instigated a large-scale project with Winchester Cathedral Broderers.

Talking Textiles

The use of crafts ... is sometimes called "curative", "remedial", "therapeutic", or "educational", but, whatever it is called, its value remains the same and the variety of names only expresses different angles of approach to the same end (Pesel, n.d., p. 5).

Following a period of research which included group visits to the Pesel archive, sessions with the Talking Textiles group began at Hive. Hive's projects and work in the wider community focus on mental health and wellbeing, community cohesion, the heritage of the city and communities that live there. The Talking Textiles group is open to all and is mainly attended by women, many of whom live with long term or chronic illness. The group engages with wellbeing frameworks informed by the Five ways to wellbeing actions (Aked, Marks, Cordon, & Thompson, 2008), knitting and stitching for wellbeing through the work of Betsan Corkhill (2014) and myself (2021).

Stitching together

If possible, it is a sound arrangement for several people to work in a group, doing similar but not the same work...giving scope for individual expression and enriching the craftsmanship of the whole group (Pesel, n.d., p. 7).

Sessions with Talking Textiles focussed on findings from archive research: Bradford locations, textile techniques Pesel used in her work, the sampler as a format and her thoughts on craft, health, and textile groups. Participants made personal work, stitched and appliqued onto linen, including narratives from their own lives. Some included direct references to Pesel's designs - canvas work stitches and irises, her two great passions. Knotted string bags like those she described soldiers made were also produced. The story of Pesel's work with the BKHC had the most resonance for the group. In semi-structured individual interviews, group conversations, and written correspondence with participants, connections were drawn between the work of the BKHC and the Talking Textiles group. The changed language around Creative Health was unpicked, particularly Pesel's bold claim that the body can heal itself through 'just using handicrafts intelligently to occupy the fingers and by so doing to distract the mind from the body and all its ills and ailments' (Pesel, n.d., p. 5).

Conversations about the side-by-side ways of working in craft groups and the support this offered were discussed in connection to an archive image of Pesel teaching at the BKHC. A participant described her stitching and how it referenced the support she found in the Talking Textiles group:

I wanted to bring the whole work together by 'blending'; using small wandering stitches to show that nothing exists in isolation ...The stitched bee represents Hive: a warm welcoming place where the Talking Textiles group has become important to me as a source of pleasure, friendship and inspiration. (Written reflection by N, May 2023)



Another participant found commonalities in the experience of the soldiers who were inpatients receiving psychiatric care and her personal experience of psychiatric hospitals where she felt security and acceptance. She reflected on her stitching and the experience of moving back into the community:

my embroidered Warrior Woman could be letting the light in or letting it out. The gold dust of insanity with its accompanying stigma and prejudice, but half of her is ok. She can go to Asda, pay the bills, hang the washing on the line and walk along the busy pavement, mingled in with everyone else. (Written reflection by L, May 2023)

The use of stitches '*ones made of soft wool, cotton, polyester ... were creative, gentle and calming*' and had become part of the antidote to her distress.

Linking the lived experience of participants in textiles for health projects a century apart, allowed conversations through making to evolve and stitched personal narratives to emerge. Exploring the geographies and mobilities of a textile story from this textile city offered ways for participants to voice their personal stories of arrival and belonging today.

Claire Wellesley-Smith is an artist and research fellow at The Open University. Her projects are long term engagements in former areas of industrial textile production that explore heritage and health through textile making and community-based research.

With thanks to Hive and the Talking Textiles group. Images of work by TW, EM, CP,N, LS, and MD.

Image credits

Image 1: Embroidered blue plaque for Louisa Pesel. Image courtesy of author.

Image 2: Examples of work from Talking Textiles session. Image courtesy of author.

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Introduction

This piece will reflect on the cultural and knowledge exchange processes of a co-created project conducted between April 2024–November 2024, entitled *Family Routes*. The co-creation integral to the project has been embedded in the entire project life-cycle, from data collection through to designing the dissemination materials. It is also reflected in planning for the next phase of the project, where interactive elements have been incorporated into the exhibition to seek further input from stakeholders in the community. We plan to use these expanded conversations as a starting point for the next phase of working in and with the community, to extend the project's breadth, reach and impact.

Walking with families as a route to wellbeing and connection

This project aimed to explore the relationship between walking and well-being in families with preschool-aged children, focusing on a place-based context (Kirklees) by mapping their walking practices. This aligns with the UK Government's renewed emphasis on place-based solutions for health inequalities and wellbeing, and their benefits to local communities, not just socially and culturally but also economically. While walking is often considered a mundane activity or a means to an end, it is actually a complex interaction of physical, psychological and environmental factors that impact individuals, groups and the landscape. Walking with small children, in particular, presents a unique set of logistical, physical, and emotional challenges (Platt, 2024), which this project uses as its point of departure. Despite these difficulties being common in everyday life, there is a lack of research on the specific issues families face when walking with young children, and the extent to which these require place-based solutions.

Walking is not just a practical activity; it also helps us make sense of the world around us (Ingold and Vergunst, 2008). Yet, research indicates that children's spatial freedom is shrinking (Jack, 2010), making access to nearby outdoor spaces vital for fostering a sense of belonging and connection to the environment. The COVID-19 pandemic highlighted disparities in access to green spaces across the UK, with The Ramblers (2024) reporting that 21 million people live more than a 15-minute walk from a green or blue space. While 15 minutes may seem manageable to many, walking with small children can take considerably longer, turning this distance into a significant barrier for families who want to spend time outdoors together.

Creative methods and mobilising the child's eye view

Using creative mapping and mobile methods, this project collaborated with young families to explore the relationships that are formed between bodies and spaces, reflecting on varying experiences and interpretations of localities.

Eight families took us on a series of sensory ethnographic walks of their local area in Kirklees, and we recorded video footage from both parent and child perspectives.

These walks were purposely led by the families, using routes familiar to them which they regularly took, whether that be a walk with the dog around local woodland or a trip to the shops. We aimed to record the varying experiences of participants in these walks in as unobtrusive a way as possible. Using Go-Pro cameras proved a successful means of capturing both parent/carer and child's-eye perspectives, which were then edited into a 40-minute split-screen film which highlighted the contrasting experiences of the adults and young children. This amplified the physical and also cognitive differences in how spaces are used and understood by different age groups, with the children, for example, being more care-free in their path-finding, whereas the adults tended to take a more direct route. The children's preoccupations tended to be more imaginative and fictitious, with games and stories being created along the way, and artefacts being collected and used as props for this kind of play. The adults, unsurprisingly, were more concerned with practical and logistical aspects of the walks, such as ensuring safety and time-keeping. Their way-finding was more deliberate with concerns of navigating the spaces taking priority. This isn't to say that the parents involved didn't join their children in their play and imaginings, in fact, it was observed that the children allowed and enabled the adults to step outside of their 'adult world' for periods of time. Indeed, this is evidently one of the joyful aspects of going for a walk with a child: the child's view of the world gave the adults permission to be playful and experience their neighbourhood in different ways.

Furthering this collaborative approach, we then worked with Ellie Thomas from The Children's Art School (Huddersfield) who are experts in working with very young children in a creative capacity to help them explore their worlds. Participants created a visual outcome which translated multisensory memories of their walks into what might be described as a form of creative cartography. Recognising the difficulty of soliciting feedback from young children - a challenge which had arisen in the early stages of the research when attempting, unsuccessfully, to interview preschoolers about their experiences - this approach was taken to provide a vehicle for the young participants to express memories of their walk in ways which were meaningful to them. We felt it was important that we, as academics, handed control over to Ellie and the families, realising that any attempt to pre-empt what might emerge from the activity, or to try to solicit the kind of feedback we needed, would ultimately undermine the participatory nature and the authenticity of the work. We also came to the conclusion that it was important that children were given the freedom to use their imaginations to enrich the research outcomes. While it was necessary that Ellie developed an approximate framework for the workshops to ensure the children and families had some structure to the sessions, the outcome was unexpected and opened up new perspectives on their walking experiences that we had not considered. The families created a large-scale printed landscape of the area and used collage and illustration to add features of their walks that had been important to them, ranging from flowers and animals, to traffic and, interestingly, even fictitious elements such as wolves, bears and hot air balloons. Even babies were able to mark-make to have their own input in the creative process. Participants also considered their walks in relation to their ideas of 'home', crafting 3D structures which represented their houses and creating their own versions of remembered paths and roads to connect the landscape with these structures.


Using creative methods with children in research is powerful because it allows them to express emotions and experiences that may be difficult to articulate verbally (Tay-Lim and Lim, 2013). Artistic activities enable children to use symbolic representations that can convey complex emotions through imagery and metaphor, offering deeper insights into an individual's inner world which might not have been revealed through more traditional research methods such as interviews. Moreover, engaging in creative processes fosters perspective-taking, empathy, and open communication within families, creating shared experiences that strengthen relationships and furthered connection to the place-based settings being considered (see for example, Osgood and Odegard, 2022). Arts-based approaches also empower children, helping them feel a sense of accomplishment and control (Everley, 2001).

The final work is being displayed back in the community in the entrance to Holmfirth Library. This location was chosen as the library attracts footfall from young families, allowing audiences to reflect on the work in different ways than if it had been displayed in a gallery space or academic institution. As well as celebrating the creative work of participants and the insights learned from the project, the exhibition aims to elicit further feedback and begin further conversations from a wider audience across the community about the locality and its walkability for families.

The Family Routes Toolkit


Collaborate

Leverage the skills of others - Employ expert artist facilitators to help empower families to enhance their creativity - and don't assume what will emerge.




Co-create

Everyone can get involved - From simple mark-making (colours and shapes can express a memory or emotion) to detailed drawings. Take a step back to listen to and engage in spontaneous conversations. The process is as much about observing and listening as it is about a final visual outcome.




Connect

Establish trust - making use of existing community networks to understand the everyday experiences of those that live there. Go for a walk with the families - experience what they experience. Follow their lead - even better - follow the toddler! Give them time, no agenda.




Disseminate and Reconnect

View the created outcome as a link in the road - Rich with potential for further exploration; a step along the way and not a destination. Invite participants to reflect on their creation and welcome new interpretations by finding ways of making the work accessible to a wider audience. Make use of place-based assets to display the work in community.



Record

Record the experiences - make use of multi-modal methods (Di-Pros, video, photos, participant created images etc) Try not to interfere with the walk - parents have enough to think about and cope!



Further Knowledge Exchange

We envisage that this process will be translatable to new locations, respectful of place-based concerns relevant to the families in those areas, and plan to scale it up in this capacity. Throughout the research process, we have consulted with a campaign and grassroots organisations focused on enhancing walkability and access to green spaces (Blaze Trails CIC and The Ramblers). After presenting our project outcomes to these organisations, we explored ways to leverage the knowledge gained during this project for greater impact. The resulting toolkit (Powell and Platt, 2024) has

a dual purpose: it integrates the insights gained from co-creating with families into the campaigning and policy landscape, and it showcases a methodology that can be replicated for creative consultation with young families.

We are conscious that so far we have focused on rural and semi-rural communities and the concerns of these places might not be the same as in others. However, the toolkit is adaptable as it emphasises a co-creation approach which cedes control to communities and local creative experts. This method could be adopted to assess the way families engage with their local neighbourhoods, whether rural or urban, as long as researchers or consultants are willing to be open-minded and respectful to all voices, and can acknowledge the value of arts practices as a form of creative consultation. The project has been testament to the idea advocated so effectively by artist Bob and Roberta Smith, that 'Art Makes Children Powerful' (2012).

Dr. Anna Powell is a senior lecturer in art and design theory at the University of Huddersfield. Her work explores the relationship between art and its audiences, contemporary art and heritage, and public engagement in art and design. Anna has personal experience of navigating the challenging and rewarding world of walking with her own young children and through her work as a breastfeeding Peer Supporter.

Dr. Louise Platt is a senior lecturer at Manchester Metropolitan University with an expertise in place experiences. Her research is interdisciplinary, exploring leisure practices and public space. Her own experiences of walking with a baby in lockdown and organising a mums' walking group inspired this project.

Image credits

Image 1: Powell and Platt, 2024. The Family Routes Toolkit. Image courtesy of the authors.

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Mondays at the Museum

Charlotte Goldthorpe, Rowan Bailey, Cathryn Pike

Mondays at the Museum is a Creative Health initiative aimed at reducing health inequalities in underserved areas by providing accessible health and wellbeing activities at the Tolson Museum in Huddersfield. Museum staff collaborate with Social Prescribers, Primary Care Networks (PCN) and Local Anchor organisations to expand access to mental and physical health support, outside clinical settings. The council-run Tolson is uniquely placed to provide a welcoming space, accessible without stigma. Activities provided include Big Drum, Wellbeing walks, Yoga, Tai Chi, Flex and Stretch and Crafts. Mondays at the Museum is a key example of the delivery of Kirklees Heritage Strategy approach to Heritage in Action.

We have spent the last 8 months undertaking place-based research at the Tolson Museum, gathering evidence of how this model of working could potentially roll out across the museums and galleries sector and as part of the newly established Creative Health system for West Yorkshire.

This has involved participation in the activities of Mondays at the Museum and holding conversations with the museums team, providers and organisers of public health services (PCN), social prescribers, activity leads and members of the public engaging in the programme.

These conversations have helped us to develop a deeper awareness and understanding of the impact of Mondays at the Museum in people's lives and the benefits of experiencing a range of health and wellbeing support inside a heritage setting.

Our conversations have been guided by 4 main questions:

1. What communities engage with Mondays at the Museum?
2. What difference is the programme making in people's lives?
3. What would be lost if Mondays at the Museum wasn't there?
4. How is Tolson Museum as a place understood in this wellbeing context?

We were also keen to gather stories of experience from members and users of the programme of activities.

Some of the early findings of this research can be found in the selected quotations below:

- *'It is about getting health and well-being activities into the community for people who are the most socially isolated'*
- *'Even though it is a health and wellbeing project, it is important to bring heritage and culture into what we do as well and to take advantage of the Tolson Museum and the collections that it has to offer.'*
- *'We try and make it as participant led as possible in terms of making sure that what we offer still works'*

- *'We teach to anyone in the community of Kirklees and in all my classes people from all different walks of life join in. I love it'*
- *'It is a social thing'*
- *'We come to motivate ourselves'*
- *'I have always come to this museum, since I was little'*
- *'We used to play in the grounds here'*
- *'I come, bring my children, bring my grandchildren'*
- *'I get a lot out of it, mentally, physically, socially'*
- *'A key component to the success of Mondays at the Museum has been the link between social prescribing, heritage and health and wellbeing activities.'*
- *'It really makes a difference. I have seen how people who come for their social prescriber appointments come back to the museum to engage with the activities.'*



This initial scoping phase has led to a successfully awarded Arts and Humanities Research Council (AHRC) Impact Accelerator funding to further investigate the social, physical and mental benefits of the Mondays at the Museum model for both participants and providers. This research will also focus on the development of creative activities, artefacts and approaches that engage with the museum's collection, Creative Health and heritage.

We thank the museum team for their co-collaborative input into this research and look forward to the next stages of co-design and development for this partnership work.

Dr Charlotte Goldthorpe is a Senior Lecturer in Fashion at the University of Huddersfield, UK. She is a practice-based researcher in the fields of craft, well-being and social history, who uses a mixed method approach to gather stories of experience.

Dr Rowan Bailey is a Reader in Cultural Theory and Practice with an interest in place-based thinking and making in the public realm. This includes collaborative partnership working with different creative communities. She is also Director of the Centre for Cultural Ecologies in Art, Design and Architecture. [Centre for Cultural Ecologies in Art, Design and Architecture - University of Huddersfield](#) and Principal Investigator of the Creative Health Hub for West Yorkshire.

Cathryn Pike is a cultural engagement officer for Kirklees Museums and Galleries, who has worked for the service since 2019. She has an MA in Digital Heritage. After completing a Health and Well-being training cohort with Museums Development Yorkshire she and another officer were inspired to connect with local providers to investigate the potential for providing social and well-being activities in the museum setting.

Image credits

Image 1-2: Tolson Museum. Photographs by Laura Mateescu.



Continuing Professional Development (CPD) in Creative Health: a pilot programme between hoot creative arts and Cultures of Creative Health.

Dr Rowan Bailey and Gavin Clayton (hoot CEO)

As part of the Cultures of Creative Health programme, we partnered with hoot creative arts (hoot); an arts and mental health charity based in Huddersfield to develop a pilot CPD offer for socially engaged creative practitioners. hoot is a leading arts and health organisation based in Kirklees, West Yorkshire, dedicated to improving mental health and wellbeing through creative engagement. For over 20-years, hoot has been at the forefront of the Creative Health movement, delivering arts-based interventions that empower individuals and communities to manage, explore, express, and transform their lives.

hoot believe that the arts have a unique ability to support wellbeing, promote social connection, and address deep-rooted health inequalities. Our work is grounded in the principles of socially engaged practice, *which requires a different type of artist*—one who is not only skilled in their craft but also adept at working within complex social and emotional landscapes.

hoot prioritises trauma-informed approaches, ensuring that our sessions are safe, inclusive, and responsive to the needs of participants who may have experienced trauma. Additionally, we integrate **Relational Practice Movement Principles** into our work, focusing on the importance of relationships, trust, and mutual respect in all interactions. These principles guide our artists in creating environments where participants feel valued, heard, and supported.

Hoot in the Creative Health Landscape

As part of the broader Creative Health landscape in West Yorkshire, hoot plays a crucial role in delivering innovative programmes that align with regional and national health strategies. Hoot's work supports the growing recognition that engagement in culture and creativity can significantly improve mental health outcomes, as shown by the recent Creative Health Review and West Yorkshire's commitment to proving itself as a Creative Health System.

Motivation for the Pilot CPD Project

The motivation behind the pilot CPD (Continuing Professional Development) project stemmed from hoot's desire to expand and strengthen their pool of socially engaged practitioners. We recognised the need to upskill the freelance workforce to ensure they are equipped to deliver arts-based interventions that are not only high quality but also sensitive to the unique needs of diverse communities that would help hoot meet its express aims within their IDEEA approach (Inclusion Diversity Equity & Equality in the Arts).

Key Objectives:

1. **Expand the Pool of Practitioners:** Attract and develop artists who are passionate about working in a socially engaged, trauma-informed way, and who are committed to the principles of relational practice.

2. **Upskill the Freelance Workforce:** Through targeted training, to enhance the knowledge and skills of new and existing practitioners, ensuring they have the confidence to deliver high-quality, impactful Creative Health interventions.
3. **Investigate Benchmarking:** We explored ways of structuring and delivering training that could potentially serve as a benchmark for future CPD programmes, setting standards for socially engaged creative practice within health and social care settings in the region.
4. **Support Peer-to-Peer Learning:** Recognising the value of collaborative learning, to assess the demand for peer-to-peer support and networking among practitioners, with a view to establishing a sustainable community of practice.



This Knowledge and Cultural Exchange project focused on aspects of training and development in the field of creative health including the design of workshops with different artist and practitioner facilitators.

The workshops and sessions were co-hosted with different artists, practitioners and academics. They included:

WORKSHOP 1: Community Co-Creation Techniques ‘Art in Groups’: teaching methodologies to collaboratively create art with communities, emphasising participatory methods and empowering community voices with a person-centred approach. Training Leads (hoot): in-house artists: Sally Barker and Rob Crisp.

This training session introduced participants to a variety of artforms, projects, topics and approaches hoot have worked with to bring people together and express themselves, whilst improving mental health and well-being and developing strong communities. Participants had an opportunity to take part in some group creative

activities, discuss the strengths of a diverse set of artistic approaches with the aim of developing new ideas and skills.

WORKSHOP 2: Facilitation and Engagement Skills ‘Groups in Art’: workshops to hone facilitation techniques, active listening and fostering dialogue in community-based art projects.

Training Leads (hoot): in-house artists: Sally Barker and Rob Crisp.

Using creative approaches to engage with groups this session focused on the best ways to engage a group in an artistic activity, how to make sure voices are supported and heard, and how to guide participants through the stages of hoot’s core delivery values; invitation, exploration, connection, expression, challenge, giving and growth.

WORKSHOP 3: Cultural Competency and Inclusivity: understanding diverse cultural contexts and developing inclusive art projects that resonate with different communities. Training Lead: Shabina Aslam.

This session focused on sharing insights from Shabina’s career as a theatre maker, writer, and producer. Her passion is hidden stories and creating work with people from a range of backgrounds and experiences. Her recent work includes ‘Bussing Out’ an oral history project, ‘Women’s Weekender’: a celebration of women creatives and activists from the global majority and ‘Right Queer Right Now’ a double weekender showcasing and celebrating new and emerging queer artists and community. The workshop was an opportunity for participants to come with a community in mind to explore ways in which to engage with them in a meaningful way and create work that is relevant to them.

WORKSHOP 4: Evaluating Social Impact in Art: tools and techniques for assessing the social impact of art projects, including scaled evaluation techniques, storytelling, and qualitative assessments.

Training Lead: Anni Raw.

This workshop provided a critical look at the arts evaluation landscape and evaluation pressures and focused on taking back control of evaluation practice. Participants explored participatory evaluation techniques and how to develop effective methods for contextualised, effective, and meaningful evaluation in a ‘post-truth’ culture, organised reflective practice and ‘story-building’ as solid narrative-based evaluation methods. The training lead Anni Raw has been active in community and participatory arts for 35 years. Over three decades she has developed expert specialisms in participatory evaluation practice and demystifying ‘evaluation’.

WORKSHOP 5: Applied Ethics in Socially Engaged Art: delving into ethical considerations specific to socially engaged art, including consent, power dynamics and cultural sensitivity. Training Lead: Sharleen Shaha (Kirklees Year of Music Health and Wellbeing lead @ hoot) and Displace Yourself Theatre.

Displace Yourself Theatre (DYT) create work with marginalised communities and individuals who are displaced from their environments, families, bodies, and emotions. DYT train artists to embrace creative practices which centre on

personal and community wellbeing. In their creative practice DYT focus on trauma conscious approaches to creative practice, a natural exploration of personal and communal ethics, delving into cultural sensitivities, consent, and power dynamics. This exploratory workshop with DYT's Sharleen Shaha introduced participants to the core principles and approaches of working ethically with communities, using creative activities from new perspectives and alternative methods, and considering the health of the body/mind.

Impact and Feedback

The CPD sessions were well attended, drawing a total of 87 attendees. Feedback was overwhelmingly positive, with participants describing the sessions as 'excellent,' 'uplifting,' and 'informative.' The programme not only enhanced participants' technical skills (i.e. facilitation skills and evaluation and impact measurement) but also deepened their understanding of the social responsibilities and cultural sensitivities needed in creative health work.

Key Outcomes:

- **Enhanced Practitioner Skills:** All sessions were delivered in an active learning style, and participants were able to contextualise their learning to better understand and prepare for how they might engage communities better, help inclusive sessions, and evaluate the social impact of their work.
- **Increased Awareness:** The sessions provided a greater awareness of the importance of cultural competency and trauma-informed practice among the artistic community.
- **Network Formation:** An additional networking session led to the establishment of a preliminary network for socially engaged practitioners, with plans for ongoing collaboration and support.

Reflections on the next steps

Following the successful pilot of CPD sessions in 2024, it became clear that there is a strong demand for ongoing professional development tailored to socially engaged artists and creative facilitators. The pilot revealed the necessity for specialised training that not only equips artists with practical skills but also addresses the focus needed to work in a culturally competent way with diverse communities. All this highlighted a critical need for a supportive network where artists can connect, collaborate, and share best practices.

Each CPD session provided opportunities for participants to provide feedback. The core questions posed were:

1. Can you tell us about your experience today? How was it?
2. How might you use anything you have learned today in the future?
3. What were the gaps (e.g. areas for improvement / things we missed / anything we should change)?
4. What suggestions do you have for other CPD sessions?
5. Why is CPD training and development in creative health important for arts/creative practitioners?

Key Suggestions from Participants: Participants expressed a keen interest in more specialised topics for future CPD sessions, including:

- Focusing on specific community health issues such as anxiety.
- Incorporating trauma-informed practice.
- Addressing anti-racist practice in their work.

Other feedback from participants of the workshops included a range of suggestions for future network development in this area, including cross-sector opportunities, peer-to-peer learning, and further training to support Kirklees artists to be leading socially engaged practitioners. Participants suggested that needs assessments, evaluation, learning, and delivery were necessary as part of any future training opportunities, as well as sharing resources and examples of socially engaged art in practice. The values of empathy, caring for wellbeing, transparency, support, access, and inclusivity were espoused as being key to any CPD design.

Working with the feedback provided by participants at each session and summarising the overall feedback provided as part of an end series reflection meeting, we have outlined future development areas for socially engaged artists working in, or looking to work in, the field of Creative Health:

Advocacy and Visibility: Focus on advocating for the recognition of socially engaged arts within the broader community, promoting the value of these practices and artists' contributions to social health & societal well-being and bridging the gaps within health and social care to help people manage (in-particular) their mental health. To amplify the Culture, Health and Wellbeing Alliance's conference statement that: 'Creative Health is a Frontline Service'

Resource Mobilisation: Develop strategies to mobilise resources including funding; materials; and spaces, to support artist led initiatives and ensure sustained growth of the network and creative health workforce.

Community Engagement Models: Explore and implement diverse and culturally competent models of community engagement that encourage active participation and collaboration between artists, local communities and networks such as Kirklees Ethnically Diverse Communities Network (KEDCN).

Collaborative Projects: Facilitate collaborative projects between socially engaged artists and diverse community groups, fostering cross-disciplinary collaborations for impactful initiatives.

Skill Exchange and Training: Establish mechanisms for skills exchange, peer to peer learning and continuous training among network members, offering opportunities for learning and professional development.

Research and Documentation: Encourage research initiatives to document the impact of socially engaged arts, collecting data and stories that demonstrate its significance within the community.

Policy Influence: Engage in dialogues with policymakers and stakeholders to influence policies that support and recognise the importance of socially engaged arts in health and community development, focusing in particular on immediate priorities in NHS reform to explore Digital, Community Based and Preventative.

Technology Integration: Explore innovative ways to integrate technology into artistic practices, enhancing accessibility and expanding the reach of creative initiatives.

Youth and Intergenerational Engagement: Design programs that involve young people and foster intergenerational connections, leveraging the unique perspectives and energy of different age groups.

Global Connections: Foster connections beyond local boundaries, collaborating with other artist networks nationally or internationally to exchange ideas and practices.

Community and Network Development

The success of the CPD programme also highlighted the need for a structured network to support ongoing professional development. During the networking session, participants expressed a strong desire for regular peer-to-peer interactions, social opportunities, and a platform to test and refine their workshop ideas.

In response, a volunteer offered to start an interim newsletter to help communication and keep the community connected until the formal network is established.

Conclusion

The pilot CPD training has successfully laid the groundwork for a more skilled and connected community of socially engaged artists in West Yorkshire, highlighting the importance of targeted professional development and the creation of supportive networks for practitioners in this field. By addressing the need for specialised training and fostering a culture of collaboration, the project aligns with regional goals to integrate creativity into health and wellbeing strategies. With continued support and funding, this initiative has the potential to significantly affect the creative health landscape in the region, contributing to the broader vision of making West Yorkshire a Creative Health System.

hoot is an Arts Council England National Portfolio Organisation. They are jointly commissioned by Kirklees Council, Kirklees and NHS Integrated Care Board to provide the adult mental health and creativity programme across Kirklees. Their delivery is for a range of groups and settings and includes: adult mental health services, people living with a diagnosis of dementia and their carer, end of life health services, national Criminal Justice System delivery with Psychotherapeutically Informed Planned Environment (PIPE) units, Wellbeing at Work for health and social care workforce, Children & Young People's mental health, Supported Residential settings, Safe and Secure digital platforms and a comprehensive offer for people with learning disabilities +/or autism. Further details: <https://www.hootcreativearts.co.uk>
Many thanks to Estelle Cooper who co-designed this CPD series with Rowan Bailey, and to all the Training Leads involved in this pilot programme.

Image credits

Image 1: HOOT CPD Session. Photograph by Laura Mateescu.

Winter and Spring Schools Cultural Heritage & Wellbeing. The added value of an international training programme on Creative Health for professionals

Bart De Nil

The history

The Winter and Spring Schools for Cultural Heritage and Wellbeing came about as a recognition of the need for professional development for archive professionals working in cultural heritage. Since many archivists entered the profession trained as record managers they lacked the skills and competencies to develop educational resources for schools. In 2014, working with Andrew Payne, the head of the Education and Outreach department at The National Archives in London, we organised a five day international summer school in a very small town on the Belgium-Dutch border for archivists who wanted to learn to develop educational resources. We didn't know if anyone would turn up, but the places sold out instantly with archivists coming from Belgium, the Netherlands, Poland and Denmark. This was the start of a successful series of international winter and spring schools aimed at supporting archivists, education officers and keepers of special collections in their professional development. They also became the basis for a training programme on Cultural Heritage and Creative Health.

In the same period that I was working with archivists on education and outreach I became increasingly invested in the deployment of cultural heritage for wellbeing and health. I developed specific training trajectories on heritage and dementia, autism-friendly museums and using museum objects for wellbeing activities. I simultaneously set up with various partners from the cultural heritage and health care sector a programme called Heritage Collections, Health and Wellbeing. Central to this programme were long-term outreach projects that focused on the use of heritage collections to improve the wellbeing and health of people and communities, and on measuring and evaluating the realised impact. It felt an obvious next step to use the Winter and Spring schools to share this knowledge and expertise in an international context. So, for the fifth edition in Antwerp in 2019 the focus shifted from education to health and wellbeing. We used the same model as the previous Winter and Spring Schools where the participants were guided in developing an offer for communities ranging from people with dementia in a residential setting to working with communities around mental health issues. Again, this formula worked and moving forward I decided to broaden the scope to a training course for professionals working in museums, archives or libraries who want to develop wellbeing programmes. For this I teamed up in 2020 with Dr Guislain Museum, a museum on the history of psychiatry in Belgium. Together we organised editions in 2020 in Newcastle with Tyne & Wear Archives & Museums and in 2022 a spring school in Swansea with the National Waterfront Museum. In 2023 we organised a series in three European cities with a rich textile heritage: Ghent, Leeds, and Tilburg. Each edition had a specific focus (communities, co-creation and making), however the common thread was art-based wellbeing activities using textile heritage. For this series Thomas Kador from UCL Arts & Sciences gave an introductory talk that connected the specific focus with Creative Health.

All the editions brought together participants from 18 countries from all over the world with backgrounds ranging from museum, archives, library and heritage professionals, academics, students, health and care professionals, artists, civil servants and community workers.

The legacy

There is an interesting legacy of experience and knowledge on different levels that came out of this long-term training event.

Teaching model

We started from a traditional approach where we trained cultural heritage professionals to use their collections in a different context. In the first editions archivists were guided, in a very structured way, to develop in groups a specific educational resource for students. Hands-on workshops and exercises introduced them to the skills and methods that can be used in the development of their resources. Staying with this model when we broadened our scope to wellbeing outcomes enabled us to keep the structured in-depth training. Participants could therefore learn a specific skill or method rather than just listen to specialists speaking about their work or best practices, as is often the case. Also, it kept the focus on using cultural heritage in an instrumental way, as assets that can be used to improve the wellbeing of individuals and communities. This was important especially for archive or museum professionals who wanted to hold on to the intrinsic value of cultural heritage, and letting go of this was sometimes a challenge.

International

A key benefit of the Winter and Spring Schools is undoubtedly the international context in which the participants work together and share ideas. It starts with the location which for most of the participants was alien to their own country and work environment. Just being somewhere for a week abroad immersed and focused with other like-minded professionals is enriching. It sharpens your mind when you engage in a discussion with a professional from a different country. It is also an eyeopener from the perspective of learning about Creative Health. Museum, archive or library professionals from different countries work in similar ways when it comes to their core business, but when it comes to using their assets if they want to tackle societal challenges then they are bound by different societal, economic, cultural or political contexts. For example, social prescription is seen by some cultural professionals from countries with a strong and well-funded health and social care system as a model designed to patch-up a failing health care system. Or when professionals discuss in a group assignment the different choices, they should offer the target group, a group member from Syria simply intervened with: *'where I live and work people don't have choices'*.

Diversity

We have always strived to make the group of participants as diverse as possible. Not only from different parts of the heritage sector, but also health practitioners, artists, students and academics. We found that this eclectic mix of professional and personal backgrounds made it a much more interesting experience for the

participants. Particularly the participants with a health or care background or community workers made a great difference, they always offered the insights and knowledge that cultural professionals often lack. However, it must be said that different backgrounds sometimes can create tensions and conflict. In particular, when theory meets practice. Sometimes students or academics entered discussions or exercises with a theoretical mindset about how things work and are pulled back by practitioners who know from experience that things work differently in practice.

Different ways of working

The red thread through the Winter and Spring Schools is how heritage professionals explored how they can use their collections for community participation and outreach and collaborate with other societal partners. Connecting to the emerging 'new' field of Creative Health made the participants reflect about different ways of working and learn how this 'wellbeing turn' happens differently in other countries. From the feedback we received from participants we know that the Winter and Spring Schools not only gave them new insights, knowledge and skills but also has made them change the way they approach their work.

The future

After ten years and ten editions of this training event we felt that it was time to rethink the structure and scope. When we changed our focus to wellbeing the term 'Creative Health', instigated by the All Party Parliamentary Group for Arts, Health and Wellbeing's Creative Health Inquiry Report in 2017, was beginning to be used more broadly. Since then, we have tried to cover different aspects related to how cultural heritage can be embedded in public health using non-medical activities. From 2025 we will be joined by TOON, a new organisation funded by the Flemish government that has a service role around heritage, care and wellbeing in Flanders and Brussels. One of the goals of this organisation is introduce knowledge and expertise through continuing professional development in close co-operation with the care sector.

The next editions from 2025 and onwards are going to be based on the knowledge about Creative Health in relation to cultural heritage, so that participants can reflect on what Creative Health can mean for their own practice and develop something during the training that is tailored to their context. This combined with hands-on basic skills training connected to measuring and evaluating the effects of wellbeing activities or the design of activities, and specific cultural heritage-based methods such as object handling, object storytelling or digital storytelling. We will use a transversal concept, such as 'place' that can relate to other concepts like social infrastructure, places of care, placemaking, asset-based approach, green spaces of care, etc., as an overarching theme. But, if the past ten years have taught us anything, it is that our training event has to start from the premise that cultural heritage and culture in general must be seen as instrumental in helping to tackle health inequalities and inequities. That is why the upcoming editions will be focused on vulnerable groups who could benefit the most from cultural heritage-based wellbeing activities.

Bart De Nil is a PhD researcher between UCL Arts & Sciences and Information Studies, investigating public libraries as social infrastructure for Creative Health. For the past decade he has been leading developments in culturally mediated wellbeing in Flanders, Belgium and internationally. He has published several books and articles on different topics related to culture, health and wellbeing.

Image credit

Image 1: Participants at Leeds Workshop. Image courtesy of the author.



Celebrating Doreen Wood - Beating the Bounds

Sharon Hooper and Dr Janine Sykes

This case study is a place-based programme of activities designed for a group of Girl Guides to celebrate the contribution Doreen Wood (104 years) has made to their community (Meanwood, Leeds, UK) through amateur filmmaking.

The collaborative project extends from the research of filmmaker, Sharon Hooper, and curator, Dr Janine Sykes, and aims to find if the creative (filmmaking and curatorial) activities have any health benefits for the participants. All the creative activities were co-produced with the leaders of the Girlguiding Association (Meanwood Unit). A mixed research method of practice research and discourse analysis was applied, where feedback from participants around the benefits of the activities were captured for analysis and summarised.

The creative activities entailed: presenting the story of Doreen Wood as a local resident and amateur filmmaker, showing her film, *Beating the Bounds* (1976); recreating the communal walk on which the film was based; facilitating workshops; and screening a film made by the participants. The programme below was organised within the regular Girlguiding meetings during April and July 2024 at their normal venue in Meanwood. All parental consents were given for participants to take part in the activities.

Beating the Bounds refers to an ancient communal activity practiced in the UK involving groups walking (with willow branches) around the boundary of the area they live. Doreen Wood captured such a walk in Meanwood in 1976. Her voice-over in her amateur film, *Beating the Bounds* explains how such walks were designed to help young people feel safe within the area they live. By screening the film and re-creating the walk with the Guides (one of the UK's largest youth organisations) the researchers sought to find if younger people living in the area today recognised the health benefits of these creative activities.

The filmmaking workshop asked the Guides to work in small production groups of their choosing and to select filmmaking apparatus from a range of DSLR cameras and tripods, smart phones and gimbles, and Zoom audio recorders. All equipment was set up ready to use and, after basic operational instruction, production groups were asked to think about what Doreen filmed and why, and to capture the aspects of the locality and the experience of the walk that they felt were important to them.

The editing session reviewed some of the ten hours of material with some groups, whilst other groups were tasked with creating titles for the film using stop-motion animation techniques and mobile phone stills. Following the session, Hooper edited the film, priority being given to inclusion and equal representation over visual and aural quality. The film was distributed on the timeline to include material from each group and organised around the structure of the walk.

The Blended Curation workshops (3 and 4) involved participants generating live interpretation for a screening of the short film (5) by reflecting on the story of Doreen Wood. Workshop (4) focused on organising an evening programme during which written feedback on creativity and health was gleaned from participants through questions.



Sykes applied discourse analysis to the Guides' feedback (20 participants) seeking codes and patterns in the responses. All participants agreed that the activities were healthy. The codes found in their responses were 'nature' and 'relationships' and, as in the *Creative Health Review (2023)*, the term 'health' is clearly understood by the group in its holistic sense (physical, mental, and social) as evidenced in the following excerpts of responses:

- *You get exercise.*
- *You can learn...about your community.*
- *It's a chance to enjoy nature.*
- *It's good to meet new people and good to be outside in nature.*
- *Yes, mental health, learning new things/talk to new people.*
- *Notice things you haven't noticed before, socialise.*
- *Yes, it's healthy and brings people together.*
- *They are good mentally and physically.*
- *Yes, it makes ppl happy.*
- *Yes, because it's nice exploring with your friends and seeing nature.*

The participatory filmmaking and editing processes enabled the Guides to share their experiences and perspectives of the locality and community by presenting it through their eyes. Ethically, the process honours the contributions of participants over aesthetics, a tension common in participatory filmmaking and discussed by Goris, Witteveen and Lie (2015).

The experience was empowering in that the Guides were visibly thrilled with their production and shared it with family and friends, as commented upon by Guide leaders. It acknowledged their community membership and contributions. Visual content analysis of the materials created by them indicate they find the environment, local history, and the company of each other important.

This Creative Health case study, based in West Yorkshire, celebrating the amateur filmmaking of Doreen Wood, shows that the participants considered the creative filmmaking and curatorial activities to have some health benefits. The researchers have an ambition to continue *Beating the Bounds* with other community groups based in the Meanwood area, establishing an annual celebratory activity.

Sharon Hooper (Senior Lecturer, Leeds Arts University) is a Senior Lecturer and Filmmaker. Having worked in television, independent film and with third sector organisations, her practice and research explores these areas through the lenses of feminism, communities, and film history. She is also a PGR with the University of Leeds looking at the archive of Leeds Animation Workshop.

Dr Janine Sykes (Lecturer, University of Huddersfield and Curator, Huddersfield Art Gallery) is a Lecturer and Curator. She achieved a PhD formulating a new model of Blended Curation practice, designed to achieve high-quality public participation.

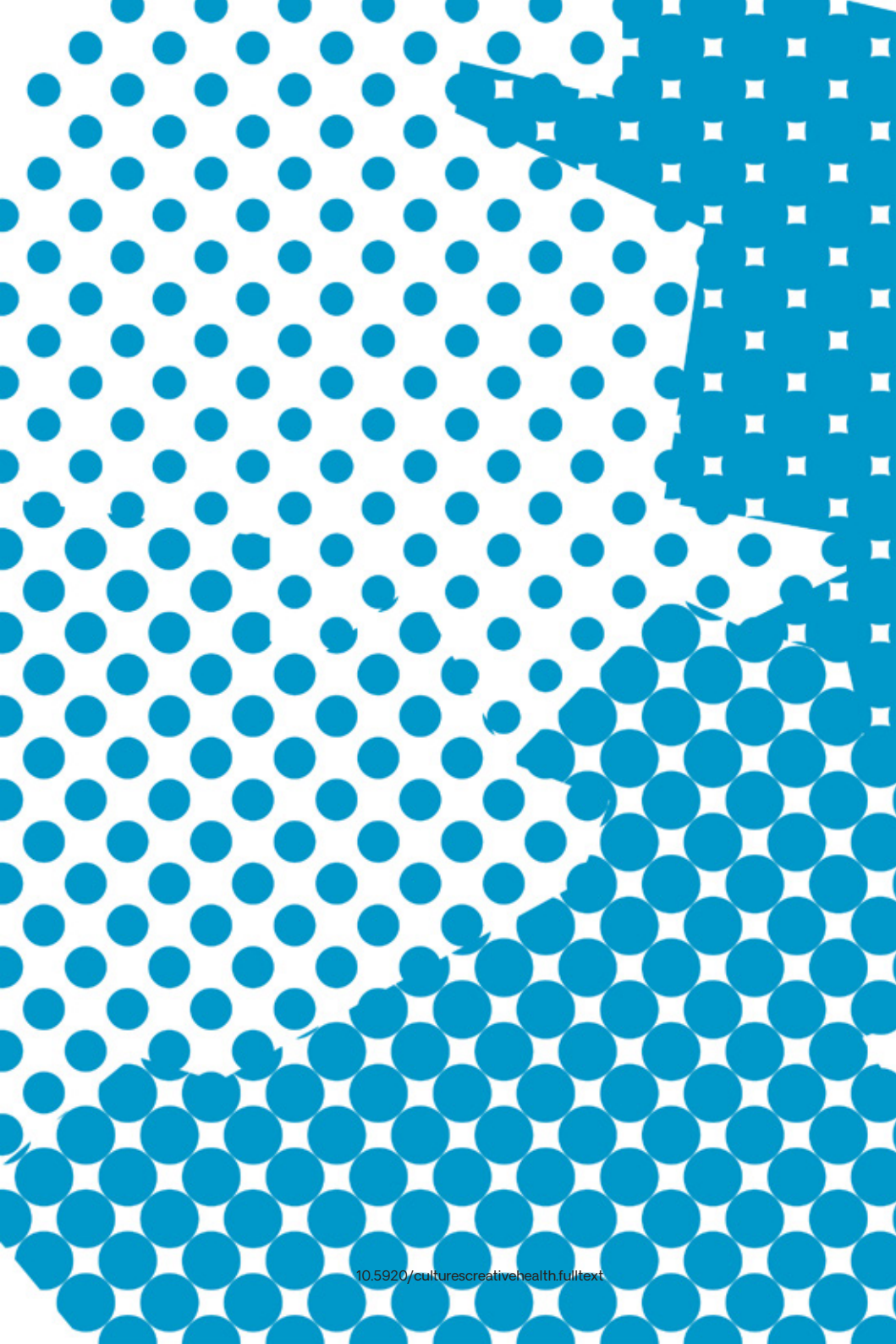
Image credit

Image 1: Girl Guides taking part in *Beating the Bounds* filmmaking and curatorial workshop in Meanwood, Leeds. Image copyright Sharon Hooper.

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Yorkshire Dance

Hannah Robertshaw, Professor Sarah Astill and Adie Nivison

Yorkshire Dance's work with older adults is extensive, developing over the past decade from a single weekly dance class to running the nationally significant *Dance On* programme in partnership with Darts, engaging over 1500 older adults regularly across Leeds, Bradford and Doncaster.

Dance On received initial investment through Public Health in Leeds, Bradford and Doncaster and through Sport England's Active Ageing Programme, which aimed to reduce inactivity in older population groups. Over 30 dance groups were established in local community spaces, working with community partners such as Neighbourhood Networks, to promote adaptable and tailored dance sessions which reached a range of older adults, including those with long term conditions and disabilities. The programme has had particular success in reaching people of different cultural backgrounds, offering a tailored approach to encompass a variety of music and movement styles.

Dance holds a unique power to engage people in a physical activity, even when they don't always associate it with physical exercise. Yorkshire Dance's approach to delivering dance is that it's non-hierarchical and plays a significant role in connecting people on multiple levels, including socially, emotionally, and spiritually.

Dance On is an evidenced-based programme, supported by published research from the University of Leeds, which built on an initial model and the preliminary data from 'Dancing in Time' (Britten et al., 2017). Research has shown that adherence to weekly dance programmes was high at over 70%, and this was maintained over a 12-month period. After 3 months of attending, physical activity levels had increased compared to baseline, and these increases were maintained over the 12-month period. In the oldest participants (85 years+) physical activity levels continued to increase throughout the 12 months. These increases in physical activity were also mirrored by increases in perceived health state, meaning that participants felt better about their health at 3 months compared to baseline, and again this was maintained throughout the 12 months (Britten et al., 2023). A separate, nested study also showed that participation significantly decreased fear of falling, improved mobility, and it was cost effective to deliver (Astill et al., 2021). The research has also shown that it is feasible to deliver these classes online, and that those who attended felt less isolated, and anxious (Britten et al., 2024a).

Case studies have demonstrated the positive impact on those taking part.

I've often come to a session where I'm feel a little low, but you come out with a Euphoric feeling, it lifts your mood. Especially if you live on your own or spend a lot of time on your own, it makes a lot of difference to your mental health and how you are feeling. (Dianne, participant)

It has made a big difference, I really enjoy the social aspect of it, meeting new people. I'm enjoying learning the dances, I think it has helped me both mentally and physically. I just feel a lot better in myself by coming here each week. (Mary, participant)



A team of local dance artists in each area were upskilled to deliver *Dance On* sessions and subsequent ripple effect mapping evidences the positive effect on the creative workforce, demonstrating how dance artists delivering the programme have expanded their own portfolio of dance and health work with people aged 55+ (Dowlen et al., 2024).

Knowledge and research from *Dance On* is compiled in a national '[toolkit](#)' which is free to access for anyone wanting to develop a local dance programme with older adults in their community. The toolkit offers examples of best practice, shares case studies, top tips and templates which enable others to adopt the successful approaches developed through *Dance On*.

Yorkshire Dance's vision for every body having access to, and benefiting from, high quality dance extends beyond community-based programmes to specialist work around dance and dementia. The *In Mature Company Programme*, which embeds Dementia Care Mapping as a research tool, has enabled Yorkshire Dance to access their first NHS commission to extend the programme across Leeds care homes. This work opens up profound questions around touch, connection and selfhood whilst also addressing balance, mobility and strength.

As part of *In Mature Company*, Yorkshire Dance piloted training for care home workers, supporting further engagement in dance and creative activities.

Since the training, we have held a 'Yorkshire Dance style' session every Monday where we have used the warmup, cool-down, massage, 1-1 mirror dance & other improvisation techniques... these sessions have proved very effective for the residents and we have received very good feedback from family members & residents. It has been very good to learn about different movements for joint mobility and the residents really enjoy coming to these sessions. (Participant Care Home Worker)

The scale of ambition around dance and age is exemplified in Yorkshire Dance's *Ageless Festival* which unites international, national and local artists and communities, in performances, workshops and talks that reimagine age through dance. The festival questions how we view the ageing body, what possibilities our changing physicality opens up and how we experience our histories and shifting identities through dance. *Ageless Festival* highlights the importance of creative ageing – demonstrating that engagement in dance across the life course, and specifically in later life, can be profoundly beneficial, physically, mentally, creatively, emotionally and socially.

Hannah Robertshaw is the Creative Director for Yorkshire Dance (Leeds, UK) - a charity working through dance to create happiness, health, connection and change. Hannah trained as a dance artist, working for over 20 years in the UK Dance Sector in roles including Artistic Producer and Programmes Director. Hannah is a champion for dance development, working across Yorkshire and beyond with a commitment to making the arts accessible for everyone.

Professor Sarah Astill - Bsc (Hons), PhD, FHEA is Professor of Motor Control and Co-Lead Reimagining Ageing Network, University of Leeds. Sarah is the Principal Investigator for Dance On.

Adie Nivison is the Older People's Producer for Yorkshire Dance and project lead for Dance On and In Mature Company. She is part of the *Ageless* curation team and supports artists as an independent creative producer. Before working at Yorkshire Dance, Adie was part of the Creative Engagement team at Leeds Playhouse.

Image credits

Image 1: Dance on. Photograph by Mike Hodgson.

Image 2: In Mature Company. Photograph by Aaron Howell.



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Collections of Creative Health - a Curatorial Case Study

Dr Janine Sykes

This curatorial case study outlines a new collaborative project *Collections of Creative Health* between the Cultures of Creative Health programme, at the University of Huddersfield and, Huddersfield Art Gallery (HAG), exploring connections between art collections and good health. Starting with the provocation ‘What Are Art Collections For?’ (#whatRartcollections4) the project’s online discussion programme proceeds to explore the purposes of Kirklees (municipal) art collections, asking are they good for our health? The programme accompanies a ‘slow’ online exhibition (5 June-31 Oct 2024), incrementally displaying fifty oil paintings to mark the fiftieth anniversary of the founding of the Kirklees Art Collection.

This curatorial project takes place at a time of notable change, as the building that housed the Huddersfield Art Gallery is closed, awaiting the extensive refurbishment and expansion of the Gallery and Museum - a keystone of the *Our Cultural Heart* regeneration project for the town centre. This is an opportunity to be reflective, experimental and engage the Kirklees publics with their art collection in new ways, using the gallery social media platform (@huddersfieldartgallery) – in this case exploring together the theme of health. The project involved collaborating with the community in Kirklees, reached through partner organisations such as Support to Recovery (S2R), hoot creative arts and the School of Art and Humanities (University of Huddersfield).

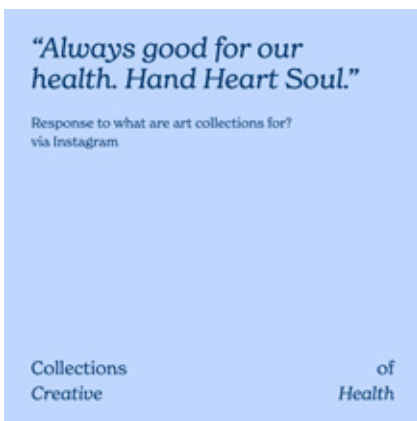
Using the Blended Curation approach (a combination of engagement strategies from Communication, Education, Art and Curation) guests-curators such as Megan Hickey (Exhibitions Curator, Craven Museum & Gallery) and local students (from the School of Art and Humanities) are invited to help co-curate the monthly displays of art.

Accompanying the displays is the #whatRartcollections4 programme, inviting publics to explore the benefits of art collections, particularly around good health, and wellbeing. The monthly provocations are underpinned by research into a) the original educational and enriching purposes of municipal art collections, consulting publications such as *Art for the People* (Waterfield, 1994) and b) Creative Health activities. The *Creative Health Review* (2023) informed the programme design with themes of relationships, belonging and nature, as outlined in the (September) questions:

Can art collections strengthen our relationships with other people, locations, and/or organisations?

Can art collections that depict local scenes and display works by local based artists contribute to a sense of meaning and belonging?

Can art collections that depict local landscapes, or other subjects of nature impact positively on people’s wellbeing?



Audience responses to the discussion programme are displayed in digital plaques and placed on the Gallery's social media, linked to Cultures of Creative Health web and social media platforms. The responses are to become the bases of the exhibition interpretation, to be displayed adjacent to the fifty oil paintings. In this way, publics are directly involved in the meaning-making processes in curation, which is at the heart of the Blended Curatorial approach. The online exhibition *Collections of Creative Health* therefore is the culmination of the monthly displays and shown throughout December 2024.

Dr Janine Sykes is a Curator (Visual Arts, Kirklees Museums and Galleries) and Lecturer (School Art and Humanities, University of Huddersfield). She recently achieved a PhD formulating a new model of Blended Curation practice, designed to achieve high-quality public engagement. Her projects could be described as messy rhizomatic assemblages, where publics drive meaning-making with artists and curators.

Image Credits

Image 1-2: Digital plaques featuring public responses to the discussion programme, What are art collections for? Instagram. Design by A.N.D. Studio.

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Imagine this:

A white eighty-something year-old man rolls down the high street in his mobility scooter. A melodic sound (perhaps a piano or a harp) can be heard intermittently over the hubbub of the road. The man moves his arm, attracts the attention of passersby, makes eye contact and moves his arm more. As the scooter approaches you, you can tell that it is the man's movements that make the sound and, once you are next to the scooter, you can see a wooden box in the front basket. The scooter passes you by, whilst the smile on the man's face and the sound from the box linger a bit longer.

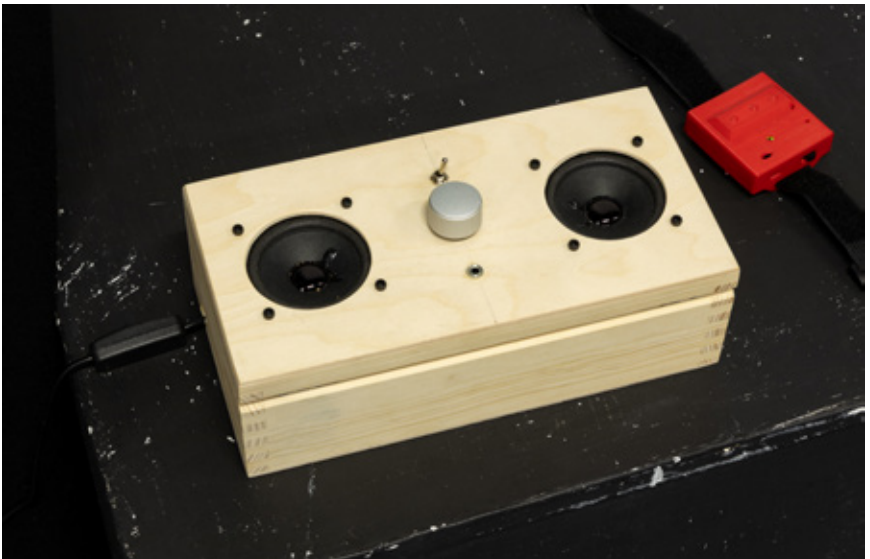
This is a description of Colin Hartshorn's account of his use of the echome box, a portable system for sound and movement interaction. Colin was part of a group of five older adults who took the box home as part of a knowledge exchange project delivered in partnership with Age UK Leeds in 2024. *Brand New Sense* (BNS), funded through a Participatory Research Grant, set out to create bespoke training and resources that would allow Age UK Leeds to incorporate echome in their activities. The project focused on the organisation's 'Ways to Wellbeing' programme, which supports adults aged 50 and over to 'improve their social, emotional, physical and mental wellbeing' (Age UK Leeds, 2024). The overall aim of BNS was to equip the Leeds branch with the necessary resources and know-how that would allow the organisation to continue using echome beyond the completion of the project and towards addressing its core commitment to the wellbeing of older people. BNS built on an existing collaboration with the organisation, which in the previous year had explored whether echome would encourage movement in older adults as part of an ESRC Healthy Ageing Catalyst Award. The findings from this earlier project demonstrated not only that echome can encourage older adults to move but that the use of echome in groups can increase confidence, self efficacy and sociality.¹ Following the participants' request to continue working with echome, BNS intended to achieve 4 objectives: co-design a training package that would allow Age UK staff and volunteers to use echome in group settings and home visits; develop a set of bespoke resources that would enable service users to use echome at home; equip Age UK with the echome equipment; and evaluate the outcomes and identify pathways for further study. In this piece, I will focus on the second objective to reflect on the way older adults can be active agents within participatory programmes aimed at enhancing health and wellbeing.

BNS aligns with a Creative Health agenda, which seeks to mobilise artistic activities and participation in the arts as part of health and social care infrastructure. As a concept, Creative Health acknowledges that engagement with the arts is a fundamental aspect of human flourishing and can therefore be an important component of a healthy life and society (McQuade and O'Sullivan, 2023). As a policy, Creative Health sets out to integrate participation in creative activities within local health and social care systems (see for example the government led initiative in West Yorkshire to develop a 'Creative Health System'). Relatedly, creative ageing has been defined as 'an aging [sic] policy idea that focuses on highlighting the creativity

of older adults in order to prepare individuals and communities to manage old age' (Klimczuk, 2016, p. 608).

Although it might be self-evident that the exercise of creativity can be a catalyst for a fulfilling life, the mobilisation of Creative Health as a form of public intervention opens a host of questions. In her review of the 2017 Creative Health Report, Kate Phillips points out that there is still a lack of guidelines for good practice as well as agreed criteria for evaluating the impact of interventions. More importantly, Phillips identifies a tension between the instrumentalization of the arts as a 'Value For Money' mechanism for delivering social care and the inherent value of artistic practice, which may be independent of the person's health status. The arts, Phillips points out:

are not a noun (like a medicine to be applied in specific doses); nor are they an adjective (like exercise or eating, to be practiced within the bounds of moderation); but rather they represent an approach or attitude, and not a homogenous one. As forms of enquiry, expression and communication, they provide ways of engaging with and responding to the world. (2019, p. 22)



The problems of instrumentalisng a form of human activity that has intrinsic value become further pronounced when Creative Health projects are subjected to evaluation. On the one hand, the consolidation of Creative Health in local government structures depends on demonstrating its impact against a set of measurable and universal criteria; on the other hand, interventions are localised and, as Phillips notes, the artists who are called to deliver these programmes are often guided by what 'works' for the specific participants in a specific setting (2019, p. 25). It seems

therefore that Creative Health operates on two levels simultaneously: as a top-down initiative which seeks sustainable models of integration of the arts in health and social care systems and as a grassroots intervention which manifests in different artistic forms and models of participation.

In their systematic review of the health benefits of music and dance, Sheppard and Broughton hypothesise that this discrepancy might be due to the different epistemological paradigms within which health and the arts respectively operate: 'health sciences, and by extension health policy and research, require evidence that interventions are replicable, scalable, cost effective, and maintainable or else they are ineffective and disregarded. Art programs, on the other hand, tend to be more flexible and responsive to the participants and the context at any given time' (2020, p.15). The sustainable development of Creative Health, then, is premised on the successful resolution of this inherent tension. The question that arises is in what ways these two different strata (the health policy oriented one and the artistic/participatory one) can talk to each other and what kind of outcomes can be permitted as evidence of a successful intervention. Although this question merits a longer discussion than the one afforded here, I would like to propose an additional component to the policy-delivery/health-arts dyad. I would argue that a means for tracing the way Creative Health interventions become actively operative in the lives of those they are expected to benefit is to gain a better understanding of what the participants actually do during, and as a result of, these interventions: in what way can/do participants exercise their own agency within a given intervention? And what kind of preconditions (artistic practices/ conceptual frameworks/material resources) are required to create such potential? This piece therefore is offered as a short example of the way a participant's response within a Creative Health project opened new possibilities.

From Moving to Sounding to Being-with and Back

echome is a wearable technology that enables the creation of sound through self-determined movement and a participatory pedagogy that makes possible the use of the technology in group and one-to-one settings.² Sound and movement interaction through digital interfaces traverses a diverse set of disciplines and cultural activities, including experimental music, sound art and installations, video games, sports training and rehabilitation. Nonetheless, research projects and prototypes tend to be delivered within disciplinary protocols, which can arguably limit their impact. As Bevilacqua and colleagues (2016) note, research projects and technologies developed in the medical domain tend to approach sound as a form of biofeedback that gives information on sensorimotor activity and as such pay little attention to the aesthetic dimension of the sonic output. Projects within artistic settings, on the other hand, prioritise the artistic product and are not concerned with the possible benefits on sensorimotor function. When sound and movement interaction is viewed across the different fields in which it has evolved, two trends become evident: a tendency to focus either on the movement or the sound; and an approach that would fall either within a biomedical or artistic paradigm and, consequently, classifies users as artists or patients.

It could be argued that the prevalence of this dichotomy in sound and movement interaction reflects a similar division in Creative Health settings, between artists, who are employed to deliver interventions, and older adults, patients or people with disabilities, who are given the opportunity to participate. For example, in their scoping review of the benefits of the arts and creativity on ageing, Galassi and colleagues define creative dance 'as a particular form of dance that does not require years of training and lacks predetermined performance standards' (2022, p. 8). Galassi et al draw their definition on Lewis and Scannell's earlier research in creative dance which argued that the lack of predetermined standard and the freedom to engage with self-determined movement made the art form accessible and 'enable[d] people to develop pride in what their bodies are capable of doing rather than focussing on what cannot be done[...]' (1995: p. 156). Although this way of approaching dance might make the practice of the art form more widely available and more satisfying, there is a danger that creative dance, and by extension Creative Health, is evaluated in terms of impact whereas professional artistic practice is evaluated in terms of artistry. Aula and Masoodian point out that in creativity literature this distinction is often cast in terms of 'Big-C' Creativity, which focuses 'on the individual capacity of recognized creative professionals' and 'little-c' creativity, which captures creativity in a 'broader everyday' domain (2023, p. 4).

Despite the prevalence of this understanding of creativity, such an approach leaves us with no framework for evaluating the artistic dimension of Creative Health practices and equally fails to appreciate that professional artists may also be subject to ill health, or indeed the ageing process (not all artists follow the popular myth of dying young). Moreover, a formulation of Creative Health in terms of a distinction between participatory and professional practice can propagate underlying assumptions in terms of who holds artistic capital and impose expectations on the forms of expressions that are desired or permitted. In response to these tensions, Aula and Masoodian propose that 'creativity can be understood as a socially and culturally constituted process, surpassing the divisions between exceptionally creative individuals' (artistic) works and creativity in everyday life' (2023, p. 4) and ask that research on Creative Health extends beyond the study of specific interventions in institutional settings and 'into creative experiences of healthy older adults who are not themselves professional artists' (2023, p. 13).

Against this background, one of the priorities of echome was to combine insights from the artistic, medical and research fields in which sound and movement interaction has so far taken place; develop a form of pedagogy that places equal value on the movement and on the sound; and prototype a technology that could make sound and movement interaction widely accessible and applicable to diverse contexts. echome evolved over a series of projects since 2019, which involved facilitator-led sessions with a wide range of people. BNS continued this work but introduced an important component. A small group of Age UK service users, most of whom had an experience of working with echome in the facilitator-led sessions offered the previous year, took the echome box home. Apart from the participants' prior experience of working with echome, no further instructions were given, since the main aim of this phase was to establish in what way the participants would make use of the box:

how often, in what way, at what point in the day and in relation to which aspect of their daily lives. Within that framework not using the box would also be a valid outcome. The intervention lasted from March to June 2024 and during this time I met the group every 4-6 weeks to gather feedback. The group also contributed towards the development of a booklet, designed by Vanessa Damianou, which included instructions and ideas for activities for using the echome box at home, informed by the participants' experience.

In terms of knowledge exchange, BNS built on the participants' previously acquired competence with and understanding of echome. In the previous year, the participants' engagement with sound and movement interaction was guided by a facilitator, and was presented as part of the commitment of Age UK, Leeds to offer service users opportunities for physical activity and social interaction. By that point, even though they did not use the term, the participants were on board with the notion of creative ageing/creative health, since they demonstrated an appreciation of physical activity and social interaction as ways to maintain physical and mental health. This background continued to be operative in this phase, but the participants were given free rein to determine their own use of the box and consequently create their own meaning. Indeed, from the feedback in the first few weeks, it became clear that the participants not only worked with the box in unanticipated ways, but also extended the use of the box from private into public spaces.³

Let's go back to Colin. In an interview following his participation in the project, Colin talks about, and then demonstrates, how he connected the echome box to his mobility scooter and went to do his daily shopping. When I ask him why he did this, he tells me that he likes to be 'mischievous': *'people said "what's that noise?" And I started moving my arms more. "Where is it coming from?" And then they realised it was coming from me. But I was egging them on'*. Given the discussion so far, how can we understand Colin's decision to connect the echome box to his scooter and take it on the high street? And is such act in any way meaningful as a form of evidence of creative health?

The first thing to note is that Colin incorporated the box within a specific aspect of his routine. As he recounted, he used the box at home during the day or evening as a way to include some physical activity in his daily life, and as a means to extend the duration of physical activities he would normally do as part of his daily chores. As he said in the interview, the duration and frequency of the use of the echome box would depend *'on his temperament'*. The decision to include the box in an additional activity outside his domestic environment suggests that what was important to him was not only to use the box but also to *be seen* using the box. One recurring theme that has emerged from interviews with older adults who have worked with echome is that the experience of making sound out of one's movement operates at least on two levels at once: on a personal/phenomenological/ sensorimotor level the sound serves as a form of stimulus for the movement. However, because this sound can be heard by others, inherent to the experience of sound and movement interaction is an intersubjective /social dimension.⁴

In phenomenological terms, it could be argued that the making of sound introduces another sensory component to the chiasm between subject and world. If, according to phenomenological theory (Jenkinson, 2017), we are at all times both the subject of our own perception as well as the object of the perception of others, and if, in public spaces especially, this relationship operates primarily through the visual sense (we look at others and we are looked at by others), the use of sound in a public space becomes an additional register through which this interweaving relationship can unfold. When sound is produced by the movement of a body that has been *a priori* positioned as old/disabled/injured, the making of aesthetically pleasing or loud sound offers new ways of becoming bodily present and taking up space.⁵ Colin's stroll down the high street constitutes not only a form of participation in a Creative Health project; it (quite literally) mobilises sound and movement interaction towards redefining the way he is encountered and (mischievously) complicates the image of the old person in the mobility scooter.

Conclusion

If we look at the intervention in this way, the question of whether echome encouraged movement - which in a Healthy Ageing/Creative Health context is of primary importance - becomes a secondary concern. Rather what becomes significant is to trace the way the engagement with the technology opened new possibilities for being in the world. It could be argued that the value of Creative Health may not lie in relieving participants from symptoms of disease (although there is evidence that this is possible too).⁶ Rather, what is perhaps more valuable from a theoretical and experiential perspective is whether and how opportunities to exercise one's creativity make possible novel ways of relating to oneself and one's environment. In other words, my argument is that the value of Creative Health may not only lie in (and be measured in terms of) reducing dependency on health and social care services; it can also manifest as a potential to free the participant's experience from a biomedical, ocularcentric gaze, which can reduce bodies and persons to the limits of a pathology or condition. Especially in relation to the ageing process, which is often medicalised and stereotyped, creative health may offer new forms of definition (of age, the ageing process and older adults) which allow the participants to look at themselves and be looked by others in fresh ways.

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Image credit

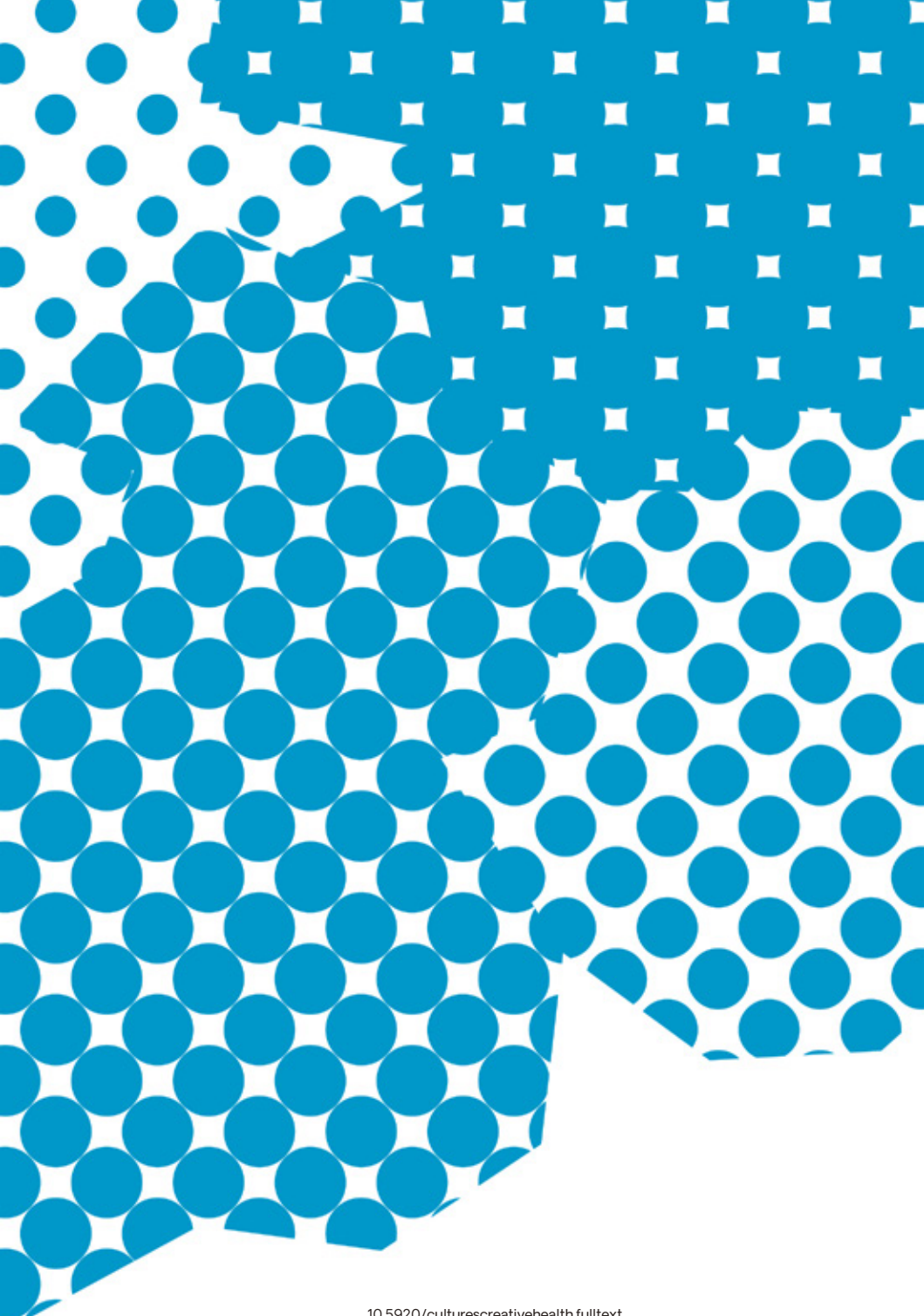
Image 1: echome box and sensor. Photograph by Jules Lister.

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Endnotes

- 1 A short [film](#) captures the experience of the Healthy Ageing Award project participants <https://www.youtube.com/watch?v=jHoHthvKYLw>
- 2 For more information see echome <https://echome.leeds.ac.uk>. The box was created by Kingsley Ash.
- 3 A film documenting the experience of 4 users was created at the end of the project and can be viewed here: [echome at home https://www.youtube.com/watch?v=jzAbGXVOzI](#)
- 4 See for example the film on the ART-thritis project, which explored the way echome could be used by older adults living with arthritis as a way to encourage movement and as a means to express their experience of the condition <https://echome.leeds.ac.uk/art-thritis/>
- 5 Archibald and Kitson (2019) point out that ageism as a form of stereotyping and discrimination persists.
- 6 There are several scoping and systematic reviews looking at projects across different art forms. See for example, McQuade and Sullivan 2023; Galassi et al 2022; Sheppard and Broughton 2020; Archibald and Kitson 2019.



Healing Cultural Identity through Nature and the Non-Material; Whispers in the dark

Nyakeh David

Multi-Cultural Identity

It is readily known that we live in a multi-cultural society with communities that contain individuals with different and diverse cultural backgrounds. What is often omitted in the understanding of multiculturalism, is the multitude of cultural identities we as individuals possess. Our gender, race, age, location, occupation and hobbies (to name a few) are all separate and intersecting identities that connect us to a community of people whose interconnected identities with each other creates cultural and cultural norms.

A family, for example, is a type of community that has its own cultural norms. Members within that family, as individuals, belong to other communities such like the workplace, school, extra curriculum groups and friendships. These external spaces all have a unique cultures that shapes the identity of the individual (Y Studios, 2020, Fearon, 1999).

Members within that same family also belong to internal communities based on their gender, sexuality, age, ethnicity, with different cultural norms that influence a person's behaviour and world view. When considered a person's internal and external cultures, we begin to gain a full picture of who that individual is, what has influenced their perception of reality, and what cultural norms they align with (Gupta, 2023). The coexistence of multiple cultures (Multiculturalism) doesn't just happen in external spaces, it is a fact of human existence and our individual identities. You could argue we all possess a unique culture (way of being) that is individual to us and also an amalgamation of the communities we belong to (Wren, 2002).

Humanism

Despite individualism and our unique cultural perspectives, human being all shares the cultural experience of humanity. Human subcategories, cultures and labels have a well-documented history of being used by oppressive forces to divide the human experience into binaries of: "us vs them", "right vs wrong", "civilized vs uncivilized" "Black vs white" (Durham, 2015). This cultural divide prevented the sharing of information across cultures, as certain cultural experiences were less "educated" than others (Shorter, 2003). This fabricated dismissal of cultural information created a culture of western ideology that dominated the globe.

Regardless of the obvious ethical issues of colonization, the vastness of reality cannot be encompassed through a singular dominant culture, which indoctrination is rooted in the violence, and hatred of cultural difference. To truly understand reality and the human experience, we need to adopt a multicultural framework that draws from cross-cultural knowledge and intersecting beliefs.

Cultural Differences

Maslow's hierarchy of needs (1943, 1954) functions as a good introduction to multicultural frameworks. While we might all share fundamental human needs

like the psychological need for food, shelter and clothing, as individuals across different cultures, we meet these needs differently. The cultural food of one country may differ from another; the ingredients, preparation and taste preferences might be entirely different, however both foods fulfil the fundamental human need for sustenance. This thinking can be applied to all 5 tiers of Maslow's 'Hierarchy of Needs' and reveals the true nature of cultural differences as a manifestation of humanity through a unique cultural lens.

When cultural differences stop being a divisive game of "right vs wrong", we can begin to engage in cross-cultural understanding to develop a stronger concept of reality. By cross-examining the beliefs, understandings and behaviours of other cultures we expand our understanding of what is possible, what is real, and what we believe. For example, by learning from a person from another culture, we can learn new cooking techniques, flavour profiles or useful ingredients that exist outside our cultural norm. Learning this information doesn't just affect the individual, as the expanding cooking (and the knowledge that comes with it) dissipates into the local community (family, friends, colleagues?). Over generations this can create a cultural change, and we can see evidence of this through the inclusion of Indian curries in British diets.

While food is a useful anecdote to understanding the concept of cross-cultural knowledge, the full scope of multiculturalism provides the foundation for dismantling the dominant culture of colonial, imperialist, white supremacist, heteronormative, capitalistic, patriarchy ever-present in lives of humanity. To accomplish this however, individuals need to recognize the cultural multitude within themselves and others, decentering any cultural norms as the objective truth (or as more correct than another) and frequent spaces that allow for the sharing of cultural information.

Inter-Arts- Nature of Play Exhibition

As part of my research 'Blackness, a Cross-Cultural Recipe for Collective Healing: Identity, Community, and History' I wanted to create a place of cultural healing and expression where people from different backgrounds could talk openly about who they were (their cultural identities) and their relationship to community. An opportunity arose as part of the *Nature of Play* exhibition hosted by Inter-Arts. Founded by Fiona Love Pattison, Inter-Arts is a collective of artist and creatives who explore the relationship between nature, mindfulness and play through meditative, expressive and self-reflective art making. As part of this brief, Fiona led five creative workshops to develop our connection to (local) environments, play and ourselves. At the end of these workshops, we took inspiration from what was made and used it to create the *Nature of Play* exhibition, which took place during mental health week. To celebrate this, Fiona suggested we all host an event to connect to an audience, expand our practice and highlight the themes of our work.

While I was in collaboration with Inter-Arts, I was simultaneously developing an interest in the non-material: what exists but we cannot see or touch. I stumbled upon this concept from 2 separate but interconnected cultural sources: western mindfulness practices and west African spirituality. The non-material can be

understood as more westernized concepts as our thoughts, memories, dreams and inspiration but in west African spirituality, the non-material can also refer to entities like the ancestors, spirits, or deities. While in the western world, communication with the non-material is associated with journaling, meditation and sleep, I was drawn to the west African practice of using rituals to be in relationship with the non-material.

After explaining my practice and current interests with Fiona, I was pleasantly surprised at how easily west African ideology connected with her. The concepts of rituals and the non-material were easily understood, and it became evident very quickly that she engaged in a similar practice under a different cultural lens. This was one of the first examples of contrasting cultural norms (aesthetics?) being rooted in similar ideologies, pointing to a universal truth understood across humanity. To make sense of the non-material humans create stories, folklore, mythology and scientific theories through distinctive cultural lens to explain and develop a connection between the material and the non-material. Whilst Fionas cultural lens differed from my own, she was still able to provide guidance and support in using the non-material to help create a place for cultural healing and expression, through a universal understanding of the relationship between the material and the non-material.

Places Of Cultural Healing and Expression

With the cross-cultural guidance of Fiona, and the technical support of Khal Botterill, I was able to host the event 'Whispers in The Dark' as part of Mental Health Awareness week and the *Nature of Play* Inter-Arts festival. The aesthetic roots of this event were based in the west African concept of "the village and the forest". The village is a space for public and mundane life, where there is a sense of a sense of safety, social order and structure. The village can be viewed as the material world; the secular world in which we see and interact with. The forest however is juxtaposed as a private sacred space away from humanity. Unlike the village, the forest is seen as more chaotic as it is both a place for finding nourishment but also presents several unpredictable dangers (Jedrej, 1974). The forest acts as a border between the human world and the spirit world, and those who enter it are likely to come in contact with non-material entities like spirits or ancestors (Jedrej, 1986).

New initiates of west African religious groups (secret societies) are brought into the forest to learn about the non-material and how they can invoke them for the benefit of the village. After several years of education, initiates will rejoin the village as fully instilled members of these societies, sworn to secrecy and dedicated to maintaining a healthy relationship with the non-material.

While these concepts and ideology of the village and the forest are drenched in west African cultural lenses, the cultural belief of entering a private space for the benefit of public spaces is not unique to this cultural expression. In the west, for example, psychotherapeutic and wellbeing practices, invite individuals into private spaces to learn and build healthy relationships with the non-material, their thoughts, feelings and mind. After extended time in psychotherapy individuals learn behaviours that not only support them, but the public space (the village) they reside in.

Entering The Forest

Interestingly enough, the west African connection between the forest and the non-material is echoed through the western connection between the natural world and mental wellbeing. The human connection to the natural world is a universal experience and stretches beyond cultural barriers. During a CPD event hosted by hoot creative arts as part of the Cultures of Creative Health programme (Community Co-Creation Techniques: 'Art in Groups'), nature was listed as a creative prompt that helped promote cross-cultural interaction and minimize cultural bias. Nature has a calming effect, grounding us in its beauty and decentering the capitalistic machine. Regularly spending time in nature has been found to improve mental and physical health as well as the connecting individuals together (Mind, 2021). By building a relationship with nature we also build a relationship with the non-material which is encapsulated in the west African belief of the forest. In this way, the forest became the perfect location for my work and event to place in.

Due to several limitations, I couldn't physically invite an audience into the forest to engage in non-material work. Instead, I opted to invoke the imagery of the forest, through the usage of visual, written and verbal language:



Visually, I created 3 paintings, 1 of the forest and 2 for poems I had written. The painting 'Balance in The Dark' featured a runic sigil in a forest clearing at night, the sigil I created used cross-cultural understanding of magic (or hale) and represented the concept of unity and harmony. It stood as both a protection for the space, as well as a direction for everything that was created/existed in the space, moving it all towards unity and harmony. The painted poem, 'Manifesto of Change' incorporated a forest river and the colours of the Sierra Leonean flag to make reference to the spirit world which (in west African) is entered through bodies of water. The poem spoke to my identity as a Black queer and the fluid nature of life. 'Can you feel it', the other painted poem, spoke to the repeating and circular nature of life. In connection to the rest of the work, it invoked the imagery of the forest through reference to "the swaying of trees" and "the way the wind weaves". The poem was

carved/written using a stick and looks like a poem written in the dirt. Interestingly the narrator of this poem is not me (like 'Manifesto of Change'), instead the narrator is some non-material entity explaining the interconnectedness of life "the people who died, the children who cry".

Supporting these art works was 2 interactive pieces that ask individuals to reflect on stories of wisdom and kindness. During the day these art works, and the space they resided in belonged to the village. But during the 'Whispers in The Dark' event that all changed.

Whispers In The Dark

As an introduction to the event and an act of placemaking, I started 'Whispers in The Dark' with a grounding meditation. By incorporating sound, breathwork and the imagery of the forest, I took those in attendance from the public village space of the gallery to the private forest space of the event. I provided some context behind my practice, and identity and asked each in attendance a question relating to their own cultural identity, using the passing of a stick to dedicate who would be speaking. As this event was being put on for Mental Health Awareness Week, I wanted everyone to have an opportunity to express themselves and discuss how they see themselves represented in larger society. This meant having an open conversation that allowed for positive and negative experiences to be shared without judgment.

I did this by asking them what creative outputs influenced their sense of identity, community and history and how creative outputs could better reflect their multiple identities. Everyone then took turns talking about their chosen creative output and reflected (verbally) on the similarities or differences between other people's chosen creative outputs. Despite initial differences regarding chosen creative outputs and understandings of identity, each person was able to draw parallels between the importance of creative works in forming their understanding of identity, community, and history. Some reflected on their race and gender as a key factor for their identity while others related their occupation or disability to their identity, community and history.

The conversation eventually shifted from how these creative outputs supported their identity to how contemporary culture failed to recognize elements of their identity. These failures were often due to the lack of intersectional identities represented in contemporary cultural outputs such as womanhood and invisible disabilities or Blackness and neurodiversity. This cross-cultural conversation provided opportunities for individuals to express their identities and to be seen by a community, whilst naming the problems with wider contemporary representation- a lack of complex human identities- due to the slow development of social awareness of intersectionality at the hands of capitalist organisations.

In Conclusion

'Whispers in The Dark' was a cross-cultural event committed to the development of intersectionality and cross-cultural understanding. Through the sharing of experiences, identities and cultural barriers (via oral traditions), participants co-created

new understandings of their identity, community and history. By reflecting on how creative outputs influence and prompt aspects of our identities it can empower us to ensure portrayals of identities are intersectional in nature and include all types of human's existence. This requires developing our ability to engage with different cultures, viewing them all as equal and worthy of consideration. This is particularly hard as the dominant culture of colonial imperialist, white supremacist, heteronormative, capitalist, patriarchy promotes certain cultural expressions over others. As this culture dominates popular media, it is a collective responsible to divest from these cultural norms and create a new dominant culture. Like with psychotherapy or new initiates in the forest, it will take a significant amount of time to see noticeable change. Singular events like 'Whispers in The Dark' will not provide a solution to collective struggle, instead we need to continuously create these places of cultural healing and expression to help facilitate cultural change and an expanded (cross-cultural) sense of community.

Nyakeh David is a black and queer artist exploring the intersection between community, ritual, and wellbeing. As a multi-disciplinary artist and storyteller Nyakeh uses sound, colour, and texture to invoke memories of the past, with a deep interest in psychology, spiritualism, and education. Nyakeh's practice is an invitation into their internal world; an opportunity to engage in cross cultural understanding and embrace difference in all its forms. Nyakeh is a postgraduate researcher in the School of Arts and Humanities, University of Huddersfield.

Image credit

Image 1: Image 1: Painting from "Trying to Make Beyoncé Proud" exhibition. Photograph by Laura Mateescu.

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Introduction

This piece provides a short overview of an inclusive and co-produced intellectual disability project, which included input from service users, support workers, heritage professionals and volunteers, and university staff and students. It is one of a series of intended publications that will arise out of the collaboration, but this one focuses on the contributions of two staff, one History and one English, and three final year undergraduate History students. Each co-author reflects on their motivations and rationales for being involved in the project, and their roles in contributing to Creative Health outcomes.

At the outset, there are two important caveats that we need to be clear on. First, this project was not conceived as part of the Cultures of Creative Health programme. Its antecedents and its funding, described below, pre-date it. The opportunity for Arts and Humanities staff and students to work closely and in partnership with those in the health and social care sector, however, serendipitously sit neatly within its fundamental values and place-based initiatives (Percy-Smith et al. 2023). Second, and perhaps more importantly, the authors of this chapter are cognisant of the fact that to write about (intellectual or learning) disability without input from those with lived experience can be problematic. The slogan ‘nothing about us, without us’ is an important reminder of the activist voices within the disability movement clamouring to reclaim their own histories and tell their own stories (Charlton, 1998). This is addressed to some degree by one of the contributions below and it is something some of us have addressed in other publications (Ellis, forthcoming; Ellis and Coleborne, 2022; Ellis, 2017). This chapter, however, is driven by other important and overlapping imperatives, including the denuding of arts and humanities generally by several governments in the West, and the crisis in university funding in the UK which has seen cuts to courses including History and English, most notably in post-92 institutions. Within the context of these attacks, we want to demonstrate the vibrancy and creativity of these subjects and showcase what they bring to the field of Creative Health. Importantly, however, the contributions below unpick a multiplicity of rationales and motivations that touch on pedagogy, public history, academic research and creativity. Moreover, while they focus on some of the positives of projects of this sort, they also highlight some of the ongoing challenges of working in partnership.

Terminology Used and Images Shared

As Simon Jarrett and Elizabeth Tilley point out, (the history of) learning disability brings with it ‘a bewildering process of rapidly changing terminology’ (Jarrett and Tilley, 2022). While we started as a learning disability group, discussions with some service users, and insights into their preferences, encouraged us to also use the term intellectual disability but there was no consensus. This helps to explain the title of this chapter but much of the literature that informs it is still focussed on learning disability and for that reason we use this term and intellectual disability interchangeably.

Background to our Intellectual Disability Project

Our starting point was a University of Huddersfield Knowledge Transfer Partnership (KTP) with Pennine Heritage, a community organisation based in Hebden Bridge in the UK. The KTP includes plans to extend educational and other engagement and outreach activities taking place at Pennine Heritage's Birchcliffe Centre. With a focus on 'heritage', the potential for this project to contribute to Creative Health initiatives is huge, and so too is the place of arts and humanities in that process. Indeed, what has become known as the 'health humanities' has seen an exponential growth in the UK, parts of Africa and Europe, Australia, Canada, China, India, and the USA in the last few years, supplemented by developing networks and bespoke funding streams (Crawford, 2020). Moreover, research suggests that an 'active engagement with the arts, culture and creativity is beneficial for the health and wellbeing of us all' (National Centre for Creative Health, 2024). In this case, when given an opportunity to work with a learning or intellectual disability group and draw these themes together, the KTP offered a venue and the potential to create something in partnership with all its stakeholders.

That opportunity came from a discussion between Rob and Gerard Wainwright, the Day Centre Lead at St Anne's Community Service. In 2022, Gerard was awarded the Royal College of Nursing's *Learning Disability Nurse of the Year* award. At the time of their first meeting, he was working on *Remembering Stansfield View*, a public history of a long stay facility for people with intellectual disabilities in Todmorden, West Yorkshire (Anon, 2022). As a result of that discussion, Rob and Gerard conceived an outline pilot project that would explore the history and heritage of Hebden Bridge and its environs. This starting point enabled us to build in creative activities in each session and draw inspiration and inputs from the team as a whole. This is not the only project in the area with themes of Creative Health and wellbeing but it represents a good example of the what the arts and humanities, and specifically how History and English can contribute to those initiatives (National Centre for Creative Health, 2024). Our group would meet four times and its membership would include four learning/intellectual disability service users, support staff from St Anne's, staff and volunteers from Pennine Heritage, a Historian and an English lecturer from the University and four final-year undergraduate History students. The co-produced programme developed over time with six, rather than four sessions and, later, a rolling programme which is ongoing at the time of writing. These extensions came from a will within the group to keep things going with suggestions for activities and a focus of co-produced activities coming from the various members. In each case we used Pennine Heritage's assets (historic building, landscape, and archive) to develop creative outputs.

Rob, some theoretical and practical considerations:

I describe myself as a (public) historian of mental ill-health and disability and beyond the opportunities enabled by the KTP, there were a series of other reasons why this collaboration was so appealing. Jarrett and Tilley have described three 'waves' of medical, social, and cultural histories of learning disability history, while making a claim for a new fourth wave in which people with learning disability make their own histories (Jarrett and Tilley, 2022). Impact and engagement agendas push

academics to work with communities and individuals beyond Higher Education but I have a track record of co-produced and collaborative projects that pre-date this. I see myself as part of a longer-term trajectory that dates back to at least the 1980s of mental health and learning disability historians that want to use their historical research to inform and influence what is happening 'now' (Ellis and Coleborne, 2022; Ellis, 2017). Some of the projects I have been involved in have explored, for example, changing paradigms of treatment and 'care' but others have provided opportunities to look at the past more generally and this was the focus here.

Often, as in this case, the chance to be involved was facilitated by funding. The longer-term sustainability of such activities can be difficult without it but I try, wherever possible, to say 'yes' to such opportunities. My feeling is that my place in them has made me a better historian. Rather than looking at paper and archival sources alone, it has allowed me to witness some of the personal impacts of learning disability and mental health policy and practice which in turn has shaped some of the research choices I have made. On an individual level, I enjoy the team working and problem-solving aspects and the chance to look at the past in new and different ways, learning from the people I work with along the way.

Wherever possible, I have invited teams of undergraduate and postgraduate students to contribute to and learn from such impact and engagement activities and it was the same here. Just as I have learned from people with lived experience of learning disability, so too have I witnessed the positive impact students can make. This collaboration offered an important opportunity for them and me to contrast some of the theoretical 'waves' of history that we explore in my specialist third year undergraduate history module, and to allow insight into learning disability in the 21st century. Working as a group I was hoping that we would be able to destabilise 'what it means to be (or to be labelled) as learning disabled' but also to highlight the positive role that (soon to be) Arts and Humanities graduates can make to cultural and creative activities (Jarrett and Tilley, 2022). Some of those creative outputs are detailed below but I was also driven by the potential to add value to their CVs, job and post-graduate applications, and their longer-term 'employability'. On a very basic level this meant expectations that the student team would be friendly and supportive, and prepared to work closely with the whole group. The expectation was that they would be active members of the team, getting involved in activities, supporting the members of the group that had learning disabilities and their carers, something they achieved with unsurprising ease.

Iona, Learning From the Past, Sylvia Plath and Inclusive Practice:

As a literature scholar, stepping away from the computer to think about the application of my research on Sylvia Plath (the well-known twentieth-century author who documented her experience with psychiatry in her fiction), mental illness, and disability studies was a whole new experience (see Murphy, 2022; Murphy, 2023). In this case, I had to consider how my understanding of creative activities, delivered as part of a program of what might have been known as occupational therapy, could work with a group that included people with intellectual disabilities. Occupational therapy has a complicated and sometimes controversial history and

Plath hated it, but this section focuses on how an understanding of the pitfalls, as well as the positives, offers a creative way to engage service users.

On the face of it, occupational therapy and the creative activities within appear to offer positive outcomes. They can 'provide adults who have a learning disability with productive and leisure opportunities' (Haythorne, Cruz and Turner, 2022, p. 2); they can lead to a 'holistic understanding of disability' (Lim et al., 2018, p. 36); and they can challenge the one-dimensional portrait often painted of those labelled in such ways. By contrast, critics focus on the imposition of such activities by 'authorized disability gatekeepers' (Mitchell and Snyder, 2015, p. 41). The latter was certainly the case for Plath whose experience of occupational therapy was far from positive. She had taken part in activities including pottery and weaving but berated herself for being imperfect, and examples of that reappear in her 1955 short story 'Tongues of Stone' (Clark, 2020, p. 290-291). Based on Plath's stay in the McLean Psychiatric Hospital in the United States, the story follows an unnamed and institutionalized woman subject to in an 'ineffectual therapy which worsens her [the protagonist's] state of mind' (Murphy, 2022, p. 72). Rather than being a positive experience, she gets upset during occupational therapy and, as with the *Yellow Wallpaper*, the imposition of treatment only adds to her mental anguish. Her 'imperfect' attempts can be seen in Plath's prose 'her hands felt like clay, and she let the knitting fall in her lap and began to cry again' (Plath, 1979, p. 268).

The work undertaken in this project challenged some of the issues Plath felt in her experience of occupational activities, particularly the feeling of imposition. The purpose of our group was togetherness and enjoyment, not a regimented therapeutic group which can isolate people. Free choice was central to our project. Each session we designed took a historical approach, considering the local area, and then featured a creative, rather than an occupational activity. With an understanding of Plath's frustrations, the activities I suggested were friendship bracelets and an identity hand, an activity which involves drawing around your hand and decorating it with things that make you who you are. The decision to offer two different activities relates to equitable practice. Plath noted feeling inadequate during activities as she was not able to get the hang of it. Woven friendship bracelets could be tricky for some to create, which is why I decided to have a second activity on offer. Levelling activities is at the core of equity. I chose these two activities as whilst they are different in terms of skill-based application, thematically they encouraged the same concept: unity.

Ultimately, engaging with this project gave me space to see the real-life impact researching disability studies has. As with many Humanities based degrees, you often come up against the question "why *English Literature*?" The obvious answer to this is a love of the subject, but projects like this can provide broader and socially relevant answers too. Reading and analysing literature on disability has real world implications. Knowing the isolating effects unsuccessful projects can have, as seen in works like 'Tongues of Stone', captures the importance of having service users at the centre of thought when designing activities.

Milly, Public History in Practice:

My decision to be involved with this project was rooted in my love and appreciation for public history and its ability to make history accessible and engaging for different groups of people. I have previously spent time working at an archive so I hoped this project would help me to develop a broader range of experience within public history by allowing me to explore a higher level of creativity. The more informal nature of this project and the direct contact with members of the public facilitated this. I saw this as important because, when working at the archive, I did not get the chance to participate in many projects relating to public engagement. Before taking part, I hoped that it would help me to further understand the importance of making history accessible to a diverse range of people, including those with intellectual disabilities. This is particularly important for members of society that have previously been excluded from a vast range of spaces. Barton's 'emancipatory approach' to the study of disability can help us to understand this and he emphasises the importance of 'establishing relationships with disabled people' and 'listening to their voices' (Barton, 1996, 3). It also helped me to further understand how access to history, and knowledge as a whole, can empower individuals and how information can promote participation within public discourses. This project allowed us to explore our views on the history of Hebden Bridge and how the town had changed over the years.

For those that lived nearby, it allowed them to learn more about a history that had meaning to them, but it also empowered individuals to showcase their own interests as part of that process. This included talents like painting, pottery, and playing musical instruments. One thing I learnt when taking part in this project was the value of challenging perceptions that see academic history as more rigorous and more important. Throughout this project we were able to fully immerse ourselves within the history of Hebden Bridge using a range of interactive tasks. These hands-on activities acted, as what Gerard Corsane has described, as a 'vehicle for learning, inspiration, and entertainment' (Corsane, 2005, p. 2). In doing so, we have subverted academic history, what Ashton and Trapeznik have characterised as the 'hierarchical constitution of knowledge' and made them accessible and relevant (Ashton and Trapeznik, 2019, p. 52). Here we can again see how using public history as an educational tool can fill in the gaps of more traditional academic history as it allows us to make history accessible to everyone. In this case, it was making the history of Hebden Bridge accessible to a broad range of people who might not otherwise engage with the past.

Leonie, Theory, Practice and Creativity in Action:

As someone who aspires to work in the public history and heritage sector, searching for any form of experience was a priority for the final year of my undergraduate course. There has been encouragement from staff and the university more widely to explore future careers and work experience. History staff more specifically have encouraged the exploration of transferable skills from the course to a range of careers. However, as a history undergraduate, my aspirations are to encourage others to explore history in any way possible. In workshops at university, we have learnt different approaches to teaching, including group discussions, interactive

activities, and creative outputs and there were elements of that here too. Moreover, there was an opportunity to take part in the production of outputs other than what might be described as the 'usual' museum and heritage exhibitions and displays (Jordanova, 2019, p. 171). Our sessions had a loose structure to them, but there was always room for adaptation and it was good to be able to recognise the importance of trial and error. For a group that has aimed at creating our own public history outputs, the room for adjustment allowed a creative freedom and independence and this project has enabled me to reflect on my own strengths and weaknesses and develop my own interpersonal skills. The most rewarding aspect of this project, however, has been the ability to provide a group of underserved adults with connections to history, to creativity, and to a community. This is important because population estimates suggest that there are 1.5 million people in the United Kingdom with a learning disability (Mencap, 2024). Despite the United Nations stating in 2006 that any person with a learning disability has a 'fundamental right to full and active participation and inclusion in society,' this is not necessarily a reality (Mencap, 2024). Many people with learning disabilities still face social boundaries, discrimination, and even exploitation. This includes social exclusion, unwelcome public behaviour, and unequal treatment, and our project has tried to address some of this by providing a safe space for interaction, education, and creativity (Scior & Werner, 2015, p. 5). Crucially, however, these were co-produced activities drawing on longer-term trajectories of shared authority (Ellis and Coleborne, 2022, p. 137). My contributions to this were to lead a cupcake decorating activity with the other students, after we first explored the history of food within the local community. In partnership with one of the other students, Lockie, I also developed some team sports activities including an obstacle relay race, and a game of chair-football. I had never had any involvement in a project like this before, but it has shown that there are many different careers that can stem from a history degree. The project has provided a place to discuss history, to pose questions to each other, academics, and non-academics, and to create historical outputs individually and collectively. It has been an enlightening project to be a part of, where history and creativity were brought together, but also because of the opportunity to form friendships and provide a safe space for all. This is a project that should be seen more widely across the United Kingdom.

Noah, the Personal and the Practical:

I wanted to participate in this project because of my socialism, my autism and of course a sprinkling of my love for history. When I was younger many initiatives were proposed to me to try and get me engaging with society more, but I found them to be offensive and insulting. This project seemed different; it was based on respect. Wider society struggles to respect people with autism and learning disabilities as over 2,000 people are currently incarcerated in psychiatric facilities in England, many have been detained under the Mental Health Act as they can be sectioned despite not having a mental health condition (Cotterill, 2024). Hearing stories from one of my fellow participants was redolent of what we learnt in Rob's Mindset's module, notably the longer-term challenges faced by people with Learning Disabilities in the 21st century and the dangers of studying history in a Whiggish fashion. One of the team blamed benefit cuts by the then Conservative government for the death of a

friend and felt angered more cuts would follow. This is significant because autistic people are less likely to be employed and employment services for autistic people often fail to understand, due to a lack of research, their needs (Raymaker et al. 2023). Our society is not accessible to autistic people, it actively oppresses us in many ways. This modern oppression has its roots in the disabling effect of the industrial revolution which reoriented society to revolve more around work and made this work less accessible by being more specialised and time pressured (Brigham, 2000). This project tried to tip the power dynamics away from neurotypical dominance, but there needs to be more awareness to bring about meaningful change.

This project chimed with my values but it is important not to be too triumphal about it. Simon Jarrett argues that people with Learning Disabilities ‘previously known to their community and informally supported by it, (are) now paraded back as a strange, exotic outsider’ (Jarrett, 2015, p. 110-111). While the intention was not to parade people with Learning Disabilities, the sentiment of this quote remains important as we tried to function as a group within the community. During this project I questioned whether our group was truly part of the community of society and welcomed by it or merely tolerated by it as a separate othered group. One of my most uncomfortable memories from the project was part of the group being shushed and told off for making noise in a corridor as counselling was going on in that part of the building. It felt like our group was only tolerated in the Birchcliffe Centre, rather than welcomed unconditionally. Also, when we went on trips out into Hebden Bridge we all wore our Pennine Heritage lanyards with name labels on. To me it felt like we were a separate group, a visible other occupying their space rather than being equals within the community. I also felt uncomfortable in our first session when our group was forming into the community it became. A number of participants were not provided lanyards by Pennine Heritage, and while this was rectified for the second session it created a visible difference in the group of the lanyard wearers and the others. While these points may seem minor they left me feeling upset. Everyone needs to be on board in making society and history accessible to people with learning disabilities. Unfortunately, due to cuts at higher education institutions, there are fewer and fewer opportunities to create projects like this. From the gatekeepers of finance down to the individual on the street, everyone is involved in helping people with Learning Disabilities regain, or gain, their deserved place in our communities but we must be active to seize our place in our own communities and in our own stories.

Conclusions

This piece has given an insight to the ways in which those working in the humanities can contribute to Creative Health initiatives for people with learning or intellectual disabilities. It has shown that those taking part in co-produced activities may do so for different reasons but, with the right framework, there are possibilities for full and meaningful inputs. Moreover, in the spirit of co-production and shared authority, there were opportunities to learn more about the past, and learn more about learning or intellectual disability from one another. The demands of the Research Exercise Framework (REF) push academics to demonstrate the impact of their work on communities beyond Higher Education. Rob and Iona’s reflections

demonstrate some of that, but they also show knowledge exchange working in the other direction and the importance of responding to, and engaging with and valuing the contributions of people with lived experience. This was not just about learning disability, per se; however, it was also about the importance of local stories and local histories. In developing this project, it was this shared experience and understanding of local histories and the creative activities that created a sense of cohesion. As a result, this would not have been a successful project without input and direction from all its participants to ensure what we did was both meaningful and relevant, as well as being creative. We can see this in the passages by Millie and Leonie, both of whom came into the project with one eye on future careers in the history and heritage sectors. This is a reminder that if the arts and humanities practitioners are to make important contributions to Creative Health initiatives, we need to be aware of the multiplicity of motivations for involvement. At the very least, this project gave them insights into a different way of working and the development of those soft skills, so favoured by employers, were an important part of that. This is not to be triumphal, however, as Noah's very personal overview and his focus of some of the discomfort he felt are more important reminders of the value of consultation and discussion when developing future projects. In these cases, some of the issues raised were not exclusive to our group but they can easily be addressed to prevent unnecessary upset in the future. Finally, while we are wary of being too triumphal and too Whiggish in our assessments, it is easy to see the possibilities for a more prominent role for humanities-based initiatives in Creative Health programmes. As this article has shown we can use 'history as a tool for change' but we have shown that there are other benefits for the participants beyond Creative Health alone (Jarrett and Tilley, 2022).

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Millie Bentley is a former History student at the University of Huddersfield. Her long-term ambition is to work in the archives sector and she has volunteered at Sheffield City Archives and Pennine Heritage. She is currently a post-graduate student at the University of Liverpool.

Noah Kolinsky is a former student of the University of Huddersfield. He is now a trainee secondary history teacher. His research interests include European Jewish history, Holocaust studies, the history of communism and left-wing ideology in the c20th British history, and the struggle for emancipation for the neurodivergent. His dissertation explored the role of Jewish socialists' powerful action at the Battle of Cable Street.

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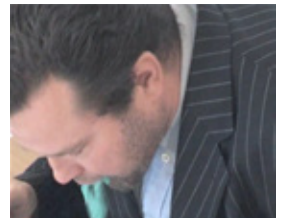
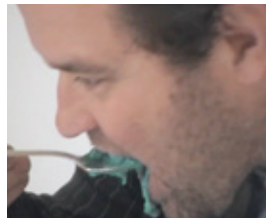
Position Pieces

Ultra Processed: Why the modern world makes you ill. (a polemic)
Professor Nic Clear

We is Technology

In 2002 I created a video installation for an exhibition in Berlin. Part of the video included a performance piece in which I wore a suit and was seated on small telephone table-seat which was set against a white infinity screen. In the video I eat a bowl of porridge coloured green with food colouring. As I eat the porridge it becomes more and more difficult to keep from gagging and I end up spitting the porridge out. Although I had intended to act my revulsion during the sequence the taste of the colouring was so foul that that I did end up retching.

The video was shot using multiple cameras, which you can see me turn on and off with a remote control, and edited in a choppy, non-linear post-continuity style that builds to the regurgitation sequence. The video was created as part of an installation called 'We is Technology' (Clear, 2002) and the video itself was an early iteration of a set of works that I have called *Dog Philosophy*. The project was intended to explore ways in which technology has pervaded every aspect of our daily lives, the green porridge represented the ubiquitous domestic technologies that we consume without a thought and to demonstrate the level to which such technologies physically invade our bodies and affect behaviour. We have become addicted to these technologies.



Ultra processed.

While the video was not consciously directed toward the issue of ultra processed food, the use of the green dye did suggest food as an artificial and unnatural substance, something that has become commonplace since the mid-1950's, and has accelerated in the first quarter of this century as industrial processes are used ever more routinely in every aspect of food production.

In a recent book titled *Ultra Processed People: Why Do We All Eat Stuff That Isn't Food... and Why Can't We Stop?* (2023), TV presenter and infectious diseases doctor Chris Von Tulleken makes a powerful argument around the unhealthy and addictive nature of industrialised foodstuffs bringing together recent research regarding the origin, effects and outcomes of what has become dubbed Ultra Processed Food or UPF.

The term Ultra Processed Food is itself not without controversy, it originated in the work of Brazilian epidemiologist Carlos Monteiro who in 2009, while researching dietary diseases made a significant link between the consumption of processed food and poor health. Monteiro's research showed that those families that ate relatively traditional foods such as rice and beans had much better health outcomes than those who largely consumed ultra processed foods (Monteiro, 2010). Following this Monteiro and his team developed the NOVA food classification which split foods into four classifications 1,2,3,4, with the first group representing unprocessed or minimal foods to the 4th group which are those that have undergone high levels of industrial processes. One of the most controversial of Monteiro's claims is that UPF is designed to be habit forming. We, as a society, are literally becoming addicted to it.

UPF has been described by Monteiro and his colleagues not as food but as 'industrially formulated edible substances' (Monteiro, 2010). UPF is distinguished by the addition of ingredients that have no culinary benefit, with many additives hidden in the list of ingredients, including bacterial slime (xanthum gum) that is used to improve the 'mouthfeel' of many sauces and condiments (van Tulleken, 2024). A partial list of UPF ingredients taken from the Soil Association website, would include: 'hydrolysed proteins, soya protein isolate, gluten, casein, whey protein, "mechanically separated meat", fructose, high-fructose corn syrup, 'fruit juice concentrate', invert sugar, maltodextrin, dextrose, lactose, soluble or insoluble fibre, hydrogenated or interesterified oil; and also other sources of protein, carbohydrate or fat together with other additives, and including flavours, flavour enhancers, colours, emulsifiers, emulsifying salts, sweeteners, thickeners, and anti-foaming, bulking, carbonating, foaming, gelling and glazing agents.' ([Soil Association](#))

Even though many diets may contain less fat and sugar populations are still becoming more obese, putting in train a future health crisis that will inevitably cost billions to address. One of the issues with UPF's is that they disrupt the metabolism and can nullify the bodies signals of fullness creating the conditions for overeating that rapidly turn into a further spiral of anxiety induced eating. Even though many UPF's are labelled low-fat, or low-sugar and have claims that they promote healthier eating options, Monteiro's results suggest the opposite.

There are many practical reasons why Ultra Processed Food has come to dominate the food industry: they give foods a longer shelf life, and they make a wider range of foods more available and are claimed as the desired outcomes, but the principal motive is the incessant desire to create ever cheaper and more homogeneous products while apparently maintaining diversity.

The central argument of Von Tulleken's book, following Monreiro, is that the role of UPF is primarily to reduce cost and boost profit by reducing the amount of natural source ingredients and with little concern to improve quality or health. Von Tulleken's arguments also makes connections to wider environmental concerns: the manufacture of UPF's is responsible for environmental changes such as clearing forests and introducing monocultures to ecological systems, UPF's involve huge levels of packaging and transportation, while the cost of UPF's is lower the longer-term price may be huge (Von Tulleken, 2024).

Ultra Processed People is written for the general public. It is not a specialist piece of academic research, yet the author is a highly experienced medical researcher and one of the attractions of the book is that its accessible style makes it suitable to develop analogies between the arguments around UPF's and many other aspects of contemporary life also affected by cheapening of materials and processes in the desire to boost profits.

There is a great deal of comment in mainstream media regarding the broken nature of many aspects of the economy: we are variously told that water, rail, power, health, education, and housing are all, like the food industry, broken. But from an economic perspective the system of UPF is working as planned; from an economic perspective the UPF system is performing optimally in its ability to maximise the profits of gastro-capitalism. The problem with the broken metaphor is that this radically misunderstands the metrics by which success is measured in the age of neo-liberal capitalism. Like UPF, the goal of the utilities and industries mentioned above, indeed all private and increasingly more public endeavours, success is not how well the services perform or the benefits that they afford society, but the financial returns that they pay to shareholders. Profit is the only sign of success, just ask the ownership of Thames Water.

This desire to simply extract as much surplus value from the system has been facilitated by a silent takeover of the economy (Monbiot, Hutchison, 2024), with all major political parties sharing an unquestioned belief in the ability of market forces to deliver the best outcomes.

One area where this conceit is particularly aposite is the built environment. Like food our towns and cities are a necessity, something we cannot avoid, and the goal of contemporary architecture and urbanism is not to make our cities better places, despite what architects and planners might tell you, but to create greater wealth for property investors. The goal of the architecture of neo-liberalism is predicated on capital accumulation not on social good.

Ultra processed architecture

'Of all the arts architecture is closest constitutively to the economic'

Frederic Jameson 1982

In his canonical essay 'Postmodernism: The Cultural Logic of Late Capitalism' (Jameson, 1982) Frederic Jameson maps out the explicit links between what he

then termed, following Marxist economist Ernest Mandel, as 'late-capitalism' but which is now more generally referred to as 'neo-liberalism', describing the types of space created under this economic system, alongside the impact this has on the architecture of our cities.

Jameson coined the term 'postmodern hyperspace' to describe a type of contemporary environment that has evolved beyond the typologies of traditional urban space; and how these spaces that are initially disorientating, as they use a different set of spatial and cognitive markers, are most importantly the privatised spaces of commodification and spectacle that are a literal manifestation of the new economic paradigm. Jameson even calls for us to develop 'new organs' to navigate these spaces, a need that has now been met by the ubiquitous geo-location technologies that allow the seamless navigation of these hyperspaces.

If contemporary property development is structured to make the maximum return, and if it is more profitable for buildings to remain empty or be demolished and the site left vacant then that is the outcome. At a time when we talk about a 'housing shortage' in the UK there are over 240,000 long-term empty residential properties (ONS 2021), a land bank capacity for another 658,000 residential plots (CMA 2022) and a further 170,000 empty commercial properties (Centric Community Projects 2020). While not all of these can be immediately turned into housing, the economics of scarcity and under supply will always maintain high values for those spaces that are on the market and it is easier for the 'populist' politicians to blame migrants, or laziness than to acknowledge that the system prioritises the accumulation of wealth over providing a basic human need.

While the property ownership cartel does everything it can to maintain its profits, an analysis of the buildings that are built share many of the qualities and tactics used in the manufacture of UPF, sometimes with catastrophic consequences. Buildings use materials to make them cheaper and quicker to build and less permanent, something highlighted to great effect by Dutch architect Rem Koolhaas in his essay 'Junkspace' (Koolhaas, 2002), the title of which clearly makes the link to food:

Whereas detailing once suggested the coming together, possibly forever, of disparate materials, it is now a transient coupling, waiting to be undone, unscrewed, a temporary embrace with a high probability of separation, no longer the orchestrated encounter of difference, but the abrupt end of a system, a stalemate. (Koolhaas 2002)

Fast-Food chains that exemplify the increased consumption of UPF have long been the cornerstone of many contemporary building developments and in the same way food has become ultra processed, buildings are more likely to be glued together than use mechanical means, gaps are plugged with foams and sealants rather than made to tolerances that do not need artificial filler. Even those fast-food chains that claim to be 'healthy' will still be using stabilisers, emulsifiers, artificial sweeteners and colourants. As with the architecture, same shit, different flavours.

Also, like food stuffs the environmental impact of the materials used in buildings is often disguised with the focus often on embedded carbon rather than looking at the carbon lifecycle of the product, especially transportation issues and the ease with which materials can be reused after their initial lifespan. The famous triangle of speed, quality and value for money, where you can only ever have two almost exclusively, favours speed and value for money with quality taking a back seat. And while there are projects where the financial imperative is not the only driving force, these are often vanity projects for the ultra-wealthy or showcase projects where the front end is of a higher quality but behind the often-paper-thin public façade you will invariably find ultra processed architecture.

However, this is not a call for a nostalgic return to traditional building materials, stone, bricks, steel, concrete and even the many uses of timber, which equally caused enormous environmental damage. Their production was also driven by the need to make the largest return on investment and of course many traditional buildings were constructed by exploiting its labour force, and anyone who has worked on a standard Victorian house can testify that cheap materials and shoddy construction would be used if these were available.

As with the consumption of UPF if things are to change the move away from ultra processed architecture will require a shift in the expectations of the current economic system to a belief that we need to create things for the betterment of people and society, rather than the desire to create greater profits for the 1% of the population that can use their accumulated wealth to insulate themselves from the very effects that their speculations create.

This admittedly idealistic call echoes the work of Marxist architectural historian Manfredo Tafuri, whose rejection of utopian thinking was not based on a lack of belief but the understanding that the political will to change was not in evidence. The tide of populist Post-Modern thinking that swept through architecture in the 1970s and rejected the modernist planning principles developed by CIAM and others echoed the contemporaneous rhetoric of Chicago School economists, who were proposing to deregulate markets and the post-war consensus of Keynesian economics which had heralded the greatest levels of equality since the industrial revolution. The Market would now meet the demands of planning our cities, social planning would be led by entrepreneurs, innovation and pluralism would be the key drivers.

When Venturi, Scott-Brown and Izenour exhorted us to 'Learn From Las Vegas' they inadvertently let loose a justification that cities could pander to the lowest common denominator. While Venturi and Scott-Brown surveyed cities from the elevated heights of Yale and were dazzled by the flashing lights and the 'Googie' architecture, the reality would be thousands of miles of dumb strip malls built to the lowest standards at the lowest costs and doomed to be empty within years.

Escaping the Ultra Processed world

There are some potentially simple steps that could be enacted to alleviate many of the problems of our Ultra Processed cities and towns, The first is to re-focus on

'social' housing, not wrapped up in Private-Public partnerships but the ability of local authorities to build and rent properties for the common good, to cover costs and re-invest in future housing rather than covering the costs of third parties. This could include subsidising some tenants to maintain and manage properties.

Another initiative would be preventing the financial attractiveness of leaving property empty. If any property is empty for more than a set period, its ownership is nationalised for a fixed period to be used by communities to become part of an expanded public commons. This doesn't necessarily mean that ownership of the property is completely transferred and the property itself cannot be simply acquired and sold on. It must be used as part of collective good. If public funds are used to upgrade the property, then the public would have to be re-imbursed before ownership is given back to the original owners. There need to be controls on the types of financial leveraging. Ownership cannot also be concentrated in a few groups. It needs to be federated.

The importance of returning to an economy based on redistribution, rather than accumulation for the few, cannot be over emphasised, albeit given the political power of the various lobby groups this is, at the current time, unlikely.

The funding for this can be from a property wealth tax. If we are going to wean ourselves off Ultra Processed Architecture then those that currently make the largest profits from the current system need to pay more. Trickle-down economics doesn't work, but redistribution does.

In their book *Inventing the Future: Post-capitalism and a World Without Work*, Nick Srnicek and Alex Williams use ideas developed as part of a leftist accelerationism to revisit ways in which greater levels of technology could be utilised to move away from a society predicated on work and promote a better quality of life for the majority of its inhabitants. At the centre of their thesis is the concept of Universal Basic Income (UBI) (Srnicek and Williams, 2016), which would provide a safety-net for citizens as the fundamental issue of public health can be identified by inequality, and the principal source of inequality is the desire to maximise profits wherever possible, achieved by driving down standards, using ever cheaper materials and processes to create ever greater surpluses.

There is no reason that the race to the bottom is inevitable and it is possible that these same processes and materials could be used to create lower cost products whilst retaining high standards. Ultra-Processed Food, ultra-processed architecture and an ultra-processed economy could be developed to make things better if that were the goal. But we are faced with some stark choices, we can continue to eat food that makes us ill, we can live in cities that make us ill and we can have jobs that make us ill, or we can look at alternatives, but this requires a political will and a belief that the world should be fairer for all and not simply privileging a few.

CODA

So, where does the money come from? Following the 2008 financial crash the

UK cash bailouts given to UK Banks totalled £33 billion and the total figure for quantitative easing, the measure for easing liquidity and effectively bailing out the financial system, totalled £895 billion. This was simply money expended to prop up the existing casino system of economics. The money is there they just don't want to spend it on us.

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Image credits

Image 1: Nic Clear (2002) *We is Technology* [video stills]. Images courtesy of the author.

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Other Ways to Walk Nature Connection Manifesto September 2024

1. Nature Connection brings us into closer relationship with ourselves as part of the natural world. This has healing benefits for us.
2. People who are more connected to nature show greater compassion towards it.
3. Nature connection could help us all feel better and behave in ways that are more in tune with the planet's needs.

Where We Find Ourselves:

Our relationship with nature is faltering:

The British are known as nature-lovers, yet in a survey of 14 European countries, Britain scored the lowest in both nature connectedness and wellbeing (Richardson et al. 2022). Britain has lost more wildlife than almost anywhere else in Western Europe. It is one of the most nature-depleted countries on the planet, with half of its biodiversity gone (State of Nature Partnership, 2023). Research shows that people who feel connected with nature are happier (Finding Nature, 2020).

We don't protect what we don't know or care about:

Nearly one in six species in Britain is threatened with extinction. The loss of plants, birds, insects, and mammals is happening largely unnoticed.

Words such as 'acorn,' 'conker,' and 'bluebell,' are at risk of being excluded from *The Oxford Junior Dictionary* because children no longer use them (McFarlane and Morris, 2017).

Despite declining numbers of bees and other pollinators, it remains legal in the UK to buy and sell weedkillers lethal to pollinators, frogs, and newts.

The Climate Emergency:

The global climate emergency has largely been created by the Global North, yet countries in the Global South bear the brunt, as chronic drought or flooding leads to famine and displacement (Julie's Bicycle, 2022).

To create a fairer world for all living beings, we must think beyond emissions reduction targets, towards a more holistic vision. Equality means that those with more resources must shoulder more of the burden (Take the Jump, 2021).

The Change We Need:

Indigenous communities have close connections with nature. We need everyone on the planet to become connected. Science, campaigns and news reports alone have not convinced people to protect the rights of nature. Our emotions drive our connection more strongly than a statistic. The joyful song of returning swallows feels more "real" than a news report about declining numbers of birds.

Science shows that connecting with nature fosters pro-nature behaviours (Mackay and Schmitt, 2019).

We must:

- Commit to deepening our own connection with nature, trusting that action will follow.
- Take care of our own well-being, which nature connection can help us with. This builds internal resilience to take actions that will help nature continue to thrive.
- Look for ways to share our experiences with others.

Six Actions We Can Take:

1. Imagination: Storytellers and artists show us the world in different ways. They invite us to wonder at glittering frost or listen to splattering raindrops, guiding us into a reciprocal relationship with nature. Science measures and explains the world, but creativity gives it meaning.

Seek out people, animals, birds, plants, skies, seas and places that nurture the imagination. Listen to the dance between the wind and the treetops or the gentle burst of raindrops on dry soil. Where do these sounds connect with you? What thoughts or feelings arise? How can you share this with others?

2. Radical Empathy: Everything is alive, aware, and connected. Humans evolved in relationship with nature. We still instinctively understand a blackbird's alarm call. At the train station, the pigeon waits for crumbs from your sandwich. In the park, a robin watches you from its nest. The grassy hillside feels your footsteps. **Describe yourself as something you notice in nature:** *'I am a new bud, unstoppable energy forcing my way into life. I am dancing in the breeze. I am fresh, juicy, and green'*. How does it feel to identify yourself this way? It takes courage to empathise with plants, insects, and birds that are struggling to survive. Listen to your own needs and focus on something nourishing if it feels overwhelming.

3. Become Entangled: We need to see ourselves as part of an interconnected world. The moon in the night sky reminds us we are part of something bigger. You don't need to know the names of the stars to feel touched by wonder. **Share stories of hope, beauty, and connection with those who have a different perspective.** Read to a tree, write to a flower, listen to a sunset.

4. Rest: We need rest. When we are tired, we can't think or act clearly. Modern life means that our immune and emotional regulation systems are pushed into constant alertness. This has been normalised, and we are expected to carry on. We override our tiredness with artificial light and caffeine. Nature knows when to rest, pausing between growth cycles. **Regulate your nervous system by appreciating beauty in nature through the changing seasons.** Notice the clouds, smell the earth after rain, or admire a bird. An intentional 2 minute break to notice nature has measurable benefits (Albulescu et al. 2022). Connecting with nature is proven to reduce stress, improve sleep, and boost well-being.

5. Fall in Love: Create the conditions to fall in love with nature. Love is irrational, uplifting, and hopeful. It feels delicious. It nourishes you more deeply than any material possession. Love can strike in an instant or gently unfold over time. Your heart might bloom while walking to the shop, captivated by a single, beautiful leaf on the ground. Or you might slowly grow attached to the comforting chatter of sparrows in your garden. Surrender to nature's beauty. **Plan times to slow down and experience wonder in nature.** Become curious about what draws your attention. Notice any feelings of tenderness and seek them out. This creates fertile ground for love to take root. Falling in love with nature is an act of self-care.

6. Bear Witness: Notice changes in nature and share them with others. Embrace the softer, gentler voices, including the voice of nature. Our skies are becoming quieter as bird populations plummet. In Britain, we've lost 3 million birds over the last 50 years. We must notice this before our skies fall silent (Carson, 1962). **Take time to notice the changes in everyday nature.** Pay attention to how it makes you feel to observe the weeds in the gutter, patterns in flowerbeds, or moss on the wall.

About Other Ways to Walk:

Other Ways to Walk is all about connecting people with nature for well-being. It was founded in 2017 by Rachel Howfield Massey, an artist, writer, mindfulness instructor, and creative health practitioner.



This manifesto is a work in progress. I would love to hear what you think. This is my first attempt to summarise my intentions and beliefs about nature connection, refining many pages of notes into a few words. I've probably captured some things and lost others, but this is my best effort to date. In the main I want to offer something positive, building towards what we know is possible. Nature shows us sustainable ways of co-existing that are fairer for all living beings, providing hope for a world that is co-operative and sustainable. We just need to become literate in what nature can teach us.

www.otherwaystowalk.co.uk

Image credit

Image 1: Other Ways to Walk illustration. Image courtesy of the author.

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Creative writing facilitation for therapeutic purposes within female criminal justice settings

Caroline Burnley

The philosophical perspectives on Creative Writing for Therapeutic Purposes

Philosophical perspectives on creative writing have been explored as fundamental to bringing a sense of validation to creative writing pedagogy (Jordan and Baker, 2015). Creative writing has been traditionally held within humanities for undergraduate and post-graduate programmes (Dawson, 2005) and has been seen as a vehicle to develop literary form but in more recent times, with developments in creative writing for well-being, studies have been extended to delivery within prison estates (Jewkes et al., 2019). This brings the discussion of psychological and philosophical perspectives within creative writing for therapeutic purposes.

In considering the philosophical position, the schools of thought may be aligned with humanities and psychology (Kaufman, 2009) and educational philosophical within creative writing (Harper, 2015). The delivery of creative writing within prisons also embeds philosophical schools of thought within criminology (Seal and O'Neill, 2019). Furthermore, the philosophical influence may be extended to feminist philosophical perspectives, when facilitating creative writing with women, which may be grounded in women and gender studies (Hinton-Smith and Seal, 2019). The range of philosophical influences within creative writing embeds a potential complexity and can therefore bring a challenge to demonstrate a clearly articulated philosophical and historical platform on which to develop the creative writing pedagogy for therapeutic purposes within prisons (Swander, Leahy and Cantrell, 2007). For this piece, I will reflect upon the philosophical schools of thought of humanities, psychology, education, criminology, and women's studies to enrich the development of a creative writing pedagogy with women with significant mental health issues within a female enabling environment, and how this influences my creative writing for therapeutic purposes (CWTP) practice.

Within Humanities the philosophical perspective of new humanism (Flew, 2004) may be applied to creative writing, as this theoretical perspective, known as literary criticism, considers not only literary form but the context of this within cultural and political movements. Babbit (1908) speaks to the idea of the aspiration of liberal education and the reality of education. Today's philosophical position within creative writing suggests a movement towards de-colonizing the curricula, so in a literary sense, students are introduced to wider global influences as a means of recognising the ethnic majority within this discipline (Dawson, 2005). Within psychology many schools of philosophical thought may be drawn upon. This is a useful lens for creative writing facilitation for therapeutic purposes, as this speaks to a sense of underlying unconscious processes that are illustrated in Freud's psychoanalytical work, known as metapsychology (Boothby, 2015). Metapsychology in essence examines the unconscious influences of an individual within life. This may be applied within CWTP, as the work of the women engaged within this may be understood from a psychoanalytical perspective (Sandler and Nagera, 1963). From an educational philosophical perspective, social constructivism may be aligned to CWTP, as this

movement suggests principles of empowerment, and social engagement, and may be seen to have foundations in feminism and social justice, for example in Barak and Stebbins (2017). This philosophical perspective may be used within CWTP within a prison-enabling environment, as the women's experience of education may have previously been more one of a classical philosophy of education (Elias, 1995), where the learner receives education from an educator. The power dynamic here may be viewed as authoritarian. In seeking to enable women to find their voice within the realm of CWTP a feminist and critical pedagogical perspective may be applied (Luke and Gore, 2014).

A gendered feminist philosophical perspective may provide the opportunity to approach the development of creative writing through the lens of gender, sexuality, wider economic class, and any other issues that may influence gender inequalities (Nagl-Docekal, 2018). It is also worth acknowledging here, that more recent feminist philosophical developments are inclusive of movements supporting women who may be referred to as the ethnic majority from a global perspective (McCann and Kim, 2016). Historical perspectives of creative writing and therapeutic approaches in women's prisons are cited in the works of Covington (2018) which examines the needs of women with substance misuse issues in prisons. Similarly, gender studies within prison populations (Heibyner and Tyson, 2017) suggest a gender-responsive criminal justice enables a more humanistic form of prison experience that is restorative, and less retribution-based and extends to providing a social care function within prisons. This reflects the potential to develop creative writing facilitation with women with significant mental health issues in prison-enabling environments.

Davis (1992) speaks to developing feminist legal theory, recognising within the dominant narrative that legal frameworks have been designed and implemented from a male perspective. Within this, Davis examines the influential narrative of Carol Gilligan's works to illuminate female perspectives. Gilligan (1993) provides a theoretical perspective of women's narratives, and the social constructs that may influence these, which is helpful to consider in the context of women who may be marginalised within society. Whereas Wright (2018) suggests the publication of women's autobiographical works in prisons enables women to become visible where they may be made more forgotten or invisible when incarcerated in prison. Similarly, the facilitation of creative writing in enabling environments creates a space to find this autobiographical voice, and the potential for publication of works enables invisible lives to become visible. In addition, Nooijer and Cueva (2022) discuss the influence of feminist perspectives of storytelling on counter-dominant narratives and suggest counter-storytelling as a methodological approach as a powerful means of gathering data from a qualitative perspective. A broader view of the philosophical influences of creative arts in prisons are discussed in a literature review by Djurichkovic (2011) which provides a useful context to what has been noted as an under-researched area of the inclusive of creative writing in prisons.

The practices of Creative Writing for Therapeutic Purposes (CWTP)

Developing a working knowledge of CWTP practices through a combination of observation, experiential learning, self, and peer reflections in CWTP teaching

practice has progressed my personal and professional development within the field of CWTP. The CWTP concept may be understood as spending time with words, and language, paying attention to voice, tone of voice, word choice, and avoidance within a therapeutic context. Within this space enabling the emergence of the CWTP practitioner, to work with clients to consider the most helpful form of expression to engage and develop a rapport with the client, through the medium of CWTP. In the section below I will explore some of the CWTP approaches I have been introduced to and developed in practice: myth and metaphor, deep listening, playfulness, counter-storytelling.

Myth and Metaphor

Myth and creative writing illustrate a historical perspective to the art of storytelling, that may explore legends, folklore, faith-based myths and engage participants in the creative process from start to finish and may inspire writing from classical to contemporary sources and enable writers to explore the deeper meaning and emotional connection of myths in CWTP (May, 2013). Furthermore, metaphor, often explored in poetry and classical literature, may enable creativity in CWTP sessions. Metaphor does not seek to compare one word with another but seeks to be representative of and reveal a deeper meaning of a subject to enable discussion. Metaphor enables an abstract way to think about experiences, emotions, thoughts, and feelings (Effendi, 2016).

Deep Listening

Deep listening as a method in CWTP may be understood to be creative artists, writing practitioners, and musicians engaging with emotional experiences that may stem from difficult experiences in childhood which can benefit the CWTP participants (McCarthy, 2015). This may enable participants to feel validated in their life experiences.

Mindfulness

Mindfulness may be understood as seeking a mental state by focusing on one's own awareness of the present moment, whilst accepting one's sensory experiences alongside feelings, and thoughts. Mindfulness is often used as a therapeutic approach in CWTP. Purposeful inclusion of mindfulness in learning settings has been recognised to benefit student learning, creativity, and well-being (Henrikson, Richardson and Shack, 2020).

Playfulness

Playfulness may be viewed as enabling the role of imagination and creativity to facilitate healing and a means of coping with trauma. From a theoretical perspective, playfulness is the lens of the 'fantastic reality model' which illustrates the use of imagination and playfulness to support therapeutic change (Rubenstein and Lahad, 2023). An example of this may be in response to stress or trauma, as many people experienced in the recent Covid 19 pandemic, where the use of social media platforms may have been used to allow people to share both images and narratives of their experiences and use of their imagination and creativity to share coping strategies, based within the home.

Counter-storytelling

Counter-storytelling may be used for therapeutic purposes in facilitating creative writing groups with participants of CWTP. Counter-storytelling may be understood as a means for marginalised communities or groups to share a narrative counter to the dominant culture or narrative within society. For example, this approach may be influential in countering dominant racial and gender narratives, influenced by patriarchal or discriminatory historical, societal or political narratives. The therapeutic benefits of counter-storytelling have some origins in the work of Pennebaker's expressive writing (Baddeley and Pennebaker, 2011). Counter-storytelling may be applied to genres such as poetry, creative writing, and narrative biographies. There have been known uses of counter storytelling working with mental health service users, in the continuing professional development of mental health practitioners and the use of counter storytelling in mental health nursing therapeutic groups to support recovery (Gillam, 2018).

Creative writing prompts

Similarly, the use of creating writing prompts and stems in CWTP may encourage participants' creativity, and such writing prompts may be related to themes, such as nature, food, and animals. Writing prompts can encourage participants to start writing about short stories, poems, or blogs for example (Risse, 2016). Likewise, poetry forms such as Haiku may be used in CWTP. Haiku may be understood to be a short form of poetry, describing everyday life. Haiku may encourage engagement with one's emotional self, gratitude, and feelings of joy and wonderment. Studies have suggested the use of Haiku may produce a sense of feeling grateful and serene and support the idea of the relationship between creativity and emotion (Kato and Hitsuwari, 2018).

Writing space

Furthermore, within CWTP the use of the creative writing space may be examined as the platform for differing forms of creative activity of a therapeutic nature. A creative writing space can be useful for both individuals and groups in which a transitional space is created where ideas may develop without any inhibition to the creative writing process (Slochower, 2018). This writing space may be created by identifying ground rules for peer interactions and expectations, such as active listening, permission to share work with each other, recognition of the confidential space for writing and any over-riders to this, such as risk to self or others. This is to enable a psychologically safe space to offer a creative writing space.

A toolkit of best practice for Creative Writing for Therapeutic Purposes

The development of a CWTP toolkit may be useful in the future in order to embed CWTP into teaching practice and facilitate CWTP workshops. Developing a range of CWTP exercises and working agreement formats to introduce in each context will provide psychological safety for those participating in CWTP groups using online and in-person sessions. In constructing sessions I think the core ingredients, developed from my own CWTP activities and experiences of learning, developing lessons or workshop plans, would include planning activities such as: aims and objectives and differentiated learning outcomes; as well as practical

considerations such as: materials and resources, in-person facilitation, room layout, numbers of each group, frequency of attendance, length and time of the sessions, and allocation of breaks. Consideration may also be given to pre-session and post-session reading, resources, and activities. It may also be worthwhile in facilitating sessions to consider how to manage the expectations of any group in this context. There may be the option to consider whether any work completed may sit under any formative or summative assessment basis and whether the groups may seek to have accredited certification. In addition, in some contexts it may be appropriate to discuss with attendees the publication of their CWTP. In the women's prison and prison writing movements, there is a call towards sharing stories and creating narratives that reflect the person and not the offence the women may be incarcerated for.

The toolkit should outline steps for creating a safe writing space, exploring beginnings and managing transitions within any group context to create a sense of psychological safety. Finally, the writing itself may manifest emotions for an individual or group members, so within this context, available resources to signpost attendees to additional external support may be helpful here. In addition, other aspects to consider within the development of a CWTP best practice Toolkit may be to reflect upon how music and mindfulness exercises may be embedded into sessions in different contexts, and in terms of future learning and development to obtain testimonies and evaluation of sessions attended from participants. Within the development of a CWTP toolkit it is important to recognise how EDI (Equality, Diversity, and Inclusion) approaches may support the development of user-friendly materials that acknowledge cultural and gender differences and wider EDI issues such as neurodevelopment, mental health, sexuality, age, and race, for example.

In my CWTP practice to date with the women in prison, I have worked with the administration, prison staff, and clinical psychology lead to deliver the programme safely within a prison context. Ethically, I have considered the themes I have developed for CWTP in the context of the psychological provision the women are in, to enable voice, sense of identity, and peer support in a group setting, so the CWTP compliments and does not sit in a silo of the wider therapeutic programme within the unit. For my support and development needs in creative writing facilitation, I am provided with clinical supervision, and I also liaise with prison officers before the sessions as to the women's emotional needs and any concerns they may have about the women in their everyday lives on the unit. It is important to balance the emotional needs of the women in the planning, design, delivery, and review of sessions. The women actively review the sessions every three months identifying what has worked well for them, not so well, and what they may like more or less of in the future. The women attending the group are referred to as service users in the unit, and self-select to attend the CWTP sessions, on a voluntary basis, so this enables a position of empowering themselves to engage in CWTP activities. The sense of rehabilitation versus retribution, influenced by the Coates Review (2016), seems to also include a cultural shift to provide prison staff, who hold a complexity of roles as custodians, caregivers and educational advocates, promising opportunities for future training and development (Crabbe, 2016).

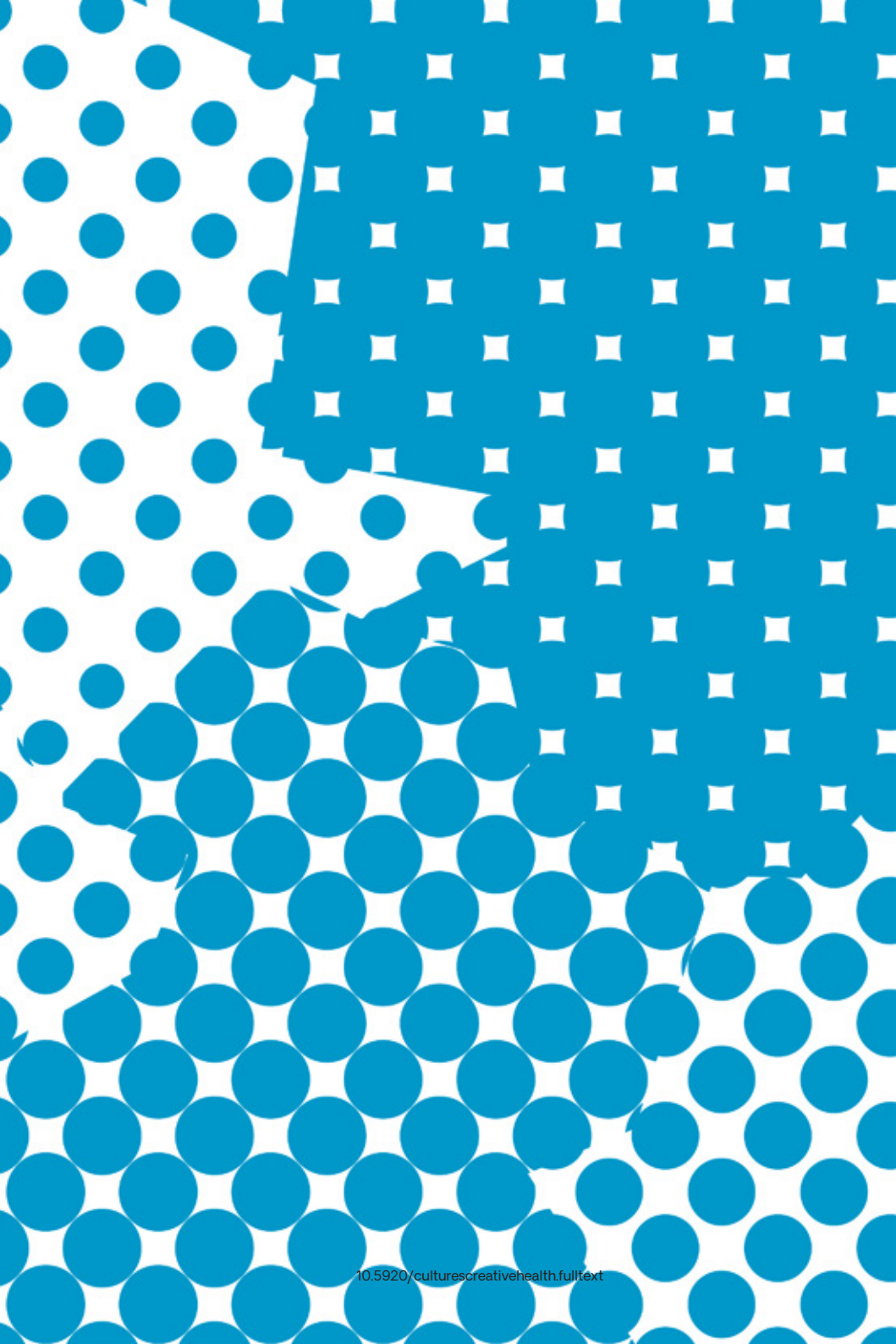
To develop my CWTP, and the application of the CWTP further, I am liaising with male-approved premises (HMPPS) to offer sessions here in the future on an evening or weekend basis

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How healthy is the creative health sector? Reflections from organisations on the front line of creative health delivery

Helen Mahoney and Robin Jackson

This chapter was initially proposed by Helen Mahoney, based upon research that she undertook for her Masters degree dissertation in Social Research at York University. Helen died of breast cancer in September 2024. She was deeply passionate about the themes in her research, but a sudden downturn in her health meant she was unable to complete this chapter and it has been completed by her husband Robin Jackson based on her notes, dissertation research and work that they undertook together. The focus of Helen's research was specifically on the role of music and music organisations in health and wellbeing projects, reflecting her professional background and experience. She recognised however that the themes inherent in this research are applicable to a much wider range of art forms as well as the cultural organisations and individuals who deliver projects aimed at improving creative and community health.

The concept and practice of music as a means to affect and provide healing to the human spirit is one that spans history and cultures. In contemporary society, the idea that music is connected to wellbeing has gained increasing recognition, generating a variety of practices that aim to harness music's power for individual and social good. Music therapy has become a recognised allied health profession (Foster et al, 2021), however music, health and wellbeing (MHW) practice has also developed beyond the boundaries of formal therapy. The last 20 years have seen a rise in arts and music organisations offering services connected with wellbeing (see, for example, Waldo & Cohen, 2020) and these organisations are key to the recent proliferation of MHW projects. Social prescribing, where patients are prescribed activities such as group exercise or art classes rather than medical interventions, has become a key part of The NHS Long Term Plan (NHS England, 2019). With the Covid-19 pandemic only adding to these pressures and exacerbating issues of social isolation and mental health problems (Pierce et al, 2020), the MHW movement has never felt more relevant. This work is usually delivered by musicians and arts organisations, rather than health professionals, and it is these issues that this chapter seeks to explore.

Cultural policy is becoming increasingly evidence-based, reflecting a wider trend towards more data-driven policymaking in the UK. Music's role in health has become bound up in shifting understandings of health and wellbeing and what constitutes "evidence". In this context, MHW's position in a liminal space between the worlds of music and medicine presents both opportunities and challenges. This chapter is based on the findings of a research study (Mahoney, 2022) which aimed to investigate the mechanisms underlying the increasing focus on health and wellbeing work within music organisations, through the use of a series of semi-structured interviews with music professionals who manage MHW projects, to explore motivations, experiences and opinions. These interviews were used to identify key themes that could then be considered against a conceptual framework including "healthification" – a process whereby increasing areas of everyday life

become linked to health (Fusco, 2006) – and “policy attachment” where a sector with limited political influence associates itself with higher profile issues to gain resources (Gray, 2002).

It was clear that interviewees felt strongly about the benefits and rewards derived from involvement with projects involving MHW work. As a sector, participants considered music to have a forward-thinking and caring approach with a strong ethos of positive collaboration. In most cases music professionals view MHW projects as an evolution of that tradition within musical culture of participatory and community focussed work, but this in turn raises a question about why the context of health and wellbeing in particular has become such a focus.

Two themes that were clearly evident in the interview responses were matters of policy narrative and funding, and while these were seen to contribute positively to the growth of MHW within the arts sector, they also carry their own significant issues and challenges that impact on the organisations and their delivery of projects. These two themes themselves cannot be considered to be independent of each other and within them overlapping themes and tensions are readily evident, especially around issues of evidence and evaluation.

The scope of arts and health research is broad, and there have been several attempts to draw together findings to make them more amenable for use by policy makers and delivery organisations. Two key evidence reviews by the World Health Organisation (WHO) and the Department for Culture, Media and Sport (DCMS), set out to highlight how ‘the arts...can support the prevention of illness and promotion of good health’ (Fancourt & Finn, 2019, p. 7) and to link this evidence to DCMS ‘policy-relevant’ (Fancourt et al., 2020, p. 3) areas respectively. These comprehensive reports draw together a large amount of evidence and have helped bring the concept of arts and health into the mainstream. They also reflect an increasing emphasis on evidence-based policymaking and research that approaches MHW in biomedical terms. While broadly welcomed within the arts sector, there has been criticism of both the methods and the conclusions of these reports. A critique of these reviews by Clift, Phillips and Pritchard (2021) highlighted methodological flaws which made the overall conclusions drawn misleading. Importantly, they also identified that the current evidence base is not clear enough for policymaking purposes, and that methods based on a pharmacological approach are not always appropriate for a fundamentally artistic practice. They suggest that if such methods are to be used they need to be more rigorous, and qualitative evidence should also play a part. This tension was evident in the experiences of interview participants. The existence of documents such as the DCMS and WHO reports feeds the political visibility of the MHW sector and as a result lends legitimacy to the beliefs about the positive effects of these programmes and led to interviewees feeling that their work was ‘*taken more seriously*’. The very existence of these reports and the academic research they are based on is significant, as it ‘*adds to that narrative*’ of the music-wellbeing relationship (interviews in Mahoney, 2022). But for music professionals, this kind of evidence plays the role of validating an existing understanding of music’s health benefits, rather than adding new knowledge.

The popularity of the MHW narrative has also had the unwanted side effect of blurring the boundaries between academic research, clinical outcomes, and the evaluation practices of music organisations. A paradigmatic dissonance becomes established between the quantitative evidence-based bio-medical approach and the qualitative impacts of social practice. The benefits of music are real but not always empirically observable, which is problematic for any sector founded on quantitative epistemology. This has been interpreted by some as a need to find more “rigorous” methods to capture music’s effects, but the data shows this has to some extent exacerbated rather than solved the problem.

This in turn points towards the second theme of funding and a ‘burden of evaluation’ with expectations from funders and stakeholders around the need for the presentation of rigorous evidence and data. Interviewees reported feeling under “*huge pressure*” to gather evidence that was complex or inappropriate, because it was expected by funders (interview in Mahoney, 2022). It was noticeable within the interview responses how many participants felt that they were not able to fully meet these expectations and project evaluation had therefore become a source of anxiety. There was evidence that some funders were beginning to understand and respond to these pressures, but overall increasingly scientific evaluation methods were still expected.

Alongside this, there was frustration about the sheer amount of research and evaluation being generated but not being put into practice. Instead of enabling sustainable support for MHW work, the outcomes of these ever-more rigorous evaluation requirements appear to be further demands for more evaluation. Rather than an acceptance of a relationship between music and wellbeing, the demand for more evidence becomes endless.

The frustration for MHW providers is compounded as they come from a background that is already aware of the benefits such projects can bring. These wellbeing benefits are recognised by those within the sector as valuable and important in their own right as, one interviewee put it: *‘if we don’t have arts and culture as part of our society [...] if we just think about society as business and economics then we are a half-formed society.’* (interview in Mahoney, 2022). Most professionals understand their role within a social model of health that is concerned with wellbeing outcomes, but as organisations work more closely with health care providers and funders, they move closer to the biomedical model of health and there is pressure to translate these broad wellbeing benefits into narrower, measurable health impacts.

This constant need for evaluation evidence also carries a burden of skills and resources for the organisations needing to justify and evaluate their work. By and large, interviewees did not feel that they or the organisations they worked with were inherently possessed of the skills or resources that they felt was required to meet the perceived rigour with which outcomes need to be measured and communicated. As a result, several described having to recruit additional staff or employ external consultants to adequately address evaluation requirements.

This has resource implications for organisations but also serves to further blur the distinction between project evaluation and academic research as this part of the sector become more professionalised. The useful aspects of more academic research and advocacy reports are therefore tempered by the practical and financial consequences for music organisations, who feel somewhat trapped in a vicious cycle where the expectations of what music can do becomes higher and higher.

The data also drew attention to another aspect of “healthification”: the shifting of responsibility for health matters, raising questions about where the boundaries of responsibility for patients and their health lies. This can be seen very clearly in the experiences of organisations who are involved in delivering social prescribing projects. Often this means taking on pastoral duties that would not typically feature in other music projects. Despite the increase in overall funding for social prescribing, none of the activities described by interviewees were funded directly by the NHS. The significant investment in social prescribing set out in the NHS Long Term Plan (NHS, 2019) has been directed at link workers, rather than the supply of community activities (Buck, 2020) and as a result, this type of funding can be difficult for arts organisation to access.

The current social prescribing system presumes that there is already a thriving voluntary, charity or arts presence in the community that can provide suitable activities, but many of these organisations are subject to similar resource pressures to the NHS. Overall, music professionals were excited by the possibilities that social prescribing offered with some identifying ‘*huge benefits*’ (interview in Mahoney, 2022). The reality however hinges on the support that organisations need to give to participants to enable them to attend and the resources available to facilitate that. Allied with this is the impact that involvement with the delivery of MHW projects can have on artists and musicians who are not trained healthcare professionals. While musicians often find MHW work fulfilling, there is recognition that it can also be draining, emotional and difficult. The precarious nature of freelance musicians’ careers adds to their levels of stress and isolates them from the type of support structures that might be available to allied health professionals (Foster, 2021). Some interviewees were open about the fact that their organisational model was adding to this situation and were taking steps to address it. However, there remain questions about whose responsibility it is to care for musicians in the current MHW ecosystem, and there are inherent risks for musicians, patients and organisations where these questions remain unanswered.

Closer integration between MHW providers and health and care services is a consideration, but there were mixed feelings about whether this in itself was the solution to the problem and whether that integration in turn carried the risk of ‘*loss of creative integrity, effectiveness and identity*’ (interview in Mahoney, 2022). As MHW work grows, music organisations are wrestling with questions of how far they want to integrate with the NHS and how much responsibility they can take on without losing their *raison d’être*. Answering these questions is compounded by the previously identified vicious cycle of narrative, funding, and evidence. The growing narrative

that music can affect health, combined with a wider context of depleted public services, makes cultural organisations feel an increasing sense of responsibility to play a role in tackling social problems, but at what cost?

Music is increasingly being promoted as a health and wellbeing solution with few side effects, but it is evident that there can be significant side effects for the individuals and organisations who are tasked with delivering these services. Regardless of music's inherent positive impact on wellbeing, the current "healthification" model requires an increasing adoption of practices associated with a biomedical concept of health. The NHS has begun to broaden its understanding of health to include psycho-social factors, but the change of pace is slow. This makes the relationship between music and health unequal. As long as this imbalance exists an attachment of music to the health sector cannot be completely successful. While the challenge previously may have been perceived as a need for arts organisations to adopt a more medical mindset, this research suggests a more radical solution is required to find ways of rebalancing the MHW relationship so that music's contribution to health and wellbeing can be judged more subjectively.

So what might help foster a healthier music, health and wellbeing sector?

As already described, current evaluation practices represent a significant area of concern and drain on resource for arts organisations, effectively limiting the availability of time and funds that could be employed in provision of MHW projects. For this evaluation to contribute effectively to the understanding and implementation of MHW practice, it needs to be proportionate and useful in enabling understanding of outcomes rather than imposing a burden of proof on music organisations.

A change of direction in academic research from theory towards practice, and from the medical to the social would help to reorientate research to the concerns of individuals on the ground. Scientific understandings of the biomedical mechanisms involved in music have their place but are not directly helpful to music organisations whose practice has developed from a community arts tradition rather than evidence-based science. Rather than pursuing increasingly biomedical explanations for music's relationship to health and wellbeing, perhaps we need to find a way to appreciate the impact of music on more suitable terms. Some organisations are already exploring methods to bridge that understanding gap, either through the use of storytelling to convey a more human connection to stakeholders or through efforts to build the understanding of musical practice and outcomes with health professionals. It is recognised that this "anecdotal" approach still has some way to overcome an obsession with the collation of statistical data but is perhaps an indication of alternative means to capture and communicate that impact in more human terms. More fundamentally, funding bodies and policy makers should carefully consider whether better use can be made of the large amount of MHW evidence that already exists, rather than commissioning more. This could make more time and funds available to put research into practice

and focus investment on the main task of enabling music's wellbeing benefits to be experienced by more people.

"Conduit" organisations, such as universities or third sector bodies, have an important role to play in bridging the music – medicine gap. They could also help the music sector develop a louder voice with which to advocate for itself on its own terms and to challenge the "healthification" of music's role in society. Funders, music organisations and health organisations could explore more phenomenological approaches to communicating their work that utilises the artform's strengths rather than trying to fit it into a scientific pigeonhole.

Where medicine and music do come together, there needs to be learning and change on both sides and a broader understanding of what constitutes health and wellbeing in this context. Practices such as social prescribing offer the possibility of mutual benefits for music organisations and the NHS. However, to realise this potential there needs to be investment in the organisations providing the activities, and a clear understanding of where the boundaries of responsibility lie. Training, support and care of music organisations, musicians and staff must form part of this offer.

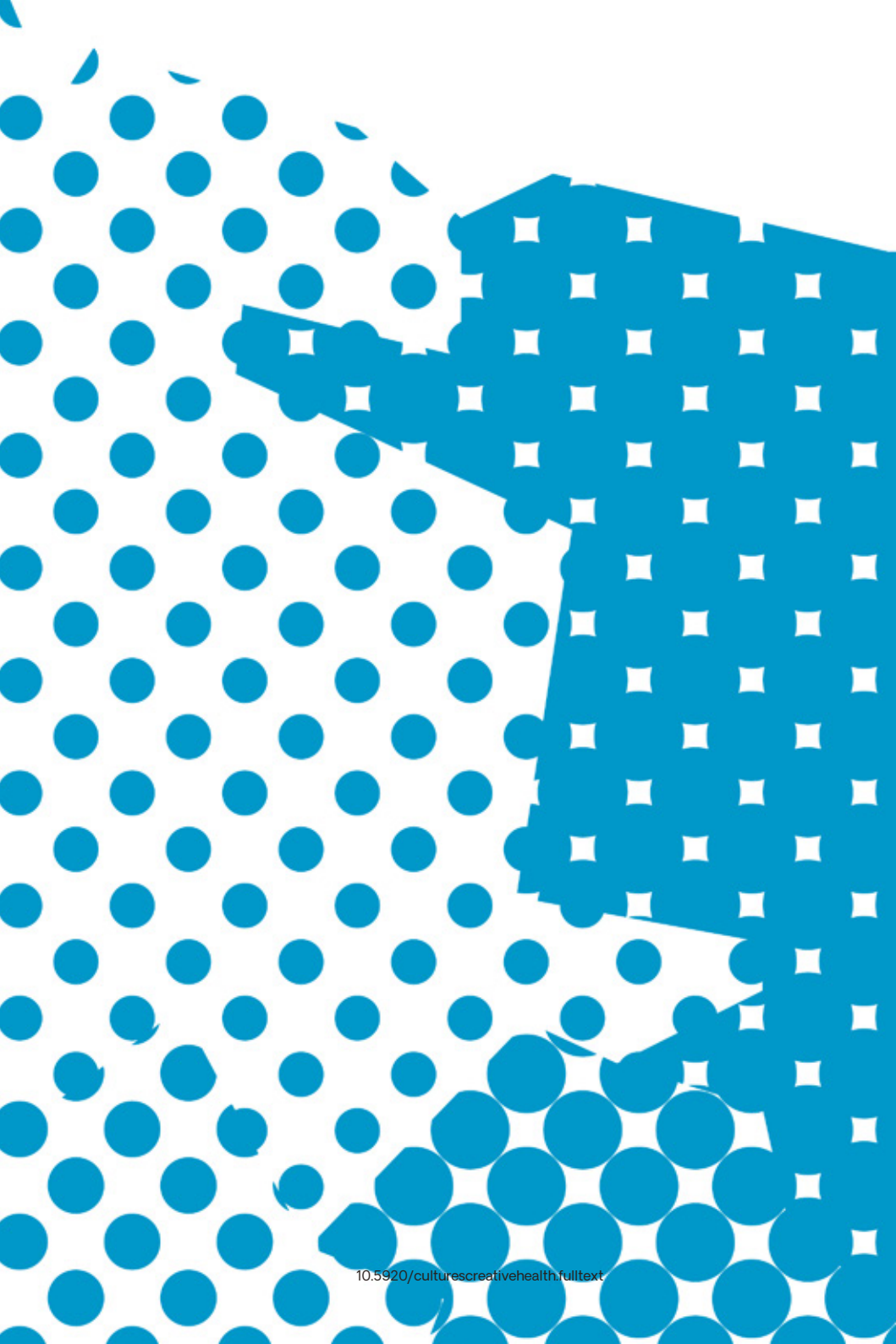
Political support of MHW is welcome but, again, unless this is backed up with significant investment it will have little impact. Music organisations should be able to access sustainable funding to enable them to work effectively in health and wellbeing settings, but also in the many other areas where music is needed and wanted. A recalibration of expectations around music's role as an instrument of health and social policy would enable music organisations to make informed choices around how "healthified" they wish to become. Ultimately, it is the fact that music is different to medicine that makes it effective. As a result, a broader social understanding of health and wellbeing is required to truly realise music's important role in society and to empower arts organisations to deliver that benefit in a healthy and sustainable way.

Helen Mahoney was an arts and culture professional with over 20 years' experience across the sector. She held senior leadership roles within creative organisations including Opera North, Drake Music and Live Music Now, focussing on community, education, disability and health inclusion. Qualifications include BA (Hons) English Literature (First) from Cardiff University, a Postgraduate Diploma in Arts Management from the Royal Welsh College of Music and Drama and an MA in Social Research (Distinction) from the University of York. She was interested in applied research and the sociology of health, culture and place. She was a founder and Director of Ryedale Creative, a consultancy taking a creative, rural approach to "placemaking" by exploring the intersection between communities, culture and the built environment. Recent research includes *Developing the rural creative and cultural landscape funded by Arts Council England*, *Gone in the Air – music opportunities for young people in rurally isolated England* for AMP, and *Ryedale Creative Spaces – a report into creative co-working spaces in rural North Yorkshire*, funded by the UK Shared Prosperity Fund. She was a public reviewer for the National Institute for Health and Care Research and a Clore Pulse graduate.

Robin Jackson is an architect with extensive experience across residential and care sectors. Together with Helen he was a founder and Director of Ryedale Creative.

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Radical Rest Retreat: S-iREN (Spatially-Induced Reality Expanding Noises) and the Role of Sound in Creative Health

Jake Mehew and Henry Weekes

Introduction

The integration of art, sound, and technology has become increasingly relevant in exploring Creative Health interventions. *Radical Rest Retreat* presents a compelling case study of how spatial audio and sound design can be employed to foster mindfulness, reduce stress, and promote mental health. Drawing on principles from auditory scene analysis, acoustic ecology, and the emerging field of biophilic design, this installation invites participants into an immersive, acousmatic sound environment that mimics the calming properties of nature. In doing so, *Radical Rest Retreat* explores the intersectionality between contemporary art and creative health practices.

As part of this exploration, this piece synthesises academic research into the use of sound and nature in therapeutic contexts, as well as technological interventions like spatial audio and virtual reality (VR), offering a multifaceted understanding of the installation's impact. Furthermore, it engages with the broader discourse on how sound and creativity can enhance well-being, democratising access to health benefits typically associated with nature and mindfulness practices.

Sound as a Therapeutic Medium

Research into the effects of sound on human well-being has demonstrated that auditory experiences can significantly influence mental and emotional states. The foundational work of Albert Bregman (1994), who developed the theory of *auditory scene analysis*, explores how the human brain organises sound into perceptual categories, distinguishing between different auditory stimuli in an environment. His work provides a theoretical framework for understanding how the complex soundscapes of *S-iREN* can be processed by listeners, allowing them to make sense of overlapping sound events and experience a coherent acoustic environment.

Our brains actively work to make sense of ambiguous or unclear sonic information. When we listen to sound, we perceive multiple streams of information simultaneously in a complex waveform. Bregman described this phenomenon as Auditory Scene Analysis (1994), where the brain breaks down complex waveforms into individual components for analysis. This process allows us to form a Gestalt understanding of our surroundings, interpreting the various streams of information—whether they occur sequentially or simultaneously in close proximity—as contextually related.

By consciously probing the context and meaning of the acoustic environments around us, we can become more grounded in the present through Auditory Scene Analysis. However, much of the brain's processing occurs unconsciously. Our brains are highly efficient at filtering out irrelevant atmospheric noises and distractions. As a result, listening often feels like the opposite of mindfulness, since we are usually only fully attentive when our automatic, involuntary listening processes

are challenged by confusing, complex, or unfamiliar soundscapes. It is in these moments that our attention becomes conscious, grounding us in the mindful task of interpretation.

What makes a sound confusing, complex, or unfamiliar? In most cases, it is the absence of contextual cues or learned patterns that creates challenges in sound perception. This is something purposefully explored in *Radical Rest Retreat*. By abstracting sound through field recording and acousmatic dissemination, the original sound object becomes sublimated by the loudspeaker and further obscured by its material processing through electronic alteration. Pierre Schaeffer refers to this as acousmatic reduction, where sounds are extracted and disembodied from their original resonating sources (Schaeffer, 1966).

When a sound is edited to the point where the properties we typically associate with it are unrecognisable, Schaeffer describes this as reduced listening. However, this concept has been contested by other artists and theorists in sound studies (Chion, 1994; Wishart, 1996; Schafer, 1996). Even Schaeffer later acknowledged that it is difficult, if not impossible, to completely remove the context from a sound source. The listener is always unconsciously analysing pitch, timbre, reverb, and distance for auditory clues regarding the origin and meaning of a sound.

In *Radical Rest Retreat*, I intentionally play with sounds derived from nature for this reason. These sounds are familiar enough for listeners to recognise, yet processed and edited enough to create what I refer to as “ear candy”, capturing and holding the mindful attention of those who engage with the sound installation. By sequencing similarly processed sounds in a loose, vague narrative fashion, the listener upon hearing my work will practise sequential integration (Bregman, 1994), naturally forming auditory streams of stimuli—a fitting nod to the natural world, echoing Bregman’s insights into how we perceive sound. An auditory stream is a perceptual grouping of sounds that the brain organises as coming from a single source or event. In complex sound environments, the brain naturally sorts incoming auditory information into distinct streams to make sense of the surroundings.

Barry Truax (2001) further contributes to this understanding through his work on *acoustic communication*, which explores how sound functions as a medium of exchange between humans and their environments. Truax’s concept of the *soundscape*—the totality of sounds in a given environment—emphasises that sound is not merely a byproduct of an environment, but an integral part of it. In *Radical Rest Retreat*, the soundscape is carefully constructed to mimic natural environments like forests, creeks, and beaches, fostering a sense of calm and presence that aligns with the principles of acoustic ecology.

These theoretical frameworks support the design of the installation, where participants are encouraged to engage deeply with the sounds around them, fostering mindfulness through focused listening. This practice is akin to what Jon Kabat-Zinn (2003) describes as Mindfulness-Based Stress Reduction (MBSR), which encourages participants to bring their attention to the present moment,

often through sensory experiences like sound. Kabat-Zinn’s work highlights the potential of sound to anchor participants’ attention and promote relaxation, which aligns with the objectives of *S-iREN* as a tool for mental health and well-being.

Spatial Audio and Psychoacoustics in Health

One of the key components of *Radical Rest Retreat* is its use of spatial audio technology to create a sense of immersion. Spatial audio, which refers to the placement of sound in three-dimensional space, allows participants to experience sound from all directions, as if they were physically present in a natural environment. This use of sound creates an *acousmatic* experience, a term originally coined by Pierre Schaeffer (1966) to describe sound that is heard without an identifiable visual source.

In this context, the acousmatic soundscapes of *Radical Rest Retreat* encourage participants to focus solely on the auditory experience, stripping away visual distractions and allowing for deeper engagement with the sound. Denis Smalley’s (1997) concept of *spectromorphology*—the study of how sounds change over time and how these changes are perceived—becomes relevant here, as participants are invited to explore the evolving textures and timbres of the soundscapes. Smalley’s work emphasises the importance of understanding the dynamic nature of sound, which is crucial to the therapeutic impact of *Radical Rest Retreat*. The evolving nature of the soundscapes mirrors the organic processes of nature, creating a calming and immersive experience that encourages mindfulness.

Psychoacoustic principles, such as those discussed by Cohen (2008), highlight how the perception of sound influences the emotional and cognitive responses of listeners. *Radical Rest Retreat* utilises these principles to craft soundscapes that are not only aesthetically pleasing but also designed to reduce stress and promote relaxation. For example, low-frequency sounds like those of flowing water or wind have been shown to have a calming effect on the nervous system, lowering heart rates and promoting a state of relaxation (Alvarsson, Wiens, & Nilsson, 2010). By carefully curating the frequency, timbre, and spatial placement of sounds, the installation maximises its potential to create a restorative acoustic environment.

Biophilia and Nature-Inspired Soundscapes

The decision to use nature-based soundscapes in *Radical Rest Retreat* draws on the biophilia hypothesis, proposed by Edward O. Wilson (1984), which suggests that humans have an inherent tendency to seek connections with nature. Wilson’s work has been foundational in environmental psychology, highlighting how exposure to nature—both real and simulated—can have profound effects on mental health. Natural environments, whether experienced directly or through simulations like those in *Radical Rest Retreat*, provide a respite from the stressors of modern urban life.

Stephen Kaplan’s (1995) research on “attention restoration theory (ART)” complements Wilson’s biophilia hypothesis by suggesting that natural environments can restore depleted cognitive resources. Kaplan’s theory posits that

natural settings offer a type of ‘soft fascination’, where the mind can engage with its surroundings without becoming overstimulated or fatigued. In this sense, the immersive soundscapes of *Radical Rest Retreat* act as a form of ‘soft fascination’, drawing participants’ attention in a gentle, non-intrusive manner, allowing for mental rest and recovery.

Similarly, Ulrich et al. (1991) demonstrated the ‘stress recovery theory (SRT)’, which posits that exposure to natural environments can lead to a reduction in stress and an improvement in mood. Their research showed that both visual and auditory exposure to nature, such as the sound of birdsong or running water, can lower physiological markers of stress, such as blood pressure and cortisol levels. By recreating these auditory experiences through spatial audio, *Radical Rest Retreat* taps into the well-documented stress-reducing effects of nature, offering participants a tangible mental health benefit.

Auditory Ecology and the Urban Soundscape

In urban environments, access to nature is often limited, making nature-inspired interventions like *Radical Rest Retreat* particularly valuable. The installation addresses the disparity in access to restorative natural environments, an issue raised by researchers like Lederbogen et al. (2011), who found that urban living and upbringing are associated with increased neural activation related to social stress. Their findings highlight the need for accessible interventions that can replicate the calming effects of nature within urban settings.

Rachel Massey’s work on nature-mindfulness practice also speaks to this need, advocating for the use of creative interventions to reconnect individuals with nature in their everyday lives. By bringing natural soundscapes into an artificial, gallery-based environment, *Radical Rest Retreat* democratizes access to the mental health benefits associated with nature, extending these benefits to individuals who might not have the resources or opportunity to experience nature firsthand. This aligns with the growing body of work in Creative Health, where art and culture are increasingly recognized as vehicles for promoting well-being (MacDonald, Kreutz, & Mitchell, 2012). In the foreseeable future, *S-iREN* intends on releasing *Radical Rest Retreat* publicly as a binaural listening experience, making access to this sound-therapy work even more accessible.

Massey’s emphasis on mindfulness practice is supported by the soundscapes in *Radical Rest Retreat*, which are designed to facilitate mindfulness and meditation. The installation creates an environment in which participants can engage in ‘deep listening’, a concept developed by composer Pauline Oliveros, which encourages an active, contemplative engagement with sound. This practice aligns with Kabat-Zinn’s (2003) mindfulness principles, offering participants a way to cultivate present-moment awareness and reduce stress.

Technological Innovation in Creative Health

VR, in particular, has been shown to have therapeutic benefits in the treatment of stress, anxiety, and trauma by providing immersive, controlled environments

that encourage mindfulness and relaxation (Freeman et al., 2017). In future iterations of *Radical Rest Retreat*, the integration of VR could enhance the immersive experience even further, allowing participants to engage with both auditory and visual simulations of natural environments.

Research by Bredin et al. (2021) supports the idea that immersive media can play a significant role in promoting well-being. Their findings suggest that technologies like VR and spatial audio can create environments that engage the sensory systems in ways that traditional interventions cannot, offering new avenues for Creative Health practices. By combining these technologies with nature-inspired soundscapes, *Radical Rest Retreat* provides a multisensory experience that fosters mental and emotional recovery, particularly for those in urban environments where access to nature is limited.

The use of Unreal Engine, a leading platform for creating 3D environments and simulations, could further enhance the potential for *Radical Rest Retreat* to evolve as a technologically innovative health intervention. By simulating dynamic acoustic environments that respond to the participant's movements or interactions, future iterations of the installation could offer a more personalised and adaptive experience, catering to the unique needs of each individual.

Conclusion

Radical Rest Retreat represents a significant intersection between sound art, spatial audio technology, and Creative Health interventions. By drawing on established theories in auditory scene analysis, acoustic ecology, psychoacoustics, and biophilic design, the installation creates an immersive environment that promotes mindfulness, reduces stress, and enhances well-being. Through its innovative use of sound technology, *Radical Rest Retreat* offers a democratised form of nature-based mindfulness practice, making the benefits of natural environments accessible to individuals in urban settings.

As research into the therapeutic effects of sound continues to expand, installations like *Radical Rest Retreat* provide valuable case studies for how Creative Health interventions can leverage sound to foster mental and emotional recovery. By integrating spatial audio and VR technologies, the installation opens up new possibilities for the future of Creative Health, offering a blueprint for how art, technology, and health can intersect to create meaningful, health-promoting experiences.

Jake Mehew, BA (Hons), MMus, is an electronic audiovisual artist based in Leeds, UK, and a PhD student at the University of Huddersfield. His work merges modular synthesis, sound design, audio-reactive visuals, and spatial sound staging to create immersive, otherworldly environments. Known for his ability to invoke sensations of flow, ecstasy, and trance through intricate combinations of polyrhythms, timbre, and repetition, Jake's performances transport audiences into dynamic, protean soundscapes. His PhD research explores technical illusion and the augmentation of reality through audiovisual art.

Over the years, Jake has performed alongside renowned artists like Suzanne Ciani, Arooj Aftab, The Comet is Coming, and Soccer 96. A strong advocate for immersive technologies, his second LP, *Microcosms*—created in collaboration with Berlin’s MONOM spatial audio studio—was shortlisted for Composition of the Year by the Radiophonic Institute. Jake has also contributed to immersive festival installations for D&B Audiotechnik and showcased his work at prestigious venues and festivals, including Britten Pears Arts, Sage Gateshead, The Nottingham Contemporary, Houghton Festival, We Out Here, Superbooth.

Declaration

The creation of *Radical Rest Retreat* was made possible through the generous support of Audio Technica, Brewery Studios, and Analogue Foundation. Audio Technica provided microphones for field and studio recording between October 2023 and May 2024. Additionally, in collaboration with Brewery Studios and Analogue Foundation, Audio Technica facilitated two weeks of studio space in central Berlin, where Jake Mehew and Henry Weekes resided to develop *Radical Rest Retreat*. During the residency, all recordings adhered to the requirement that only Audio Technica microphones were used. No external funding or influence shaped the creative or academic direction of this work.

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The Art of Inclusion: Insights and Reflections from Arts-Based Participatory Research with People with Learning Disabilities

Melissa Kirby, Fran Rodgers, Hannah Greenwood, Charlie Barker, Tracey Barrett, John Bartle, Leanne Hazelgrave, Liam Hirst, Ella Schofield, Karen Burland and Freya Bailes

Introduction

It is well acknowledged that people with learning disabilities have been historically marginalised, often facing reduced access to appropriate healthcare, education and leisure opportunities with long-term negative implications in their lives (Gray & Kerridge, 2023; Gréaux et al., 2023; Nind, 2007). Participatory and inclusive approaches to research empower underserved communities to play an active role in research that seeks to reduce these inequalities (Johnson & Walmsley, 2003). This often involves recruiting “experts by experience” as co-researchers. This approach therefore facilitates a shift in power, whereby people with learning disabilities are in control of the research aims, processes, outcomes and outputs, resulting in research that is beneficial and relevant to those involved. Alongside benefits for the research itself, active involvement in research may also facilitate positive outcomes for people with learning disabilities, including the development of new relationships (Kirby, 2023; St John et al., 2018), research skills (Kirby, 2023; Rickson et al., 2014; White & Morgan, 2012) and increased confidence and independence (Beighton et al., 2017; Kirby, 2023).

Although participatory approaches have become increasingly popular, people with learning disabilities remain underrepresented in research. This may be due to the perceived challenges around ensuring that often complex research processes are accessible to this community. Additionally, participatory approaches are noted to be time-consuming and costly (Cook, 2012), often relying on multiple stakeholders, with varied goals and priorities. While previous research has advised on the process of fostering positive relationships with communities and organisations (Lenette et al., 2019; Pettican et al., 2022), there are few accounts of what it means to collaborate in research from the perspective of people with learning disabilities and the organisations that are often crucial in supporting their engagement with research. Understanding the varied experiences, priorities, and outcomes of collaborative research from the perspective of all stakeholders is crucial to facilitate successful collaborative research and long-term positive relationships between academics and communities.

This paper shares insights, reflections and experiences from a collaboration between the University of Leeds, Purple Patch Arts (PPA) and the Purple Research Group (PRG). Our collaboration began in 2019, when Melissa Kirby began her PhD at the University of Leeds, in partnership with PPA; a Yorkshire-based charity who provide innovative, inclusive and creative learning opportunities for learning-disabled people. This arts-based Participatory Action Research project sought to explore the outcomes of arts-based learning for participants at PPA (Kirby, 2023). Seven PPA participants were recruited and trained as researchers (the PRG). By sharing our experiences, this paper aims to highlight the opportunities and challenges of doing research together and

the outcomes of our respective involvement in the project. We will also discuss the role that the arts played in reducing barriers to research for people with learning disabilities.

How we wrote this paper

The remainder of this paper is organised into three reflective accounts from the project: the academic, third sector organisation and community perspective. Writing this paper was a team effort. Melissa Kirby wrote the introduction and the academic perspective. Fran Rodgers and Hannah Greenwood wrote the third sector organisation perspective. Melissa met with the PRG on Zoom to support them to write the community perspective. She wrote down everything they said during the meeting and sent it back to them to check. We finish by making recommendations for future collaborations between academics and communities.

The Academic Perspective

Melissa Kirby (University of Leeds)

This project was my first experience of participatory research. My desire to use this approach as part of my PhD stemmed from my belief that people with learning disabilities are best placed to undertake research concerning their own lives. This project was therefore just as much about the topic as it was about the process of fostering meaningful collaborations.

Initial meetings with PPA were crucial to identify key goals and priorities in the project. It also highlighted our shared values, including our shared interest in the arts, and my background as a support worker. Openness and honesty in these conversations were crucial, alongside a willingness to learn from each other. Feedback and insights from PPA staff throughout the project were invaluable. Their openness to new ideas and willingness to share their expertise established the relationship as collaborative from the beginning.

Developing trust with the PRG was also a crucial and ongoing part of the project. As a non-disabled researcher who was not part of PPA, I came to the group as an outsider. While getting to know each other and developing trust took time, this process was undoubtedly supported by the fact that I was 'Purple Patch approved'. This demonstrates the importance of researchers prioritising developing strong working relationships with trusted organisations.

One of the most valuable things about doing research together was the PRG's ability to look at the research world through a different lens. Often the ideas that I was initially hesitant about were the most powerful and beneficial to the project. For example, I was initially unsure about the first activity suggested by the group (a reflective poster about their perceptions and experiences of PPA), as it did not fit 'neatly' into our first theme. However, this activity became one of the most valuable in the project and was an important lesson in relinquishing the control that researchers often hold. Participatory research projects should not be possible without sharing diverse expertise and experiences – in this case, embracing being wrong demonstrated that we were doing something right.

The arts and creativity were the glue in our project and underpinned not only our collaboration, but also our approach. In line with our research findings concerning arts-based learning at PPA, arts-based approaches helped us to break down the 'rules' of research and to adapt traditional and inaccessible aspects of the process to meet the diverse needs of our group. For example, a discussion about how research outputs were generally inaccessible to people with learning disabilities led to the co-creation of our research comic book, 'The Purple Patch' (Kirby et al., 2024). Thinking creatively allowed us to re-imagine what a research output can/should look like.

An important outcome of this project was its positive impact in the lives of the PRG. Co-researchers reported that the research helped them to develop new skills, increased their confidence and independence and supported their wellbeing. The PRG also became an important support network, particularly during extended periods of isolation in the pandemic. The project demonstrates the potential for research to become an important and valued part of people with learning disabilities' lives, which in itself, may help to reduce some of the inequalities they experience. However, the positive impact of the project also became our greatest challenge, as we navigated sustaining our collaboration beyond the PhD. Knowing that the group wanted to continue doing research, but that opportunities for this were sparse, raised important questions about how/if researchers should end participatory research and highlighted the lack of sustainable research opportunities for this community. With this in mind, we have prioritised continuing our collaboration, by applying for additional funding and developing new partnerships.

The expertise and experiences of the PRG and PPA shaped not only this project, but also my approach to research moving forward. While participatory research can be challenging, the potential for transformative experiences for all involved cannot be overstated.

The Third Sector Organisation Perspective

Fran Rodgers and Hannah Greenwood (Purple Patch Arts)

We entered this collaboration wanting an evaluation of our Lifelong Learning Programmes, to help us to fully understand the impact they have on our participants' lives. As a small team with limited capacity, we didn't have any formal evaluation processes in place at the time. This was an issue when putting together funding applications which, understandably, ask for measurable impact. However, we quickly realised that a collaborative approach could, and should, offer something quite different, and our perspective shifted from 'what funders want' to how research and evaluation can benefit and enhance the lives of the community we work with. This has re-energised us and has fundamentally changed how we run as an organisation.

This collaboration meant we were able to listen in-depth to some of our participants; we simply would not have had time to do this otherwise. The process gave us so much more than we expected; pulling apart what we do, through the experiences

of our participants, and laying out why our approach works. This has transformed the way we talk about what we do.

The development of the PRG was an unanticipated, but incredibly positive, outcome of the collaboration. The group's vision and determination that all research should be accessible and inclusive means that the decision to continue the work beyond the PhD was pretty much out of our hands! Of course, this brings the inevitable challenge of sustainability. But the benefit of being a small organisation is that we can be proactive about making things happen without too much red tape holding us back. We need to now develop the PRG further and secure its future to vastly increase the impact it has on the research sector and, consequently, the lives of learning-disabled people across the UK. The research sector can feel daunting and impenetrable to those who are outside of it. As well as challenging misconceptions about what learning-disabled people are capable of, this project has increased our confidence as an organisation in recognising the knowledge, strengths and expertise that we bring to the table.

Seeing what people were able to achieve through their involvement in the PRG gave us ideas about how our participants can feed into our organisation further. We now have progression routes for participants, including a Participant Steering Group. We're embedding consultation with participants into our everyday work, shaping our future direction around the outcomes to be a stronger, more impactful organisation. With meaningful evaluation now embedded across all of our work, we have a deep understanding of our impact, as told to us by the people whose opinions really matter; our participants.

The arts are fundamental to our approach and to the project: they connected us with Melissa through a shared passion, and ensured the accessibility and inclusivity of the work, allowing people to shine. Our participants are used to being empowered to express themselves. By using a similarly creative approach, the research enabled the PRG to take ownership over the project, thereby shifting the power away from those who have traditionally held it and to learning-disabled people. Without the arts, they would have been excluded from significant parts of the process.

Fundamental, too, was communication and trust between PPA, the PRG and Melissa. Our shared values meant that there was understanding between us from the start. Melissa clearly recognised the significance of the relationships she was forming with the PRG, and continues to take this responsibility seriously. Her openness to embedding the Purple Patch Approach was met by our receptiveness to learning from her and our willingness to change to make things better; without this, the collaboration simply would not have worked.

But it did work, and so much better than we anticipated. PPA is a different, more ambitious organisation because of this joyous, mutually respectful and inspirational collaboration. Its effects will be felt long into the future, and for that, we are very grateful.

The Community Perspective

The PRG

We are the PRG – a research team for people with learning disabilities. We started doing research in 2020 when Melissa asked us to help her with her PhD. We all had different reasons for wanting to do research, like meeting new people and learning new things. We started our research in the pandemic. This made it a bit difficult because we had to meet online and learn how to use Zoom, but it was also one of the only things we were able to do in lockdown.

Learning about research was difficult at first. We had never done any research before, and we didn't know what it was. We used the arts to make it more accessible and fun. We did drawing, made posters, took photos and wrote stories and poems. We needed different ways to give feedback and the arts helped us to share our experiences. We also used the arts to share our research – we turned it into a comic! (Kirby et al., 2024). Melissa had to write a big book called a thesis, but this isn't very accessible. We decided to create a comic, so it was easier for everyone to learn about our research.

One thing that we've learned from doing research together is that partnership is important – we're all on the same page, so we don't disagree with one another on the important things. We are a good team, and we can do our research better when we work together. But learning to work together takes time. We had to learn to listen to one another. Melissa got to know us, so she knew the best way to support us, just like at PPA! It would be scary if someone just came into PPA and we didn't know them. It's really important to give us time and listen to us. Researchers need to get to know people with learning disabilities as people.

Our confidence has grown from the start to now. John says he can focus more on things, and Tracey feels like she has changed into a new person. We believe in ourselves more! Ella says: *'I never thought I'd get an opportunity to be a researcher. Doing research has made me change into a different, more independent person - I do things for myself. I can speak up more in the group and in PPA. Before I tried to say things and I couldn't get the words'*.

We are also speaking up for other people with learning disabilities. We tell people why they should do research with people with learning disabilities – people with learning disabilities can be great researchers! One of the best things about doing research together is the company. We hadn't met people from different parts of PPA before, but we have now. We have become friends. We have also learned more about PPA and we are helping to make it even better!

After the PhD, we decided we wanted to carry on doing research. Getting funding for research can be difficult because doing research together takes a lot of time and money. In the future we would like to work with other people like us and train them so they can be researchers too. It is important that our voices are heard

and listened to so that we can make the world a better place. Having a learning disability can offer something great.

Recommendations for future collaborations

From our reflections, we have identified four recommendations for establishing a solid foundation for collaborations between academics, third sector organisations and communities:

Identify shared values and goals. Shared values and the development of mutually agreed goals are important for a positive collaborative experience. While different stakeholders will have different priorities, early conversations about the values underpinning the research are needed to ensure that the collaboration is a good fit. These conversations can also support the development of trust between stakeholders from diverse backgrounds, by highlighting shared experiences and interests, alongside providing an opportunity to discuss any priorities that are not aligned.

Demonstrate willingness to change. For collaborative research to be impactful, all stakeholders must be open to change. Listening to and learning from the expertise of others can result in exciting and creative new approaches. Organisations and academics in particular need to truly listen to, and act upon, the views of communities. Addressing important questions at the beginning of the project - such as how we will action feedback, whose responsibility it is to implement changes, and how we will approach negative feedback - is important for developing a plan to action change.

Prioritise relationships. The development of strong relationships is crucial for the success of participatory research. Researchers should expect to spend a lot of time developing and maintaining these relationships, with both organisations and communities. This should involve getting to know all stakeholders as individuals before the project formally begins and throughout the process. Spending time in/with the organisation and community supports the development of relationships, but also provides valuable insights into their ways of working and opportunities for knowledge exchange.

Consider sustainability. Considering the sustainability of the collaboration at the beginning of the project, including how/if the collaboration will end, is crucial. Collaborative research may have long-term impact for organisations and communities. In the present study, co-researchers' desire to continue undertaking research was met with limited external opportunities for this, and PPA now face the challenge of securing long-term funding to sustain the group. Discussing expectations for the future of the collaboration and plans for the end of the project are crucial to retain positive relationships and support people with learning disabilities' continued engagement with research.

Purple Patch Arts provide innovative, inclusive, creative learning opportunities that improve the lives of learning-disabled people by expanding their understanding of, and engagement with, the world. They do learning differently; whether it's dancing, painting or getting into nature, learning with PPA is fun, creative and hands-on. Every year they support and empower over 200 people across Yorkshire to thrive through their Lifelong Learning Programmes and funded projects.

Melissa Kirby is a researcher at the University of Leeds and the University of Manchester. Her primary areas of interest are inclusive and participatory approaches to research with people with learning disabilities/autistic people, and arts-based and creative methods. Melissa completed her PhD at the University of Leeds in 2023, supervised by Professor Karen Burland and Dr Freya Bailes.

Fran Rodgers is the Chief Executive Officer of Purple Patch Arts.

Hannah Greenwood is the Projects Manager at Purple Patch Arts.

Charlie Barker, Tracey Barrett, John Bartle, Leanne Hazelgrave, Liam Hirst and Ella Schofield are members of the Purple Research Group (PRG). The Purple Research Group (PRG) are a team of researchers with learning disabilities based at PPA. The group was established in 2020 as part of Melissa Kirby's PhD. The PRG use arts-based methods to co-produce research inclusively. Their research focuses on learning-disabled people's engagement with arts-based, cultural, and learning opportunities, alongside how we can make research more accessible.

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Towards a continuum of care practice involving greater collaboration and alignment between Creative Practitioners' (CPs) and Creative Arts Therapists (CATs) working in health, social care and other settings with a West Yorkshire example Dr Richard Coaten, Maria Pasiecznik Parsons and Bridget Gill

We make a case for more creative dialogue and collaboration between arts in health or Creative Health (NCCH, 2023), as it is increasingly being known, and creative arts therapies in order to improve health and wellbeing outcomes for people living with dementia, their family carers and others with long-term mental health conditions. It draws on research for a chapter submitted by Coaten and Parsons for publication by JKP in a new *Practice Handbook for Creative Arts and Dementia* in 2025, including a model of good practice developed by the In Cahoots Collective (ICC) during a movement, music and dance international residency in Wakefield District, in partnership with local charity Spectrum People (SP) in October 2024. SP is an independent charity set up in 2013 by Spectrum Community Health CIC to provide meaningful activities and support for vulnerable adults and young people across the Wakefield District, helping them overcome the barriers in their lives.

Pooling (scarce, relative to need) resources associated with Creative Health and creative arts therapies through more collaboration and alignment (particularly in training/education and supervision) will enable arts to play a larger role in what is becoming a more integrated landscape in health and social care, especially in the light of the recent report by Lord Darzi (2024a) into the state of the NHS. Since such change involves all stakeholders, we examine driving and restraining factors that help and hinder alignment and collaboration between practitioners at micro (practice) level, where creative practitioners (CPs) and creative arts therapists (CATs) are located; at meso level, where arts, health social care and VCSE organisations are found; and at macro level where NHS, infra-structure organisations and professional bodies operate and hold power.

In combining this assessment with insights from practical experience, and drawing on national and international literature, it is clear creative dialogue and collaboration is taking place and that creative arts are now playing a larger role in policy driving the NHS towards, '...a more integrated and person-centred approach to health and social care', as reported by the National Centre for Creative Health (NCCH, 2023,14; see also Baring Foundation 2021, NHS 2020, 2019, Percy-Smith et al. 2024, NOAH 2018 and 2017, Sandford and Gilluley 2021). Here we offer some next steps, consider the implications and challenges for all stakeholders and conclude by asking all involved to be bold and seize opportunities for systems change. Lord Darzi's Report into the state of the NHS in 2024 calls for more investment in the community, '(l)ock in the shift of care closer to home by hardwiring financial flows. General practice, mental health and community services will need to expand and adapt to the needs of those with long-term conditions whose prevalence is growing rapidly as the population age' (Darzi & Hamlyn, 2024b, point 28).

What do we mean by Creative Practitioners (CPs) and Creative Arts Therapists (CATs)?

Creative Practitioners include all those working creatively across all art-forms,

including digital arts across the UK. Employed by a wide range of organisations, and facilitating Creative Health offers in any setting, on a long or short-term contract or on a self-employed basis. Creative Arts Therapists (CATs) hold a Masters degree and as registered members of their respective professional associations (e.g. BADTh, BAAT, BAMT, ADMP(UK)) are required to adhere to ethical codes of practice and maintain Continuing Professional Development. They are also required to have ongoing Clinical Supervision for their practice and to have had Personal Therapy.

Similarities and differences between Creative Arts Therapists and Creative Practitioners

The goals, content and format of work vary depending on their role, training, and experience. CATs reflect on their practice with a supervisor or experienced peers; CPs working in larger organisations may well receive supervision including opportunities for reflection on their practice; many freelancers do not, although some access practice support in other ways. CATs (drama, art and music) are all Allied Health Professionals with protected titles whose accreditation by the Health Care and Professions Council (HCPC) is recognised by the NHS and other commissioners. This is not the case for ADMP (UK) members, but the organisation is a registering body for the UK Council for Psychotherapy (UKCP), members currently joining it instead of HCPC. CPs on the other hand generally get paid less and their job security and conditions of service are less secure than CATs employed by the NHS.

A major obstacle to informal as well as formal dialogue between CPs and CATs is that overall, they are insulated from one another and work in ‘professional silos’ (Betts and Huet 2023) that reduce opportunities for creative dialogue and collaboration for reciprocal learning about the nature of the work. Moss (2008) cites Daykin who observes, ‘(t)here is in general a lack of understanding between creative arts therapists and arts in health practitioners about the unique contribution that each makes to improving and enhancing health services, and what they can learn from one another’s practice’ (2008, p. 86).

The expansion of arts in health since 2008 has left this practice gulf largely unaddressed although some of the barriers between CATs and CPs are now being dismantled with more focus on ‘what (they) bring to each other’ (Hume 2023 p.41) in terms of shared understanding of roles and potential for mutual support and learning. There is increasing creative dialogue and collaboration at meso and micro level between CATs and CPs including supervision, mentoring and reflective practice offered for both by the Orange Collective and Flourishing Lives, Artlink’s Music on the Wards and other hospital-based arts programmes that employ both CPs and CATs. CATs are collaborating with carer support groups, currently in early-stage development in North Yorkshire, to offer movement dance and embodied practices providing emotional support to family carers.

Macro level collaboration - progressing creative dialogue and collaboration

In the UK, the establishment of two key infrastructure organisations: the Culture

Health and Wellbeing Alliance (CHWA) funded by Arts Council England (ACE) and the NCCH, a national charity, provide the Creative Health movement with strong, knowledgeable and visible leadership that is actioning Betts & Huet's call:

...to encourage not only a "grass roots" approach to partnership work but also an active partnership building between arts therapies professional bodies, arts in health organizations, politicians, service providers (including the NHS), and people with experience of emotional and physical distress who have benefitted from the arts to develop a shared strategy (Betts & Huets, 2023, p. 12).

There is value in representatives of arts in health organisations, university course leaders, UK based Arts Councils and arts therapy professional bodies coming together as for example, Strategic Alliance Members of the CHWA to share their work, discuss key issues and move intra-sector collaboration forward.

This call also draws on the work of Moss (2016, p. 12) who introduced 'A New Paradigm': a concept that has made it possible to view all arts in health and social care related activity as part of an interdisciplinary continuum, from Health Humanities to Community Arts, to Arts Education, Residencies, Performances and Exhibitions through Arts in Health Practice and to the Arts Therapies. Moss (2016, 2008) also made one of the first compelling cases for creative dialogue between CPs and CATs who, by becoming more knowledgeable about their respective practice and the ways in which they work, can bring significant results in improving mental healthcare for adults.

Examples of effecting macro level change and collaboration in arts and health are offered by Betts and Huet (2023) who have brought together a number of international studies. One initiative that is particularly salient to the case we are making is:

Developing a Continuum of Practice

Moss (2008) laid the foundation for a Continuum of Practice whereby the work of both CPs and CATs can be viewed along a continuum of practice from a healthcare (hospital) setting where CATs work to community care where CPs are located: a continuum, '...that can be conceptualised as ranging from a clinical focus at one end of the spectrum to a broad public health focus at the other end' (Lambert, Lee and Sonke, 2023, p. 66). The development of a Continuum of Practice is exemplified internationally by the Creative Forces® arts for injured veterans programme which, as Vaudreuil, Blumenfeld and Walker (2023) point out, benefits from an integrated R&D building capacity that supports the development of both CPs and CATs; neither group is disenfranchised as the contribution of both is valued and both benefit from being aware of and linked into each other's practices.

The Creative Forces® project, also shows how pathways and systems can be organised in ways that facilitate access to arts therapy and arts in health and meet the needs of 'the whole person' (an injured veteran) by making a range of expertise available at *different stages of illness and recovery* (Vaudreuil et al. 2023). Whilst no

similar structured arts in health pathways exist in the UK, there is scope to include Creative Health in NHS care pathways for example in the Dementia Care Pathway (NCCMH, 2018). Specifically in person-centred post diagnosis support when most people who are diagnosed in memory clinics continue to live in their own homes and are supported by family carers who are vital in promoting agency and meeting the needs of the person they care for, including meaningful occupation and social engagement (Talbot, 2022).

Workforce development: education and training for arts in health practice

Despite considerable gaps in education, training and CPD for many CPs and others working in Creative Health an expansion of the arts in health workforce is taking place, notwithstanding the silos of creative arts practice that have their roots in separate education and training whence one group of students (CATs) qualify as professionals and others do not. New arts and health jobs as well as CPs seeking degrees are also driving demand for new courses. In these and CAT programmes, the inclusion of modules about the Creative Health practice landscape, skills and knowledge, and roles and relationships of CATs and CPs could help facilitate more creative dialogue and collaboration. Building blocks are being put in place by encouraging CPs and CATs to come together in different contexts to share their knowledge and skills as part of professional development (Hume, 2023).

Support for practitioners and organisations providing supervision and mentoring: As noted above several organisations have begun providing resources and support that reduce practitioner isolation (especially CPs) and contribute to workforce development. For example, CATs are now working in London and South-East England, supervising and evaluating arts and health projects, mentoring and supervising individual CPs enabling them to develop their skills in reflective practices and improving the quality of care provided (Sandford & Gilluley, 2021). Most of these developments however are local initiatives, sporadic and unlikely to offer equal access across the UK unless funding is made available.

Implications

System change does not take place without disruption of the status quo. Increased collaboration between CATs and CPs highlights overarching areas of tension that need to be addressed including: ‘...(p)rofessional insecurities, lack of clear definition of roles and professional boundaries and competition for funding between different arts practitioners in the field’ (Moss, 2016, p.7). These are likely to act as a brake to developing joint projects involving CATs and CPs.

Furthermore, discussions with CATs suggest that it may be difficult for them, their employers and professional bodies to establish and agree the basis on which they might be available to help develop and support CPs through dialogue, mentoring, supervision etc. Macro level discussions also need to include CAT professional bodies and universities as course providers. However, skilling up CPs may well enhance their status and make them more attractive to project funders and perhaps service commissioners and providers given their rates of pay are considerably lower than CATs, which would be contentious for CATs. Nevertheless, the Baring Report

recommended (No.5): '(m)ental Health Trusts should explore how (CATs) and Participatory Artists can most productively share their differing skills and support each other to the benefit of patients' (Baring Foundation, 2021, p.65), hence provision is likely to expand.

An international example of collaboration and dialogue in Wakefield, West Yorkshire: Having presented a rationale for the importance of more collaboration and alignment between CPs and CATs, here is an example of what that actually looks like in practice.

'In Cahoots Collective – moving towards inspirational practice in Creative Health' International Movement, Music & Dance Residency in partnership with Spectrum People, Wakefield <https://spectrumpeople.org.uk/> September 23rd to 27th 2024

Brief Summary: In April 2023, two arts therapists- Job Cornelissen (dance) & Jantje Van Der Wurff (music)- from the Netherlands applied to and were awarded funding by the Dutch Cultural Participation Fund (DCPF) to work with their UK based colleague Dr Richard Coaten (Dance Movement Psychotherapist) on a week-long movement and dance-based residency involving seniors living with dementia and their carers in West Yorkshire specifically; since the county is seen by the DCPF as a beacon of innovative practices in Creative Health. They called themselves the In Cahoots Collective (ICC) having worked together before in Berlin and San Antonio. Bridget Gill, Chief Officer of Spectrum People expressed her keenness to support this and very kindly offered the organisation as able to provide the necessary structure and administration. A bid for a Made in Wakefield Culture Grant funding was successful. This was ideal, since Spectrum People had very good links with a number of local organisations, people living with dementia and their carers and volunteers, professional artists, art therapists and students with the crucial ability to source the venues and participants through their networks.

The Key Objectives of the commission were to:

1. Revitalise use of **multi-disciplinary practices** in this work e.g. use of movement, dance, play and live music (using our bodies and voices).
2. Revitalise importance of intuitive and **improvisatory practices in dementia care** including performance and performative aspects in what ICC do.
3. Re-negotiate shared spaces where we connect and the sensorial channels we use, while maintaining relationship and **Personhood** (Kitwood & Bredin, 1992).
4. Offer training and development opportunities to VCSE and other staff in community settings together with arts therapists, Creative Health practitioners across all art-forms, especially movement and dance.
5. Explore further opportunities for international collaboration in creative health and well-being practices and particularly between Wakefield, West Yorkshire and the Netherlands.

The week began with a Masterclass on the Monday for fourteen creatives. Some were dancers, others art therapists, including one newly qualified DMP and

activity co-ordinators. This was followed by morning and afternoon sessions for the rest of the week in different locations throughout the district. Each session lasted around 1.5hrs. There was an expectation that those attending the Masterclass would also attend sessions during the rest of the week, which they did. This helped understanding of the work in practice and built confidence regarding how there is an effective transfer of knowledge between training, theory and practice. On the Friday afternoon, there was a moving celebration event of what had been achieved with ninety plus attenders including visitors. Both Masterclass, several sessions and the Celebration were filmed in part for evaluation purposes but most importantly as a legacy of the week that can be shared going forward.



Results:

1. The Masterclass laid the foundations for an improvisational approach with a focus on how live music and its strong dynamics, together with rhythmic movement and dance combine to bring out the ‘creative’ best, including the CATs delivering the practice to CPs and other CATs attending from different disciplines:

‘I felt growth in us as participants in the masterclass, in the participants of the workshops, and it seemed even in the ways the therapists were engaging!’
“Learning something new and feeling inspired’.

2. The whole week was a remarkable collaboration between the CPs attending who were invited to try out their own ideas during sessions with participants. CPs received feedback afterwards and gave feedback to ICC.
'It was an incredible creative experience, run by talented and inspirational experts that will stay in my memory for a long time.'
3. Starting with the Masterclass and all through the week, high-quality musical instruments were provided by Music Therapist Jantje such as wah-wah tubes, thunder-drums, marimbas, tuned drums, tin-whistles, bells and a large handpan drum. He accompanied the music making sometimes on hand-pan and sometimes on guitar:
'Absolutely brilliant, when will you be back'
4. All attending the sessions in the week had an experience very different from a more traditional approach to seated movement and music type work. It also involved song and reminiscence that became woven improvisationally into the emerging themes for each one, each session being unique, in one participant's words *'it reclaimed nice memories'*, also *'My participation has increased my confidence in my abilities'*.
5. Attendees came to an activity run by organisational partners of Spectrum People, in a trusted space. ICC took the workshop to them rather than expecting people to come to an unknown venue and group.
6. Having three highly experienced CATs delivering a masterclass and sessions all week is expensive, but proved the value of live music being beneficial for this client group. They also learnt about their own creative practices through the feedback given. The legacy left behind for those attending the Masterclass is arguably a significant one, and it is hoped will enable work of this type to be repeated.

Conclusion

We began by briefly making the case for more collaboration between CPs, CATs and stakeholder organisations at micro, meso and macro level working with people living with dementia and the implications and challenges in doing so. We have sited it within a body of literature and current national and international developments in Creative Health including a call for the development of a Continuum of Care Practice that could be applied in West Yorkshire, although this paper has not gone into detail about how it might work specifically here. The results of the ICC movement, music and dance residency in collaboration with Spectrum People have clearly demonstrated the value of building cross disciplinary and cross-cultural collaborations in Creative Health between CATs and CPs. For example, by evidencing the importance of training in improvisatory music, movement and dance practices not only with people living with dementia and their carers but also with vulnerable adults in the district. The training has left a legacy in those CPs and CATs involved that will hopefully bear fruit over the coming months. First by way of the films made of the work that will be shared, and most importantly by how practice can be invigorated by person-centred, improvisatory and team-based approaches.

We conclude by asking all involved to be bold and seize opportunities for structural change now. As Judith Rubin (art therapist) reminds us '(e)veryone helping others

through the arts - therapists, educators, artists in hospitals and communities – are natural allies. Welcome to “an idea whose time has come” (cited in Betts and Huet, 2023). Creative dialogue and collaboration are essential for developing a Continuum of Care Practice, joining up the education and training of practitioners and supporting integrated arts and healthcare pathways for people living with various long-term conditions. Such changes have the potential to enhance the skill-sets and progress the development of a more integrated and aligned Creative Health workforce, and support the development of joined-up arts-based community resources that improve community health and wellbeing.

Dr Richard Coaten is a dancer and Dance Movement Psychotherapist. Richard has worked with older people living with dementia since the mid 1980s, pioneering the use and importance of movement and dance. He has published extensively over many years and his co-editing of *The Practical Handbook of Living with Dementia* in 2022 has just been chosen under the Reading Well for Dementia scheme to go out to all libraries in England and Wales in 2024. He has had two stints as a hospital arts co-ordinator, co-founded Living Arts Scotland Ltd in Glasgow, has worked locally in West Yorkshire in the NHS for 16 years based in old age psychiatry, where he ran a ward-based and in-community dance movement psychotherapy service.

Maria Pasiiecznik Parsons is Chief Executive of Creative Dementia Arts Network where she develops and manages projects and leads training. Maria has presented her work in the UK and internationally and has written widely about different aspects of dementia care. Maria is on the Board of Frames of Mind, CIC. She helped set up and is on the Board of Dementia Publishing, the Community Benefit Society that now publishes the *Journal of Dementia Care*, organises and runs the annual National Dementia Care awards and the annual UK Dementia Care Congress.

Bridget Gill is Chief Officer of Spectrum People where she has led the development of Creative Health and green space therapeutic offers for 10 years, with a team including community workers, art therapists and many volunteers. Prior to that she worked in the NHS for 20 years, having started her career in the private sector. Bridget is chair of trustees for Wakefield Sea Cadets, and a trustee for Leger Education Trust and North Doncaster Development Trust. She is passionate about helping individuals find their ‘voice’ through the mediums of creative health and green space and how this positively improves their wellbeing, often reducing the impact on health and social services.

Image credit

Image 1: Musical instruments at In Cahoots Collective Masterclass. Photograph by Sophie Mei-Lan.

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How to build a staffroom: research into carers' experiences and needs for care and rest at work

Dr Sophie Hope and Jenny Richards

Introduction

This position piece is based on a collaboration between home-care organisation Equal Care Co-op based in Hebden Bridge, West Yorkshire and us (Sophie Hope and Jenny Richards, aka Manual Labours). In Autumn 2024 we will facilitate a series of workshops with home-care workers (members of Equal Care Co-op) to collectively explore carers' experiences of rest, break times and the care and support they access as workers, alongside the role participatory arts-based research methods play in researching worker wellbeing and working conditions. Workshops will inform the co-designing of a prototype for a 'distributed' staffroom for itinerant workers and the co-writing of funding applications to further develop this work together. In this piece of writing we position our research in the context of wellbeing, care-work and creative health and explain our methodology and methods for working with the carers.

Our collaboration with Equal Care Co-op stems from our ongoing research into staffrooms and people's experiences of rest and care at work. The research underpinning the workshops draws on a sociology and history of work, as well as feminist architectural and design studies to explore how spaces of work (and rest at work) are organised, hacked, co-opted and/or neglected. What role has the staffroom had historically in workplaces, and how does this relate to the gendered, racialised and class division of work? What does the staffroom mean for contemporary working cultures that are contractually precarious and/or itinerant and situated in the home?

The staffroom

Our interest in worker wellbeing has focused on the context of the staffroom as a symbolic space for rest at work. We have been charting the histories of staffrooms in different work contexts (Manual Labours, 2021). The 1847 Ten Hour Act, for example, cut working hours for women and under-eighteens to 58 hours a week (ten hours a day), introduced breaks and Saturday afternoons off. Industrialists Cadbury and later Lever incorporated worker-wellbeing programmes and spaces for their workers to eat, rest and play in the late 19th and early 20th centuries. Taylorism's approach to maximising industrial efficiency influenced the introduction of open plan office designs in the 1930s to improve office productivity. The 21st century is marked by the disappearance of the staffroom and the growth of workplace benefits and wellbeing programmes. Work reforms for rest and care entail histories of worker organising and campaigning, as well as the implementation of wellbeing initiatives by employers in the drive for improving worker efficiency, productivity and profit.

We are interested in these histories and the underlying motives for improving the wellbeing of workers and what role arts play in upholding, or subverting, these motives. Through our research we have found that (despite legal requirements), there is ever-reducing space and time to take (paid) breaks from work.

However, addressing the fragmentation of workers by providing support, time and space for rest for co-workers to socialise, collectivise and mobilise have been identified as key components for improving health and wellbeing of workers (North, 2020; Donnellan et al., 2022). We are interested in exploring the impacts this lack of time and space to not work at work has on workers. We are asking: what happens to the potential for working collectively, campaigning for better working conditions and developing solidarity, given these circumstances?

Informing our collaboration with Equal Care Co-op is a 20-week podcast series (Manual Labours, 2020), workshops with two cultural organisations (2021/22) and nine conversations with cultural workers, hospital workers, care work organisations, trade unionists and activists about their experiences of rest and care at work (Manual Labours, 2023). Through these research activities we identified a strong chorus of voices, many without one fixed workplace. Precarious and shift working conditions prevented any access to a staffroom or time to take a break. Alongside the structural need for paid break times and the provision of space for care at work, voices articulated different types of space they desired for rest and care at work (such as an accessible garden, space for collective organising and individual and collective care). People were experiencing the sticking plaster of wellbeing practices at work, rather than seeing any structural changes; the need for spaces and times when they can drop the performance and emotional labour that their working contexts require; and the issue of where and how staff in working contexts that are open and centring care, can retreat and not care during their breaks.

Wellbeing and Creative Health

Much like the 19th century industrialists providing rest time and spaces for workers, contemporary workplaces are often interested in improving the health and happiness of workers through employment schemes such as step challenges, mindfulness and yoga classes, gym memberships and flu vaccinations. While such schemes can benefit individual workers, they often exist to improve greater worker productivity and profitability. As Barbara Ehrenreich argues, in the 1970s and 80s:

...companies got the idea that promoting individual health might reduce their expenditures on employee health insurance, an insight that eventually led to what is now a 6 billion dollar industry in creating and managing corporate wellness programs. (Ehrenreich, 2018, p.103)

Creative Health initiatives are often based on the premise that engagement with the arts will make people feel happier and healthier. For example, the 2017 Creative Health Inquiry Report stated the authors' belief that the arts can be enlisted to 'increasing wellbeing among staff in health and social care', among a whole host of other challenges, including 'enabling more cost-effective use of resources within the NHS' (All-Party Parliamentary Group on Arts, Health and Wellbeing, 2017, p. 5). The report's reference to improving wellbeing at work is couched in worker productivity and performance:

In the USA, creative activity undertaken outside of work has been seen to hasten recovery from work strain and enhance work-related performance, leading researchers to conclude that organisations may benefit from encouraging employees to consider creative activities in their efforts to recover from work. (ibid., p.102)

While ‘protecting the health of working-age people’ is important, and acknowledging the toll work is taking on the bodies and minds of workers is a step forward, we are concerned about the folding of this wellbeing work back onto the workers themselves.

Creative Health in Communities (Percy-Smith et al., 2023) reports on how Creative Health can reach communities and neighbourhoods to address health inequalities in place. Acknowledging the structural inequalities that prevent access to health and social care is welcome. As practice-based researchers working across different work contexts (such as health, culture, education), we are interested in developing further understanding of the wellbeing of workers and how their physical and emotional relations to work are affected by their working conditions and the structural and infrastructural conditions people are living and working in. In contrast to putting Creative Health and wellbeing initiatives in service of creating a more productive workforce, we are interested in finding out if collective, creative and critical spaces for sharing experiences and complaints of work can support networks of solidarity and the potential to organise towards better working conditions. Our overarching research focus is concerned with the impacts collective campaigning and organising against the unhealthy conditions of work has on the physical and mental health and wellbeing of workers. We are interested in taking the Creative Health agenda beyond the bodies of the stressed, burnt-out, excluded, marginalised bodies of those identified as in need of Creative Health. We do this by trying to connect discourses and practices of wellbeing to working conditions. Equal Care Co-op in this case is a multi-stakeholder co-operative, in which workers, those receiving support, advocates of those receiving support and investors are all members of Equal Care. We are interested in learning how this co-operative approach to care impacts on the working conditions, health and wellbeing of worker members in particular.

The context of care work

Domiciliary home care workers are paid to go to the homes of people to help them with their personal routines. Exploring rest and care for workers in this context is of particular interest due to the conditions of these workers which make it hard to take a break and meet with co-workers: their workplace is other people’s homes, they are typically not paid to travel between homes and they often carry out ‘informal’ (unpaid) care alongside the paid formal activities in the care plans, leaving little time for taking a break (Bolton and Wibberley, 2014).

There is a long history of the professionalisation and commodification of domiciliary care (Stacey, 2005; Bolton and Wibberley, 2014; Tronto, 2015; Itua, 2021; Dowling, 2012); and plentiful literature on the gendered, racialised, classed distinctions of paid and informal aspects of domestic labour; campaigns for improving working conditions of carers relating to worker wellbeing and productivity (Friedli and

Stearn, 2015; Cederström & Spicer, 2015). Growing awareness of the question of ‘who cares for the carers’ was perhaps most visible, and audible, in the clapping on doorsteps, banging of pans and drawings of rainbows in windows during the COVID-19 pandemic. These acts of gratitude, however galvanising, did little to address the ongoing privatisation of care services, zero-hour contracting and worsening working conditions (Wood & Skeggs, 2020). Burn-out, stress, compassion fatigue, mental and physical health issues have been identified as key concerns for health and social care workers (Ravalier et al., 2019; Garnett et al, 2023).

When discussing care and rest at work with Equal Care we learnt of the lack of access to spaces of rest such as staffrooms due to the nature of the work which occurs in peoples’ private homes. Breaks often occur between different home visits but without time to return to the office, breaks happen in the car, a bus stop or fee-paying spaces like cafes that sit enroute to the next home that day. As homecare work doesn’t have a fixed place of work or schedule the very idea of the staffroom itself is challenged. The result is an increasingly isolated workforce who do not often meet their colleagues face to face.

Equal Care Co-op have specifically identified how the terrain of the Calder Valley makes finding accessible space where home care workers could get together and meet each other difficult, especially if they don’t commute by car. Space issues were also raised in relation to affordability as restrictions to local funding for social care makes it difficult to get support for a shared space for home care workers in which they might be able to take care of themselves and their co-workers more regularly. Without a shared meeting space, the isolation of home care work is compounded.

The Creative Health in Communities report speaks to some of these concerns, outlining the need for building ‘capabilities (work/ learning, health/vitality, relationships, community) through creative health work with communities and creative/ cultural providers’ (Percy-Smith et al, 2023, p.9). The report points to the need for sustainable funding, moving away from one-off project funding and towards more embedded and joined up funding opportunities so that ‘creative health in a place is appropriately resourced’ (ibid., p.27). This call for structural and infrastructural frameworks recognises the need to move from the individual to the systemic changes in social and health care that are needed if Creative Health initiatives are to be anything more than a sticking plaster on an unsustainable care system.

Methodology

Influenced by methods of militant research, worker inquiry, participatory action research and decolonial pedagogy our research is based on an interpretivist epistemology that acknowledges and works with the diversity of situated experiences of participants. Acknowledging we are not care-workers ourselves; the workshop phase is a stepping stone to develop trusting collaborative relationships with the care workers in order to establish a co-designed staffroom and research proposal in the next phase. With Equal Care Co-op we are co-developing a research process with a small group of care-workers that begins from their diverse experiences and is grounded on an ethics of care. This involves being transparent about budgets with

all collaborators and paying workshop participants for their time as co-researchers, involving them in processes of interpretation and analysis of the experiences of work being shared.

Our approach is inspired by arts-methods that have been used by health and care workers to explore, share and improve working conditions (e.g. [Performing Medicine](#), [The NannyVan](#), [The Careful Project](#), [The Pirate Care Project](#), [Queer Circle](#)). Alongside the self-reflective work of the Feminist Health Care Research Group that shines a light on the art context for its often uncaring and inhospitable modes of working (Manual Labours, 2020, episode 8), our research also responds to calls for a slower mode of cultural production that acknowledges the care our interdependent bodies need (DŽuverović and Revell, 2019).

Taking into consideration the different experiences of independent and employed workers, the first workshop will use methods such as alternative timesheets and performance scores to generate diaries to visualise working days and visual mapping of the locations where carers take breaks. Questions that inform this session include: *Do you get to take breaks and rest during working hours? If so, how, when and where do you spend this break time? What does care look like for you as a carer?* The second workshop will take place around Hebden Bridge, visiting the different locations identified by participants in workshop 1. Travelling together between locations on a 'tour' of carers' rest spaces will give us time to collectively discuss how these places support and prevent proper rest from work. Informed by the previous workshops the third workshop will focus on collectively co-designing a prototype for a distributed staffroom in and around Hebden Bridge. The workshop will use script writing, collaging and zine/manual-making using material from the previous workshops to visualise an ideal staffroom for itinerant care workers. For each phase of our research we make a manual, which we will build into the final workshop. The manual acts as a vehicle for distributing further the research, workshop ideas, staffroom prototypes conversations developed with Equal Care Co-op. A fourth and final workshop will inform a collectively written fundraising proposal to practically seek out the support necessary to realise the development of what we are describing as a distributed staffroom. This is to ensure the participants and partners of the research are involved in leading the direction of the enquiry into the next phase.

Conclusion

To what extent are Creative Health programmes working towards transforming working practices and structures and/or are they perpetuating some of these underlying problems with work? The approach we are taking takes a critical perspective of Creative Health. We make use of arts-based methods, not with the assumption that art will make people feel happier and healthier, but that these methods might open up different ways to discuss and collectively understand the broader structural inequities that impact health and ill-being. We are interested in exploring, with fellow creative health practitioners, the underlying structures, histories, assumptions and ideologies that inform the discourses and initiatives that underpin worker wellbeing in the first place. We are also open to learning how

different arts-based methods may not do this, how the methods may not perform in the way we expect, that other approaches and methods may work better. This positioning we hope allows for further cross worker connection and solidarity.

Our challenge and commitment are to build resources (such as a different kind of staff room for itinerant care-workers) that have the potential to effect change for care workers in the day-to-day, however small, as well as to find ways of distributing our methods to broader communities of carers and precarious workers. Working conditions can be very hard to talk about, particularly in precarious and itinerant work in which you might be worried of the implications of raising an issue. The use of props, mapping exercises, collaging, drawing and group discussion offer participants other forms of expression to be able to make evident experiences of work often beyond language. Anonymity and trust are also key in our approach to collaboration, in which Manual Labours can act as a collective voice for different experiences without the pressure to be individually identified.

We hope this research with home-care workers is relevant to other freelance, precariously employed workers who have multiple sites of work, such as creative health workers. We anticipate the methods for co-designing a prototype staffroom have the potential to be of use to workers across sectors and geographies with shared experiences of burn-out, compassion-fatigue and mental and physical stress due to their working conditions. The manual will be published on our website as a free downloadable PDF so please follow this journey and get in touch along the way or share your staffroom story as part of this wider conversation.

www.manuallabours.co.uk

Dr Sophie Hope's practice-based research is often developed with others through the format of devised workshops, using role play, games, storytelling, collage and movement to exploring subjects such as art and politics, physical and emotional experiences of work, stories of socially engaged art and the ethics of employability in the creative industries. She worked at Birkbeck, University of London from 2010-2023 and is currently Lecturer in Socially Engaged Practices at Guildhall School of Music and Drama where she is co-developing the Guildhall De-Centre for Socially Engaged Practice and Research.

Jenny Richards' research focuses on the politics of work, health and the body developed through collaborative and collective practice. She is a doctoral candidate at Konstfack and KTH (Royal Institute of Technology) where her project 'Against the Outsourced Body' examines the effect and resistance to the expansion of commercialised, individualised and outsourced care. Manual Labours, initiated in 2012 is an ongoing collaborative research project with Sophie Hope investigating physical relationship to work.

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Catalysing Change: Bradford 2025's Pioneering Approach to Creative Health

Estelle Cooper and John McMahon

Introduction

The term 'Creative Health' has been gaining rapid currency in cultural and health policy only over the past decade or so, but the meeting point between the arts and medicine perhaps originates in the very earliest embers of human culture – each sparking into existence, alongside religion and magic, in the shamanic practices of our ancient forebears.

This intertwining could be seen to have persisted on every continent for millennia; through the classical period and into - and beyond - Europe's Medieval era, where monasteries served as the principal academies of both medicine and the creative arts. The Renaissance, if anything, reinforced this convergence; artists, including Dürer and Da Vinci, were also amongst the foremost anatomists of the period, whilst the largest English-language musical compendium of the age directly addresses the restorative power of the arts in its title, *Pills to Purge Melancholy* (1719).

The Enlightenment, and with it the emergence of Western empiricism and the scientific method, accelerated immense progress in medicine and many other forms of human endeavour. The exponential expansion of knowledge could be seen to have ushered in not only vital specialisation, but also a regrettable process of separation between different areas of expertise. This symbolically culminated in scientist and novelist C.P. Snow's seminal 1959 'Two Cultures' lecture, which highlighted – and lamented – the way in which the arts and the sciences had drifted so far apart as to have become almost conceptual opposites, or even *rival* perspectives.

In 2019, in the context of a speech expressing concern about the decline of medical empathy, the then-President of the World Medical Association, Miguel Jorge, opined of:

‘a building sense that this separation can undermine, rather than strengthen, the practice of clinicians and other medical professionals. We all hear that Medicine is both science and art but, in the last decades, the practice of medicine is more and more reflecting an emphasis just on its scientific nature.’

Jorge's speech came during a period of rapid reconvergence between the arts and healthcare across theory, policy, funding, partnerships and practice. In the UK, key milestones that have enabled and accelerated this timely reunion have included the publication of *Creative Health: The Arts for Health and Wellbeing* (a national inquiry report by the All-Party Parliamentary Group for Arts, Health and Wellbeing), in 2017; *Arts for Health & Wellbeing: An Evaluation Framework* (co-launched by then-Health Secretary Jeremy Hunt and Culture Minister Ed Vaisey in 2016, but stalled by the post-EU

Referendum reshuffle); and also *The Art of the Possible: A commissioning guide* (launched in 2017 by National Council for Voluntary Organisations and the Association of Directors of Public Health).

This period has also seen the strong inclusion of health and wellbeing outcomes in *Let's Create*, Arts Council England's 2020-2030 funding framework (published 2019); plus *Heritage 2033*, the National Lottery Heritage Fund's own current ten-year funding strategy, and Historic England's *Wellbeing and Heritage Strategy*, both published in 2022.

Translating theory, via policy, into practice, we've also seen a substantial expansion of the number of both organisations and projects funded at the intersection of these formerly presumed poles; key bodies brought into being in recent years to further drive progress at this meeting-point include the Culture, Health and Wellbeing Alliance (created in 2018), the National Academy for Social Prescribing (2019) and the National Centre for Creative Health (2021).

Some of the UK's most senior regional leaders have proven especially supportive of such work; in December 2023 Mayor of West Yorkshire Tracy Brabin joined Rob Webster CBE (Chief Executive of the West Yorkshire Health and Care Partnership) to jointly declare their ambition to make West Yorkshire a 'Creative Health region'. Fellow regional Mayors Sadiq Khan (London) and Andy Burnham (Greater Manchester) have made similar commitments over the past 2 years.

Cities of Culture

The UK City of Culture programme has emerged over a similar timescale to this new, vibrant creative health renaissance, but up to now the inclusion of direct, targeted healthcare activity under the City of Culture umbrella has been relatively contained. Through Bradford 2025, our ambition is to shift the dial significantly, embedding health and wellbeing at the heart of not only this, but all future UK City of Culture programmes; and providing a pioneering example of how place-based creative health interventions can be developed with scale, vision, impact and sustainability, to inform future practice both nationally and internationally.

Towards this, building a board that includes health sector expertise alongside cultural, media and civic leaders has helped to provide a robust foundation – and we're proud and privileged to count Mel Pickup (CEO, Bradford Teaching Hospitals NHS Foundation Trust), Sasha Bhat (Priority Director for Healthy Minds, and Deputy Director of Integration and Transformation at Bradford District Care NHS Foundation Trust and the Bradford District and Craven Health and Care Partnership) and Dr Asif Qasim (Consultant Cardiologist at both Croydon University Hospital and King's College Hospital, and Founder/CEO of MedShr) amongst our trustees.

We've drawn together significant resources to create strong community benefits – unlocking £250,000 of NHS funding held over from the final phase of the Bradford Clinical Commissioning Group, by matching this with the same amount drawn from Arts Council England's investment in Bradford 2025. Going further still, we've been able to align a further £350,000 from the Bradford Healthy Minds Partnership. Our research of prior practice gives us confidence that this amounts to perhaps the largest ever Creative Health investment in a UK single local authority area, and – we believe – one of the most substantial ever secured globally.

In order to deliver this vision, we are collaborating with Bradford District and Craven Health and Care Partnership, and have brought together a Creative Health Steering Group for the whole of Bradford, including representation from the Bradford District and Craven Health and Care Partnership, Bradford Metropolitan District Council, Bradford District and Craven Mind, and Bradford Voluntary and Community Sector Alliance; as well as cultural partners Bradford Producing Hub, The Leap and Bradford Museums and Galleries. This complements and informs a similar West Yorkshire-wide Creative Health Programme Board, co-chaired by the Mayor of West Yorkshire Tracy Brabin and Rob Webster CBE.

Bradford: Challenges and Opportunities

The Bradford District spans 144 square miles, making it the fifth-largest metropolitan district in England, with a population of over 550,000. Bradford has multiple exciting attributes that helped persuade the Department for Culture, Media & Sport's judging panel to grant City of Culture status:

1. The UK's youngest city, with 29% of the population aged 20 or below, and 24% 16 or below.
2. One of the most diverse cities in the UK, with 43% of the population identifying as an ethnicity other than white British, and over 120 languages spoken across the District.
3. Incredible cultural assets, including the National Science & Media Museum, and two UNESCO designations (the world's first UNESCO City of Film, plus the Saltaire World Heritage Site).
4. Balance of urban and rural populations – alongside multiple populous urban centres, including Keighley, Bingley and the City of Bradford itself, the district is over 70% rural.

Bradford District also faces significant health and socio-economic challenges, which underscore the urgency for, and required impact of, Creative Health initiatives in the region:

1. **Economic Deprivation** - Bradford is the fifth most income-deprived district in England, negatively effecting both health and social mobility.
2. **Health Inequalities** - the district has some of the highest rates of morbidity and mortality in the country, with complex health disparities affecting many Bradfordians throughout their lives.

3. **Engaging Diverse Communities** - whilst Bradford's diversity is a tremendous strength, it also means that engagement strategies must be flexible, culturally sensitive, and adaptive to a range of community dynamics.

These characteristics make it vital that our Bradford 2025 Creative Health activities directly address, and seek to overcome, health inequalities; that our interventions are shaped to remove barriers to participation on the basis of socio-economic status; and that our programme must be built upon meaningful, trusted relationships across communities – working closely with local stakeholders to deeply understand need, and engage the expertise of the voluntary and community sector to deliver work that is culturally informed and contextually relevant.

Creative Health Programme Overview

Bradford 2025's Creative Health programme is multi-faceted, combining large public art projects, targeted social prescribing grants, and accessible community initiatives. This ecosystem of resources is designed to meet the diverse range of needs within the district; and to maximize engagement with our City of Culture programming.

1. Social Prescribing Awards Programme

At the heart of Bradford 2025's Creative Health strand is a pioneering drive to support new arts-on-prescription activities across the District — the largest investment of its kind in any City of Culture programme. This programme offers two tiers of funding to support a range of therapeutic and culturally relevant projects:

- **Medium-Sized Awards:** 8 awards of up to £30,000 each, managed directly by Bradford 2025. These medium-sized awards are designed for **innovative partnership projects** that are rooted in Bradford, and address the district's unique cultural and health landscape.
- **Small Awards:** 18 awards of up to £6,000 each, managed in partnership with the VCS Alliance, using a **Participatory Grant Making model** to empower community input in funding decisions.

The programme has been designed in close collaboration with local NHS partners and has been tailored to especially target the healthcare priorities of the local system. As such, we are particularly interested in projects that support:

- People experiencing homelessness
- Refugees and asylum seekers
- Gypsy and traveller communities
- People affected by dementia
- Individuals with long-term conditions and/or major health issues
- People with diagnosed mental health conditions, with areas of focus on **young people** (age 16-24) and **suicide prevention** amongst young men

2. Developing & Supporting a Community of Practice

Bradford 2025 is taking a place-based and asset-based approach to build a resilient Creative Health Community of Practice, leveraging local resources and partnerships

to expand opportunities and collaborations at the intersection of the arts and health. Rather than establishing a new, separate network, we are building upon existing groups, encouraging cross-sector relationships and shared learning to drive impactful change. A strong example of existing good practice is the Bradford Producing Hub.

The Hub's annual 'speed-dating' sessions connect creative professionals with academics and researchers at the University of Bradford, bridging the gap between practice and research. By foregrounding existing community and cultural infrastructure, we are supporting a more integrated, locally rooted ecosystem for Creative Health.

This Community of Practice will provide opportunities and support for creative practitioners and arts, cultural & heritage organisations; clinicians, health professionals and healthcare providers; academics & researchers; and voluntary sector organisations to team up on projects that align with the health priorities of Bradford's communities. Participants will gain access to:

1. **Cross-sector collaboration:** Engaging with partners across health, arts, and community sectors to co-design interventions that are culturally relevant and responsive to community needs.
2. **Skill development and capacity building:** Workshops, training sessions, and events that enhance participants' abilities to work effectively in health settings and contribute to the growing field of Creative Health.
3. **Evidence-based practice:** Resources such as case studies and research data that support the impact of creative interventions within healthcare pathways.
4. **Collective advocacy and influence:** coming together to make the case for the role of Creative Health interventions in Bradford, and beyond.

3. Healthy Minds Partnership for Serious Mental Health Illness (SMI)

Bradford 2025's commitment to Creative Health includes a £350,000 partnership with Bradford & Craven NHS Trust, Public Health, and **Bradford District & Craven Mind** to expand access to Bradford 2025 programming for individuals with severe mental health challenges. This partnership focuses on delivering impactful and accessible programming specifically designed for those affected by serious mental health illness.

The Healthy Minds element includes:

1. **Access and representation in mental health media** – we will produce a series of short creative films addressing experiences of, and recovery from, serious mental illness.
2. **Community engagement** – the partners are working together to devise and commission a place-based, participatory public art event to raise awareness of serious mental illness, and encourage inclusion across all communities.
3. **Dedicated roles for access and engagement** – both Bradford District & Craven Mind and Bradford 2025 are creating new roles to support those affected by serious mental illness to engage with our year-long celebration of the arts and culture.

4. **Access Fund and Support Services** – a new access fund will support accessible activity to ensure all community members can participate fully in Bradford 2025's Creative Health programming.
5. **Creative Sector Workforce Development** - 10 workshops, facilitated by Bradford District & Craven Mind, will offer training for 100 creatives, equipping them to work effectively in settings related to serious mental illness, complementing our wider Creative Health Community of Practice.



Creative Health Projects in the core Bradford 2025 artistic programme

In addition to the targeted, bespoke Creative Health interventions outlined above, numerous projects within Bradford 2025's main engagement programme exemplify how health and wellbeing are woven into the fabric of our City of Culture year. We present the following as examples of some of our projects that will especially strongly promote community participation, address local health priorities, and showcase the powerful role of arts in personal and public wellbeing:

1. **Wild Uplands** – located on Penistone Hill, *Wild Uplands* is a series of outdoor art installations that invite visitors to experience the Bradford countryside as a site of cultural reflection and mental restoration. Created in collaboration with artists drawing from diverse cultural backgrounds, this project connects to local folklore and traditions. It offers an immersive experience in nature, encouraging people to benefit from fresh air, physical activity, and scenic beauty. Through interactive elements, *Wild Uplands* also enhances accessibility, catering to people of varying mobility levels and supporting wellbeing by providing a reason to step outdoors, connect with nature, and engage in physical activity.
2. **Bradford on Foot** – *Bradford on Foot* invites residents and visitors to explore the district's cultural and natural heritage through curated walking routes.

With 25 themed walks developed by local historians, artists, and residents, this project promotes physical activity, social engagement, and a sense of local pride. The initiative provides free access to routes, making cultural exploration accessible to all, and underscores the link between physical movement, mental health, and cultural connection. This programme also offers guided walks, to encourage community interaction and further supporting the physical and mental health benefits associated with outdoor exercise and social connection.

3. **PLAY Bradford** – *PLAY Bradford* is a vibrant, year-round programme aimed at children and families, designed to encourage playful exploration and intergenerational connections through initiatives like *REPLAY*, a playground built entirely from recycled materials – promoting family engagement and social inclusion. PLAY Bradford’s activities support both physical health and mental wellbeing, encouraging a sense of belonging and resilience within communities. By involving care home residents alongside primary school pupils, PLAY bridges generational gaps, promotes empathy, and emphasizes that play is essential for wellbeing across all ages.
4. **Meet Our Mothers** – *Meet Our Mothers* is an interactive cookbook project that celebrates Bradford’s rich cultural heritage through treasured family recipes. It gathers and shares stories from mothers, fathers, grandparents, and family members across the district, highlighting the role of food in community building and family bonding. Led by artist Deepa Mann-Kler, this project promotes mental wellbeing by bringing people together to connect and share pride in cultural identity. By compiling these recipes, *Meet Our Mothers* will become a cultural resource that enhances the sense of shared heritage and encourages intergenerational exchange, celebrating the vital role of food in personal and collective narratives.

Legacy Starts Now

Bradford 2025 is committed to ensuring that the impact of its Creative Health initiatives extends beyond the City of Culture year. We recognise that short-term investment without a lasting strategy can leave significant gaps and challenges for local practitioners. With a strong focus on embedding systemic change, we aim to maximise and sustain the opportunities arising from every door that Bradford 2025 opens. Our efforts sit at the intersection of – and has the support of leaders across – culture, the NHS and public health. This robust foundation strengthens our impact and ensures that all strands of our Creative Health work will address real and lasting community needs.

1. **Strengthening the regional Creative Health sector** – with an eye to the future, Bradford 2025’s legacy strategy includes building capacity, advocating for continued funding, and enhancing cross-sector networks that elevate Bradford as a hub for Creative Health. We aim to foster ongoing relationships between cultural organisations and healthcare providers, ensuring that Creative Health initiatives remain an integral part of the public health landscape.

2. **Inspiring ambition in future Cities of Culture** – Bradford 2025 intends to be an inspirational exemplar for Creative Health, setting an example for future Cities of Culture to integrate arts-led health initiatives into the heart of their programmes. By demonstrating how culture can be a transformative tool for community health, we seek to inspire future cities to adopt even more ambitious Creative Health programmes, expanding the national and international impact of this sector.
3. **Securing lasting change for Bradford, and beyond** – our Creative Health legacy plan is rooted in systemic change, with the goal of embedding arts-based wellbeing into Bradford’s health infrastructure long-term. With ongoing partnerships and investments, we aim to sustain Creative Health as a valued and essential component of regional public health, empowering communities and enhancing quality of life for generations.

Conclusion

Bradford 2025’s Creative Health strand is a game-changer, designed to transform lives through culture. With innovative programming, strategic partnerships, and a focus on accessibility, we are setting a new standard for the role of arts in public health. Our goal is to create a lasting legacy of wellbeing, resilience, and community engagement, proving that arts and culture are not only powerful tools for health but essential components of a thriving society. Through Bradford 2025, we aspire to leave a legacy that serves as a beacon for Creative Health, inspiring national and international change.

Estelle Cooper is the Creative Health Manager for Bradford 2025.

John McMahon is the Director of Skills, Volunteering & Wellbeing for Bradford 2025.

Image credit

Image 1: Bradford 2025 Programme Launch. Photograph by antrobling.

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'Aesthetic Reflective Judgment' and transformative experience in the aesthetic encounter: experiences from a walk at Yorkshire Sculpture Park

Dr Claire Booth-Kurpnieks

Over the past two decades there has been significant development of the Creative Health sector (Gordon- Nesbitt, 2017; National Centre for Creative Health, 2023). The term Creative Health encompasses a range of social and creative activities, however the position of "art", as the end product of creativity, in this context is less defined. Furthermore, studies tend to focus on conversations about the beneficial impacts of Creative Health activities with less consideration on the specificities or contingencies of how these *impacts* may occur (Daykin, 2017). This position piece will focus on the latter- whether viewing a piece of art in an art gallery or museum environment might also be positive for our wellbeing- by way of a discussion about Kantian aesthetic reflective judgement and a phenomenological approach to transformative experience in the aesthetic encounter.

Aesthetic pleasure and cultural tradition

Much of the research into the wellbeing potential of museums and art galleries to date has focused on the potential of arts on prescription or museums on prescription projects, following the model of social prescribing established in community health practices (Bungay and Clift, 2010; Stickley and Hui 2012; Thomson, Camic, and Chatterjee 2015). As such, research and practice around wellbeing in museum and art galleries are often focused on activities that target specific groups or health issues through: creative activities engaging with collections within the museum environment (Chatterjee et al. 2008, Froggett and Trustram 2014); community outreach activities (Morse, 2020); or through interventions in clinical environments (Ander et al. 2013, Camic, Hulbert, and Kimmel 2017). Nevertheless, some research studies have suggested that engaging with art works can have the intrinsic impacts of captivation, intellectual stimulation, emotional resonance, spiritual value, aesthetic growth and social bonding (Brown & Novak-Leonard, 2013). Engagement with art has been understood to facilitate communication (Froggett & Trustram, 2014), as well as producing a relaxing or calming effect (Binnie, 2010), although studies find it difficult to extrapolate between the aesthetic encounter and the specific environment that museums and art galleries provide.

The relationship between aesthetic experience, or aesthetic pleasure, and wellbeing is a well-worn path in the philosophy of aesthetics (Belfiore & Bennett, 2008) but tends towards reinforcing an elitist understanding of aesthetic experience. For the eighteenth century philosopher Immanuel Kant, aesthetic pleasure arises from the complex alignment of three modes of activity: imagination, understanding and judgment. The subjective judgment of 'taste' is given legitimacy through a call to the universal voice or 'sensus communis'. Firstly, through the recognition that all people have the same cognitive faculties, the capacity to experience pleasure (and displeasure as in Caygill (1989)), and that pleasure from a beautiful object must therefore be universal. Secondly, through the active appropriation of tradition or the "sensus communis", a cultural tradition in which individuals must be knowledgeable or skilled in order to achieve aesthetic pleasure. It is this idea of a universal experience

of the judgment of taste, the enactment of which causes pleasure, that is the message of Kant that is replayed through various studies of aesthetic experience in psychology and cognitive science take on from Kant, with the aim of further exploring how the capacity to have an aesthetic experience is based on the 'skill-set' of the viewer (Csikszentmihalyi and Robinson, 1990). Or, that the greater a person's knowledge or understanding of an art work the higher the level of aesthetic pleasure gained with the ultimate goal being 'cognitive mastery' of the object (Cupchik et al. 2009).

In his essay 'Outline of a Sociological Theory of Art Perception', originally published in 1968, Pierre Bourdieu argues that the capacity to decipher and fully experience a work of art is based upon the 'artistic competence' which the beholder brings with them. This 'competence' is based upon the education of the beholder but also importantly their social class and previous exposure to art, their 'habitus'. This competency is naturalised to appear as if these are qualities inherent within a person instead of due to their upbringing and education. Later in *Distinction* (1984) Bourdieu mounts a critique against Kant's theory of 'taste', arguing that art and cultural consumption 'are pre-disposed, consciously and deliberately or not, to fulfil a social function of legitimating social differences' (Bourdieu, 1984, p. 7). He takes issue therefore with the idea of the universality of the aesthetic, arguing that a person's cultural preference, and their capacity for aesthetic experience, is conditioned through external determinants- their cultural capital and class. In doing so by adhering to one group's cultural preferences over another art museums may serve to 'strengthen the feeling of belonging in some people and a feeling of exclusion in others' (Bourdieu, 1984, p. 25). This may be so; despite efforts to increase participation in the cultural sector there remains a direct correlation between those taking part in cultural activity and their socio-economic status with the middle classes and more affluent most likely to participate with an even narrower range of voices involved in decision-making in the arts (Jancovich, 2017). However, the presumption that the 'working class audience' can only subscribe to a 'popular aesthetic', which subordinates form to function reducing the 'things of art' to 'things of life' (Bourdieu, 1984, p. 5), is less convincing and has been re-assessed in later reformulations of Bourdieu's argument (see Bennet et al. 2009).

The potential for transformative experiences

It is my view that there is something lacking in arguments which do not account for the capacity for change or transformation on an individual level. Cognitive scientists Matthew Pelowski and Akiba Fuminori argue in their study of the transformative potential of the art experience that there are three general outcomes to art viewing, beyond the 'aesthetic judgment' and 'aesthetic pleasure' of Leder et al.'s model (2004). The first potential outcome is an 'initial self-reinforcing mastery' when the artwork is easily assimilated within your understanding of art. However, when confronted with something not so easily assimilated there are two other secondary potential outcomes. Firstly an 'abortive self-protective escape'; either a physical avoidance or a refusal to consider the work as art and therefore a foreclosing of experience. If that is not possible, e.g. through peer pressure, or if the conditions are conducive to further reflection, prolonged engagement may generate a final 'aesthetic meta-cognitive schema- change' (Pelowski & Fuminori, 2011, p. 93).

Cognitive scientist Slobodan Markovic (2012) suggests that expertise and explicit knowledge alone are not enough for successful aesthetic appraisal. He argues that additional dispositions: the capacity for creative thinking, an openness to experience and desire to search for new meaning, can contribute to the quality and efficacy of appraisal. None of which are necessarily gained through an art historical education or knowledge of 'tradition'. Furthermore, research undertaken for the *New Dynamic of Ageing* project found that while participants' responses to contemporary art were influenced by their cultural capital, habitus and class, in a heterogeneous group (i.e. mixed levels of experience) there was possibility for stocks of cultural capital amongst some members to be increased through conversation and shared experiences (Newman et al., 2013). This recognises that while your preference may be historically and culturally conditioned through something akin to Bourdieu's "habitus" (Bourdieu, 1984), it is also subjective, personal and subject to change. You can only have incorporated what you have been exposed to, yet there always remains room for change through an exposure to something new. Importantly, this experience is social enabled through the sharing of experiences and difference.

'Aesthetic Reflective Judgment' and the social function of art

In Kant, 'aesthetic reflective judgment' is positioned as an alternative to 'determinate judgement'. To cite from Kant directly 'if the universal (the rule, principle, or law) is given, then the judgment which subsumes the particular under it is *determinant*... If, however, only the particular is given and the universal has to be found for it, then the judgment is simply *reflective*' (Kant, 1790/ 2008, p. 15). In other words, reflective judgment comes in to play when the thing we are encountering does not fit within our existing schema. We then require a different process of judgment to account for the discrepant element- cycling between imagination and understanding.

In Thierry de Duve's reading of *Kant in Kant after Duchamp* (1996) and *Aesthetics at Large* (2018), he describes aesthetic reflective judgment as a 'feedback loop of the mind' (de Duve, 2018, p. 205). It is the process through which we can look at an artwork and consider it in relation to ourselves, to our own tastes and to other art works that we have previously learned to appreciate. It can be broadened through the comparative process of reconciling the new thing being presented to us 'as art' with the things we have already incorporated into our personal collection of things judged 'as art'. This is not necessarily through a strict criteria or set of rules but on the basis of an 'as if-comparison' (if art is *this* then could it also be *that*?) (de Duve, 1996). Through this process of assimilation with ourselves and with the broader cultural tradition in which we are enmeshed, we can then make the judgment, whether it is "beautiful" or "ugly", "interesting" or "boring", "art" or "not art", or any manner of heterogenous descriptors in-between. The important factor in this process is not necessarily the acquisition of knowledge that makes an artwork legible, although it can sometimes help, but instead the internal feedback about what this judgment means for you. In this case the capacity for reflective judgment and the transformative potential of the aesthetic encounter is based on internal rather than external criteria, considering what the art work means to you before what it means within the category of 'art'. This reinforces Howard Caygill's reading of

Kant that, 'tradition' is not something that is normatively imposed upon people but actively appropriated and constituted from within. For Caygill, while the 'authority of tradition is exercised in orientating the judgement of the subject within it', it does not cause the subject to abandon his autonomy but instead to re-assess their position within it. The 'active appropriation of tradition' is a position which is 'both without and within, autonomous and heteronomous' and consists in 'communication or transmission' (Caygill, 1989, p. 354). As an individual, you cannot be outside of the collective tradition, it is inclusive as opposed to exclusive.

The 'sensus communis' in de Duve is the 'shared or shareable feeling... a common ability for having feelings in common; a communality or communicability of affects' (de Duve, 2018, p. 20). As a corrective to the 'standard' reading of Kant in which this is a 'must', as in it *must* be universal and if people don't share this sentiment they don't have the correct cultural codes or mental faculties, this is translated into an *ought*. This then becomes an ethical assumption, that there *ought* to be something shared and that people *ought* to have feelings in common through empathetic understanding and shared experiences. The social function of art, then, as opposed to 'legitimizing social difference' in the case of Bourdieu's reading (Bourdieu, 1984, p. 7), is instead this *ought* towards communality and communicability - to at least try to have something in common. This begins to point at the ways in which the process of aesthetic reflective judgment within an aesthetic encounter may be positive for a person's mental wellbeing in opening up ourselves to other's worldviews and reflecting on our own place in the world. This takes us beyond 'aesthetic pleasure' as the outcome of aesthetic experience and instead suggests the potential for a transformative experience within the aesthetic encounter.





A phenomenological approach to transformative experience in the aesthetic encounter

The remainder of this piece will draw on research carried out as part of my PhD project in 2017 and 2018 at Yorkshire Sculpture Park. The research project utilised a participatory and narrative-based research methodology to attend to the situated knowledges (Haraway 1988) of wellbeing and the articulation of intersubjective experiences within the aesthetic encounter. The following examples emerged from workshops with 3 groups of participants at Yorkshire Sculpture Park, where participants were asked to describe their experience of a walk around the park we had just undertaken as a group. The examples have been selected because they begin to flesh out how we might develop a phenomenological approach to aesthetic reflective judgment in the aesthetic encounter.

First of all, the experiences articulated by participants in the encounters with Kanwar's *Six Mourners and One Alone* (2013) and Day Jackson's *Magnificent Desolation* (2013). The encounter with Kanwar's *Six Mourners and One Alone* is marked by an experience of emotional disturbance or 'shock':

That one by the lake really got to me, with the organ pipes, I was having a nice conversation and then that phrase 'the suddenness of your departure is still hard to believe' really got to me). It just got me straight away, I had to catch my breath, it was a shock, when you're looking out on the lake with the geese and having a nice chat, and then, because it is such small writing and it has such a big impact. (SH- Participant).

In the process of moving around the sculpture (a series of engraved organ pipes by the lakeside), reading the text on each of the organ pipes made the participants

consider themselves in relation to the content of the work. It brought up personal emotional experiences of grief and losses but at the same time brought them into a wider context. Those who had experienced Kanwar's exhibition *The Sovereign Forest*, which ran from October 2013- February 2014, and for which this work was commissioned, would have known the broader context of his work of human rights and displacement, whereas others felt this as more of a personal challenge, considering who is the "one alone" in relation to themselves.

Magnificent Desolation (Day Jackson, 2013) on the other hand was perceived to be more immediately and viscerally disturbing with one participant saying that they had previously avoided going near it, an example of the 'self-protective escape' mechanism (Pelowski & Fuminori, 2011). However, visiting with the other participants meant that they were encouraged to spend more time looking at the work and were able to notice more of the details in it:

The next one was the opposite of that really, I find it really difficult, although it is good to be out of your comfort zone. I saw more of it today, as normally I avoid going up to close to it, I noticed that the floor they were all standing on was the moon, but then someone pointed out that they looked like they were all stuck in there and couldn't move, and that made me feel uneasy again (TW- Participant)

Another participant reflected on what the work was about with participants stating that it reminded them of Chernobyl:

I like the contrast between this one and the marble, but in a way I feel I get more out of this one than the marble because I could see a context, when people were talking about Chernobyl and listening to other people's reactions to it I like that, it is less abstract (PF- Participant).

Through this interaction we can see the participant's desire to assimilate the object into existing experiences and the group discussion about what it could be also occurred on an individual level allowing them to 'get more out of it'. It was recognised by members of the group that they do not necessarily expect engagement with art to be 'pleasurable', as in traditional readings of Kant. Instead it was suggested that 'sometimes you have to be exposed to your own anxieties in order to overcome them' (Participant- CM), articulating de Duve's reading of dis-sentiment in the aesthetic experience as acquiescence to "upheaval" and "opposing feelings" (de Duve, 1996, 34). Both of these examples demonstrate how processes of reflective aesthetic judgment, either individually through personal reflection or collectively through group discourse, have enabled some kind of change in relation to the art work. In some cases this was a re-evaluation of personal relationships and your place in the world, or an engagement with discrepant or uncomfortable material. Whether this amounts to Pelowski and Fuminori's "schema change" is more difficult to tell, a more longitudinal approach would be needed to examine such changes and they would perhaps not be evident through one single viewing of an artwork.

The importance of particular environmental conditions for this experience to occur was highlighted through the instances in which this did not happen. For example, the experience of James Turrell's Deer Shelter for group 3, where the potential to have any kind of experience was foreclosed by the participants who just wanted to leave the space due to cold weather. This was later reflected on by one of the participants, having read the experiences of the others in which they had initially similar experiences of the negative connotations of the space, likening it to a gas chamber, but were able to get past this initial reaction through engaging further and succumbing to the calming effects of looking up at the sky: *'it was almost as if those other people had the opportunity to rethink what they were feeling and their immediate response but we just wanted to get out of there because it was so cold'* (SB- debriefing interview). The facilitation of space to re-think or re-evaluate an initial first response through group discourse then is vital in encouraging more reflective and engaged responses to an art work as well as providing the seeds for future experiences.

Conclusion

These examples only provide vignettes of experience from a larger research project, but suggest the ways in which we might understand how engaging with the intrinsic properties of art works- their content, material, and form- can be positive for a person's wellbeing through a process of 'aesthetic reflective judgment'. In these cases, participants sought to assimilate objects into their existing canon of experience (their cultural tradition) and when they couldn't, had to open themselves up to new experiences reflecting on their sense of self in the process. In these examples this opportunity was facilitated through attempts to communicate and share personal subjective experiences of an art work, and an environment within which it felt safe to do so (the conditions of which are given greater attention in Booth-Kurpnieks, 2020). Like in De Duve and Caygill's readings of Kant this opens up Kantian 'aesthetic reflective judgment' as a process in which the 'tradition' is actively appropriated and made anew.

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Image credits

Image 1: Amar Kanwar, *Six Mourners and The One Alone*, 2013. Courtesy of Marian Goodman Gallery. Photo © Jonty Wilde, courtesy of Yorkshire Sculpture Park.

Image 2: James Turrell, *Deer Shelter Skyspace*, 2006. An Art Fund Commission. Photo © David Lindsay, courtesy of Yorkshire Sculpture Park.

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Postscript

Rowan Bailey

In February 2024, I went to Copenhagen with my partner. It was my first visit to Denmark. I was excited to see this place and to experience it in person. On our first day we went to the Happiness Museum to learn more about 'the big things in life'. The Museum was set up by the Happiness Research Institute (an independent think-tank focusing on wellbeing and quality of life). It is a tiny museum which opened in July 2020, with the aim of revealing how happiness is involved in every area of our lives. The project was created to remind visitors what it is that gives value to them and makes them feel good. The World Happiness report has repeatedly ranked Denmark as one of the countries in the world that is best for creating wellbeing, happiness and quality of life. Drawing on years of scientific and philosophical investigation, the museum shows that happiness can come in many forms. One long corridor room sparked my interest as it featured handwritten post it notes made by visitors to the museum. All these reflective and meaningful accounts were responses to the question: **What makes you happy?**

Here are some of the things people wrote...

- *Being with people I love.*
- *I think I am still looking for it! But right now, I am at peace and the sun is shining and that is enough.*
- *The feeling of 'home' that a person can give to you.*
- *Sunsets.*
- *Self-empowerment.*
- *My cat Timae.*
- *Aligning my life to my values.*
- *Family together.*
- *Food, family, friends and walking the outdoors.*
- *Laughing to the point of tears with my mum.*
- *Being still in a world constantly on the move.*
- *Life.*

For further information about The Happiness Museum see: [About | The Happiness Museum](#)

Prompts for thinking

Do please reflect and share your thoughts with us about creative health. We would like to build a richer picture of people's lived experiences at a local level and in different places.

Follow the QR code here to share your ideas and experiences.

1. What creative health activities have you experienced in your own neighbourhood?
2. How has culture helped you to learn more about yourself, about others, about the place you live in?
3. How might universities, NHS Trusts, local authorities, third sector organisations, creative and cultural providers work together with communities to support and develop creative health and wellbeing?

4. Why is it important for us to share our lived experiences of health and wellbeing?
5. How might communities work with cultural and creative organisations to co-produce new experimental forms of creative health across West Yorkshire?
6. How do we expand the creative health portfolio across West Yorkshire? How do we use culture as a vehicle for new forms of creative health?
7. What kinds of creative health offers might we generate using green and blue spaces? How might these offers cultivate a mindful relationship to our planet?
8. What kinds of CPD offers are there for creative health practice in West Yorkshire? What needs developing?
9. How would you like to be involved in the Creative Health Hub?
10. What makes you happy?



Acknowledgements

With thanks to the organisations/partners involved in the design and development of our programme:

Kirklees Museums and Galleries
Other Ways to Walk
S2R (Support to Recovery)
The Art House
Yorkshire Sculpture Park (YSP)
Spectrum People - Appletree Community Garden
Children's Art School
Ellie Thomas
Holmfirth Library
Ryburn Men in Sheds
Inter-Arts
hoot creative arts
West Yorkshire Combined Authority
West Yorkshire Creative Health Programme Board
Creative Health Hub
School of Arts & Humanities – University of Huddersfield
The Heritage Fund
Heritage Strategy
Local Services 2 You
TSL Kirklees
Everybody Arts

Cultures of_ is a changeable programme of arts & humanities research in the public realm. As a programme it is invested in place-based making with external audiences, collaborating partners and creative communities.

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Cultures of Creative Health is a celebratory showcase of research exhibitions, installations, performances, workshops, talks and discussion about Creative Health. Produced by the School of Arts and Humanities, University of Huddersfield.