



PSYCHOSOCIAL RESEARCH UNIT



# Who Cares? Museums, Health and Wellbeing Research Project

## A Study of the Renaissance North West Programme

Prof. Lynn Froggett, Dr. Alan Farrier and Dr. Konstantina Poursanidou

with Dr. Susan Hacking, University of Central Lancashire and Dr. Olivia Sagan, Anna Freud  
Centre (project design and literature review)

March 2011

## **Contents:**

### **PART 1**

p.3: **Overview of *Who Cares? Museums, Health and Wellbeing* Programme Research Project**

p.5: Context: Literature on arts and health

p.7: Focused Literature review

### **PART 2**

p.14: **Methodology**

p.14: Research Methods

### **PART 3**

#### **The Museum sites: distinctive practice developments**

p.16: Museum Comparison Matrix

p.19: Tullie House Museum and Art Gallery, Carlisle: working in partnership with care homes and carers of older people

p.26: The Harris Museum and Art Gallery, Preston: practice at the sharp end with hard to reach groups

p.32: Bolton Museum and Library Service: Therapeutic practice

p.37: The Manchester Museum: museum objects and intimate attachments

p.44: The Whitworth Art Gallery: working with children from the Manchester Schools Hospital Service

p.49: Manchester Art Gallery: working with mental health partnerships

### **PART 4**

p.55: **Achievements and difficulties of health and wellbeing work for museums and art galleries**

### **PART 5**

p.61: **Discussion - Psychosocial processes of engagement**

### **PART 6**

p.72: **Summary Conclusions**

p.74: **References**

p.80: **Acknowledgements and Contact Details**

## PART 1

# Overview of *Who Cares? Health, Wellbeing and Museums Programme* Research Project

### Introduction

This study by the Psychosocial Research Unit at the University of Central Lancashire investigated a series of inventive *Who Cares?* projects across six museums, in order to discover how access to museum activities might affect health and wellbeing. The participating museums were part of the *Renaissance in the Regions* programme funded by the Museums, Libraries and Archives Council. A key conclusion is that the programme has revealed great potential. It has shown that collections can be made available to disadvantaged groups in ways that can improve wellbeing.

The research took place over a period of two years (2009-2011) and followed the development and implementation of specific projects targeted at disadvantaged groups in each museum. A further key component was working with the *Renaissance North West* research manager and staff at participating museums on evaluation planning and feedback days at each museum. The purpose of this was to help develop the museums' self-evaluation capacity and to generate further data to feed into the research process. The research team analysed data collected by the museums as part of their evaluation. The thoughtful and self-reflective engagement of museum staff was vital in facilitating the research, and in seeing the individual projects through to their conclusion.

The research adopted a psychosocial framework in which the aim is to understand the significance of engagement with museum activities in a number of dimensions: individual responses, interpersonal relationships, institutional and societal contexts. In practice this has meant that the focus has been on the meaning and uses of objects and artworks by individuals, relationships between participants and museum staff and partners, and the implications of these programmes for cultural inclusion.

Part 1 of this report presents an overview of the aims and background of the research, incorporating a selective literature review. Part 2 presents the methodology. Part 3 presents some of the diverse work in the programme. Each participating museum determined its own focus and priorities and projects were designed for groups with widely divergent needs. For many of the museum staff this was a new area of activity. Given the range of work, it was impossible within the resources available for the research to cover every project in equal depth. Projects had to be strategically sampled to ensure that all sites and different types of practice were considered. Part 3 therefore highlights briefly the range of activity carried out by each museum and selects particular projects for richer description and analysis. The Museums Comparison Matrix in Part 3 (on page 16) provides a schematic overview of the projects.

Innovative practice takes risks and invariably encounters unforeseen problems from which much can be learnt. People are less likely to be defensive and better able to learn from experience when their anonymity is protected. Anonymity is also important to prevent identification of individual participants. Part 4 therefore draws on data from all sites and presents achievements and difficulties in a highly synthesised analytical form. The report therefore sacrifices particularity at this point in order to enable a discussion of some of the

more sensitive issues arising in the programme, without prejudicing the reputation of any particular site.

Part 5 addresses the more complex psychosocial aspects of engagement and, drawing on research observations, identifies the key contributions that these projects made to wellbeing. The concept of wellbeing is developed in this section as the enhancement of symbolic capacity in the individuals and groups who participated in the programme. The section elaborates a key theoretical contribution of the research which is to identify the link between symbolisation and cultural inclusion in museum contexts. Part 6 draws together the conclusions of the research.

### **Aims**

The primary aim of the research has been to conduct an intensive exploratory study of the experience of participants in the *Who Cares?* programme, with a view to understanding impacts on their health and wellbeing. The purpose has been to inform museum practice and partnerships with health, welfare and social care sectors.

### **The six museums in the *Who Cares?* programme**

Tullie House Museum and Art Gallery, Carlisle

The Harris Museum and Art Gallery, Preston

Bolton Museum and Library Service

The Manchester Museum

The Whitworth Art Gallery

Manchester Art Gallery

## **Context: Literature on arts and health**

Recent years have seen a change in health policy to include softer outcomes for people's wellbeing, the establishment of a Department of Health (DH) programme for social inclusion and more emphasis on holistic wellbeing. In 2004 the report detailing the outcomes of funded programmes to combat social exclusion (ODPM, 2004) identified the causes of exclusion as mainly lying in the stigmatization of mental ill health and in a focus on medical symptoms at the expense of enabling people to participate in their local communities. Consultation identified access to recreational activities including arts as essential to promote social inclusion and promoting access to arts opportunities is a key recommendation of the report.

The revelations that even for mental health - where it might have been expected to impact most - the evidence base for the benefits of arts participation is weak (Health Development Agency, 2001; White, 2004, Angus, 2002; Jermyn, 2001; Cave and Coult, 2002) prompted the commissioning of research to establish health benefits and social outcomes of participation in arts projects and the characteristics of effective local projects.

There has been substantial mapping of activity in arts and health to gather information but no common framework yet exists (Angus, 2002; Dose, 2006; McNaughton et al., 2005) but a number of authors provide a historical perspective on the use of creative arts as a therapeutic medium (Stickley, 2007; White, 2004). A survey of arts and mental health projects across the country by Hacking, Secker, Kent, Shenton and Spandler (2006) estimated the scale and budgets of participatory mental health and arts provision at around £7m per 100 projects, resources which the survey concluded were limited.

Perhaps the most important example of an attempt to undertake controlled trials of arts interventions in a hospital environment is provided by the work of Staricoff et al. (2004) at Chelsea and Westminster Hospital in London. There are some weaknesses in the project which undermine confidence in some of the results reported but others demonstrate measurable benefits from exposure to the arts in hospital settings. Other recent reviews (Daykin et al, 2008; Lowe, 2006; South, 2004; Kilroy and Parkinson, 2006; Clift et al., 2010) underline the existing limitations in the research literature, the wide diversity of studies undertaken in relatively defined areas making it impossible to achieve synthesis of evidence. The under-developed state of evaluation and research has been acknowledged in a number of articles detailing the difficulties of describing the complex and subtle nature of creative work, diversity of projects, settings and participating individuals (Hamilton and Petticrew 2003; Clift et al., 2009) and the specific environment and 'open' culture of arts projects where involvement of numbers and measurements is seen as intrusive (Hacking et al., 2009; Spandler et al., 2007).

In 2007, Department of Health (DH) and Arts Council England (ACE) produced "A prospectus for Arts and Health" celebrating the wealth of initiatives and highlighting the growing body of scientific evidence supporting the value of arts and health. However, follow up and national leadership of the initiative has not yet emerged.

Recent research in England has drawn on psychosocial notions of identity, exploring the opportunities that arts can offer to reshape identities, particularly when these are damaged by illness (Daykin, 2005; Spandler et al., 2007; Hogan, 2009; Gwinner et al., 2010). Studies have also theorised the meaningfulness of the role of creativity in shaping everyday

experiences of health, illness and wellbeing that represents an integral aspect of the person's perception of themselves (Stickley, 2007; Stacey and Stickley 2010).

The DH/ACE prospectus (2007) showcased two projects that had implications for mental health. The first was the national study on mental health, social inclusion and arts. Six projects were the focus of case studies which explored "the processes through which projects achieved benefits. Three key processes were identified in all six projects:

- motivation to engage increased activity and inspired hope;
- focusing on arts activity encouraged relaxation and distraction;
- a supportive social environment reduced a sense of isolation and increased self-confidence.

These processes helped in different ways to reduce mental distress, improve mental wellbeing and increase a sense of social inclusion.

Evidence of five additional processes was also found for some participants and projects, each of which had positive implications for improved personal wellbeing:

- self-expression assisting catharsis and self-acceptance;
- sense of pride and achievement in using personal abilities;
- having time out from day-to-day concerns;
- rebuilding a personal identity beyond being a service user;
- developing wider aspirations and a sense of self-esteem.

Overall, the authors concluded that their findings "provide sufficient evidence of mental health, social inclusion and in particular empowerment gains to justify support for arts and mental health work" (Secker et al., 2007:11).

The second example of an explicit attempt to model the impact of involvement in creativity activity for health, was provided by the much broader recent Invest to Save project undertaken by the Arts for Health unit at Manchester Metropolitan University. (Kilroy and Parkinson, 2006; Kilroy et al., 2007). The research has shown that engaging in the arts has a significant impact on the symptoms of ill health; particularly in reducing the symptoms of depression, stress and anxiety and increasing feelings of wellbeing.

## **Focused Literature Review**

### **Benefits of museum engagement: psychosocial, social and personal**

In this focused literature review, the benefits of museum engagement are defined as psychosocial, social and personal.

#### **Psychosocial benefits of museum engagement**

The psychosocial benefits of museum engagement are discussed in the literature in terms of *symbolisation, meaning-making, affect, embodiment, identity, feelings of belonging and social and cultural inclusion, memory/reminiscence, and the therapeutic potential of museum engagement.*

The museum has been represented as a ‘cultural warehouse’ the main aim of which is to store objects (Annis, 1994). When objects become exhibits in a museum, they take on new meanings and are transformed. The object-symbols twist in meaning between two worlds- the world of their origin and the world of significance created by the museum display. The museum visitor is thought to make his/her own way ‘towards a personalised warehouse of symbols’ through his/her capacity to associate the museum objects with personal meaning (ibid.:22). The museum has been identified as an ‘expressive medium’, ‘as a kind of text that projects symbols and is meant to be read, interpreted or experienced’ (ibid.:22). During people’s engagement with museum objects, the sensible, physical, material characteristics of the objects trigger and thus contribute to the viewer’s sensory perceptions, which in turn trigger emotional and cognitive associations, recollections and projections in a process of symbolisation (Dudley, 2010; Carnegie, 2006; Kavanagh, 2000). Evidently, multisensory and embodied engagement, affect, cognitive engagement, and stimulation of memory/recollection form vital parts of visitors’ experience of museum objects (Dudley, 2010; Bagnall, 2003; Kavanagh, 2000). Museum objects function as symbols of identity, relationship and social group; as symbols of nature, society and the divine (Pearce, 1995). In this process of symbolisation, museum visitors bring to bear a variety of personal frames of reference, their experiences, emotions, memories, background and previous knowledge-in short, their self, life and relationships (Silverman, 2010). Hence, the symbolic capacity of viewers is activated and enhanced in the museum environment together with their capacity for creative reflection on the self and the other and introspection (Silverman, 1990; Dudley, 2010).

Dudley (ibid.), viewing the museum experience in terms of ‘whole subject-object engagements’, advocates for the adoption of a phenomenological perspective that bridges museum object and person, causing them, at the moment of perception and interpretation of the object, to exist only in relation to each other (ibid.:12). Subjectivity of response to the museum object and material qualities of the object are intertwined with each other and *both* – together with the framework within which one sees the object-determine the experience, interpretation and symbolic function of the object. It is in the mutual intersection of object and subject that sensory responses and subsequent ideas and meanings are generated. It is not the person’s subjective experience and response alone that matters; the specific, objective, physical attributes of the particular object also play a part. It is in the space between object and subject, the space in which they meet, that the two impact upon and indeed form each other (ibid.:12). In this sense the objects have affects and agency, which allows us to attribute ‘power or capacity’ to objects (Gosden, 2005:196)

Annis (1994) claims that in thinking how visitors distil meaning from the museum's terrain and the objects-symbols in their paths, it is useful to imagine 'scripts', that is symbolic engagements occurring simultaneously at more than one level. These levels of object-viewer interaction (and symbolisation) can be thought of as 'symbolic spaces'. Annis (*ibid.*) identifies 3 overlapping symbolic spaces - dream, cognitive and pragmatic (social). The dream space is described as 'the field of subrational image formation', 'the field of interaction between suggesting/affecting objects and the viewer's subrational consciousness' (*ibid.*:22). The dream space energises the viewers' imaginations and memories and illuminates their emotions. The dream space is thought of as anarchic and unpredictable, given that through the dream space museum viewers can arrive at all kinds of possibilities and associations not considered by those who organise museum exhibitions. The dream space 'allows for lateral and creative thinking, for problem-solving and leaps of fantasy' (Kavanagh, 1996:4). The features of the dream space could be perceived as bearing resemblance to those of Winnicott's 'potential, transitional space' (Winnicott, 1971). Annis' cognitive space (1994) is a field that corresponds to rational thought and consideration, to symbolisation at a cognitive level. It is a space defined by a subset of symbols manipulated by the museum viewer in such a way as to lead towards 'cognition' or education', to a cognitive interpretation of the museum exhibits. Last, in Annis' social space (*ibid.*) museum visitors inhabit social roles, such as parents, partners, and friends. The sheer act of visiting the museum enhances social bonds with family and friends through the sharing of the museum experience and the exchange of personal and collective memories.

As regards meaning-making, it has been argued that 'people in interaction with museum resources and with each other will create, exchange and share information and meaning in real or virtual time and space'. For years the museum field subscribed to a linear 'transmission' model of communication that posited museum professionals as the 'senders' of intended information, messages and significance through media such as exhibits and programs to visitor 'receivers' (Silverman, 2010:15) In the last few decades, partly in light of empirical studies that revealed museum visitors to be actively involved in making sense of what they encounter, the museum field has moved to a more contemporary model of communication known as meaning-making (*ibid.*). According to this model, during the museum experience museum visitors are actively engaged in meaning-making which occurs through interaction and communication with those who create the museum exhibits and the exhibits themselves (Sandell, 2007; Rasmussen, 2002). Most importantly, it has been argued that when encountering museum exhibits and objects, visitors will consider and value not only the messages and meanings intended by educators and artists, but they will also value the personal and affective meanings they create themselves as they connect what they encounter to their own lives and relationships (Silverman, 1990). According to the meaning-making model, meaning is fluid and socially dependent. Therefore, museums are places where meanings can be considered, shared, affirmed, contested, discarded or changed (Hooper-Greenhill, 1992) - and where individuals, groups and even society may change as well.

Research has also examined how museums may impact on the formation of individual and social identities. For example, Newman and McLean (2004; 2006; 2005) looked at how people who can be described as socially excluded used their experience of visiting museum exhibitions and participating in museum-based community development projects in Glasgow and Newcastle upon Tyne to construct individual and social identities. Newman and McLean's research was conducted as part of a project that examined the construction of policy by the UK government to use museums as agents of social inclusion and a focus of



change within society. One of the premises of the research was that one of the key processes through which museums could contribute to a social inclusion policy is through their impact on identity, the loss of which was identified as concomitant with exclusion from society. Newman and McLean (2006) maintain that the identities constructed by participants were a specific response to context and an attempt to deal with problems associated with that context. More specifically, it was possible to identify that the forms of identity created were an attempt to mitigate aspects of social exclusion and manage lives more effectively. The individual identities created by museum visitors and participants in museum-based community development projects focus on their links with groups with which they had (or imagined they had) shared experiences or histories which provided the building blocks for social identities. For example, the success of one museum-based community development project in Glasgow was considered by one participant to lie in the ability of the project to resurrect a sense of identity among the community, based upon the social history of the area. Memory and reminiscence which used museum objects as memory cues were identified in the research as a mechanism through which the process of identity construction occurred. Newman and McLean (2005) comment that for people who feel powerless over their lives, as a lot of the participants in the museum-based community development projects in their research did, the process of constructing aspects of their identity as a strategic response to resolve life problems is interrupted. They conclude that enabling the process of identity construction to be re-established is possibly the most significant contribution museums can make to resolving social problems. In a similar vein, Carnegie (2006:75) comments on the role of social history museums in instilling 'community feeling and a sense of community identity through suggesting uniqueness, just as communities are based on individuals acknowledging a shared experience, past, beliefs or cultural background, often choosing to define themselves as much by what they are as what they are not'.

Linked to museums' role in facilitating the formation of social identities is museums' perceived capacity to create feelings of belonging and social and cultural inclusion. For example, creating a sense of ownership, as well as belonging and pride - particularly among 'discredited' and stigmatised groups - and inspiring empathy in locals and visitors has been identified as intrinsic to the ethos of the social history museum (ibid.). In recent years in the UK, museums have turned their attention to facilitating social and cultural inclusion (Department for Culture, Media and Sport, 2000; Museums, Libraries and Archives Council, 2005; Wavell, Baxter, Johnson et al., 2002) through creating exhibitions and events with those groups most excluded from society, such as drug users, victims of abuse and the homeless. Characteristically, Mark O' Neill, Head of Glasgow Museums, defended the decision to include domestic violence material in displays of the refurbished Kelvingrove, Glasgow's flagship museum as follows:

'The material will recognise the actual life experience of a substantial percentage of women who have experienced domestic violence. Also one of the reasons that people do not feel welcome in museums is that they can seem to be for people who belong in wider society. People who have been victims of abuse often feel ashamed and that they do not belong. Acknowledging their experience in the museum may enable them to feel they belong in the museum, and it is easier for them to feel the museum belongs to them' (O'Neill, 2002, p.23)

Memory/recollection stimulation and reminiscence work are also processes on which increased emphasis has been placed within the literature on museum engagement. In discussions of the role of memory in the museum experience, the interconnection of memory and identity is also emphasised (Mack, 2003; Kavanagh, 2000). Museums have been

described as ‘theatres of memory’ and museum objects as ‘containers of memory’ (Mack, 2003). It has been postulated that museum objects evoke memories in ways that other information-bearing materials do not (Kavanagh, 2000; Kavanagh, 1996; Philips, 2008) - possibly due to the multisensory fashion in which they are experienced by museum visitors (Dudley, 2010). Neil McGregor, in the Preface of *The Museum of the Mind: Art and Memory in World Cultures* (Mack, 2003:8) comments: ‘For individuals and communities memory is identity or - at the very least - an essential part of it. Communities have systems and structures, objects (including museum objects) and rituals to help them remember those things that are necessary if the community is to be strong - the individuals and moments that have shaped the past, and the beliefs and habits that should determine the future. Objects contribute to sustaining memory and memory is essential to our identity’.

It has been suggested that recollection stimulated by the experience of museum objects can have an effect on individuals’ mood, ideas of self-worth and general sense of wellbeing (Kavanagh, 2000). The process of remembering the past has been ascribed therapeutic potential as it affords opportunities for reconciliation with one’s past, which helps achieve resolution and closure (ibid.; Philips, 2008). Similarly, reminiscence work with older adults using museum objects as memory cues has been linked to increase in confidence, self-esteem, skills and knowledge, feelings of being valued, intellectual stimulation and creative thinking, as well as an increased sense of social integration and improvement to wellbeing (ibid.; Arigho, 2008; Kavanagh, 2000; Museums, Libraries and Archives Council, 2008 ). Reminiscence work with older adults has also been identified as playing a part in building social relationships amongst participants, and in maintaining identities for individuals faced with loss and change (Bornat, 2001).

Lastly, the therapeutic potential of museum engagement has been explored in the literature with a focus mainly on the practice of handling museum objects. Research by Chatterjee, Vreeland and Noble (2009) evaluated a project (‘Heritage in Hospitals’), which was carried out jointly by University College London Museums and Collections and University College London Hospitals (UCLH) Arts, and sought to take museum objects to patients’ bedsides at UCLH. The main aim of the evaluation was to assess whether handling museum objects has a positive impact on patient wellbeing. Evaluation forms were completed by the patients in the beginning and at the end of the object handling sessions. The forms asked the patients to assess their life satisfaction and their health status. Analysis of the quantitative data showed an increase in the life satisfaction and the health status domains after the handling of the museum objects, which is suggested by Chatterjee et al. (ibid.) to point to the healing and transformative role heritage could play in healthcare and wellbeing. Qualitative analysis of the object handling session transcripts revealed a number of themes including reminiscence, nostalgia and meaning making. Chatterjee et al. (ibid.) discuss the possible health benefit of reminiscing indicating that ‘it was apparent that many patients, perhaps unconsciously, used the object handling sessions to help make meaning of their lives and to come to terms with illness’ (ibid.:172).

The therapeutic potential of museum visits has also been explored in the literature on museum engagement. It has been claimed that museums ‘can supply therapeutic experiences that can significantly impact on our wellbeing if we place the emphasis on learning about ourselves through the museum contents’ (Salom, 2008:1). Museums are meant as places of meditation and contemplation which are conducive to self-awareness and insight. It has also been suggested that ‘the diversity of art shown in many museum collections can mirror our value as individuals with myriad and inimitable ways of expression’ and that ‘in this way,

uniqueness is symbolically appreciated within the museum. Such affirmation of variety encourages tolerance of differences in others and in ourselves' (ibid.:2). Salom (ibid.:3) also claims that 'by creating an atmosphere that houses expressions of all different states of mind, museums become optimal for exploring the concepts of *universality* and *installation of hope* that have been described as therapeutic. Universality implies the assumption that humanity's greatness and frailness are manifested in works of art, placed inside museums so that they can be shared'. This entails that in the face of the realisation that humans share so many common features, the sense of isolation is inevitably shaken in museum visitors. Moreover, through museums one can learn about mankind's ability to excel and surpass itself, which results in *the installation of hope* in humanity itself in museum visitors. Salom (ibid.:3) concludes postulating that 'the restorative factors of exploring our humanness through our collective art within museums can be similar to the therapeutic factors operating in group therapy'.

### **Social benefits of museum engagement**

The social benefits of museum engagement are discussed in the literature in terms of *social connections and relationships, social networks and social capital, civic participation, community development, active citizenship and social inclusion*.

Through exhibits and outreach programs museums have been portrayed as helping link community members and encouraging the formation of groups (Scott, 2006), building social networks (Newman and McLean, 2004), providing opportunities for civic participation and community development (Museums, Libraries and Archives Council, 2008; Newman and McLean, 2004; Wavell, Baxter, Johnson et al., 2002), promoting social inclusion (Museum, Libraries and Archives Council, 2005; O' Neill, 2002) and decreasing social isolation (Silverman, 2002). Museum theorists and social policy frameworks alike maintain that museums facilitate the building of social capital (Silverman, 2010; Museums, Libraries and Archives Council, 2008; Museums, Libraries and Archives Council, 2005).

Social capital is conceptualised as the development of trusting and reciprocal relationships that link people and build society (Newman and McLean, 2004; Morrow, 2008). The concept of social capital is used at two levels of analysis, that is primary and secondary groups (Kunitz, 2004). Primary groups comprise family, friends and neighbours and are often thought of as forming networks or personal communities. Secondary groups include voluntary associations such as civic organisations. Social capital and civic participation have been linked to health (physical and mental health), sense of wellbeing, self-esteem, hope for the future and perceptions of control over one's life (Museums, Libraries and Archives Council, 2008; Putnam, 2000; Kunitz, 2004; Cattell, 2001; Morrow, 2008).

Newman and McLean's research (2004) examined how people who can be described as socially excluded used their experience of visiting museum exhibitions and participating in museum-based community development projects in Glasgow and Newcastle upon Tyne to invest in social capital. Participants of the museum-based community development projects indicated that their involvement in the projects had made them feel part of society and more connected to other people than they had felt before. Visiting the museum exhibitions and participating in the museum-based community development projects appeared to have facilitated social links and networks, which relates to definitions of social capital from the literature. Individuals who visited the exhibitions appeared to have reinforced or developed links with family members or a broader community that was the subject of those exhibitions.

Furthermore, the ability of museum projects to engender a sense of community and facilitate civic participation among participants was commented upon.

Lastly, the role of museums in promoting or inhibiting active citizenship and so tackling or reinforcing the experience of social exclusion was also discussed in the context of Newman and McLean's research (2005) mentioned above. The research in question adopted a model of citizenship that views the contribution of culture to social inclusion in terms of facilitating the development of 'active citizens', that is those who are able and motivated to take part in the social, political, economic and cultural life of society. Social exclusion in this context is viewed as 'citizenship deficiency'. According to that model of citizenship, the elements of citizenship are political, cultural, social, economic and socio-psychological. Socio-psychological elements cover factors such as those related to how individuals construct a self-image which in turn influences their ability and motivation to become active citizens. Hence, socio-psychological elements of citizenship cover identity, sense of belonging, motivation, confidence, empowerment, isolation and alienation. As regards the social elements of citizenship, Newman and McLean (ibid.) considered the ability of their research participants to take part in the social life of society and how museum-based exhibitions and community development projects can facilitate or hinder this process. Visiting the exhibitions was seen by research participants as an opportunity to socialise and reinforce bonds between family members or friends. The exhibitions were providing a context where social exchanges could be entered into, and where shared memories, prompted by the displays, strengthened or created social bonds. With regard to the political elements of citizenship, it was found that for those lacking the motivation to become involved in the political life of society, involving them in the decisions made about the management and content of museum-based community development projects, and in decisions made about the content of the museum-based exhibitions gave them some political control. With respect to the economic elements of citizenship, the museum-based community development projects were able to provide participants with new knowledge and skills that might improve their chances of employment. In terms of the cultural elements of citizenship, the museum-based exhibitions and community development projects provided visitors and participants with opportunities for taking part in the cultural life of society. Finally, with regard to the socio-psychological elements of citizenship, there was evidence that participation in the museum-based community development projects increased people's self-esteem resulting in greater motivation and confidence.

### **Personal benefits of museum engagement**

The personal benefits of museum engagement are discussed in the literature in terms of *human capital, learning and knowledge, education, life skills, employability, and cultural capital*.

Human capital has been defined as 'the knowledge, skills, competencies and attributes embodied in individuals that facilitate the creation of personal, social and economic wellbeing' (Healy et al., 2001). Newman and McLean's research (2004) mentioned above identified that visitors to the museum-based exhibitions and participants in the museum-based community development projects were able to develop knowledge, skills and competence from that experience, which relates to definitions of human capital from the literature.

Museums have been portrayed as benefiting individuals, groups and society at large by meeting educational needs (Silverman, 2010). The museum has been described as a free-

choice learning setting (Silverman, *ibid.*; Kavanagh, 2000). Falk and Dierking (2000) have developed a framework to make sense of the learning that takes place within the museum visiting experience entitled the Contextual Model of Learning. According to this model, all learning – including learning in museums - is situated within a series of contexts and is a cumulative process of making meaning and finding connections. Learning in museums is a product of an on-going dialogue between the whole individual and the physical and sociocultural world she/he inhabits; such learning is both the process and the product of interactions between three overlapping contexts - the personal, the physical and the sociocultural. The personal context relates to motivational and affective aspects, personal interest (attention, persistence and curiosity), and prior experience and knowledge that individuals bring to the museum visit. The socio-cultural context points to learning in museums as a fundamentally social experience which promotes growth and development. Lastly, the physical context includes the museum environment itself, its exhibits and objects. All these aspects point to learning in museums as ‘a whole-body experience involving the emotions and the senses, the physical as well as the mental’ (*ibid.*:24).

A review of research into the impact of museums suggests that the strongest evidence of impact relates to individuals’ acquisition of ‘life skills’-specifically through museums’ role in terms of enhancing cultural awareness (Museums, Libraries and Archives Council, 2005; Wavell, Baxter, Johnson et al., 2002). Museum-based community development projects have also been linked to the tackling of unemployment and promotion of employability through affording opportunities for the development of new knowledge and skills (Newman and McLean, 2005; Wavell, Baxter, Johnson et al., 2002). Last, museum-based exhibitions and community development projects have been associated with the building of cultural capital through affording individuals opportunities for participating in the cultural life of society (Newman and McLean, 2005). Cultural capital has been defined by Bourdieu ‘as a form of knowledge, a cognitive acquisition of artistic knowledge and talent that equip the person with empathy for and aesthetic appreciation of cultural artefacts’ (Bourdieu as cited by Kwawaja and Mowafi, 2006, p. 445). Bourdieu notes that ‘though cultural capital may be discreetly and even subconsciously used, it can play a powerful role in securing knowledge, tastes and sensibilities for individuals who in turn may translate these characteristics into competitive advantage among peers for ‘distinction’ and position within particular social structures’ (*ibid.*:446). Low cultural capital has been associated with poor general and mental health (Kwawaja and Mowafi, 2006).

## **PART 2**

### **Methodology**

A qualitative psychosocial approach was adopted in this study. Participating museums were responsible for their own monitoring of attendance. The numbers in project groups were varied (ranging from one person to twenty) and the research process was designed to achieve an understanding of both project processes and outcomes for participants, partner organisations and the museum itself. Each of the six museums offered participants a variety of activities within the programme. The research team liaised with project managers and artists to determine which projects to focus on and the best way to approach them. In view of the diversity of projects care was taken to select methods that were sensitive to the activity being investigated, and generally involved a mixture of observation and interview based methods. Data-sets collected independently by the research team were complemented by data collected by museum staff in the course of self-evaluation. Each museum designed its evaluation process in conjunction with the research team to ensure that data collection methods were consistent with the requirements of the research and appropriate to the specific context. Data thus came in a wide variety of forms from the relatively superficial recording of perceptions as in self-evaluation questionnaires, to film, semi-structured and narrative style interviews and in-depth observation of group process by a trained observer. Creative outputs including visual displays and poetry were understood to ‘contain’ the experience of their production, and were thus also regarded as a source of understanding. Analysis of those projects selected for detailed attention involved an iterative process of hypothesis formulation, constant comparison within and between data sets, and triangulation of findings.

### **Research Methods**

The methods used included:

#### *Participant Observation and Observant Participation*

Given the diversity of the organisations and activities, it was important to tailor observational techniques according to compatibility with the practices under observation and acceptability to museum staff and participants. Observational strategies can be located along a continuum with a minimally participatory stance of external observer at one end (Hinshelwood and Skogstad, 2000), and at the other the observational eye of ordinary participants. Ethnographic participant observation (Spradley, 1980) lies somewhere in-between. A field researcher trained in ethnographic and institutional observation and visual methods observed and participated in activities. In most cases an engaged participant observation stance proved to be the least disruptive to the group process and afforded the researcher the opportunity to interact directly with other participants in a minimally intrusive way. The field researcher(s) fed back observations to the project lead during this process in order to critically assess the observational process, gain a reflexive understanding of group process, and consider the nature of the engagement of the groups in the creative process.

#### *Focused observation and interpretation of visual arts activities and outputs*

The museum project managers collected photographic and video-based data of key events, processes and arts outputs. This was made available to the research team for independent analysis and was particularly useful in researching relational dimensions of engagement. The

outputs themselves gave expression to key ideas that had animated individuals and groups. Furthermore, reflective or associative conversations around outputs enabled individuals to identify the significance for them of working in a museum with objects from the collections.

### *Focus Groups*

At the end of each project, focus groups were recorded with project participants and, separately, with artists and project managers and key stakeholders. Questions asked in each context emerged from the other fieldwork conducted on the projects and were project specific. However, as the focus group interviews were only semi-structured, all participants were given the opportunity to discuss issues that were important to them that the researchers had not considered. This process enabled the researchers to gain an understanding of the projects from a variety of perspectives and helped engage participants and staff in retrospective self-evaluation of the impact of the projects on mental health and wellbeing.

### *One to one interviews*

Interviews were conducted with project participants, project managers and museum staff, partner organisations and artists. They were done both face-to-face and by telephone. In some cases relationships with partner organisations of the participant groups were particularly challenging and one-to-one interviews were the most appropriate method for handling such situations sensitively.

### *Network meetings*

Although not originally intended as a part of the research methodology, the three monthly network meetings of the Renaissance North West museums hub effectively operated as a reference group for participating museums and afforded the researchers an invaluable opportunity to familiarise themselves with the difficulties and opportunities for museum staff of extending their practice into the areas of health and social care. The meetings also allowed discussion of emergent findings, the wider cultural context of the projects and operational issues related to the research.

**PART 3**

**The participating museums: distinctive areas of practice**

**Museum Comparison Matrix**

	<b>Tullie House, Carlisle - Page 19</b>	<b>Harris Museum, Preston – Page 26</b>	<b>Bolton Museum and Library Service - Page 32</b>	<b>Manchester Museum – Page 37</b>	<b>Whitworth Art Gallery – Page 44</b>	<b>Manchester Art Gallery – Page 49</b>
<b>Partner organisation (and target demographic)</b>	Local care homes (older people, some with dementia and training of care staff)	The Observatory (Asian women with mental health issues); Foundations (formerly homeless adults); Disability Equality Group project (physically and/or mentally disabled adults)	Active Health – Bolton Council (adults with mild to moderate mental health issues including anxiety and depression)	Local community and job centres (adults with physical and mental health issues) Start in Manchester (adults with severe and enduring mental health issues)	Manchester Hospital Schools and Home Teaching Services, (children with physical and mental health issues e.g. eating disorders and self harm)	Start in Manchester - NHS funded arts and mental health organisation (adults with severe and enduring mental health issues); Wigan CAHMS (young people with mental health issues); Christie Oncology Unit (acutely ill young people and their families)
<b>Setting and sites</b>	Care home function rooms and communal spaces, visits to museum exhibitions and seaside outing	Museum exhibitions and workshop, Foundations homeless shelter, The Observatory, audio/video lab; Disability Equality function room	Museum exhibitions and learning room, field trips to museum – owned historical sites.	Museum meeting room; exhibitions; audio/video suite; storage rooms	Leo Kelly Centre, Children’s Hospital, visits to exhibitions	Art galleries and workshop; Start in Manchester facilities; Christie Young People’s Oncology Ward ‘living area’



<b>Art forms and creative activities</b>	Creative writing, object handling, music and movement activities, arts and crafts	Creative writing, video/audio installation, visual art	Visual arts, sculpture, textiles, object handling, mindfulness sessions	Poetry and creative writing (and performance), object handling, visual arts, wellbeing trail, mindfulness sessions	Visual arts, modelling for arts exhibition, mask-making, sculpture and ceramics, poetry	Visual arts, creative writing, object handling, wellbeing trail, imaginative discussion
<b>Project manager and lead artists' working methods and ideologies</b>	Poetry Project - Artist used object handling and images to encourage group participants to develop reminiscence poetry. Completed poems performed by artist back to the group. Music and Movement – museum objects and exhibitions used as a springboard to physical activities Arts and Crafts – care work staff trained in creative techniques.	Project manager wished to encourage excluded groups to engage with the museum. <i>Mouthpiece</i> project -white male artist working with Asian women, challenging cultural assumptions. Foundations project – creative writer worked with homeless men initially in Museum site and then at the homeless shelter Disability Equality group – participants with	Project manager and artist ran longest course out of all the projects with therapeutic approach. Emphasis is on sharing activities as a group and respecting other group members. Each session began with a 'mindfulness' exercise and regular slots from museum curators and sharing session.	<i>Creative Culture Course</i> - Project manager wanted to encourage vulnerable new users to the museum to experience the building. Artist developed reciprocal relationship with the group and poems were created based on group and solo inspirations from the museum collection <i>Health Rocks!</i> – Start artists worked with occupational therapist in structured creative	Artists worked predominantly at MSHS sites with young people with complex needs. A variety of art forms produced that are displayed in the Leo Kelly centre and Galaxy House ward (Manchester Children's Hospital). <i>Art, Creativity and Surroundings</i> project had artist in residence creating artworks with participants modelling. These art works have been displayed in a <i>Who Cares?</i> exhibition which	<i>Say it With...</i> - Feedback from participants that project contained friendly and supportive staff. Wigan CAHMS - psychiatrist partner focused on therapy, project manager focused on creativity. Christie Hospital - artist engaged young people and their families in imaginative discussion and object handing in order to give relief from the stress of the situation.

		mobility problems were assisted to access the museum.		sessions (beginning with 'mindfulness' exercise).	also contains a therapeutic space for visitors.	
<b>Arts outputs</b>	Poetry Project - Group and individual poems are typed out by the artist, performed by him for the group and copies are given to the authors (this is all internal to the group).	The Observatory group have created an installation that is to be displayed in the museum Foundations - group's poetry has been collected in a booklet titled <i>Hold Onto Life</i> .	The artist believed participants should be able to freely express themselves and experiment with their creative activities. Therefore, there is no emphasis put on completing artwork for an exhibition or by a deadline. Instead, participants may take their work home with them. There is also no emphasis on the 'quality' of the creative outputs.	<i>Health Rocks!</i> resulted in a display at the museum. <i>Creative Culture Course</i> poems were collected in a booklet, titled <i>Integrated Inspiration</i> , and a video was made of performances of a selection of the poems. Participants also performed a selection of the poetry from the book to the 100+ audience at a launch event for both projects.	Children from both sites have created some visual art for display in the Leo Kelly centre and Galaxy House. An artist in residence has also created professional pieces of artwork with participants as models. This work is being displayed in the gallery.	<i>Say it With...</i> arts outputs were displayed in the Gallery, as was collaborative comic strip produced by the Wigan CAHMS group with comic strip artist. Christie Hospital object handling project did not have any arts outputs.

## **Tullie House Museum and Art Gallery, Carlisle: working in partnership with carers and care homes for older people**

Tullie House Museum and Art Gallery worked in partnership with local health care organisations to deliver a sustainable Arts in Health programme in Carlisle and District. The target audience was carers and their elderly clients (including those with dementia) in care settings. Tullie House built on established relationships with homes and held taster sessions for managers of other homes to encourage them to join the projects. There were three aspects to the projects: developing the confidence of carers to run arts activities with clients, giving carers and clients access to museum objects and exhibitions, and offering an opportunity to take part in creative activities. Volunteers from the museum supported the programme by visiting the care homes and assisted in the running of group creative activities, especially where older people required one-to-one attention.

The projects focused on three different creative activities: arts and craft, poetry, and music and movement. Training was provided for carers and volunteers and starter packs about each art form were provided to enable carers to replicate activities after the training. Sessions were delivered to elderly people by creative practitioners in day care centres and residential care homes (two contrasting care home settings were involved in each project). The creative practitioners used the museum collections for inspiration to devise activities for the clients to take part in and provided mentoring for the carers. At the end of the project, sharing and learning sessions for all the projects provided the opportunity for carers and volunteers to get together to feed back on the impact of the projects and consider the next steps. A video artist filmed sessions in all the projects both for evaluation purposes and to provide a tool for further training.

### **Project Descriptions**

#### *Bathing Beauties*

*Bathing Beauties* was a pilot 'reminiscence' project with participants from a day care centre for older people in which some of the participants had dementia. The aim of the project was to engage elderly people. It was an opportunity for museum staff and volunteers to work with older people with dementia, a group with which museum staff had limited experience.

The participants visited the *Bathing Beauties* exhibition at the museum site (which included miniature beach huts designed by artists and architects) and a trip was organised to a local seaside location. Seaside memory boxes containing chosen objects on the theme were made with Tullie House volunteers, and a final group poem was produced with a creative writer.

#### *Music and Movement*

This project aimed to improve physical and emotional wellbeing among elderly clients through four music and movement sessions. After initial training, carers were mentored in the movement sessions with the aim of encouraging them to plan further sessions after the *Who Cares?* project finished.

*Music and Movement* was distinctive as a movement project in that connections were made between physical activities and the museum collection. This was achieved by discussing the historical uses of the various items used in the activities and using items from museum

exhibitions (for example *Fairies* as a stimulus to a movement session based on the *Dance of the Sugar Plum Fairy*).

### *Poetry Project*

*The Poetry Project* conducted creative writing sessions in care homes. The creative writer from the *Bathing Beauties* project used museum artefacts and pictures to generate discussions, resulting in group and individual poems on a variety of themes (see Case Study below). The decision to work intensively with a number of care homes offered interesting points of comparison across differences in environment and atmosphere and generated a great deal of data including photographs and film which offered an opportunity to observe the details of interaction after the events. This project was also intended to embed the practice of creative writing within the homes, so that such activities could continue after the end of the *Who Cares?* programme.

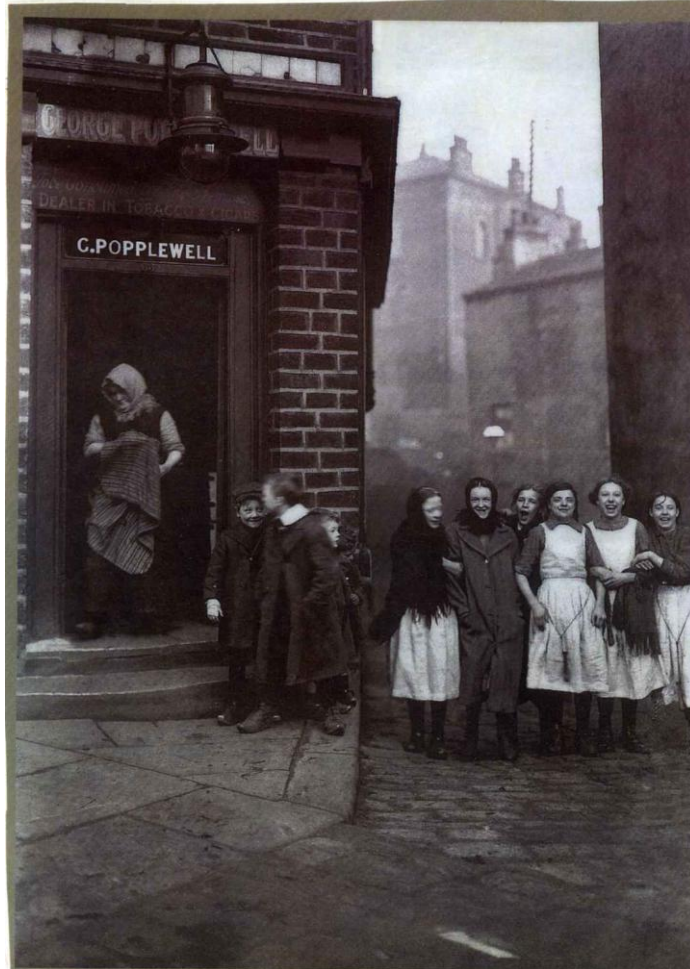
### *Art/Craft Project*

After receiving training in art and craft techniques at Tullie House, four-week arts and craft sessions were run simultaneously at two care homes. The sessions were multi-dimensional: primarily, they were for mentoring and training of care workers so they could continue creative activities with the residents after *Who Cares?* Care workers and clients were also given the opportunity to explore different art forms creatively and were given advice, instruction and encouragement about engaging in art forms which they might be unfamiliar with. The key outcomes of the project were that staff gained knowledge and ideas of creative projects that could be run in the care home, how to source materials cheaply and the value of making contact with Tullie House staff.

#### Case Study – Poetry Project

The lead artist on the project was John Killick, a freelance creative writer who specialises in working with people with dementia. The project was hosted in two different care homes - one public sector, one privately owned. Both sessions were run on the same day once a week. The session detailed here took place approximately half way through the project.

The public sector home was a noisy, busy environment, and it took some time to set the room up in a suitable format for group work with a semi-circle of chairs around a flipchart. The home was open plan and the session took place in the dining area, sandwiched between the kitchen and the TV. Some participants were so frail that they had to be helped into chairs. Some were using walking apparatus, so the group took some time to settle in. Nevertheless it slowly grew to a dozen in number and contained an equal mixture of men and women. John began by reading out poems that had been made in previous sessions, when he and Tullie House staff volunteers had worked one-to-one with group members. These poems had been typed on paper and the artist read each one out to the group before handing it to the author, who received a round of applause and compliments from the group.



The image (source unknown) used by the groups which inspired *The Good Old Days* and *Happy Faces in a Grim Street* poems

He then handed out copies of the same laminated image to each group member. Several of the group wanted to know more about it: Where was it taken? What year was it taken? How old are the girls? Who was C. Popplewell? What is the woman in the shop doorway hiding?

After John had explained that he didn't know the answer to any of these questions the group abandoned requests for information, apparently accepting that there was no authority to defer to. They were able then to free associate around the image and these associations were gathered by the artist who wrote them down on the flip chart. Over the course of an hour, two large sheets of paper were filled with observations and comments which ranged freely over topics such as architecture, class, gender, child labour and poverty. Some of the exchanges were animated, even fiery – particularly those around class. John allowed this heated discussion to run out of steam before he began constructing a poem from the comments. Each comment and observation was numbered and ordered in a poetic flow. A title was settled on by the group - *The Good Old Days?* – but only after further discussion as to whether there should be question mark at the end to signal the ambiguity or irony of the idea. As there was no time to re-write the poem in the session, John finished by reading out the poem in the order that the lines had been numbered. His recital was met with a round of applause.

The Good Old Days?

They are having time out.  
There is no sun.  
There's no smoke from the chimneys.  
A depressing picture filled with cheerful women...

They are working women.  
They look poor but happy,  
They are smiling.  
They've got their pinnies on!

They are being watched over -  
They are weavers.

The dirty aprons mean they do menial work  
One woman is wearing a shawl,  
One has put her shopping in her pinny and turned it up.  
Maybe its tobacco.  
It could be toad in the hole!

The boys are wearing clogs  
One of the boys has a cap  
The little boys are hiding – they want to be seen to be clean!

It makes me feel old.  
Because  
I remember those times...

The session was repeated in the afternoon at a private care home with more spacious facilities and fewer group participants. The discussion was again lively, and followed a similar pattern to the earlier session in the sense that initial requests for context were politely rebuffed before the group got to task. A poem was produced from the session titled *Happy Faces in a Grim Street*. Despite the improved facilities and increased attention that could be paid to the participants due to the reduced number, this session was made more challenging by one woman with dementia who seemed to be struggling and was quite disruptive to the rest of the group, although she too eventually managed to join in. John appeared undeterred, and even to relish the additional challenge. A wealth of material was produced and reflecting on the session, he remarked:

*This proved to be an astonishing experience, lasting nearly an hour, and resulting in the longest poem I have ever made on one of these sessions.*

Happy Faces in a Grim Street

The picture was taken 100 years ago  
They are fisher-lasses who followed the boats  
They followed from Scotland down the east coast  
Those things hanging round their waists –  
They look like 'priests' –  
They clobbered the fish.

They are in their working clothes  
It could be a street in Grimsby town  
It could be Cullercoats  
It could be Yarmouth or Lowestoft.  
They have donkey stone or pumice on the steps  
The brickwork looks modern and it's very neat.

There are paraffin lamps.  
In the back, where the chimney pots are, there's a  
Strange twisty thing –  
It could be a flagpole –  
It's twisted like a vine.  
The big house behind looks like it belongs to the boss!

Everybody seems to wear caps!  
The little boy has a collar –  
It could be school uniform –  
He should be somewhere else...  
What has that woman got under her apron?  
She could be drying her hands.

When the boats come in.  
They look like they're having fun  
The girl at the back seems to be shouting something unpresentable...  
The medium boy seems to be sharing a joke with the boy in the collar  
This little girl looks bashful!  
Could be the end of a good working day.

One lamp lit and the other not.  
It was life in the raw –  
Stay as young as you can...

The session made an impression on the participants as well. After the session, a female participant emphasised the richness of discussion that can be generated from a modest object:

*It's interesting what we can get out of one little photo. We sometimes get long poems out of one photo, everybody gets a chance to say what it means to them.*

### **Responses from participants and staff involved**

For *Bathing Beauties*, the evaluation feedback from the participants was overwhelmingly positive. Enjoyment was given and received from listening to and reading poetry, activities such as handling of sea-shells and talking about memories of holidays were enjoyed. The project enabled residents with more serious health issues to get involved with a group activity in the shape of a poem, and take part in a creative activity that would not be possible on their own. Even if their contributions were small, they were still valued by the group.

Again, in the *Music and Movement* project, feedback was overwhelmingly positive. Participants appreciated being able to take part in dancing and exercise and to be able to use a variety of materials, including musical instruments, fans, footballs and scarves. The sessions

were lauded by care staff who perceived participants to feel happier, more active and to appreciate the opportunity to be “silly”. Some participants felt that they were unable to do certain activities due to mobility issues or injuries. This caused a degree of frustration and staff were careful to be sensitive to the needs of the less mobile members of the group.

It was evident in the *Poetry Project* sessions that the artist had developed a great deal of rapport with the participants, who described him as “great” and “enthusiastic”, and one participant emphasised “we really look forward to him coming to visit”. In the final session, participants were invited to reflect back on the project and give their verdict. The overall view was extremely positive, with several participants voicing how much they had enjoyed the sessions with one adding “I hope you can come back”. A female participant mentioned how the project kept her mentally active:

*We wouldn't be doing anything if we weren't doing this - it's important to keep your brain working.*

The effect on mental wellbeing was also registered by a participant from the first session, who described himself as “depressed” prior to a session beginning, but was visibly uplifted and remarked that he'd enjoyed the session at the end. Another female participant in the same group said she was “enthralled” by a session.

Staff at the care homes were also impressed with the project, particularly in the creativity elicited by the work:

*It's been absolutely excellent I'm very impressed with John [the creative writer]- the way he's looked after and treated the residents. He has got character and he brings out the best in them. I'd love to carry it on.*

His effectiveness was even more pronounced when working with a mentally frail resident:

*It's great to see someone concentrate for two hours and get really stuck in. She got so much out of the pictures that were shown to her... it was tremendous.*

The poetry outputs were also identified as a good means of gaining recognition that the participants had something of value to contribute, often beyond the expectations of those who know them most intimately:

*It's great to show relatives the poems that they've made. One lady's daughter read the poem and was just about in tears. She said “did my mam actually say all this?”*

## **Commentary**

Museum based objects and other historical artefacts have been widely used in reminiscence groups with people being invited to respond to them in terms of personal memory. It would be easy to assume that private associations are a particular interest for older people – stereotypically suggesting a gradual withdrawal from a wider social arena. Care homes for older people are often seen as housing a population of diminishing mobility and independence and as sites where opportunities to engage with the ‘outside’ world are limited. The *Poetry Project* demonstrated that in terms of imaginative and cultural horizons this view is one-sided. There was, to be sure, intense personal pleasure in recollection. However, responses were not privatised. The picture prompt enabled both personal association and



animated social commentary. Historical objects such as those located in museums not only activate memory but can do so in such a way as to provide culturally shared forms for personal experiences – and hence re-vitalise the links between individuals and the social world. In relishing their individuated perspectives this group of old people eschewed a cloying nostalgia, recognised their social diversity and opted for a discriminating ambivalent and socially critical perspective on *The Good Old Days?* and *Happy Faces in a Grim Street*. The artist recognised the liveliness of these complex responses and positively relished the contribution of a very vocal member who was inclined to be ‘difficult’.

Interestingly, not all the ‘objects’ chosen for discussion by the creative writer were from Tullie House. Museum staff brought reminiscence boxes to sessions, filled with items from the museum, but the artist often preferred to use his own pictures and images that were gleaned from a variety of sources, including magazines. He mixed the contemporary with the historical and used pictures provocatively to spark off the discussions that led to the poems. The artist’s rapport with the participants and the management of the group activity by Tullie House staff and care workers played a large role in the project’s success. However, the project manager stressed that although all the projects appeared to reach the participants emotionally, the *Poetry Project* was also able to stimulate them intellectually.

Whatever the source of the objects used to generate creativity, care staff were enthused by the quality of material generated by the group and relatives astonished and moved at its richness. Furthermore, they found the experience of creativity to be of great value to themselves as well as the participants. In the sharing and learning sessions conducted at the end of each project, care workers stated that they would be looking to incorporate some aspects of these creative activities into future practice and *Music and Movement* sessions have successfully continued in partner care homes.

Leading a creative writing group poses a big challenge for care staff as it requires confidence (and certainly a greater level of training) than other art forms. It is difficult to say at this stage how effective or enduring care worker-led activities will be, but the partnership between the museum and care homes is a good basis for future collaboration. It seems likely that if this form of practice is to be sustained it will require ongoing support from the museum. Tullie House is to remain in contact and assist where possible – for example, by lending museum objects to the homes to stimulate creativity. Tullie House has also set up a private Facebook page for carers involved in the *Who Cares?* programme to communicate with each other and share ideas.

## **The Harris Museum and Art Gallery, Preston: practice at the sharp end with hard to reach groups**

The Harris Museum organised projects that attempted to engage vulnerable participants through partnerships with three local organisations: an NHS racial equality mental health team, a disability equality charity and a supported housing scheme. In planning its health and wellbeing work the Harris used the findings from research which mapped arts and health provision in the area covered by Central Lancashire Primary Care Trust. All the projects encouraged on-site engagement with collections, displays, exhibitions and staff, as well as off-site creative sessions run using freelance community arts workers.

### **Project Descriptions**

#### *The Mouthpiece* project

An artist from a local community arts organisation, ALISON (Artists Living in Situations of Need), worked with a self-support group of Asian women who had mental health issues and had been victims of domestic violence. The women had been referred to a local racial equality mental health team based at a local NHS facility called The Observatory (a space where ethnic minority community members can use a variety of interventions – including arts-based interventions). The group sought inspiration from the exhibitions at the Harris (in particular, an exhibition showing the history of the local textile industry) and used their sewing and weaving skills to create a collection of cushions that represented their country of origin and could be culturally informative to an audience. They also worked with the artist to produce accompanying audio and video installations. The creative work took place at The Observatory and was an opportunity for the group to bond socially, to be taken to the Harris museum to see exhibitions, and take part in the creative activities. The cushions and media installations produced during the sessions are intended to be displayed in the Harris in an interactive display in the near future.

The project manager initially wanted the women to spend more time in the Harris, but for reasons of fear or anxiety the public space of the museum was a problem for some of the women and The Observatory was a more secure environment in which the women could be creative with privacy. As the majority of the project took place off-site, the Harris exhibitions were more of an initial springboard to a creative activity, rather than permeating the project.

#### *The Foundations* Project

Foundations is an NHS supported housing scheme which takes referrals of formerly homeless people. The museum initially organised six sessions with a poet. The aim was to help the participants with developing confidence and self-esteem through creative writing in order to help them move towards volunteering or employment. Two introductory sessions were held at Foundations to introduce the creative artist to the group and to raise awareness of the project. The plan was for the group to meet with decorative art, fine art, social history and contemporary art curators, to view collections and then use this experience as a catalyst for creative writing with the poet. The group went to the Harris for the first full session (see Case Study, p.27) but after a low turnout in the second session the venue was changed to the Foundations accommodation communal space. A core group of four participants remained

for the majority of the project. Eight sessions were held in total and a collection of poems made throughout the project was made into a booklet (see p.30).

### *Disability Equality North West Group Projects*

Artists from the Harris and local community arts organisation ALISON (the artist from the earlier *Mouthpiece* project) worked with beneficiaries, staff, volunteers and key workers of a local organisation for the disabled (Disability Equality North West). Creative sessions were held both at the Harris and offsite at the organisation's headquarters. Approximately 40 participants were split into two groups - male and female, at the participants' request – with the sessions running concurrently. The group had diverse needs and as well as people with physical disabilities, there were participants with autism and those recovering from a stroke.

The creative sessions used a variety of art forms and activities to encourage a connection with the Harris and personal reflection on artworks, including object handling sessions.

Volunteers and staff helped participants get around the museum physically, and also encouraged them to immerse themselves in the art work, rather than just giving a tour of the museum (the group made several visits to the site), as they were studying artworks in depth – which resulted in individual poems about specific museum paintings. The most memorable aspect for participants were the creative sessions, especially painting. The handling sessions were also popular. The project was unique for *Who Cares?* in the sense that the main aim was to make the museum site more accessible to a group with identified physical disability issues. In order to achieve this aim, a sizeable proportion of the budget went on transport for the groups to the museum and catering for the group whilst they were on-site.

### Case Study – Foundations Project

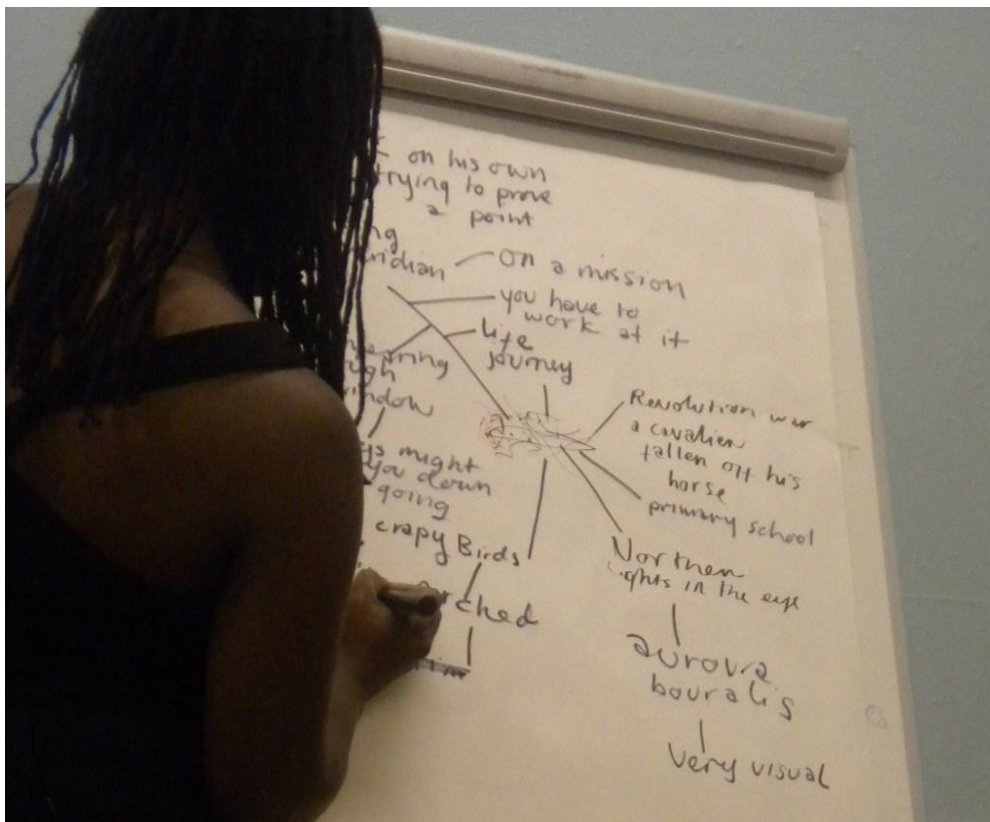
For the first session of the project in the Harris Museum the project manager began by taking the group to the museum café for refreshments. The group had been brought from Foundations by a key worker, with other members being picked up *en route* (the key worker was able to find some candidates on the streets outside of the museum). The lead artist, Chanje Kunda – a creative writer and performer - introduced herself and organised an ice-breaking session in which each member of the group in turn went round individually and chose an alliterative name for themselves.

After tea, Chanje and the project manager tried to lead the group to an exhibition. However it proved difficult to keep the group together with members wandering off and disappearing in the Harris' endless galleries. After some 'rounding up' the group arrived at the Simon Faithfull exhibition *Recent Findings* - a digital installation in three parts. The first was a pitch black room with projectors facing each wall and alternately projecting white-on-black line drawings of 'murder' crows. In the corner of each image was the city where the crow was drawn. Faithfull contends that the crows take on the characteristics of the human populations among whom they live. They did not find favour with the group who thought them to be at best 'not very good', at worst 'crap'.

Next was a video of the artist projected onto a white wall. He was walking the Meridian Line, using a palm pilot to navigate and attempting to hold fast to the line regardless of obstacles. He is filmed climbing over fences, wading through water and making his way through people's houses. The group were intrigued and absorbed for the length of quite a long film.

The final part moved from monochrome to shimmering evanescent colour and recorded Faithfull's trip to the arctic to see the Northern Lights which had stubbornly failed to appear. There were two huge images of an iris with the reflections of what the eye was seeing. One captured what the artist actually saw – a satellite dish; the other – a 'fictional' aurora borealis captures what was in the mind's eye. The group were transfixed - one declared he had always been interested in 'space'.

After further rounding up, the group moved to a small windowless room used for school groups and sat around a flipchart in a small semi-circle. Chanje performed some of her own poems, which had a common theme of strength in the face of adversity. When she finished she invited them to free associate to what they had seen, and then worked with them to order and craft the ideas into a poem.



Chanje Kunda, the creative writer, using group comments on the *Recent Findings* exhibition to create a group poem.

As the task became more complex the group flagged but Chanje persisted and re-energised them by reading from the beginning so they could see the shape of an emergent poem. Towards the end, the process became hectic as a museums assistant appeared to announce there were ten minutes until he was locking the building. However, by then the group were committed to seeing the poem through. At the last minute, it was complete and two people read it out:

### Northern Lights

I'm on a mission  
And I don't need your permission  
It's not easy you have to work at it  
So just play along with it  
It's like a revolution war  
Better now than it was before  
A cavalier fallen off his horse  
He gets up without any remorse  
Northern lights in my eyes  
A light for every time I've tried  
Aurora Borealis is what I mean  
It's a reflection of what I've seen  
The world didn't seem to care  
Just like Tony Blair  
Things might slow you down, keep going  
Every paragraph is still worth knowing  
Doubts disappearing through a window  
Life's journey keeps on flowing through  
It's like walking the meridian line  
Keeps on going time after time  
I've got a point to prove  
Off my path I will not move

From what has seemed a distracted, wandering, leaky sort of group, the artist had drawn out a complete poem in the first session evidently to their great satisfaction.

### **Responses from participants and staff involved**

Interviews were conducted with participants at the end of the *Foundations* project. One participant – arguably the most engaged - cited his care worker who was enthusiastic about “creativity” – as key to getting him involved, and he emphasised the importance of the social aspect of the project:

*[She] said it was good to go, 'cos you'll get to meet new people, make friends, so that's what made me decide to do it. At first I was thinking 'I can't be bothered', but since coming onto the group I've really enjoyed it.*

One of the main issues concerning the project was the location of the sessions. Only the initial two sessions were located at the Harris, with the remainder being carried out at Foundations, as the message received from Foundations staff was that beneficiaries were unwilling to visit the Harris every week. The project manager and artist were sensitive and responsive to the needs of the participants and reacted by changing venues. A participant gave his perspective:

*I think at the museum when you would talk you'd feel outside noise and that...with the museum you could hear people talking when they were passing. I mean, you get that here, but it's more comfortable.*

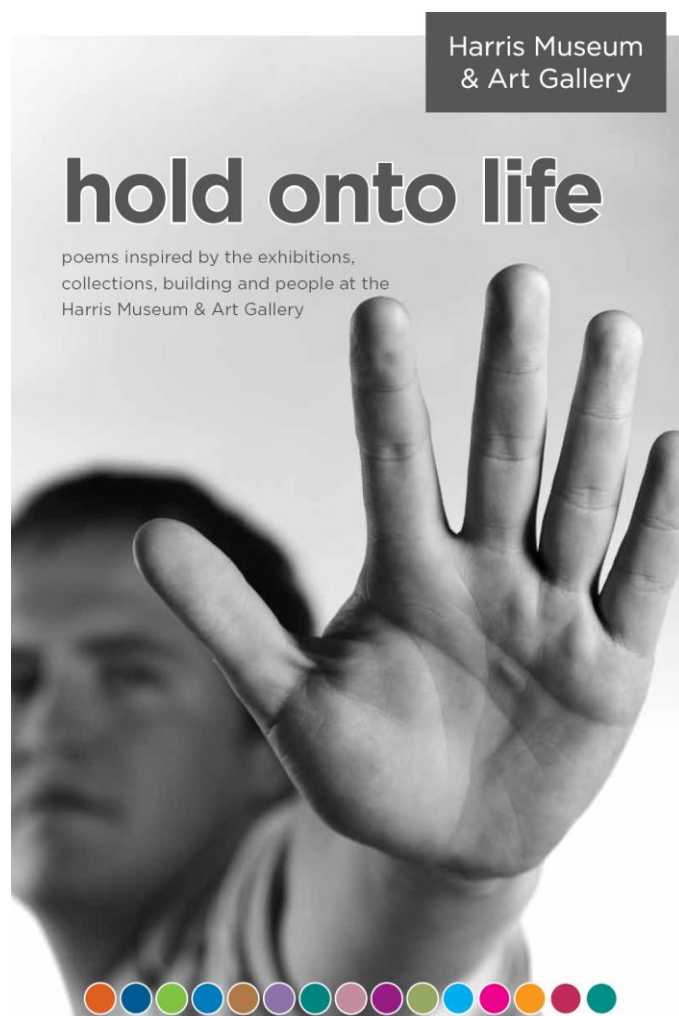
However, the same participant said that he would have “liked to carry on with the sessions at the Museum”, and did enjoy the exhibitions. The sense that the comfort and familiarity of Foundations accommodation aided some other participants to be creative was demonstrated by another participant, who only joined the project after it moved venues to Foundations and said that at this stage he was not ready to go to the Harris:

*Being comfortable where I am is important to me. I would maybe use this project and then feel comfortable enough to come to the museum.*

The most engaged participant explained that the project had “improved” his writing and “motivated” him to enrol in two night courses at the local college. His overriding impression of taking part in the project was that it had helped his self-expression and communication and he believed that others could benefit from this too:

*[It has been] a help with expressing myself, rather than keeping things bottled up. When you're saying verse, it's the words you want to hear that come out...I think its just it's a shame that more people haven't got involved. They would've got a lot more out of it.*

Session location issues aside, the project was able to produce a booklet of group and individual poems created on the course entitled *Hold Onto Life*.



The cover of the poetry booklet produced from the *Foundations* project

## Commentary

The Harris projects demonstrate that targeting new participant groups for museum projects creates unforeseen challenges and the resulting projects are as much learning experiences for the museum as they are beneficial exercises for the participants.

The *Mouthpiece* project was distinctive in terms of the group dynamic. The artist was a white male, unmatched to the group culturally, by gender or ethnicity. However, he had worked effectively with the same group on another project and explained that these differences may have even been conducive to the creative dynamic atmosphere in the sessions as the artist and participants could learn about each other, bring culture and identity to the fore and use the sessions to challenge assumptions about one another. The *Mouthpiece* project raises questions concerning the extent to which the women saw the museum as a space for them – some felt anxious in it. As with the *Foundations* project they preferred to remain off-site for the majority of the project but this may alter with the exhibition of their work.

As with the *Mouthpiece* project, the instigation of the *Disability Equality North West* project benefitted from an existing partnership with a local community arts organisation. The *Foundations* project was exceptional as it was a new partnership. The latter is a key example of *Who Cares?* working at the sharp end of community engagement. Although all the projects at the Harris are aimed at groups that have difficulty accessing the museum site for reasons of culture, physical or mental health, the *Foundations* project posed the greatest difficulties. This is because in terms of a hierarchy of needs (Maslow, 1954) a cultural experience at a museum is likely to be a low priority until more basic needs are met. Nevertheless this group made good use of the exhibition they saw, transforming its imagery into a meaningful commentary on the predicament of homelessness<sup>1</sup>:

*Northern lights in my eyes  
A light for every time I've tried*

and

*Things might slow you down, keep going  
Every paragraph is still worth knowing  
Doubts disappearing through a window  
Life's journey keeps on flowing through*

The project manager at the Harris said that part of her reason for targeting this group was that on occasion, homeless people use the museum toilets and the building's surroundings for shelter. They are often considered by other museum users as a nuisance or menace. She acknowledged that some groundwork with homeless groups was needed prior to bringing participants into the museum for future projects. She suggested that the next step may be to invite the managers and staff of local organisations into the Harris for planning sessions so that the Harris 'offer' can be understood by staff and then cascaded to participants in different partner organisations.

Branching out into new partnership areas is risky, and some museum staff and organisational cultures will inevitably be more wary of this than others. There is much to be learned from sharing experiences of hard-to-engage groups and organisations between museums.

---

<sup>1</sup> The psychosocial significance of the exhibition for the homeless group will be discussed further in Part 5.

## **Bolton Museum and Library Service: Therapeutic arts practice**

Bolton Museum and Library Service *Who Cares?* work is been aligned to the wider local council strategy which aims to address community cohesion. The Museum is viewed as social space which can be used for social prescribing (social and cultural activities for those experiencing mild to moderate mental health problems).

Most of the *Who Cares?* work was focused on one project with a long duration. There was also an initial pilot project in which participants with mild-to-moderate mental health problems were referred from a local mental health organisation. Participants viewed the exhibitions and took part in creative activities in a function room in the museum. The later large-scale project replicated some of these activities.

### *Museum Collections and You*

This project aimed to use the museum collections, buildings and curators to improve health and wellbeing. Participants were referred by their GPs through a partner: Active Health (a Public Health funded service housed within the Council's Sport Health and Inclusion Team). The participants all had mild-to-moderate mental health problems, including depression and anxiety (some had additional complex problems that only surfaced as the project progressed). Potential participants filled in a registration form and had an initial meeting with the Active Health team manager which asked several questions regarding their aspirations, fears, emotional issues and prior experiences of museums and galleries.

Ultimately, ten participants were invited to join the group. Creative activities that covered the range of collections at the museum were made available to the group. The lead artist Gwen Robinson, a freelance bodywork psychotherapist delivered arts based sessions for the participants and mental health awareness training for curators.

The project was considerably longer in duration than any other in the *Who Cares?* programme. A project of this duration required careful forward planning from the project manager and a preliminary 20-week course outline was prepared which was modified during the course when the group's interests became more apparent. An initial three-week trial period was also built in, during which time participants could potentially be replaced by other Active Health referrals if they decided they did not want to remain on the project.

At the start of the project ground rules were set by the lead artist: chiefly that group participants should respect each other's views and allow each other to express themselves. Each week began with the group partaking in a mindfulness exercise – a brief 'arriving' short meditation, in which participants were encouraged to leave their problems 'at the door', to engage fully with the session and to give their absorbed attention to the present. It was also intended to relax participants who were anxious about group work. Sessions were concluded with a sharing session, where participants were encouraged to talk about personal responses to the project and what was then in focus for them emotionally, physically or mentally.

The weekly sessions often brought in curators from different parts of the museum to give presentations on their collections, which included Egyptology, Natural History and Local History. Curators were asked to initially focus on themselves and what attracted them to their particular specialism as a way of introducing themselves to the group. The activities over the 20 weeks were varied: exploration of buildings, discussions of the museum's collections, and 'play' creative sessions with arts materials, such as collage, sculpture and textiles. The



venues were varied also. The main location was the Learning Studio in the museum. Field trips were also organised to satellite historical buildings owned by the museum. Participants were always encouraged to reflect on the day with the group at the end and to record their reflections on the sessions in individual personal diaries.

#### Case Study – *Museum Collections and You*

Approximately half-way through the project, the group went on their second visit to Smithalls Hall (a Grade-1 listed building owned by the Museum, approximately half an hour's drive away from the main site). As transport was an issue for some of the group, the project manager organised a minibus. The Hall is surrounded by picturesque woodland – geographically close but aesthetically contrasted with the urban centre of Bolton.

The session was well attended. The lead artist, Gwen Robinson, began with a mindfulness exercise. The group responded diligently (the format of the sessions was familiar by this point). For five minutes the room was silent save Gwen's voice giving gentle instruction to control breathing and encouragement to leave problems 'at the door'.

The guest curator for the session was introduced. Her specialism was natural history and she gave a presentation that was initially personal (aspects of her biography that led to natural history). She then gave historical detail on Smithalls Hall, explaining how the site had been used since the 19<sup>th</sup> Century to collect flower and plant specimens. Biographic detail was given on some of the key collectors from the past, and specimens from the museum archive were passed round the table as the presentation took place, some dating back 150 years. Information about the plants was interspersed with biographical detail about the people that collected them and local history and this seemed to capture the group's imagination.

This was followed by a walk outside in the local woodlands. It was cold and wet and difficult for some of the less mobile members of the group. Eventually everybody reconvened in an open part of the wood, and a 'trust' blindfolding exercise was carried out. Group members were asked to get in pairs, one was blindfolded then led over uneven terrain by the other, eventually ending up next to a tree. They were invited to explore the textures of the bark whilst blindfolded.

Remaining outdoors, each participant was given a lump of clay, to sculpt into whatever shape they desired. Some faces, animals, and fungi observed on the walk were amongst some of the sculptures. Participants were given the option of taking their sculpture home or leaving them on the flat surface of a nearby tree stump, as an anonymous 'exhibition' for dog walkers and school children to puzzle over.

The group were encouraged to return to Smithalls Hall for a sharing session and a warming cup of tea. Unfortunately, one of the group had an asthma attack (possibly as a result of the uphill walk back) and this required the attention of the project manager and lead artist, so the sharing session was shortened. What was shared was that the group enjoyed the session overall, particularly the outdoor activities, but they were also fascinated by the stories of collectors who had died a long time ago but who 'lived on' through the museum's natural history archives.



Clay sculptures left on a tree stump in an outdoor 'exhibition' at Smithalls Hall

### **Responses from participants and staff involved**

The participants gave a very favourable account of the project. The 20 week duration gave considerable scope for exploring what the museum has to offer and taking part in creative activities, it also increases the amount of commitment that participants have to give. At the end of the project, a core group remained, reduced by a third from the start. Some of the group members had complex mental health issues which worsened during the project and for this reason were unable to continue. However nearly all the rest were willing and able to follow the project throughout the duration. Most of the group had not known each other before the project began, and had made friends by the end. The group had been social as well as therapeutic.

Some participants preferred the educative dimension of curators coming to sessions, bringing objects with them and giving presentations on their diverse specialisms. Others preferred the trips and outdoor activities or getting involved in the creative activities (textiles and sculpture appeared most popular). A few of the participants also had hoped to learn more arts skills on the course. For most participants, the regular format of the sessions – mindfulness exercise, curatorial presentation, creative activity, sharing session - was to their liking. The 'mindfulness' exercise was met with approval by the majority of the group. Although they were unfamiliar with the techniques, and one member said she was a bit 'embarrassed' initially, they were described as relaxing and helpful. Only one group member said that she

didn't like the mindfulness and sharing exercises, but found she could sit through them and not participate.

The project manager and lead artist had a distinctive approach to artwork - there was to be no exhibiting of or focus on arts outputs as such, although many artworks were created during the project. The lead artist described the project as a "creative expression process" and emphasised to the participants that there was no expectation of producing fine art. Participants were able to take their creations home and complete them, or experiment with different art forms without the necessity of finishing any pieces.

One participant emphasised the freedom she was given in the project to experiment as key to her engagement in the project:

*It was an opportunity to play. I'm a person who didn't play much when I was a child, so having [the artist and project manager] here it made it a safe space. I find that if I can play it frees me, somehow it made me lose my inhibitions. For me it's been a wonderful opportunity and it's been through the creative activity.*

Another participant thought that working on something that was going to be displayed would have been "too much pressure", and another participant added that she was "scared of getting things wrong".

The majority maintained their commitment to the course over the 20 weeks and in the final session some sorrow was expressed that it had come to an end. However, at the time of writing the group are looking to connect with further projects in the museum including textile sessions and volunteering. Additionally, one participant has joined an arts and craft group at her local library.

## **Commentary**

Opting for one major project was a different approach to the other museums. This arguably allowed for a richer, more extended experience of the museum from the participants, but at the expense of a wider range of target groups. Such in-depth work is demanding in terms of staff time and museum resources. However, for vulnerable groups with complex problems like this one, it may well be the most realistic and helpful approach.

This was not the only project to take an informally 'therapeutic' stance. It shared similar overt aims to the Start in Manchester projects at Manchester Museum and Manchester Art Gallery (see p.37 and p.49) to improve wellbeing and mental health and help participants prepare for mainstream activities. However, the therapeutic approach at Bolton appeared quite different. It had a more explicit focus on individual wellbeing, and gave far greater space for sensitive personal material to find expression during the sessions. This permeated the creative activities as well as the 'mindfulness' and 'sharing' exercises at the beginning and end of each week. The project trod a delicate line between maintaining a structured 20-week programme and allowing aspects of the project to develop organically to respond to the participants' individual needs and interests.

Due to the therapeutic focus and the mental health needs of the group, the project manager and lead artist remained in contact with the partner organisation from which the group was referred. Generally the participant group seemed to understand the therapeutic aspects of the project, but it appeared that some needed and benefitted from this aspect easily and others

required more support to stay on the course. A key learning point was that for groups with similar needs it is essential to have a volunteer from the partner organisation present to assist with the sessions should any problems arise. Although this was planned from the beginning, the attendance of the volunteer was low. On more than one occasion the staff found themselves without the volunteer and stretched to give attention to a participant who needed it while they kept the group activities going.

The lack of focus on arts outputs from the project was unusual for the *Who Cares?* programme. In privileging emergent group processes the lead artist had a rationale which was endorsed by participants. However, to potential future funders, the idea of an arts project with no formal arts output may be difficult to accept. The assumption that public displays of artwork are beneficial for all participants is worth interrogating. Bolton Museum's approach allowed the participants to 'fail' at artworks in a risk-free context. This may be a useful approach for participants who are extremely anxious or so ill that producing artwork of 'quality' is daunting. For members of this group it resulted in some deep personal reflection that may have been unachievable if the work had been destined for exhibition. This is not to say that the museum was peripheral to the project. On the contrary, during the 20 weeks the collections were explored in detail and extensive use was made of curatorial expertise.

## **The Manchester Museum: museum objects and intimate attachments**

Manchester Museum's strategy involved an active process of engaging with participants and forging new partnerships with a local community health centre and an arts and mental health organisation to target participants with mental health issues. A training programme was run for museum volunteers based on wellbeing and mindfulness. Participants in the projects were invited in to the museum to take part in creative activities and to handle and experience museum objects.

### *Health Rocks!*

*Health Rocks!* resulted from a new collaboration with Start in Manchester<sup>2</sup> who designed and ran the project at Manchester Museum. Manchester Museum were aware of Start's work with people with mental health problems and had observed their work with Manchester Art Gallery. In devising *Health Rocks!* Start aligned their aims and objectives with those of the *Who Cares?* project: to focus on the health and wellbeing of the participants and to engage them with the museum. The project ran over 12 weeks, initially with a group of 12 participants. Half were from Start and half were recruited by the museum. Mixing participants from different organisations is a practice that Start also employed on the 'Say it With...' project (see p.49). The project aims were to develop a mindfulness trail and to use the museum's collections as a starting point for wellbeing and creativity. They used WEMWBS<sup>3</sup> questionnaires at the beginning and end point of the project to monitor any improvements in wellbeing scoring.

Start staff worked as a team on the project, with artists and an occupational therapist being present at various points in the sessions. The group met once a week and began with a brief mindfulness session. They were then generally shown a specific aspect of the museum collection and invited to take part in a creative activity in a function room in the museum. These activities included making paper, textiles, drawing, animating and writing. For example, one session involved a talk on meteors from a curator followed by a handling session with fragments of meteor, and a question and answer session with the curator. There then followed a sound exercise, in which participants were encouraged to listen to various ambient sounds and white noise and draw accompanying images (some drew abstract images, others attempted to draw the source of the noise).

The images were further manipulated by tearing different drawings and combining them - a cut and paste effect - and then the resulting images were embroidered with a wide variety of thread of different colours, thickness and texture. The pieces were unfinished at the end of the session, but were completed as homework.

The project resulted in a leaflet being produced by Manchester Museum detailing the wellbeing trail. This leaflet was distributed in the museum to encourage members of the public to take part. In addition, a display case in a prominent part of the museum was used to

---

<sup>2</sup> An arts and mental health organisation that is part of NHS Manchester Mental Health and Social Care Trust that develops coping skills and self-care strategies through creative activities -

<sup>3</sup> Warwick Edinburgh Mental Health Wellbeing Scale (NHS Health Scotland, University of Warwick and University of Edinburgh, 2006)



exhibit ‘starbooks’ produced during the sessions. The books were collaborative - they were created by the artists but contained a variety of creative pieces made by the participants.

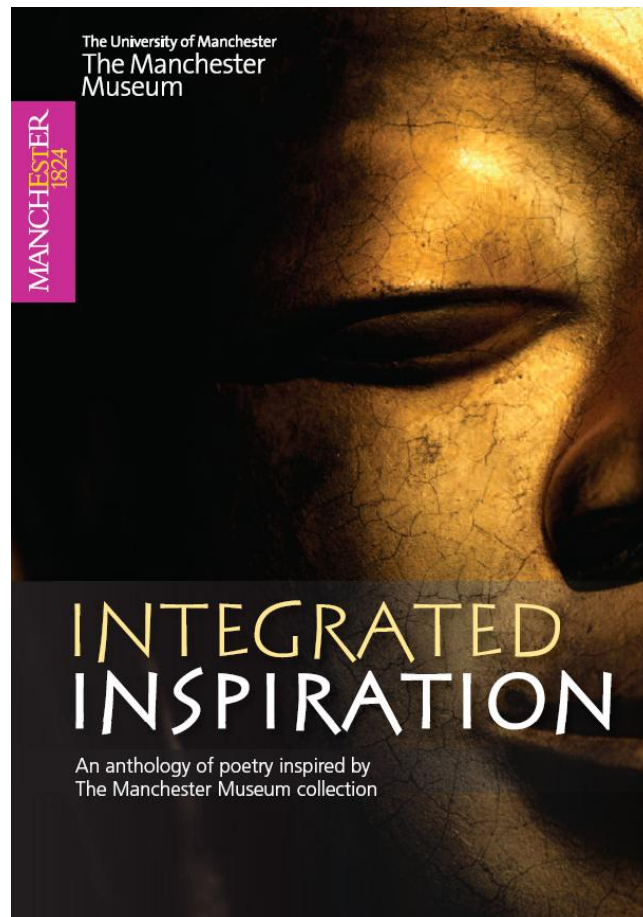


The Health Rocks! display at Manchester Museum, containing starbooks and the rock and crystal pieces that inspired the group.

## Creative Culture Course

This Manchester Museum project was a creative writing course with participants who were either already volunteering at the museum or recruited through local community and job centres (see Case Study p.39). It built on prior projects the project manager had run with members of the local community, *In Touch* and *Collective Conversations*. The group was diverse, including participants with physical and mental health problems, drug addiction, depression and long-term unemployment.

Chanje Kunda, the artist who worked with the Foundations group at Harris Museum (see p.26) led this project. The project resulted in a collection of poetry written in both group and individual contexts being selected by the lead artist (on the basis of quality) and published in a book titled *Integrated Inspiration*. The participants were encouraged to perform their completed poems. This was done initially to the group, then as a piece to camera which was recorded in Manchester Museum’s video suite and edited into a video souvenir of the project.



The front cover of the poetry booklet collecting work produced on the Creative Culture Course

Several months after the project had finished, participants were invited to perform their poetry to a group of 100+ members of the public at a celebration event for Manchester Museum's *Who Cares?* Projects. Displays were also made for the Manchester Royal Infirmary by *Lime*.<sup>4</sup>

#### Case Study *Creative Culture Course*

This session occurred half way through the course. The group comprised half a dozen members, which gave it a more intimate feel than some of the other projects. There was an obvious rapport between members of the group. The session comprised a few different activities. In the first third of the session, the participants were taken down to the basement to look at vases that were being conserved. The restoration team gave a brief talk about the objects and fielded questions from the group. Many of the vases were in pieces and were passed around in boxes rather than handled. The group were inquisitive about the objects asking questions about the process of restoration and where the objects were discovered.

After this week's activity, the group returned to the meeting room and immediately began constructing a poem around what had just been experienced. Chanje used similar methods to those she used with the *Foundations* group at the Harris Museum (see. p.26) and those employed by John Killick in the Tullie House *Poetry Project* (see p.20). She encouraged the group to talk freely about their experience and write snatches of what was discussed on a

<sup>4</sup> An arts charity operating within Central Manchester University Hospitals NHS Foundation Trust.

flipchart. This was then moulded into a poem by the group by working out which lines to expand on, which to disregard and what order to structure them in.

#### Excavation

Imagination run wild, images on a Kaleidoscope  
Each object tells a story, hidden treasure  
Repeated patterns and processes, stolen symbols  
Can they find the missing pieces?  
Empowering identity, fix the Pyramids  
If you dig inside yourself, you will find your soul

The poem blended reflections on the objects the group had just observed with a deeper level of personal reflection. In the discussion which formed the poem, the group made metaphoric connections between putting together broken pots and an individual putting their life back together; similarly with digging into the past, finding what is buried and what needs to be uncovered from personal histories. The brevity of the poem was in part determined by the schedule of the day – a numismatist<sup>5</sup> arrived to give a talk in the second half of the session. Chanje used the time limit to her advantage, to illustrate that poems do not have to be of a certain length or form. Even in these brief lines, something of the intimate attachment the group was encouraged to develop with the objects can be seen.

The numismatist gave a presentation that was more formal than the one given earlier by the restorers. He delivered information in a friendly but didactic style. The highlight of this session for the group was passing the coins around to allow the group to touch the objects. This thrilled some of the members of the group, to the extent that some had difficulty in abiding by the rule of only handling the coins on the edges. It was an activity from which the group clearly derived a lot of pleasure, though there was no more time in the session for Chanje to channel the group's thoughts into another poem.

### **Responses from participants and staff involved**

*Health Rocks!* took a few initial sessions to gel as a project whilst the new museum and arts and health organisation partners attempted to understand each others ways of working. The Occupational Therapist from Start described the mindfulness session as helpful. However, there were some initial issues with some participants, mainly recruited by the museum as volunteers - not being punctual and disrupting the mindfulness exercise at the beginning of the session. The importance of the mindfulness exercise was emphasised to the group by the Start team and after a few weeks this was resolved.

As is standard practice for Start, the participants were requested to complete weekly reflective diaries about their experience on the project. Although the qualitative detail is variable, the diaries are useful in terms of identifying particular issues that affected the participants. Not having enough time was often cited as a problem and the Start team explained that it was more time consuming to move around the museum than anticipated.

---

<sup>5</sup> Collector/curator of coins



Start's Lead Artist said that as an organisation they always “*help people to make artworks to a professional standard*” and that this was crucial to the success of a mental health project:

*Quality is vital. If you work in Mental Health these people are vulnerable to the worst stigmas. Unless it's beyond reproach, people just are going to say “oh, it's quite good...”*

The *Health Rocks!* display was unveiled at a *Who Cares?* event at the Manchester Museum in November 2010. The reflective diaries from the participants showed a mixture of excitement, anticipation, apprehension and anxiety about presenting their work to the public. Positive feedback was given to Start artists from participants who attended the event:

*Everybody commented – everyone was really pleased with the whole display and the leaflet. Generally feedback was good (Start Occupational Therapist).*

*It's a big thing to have your work displayed in public – it's very confidence boosting. It's a huge surprise to people how they feel when their work is exhibited. (Start Artist)*

Start's Occupational Therapist thought that beyond the exhibition, the project had had a beneficial effect on reintroducing the museum as a space that can be used by the participants:

*A lot of people said they hadn't been in the museum since they were children and it's given them another choice now – they can go if they want to.*

The *Creative Culture Course* participants were, to an extent, familiar with museums from childhood experiences, but for a variety of different health-related issues, most had become disconnected with the habit or ritual of visiting museums. One even cited that having children had prevented him from using museums fully because when he brought the children his attention needed to be focused on them rather than the collections.

The group appeared grateful to be able to see parts of the museum that are restricted and hidden away from the general public. This was one of the most cited reasons for enjoying the project:

*It's been really special, to be able to look behind the scenes, you know it's been quite a privilege, it's never been done before. (Female)*

*What we've been doing on the course, going down to the basement and seeing what stuff is being looked after, who's looking after stuff, you don't normally see that when you go into a museum. (Male)*

The fondness for this activity appeared to be a combination of enjoying the privilege of enjoying parts of the museum that are ‘exclusive’ and the interest and excitement generated by seeing a “different world of hidden rooms underground” (Female participant).

Although in the case study, this activity was less successful in terms of producing an art output, it is one of the aspects of the course that had a lasting impression. One male participant said:

*When they bring things in here you get a chance to get close to the objects and you can get to handle them and look at them. We weren't meant to handle the money, but we were able to handle the coins, which was amazing.*

The session appeared thematically in poems in the *Integrated Inspiration* booklet, as did other museum objects that the group felt this intimate attachment to. The book featured a mixture of group and individual poems. One participant explained how she was initially concerned about group activities due to her levels of anxiety:

*I didn't see how a group poem would work, but it was really useful as you were working together and giving each other the confidence to carry on. You weren't on your own.*

Although the group activity was confidence building and helped bond the group, it is in the individual poems that the greater level of attachment to museum objects is revealed. For individual poems, the artist encouraged the participants to choose objects from the collections that they could relate to. This resulted in a series of poems from the perspective of the objects.

The group initially performed the poems to each other, then to camera. All group members participated in this activity, although it was clearly more anxiety provoking for some. The group all wanted a copy of the video once they had seen it.

Finally, some members of the group performed their poems from the book at the well-attended public event to celebrate the *Who Cares?* projects. One such participant who was a volunteer at the museum visibly grew in confidence as the project progressed. Her performance at the event was even more accomplished than her direct-to-camera recital of the same piece several months earlier. She has since enrolled on an English Literature course at a local college and attributes this to taking part in the *Creative Culture Course* project. She hopes that the *Integrated Inspiration* book will “empower and encourage people who don't normally visit museums”.

The participants' relationship with the artist over the project's duration fed in to the intimate nature of the poetry created. Not only was she always “positive” and “approachable”, but she had a reciprocal style which encouraged the participants to develop an attachment to her, the other group members and the museum objects.

*We all wrote something that was personal to us and [the artist], she gave us a bit of insight into her life and that was really interesting 'cos that gave us the confidence to tell our side of the story...that was really inspiring. (Male)*

One female participant also spoke of the “special connection” she felt to Manchester Museum as a result of taking part in the project.

## **Commentary**

One of the most distinctive aspects of the Manchester Museum *Who Cares?* projects was the forming of relationships with intimate objects that were not works of art or crafted by humans. In both projects, introspective personal poems were composed by participants relating to naturally occurring museum objects such as crystals and rocks as well as made objects such as pottery. The lead artist of Start explained that their usual approach to working with art galleries is that participants are encouraged to consider the intent of the artist and their story, in order to develop a personal connection. As they did not have this route with the naturally occurring objects in the museum, Start saw working with the Museum collection as a challenge as it required a reconsideration and modification of approach.

In the *Creative Culture Course*, deep personal reflection and identification with objects as ‘ordinary’ as rocks were made, or rather their properties resonated with personal experience so that a direct unmediated use of the object for personal purposes became possible. This was enabled by creative sessions that rather than adopting a pedagogic or informational approach facilitated a sensory and intuitive relation to the objects thus allowing an attachment to develop.

It is important, however, not to lose sight of the traditional role of the museum as a site where objects of historical significance are held. One of the participants stressed the importance of being able to connect to his own history through knowledge about the objects in the museum collection. Another group member chose in the poetry performance to present a historical and informative rather than personally reflective piece about his chosen object. This may have been due to anxieties about the task, but he was also clearly intrigued by his historical theme. The process was still confidence building as it enabled a participant who had been unemployed for a long time due to health reasons to develop his performance skills. He has since gone back into employment.

## **The Whitworth Art Gallery: working with children from the Manchester Schools Hospital Service**

The Whitworth Art Gallery projects were run in partnership with *Manchester Schools Hospital and Home Teaching Service* (MSHS) which educates and makes provision for children with illness or who are pregnant whilst still in school. The museum has an active engagement strategy and the projects focused on young people using hospital and school services at two facilities in Manchester.

### *Creativity and the Curriculum*

This was a collaborative arts and health project delivered at the Leo Kelly Centre. This is an innovative centre that offers full-time education to primary and secondary pupils who are out of school with long term serious illnesses (including mental health problems). Pupils visited the Gallery and were introduced to exhibitions and artworks, and used these as stimuli to explore their own identities.

Where possible, creative activities were tied in with aspects of the GCSE subjects to address key components of the curriculum pupils were studying. Students worked with a number of artists and work produced by the students, such as mask-making, sculpture and ceramics was submitted as part of their GCSE and Key Stage 3 coursework.

### *Arts and Health Mentoring Scheme*

Volunteer undergraduates from Manchester's universities were trained in mentoring by ReachOut! (a mentoring charity) and then made weekly visits to children on the renal, neuro-rehabilitation and oncology wards and the residential psychiatric unit. Children were engaged in creative activities and used the Gallery's handling resources. The idea was that children are able, even if only for a short while, to forget about the medical interventions they may be experiencing.

### *Healing the Hospital Environment*

This project aimed to transform the physical environment of Galaxy House, the residential psychiatric unit at Royal Manchester Children's Hospital, into a welcoming space. Galaxy House is a secure facility for children with intensive care needs (they may be diagnosed with a range of severe conditions including eating disorders, psychosis, severe epilepsy or cognitive impairment, autistic spectrum disorders and some are potentially on suicide watch). Galaxy House houses no more than 10 children at any one time. Through consultation and collaboration, a 16 week programme of artist-led workshops and mentoring activities enabled artists to work with the children, their families and staff at Galaxy House. The young people also visited the Gallery.

They took part in creative activities, making art, environmental pieces and creative writing. These art works have been used to enhance the unit, which formerly had an ascetic

monochrome and rather clinical appearance, by adding a riot of colour and visual interest. Artwork by the residents and resident artist is displayed along with poetry.

One of the components of *Healing the Hospital Environment* was *Art, Creativity and Surroundings*. The Gallery commissioned an artist in residence, Lucy Burscough (see Case Study below), to work within the unit for twice weekly sessions. Responding to and inspired by the Whitworth's collections, she produced two murals in the children's living and games rooms and a series of images of the hands of the young people. As she was the artist in residence, the participants were able to observe and interact with her during the process. A visit by the group to the Gallery for further inspiration was also organised by the project manager.

The Gallery ended the project with a three month *Who Cares?* exhibition, in which Lucy's work was exhibited alongside portraits from the Whitworth's collection. A unique aspect of this exhibition is that it features a therapeutic space within the Gallery inspired by a variety of sources, including Snoezelen<sup>6</sup> rooms. This space is intended to provide a stimulus for curiosity and exploration, and as a space for reflection and meditation. The space was open to the public for two days a week and for the rest of the time it was reserved for bookings. Service providers dealing with mental health issues were welcomed to use the space.

#### Case Study – Art, Creativity and Surroundings

Lucy Burscough, the artist in residence for Galaxy House, did a photoshoot of the children in the seminar room at Galaxy House and the Leo Kelly Centre for the *Art, Creativity and Surroundings* project. She contacted the children and their parents and opened up a dialogue prior to the photoshoot. The strapline for the project was '*if you only see the illness, you miss the person*'. In the photoshoot, the artist asked the participants to cover certain areas of the face both to maintain their anonymity and to create interesting images. It was also a play on the strapline. From these photos, the artist produced photo-realistic paintings for display in the Whitworth Art Gallery.

The project manager stated that although they generally use a hands-on approach with the young people, the level of ability required to attempt the photo-realistic artwork was high, hence the focus was on modelling for the artist and observing her working.

The artist felt that it was sometimes quite difficult to engage the participants over a long period. It was crucial for the project manager to liaise with her concerning the specific needs of individuals in the group. On a couple of occasions, one of the young people with multiple behavioural problems threatened violence, but this was managed through communicating with the project manager and key staff at Galaxy House. The artist was given access to information concerning the diagnosis of the various conditions of the young people and what behaviours to expect. She remarked that on a personal level, the project stretched her understanding of such conditions, and challenged her to find new approaches to working with a group that could sometimes be difficult, especially in retaining focus on the task at hand. She believed that, as she didn't have a medical role, she was seen in a different light to

---

<sup>6</sup> A room that allows the delivery of multi-sensory stimuli which has been used for those with autism and disabilities. They have been used as a setting in which therapy sessions and small group work can occur, especially with children.

clinicians and this resulted in several moments of connection one-to-one when engaged in creative activities. In particular, a session with a quiet boy who in the latter stages of the project was able to open up to the artist in residence and to talk about his love for art and how he creates artworks at home.



One of the artworks from the *If you only see the illness, you miss the person* exhibition, using a participant as a model for a photo-realistic painting.

### **Responses from participants and staff involved**

Whitworth Art Gallery's partnership working with Manchester Schools Hospital and Home Teaching Service is argued to be key to the projects by both partners. Firstly, it enabled the project to gain access to a 'hard to reach' group and the professionals and carers involved with them:

*We ran all the projects through the MSHS and that's been one of the successes. From the offset it's clear that they've been very positive and embraced what we've been doing. The partnership between the Whitworth and the NHS would have been a lot more difficult without MSHS. I don't think we would've been anywhere near as successful... It's easier for us to do*

*the things that we want to do. Without them I think it would've taken years. (Lucy Burscough, Galaxy House Artist in Residence).*

The ability to gain access to sites such as Galaxy House was attributed to MSHS' experience of working with the NHS, which has resulted in an "atmosphere of trust".

The Head of MSHS has wholly embraced working with the Whitworth Art Gallery, which she described as a "privilege". She also felt that considering the Gallery's proximity to both MSHS sites, collaborative working was contributing towards community cohesion. The Leo Kelly Centre had worked with the Whitworth previously, but the *Who Cares?* project manager approached MSHS at an ideal time as they were restructuring at the Leo Kelly Centre, combining several existing subjects at the school to form a creative learning faculty, from which *Creativity in the Curriculum* was coordinated. The creative activities were also recognised by an Ofsted Lead Inspector as contributing to pupils' "social, moral, spiritual and cultural understanding". Students were described by the Head of MSHS as "really engaged" in activities such as mask making, especially the activity of using their own faces to mould the masks. One of the participants explained what was so enjoyable about this activity:

*Making the masks with the artists felt constructive and there was more freedom working with the artists, because it was so much fun you didn't realise you were learning.*

The Head also described how the creative writer Chanje Kunda elicited comments and phrases from students from who are usually very reluctant to speak and engage in lessons. Chanje worked with children from the Leo Kelly Centre and Galaxy House and found that the latter was more difficult as the children had more challenging behaviours, but was able to be creative with both.

In the *Healing the Hospital Environment* project, the artist in residence observed a sense of ownership from the young people who observed her working. The children subsequently became proactive about decorating the ward themselves (there are now 40 pieces of artwork on display in the ward). Staff remarked that one participant only began doing craftwork after the visit to the Gallery and the artist in residence felt that the visit 'opened up' her creative potential. Lucy Burscough spoke of her desire to change staff practices by encouraging them to incorporate creative activity and was pleased that staff at the Leo Kelly centre had said how positively the project had affected them.

Staff used the *Art, Creativity and Surroundings* project to work on identity, self-esteem and self-worth, which enabled both children and staff to see a different side of the children. The project manager concluded that it would be good to have a permanent resident artist who would also be able to work with team-building skills.

## **Commentary**

As the Whitworth Art Gallery was the only site to concentrate exclusively on children, the projects it ran raised their own distinctive set of issues. Firstly, working with a school-age group meant that it was important to recognise the project work in the form of accreditation for the participants, and define its place in the curriculum. In some senses, the group was more time-pressured than many of the others targeted in *Who Cares?* Recognising the work

in the form of GSCE accreditation makes the projects easier to integrate for schools that may work with the Whitworth in future.

The partnership that has been formed with the MSHS is crucial to the sustainability of this type of project work. MSHS is clearly a mediating organisation between two types of organisations - arts and health - that don't always speak the same language. Their role in straddling this divide has clearly been effective in this project and enabled a range of creative activities to be run with groups who arguably have the most complex needs of any of the *Who Cares?* projects.

A significant aspect of Whitworth Art Gallery's practice is that there is management support from the current Director – the project manager's post as Arts and Health co-ordinator was possibly one of the first in the museum sector and the appointment was made several years ago. This appointment has focused on bringing people into the Gallery. The project manager's role is to push this approach and endeavour to embed it in the organisation. She intends to use Galaxy House as a site for training and support for visual artists and volunteer mentors for future project working.

The project manager has worked to develop a close partnership with the Leo Kelly Centre and Galaxy House. The artist in residence was supported from many angles within the organisations. In Galaxy House, for example, she received support from the lead psychiatric nurse, the senior consultant psychiatrist and the associate director of service improvement, help which was described by the project manager as 'instrumental' to the project's success.



## Manchester Art Gallery: working with mental health partnerships

Manchester Art Gallery ran a series of partnership projects working predominantly with local mental health sector organisations. The target participant groups were adults and young people with mental health problems. Their emphasis was on giving people high quality experiences of engaging with collections and historic buildings and opportunities for creativity. The means of achieving this was by concentrating on building partnerships with health staff where strategic and professional objectives were aligned with the objectives of *Who Cares?*

### Project Descriptions

#### *Say it With...*

This project was run with participants referred from Start in Manchester (see p.37 for more information), and participants from Out In The City, a Lesbian, Gay, Bisexual and Transgender group for the over 50s. The participants were referred to as ‘students’ rather than ‘service users’ in an attempt to reduce stigma. It aimed to engage students from Start who had experienced mental health problems in art appreciation and creative activities within Manchester Art Gallery over a twelve week course. The majority of the project sessions were held in the Gallery, but a few of the sessions were held at Manchester Museum<sup>7</sup> and the Start building. This had the dual purpose of enabling the group to use the facilities and equipment for ceramic work at Start, and also enabling the Out in the City Group to visit the premises.

Sessions were run with artists and curators. Participants spoke with curators and viewed exhibitions of Dutch still life flower paintings, ceramic tiles and botanical specimens as inspiration for their own art works. Creative activities were varied and included: mark making, drawing, creative writing, paper mosaic, collography<sup>8</sup> and ceramics. The focus of the project was the symbolism of flowers in art and the medicinal properties of plants.

It was important to Start that the students who had anxieties about social settings could experience activities outside of their Start’s facilities as they are attempting to offer wider opportunities in community-based settings in preparation for lives post-healthcare. Part of this experience included working in a mixed group. In total, there were 12 participants in *Say it With...* (five from Start and seven from *Out in the City*).

There were no pre-determined arts outputs from the project and it was left to the students to determine what they wished to do with their artwork. A group decision was made to display their work in the Gallery – this resulted in an exhibition which ran in 2010 (see Case Study, p.51).

---

<sup>7</sup> In addition to getting inspiration from the Whitworth Art Gallery, visits were also organised to see exhibitions in the neighbouring museum

<sup>8</sup> Collography is a printmaking process in which materials are applied to a rigid substrate (such as cardboard).

### *Capture It*

A psychiatrist working for Wigan Child and Adolescent Mental Health Services (CAHMS) took part in Manchester Art Gallery's wellbeing trail at a symposium organised by the Gallery. The wellbeing trail aims to encourage reflection on wellbeing and is inspired by six pieces of artwork from the Gallery's permanent collection. The public is encouraged to view and reflect on pieces selected by the group. The trail was developed by a group of Start students and the *Who Cares?* project manager during a previous project, and was also an inspiration for Manchester Museum to develop their own. After experiencing this trail, the psychiatrist and project manager organised a project for young people between 12 and 17 years old who are attending therapy at Wigan CAMHS for self-harming behaviour or who have eating disorders.

The project entailed monthly visits to Whitworth Art Gallery. The project was long-running compared to many of the *Who Cares?* projects (one year), but as the sessions were infrequent. The broad aims were to build confidence and self-esteem through developing emotional literacy and coping strategies.

The participants came in a small group (on average, five members) with two psychiatrists. At the Gallery they examined and discussed artworks chosen in accordance with particular themes. The themes related to those used in the group therapy sessions that the young people attended, such as relationships, identity or bullying. Different sessions focused on different collections with topics such as portraits and identity, use of colour and mood. The project used the Gallery artworks to open up a space in which young people could explore these themes. The young people also worked with freelance artists to explore art materials and techniques and learn about the creative process.

The most prominent arts output of the project was a comic strip produced after the participants worked in the Gallery with a comic book artist for a full day. The young people were given the task of choosing one art work, as a group, from the historic collections. They discussed the artwork and the comic book artist transcribed the discussion. Based on the transcriptions, the artist then created a comic strip that is now on display at the Gallery, in front of the painting that inspired it. He also taught the young people techniques for drawing comics and participants drew themselves and other characters.

### *Christie Hospital Handling Sessions*

The project manager worked with a freelance artist and a volunteer at Christie Hospital on the Young Person's Oncology Ward. This is a seven bed ward, and the patients are generally acutely ill. The team brought objects from the *Mary Greg Collection* to the ward. This collection contains more than a thousand objects of domestic and personal use that were collected by one woman and donated to the Gallery in the early 20<sup>th</sup> Century.

Young people on the ward and their families were invited to handle and discuss objects from the collection. The objects are extremely varied and range from ornaments to implements. The artist encouraged individuals to 'curate' their own collection by selecting objects that resonated with them for an imaginary collection. Participants were encouraged to handle anything that caught their attention and to discuss it imaginatively. As the objects are not coupled with any contextual information, part of the experience of handling the objects is as a stimulus to imagination. They also enabled more personal links to be made – for example, in

one session a young woman (a former patient who saw the project promoted on the ward's Facebook page) chose three objects for discussion: a doll's house, a child's toy and an hourglass. These symbols of childhood and the passing of time led to an in-depth discussion on the concept of time.

Due to the nature of the participant group, the team worked with small numbers of young people and family members. Also, it was originally suggested that some arts outputs from the project might be displayed on the ward, but when the project was up and running it became obvious at a very early stage that this would be difficult. Potential participants tended to have treatment and medication at different times and were often too tired, medicated or unwell to participate, which meant that the artist and project manager could not arrange group sessions to create artwork.

The discussions provoked by the objects enabled the young people and their families to be mindful of the objects they were handling and – at least temporarily – gain some respite from a stressful situation. As in the case of the hourglass and the toys, they offered the possibility of using objects to express or enact personal predicaments. This use of objects will be discussed for fully in Part 5.

#### Case Study - *Say it with...*

Diane was a participant who was referred to Start by the Occupational Therapist from the in-patient psychiatric ward where she had been hospitalised several months earlier. She had already been involved in a Start project run collaboratively with Manchester Art Gallery and was approached by Annie Tortora-Cailey (a ceramics artist from Start) and asked if she wished to take part in *Say it With...* At the time, she was quite unwell and when given a brief of the project was anxious as her social confidence was low.

In the first session, the Occupational Therapist from Start did a mindfulness exercise with the group. They were asked to choose an object and focus on it for a while with concentrated attention. This task was difficult for Diane and for some other group members. Diane only knew a few members from the Start cohort prior to the first session. The Out In The City group members had previously worked on a project with some of the Start students, and were very sociable and outgoing. Diane initially felt quite reserved, but says that by the end of the last session she was more socially confident with the group. There was no discussion of mental health issues or sexuality during the sessions unless somebody wanted to share something informally. Diane sensed in the group a shared understanding and experience of stigma and discrimination whether this related to sexual orientation or mental ill health.

Diane found some art practices more enjoyable than others, and some more difficult than others. For one piece, she drew an image of a daffodil and then gave it layers of texture using different materials. The significance of the daffodil could have been partly to do with the project running in the spring, but Diane reflected on another potential relevance:

*Perhaps it somehow reflected the start of my recovery, I started feeling better at around this time - I don't think it was a conscious decision to draw it.*

In creative writing sessions, the participants were encouraged to develop a poem about the flower images they had created. Diane found this task constraining as they were asked to fit the poem into a particular form and as English was her second language this task proved difficult. She noted that some people broke the poetry rules. However, she didn't find the task of writing a poem particularly anxiety provoking and she was able to complete it with

Annie's help. When constructing the poem, she wasn't fully aware that her flower image and poem was going to be on display at the Gallery.



Diane's artwork which was displayed at Manchester Art Gallery

Diane found seeing her artwork exhibited “rewarding”, but also was proud that she featured in the promotional photograph for the exhibition, working on her piece alongside another participant. This helped her to feel a sense of achievement. She was also praised by other people on her artwork, so that it felt valuable and meaningful. She thought the whole process had played an important part in her recovery:

*The project happened in parallel to me starting to get better. I suppose you could say I started to get better because of going to Start. It certainly did something to my social confidence. I had to be with a group of people that were outside of the cosy atmosphere of Start, these were ‘normal’ people and I realised I had the confidence to work with these people. I looked forward to going to the project, because of the people who were there – sociable, funny and accepting people – as at the time I didn't have any other social outlets. It was a social experience as well as an artistic one.*

Less than a year after taking part in the project, and whilst remaining a Start student, Diane went back into employment, and, post-Start is hoping to join one of the arts activities that the *Out In The City* group run. Despite not fitting their sexuality or age criteria, they have welcomed her to join their arts projects as a result of their interactions on *Say it With...*

## Responses from participants and staff involved

The marrying of two groups for *Say it With...* was judged a success by those who worked on the project and by the students themselves in feedback. The project manager described a “blossoming” of members of the group from both organisations. Everyone was starting at the same place on something new, and meeting people on new ground. Both sets of participants could identify with being the target of discrimination and stigma, and both were able to see the ‘others’ in the group as more than their mental illness or sexuality. The practice of mixing groups carries with it an element of risk. Whilst the group dynamic was described by the project manager as “balanced” and as greatly enhancing the participants’ experience of the project, she recognised that other projects that have tried mixing two groups together have not been so successful. The needs of each group should be considered carefully prior to instigating such a project.

The project manager garnered a great deal of positive feedback. One participant said it had been “one of the highlights of the past few years”. The course was described by participants as “stimulating” with “extraordinary opportunities to experiment.” At the end a participant said that they were “engaging with the world in a different way”

The connection with other group members was also emphasised, participants described feeling “energised” by the group and affirmed that social confidence had been improved by mixing with a group outside Start. This experience had even led one participant to enrol in further study:

*I was really inspired by the fact that this was a really mixed group of people and so I've applied to do a course in mixed media where I will work with a whole range of people away from the protective environment of Start.*

The project manager felt that besides the group bonding together, the Gallery’s partnership with Start was harmonious for another reason:

*The partnership works for practical reasons such as sharing of resources and staff skills, but also, I think there is an ideological marrying of institutional aims and strategic principles around the shared belief that high quality engagement with art, craft and culture can benefit people, specifically that it can contribute to people's overall wellbeing.*

In her view both organisations benefitted from this partnership: the Gallery had reached a desired audience and Start was given access to a mainstream setting for their students. Additionally, the project manager described the clear, focused way in which Start approach projects, and their emphasis on quality arts outputs, as beneficial.

The Start Occupational Therapist who was present in the sessions also believed that the group had received a great deal of benefit from the project in terms of the social interaction and confidence and self-esteem building.

Participant feedback on the *Capture It!* Project was positive. The sessions encouraged reflection amongst members of the group and appeared to affect their self-confidence and sense of achievement about their art works. At the end of a session on portrait and identity, one participant commented “I enjoyed it because I got to explore my identity and feel good about all the things that make me me”. In another session in which participants made water colour paintings, another said “I felt I had achieved something after today’s session. It gave me something to be really proud of and I was able to take away with me”. A small core

group remained engaged throughout the project and the project manager said it was evident that the young people had enjoyed the sessions and several have requested more.

The overall number of participants on the *Christie Hospital Handling Sessions* project was low. It was useful in terms of making connections with hospital staff with a view to running future object handling creative projects on the ward. As the young people were often too ill or heavily medicated to participate, family members visiting the wards took part in the sessions more than was initially anticipated, and appeared to appreciate the activities. The project manager, artist and volunteer agreed that it was important to identify other areas of the hospital that had a greater ‘footfall’ of family and friends of acutely ill patients, for example waiting rooms in the hospital.

### **Commentary**

It seems clear from these projects that partnerships between mental health organisations and galleries can work effectively. This success is in no small part due to the dynamic of the participant group. The relationship between Start and the Gallery, which has developed over a number of years, is clearly beneficial to instigating and planning projects. However, the uncertainty of funding now the *Who Cares?* programme has finished means that the Manchester Art Gallery will have to focus on volunteer training in order to ensure the sustainability of its work in the area of mental health. Manchester Art Gallery is well placed to continue with work with a variety of community-based groups as it has good workshop facilities to cater for creative group work. Alongside this physical space, there is also a mental space within the museum for creativity which needs to be protected if work with mental health organisations’ participants is to continue.

The *Say it With...* project also suggests that working with a clear established agenda can focus a project with vulnerable participants that has the potential to run into difficulties. Mixing participants from different organisations can create stimulating and supportive new groups that are not only capable of producing quality arts outputs, but also benefit each others’ wellbeing. The case study demonstrates that a participant who was taken outside of an established mental health setting was able to mix with others from a different group and has used the activity to forge links with them that will hopefully continue post *Who Cares?*

## PART 4

### Achievements and difficulties of health and wellbeing work for museums

#### Partnership working:

Without a doubt partnership working was, for some museums, one of the richest learning opportunities and, for others, one of the most problematic aspects of this work. One museum decided to build on existing relations with care organisations with which they had already established working relationships and a mutual understanding of what the work was likely to achieve. The main problems for this museum were matters of practical organisation – relatively minor irritations such as how the room for the session should be prepared. The fact that the museum had already established a position of trust and had come to be seen as a valuable resource meant that the artist they recruited to do the work had a relatively free rein. In this case a decision had been made to work with the care staff in order to familiarise themselves with the museum collections and seek to embed creative skills in the workforce. This is a situation to be aimed for, one which allows a fertile exchange of specialist knowledge and gives full recognition to what each partner organisation brings to the programme. Cross-professional working is always delicate and has the potential to generate professional territorialism and defensive boundary maintenance. This is not inevitable but it does require considerable familiarisation between partners with each other's ways of working, patient building of relationships, and appropriate planning and information sharing.

Working with new and untried partners did not always go smoothly. Despite the fact that all projects made some effort to clarify roles and responsibilities at the outset, there were instances in which the initial flush of enthusiasm had not been matched by careful planning and clarification of expectations. One of the results of this was a breakdown in communication between partners during projects with the result that problems were not addressed as they arose, work was negatively affected and numbers of participants diminished.

In another instance where the relationship with the partner organisation had been built over time, deeper conflicts arose which with hindsight emerged from very different but unarticulated models of practice and associated working styles. Staff were dealing with conflict while trying to protect the group sessions as a creative space. This was extremely stressful, not least because the conflict *appeared* as a clash of personalities with all the heightened antagonism that such collisions provoke. Where possible the researchers attempted to talk such instances through with both 'sides'. The research manager was also brought in to mediate on one occasion, resulting in a mutual clarification of roles and goals by the partners.

Conflicts often appeared to be rooted in fundamentally different professional practices, assumptions about how such work might benefit participants, and models of engagement. For example health staff work within medical models and within evaluation and research traditions based on clinical outcomes and publishing conventions. Their focus is therefore often different from non-medical staff conducting psychosocial interventions aimed at

enhancing wellbeing and social interaction. Some projects encountered care staff who had a different (generally more conservative) conception of the risks and rewards of creative activity. Differences of approach between health and museum partners (for example, whether to focus on specific outcomes or emergent processes) came to light in a variety of ways. Some care staff also held concerns about the suitability of the museum environment and the potential intrusiveness of projects into personal and private areas that bring to light sometimes disturbing material. There were differences in orientation with some organisations focused on the creative activity, others on a structured learning approach and still others on a more therapeutic intervention.

A clarification of implicit practice models would generally have been useful at the inception and planning stages, as they would have showed that each partner was in fact pursuing a logic of action that derived from a coherent set of assumptions about the most viable way to conduct the project. The research has identified three dominant orientations: education and learning, therapeutic environment, creativity workshops (See Diversity of style, p.63). Each of these defines its outcomes differently and implies a different practice, and different relationships between staff, participants and the museum. Each can work successfully with participants within its own terms. 'Mixing' the models is also possible for one organisation, but where more than one is concerned there is clearly the potential for clashes and misunderstandings.

In general museum staff were underprepared for quite how difficult cross-professional working might be and many had not appreciated at the outset how vital good partnerships are and how they might enhance practice. Museum staff were both brave and imaginative in attempting to work with groups of whom they had little experience and who other professionals find 'challenging'. Sometimes they were taken aback by the severity of the problems they encountered, including risks for which they were unprepared. Consequently there were times when they felt out of their depth. However, in all cases the commitment and thoughtfulness with which they saw the projects through was exemplary, though it sometimes occurred at some personal cost.

There are important learning points from this aspect of the experience. Building sound partnerships based on mutual professional understanding is indispensable for socially engaged practice with vulnerable groups. Such partnerships have a role not only in ensuring the smooth and collegial running of programmes, but also in addressing the not inconsiderable risks to themselves and others that a few members of the public with severe mental health problems may pose. When faced with difficult situations such as challenging or dangerous behaviour, the first response was often to feel that staff needed to acquire specialist knowledge of mental health issues. In fact, it is not the task of museum staff to become mental health experts. Where sound partnerships are in place each professional group can work to their strengths, depend on one another for subject specific expertise and learn from each other's experience.

Partnerships can run aground and sometimes need to be patiently salvaged. This applies in the professional domain as much as in personal life. What this means is that staff need



reflective supervision and constructive feedback within their own workplace as much to sustain their ability to work with other professionals as to work with members of the public who may provoke anxiety.

### **Emotional Labour, support and supervision**

There are particular constellations of emotion involved with different kinds of work, and emotional responses are implicated even in work that involves minimal direct contact with other people. However, interacting with people who have ‘problems in living’ (Szasz, 1974) of a social or psychological nature, requires resources of patience, attentiveness, empathy and understanding and demands that anxiety be contained and managed. The health and social care and psychotherapeutic professions have evolved models of supervision designed to help professionals deal with the anxiety generated by the work. In the best practice these go far beyond ‘support’ although support is often needed in stressful situations. Although supervision often falls short of the ideal, it is designed to foster self-reflection, critical self-appraisal, and to provide a setting in which the often unconscious anxieties evoked by working with vulnerable people or challenging behaviour can be recognised and worked through. The purpose of this is to enhance self-management within the professional role. Where the practice of ‘clinical’ supervision is well-embedded or becomes part of the culture of the workplace it improves the quality of ‘support’ that workers are able to offer one another as well as helping to install an ‘internal supervisor’ who can be invoked in the day – to-day processes of professional interaction as well as in situations of duress and crisis.

Most of the museum staff in the *Who Cares?* projects were engaging in new and experimental work. During the process they had access to at most one or two colleagues in the workplace, who shared some involvement in the project. In more than one instance a staff member was carrying the project alone, with fairly remote managerial oversight. The *Who Cares?* network meetings offered a valuable opportunity to exchange ideas and experiences, but these only occurred quarterly. Many people affirmed that the self-evaluation design and feedback days were particularly helpful since these offered an in-depth and extended discussion of the particular dilemmas and opportunities of individual projects, and gave staff an opportunity to explore how they felt about them. They therefore fulfilled some of the functions of supervision, but they only occurred twice for each museum in the course of the programme. It seems essential if the intensive demands of this emotional labour are to be fulfilled, that the support and supervision needs of staff are thought through. Although a clinical model of supervision would be an excessive commitment for museums, embedded self-reflective evaluation processes and peer support in the style of a ‘critical friend’, should systematically underpin relational work, especially when this is to occur with vulnerable or challenging groups.

## **Participant Drop-out**

There were some problems with retaining participants in some of the projects and there were a variety of reasons for attrition which clearly affects the integrity of any working group. Some projects were very ambitious in attempting to engage a particular participant group where support and resources were needed beyond the budget of the *Who Cares?* programme. In some cases – for example where participants had moderate to severe mental health problems - there was an under-estimation of quite how challenging the programme would be for participants. Physical health and disability also proved greater obstacles to consistent attendance than had been anticipated.

Both museum staff and care staff were much exercised by the question of whether museums and the associated high levels of education and cultural capital needed to enjoy them, might make them intimidating or uncomfortable for participants for whom they were unfamiliar. Project managers sometimes felt that carers were reluctant to encourage participants to use the premises or that artists were not making the best use of the museum's facilities and collections. The research concluded that although museums may appear intimidating a number of imaginative tactics are available to ease entry to the building and that once this has been achieved the architecture is of far less importance to the participant than the relationships formed with approachable and helpful museum staff.

This raises the question of how best to ensure appropriate recruitment. Some projects took self-referrals and in some instances partner organisations were themselves unclear as to the value of the activities on offer to individuals in their care. There is clearly scope for further learning here and for building cross-sectoral relationships to share experience and information.

## **Process, outputs and authorship**

Whilst some projects, especially those with a more therapeutic orientation, opted to focus entirely on the *process* of the creative activity, others had a clear aim of an arts *output* for high-profile display, usually in the museum. For the latter projects, there was a dilemma between having 'community art' being displayed on-site, respected and having value to the gallery audience, and retaining the sense of authorship and ownership of the participants. In some cases the pressures of producing a quality arts output necessitated a considerable amount of input from artists. In others, project managers felt a degree of discontent with the extent to which they had to modify participants' work to fit into museum standards of presentation. One project manager felt that the arts outputs were too 'glossy'. This issue of the participants' voice being mediated by the museum is a complex one since the projects were so varied in their aims and working style. The therapeutic model explicitly adopted by one museum was premised on relieving participants of any pressure to work towards an outcome. Elsewhere there were anxieties that if products were 'crafted' by artists it would convey the message that participants' efforts were not good enough. However, in other cases the production of a high quality art object was felt to contribute positively to participant self-

esteem. To the extent that the art object is seen to be a ‘co-production’ between the artist and the participant or group the question of authorship is unproblematic and the artistic output signals a productive collaboration. The question of whether or not to aim for a quality artwork also depends on the model of practice adopted: it is perhaps most appropriate in the creative workshop and education and learning models and less so if the focus is on a therapeutic experience.

### **Self-evaluation**

As described above, the self-evaluation and feedback days were well-received. They attempted encourage people to think in terms of process as well as outcome and to design ‘realistic’ evaluations that were congruent with their particular project methodologies and responded to specific problems and needs in the work. Evaluation frameworks should follow a ‘realist’ design. Realistic evaluation is identified not simply by method – a wide range of methods of inquiry are possible, but aims to build an understanding of ‘what works, for who and in what circumstances’ (Pawson and Tilley, 1997). This contrasts with a great deal of evaluation practice which uses a range of rather superficial indicators (such as stereotypical ‘tick-box’ methods and rating scales) in relation to a base-line and predetermined outcomes. The discovery that evaluation could be process-led and emergent as well as measuring outcomes and incorporating standard instruments (such as WEMWBS (2006)), resulted in staff asking themselves how best to design an evaluation from which they could learn and develop their practice. The result was a proliferation of imaginative methods which included photography and film, narrative conversations, focus groups, reflective diaries, and analysis of creative outputs. The purpose of self-evaluation should be to maximise learning from a project rather than simply determining whether outcomes are met and beneficiaries satisfied. It is most effective when incorporated into a project design from the outset and when the time and resources it requires are protected. In the *Who Cares?* programme the evaluation days were held when projects were already underway and when some of them had already run into difficulties. Although they were still valuable in these circumstances, little time was available to undertake detailed analysis of the data collected and hence to maximise the benefits of the evaluation process.

### **Sustainability**

The *Who Cares?* projects have been valuable and in some cases groundbreaking work with members of the public who would have difficulties in accessing museum collections without the support that this kind of targeted project can offer. In addition they set themselves the goal of not only addressing cultural access and inclusion but of enhancing health and wellbeing. Insofar as health is conceived broadly as including psychosocial wellbeing, there is persuasive evidence that museums have something distinctive to offer. However, the *Who Cares?* projects were labour and resource intensive and could not have been otherwise. There is pressing question of the sustainability of this kind of project in a climate which at the

time of writing is determined by funding cuts. Given the richness of the *Who Cares?* programme and the learning experience for museum staff who have stretched themselves and extended into new forms of practice, it would be very regrettable if socially engaged practice with vulnerable groups were to cease.

The research on the programme has concluded that a key element of sustainable practice is for staff in museums to continue to build partnerships with interested agencies in the health and social care sectors, to work towards a common understanding of what the museum can provide and to offer training and practice development to artists and health and care staff in making the collections available with specific groups.

## PART 5

### Discussion – Psychosocial processes of engagement

#### Mass public access and targeted groups

In recent years museums have devoted a great deal of effort to improving accessibility for large numbers of visitors. Regional museums are sometimes seen as iconic local representatives of high culture. This is assertively proclaimed by their architecture, often thought to be intimidating to people unused to what they might offer. Museums have therefore attempted to work within the constraints and opportunities of the buildings themselves, through adapting the display and information systems, mounting special exhibitions and hosting participatory design projects such as co-working with children to create new child-friendly spaces (Renaissance Northwest and Cape UK Create, 2009). Activities which relate to local and regional identities such as Bolton Museum's *Bolton Lives* social history collection, Manchester Art Gallery's Manchester Gallery and Manchester Museum's Collective Conversations attract widespread local interest. Beyond Renaissance North West, Kelvingrove in Glasgow is particularly worthy of mention in having successfully developed a number of strategies to increase public access. These include a programme of introductory sessions to familiarise the public with what the museum can offer and re-conceiving the imposing main hall as a busy civic space with surrounding galleries displaying an eclectic assortment of high impact exhibitions. Information at Kelvingrove is imparted in plain language in a simple rather 'teacherly' style which is highly accessible to children and adults alike. Some see this as patronising and it does not meet with universal approval from the city's cultural sector. However, the museum's family and school friendly atmosphere attracts the public in large numbers, and helps to sustain the museum's historic position as one of the city's key civic amenities. What this demonstrates of relevance to this study is that accessibility has as much to do with the 'museum in the mind' as the 'museum in bricks and mortar': when local people come to feel ownership of such buildings, their function clearly changes from culturally exclusive repository to public resource and they become a source of collective pride rather than inhibition.

In the light of evidence that simply visiting cultural amenities has a positive effect on wellbeing (SDC, 2010) it could be argued on a utilitarian basis that investing in museums that encourage mass public access contributes to the greatest happiness of the greatest number and that this should therefore be prioritised over intensive projects aimed at small groups of vulnerable people. It is one thing for a museum to make itself a 'must see' port of call for school days out and family entertainment, it is quite another to provide a specialised service for visitors with mental health problems, profound disabilities or chronic homelessness. This is an area of work that requires carefully planned, tailored projects and a set of skills in relationship-building and partnership-working (Silverman, 2010) that fall outside of the standard curatorial repertoire, or even that of museum learning and outreach departments. In a period of financial stringency it is likely that dedicating resources to projects that demand

high levels of staffing for few beneficiaries will find little favour. However, the *Who Cares?* projects have offered a valuable exploration of what museums *can* offer to some of the most culturally excluded and vulnerable groups. They provide evidence that museums can work inclusively with people who would not otherwise access collections, and that in doing so they can to some extent ameliorate cultural exclusion and contribute to wellbeing (Newman and McLean, 2005; Carnegie, 2006; Salom, 2008). The question then arises as to whether this is the proper role of museums (Silverman, 2010) and whether they have anything *specific* to offer in relation to wellbeing that could not easily be provided by a visit to a library, a cinema, or come to that, a football match. If they do in fact have a particular contribution to make as *museums* – then we need to know whether the *Who Cares?* projects have provided any evidence as to what a realistic financially and professionally sustainable model of such museum based provision might be.

### **Accessibility, buildings and relationships**

Some *Who Cares?* projects worked off-site in a variety of settings, while others based their activities within the museum buildings themselves. In these latter cases sensitive consideration had been given to initial approaches - especially with groups of young people who were prepared for what they might encounter, shown images of the building in advance, and then enticed to enjoy the three dimensional reality of the museum itself. In some instances the museums seemed unduly reticent in introducing people to the premises and their contents and they planned off site activities, even though the larger aim was to make it easier for people to feel at home within the walls and hence comfortable in making use of the collections independently. One of the most successful projects deferred to an artist who preferred to work with his own tried and tested images of a historical (and therefore ‘museum related’) nature, rather than use something directly from the collections. In another instance museum staff felt unable to challenge the view of care staff who appeared to feel that one visit to the museum with the people they were working with was enough, and once that had been done there was no particular reason to return.

Other projects, however, experienced no particular problem with introducing people to the building and the research has concluded that by far the most important factor affecting participants’ ability to feel at ease within the museum environment has been the relationships established with museum staff and associate artists. The quality of these relationships and the close empathic attention to the creative needs of participants generated imaginative ways of using the collections which responded to the particular situations of the people in the project groups. The sense not only of having needs catered for but of being seen as worthy of such special attention amounted to an experience of recognition in that participants were being valued for their particular characteristics and capacities as well as being members of a general public with rights to cultural access<sup>9</sup>. From here it was a short step for some to feel that the

---

<sup>9</sup> Axel Honneth (1995) identifies three dimensions of recognition: love, rights and solidarity. These are necessary for feelings of self-worth, esteem and social bonds respectively. While love arises from intimacy and

museum was there for them as people whose cultural lives were important, and who were able to partake of a common heritage, rather than being seen as members of a disadvantaged group (O’ Neill, 2002). They were therefore able to make a connection with the museum and feel that they could make use of the collections in personally meaningful ways on their own initiative. In Bolton Museum, for example, after the *Museum Collections and You* project participants felt that they were familiar with the range of collections the museum had on offer and could explore further those that had resonated with them during the project. They also added that they had met staff personally and as a result had the confidence to approach them and ask questions.

Participants in project evaluations often remarked on the sense of feeling ‘special’ and ‘privileged’. ‘Special’ was experienced as being accorded privilege rather than as being in some way demeaned or patronised. This resulted from the sensitive personalised attention provided by staff, the opportunity to creatively express a subjective relation to an object, and the tacit acknowledgement that rights to access were being respected.

### Diversity of style

Detailed planning went into the groupwork for the *Who Cares?* projects, aided by the employment of skilled, experienced artist-facilitators. The case examples already cited in this report illustrate the considerable differences in choice of working style, artistic media, objects used and setting and involvement of partner organisations. Broadly speaking, these differences could be classified as oriented predominantly to education and learning, provision of a therapeutic environment or creativity workshops. These broad categorisations represent a *dominant* preference of the facilitators but in most cases there were elements of all three.

<b>Education and Learning</b>	<b>Therapeutic Environment</b>	<b>Creativity Workshops</b>
Pedagogic approach; clear learning goals and structured input with emphasis on learning how to learn as well as quality of output, time management, consistent attendance and group display of final outputs as evidence of achievement.	Emphasis on nurturing environment; personalised use of materials; attentiveness to process; guided by principle of emergence rather than production; decisions concerning the display of arts outputs left to individuals who create them.	Practical focus on creative activity which is assumed to be in itself a key to wellbeing; translation of museum based experience into art-forms; group process structured around producing art-works for display
Good relationships are key to learning process; authority clearly located in	Relationships of intimacy and trust enable sharing of personal material;	Relationships work by suggestion as facilitator provides stimulus and

---

friendship, self-esteem comes from being accorded one’s rights as members of a community. Solidarity arises from affective bonds within a collectivity in which people recognise each others’ needs and rights and in so doing value each other both for what they hold in common and what makes them different.

facilitator(s) who manages boundaries and keeps the group on task; co-production of outputs which may be further crafted by artists to ensure quality may lead to 'shared' authorship.	distributed authority as stimulus is provided by facilitator but process depends on what individuals bring; individuals have discretion over what to do with outputs.	gathers responses from the group to co-produce outputs; directiveness from facilitator over process is combined with open-endedness in relation to outcome; collective ownership of outputs.
--	---	--

### **Linking self and society: finding cultural forms for personal experience**

At stake in the *Who Cares?* programme is a change in the symbolic function of both the museums as institutions, and their contents. Although the notion of symbolic function seems abstract at first sight it makes sense of what the researchers observed during the projects; what the facilitators seemed to be intuitively aiming at; and what the group work actually produced. For this reason it is worth dwelling on the idea. 'Symbol' is often loosely used to mean a word, or image, or object that stands for something else – often a more complex idea – as, for example, when the shape of a heart signifies romantic love, or the word family signifies a set of kinship relations. Languages, whether they are verbal, visual or performative, are a system of symbols together with conventions for linking them (as in grammar). However, this view of symbols is a simplification. A richer concept of symbol is emphasised in psychoanalytic thinking where it stands for something in the 'external' world which attains its particular power because of the ways in which people are able to make use of that thing emotionally (and to some extent unconsciously) bestowing 'inner world' fantasies and desires upon it. Sacred objects such as relics illustrate this vividly. What to some may be a nondescript piece of crumbling bone or cloth, to others stands for spiritual presence, and arouses ardent religious passion. As has been demonstrated in relation to the Turin shroud, the aura such objects possess can withstand scientific investigation and scepticism, because their special status arises as much from what people endow them with as their own material and historical nature (Dudley, 2010). Similarly, an everyday object such as 'granny's teapot' may be nominated as (nearly) 'sacred' within a family group for whom it has special sentimental and historical value. In this case, the use of the teapot and the rituals surrounding it can powerfully evoke the presence of the grandmother and her own particular way of using the pot and the ways in which this expressed her personal idiom of care for the family.

A participant on the *Collective Culture Course* at Manchester Museum found special significance in an African pot from the collection. He was an immigrant from the Middle East, and his poem about the pot aroused intense personal associations about leaving his homeland. Entitled *Always in my Mind*, it contained the lines

The people leaving their land  
It is like leaving your mother  
It's like leaving your heart



Museums and art galleries – more than any other institutions – are stuffed with objects which are rich in symbolic potential (Annis, 1994). They may be precious and fascinating in their own right but they are also particularly suitable for personal symbolic use (Dudley, 2010; Carnegie, 2006; Kavanagh, 2000). In addition, most museums – and certainly those that feature in this study are public institutions. In themselves they symbolise the fact that culture, which differentiates social groups from one another, is *also* something collectively generated over time and place. Culture is therefore the means by which individuals with very different affiliations can participate in common goods. It is for this reason that ‘cultural exclusion’ generates pernicious inequalities and impacts so negatively on wellbeing (Newman and McLean, 2005).

The important point here is that the objects in the collections and the museums themselves have a dual symbolism. They are available for distinctive personal use while belonging to heritage that is collectively owned. They are thus potentially vital instruments of inclusion, helping to insert people into a common culture (Carnegie, 2006; Department for Culture, Media and Sport, 2000; Museums, Libraries and Archives Council, 2005; Wavell, Baxter, Johnson et al., 2002). This understanding of the symbolic use of museum objects does not necessarily question the usefulness of displays which are designed to appeal to people because they connect to a particular aspect of their current lives (as, for example, in a social history display). However it does question an over-simplified idea of social ‘relevance’ whereby it is assumed that members of the public will only make connections with something that resonates with what is already familiar to them. As the use of museum boxes often demonstrates (a practice much developed in Tullie House Museum for use with older people), it is often surprising why people choose an object and impossible to predict the associations which will link it to their experience (Annis, 1994). For the individual finding a ‘surprise’ connection can only enhance the pleasure in the link. In the *Christie Hospital Handling Sessions* project, a young woman selected a miniature egg timer from dozens of items that were presented to her. This functional item prompted a discussion on the concept of time, including how perceptions of time change as people get older, and how time (to think and to wait) was a preoccupation for her as a patient on the oncology ward. It is immediately clear why time would be of particular relevance to a young woman who might have cause to wonder whether she or her friends from the ward will grow old. However in other instances people made connections with objects in ways which could not have been anticipated, as in the imaginative ‘animation’ of inanimate minerals in Manchester Museum’s *Health Rocks*. Interestingly, in this case the partner organisation had expressed doubts about whether it would be possible for the group to make personal connections to objects which were not human-made.

However important the potential symbolic resonance of the museum and its collections as a whole, it remains difficult for many people to form a personal relation to an institution, particularly one which besides common goods may also symbolise imperial might, post-colonial divisiveness, class privilege, elite arbitration of taste and local structures of power, influence and patronage (Silverman, 2010). It became very clear in this study that the route

to seeing the museum as an accessible and meaningful site of cultural experience was for most people via an object it contained. Relationships with museum staff, or collaborative artists, or specially constituted groups, were for the majority of people most likely to provide the conditions which facilitated personal connections with objects. Access to objects far outweighed access to the building in enabling people to make use of the collections.

In the Harris *Foundations Project* with formerly homeless people (see Case Study p.27) just about everything seemed stacked against sympathetic use of the building. Its neo-classical colonnade symbolised the marriage of cultural universalism and Victorian bourgeois prosperity - built to house precious objects whilst 'worthless' people are consigned to the streets. When the homeless group entered the building members got 'lost' and disappeared in its endless galleries. Those that finally made their way into the poetry writing session found themselves in a small, windowless room used as a class-room. The group was beset by time-restrictions and interrupted by a museum assistant who needed to enforce opening hours. Nevertheless they made a highly specific and idiomatic use of the video exhibition they had seen and together they produced a poem symbolically linking each of its three phases to the particular lived and felt experience of homelessness. Hence it is possible that they showed distaste for an installation based on scavenger urban crows because the habits of the crows too closely mirrored those normally ascribed to the stigmatised vagrant poor; however they were fascinated by the idea of holding to the Meridian Line and so keeping one's bearings in the face of the impediment of other people's homes; also with finding the Northern Lights in the mind's eye when they stubbornly refuse to appear in the sky.

The ability to use the exhibition in this way was enabled by the subsequent poetry session which offered the chance to play creatively with the installations and to make personal associations to them. This was a means of exploring their personal symbolic significance: in other words how they evoked the subjectively felt exclusion and practical obstacles of homelessness, the struggle to keep one's bearings and the need to find the source of beauty within oneself and nature rather than in one's circumstances. However this personal experience was closely linked to a wider cultural significance of homelessness: the social stigma and fear of 'unhoused' minds and bodies who as rough sleepers are only too well acquainted with the skies and their intractability in providing the conditions that we may desire.

The fact that members of the group *did* engage with the exhibition, and with observable vitality, despite the uncomfortable 'collision' of homeless people and sumptuously housed objects, showed an active symbolic linking of selves and culture. Group members then went further and with the help of the performance poet produced a poem which transformed their visual and emotional experience of the exhibition into words. Having an experience and transforming it into something that can be shared activates the vital link between individual and society.

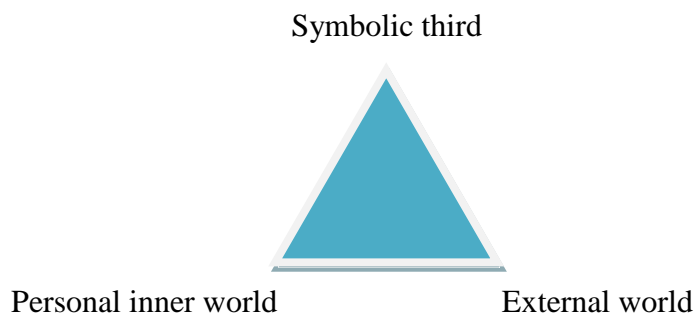
The general point to be made about the *inclusive* power of the symbolic link is that by making a personally distinctive use of an object, I retain my uniqueness and individuality (since nobody else could use it in that particular way) but I bring that individuality into

relation with what the object stands for in the wider cultural field. I therefore begin to dissolve the separation I may feel from the cultural field of which others appear to be a part.

### Aliveness through objects

In some circumstances symbolic use of an object in this way just happens – anyone can get ‘taken’ with an object, perhaps without a clear sense of why they find it so intriguing or attractive. In the case of consumer goods we may even be ‘taken in’<sup>10</sup> by them insofar as their fashionable appeal generates delusions about their value. However museums choose to keep objects because they have been assigned intrinsic value, for what they are deemed to be ‘in themselves’ (Holden, 2004). The *Who Cares?* projects presented objects in such a way as to increase the likelihood of being ‘taken’ by an object of intrinsic value and being able to make psychic use<sup>11</sup> of the object – this is partly because of the special relational conditions in which the group is ‘held’<sup>12</sup>. Partly it is because the objects themselves are special (they have cultural significance and resonance) and are presented to individuals in a ‘privileged’ context. This is not only an educative act – it is an act of *care* – both the objects and the participants are being taken care of by the museum by being brought into relation with each other. When an individual is taken by an object or chooses to attend closely to it, it becomes an object *for* the individual - it becomes available for ‘use’.

This means it attains symbolic significance – it becomes a creative ‘third’ (Froggett, 2006; 2008) – neither solely itself, nor exclusively a part of the individual who is using it.



---

<sup>10</sup> Thanks to Myna Trustram for pointing out this connection.

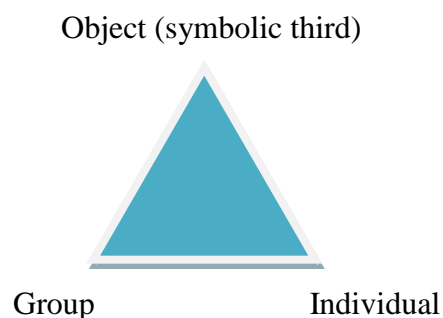
<sup>11</sup> This conceptualisation of personal ‘use’ of an object endowed with special significance owes much Donald Winnicott’s (1971) work on the transitional object whose special status for the baby rests on the fact that it has been subjectively chosen for its particular properties in being able to represent (for the baby) something that objectively exists – in the first instance this is likely to be the teddy, or thumb or blanket that represents the absent mother. It pre-figures symbolic ‘use’ in having been creatively selected and imaginatively endowed for this purpose by the baby.

<sup>12</sup> The idea of the holding environment was elaborated by Winnicott (1965) in an effort to describe the condition for creative development. The first holding environment is provided by the nursing mother who holds the infant in her arms and in her mind. This helps the child to integrate mind and body experience and provides a prototype for future holding environments which enable integration, learning and creative activity.

It contains both something of that individual and something of the world, meaningfully conjoined (Dudley, 2010). It is in this link – the experience of being meaningfully conjoined with a bit of the world that mental wellbeing resides. The fact that the bit of the world in question is not only a cultural or natural object outside the self - but often an object of wonder (Greenblatt, 1991), curiosity or delight can only enhance the pleasure in the link – the sense of discovery is not only the discovery of something new, as is often thought, it is the discovery of a *personal relation* to something new – an enriching expansion of relational possibilities.

What the researchers observed was the ‘liveliness’ of response. It is hard to convey this liveliness in a written report, but ample evidence was furnished by researcher observations and field-notes, also from filmed sessions of people engaged in creative activities, and from the way in which their experience was expressed in artwork of one form or another: the objects are invested with the personal fantasies of individuals (Kavanagh, 2000) which bring them alive for those individuals, and the individuals in turn are enlivened through their personal association with the objects.

Groupwork skills were also vital in the *Who Cares?* projects. Objects which are symbolic thirds provide a point of communication which enables *collaborative* symbolic activity such as writing a poem together as in a creative writer’s technique or singing or telling stories.



This expansive sharing of mental space is highly enjoyable. It leads to new and expanded communicative possibilities, and potentially new bonds with others (observable in group process) (Annis, 1994; Scott, 2006; Newman and McLean, 2004). The fact that this happens more often than not in a small intimate group means that others are enlivened in the same way through the care that is extended both to the objects and the group. Enlivened people are primed to make connections and tend to recognise one another’s unique characteristics as well as what they have in common. The group provides the pathways that foster the connections between its members and objects that are precious and rare because they are endowed with special significance. This was demonstrated in practically every project, in which focus groups conducted at the end of the projects repeatedly included comments from participants that they experienced and enjoyed the projects collectively. Few came into the projects with the specific aim socialising, in fact for many in the initial stages the idea of the

‘group’ was daunting. However, with perseverance, group activities became an important part of the experience. One participant in Manchester Museum spoke of her reluctance to take part in a group poem initially, but related how experiencing this over several weeks developed her own interest and confidence in writing about herself and museum objects. In this and many other instances, the groups offered support to one another.

### **Illusion and reality: the vital link**

The ‘aliveness’ generated by symbolic linking in the projects enabled people to fully express themselves in a language or medium which felt authentic and avoided stereotyping.

The museum based sessions expanded the possibilities for authentic self-expression - and it is worth noting that they did this not by making available many objects but by presenting a few, and allowing an in-depth, absorbed experience of the object. Becoming absorbed by an object means slowing down, becoming psychically ‘part of it’, and having an embodied relation to it. (Froggett, 2006; also see Dudley, 2010; Bagnall, 2003; Salom, 2008). Object handling is very useful here as a route to the emotional experience of ‘being touched’<sup>13</sup> which in turn resonates in the body. This happens whether or not the object can be physically touched<sup>14</sup>. The sensations of intense personal identification that arise from absorption in the object can impart the illusion that the object has become part of the person who beholds it who can then see the world from the object’s ‘point of view’.

In the Manchester Museum’s *Creative Culture Course* sessions for example, a participant imaginatively animated the rocks so that the world appeared from the rock’s perspective:

Being handled is my life  
If I wasn’t picked up by you  
My life would have no purpose

This extract shows a kind of illusion that is profoundly important in the ability to see the world from another perspective and to imagine that it might be different. It unsettles stereotypical thinking – the kind of habitual thinking that has lost a vital link to reality: for example the notion that museums exist for the middle classes who have cultural capital may have the ring of common sense but its taken-for-grantedness can be overturned by experience.

By providing the conditions in which participants could achieve a personally meaningful, sensuous experience of a few carefully chosen objects people were stimulated to represent their experience in the form of poetry, movement, craft, visual art or imaginative discussion. To this end the projects mostly avoided didactic provision of information (although it is worth commenting here that there is a balance to be achieved and many participants expressed appreciation of the learning opportunity provided by getting to know ‘about’ some

---

<sup>13</sup> Thanks to Myna Trustram for making this connection.

<sup>14</sup> See collection of articles edited by Helen Chatterjee (2008) for various perspectives on object handling

of the objects and artworks they saw). The artist-led sessions actively encouraged people to ‘do’ something with what they had encountered and this ‘doing’ often involved a move from a visual/tactile encounter to personal association and verbalisation. Once a personally meaningful relation to the object was achieved a sense of its unknowability was at least partially dispelled especially when the personal experience found expression in a creative form that could be shared.

In Manchester Art Gallery’s *Say it With...* project, for example, the group were encouraged to select an object, and to become absorbed into it (using the techniques learned in the mindfulness exercise). The resulting artworks included visual art representing flowers together with an accompanying poem. One participant said that she felt that her choice of flower symbolised her own recovery from mental illness (see Case Study, p.51).

### **Attachment and Connectivity**

Different forms of relation to objects and people are possible. In a highly networked, digitalised world where acquiring information and relating to others often takes place via the internet and social media, the capacity to make full use of different forms of relating is a vital aspect of cultural inclusion. This is particularly (but by no means exclusively) salient for young people. A useful distinction can be made between ‘attachment’ and ‘connectivity’: attachment involves an internalised relation to an object with which (or whom) one identifies in some degree. A bond is formed both emotionally and cognitively which tends to depend on the intrinsic material properties of the object. Connectivity, on the other hand, multiplies the possibilities of forming relations across time and space. Its paradigm case is not the individual person- to-person or person-to-object relationship, but the network. Although attachment can take place in virtual media, it depends on lived experience of the objects and hence tends to rely on material presence. There are examples of intense human attachments developing interactively in *Second Life*<sup>15</sup>, but for most people attachment begins with sensory awareness of the other’s physical being. So it is with objects, which is why for the present, digitalised museum collections are unlikely to supplant the ‘real’ things. Having said this, digital media offer avenues for sustaining attachment relations as is evident in social media, where people can maintain immediacy in interaction in ways which would not previously have been possible. The connectivity offered by social media is acquiring increasing cultural importance in its own right as the generations who mainly use it value their networks. These networks not only keep them in (virtual) ‘touch’ with one another but reflect the ways in which things link up in the modern globalised world.

For example, in the Whitworth Art Gallery, young people experiencing the gallery for the first time were photographing artworks on their mobile phones. When asked, they responded that they were choosing those they liked and sending them to friends. The digital image rendered the artwork communicable to the peer group. This raises the question of whether for this generation a screen image makes the artwork more available for personal ‘use’ in the

---

<sup>15</sup> An online virtual world in which users interact with each other through on-screen avatars

sense discussed in this chapter. If the role of the museum object is to provide a cultural form for personal experience (see p.69), then it is plausible that on initial encounter at least, it will do so more effectively if ‘translated’ into the media that young people habitually use. This *may* be a first step on the route to familiarisation with the media of paint and canvass. The screen image involves a loss of contact with the sensuous material immediacy of the object (of the kind facilitated by Manchester Museum’s *Creative Culture Course* ) and it does appear that physical materiality – the properties of the object in and of itself – enable attachment (Dudley, 2010). On the other hand connectivity embeds the experience of the object in a communicative process so that it acquires wider communicable significance.

Notwithstanding the importance of connectivity, it is reasonable to suppose that attachment relations of love and care that are so profoundly important for human development and for the capacity to make links with the world, will remain essential to human wellbeing (Museums, Libraries and Archives Council, 2008; Putnam, 2000; Kunitz, 2004; Cattell, 2001; Morrow, 2008). The *Who Cares?* projects largely worked with the possibilities of attachment in that people were offered opportunities to develop an intensely focused relationship to objects which then acquired personal associations and symbolic resonance. The objects in these cases were often felt to be a part of the self and the more they entered a personal imaginative frame, the more they stimulated poetry or other creative work. It seems likely, although we could not be sure without knowing more of their personal histories, that many of the people in these projects had suffered considerable disruption of attachment relations with others, for example through depression or disability. Sometimes attachments to objects feel easier – they don’t feel threatened or flattered or rejected, but they do appear to ‘respond’ by virtue of the imaginative symbolic capacity of the individual who endow them with ‘life’. Enhancing this symbolic capacity and providing the conditions in which it can flourish may be one of the most important tasks of museums today (Annis, 1994).

## **PART 6**

### **Summary Conclusions**

#### **Socially engaged practice for health and wellbeing**

Museums and art galleries can use their collections and facilities and the skills of their staff to engage vulnerable groups of people in ways which contribute to their health and wellbeing. In the *Who Cares?* projects, the work involves specially targeted projects in small groups. Such projects can extend opportunities for interaction with people and objects in ways that enhance a sense of cultural inclusion. This happens not only because participants have new experiences and opportunities for social interaction but also because interaction with museum collections in favourable conditions offers people the opportunity to find new cultural forms in which to express their experience. Personal experience can then be communicated to others. This is a distinctive contribution that museums can make to wellbeing which on the one hand draws on the nature of their collections and their symbolic *cultural* significance, and on the other hand the *personal* symbolic significance the collections hold for individuals. The key task for museum staff is in providing a relational environment in which the cultural and personal can be brought together.

#### **Relationships and skills**

Such work involves a sensitive appreciation of the specific needs of the groups involved. On the evidence from the *Who Cares?* programme, museum staff are well able to develop the skills required to work effectively with such groups. It is, however, relational work which involves emotional labour, and can sometimes take a toll on staff. It is therefore important that appropriate support structures are in place, to enable self-reflection and clarification of the difficult issues and decisions that may arise. There is further work to be done in determining what form this support should take as the clinical models of supervision used in health and social care would not be appropriate in a museum. There is also a case for using the experience of this programme to develop specialist training for museum staff and collaborating artists.

#### **Models of work**

The research identified three dominant implicit 'models' for this kind of project work, and these models affect roles, goals, working relationships and expectations as to how groups will run and what they will produce. The dominant orientations are: education and learning, the provision of a therapeutic environment and creative workshops. Misunderstandings and conflict with partner agencies are most likely to occur when project staff are working to different models and these have not been clarified.

#### **Accessibility**

Despite to fact that some groups initially need encouragement and assistance to use the building, there are a number of ways of facilitating access. The key to accessibility is in providing participants with the opportunity to form relationships with staff, so that they have



the confidence to ask questions and begin to make independent use of the collections. Once such relationships are established the buildings lose their power to intimidate.

### **Sustainability**

The Who Cares? work involves specially targeted projects which are resource and labour intensive. However, policies aimed at promoting mass access are unlikely to enable vulnerable and disadvantaged groups of people to use museums. Some form of targeted social provision will continue to be necessary. This programme has indicated how sustainable strategies can be developed and these involve partnerships with health and social care agencies and collaborating artists. In the long-term it will be most cost effective to develop stable partnerships and offer training and support to care staff in using the museum collections.

### **The importance of partnerships**

Stable partnerships with health and social care agencies are vital to this work: they have a key role in reducing risk, in ensuring that the right mix of knowledge and skills are present in the project team, in ensuring information is shared appropriately while confidentiality is protected, and in ensuring that the needs of individuals are catered for. In long-term partnerships care staff could take a pro-active role in carrying forward this kind of work.

### **Evaluation**

This is innovative work and both self-evaluation *and* external evaluation have an important part to play to maximise learning from the projects and ensure practice development. However these projects need sensitive, tailored evaluation strategies. A cost effective way of using external evaluators is as expert consultants who work with museum staff to enhance the range of methods and evaluation designs at their disposal, and to embed self-evaluation skills in the museum.

## References

- Angus, J. (2002) A review of evaluation in community based arts for health activity in the UK, Durham: Centre for Arts and Humanities in Health and Medicine, University of Durham. Available from: <http://www.dur.ac.uk/resources/cahbm/reports/>
- Annis, S. (1994) 'The Museum as a staging ground for symbolic action', in G. Kavanagh (Ed.) Museum provision and professionalism. London, Routledge:21-25
- Arigho, B. (2008) 'Getting a Handle on the Past: the Use of Objects in Reminiscence Work', in H. J. Chatterjee (Ed.) Touch in Museums: Policy and Practice in Object Handling. Oxford, Berg:205-212
- Bagnall, G. (2003) 'Performance and performativity at heritage sites', in Museum and Society, 1(2):87-103
- Bornat, J. (2001) 'Reminiscence and oral history: parallel universes or shared endeavour?', in Aging and Society, 21:219-241
- Carnegie, E. (2006) 'It wasn't all bad': representations of working class cultures within social history museums and their impacts on audiences', in Museum and Society, 4 (2):69-83
- Cattell, V. (2001) 'Poor people, poor places, and poor health: the mediating role of social networks and social capital', in Social Science and Medicine, 52 (10):1501-1516
- Cave, B., and Coult, A. (2002) Evidence base for the Mayor's Draft Cultural Strategy. London: South East London Strategic Health Authority/East London and the City Health Action Zone.
- Cayton, H. (2007) The report of the review of arts and health working group. London: Department of Health. Available from: <http://www.dh.gov.uk/en/Home>
- Chatterjee, H. J. (2008) Touch in Museums: Policy and Practice in Object Handling,. Berg Publications
- Chatterjee, H., Vreeland, S. and Noble, G. (2009) 'Museopathy: Exploring the Healing Potential of Handling Museum Objects', in Museum and Society, 7 (3):64-177
- Clift, S., Camic, P., Chapman, B., Clayton, G., Daykin, N., Eades, G., Parkinson, C., Secker, J., Stickley, T., White, M. (2009) The state of arts and health in England, in Arts and Health, 1(1):6-35
- Clift, S., Nicol, J., Raisbeck, M., Whitmore, C., Morrison, I. (2010) Group singing wellbeing and health: a systematic mapping of research evidence. UNESCO observatory, Faculty of Architecture, Building and Planning, The University of Melbourne Refereed E-Journal 2 (1).

- Daykin, N. (2005) 'Disruption, dissonance and embodiment: Creativity, health and risk in music narratives', in *Health: An Interdisciplinary Journal for the Social Study of Health, Illness and Medicine*, 9(1):67–87
- Daykin, N., Orme, J., Evans, D., and Salmon, D., with M. McEachran, and Brain, S. (2008) 'The impact of participation in performing arts on adolescent health and behaviour: A systematic review of the literature', in *Journal of Health Psychology*, 13(2):251–264
- Dose, L. (2006) 'National Network for the Arts in Health: Lessons learned from six years of work', in *Journal of the Royal Society for the Promotion of Health*, 126(3):110–112
- Dudley, S. H. (2010) 'Museum Materialities: Objects, sense and feeling', in S. H. Dudley (Ed.) *Museum Materialities: Objects, Engagements, Interpretations*, London and New York, Routledge:1-17
- Falk, J. H. and Dierking, L. D. (2000) *Learning from Museums: Visitor experiences and the making of meaning*. Lanham, MD, AltaMira Press.
- Froggett, L. (2006) 'Thinking with the body: artistic perception and critical reflection', in S. White, J. Fook & F. Gardner (Eds.), *Critical Reflection in Health and Social Care*. Open University Press
- Froggett, L.(2008) 'Artistic output as intersubjective third', in (Eds.) S. Clarke, H. Hahn & P. Hoggett, *Object Relations and Social Relations: The Implications of the Relational Turn in Psychoanalysis*. London: Karnac
- Gosden, C. (2005) 'What do objects want?', in *Journal of Archaeological Method and Theory*, 12:193-211
- Greenblatt, S. (1991) 'Resonance and wonder', in I. Karp and S. Lavine (Eds.) *Exhibiting Cultures: the poetics and politics of museum display*. Washington, DC, Smithsonian Institution Press
- Gwinner, K., Knox, M., Hacking, S. (2010) 'The place for a contemporary artist with a mental illness', in *Journal of Public Mental Health*, 8(4):29-37
- Hacking, S., Secker, J., Kent, L., Shenton, J., and Spandler, H. (2006) Mental health and arts participation: The state of the art in England, in *Journal of the Royal Society for the Promotion of Health*, 126(3):121–127
- Hacking, S., Secker, J., Spandler, H., Kent, L., Shenton, J. (2009) Evaluating the impact of participatory arts projects for people with mental health needs, in *Health and Social Care in the Community*, 16(6):638-648
- Hamilton, C., and Petticrew, M. (2003). Arts for health: Still searching for the Holy Grail, in *Journal of Epidemiology and Community Health*, 57(4),1–2
- Healy, T., Cote, S., Helliwell, J. F. et al. (2001) *The Well-being of Nations: The role of Human and Social Capital*. Paris:Organisation for Economic Co-operation and Development

- Hinshelwood, R. & Skogstad, W. (2000) *Observing organisations: anxiety, defence and culture in healthcare*. London: Routledge
- Hogan, S. (2009) The art therapy continuum: A useful tool for envisaging the diversity of practice in British art therapy, in *International Journal of Art Therapy* 14(1):29-37
- Holden, J. (2004) *Capturing Cultural Value*. London: DEMOS
- Honneth, A. (1995) *The Struggle for Recognition*. Cambridge: Polity Press
- Hooper-Greenhill, E. (1992) *Museums and the Shaping of Knowledge*. London and New York, Routledge
- Jermyn, H. (2001) *The Arts and Social Exclusion: a review prepared for the Arts Council of England*. London, Arts Council England.
- Kavanagh, G. (1996) 'Making Histories, Making Memories', in G. Kavanagh (Ed.) *Making histories in museums*. London, Leicester University Press:1-14
- Kavanagh, G. (2000) *Dream spaces: memory and the museum*. London and New York, Leicester University Press
- Kilroy, A.J., and Parkinson, C. (2006) Literature review: Planning the Invest to Save evaluation. Available from:  
<http://www.miriad.mmu.ac.uk/investtosave/research/Lit%20Review%20MASTER.pdf>
- Kilroy, A.J., Garner, C., Parkinson, C., Kagan, C., and Senior, P. (2007b) Invest to Save: Arts in health evaluation, exploring the impact of creativity, culture and the arts, on health and wellbeing. Available from:  
<http://www.miriad.mmu.ac.uk/investtosave/reports/Summary%20Report%20ISP.pdf>;
- Kunitz, S. J. (2004) 'Social capital and health', in *British Medical Bulletin*, 69:61-73
- Kwawaja, M. and Mowafi, M. (2006) 'Cultural capital and self-rated health in low income women: evidence from the Urban Health Study, Beirut, Lebanon', in *Journal of Urban Health*, 83(3),444-458
- Lowe, G. (2006) Health-related effects of creative and expressive writing, in *Health Education*, 106(1):60-70
- Mack, J. (2003) *The Museum of the Mind: Art and Memory in World Cultures*. London, The British Museum Press
- Macnaughton, J., White, M., and Stacey, R. (2005) Researching the benefits of arts in health, in *Health Education*, 105(5):332-339
- Maslow, A. H. (1970) *Motivation and Personality* (2nd. Ed). New York: Harper & Row

- Morrow, V. (2008) 'Conceptualising social capital in relation to the well-being of children and young people: a critical review', in *The Sociological Review*, 47(4):744-765
- Newman, A. and McLean, F. (2004) 'Capital and the evaluation of the museum experience', in *International Journal of Cultural Studies*, 7(4):480-498
- Newman, A. and McLean, F. (2005) 'Museums and the Active Citizen: Tacking the Problem of Social Exclusion', in *Citizenship Studies*, 9(1):41-57
- Newman, A. and McLean, F. (2006) 'The impact of museums upon identity', in *International Journal of Heritage Studies*, 12(1):49-68
- O' Neill, M. (2002) 'Beauty and the Beast', in *Museums Journal*:21-23
- Pawson, R. and Tilley, N. (1997) *Realistic Evaluation*. London: Sage Publications
- Pearce, S. M. (1995) *On Collecting: An Investigation into Collecting in the European Tradition*. London and New York: Routledge
- Philips, L. (2008) 'Reminiscence: Recent Work at the British Museum', in H. J. Chatterjee (Ed.) *Touch in Museums: Policy and Practice in Object Handling*. Oxford: Berg:199-204
- Putnam, R. D. (2000) *Bowling Alone: the Collapse and Revival of American Community*. New York: Simon and Shuster
- Rasmussen, S. (2002) 'The Uses of Memory', in *Culture and Psychology*, 8(1):113-129
- Salom, A. (2008) 'The Therapeutic Potentials of a Museum Visit', in *International Journal of Transpersonal Studies*, 27:1-6
- Sandell, R. (2007) *Museums, Prejudice and the Reframing of Difference*. London and New York: Routledge
- Scott, C. (2006) 'Museums: Impact and Value', in *Cultural Trends*, 15 (57):45-75
- Secker, J., Hacking, S., Spandler, H., Kent, L., and Shenton, J. (2007) *Mental health, social inclusion and the arts: Developing the evidence base*. National Social Inclusion Programme, Care Service Improvement Partnership. Available from: <http://www.socialinclusion.org.uk/publications/MHSIArts.pdf>
- Silverman, L. H. (1990) 'Of Us and Other Things: the Content and Functions of Talk by Adult Visitor Pairs in an Art and a History Museum'. Unpublished doctoral dissertation, University of Pennsylvania: Philadelphia
- Silverman, L. H. (2002) 'The Therapeutic Potential of Museums as Pathways to Inclusion', in R. Sandell (Ed.) *Museums, Society, Inequality*, London and New York: Routledge
- Silverman, L. H. (2010) *The Social Work of Museums*. London: Routledge

South, J. (2006) Community arts for health: An evaluation of a district programme, in *Health Education*, 106(2):155–168.

Spandler, H., Secker, J., Kent, L., Hacking, S., and Shenton, J. (2007) Catching life: The contribution of arts initiatives to recovery approaches in mental health, in *Journal of Psychiatric and Mental Health Nursing*, 14:791–799

Spradley, J. (1980) *Participant Observation*. London: Holt, Rinehart and Winston

Stacey, G., Stickley, T. (2010) The meaning of art to people who use mental health services, in *Perspectives in Public Health*, 130(2):70-77

Staricoff, R. (2004) *Arts in Health: A review of the medical literature*. London: Arts Council England. Available from: <http://www.artscouncil.org.uk/documents/publications/>

Staricoff, R., Duncan, J.P., and Wright, M. (2004) A study of the effects of visual and performing arts in health care. London: Chelsea and Westminster Hospital. Available from: <http://www.publicartonline.org.uk/archive/research/documents/ChelseaAndWestminsterResearchproject.pdf>

Stickley, T. and Duncan, K. (2007) Art in Mind: Implementation of a community arts initiative to promote mental health, in *Journal of Public Mental Health*, 6(4):24–32

Szasz, Thomas (1974 (1961, 1967, 1977)) *The Myth of Mental Illness: Foundations of a Theory of Personal Conduct*. New York: Harper & Row

Wavell, C., Baxter, G., Johnson, I. et al. (2002) *Impact evaluation of museums, archives and libraries: available evidence project*. London, Resource: The Council for Museums, Archives and Libraries

White, M. (2004) *Seeing the wood for the trees: An arts and health action plan for the East Midlands*. Durham: Centre for Arts and Humanities in Health and Medicine

Winnicott, D.W. (1965) *Maturational Processes and the Facilitating Environment*. London: The Hogarth Press and the Institute of Psycho-Analysis

Winnicott, D.W. (1971) *Playing and Reality*. London: Tavistock Publications

Winnicott, D. W. (1984) *Through paediatrics to psychoanalysis: collected papers*. London: Karnac Books

### **Reports/evaluation tools:**

Arts Council England/Department of Health (2007) *A prospectus for arts and health*. London: Arts Council England/Department of Health. Available from: <http://www.artscouncil.org.uk/documents/publications/>

Creative Spaces: Children as co-researchers in the design of museum and gallery learning (Renaissance Northwest and Cape UK Create, 2009)

Department for Culture, Media and Sport (2000) Centres for Social Change: Museums, Galleries and Archives for All. London: Department for Culture, Media and Sport

Health Development Agency (2001) Art for health: A review of good practice in community-based arts projects and interventions which impact on health and wellbeing. London: Health Development Agency. Summary available from: <http://www.nice.org.uk/nicemedia/documents/artforhealthsum>.

Museums, Libraries and Archives Council (2005) New Directions in Social Policy: developing and evidence base for museums, libraries and archives in England. London: Museums, Libraries and Archives Council

Museums, Libraries and Archives Council (2008) Outcomes Framework for Museums: London, Museums, Libraries and Archives Council

ODPM (2004) Mental Health and Social Exclusion: report of the Social Exclusion Unit. London: Office of the Deputy Prime Minister

SDC Project Spotlight: Arts Attendance, Participation and Mental Health (Scottish Development Centre for Mental Health, 2010)

Warwick Edinburgh Mental Health Wellbeing Scale (NHS Health Scotland, University of Warwick and University of Edinburgh, 2006)

## **Acknowledgements**

The Psychosocial Research Unit would like to thank the project managers, artists and participants who took part in the *Who Cares?* projects. We are particularly grateful for the access we were allowed to observe projects in action and for the time staff and participants gave to take part in focus groups and interviews.

We would also like to thank Myna Trustram, the Renaissance North West research manager, for invaluable feedback on earlier drafts of the report.

## **Contact Details:**

Professor Lynn Froggett  
Psychosocial Research Unit  
School of Social Work,  
University of Central Lancashire  
Preston PR1 2HE  
Telephone/minicom 0177289347  
Fax 01772892964  
Email [LFroggett@uclan.ac.uk](mailto:LFroggett@uclan.ac.uk)  
[www.uclan.ac.uk/pru](http://www.uclan.ac.uk/pru)

Dr. Alan Farrier  
Psychosocial Research Unit  
School of Social Work,  
University of Central Lancashire,  
Preston PR1 2HE  
Telephone/minicom 01772895420  
Fax 01772892964  
Email [AFarrier@uclan.ac.uk](mailto:AFarrier@uclan.ac.uk)