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## A. EXECUTIVE SUMMARY

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This is a paper that explores the potential of culture and the arts across Derbyshire County Primary Care Trust (PCT) and Derbyshire Community Health Services (DCHS) as a means of raising aspiration, transforming environments and promoting well being, health gain and cultural change. It acknowledges that the structures for commissioning and providing services are changing, illustrates examples of how the arts have impacted on specific communities and health issues across the county, and suggests potential for future development.

It places the work in a national, regional, sub-regional and local context, providing recommendations for achievable action whilst recognising the current recession and other risk factors. This paper was commissioned when all services sat within Derbyshire PCT and was developed during the emergence of DCHS and which now stands as an autonomous provider organisation; it has equal relevance to both organisations and success lies in commitment to shared development.

What this paper significantly does, is reflect the vibrancy and optimism within the PCT and DCHS. The 'can-do' approach and shift in attitudes towards wellbeing; whilst still providing the best resources for those in greatest need, but aspiring to health gain across the county. This paper acknowledges the synergies between science and the humanities and reflects a potentially resource rich community, where the arts can help enable a stronger, healthier and culturally connected Derbyshire.

## B. INTRODUCTION & BACKGROUND

'I would like to see the benefits of participation in the arts recognised more widely by health and social care professionals, particularly those involved in commissioning...This is not some kind of eccentric add-on - it should be part of the mainstream in both health and social care.'<sup>1</sup>

*RT Hon Alan Johnson MP, Secretary of State for Health, 16th Sept 08*

In his 2008 speech on arts and health, The Secretary of State for Health, the RT Hon Alan Johnson MP, gave a clear message that there is more to achieving societal health than dealing with sickness, and that the arts offer a potent tool for promoting health and wellbeing and delivering social change. This speech marked a turning point in the field of arts and health and gave those charged with delivering health services, permission to mainstream culture and the arts within their agendas.

Across Derbyshire, like the rest of England, the make-up of the NHS; its commissioning and provider services have changed over the last few years. This restructuring of services has seen the merger of six Primary Care Trusts into one Derbyshire-wide trust and is part of the wider NHS community covered by the NHS East Midlands Strategic Health Authority.

'The county of Derbyshire forms the northwest part of the East Midlands and covers an area of 255,071 hectares and at mid-2007 had a population of 758,150 people.'<sup>2</sup>

In the autumn of 2008 Tim Broadley, Assistant Director for Adult and Older Peoples Services within Derbyshire Community Health Services, the provider services arm of Derbyshire County Primary Care Trust (PCT) commissioned Arts for Health at Manchester Metropolitan University (AfH) to undertake a scoping exercise across Derbyshire to understand the potential of culture and the arts within the PCT. This paper is the result of that exercise.

### Who we are

Arts for Health at Manchester Metropolitan University are the United Kingdom's longest established arts and health organisation, specialising in research, development, training and education. Clive Parkinson is the organisations director and Charlotte Garner is the projects co-ordinator. Between October 2008 and February 2009 they began a dialogue with individuals and groups from the voluntary sector, statutory services and other communities of interest across the county. These conversations began through face-to-face sessions, via email, telephone and desktop research.

**“The arts offer a potent tool for promoting health and wellbeing and delivering social change.”**

Throughout this process, we have been mindful that Derbyshire is a huge county and we couldn't reach all the interested people, furthermore as relative outsiders, there was always the chance that something would slip the net.

We've also been acutely aware that we're currently in the midst of an economic recession and have noted the impact of cutbacks, particularly in Amber Valley. We consider upstream arts interventions to be potentially cost-effective, particularly when measured against pharmacological treatments and hospital bed days.

Importantly, this paper is not about Arts for Health, it is about the county of Derbyshire, its communities and its culture. To those we haven't been fortunate enough to meet, we hope this is only the beginning of our relationship with Derbyshire and look forward to this field of practice growing and supporting you in any way we can.

### The Question

There is growing belief that engaging with creativity, culture and the arts can have an impact on health and well being, and to realise this vision and achieve a healthy, creative county, we needed to explore what has already been achieved; what are the health priorities, what people aspire to and what partnerships are possible. Derbyshire County Primary Care Trust were particularly interested in:

How we can improve health environments

How we can engage more with our communities

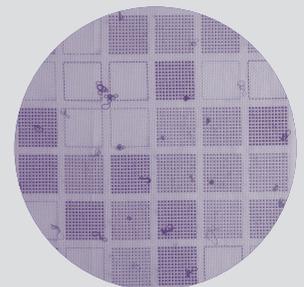
How the arts might impact on public health

### National Context

The timing of the PCT, in undertaking an exploration of the arts and health could not have been more prudent. Between 2007 and 2008 there has been a significant shift (though not seismic) in the relationship between health and arts partners at a strategic level. The words of the current Secretary of State for Health cited at the start of this paper, mark a mid-way point in a larger conversation that ultimately aspires to cross-government collaboration. In a debate on Arts in Healthcare, led by Lord Howarth of Newport in the House of Lords on 6th March 2008, Earl Howe suggested that research undertaken by Arts for Health at MMU reinforces the fact that;

'Artistic activity can bring about a more balanced perspective on life...enabling people to move away from dependence on healthcare and much more towards self-reliance. We think immediately of Derek Wanless's fully engaged scenario, and the arts should be seen as one important catalyst for delivering that scenario.'<sup>3</sup>

**“There is growing belief that engaging with creativity, culture and the arts can have an impact on health and well being.”**



## “Identifying partnerships, exploring synergies with government targets and proposing ways to address developmental and training needs”

It is this notion of a health literate and fully engaged public, which is central to Department of Health policy, and through its commitment to inclusiveness, something that the PCT and DCHS can achieve through its visionary leadership; less focused on morbidity and illness and moving towards assets, wellbeing and health gain. The cultural change needed within the NHS as described by Lord Darzi in the NHS Next Stage Review, will require innovation, a development of vibrant community services and a move towards social enterprise; in short, a cultural change where the arts can play a key role in evolving towards ‘an NHS that helps people to stay healthy.’<sup>4</sup>

Two notable developments in the national arts and health field are unfolding as this paper is written. With continued calls for evidence of the impact of culture and the arts, Taylor & Francis are publishing the first peer reviewed journal of its kind, *Arts & Health, an International Journal of Research, Policy and Practice* in March 2009.<sup>5</sup>

A National Forum for Arts and Health organisations is being funded by Arts Council England and developed by the London Arts and Health Forum, with the support of Arts for Health at MMU and other strategic partners. Seen alongside the Secretary of State for Health’s advocacy and commitment to establishing a high level working group at the Department of Health, there is a considerable movement afoot and one that the PCT and DCHS can be at the vanguard of.

### Regional, Sub-Regional and Local Perspectives

Being part of the East Midlands Government Office Region alongside Nottinghamshire, Leicestershire, Lincolnshire, Northamptonshire and Rutland presents as much by way of potential benefits as it does difficulties in size and scale. It should be noted that there is excellent work within this field, taking place within Derby City, but that this falls out of the remit of the PCT and DCHS. Whilst the emphasis of this report is focused within the PCT/DCHS catchments, strategic alliances within the region should clearly be nurtured, and learning from previous and ongoing activity understood in relation to the health reach of both organisations. The impact of the arts on patients and staff within health care settings is widely evidenced through the work of Rosalia Staricoff, Roger Ulrich and the Kings Fund’s continued advocacy to develop the Healing Environment.<sup>6</sup> The aspiration to engage with communities and understand the impact on public health and wellbeing, are clearly closely connected, but is a far newer concept.

In March 2004, Arts Council England, East Midlands commissioned the development of an action plan for arts and health in the wider region, following on from audit work undertaken in 2002. Key to this work was the need for identifying partnerships, exploring

synergies with government targets and proposing ways to address developmental and training needs. This report noted the potential for partnerships and the growth in the sector;

‘There is presently a window of opportunity for arts development to help realise a social model of health. The move to multi-agency working is new to our reformed health services and the arts can have both an integral and a catalytic role in this.’<sup>7</sup>

This valuable regional study gives a clear picture of health inequalities across a huge geographical area, but with the exception of Derby City work and the now transitional Artery project in Amber Valley, it doesn’t give a clear picture of activity, or potential across Derbyshire County. What this study did provide; was that of a snapshot of 96 arts and health projects across the region, the number of mental health focused activities was significant and accounted for 36 of the 96 projects. This report presented a number of recommendations to Arts Council England, East Midlands, in particular:

- > The establishment of a regional arts and health forum
- > The establishment of a regional arts and health post

A significant relationship was brokered with East Midlands Public Health Group EMPHG, (now the Department of Health – East Midlands), based on common strategic objectives and has resulted in partnership funding for the post and other support for the setting of a cross-sectoral arts and health forum.

In 2006, EMPHG were successful in receiving an Arts Council England grants for the arts award (£93,000) to take forward both the arts & health forum and ‘post’ for another two years. Leicester Comedy Festival were appointed to take forward the legacy of the ‘post’ and the Centre for Arts and Humanities in Health and Medicine delivered and developed the forum, with a view to developing a sustainable regional network.

This network has its own presence on the public health website at; [www.emphasisnetwork.org.uk/networks/artsandhealth.htm](http://www.emphasisnetwork.org.uk/networks/artsandhealth.htm) As the commissioning organisation for this work, Arts Council England, East Midlands are committed to developing work across the region that impact on health.

Again, it should be noted that Arts Council England has been affected by restructuring and cutbacks and are currently reducing their workforce by 21%. During the last 3 years, Arts Council England, East Midlands has invested £557,423 in strategic development posts across the region. This does not include funding for discreet arts and health projects from Grants for the Arts. Grants include funding for the mental health charity, *Rethink* to develop the



work of Artery, funding of work in Derby City General Hospital and a 2-year post and programme of activity in the Revive Healthy Living Centre in Greater Derby PCT. In January 2008 a regional consortium group was formed to work towards the strategic development of a longitudinal piece of research for the region. The area of work is being led by Nottingham University and involves ACE, EM, Leicester Comedy Festival (now trading as Big Difference Company), The East Midlands Participatory Arts Forum, the University of Northampton, the University of Nottingham and City Arts. In May 2009 this group hopes to submit an application to Big Lottery towards a 5-year action research project focusing on regional arts and health activity.

Across Derbyshire, the Local Government Arts Officers have a strong presence and through regular forums and well subscribed-to web presence, have a significant reach and influence. Two groups are convened monthly that offer networking and sharing between arts organisations and Local Government Arts Officers. Respectively known as: the Derbyshire Arts Development Group (DADG) and the Derbyshire Arts Partnership (DAP). These two groups will be crucial to the success of sustainable activity and will be described in more detail shortly.



## C. DERBYSHIRE: HEALTH SETTINGS, HEALTH ISSUES

The DAP and DADG alongside individual arts organisations and committed voluntary sector and health professionals, have responded to the questions posed in this exercise with enthusiasm. But before any picture of how culture and the arts can play a part in delivering a 21st Century person centred service can be explored, it is useful to look at health needs and aspiration across the county, alongside estate development within DCHS.

*'With over 5400 staff, we are the second largest health service employer in Derbyshire and the community service provider of choice for our population, spending approximately £120million per year. Our staff are caring for people across the county in, or near their homes, and in twelve community hospitals with more than 500 inpatient beds.'*<sup>8</sup>

### “Commitment to culture change within the NHS”

Derbyshire has seven distinct areas; High Peak and North Dales; North East and Bolsover; Chesterfield; Amber Valley; South Dales and South Derbyshire; Erewash and Derby City. As mentioned earlier, Derby City does not fall within the remit of this PCT and to understand the health issues across the county, it's useful to note that the PCT further sub-divide the 6 geographical areas within their remit, into the 8 District/ Borough Councils.

- > North East Derbyshire
- > Chesterfield
- > Derbyshire Dales
- > Bolsover
- > Amber Valley
- > High Peak
- > South Derbyshire
- > Erewash

The NHS estate across the county is largely made up of community hospital style builds, with some architecturally significant buildings including Babington, Newholme and St Oswalds hospitals, which were workhouses. Whilst some of the estate is dated and not entirely fit for 21st Century provision, a programme of investment, rebuilding and refurbishment is well underway across much of the PCT/DCHS under NHS Capital and LIFT (Local Improvement Finance Trust) initiatives.

The LIFT element, is joint-venture between John Laing and Bank of Scotland, has formed 60% of the Public Private Partnership, with the public sector holding a 40% equity stake. John Laing Integrated Services provide the hard facilities management under a 25 year

**“The authors of this report have found a rich vein of cultural activity within the Trust and unusually, the focus has been less on visual arts as decoration, but more about how the arts in a range of guises, can be used as a vehicle for community consultation and ‘therapeutic’ activity.”**

contract. It is as yet, unknown what impact the current recession will have on LIFT schemes, but it seems that the UK Government is committed to this long-term relationship. Whilst there is no evidence that explicit art and cultural strategies have been in place within the smaller PCT’s, this paper goes some way in evidencing the new PCT and DCHS commitment to culture change within the NHS. It is clear that staff working across the range of buildings managed by the trust have a sense of ownership and local identity. There are ample examples of corridors and wards spaces displaying pieces of art both purchased and commissioned.

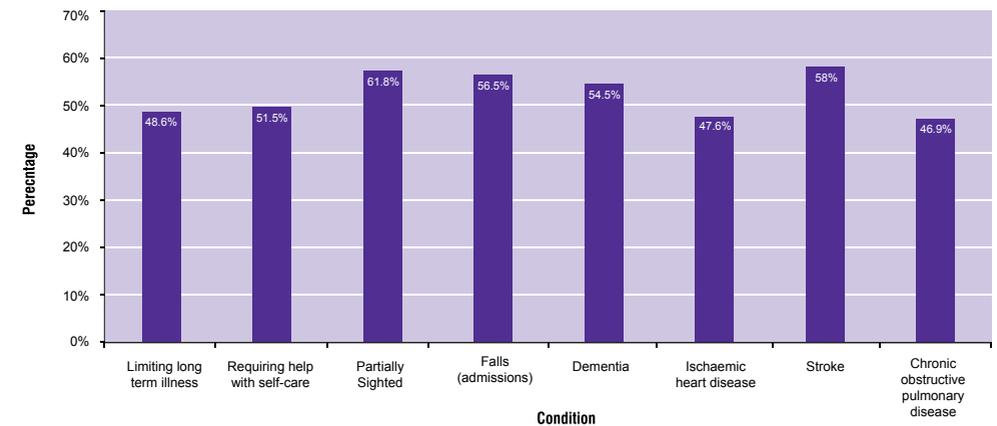
It is however, hit and miss and the opportunities that the LIFT programme bring, emphasise the need to consider both the visual arts as part of the fabric of a building, but also in the consultation and design of new builds. Whilst a commitment to the principle of a percent for art in all new builds, isn’t written into Strategic Service Development Plans, this is an opportunity for further exploration across the partnership. The Department of Health recommends that all NHS trusts should have a design champion that inputs into this agenda and for DCHS this role is held by Tim Broadley, the instigator of this paper.

‘In support of NHS governance arrangements for assuring quality in the built environment and improving the patient experience, the Department of Health recommends that all trusts and PCTs embarking on new developments, whether they are refurbishment or new build projects, should appoint a Design Champion to their Board of Directors. NHS Design Champions will promote the importance of achieving quality in capital development ranging from major PFI to smaller community projects and in ongoing initiatives to improve both the patient environment and the working lives of staff.’<sup>9</sup>

The authors of this report have found a rich vein of cultural activity within the Trust and unusually, the focus has been less on visual arts as decoration (often the starting point in understanding the arts and health agenda), but more about how the arts in a range of guises, can be used as a vehicle for community consultation and ‘therapeutic’ activity. Because the new PCT and DCHS have emerged from a number of smaller organisations, it is inevitable that some of this good practice remains unsung, but offers important learning to be disseminated across the organisation. This will be expanded on in the next section, but there is potential for an event to bring existing activity together and showcase good practice. The Director of Public Health Annual Report 2007/8 for Derbyshire PCT, places emphasis on an ageing population, healthier lifestyle choices, mental health and the impact of poverty on wellbeing. The report notes specifically that,



## Predicted increase in numbers of people with specific conditions in 65+ age group in Derbyshire County PCT between 2008 and 2025



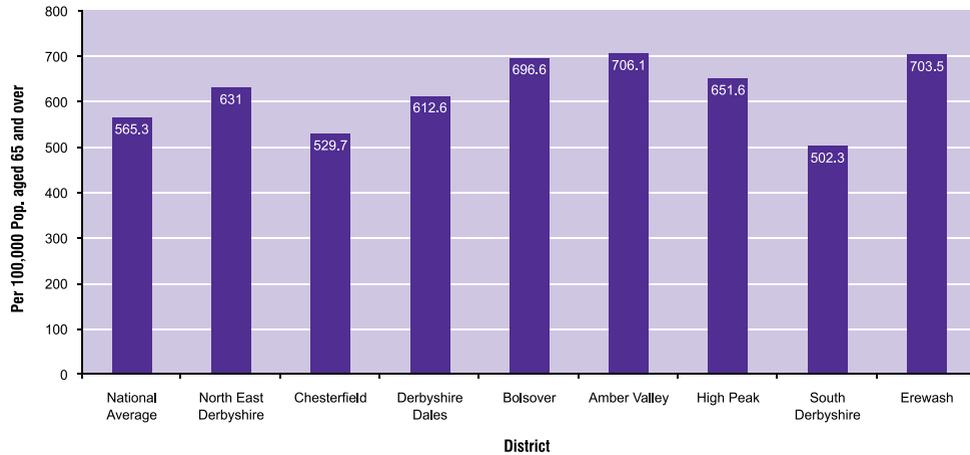
‘The population of Derbyshire is projected to increase by 11% between 2008 and 2025. This increase is largely attributable to increases in the 60+ age group. Within these age groups the population is set to increase by 46.2% by 2025.’<sup>10</sup>

It’s inevitable that the needs of an aging population will require more by the way of care and social support. The figures in the graph above illustrate the predicted percentage increase in numbers of people with specific conditions in the 65 + age group between 2008 – 2025 in Derbyshire County PCT/DCHS. It’s interesting to note that the report goes on to say,

‘Projections of disease prevalence rest on current age specific rates and demographic change and do not take account of any future changes in disease rates due to other factors. Future ill-health may be prevented by ‘upstream’ interventions lowering disease rates.’ Listening to those who’ve contributed to this paper, it’s clear that there’s a strong belief that the arts can play a key role in upstream activity. This is borne out by an increase in activity and research in this field internationally.<sup>11</sup>

The Report of the Regional Director of Public Health for the East Midlands suggests a similar trend, stating that, ‘...the East Midlands had the third highest avoidable injury mortality rate for older people aged 65 years and over within the nine Government Office Regions (and) is significantly higher than that for England as a whole.

## Older People: Hip Fracture



Falls accounted for 26% of all accidental deaths among people aged 65 years and over during the five-year period 2001-2005. However, the number of accidental deaths recorded as being due to a fall is likely to be severely underestimated.<sup>12</sup>

The Association of Public Health Observatories and Department of Health 2007, Health Profiles<sup>13</sup> provide a more explicit local understanding across the eight local councils. In all but two of the districts, incidents of hip fracture are higher than the national average.

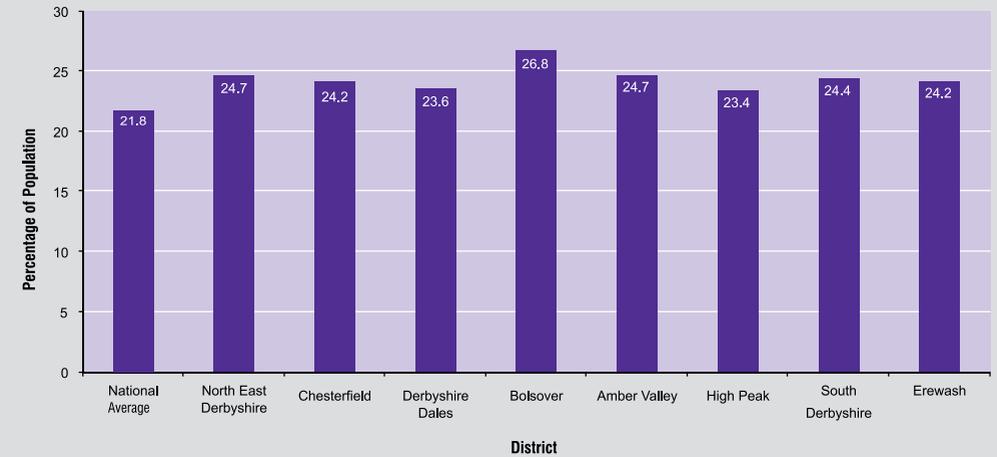
The above graph shows the number of people aged 65 and over, who have suffered a hip fracture, per 100,000 people of this age range, in the year 2005/6. The first column shows the national average being 565.3 people per 100,000. The following columns show the eight districts covered by the PCT/DCHS. These range from 502.3 per 100,000 in South Derbyshire to 706.1 per 100,000 in Amber valley. The average figure for all eight districts is 629.2 per 100,000, which is considerably higher than the national average.

'Each year in Derbyshire around 8300 people aged 65 and over attend A&E departments as a result of a fall, about a third of these are admitted. The rate of hip fractures in Derbyshire is significantly higher than the England average.'<sup>14</sup>

Considering the growth of an ageing population in Derbyshire, the publication of the Department of Health's, Living Well with Dementia: A National Dementia Strategy, offers us a crucial indication of a growing health and social crisis, and one that culture and the arts can play a huge part in humanising. 'Dementia is becoming more



## Obese Adults

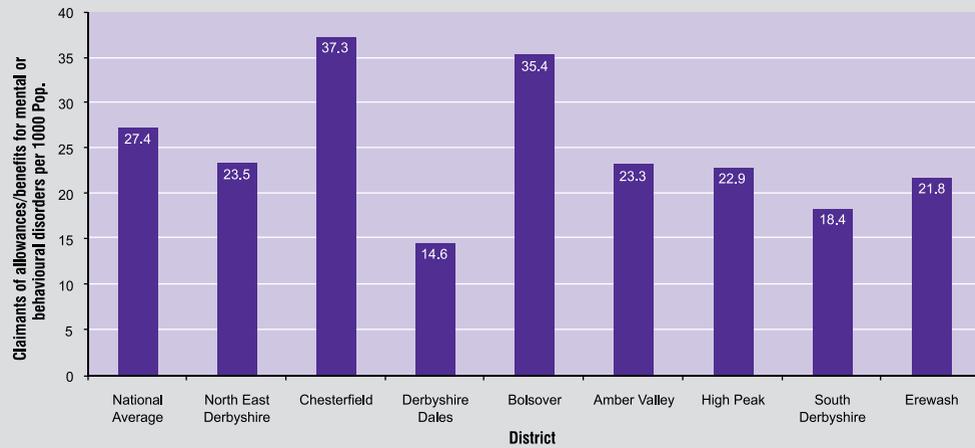


common and the cost of looking after people with dementia is going up.'<sup>15</sup> The arts will increasingly be seen as both ways of communicating knowledge about dementia, addressing stigma and crucially, developing services to meet peoples changing needs. These are key steps in improving the quality of life for people with dementia and their carers. The national guidance recommends the use of non-pharmacological approaches to treat behavioural and psychological symptoms initially and the use of medications only as a last resort, or where there is severe stress or an immediate risk of harm to the person with dementia or others. The use of arts as an integral part of service provision has been shown to be effective and is recommended as sole or part of the treatment for dementia and other conditions in the Prospectus for Arts and Health published by the Department of Health in April 2007. Another health issue that is equally pronounced is the significance of obesity in adults, with all eight areas of Derbyshire, scoring higher than the national average.

The above graph shows the percentage of the population classed as obese in the year 2005/6. The first column shows the national average to be 21.8% of the population. The following columns refer to the eight districts covered by the PCT and DCHS, all of which show obesity percentages to be above the national average. Bolsover has the highest percentage with 26.8% and High Peak has the lowest with 23.4%.

The Foresight Group in their report to the Government estimated the current national cost of obesity to the NHS to be £4.2 billion, forecasting it to double by 2050. In terms of the wider impact on society, Foresight estimates the total cost of obesity to society could reach £50 billion a year by 2050.<sup>16</sup>

## Mental Health



The health and social impact of obesity includes a reduction in life expectancy; risk of Coronary artery disease increases 3.6 times for each unit increase in BMI for people who are obese; 85 percent of hypertension is associated with a BMI greater than 25; the risk of developing type 2 diabetes is about 20 times greater for people who are very obese (BMI over 35), compared to individuals with a BMI of between 18 and 25. Up to 90 percent of people who are obese have fatty liver, (non-alcoholic fatty liver disease is projected to be the leading cause of cirrhosis in the next generation); social stigmatisation and bullying are common and can, in some cases, lead to depression and other mental health conditions. The discrepancies in the health and well-being of the population across different geographical areas, and the determinants of ill-health are well documented, ranging from poverty and social isolation to educational attainment and 'poverty of aspiration'. It is also accepted that these factors impact on wider health, social and cultural inequalities intrinsically affecting smoking, alcohol consumption, obesity and ultimately morbidity. Mental ill health is one of the United Kingdoms most pressing health issues and is linked closely to other factors and issues including substance abuse, worklessness and deprivation.

The above graph shows crude rate claimants of benefits or allowances for mental or behavioural disorders per 1000 people in the general population in 2005. This gives a good indication of the prevalence of poor mental health. The first column shows the national average as being 27.4 people per 1000. The remaining columns show the eight districts covered by the PCT and DCHS, the prevalence rate of which varies considerably. Chesterfield has the

highest rate with 37.3 people in 1000 claiming benefits in contrast to Derbyshire Dales, which has a rate of only 14.6 per 1000.

Across the UK there is a significant need for positive mental health promotion to address the fact that 1 in 4 adults are experiencing some form of mental ill health at some point in their lives. Derbyshire County PCT have currently prioritised an increase in psychological therapies. This paper welcomes the development of an arts and mental health strategy within the PCT. Derbyshire Vision and Strategic Direction for Adult Mental Health offers compelling evidence of need.

- > 83% of service users consulted in Derbyshire stated the main issues for them as being the impact of stigma and lack of understanding of mental health issues.
- > 53% stated a lack of social networks, access to social activities and day centres.
- > 52% stated a lack of self confidence/ social withdrawn
- > 38% stated access to recreation i.e. arts/ theatres etc <sup>17</sup>

It is key that in his first annual report, Dr David Black, Director of Public Health, for Derbyshire County PCT and County Council comments that its purpose is, '...to inform the development of policy, preventative work and the commissioning and provision of services across the whole health and social care community.'<sup>18</sup> Much of his report makes clear the need for partnership work across the county and it's here that the relationship between the arts and communities can play a key role in addressing both the 'upstream' issues and engaging with target resistant groups as we'll now illustrate.



## D. ARTS AND CULTURE ACROSS DERBYSHIRE

To paint a picture of a county that is alive with cultural and artistic activity, it's useful firstly, to understand the structural mechanisms described earlier as the DADG and DAP, as they have a history of strong partnership working, a network of members and crucially, an understanding and commitment to the arts and health agenda. Derbyshire Arts Partnership is the forum for joint working on arts development between local authorities across Derbyshire. It is a group which consists of the Arts Officers and as such acts as a gateway to a rich resource of knowledge and networks. The Derbyshire Arts Development Group is an association of participatory arts organisations, local authorities and other arts groups. It seeks to promote the development of professional arts in the county for the benefit of the people who live, work in and visit Derbyshire. The organisation aims to provide leadership for its members and for the arts in the county in the following areas:

- > Advocacy for the arts in Derbyshire
- > Campaigning and lobbying
- > As a catalyst for arts development and strategic policy
- > Encouraging information sharing and networking

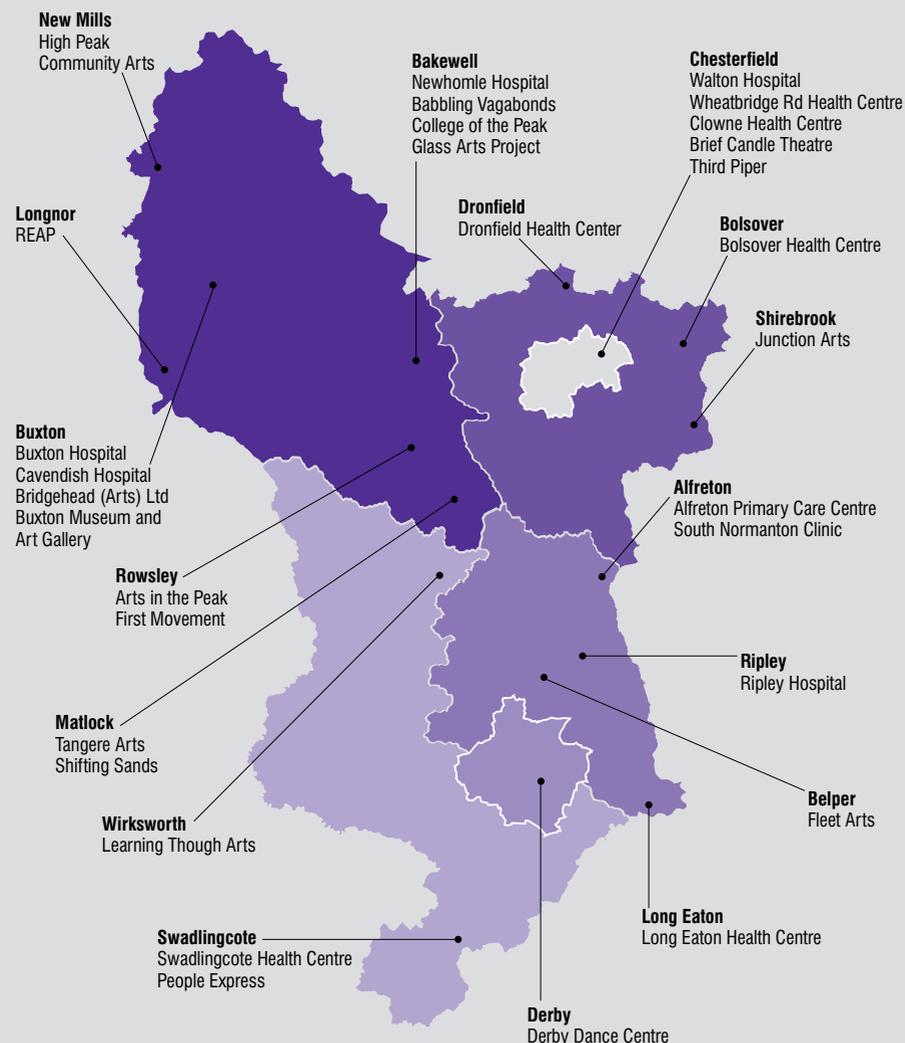
In 2006 the DADG produced an advocacy document that explicitly illustrated how the arts can contribute to Education, Diversity, Crime Reduction, Regeneration and Health;

'Health and well-being contribute to the quality of life within communities and it is something which arts organisations across the county have been working towards over a long period of time. Whether this is in schools through educating young people about the impacts of unhealthy choices and lifestyles or encouraging participation for physical fitness and enjoyment, working with clients with physical or mental health issues, to large schemes for the whole community, arts organisations have made a significant impact in this area.'<sup>19</sup>

As a mechanism for communicating to the arts sector, artsderbyshire.org.uk is a useful networking tool funded and managed by Derbyshire Arts Partnership. Around 700 people across Derbyshire subscribe to the organisations website and there are over 1000 individuals registered on the site's artists' directory which had 33,000 visitors last quarter. It's interesting to note that national and regional web-based networks have less success in sustaining membership and engaging with users than subregional/ county-wide networks, echoing a trend that can be observed in other areas of the UK; people feel more part of a local network, rather than a wider more anonymous network. This reiterates the drive to **think Derbyshire, act locally.**



The breadth and range of arts activity across the county is huge and the map below illustrates a number of high profile arts organisations in relation to distinct geographical health settings. Many of these organisations work explicitly around an arts and health agenda, alongside broader cultural activity that might impact on a range of other issues. Some centres/organisations are art form focused, using dance, new-media, storytelling, or drama; whereas others buy in specialists to facilitate around specifically identified needs. It has been enlightening to see the range of suggestions made by arts practitioners and health professionals attempting to embrace each other's practice, aiming to fulfil mutually beneficial agendas.





This is evidenced by the range of projects that have been delivered already, which have explicit health outcomes. The five case studies below indicate the cross-sectoral synergies in place, which have enabled activity to take place that have explicit health objectives. We are not advocating on behalf of these projects, which we use for the purpose of illustration.

Moreover, this selection of projects reflects issues identified within health literature around mental health and well-being, matters associated with an ageing population and rural/social isolation. This small sample of projects and research represents the tip of a very large iceberg, with numerous organisations delivering diverse practice that impact on a range of health and social needs.

#### **Case Study 1 (Chinese Mental Health Project)**

**Location:** Chesterfield.

**Art Forms:** Drama Poetry.

**Description:** Project to help address the stigma that exists around mental health amongst the Chinese community. Helping to increase understanding of mental health issues through drama, social events, poetry, and increased access to information.

**Target Groups:** Chinese community in Chesterfield.

**Partners:** Derbyshire County PCT, the Chesterfield Chinese Association, the Chinese Mental Health Association and Derbyshire Mental Health Services NHS Trust.

**Sustainability / Evaluation:** Increased understanding, knowledge and support within the community, more openness to discussing issues, Chinese language booklets on mental health now available.

#### **Case Study 2 (Arts at the HeART of Wellbeing pilot study)**

**Location:** Erewash.

**Art Forms:** Reminiscence, painting, arts and crafts.

**Description:** Artist working with disabled older people in a residential home and to three housebound residents in the borough

**Target Groups:** People aged 50+ in poor health or socially isolated, with some kind of disability.

**Partners:** Derbyshire County PCT and Erewash Borough Council Arts Development Service.

**Sustainability / Evaluation:** Warwick-Edinburgh Scale used to collect data and overall mental health wellbeing was found to improve. Recommendation of more work with this target group in Erewash. Project led to some links being made between participants and other services, beneficial signposting.

#### **Case Study 3 (Artery's Gentle Movement – Falls Prevention)**

**Location:** Amber Valley.

**Art Forms:** Dance based gentle movement.

**Description:** Creative gentle movement sessions in local authority care homes, warden aided complexes and a community centre.

Dance based approaches used to increase balance, gait and flexibility as well as improving self esteem, independence, confidence and quality of life.

**Target Groups:** Older people aged 65 and over with a risk of falling.

**Partners:** Amber Valley Healthier Communities Project (Big lottery funded), Amber Valley Housing Limited.

**Sustainability / Evaluation:** An evaluation was carried out. 93% of participants found improvement or maintenance of health. Staff in care homes need to be trained to have understanding and confidence to ensure sustainability.

#### **Case Study 4 (Young Farmers Photographic Mental Health Project)**

**Location:** Blackwell.

**Art Forms:** Photography.

**Description:** Working alongside professional photographers, young farmers were given cameras to capture images around themes. Photographic workshops were held and images were entered into a competition and exhibition.

**Target Groups:** Young farmers from hill farming communities.

**Partners:** Dept of Public Health – Derbyshire County PCT, Dept of Photography – Sheffield Hallam University, The Farming Life Centre – Bakewell, Derbyshire County PCT. Funded by Arts Council England, Heritage Lottery Fund, Derbyshire County Council, Derbyshire Dales District Council and Derbyshire Learning Partnership.

**Sustainability Evaluation:** Focus groups were held and questionnaires were completed showing improvements in confidence and self-esteem as well as the acquisition of a new skill. Following the touring exhibition, pieces are now on permanent display in farming and agricultural centres.

#### **Case Study 5 (Arts Exchange)**

**Location:** High Peak.

**Art Forms:** Sculpture, ceramics, drama, music, painting, textiles, arts and craft Description Individually designed 10 week programs, one to one or very small groups with artist in own home, local venue or out and about. Group projects were set up following the success of individual projects.

**Target Groups:** People with physical or sensory impairments, often acquired disabilities through accident, illness or injury.

**Partners:** Derbyshire Social Services, High Peak Community Arts.

**Sustainability Evaluation:** Project deemed successful and grew initially although funding has since become a major challenge. Found to improve quality of life, confidence, self expression, creativity and social contact as well as learning new skills.

## E. THOUGHTS AND REFLECTIONS

**“There’s a danger of just funding projects, without any real determination for something more sustainable.”**

Considering the nature of, and aspirations behind this study, we would recommend that to further develop a more considered and strategic approach to arts and health across Derbyshire County PCT and Derbyshire Community Health Services, that a stakeholder/steering group is formed. Whilst caution should be shown in not creating a group that is too unwieldy, a group that has high-level PCT and arts/culture sector buy in, is crucial. Tying this to an explicit vision statement and framework for action, with realistic and achievable targets that brings together the PCT and DCHS alongside the arts sector, but acknowledges distinct priorities and mutual synergies. This cross-sector work, will enable achievable developments and long-term sustainability.

Additionally this gives opportunity for bringing in partners from Education and County/District Councils and Social Services departments working towards delivery on Local Area Agreements and more broadly Public Service Agreement targets. There are possibilities of developing a Cultural Champions scheme, where relevantly placed and skilled arts organisations will partner up with specific health settings to develop creative solutions to topics; whether environmental or issues based. There are clear short/long-term opportunities to develop hospital and clinic environments and as a result of this research, two short term, low-cost exhibitions will be placed within trust premises; photographic images from the Wellcome Collection, Images 08<sup>20</sup> and an MMU embroidery student series of responses to a health briefing around wellbeing.

To encourage further dialogue across the trust and wider community, it would be prudent to plan and deliver a showcase event that develops the findings of this paper further, with specific emphasis on the identified health needs, creative approaches to these issues and acceptable methods of evaluation. Similarly, it would be useful to identify an area of significant design concern that could be developed with the input of patients and staff. This would typically be a reception area of an older building and would enable dialogue to begin around this agenda and a manageable short-term project.

As part of the consultation process for this report, we facilitated a number of open sessions and met a range of health and arts practitioners. Whilst it isn’t realistic to include all feedback in this paper, some key issues raised in these discussions are provided here and come from strategists, practitioners and the public.

- > We need to link into schools and tie into the educator provider services, investing in children is an investment in everyone’s future.
- > This is a huge PCT, which makes communication really difficult; you need to set up a group that not only advocates, but also that communicates.
- > This work should be central to Social Marketing within the Trust.
- > Health work is generally quite directive, arts is collaborative. For real culture change, this will be a challenge.
- > Wellbeing is key and is never measured in health, illness is always measured.
- > There’s a danger of just funding projects, without any real determination for something more sustainable.
- > What is stopping this happening? Is it money? What are the barriers? Is it engaging with the arts? Is it culture change? If its money we can deal with that, especially if you’re talking strategic priority areas such as stroke or mental health. The trust is investing in these anyway.
- > We need action and there’s no need for parity; it doesn’t have to happen everywhere at the same time. What it has to do, is be shared across the trust; dissemination is the key.

Based on the conversations begun in this process, some key themes have emerged and some tangible opportunities for immediate action has been identified. But as with any new developments there are pros and cons. The following SWOT analysis takes into account all the constructive criticism that has been shared to date.

### Strengths

- > Responsive NHS Workforce
- > Strong Leadership
- > Robust networks in place
- > Increasing evidence base
- > Humanising health and social services
- > Community and enthusiasm.

### Opportunities

- > Increased Government investment in Third Sector (£42.5 million)
- > Arts Council England Grants opportunities
- > New build potential
- > Existing partnerships to tie into
- > Current Government drive for patient centered/owned services
- > Tie into Big Lottery regional research bid
- > Potential tool for NICE implementation
- > Potential Research for Patient Benefit Programme grant

### Weaknesses

- > Potential to be seen as an ‘add on’
- > Lack of clinically acceptable evidence base
- > Some arts practitioner sell their practice as a cure all
- > Not all agencies responded to this scoping
- > Projectitis (short-termism)

### Threats

- > Economic downturn
- > Competing PCT agendas
- > Communication
- > Size of community
- > Numerous arts organisations competing for resources
- > Apathy and fear of unknown
- > Risk averse NHS culture



## F. A WORD ABOUT EVALUATION

Following the Invest to Save: Arts in Health evaluation<sup>21</sup> of the impact of creativity, culture, the arts and health in 2007, there is a greater public understanding of the transformative impact of the arts.

But what constitutes evidence to the health community is often very different to the understanding of the arts community. What is clear, is that Derbyshire County PCT and Derbyshire Community Health Services are open to the potential of the arts as one of the means for achieving its strategic objectives and on the ground is refreshingly perceived as valuable in its own right. The New Economic Foundation, in their paper National Accounts of Well-being, call for a shift in what governments measure, away from purely economic indicators and a move towards measuring subjective well-being, commenting that;

*'National accounting indicators such as Gross Domestic Product (GDP) have only ever revealed a very narrow view of human welfare. Worse, they have obscured other vital parts of the economy: the core economy of family, neighbourhood, community and society...'*<sup>22</sup>

The US Presidential Candidate, Robert Kennedy in 1968, eloquently described the need to re-evaluate what it is in society that is important both to understand and measure;

*'The Gross National Product counts air pollution and cigarette advertising, and ambulances to clear our highways of carnage. It counts special locks for our doors and the jails for the people who break them... It counts the destruction of the redwood and the loss of our natural wonder in chaotic sprawl... Yet the gross national product does not allow for the health of our children, the quality of their education, or the joy of their play. It does not include the beauty of our poetry or the strength of our marriages, the intelligence of our public debate or the integrity of our public officials... it measures everything, in short, except that which makes life worthwhile.'*<sup>23</sup>

Evidence of impact and value for money are clearly of concern, particularly during a period of economic recession. But, as we begin to explore cultural change and new methods of engaging with the communities we work with, we mustn't lose sight of the essence of what it is we are aspiring to. Robert Kennedy's speech emphasises the need to maintain that core aspiration to health gain and ultimately, well-being. The number of layers to the arts and health community across the region, county and discrete locality's is complicated but has been valuable to unpick. It's useful within a

**“The arts may offer a subtle opportunity for delivery.”**

paper that is designed to have some level of practical application, to understand the strategic structures and issues in place, and synergies for potential partnership working. The breadth of arts and cultural activity taking place across the county is high, with a significant geographical spread of organisations engaged in activity that it is suggested, has an impact on health outcomes. The voluntary sector will play an increasing role in the delivery of public services and offers the NHS a valuable resource for engaging with communities. Organisations like Derbyshire LINK are receptive and actively pursue creative ways of connecting with health and social care providers. Within a climate that is pushing for Social Enterprise and Social Marketing; areas that still cause some confusion within the sector, the arts may offer a subtle opportunity for delivery.

There is a need to be realistic and we are not suggesting that the arts are an answer to all life's ills. They do however offer ways of humanising health services in both the manner in which they are communicated and delivered. A key point raised in the seminars informing this paper, was the need for action without being bogged down with the obligation for instant parity across what is a huge county. This contributor stressed the need for high quality activity in any locality where the need was great and the activity achievable, the emphasis being on sharing the practice and disseminating the learning to inform future developments elsewhere, promoting critical thinking and action.



## G. RECOMMENDATIONS

To take this work forward, it is the strong recommendation of the authors that a strategic group is convened to prioritise an achievable framework for action. This will consider:

- > The mental health and well-being of older people.
- > Well-Being Reading work with the Library Service
- > Revisioning corridors and waiting spaces across the PCT and DCHS
- > Influencing the design of new-builds and integrating the arts into PCT and DCHS developments, taking into account current and future opportunities
- > Identifying and resolving the design/arts issues around a hospital 'black-spot'
- > Pursuing funding through, amongst others; Arts Council England, EM, Grant Making Trusts and private partnerships; further exploring a percent for art in all new developments/builds.
- > Furthering research and development around older people
- > Supporting and enabling community consultation
- > Bespoke training programme for health, arts and community organisations
- > Creating structured opportunities for colleges, universities and community groups to exhibit
- > Showcasing local practice at an Arts at the Heart of Derbyshire Conference
- > The development of a Publicly Accessible database/network, possibly as a sub-section of artsderbyshire and emphasis networks, but with a local feel and connected into the new national network for arts and health
- > Exploration of an arts co-ordination/ consultation post within the PCT/DCHS
- > Engaging with the regional consortium and contributing towards the strategic development of a longitudinal piece of research for the region, whilst exploring Derbyshire arts/health research funding
- > Explore the potential of the arts as a tool to reinforce corporate identity
- > Understanding the arts in relation to disability and equality
- > Supporting the social marketing agenda



## H. CONCLUSION

The PCT and DCHS have committed health champions, high-level advocacy and a wealth of visionary practitioners. The potential synergy between the arts sector and wider community, offers gateways to the people of Derbyshire. There are gaps in these relationships, but ones that are easily bridged. To inform a deliverable strategic framework for the trust and partners to implement, it would be the strong recommendation of the authors that a small and committed steering group was formed, to explore funding opportunities and pursue a Derbyshire wide event that on the back of increased understanding, acts as a springboard for informing the development of practice.

**“The potential synergy between the arts sector and wider community, offers gateways to the people of Derbyshire.”**

Nationally the climate is right for this development and the PCT and DCHS are pushing at an open door. There is a real opportunity to be at the leading edge of this practice, by developing a cohesive framework that responds to genuine need. A robust approach to this work will produce a worldclass exemplar. The issues around an aging population, obesity and mental health are key areas of concern and should be considered alongside estate development and the express commitment to health gain.

The English artist Keith Vaughan writing on the purpose of art, commented that art had the potential, 'to reveal the possibility of order in areas hitherto seen as chaotic... (and) to reveal new aspects of human experience and force a rethinking of accepted beliefs'.<sup>24</sup>

Dr Gene Cohen, Director of the Centre on Aging, Health & Humanities at George Washington University, succinctly describes the potential of the arts in relation to dementia;

'The optimal treatment of the patient focuses not just on clinical problems but also on the individual potential of that person. It is only when problems and potential are considered together that health is best promoted and illness best cared for. This is the ultimate art and creativity of medicine and healthcare, bringing hope and clarity to situations that might otherwise be challenged by despair and confusion.'<sup>25</sup>

By opening up this agenda and rethinking accepted beliefs about how health services are delivered, Derbyshire County PCT and Derbyshire Community Health Services are not only aspiring to be fully engaged, but are nurturing the natural resources of its communities, focusing on its assets and as such, will enable culture, health and wellbeing to flourish.

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