



Keeping the conversation going: Culture, health and wellbeing round table

4th February 2019

Present:

Lily Asch	Real Talk Project
Lauren Blair	VHS
Sandra Brown	Eden Projects Communities
Joanne Brown	Generation Arts
Sarah Cameron	Senscot
John Ennis	GP Journeys in Design
Kristin Leith	Teapot Trust
Robert Livingston	Regional Screen Scotland
Siobhan McConnachie	National Galleries Scotland
Val Munro	North Edinburgh Arts Centre
Margaret O'Connor	Art in Healthcare
Tracey Passway	NHS Tayside
Mary Sinclair	Senscot
Jonathan Ssentamu	Waverley Care
Claire Stevens	VHS
Sarah Van Putten	Befriending Networks
Kiren Zubairi	VHS

Apologies: Lee Shennan and Lisa Baird- Scottish Government, Susan Brown-Marie Curie, Gail Aldam- Mental Health Foundation

Introductions

We started by sharing our various interests and motivations for wanting to 'keep the conversation going' about culture, health and wellbeing. VHS initiated the first conversation at the December 2017 meeting of the Cross Party Group on Health Inequalities and this led VHS to organise two round tables and the conference *Get the Picture: Culture, Health and Wellbeing* (November 2018).

We set out a wide range of interests:

- Social prescribing – for dementia and more
- Existing collaborations – e.g. Arts and Health Network Scotland, Senscot's cultural and health networks
- The role of art in the lives of people of different cultures, including Africans in Scotland
- Cinema as an inclusive and egalitarian medium
- Singing to bring together socially isolated people
- Employability and the arts in more deprived communities

- Health inequalities and the whole person (Prof Harry Burns)
- Arts as a means of agency for people
- Art therapy and research
- Role of health boards in meeting people's health, spiritual and artistic needs – treating patients as whole human beings
- Providing real access to and engagement with Scotland's national collections of art
- Social enterprises working in/across health and culture
- Mental health story telling
- Food as culture in its own right and as a gateway to people getting involved in other cultural activity/experiences

Creating momentum, galvanising action

Creative Health, the seminal report of The All-Party Parliamentary Group on Arts, Health and Wellbeing (UK Parliament) is gathering momentum/galvanising people. But it barely mentions Scotland and Scottish Government appears not to be actively engaged in the 'next steps' work underway in London.

Arts and Health Network Scotland (AHNS) is currently a very informal and voluntary network hosted on Facebook and with an annual event. Provides a platform for arts and health organisations and individuals to share knowledge, ideas and developments. Anyone can join online and post. Has a working group that includes Margaret O'Connor, Joanne Brown and others from NHS Greater Glasgow and Clyde, NHS Lothian, Tayside Arts and Health Trust and others. Health boards are encouraged to get involved.

Art in Hospital is planning a series of seminars about its work (Glasgow, dates in May tbc) and has offered to incorporate space/time for a AHNS network seminar.

As of 2017 England has the Culture, Health and Wellbeing Alliance, hosted within Arts Council England. A new arts and health research network for Wales was launched last week. The University of Winchester has an arts and health research group. The Royal Society for Public Health has an arts and health special interest group for its members. Arts and Health South West is an information, support and advocacy organisation "for everyone who believes in the value of creativity in enhancing health and wellbeing".

Without any similar (resourced and official) entity in Scotland to coordinate and engender action (and research) and with a lack of political interest we are lagging behind.

National and local health strategies

We agreed that Integration Authorities/Integration Joint Boards (IJBs) are absolutely key as the planners and commissioners of health and social care services at a local level. We discussed how to influence and get them on board and heard about developments being led by NHS Tayside. Recent funding decisions by Edinburgh IJB were the outcome of clear and strategic processes, that resulted in some voluntary organisations being funded for their arts based contribution to people's health and social care – but there were losers too. We need more IJBs to recognise and value “I feel better because of this cultural intervention” as evidence of a positive health outcome.

The Scottish Government's Mental Health Strategy disappointingly makes no reference to the role of volunteering or to the arts in mental health.

We should use the Chief Medical Officer's drive for Realistic Medicine (which challenges the over-medicalisation and over-treatment of patients) as a lever for change. High levels of interest in social prescribing should also be capitalised on.

What is valued as evidence

One barrier to progress is the clinicians who want to hold the arts to the same evidence standards as medicine (evidence arising from clinical trials etc). However, there are clinicians who do value qualitative research too and the Teapot Trust are observing a 'sea change' in academics' understanding and appreciation of the Trust's evidence about the impact of art therapy. Third sector/cultural sector have a responsibility to challenge existing paradigms about what constitutes good research and evidence.

Evidence that GPs increasingly 'get it' – see British Medical Journal December article: Arts for Better Health and Wellbeing.

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There should be a place for the messy plurality of evidence about art and culture.

Other networks and interests

Senscot is the umbrella body for social enterprises across Scotland and coordinates specialist networks for social enterprises involved in health, culture, sport, leisure, employability and community food. Focus is influencing, raising awareness of issues and peer learning. Agreed it would be good if the health and culture networks built links with Arts and Health Scotland Network. Other networks that may be helpful to link with to build momentum for a strategic approach to culture, health and wellbeing include Voluntary Arts Scotland and Scottish Community Alliance.

Noted that the Creative Industries Advisory Group chaired by Scottish Government 'never discusses health'.

Whose culture is it anyway?

Scotland's African communities have their origins in 36 different African countries, representing richly diverse cultures and languages. Cultural identity and perceptions vary widely. There are numerous barriers to access, representation and inclusion in 'mainstream' culture for many BEM people and to expressing and enjoying their own culture, and equally there are barriers to accessing and having a voice in health services.

Culture is still seen far too often as 'high arts' rather than as something 'that people do when they get together with others and makes them feel good'. Artists are already largely middle class, compounding the perception and the reality for other people that the arts is 'not for the likes of us'.

The draft Culture Strategy fails on a number of fronts but its delay and lack of an action plan is disappointing. The biggest influencers of culture are in other parts of Scottish Government and they need to understand the wider benefits of the arts. We agreed that we should remain optimistic, citing the journey the loneliness and social isolation strategy and the sport strategy took before emerging as robust documents. National Galleries Scotland's experience is that some schools have been using the 'closing the attainment gap' resources very imaginatively.

The closure of local halls and venues, the unaffordability and other barriers to access of other spaces, including schools have had a significant impact on cultural opportunities at a local, community level. Cultural activities themselves are being removed from communities: e.g. Midlothian Council has axed all instrument tuition.

What is our ask of the Culture Strategy?

The last Culture Strategy established National Theatre Scotland and cultural coordinators (the latter are no more). What will the new strategy deliver and what do we want? We are in danger of not asking for enough or anything at the moment! A properly resourced arts and health network or agency is necessary if arts and health are to be prioritised and have its place at policy, planning and resourcing tables. The loneliness and social isolation strategy (A Connected Scotland) includes the establishment of a Ministerial Strategy Group (Ministers only) and an Implementation Group (external stakeholders, chaired by Minister). We need similar for the Culture Strategy. Should we form an action group to pro-actively campaign for these things? Agreed involving Culture Counts would be good. The Arts and Health Scotland Network event in May is an important next step too.

Next steps

VHS will share these notes and everyone's contact details (all agreed and included below), will reach out to other organisations mentioned in discussion, including Scottish Government, and will liaise to agree what next steps could be taken collaboratively.

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