Mind, body, spirit: How museums impact health and wellbeing

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June 2014


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Acknowledgements

Thanks to all the groups and organisations and participants involved in this project and the evaluation.
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How we view health and wellbeing is changing. Health is increasingly recognised as a societal issue, linked to multiple and complex factors, persistent inequalities such as social and economic deprivation, and lifestyle. Prevention is as important as cure, and thinking about new ways in which we can learn to cope with, and adapt to, changes in health and wellbeing. This has opened up huge possibilities for museums and cultural organisations to engage with health and wellbeing. A growing body of evidence shows that museums can bring benefits to individual and community health and wellbeing in their role as public forums for debate and learning, their work with specific audiences through targeted programmes, and by contributing to positive wellbeing and resilience by helping people to make sense of the world and their place within it.

This publication reports the findings from a year-long action research project funded by Arts Council England (ACE) and initiated by the Research Centre for Museums and Galleries (RCMG), based in the School of Museum Studies at the University of Leicester. It sets out to show how museums are well placed to respond to changes in public health, using their collections to improve the health and wellbeing of individuals, to counter health inequalities within communities, and contribute positively to the goals of public health bodies.

The project responds to calls for advice, guidance and evidence which can help museums whatever their situation to explore the contribution they can make to the health and wellbeing of their communities.

In this publication we aim to expand the conversation, to advocate for museums and galleries making health and wellbeing part of their core activity. We do not intend to provide all the answers but will show how museums of different sizes and capacities, and with diverse collections, can make a meaningful contribution to the health and wellbeing of the communities they serve.

Names have been changed to protect the confidentiality of participants except where they are included in a professional capacity.
Growing health issues linked to global demographic changes and modern lifestyles are changing the way in which governments and supra-national organisations think about, and tackle, health and wellbeing. The role of museums and galleries in contributing to health and wellbeing is increasingly realised in policy and practice, but whilst there is increasing interest and activity in museums, health and wellbeing remains a relatively uncharted field with much more to be done.

Health concerns linked to global demographic changes and modern lifestyles

The costs of public health care are increasing, linked to demographic changes such as an ageing population. In addition, there is growing concern over health issues that are linked to modern lifestyles arising from a lack of physical activity, unhealthy diets, smoking and alcohol-related problems. At the same time, there is greater understanding of health inequalities linked to social and economic deprivation, social class (the health of the rich is improving faster than the poor), age, and ethnicity.

• Smoking is the single greatest cause of preventable illness and premature death in the UK. In 2011, smoking contributed to 22% of deaths in men and 14% of deaths in women aged 35 and over, including cancer, respiratory and circulatory diseases.

• Obesity (having a BMI of 30 or over) represents a significant global health problem, causing increased risk of diseases, cancers, disability and decreased life expectancy. It is associated with increasingly sedentary modern lifestyles, lack of physical exercise and the availability of high energy processed foods. The UK is the most overweight nation in Europe, and researchers predict that, if current trends continue, almost half of the UK population (around 48% of men and 43% of women) could be obese by 2030.

• Alcohol is a causal factor in over 60 medical conditions, including mouth, throat, stomach, liver and breast cancers, high blood pressure, cirrhosis and depression.

• An ageing population world-wide means more people living longer, but not necessarily in good health. Older people are vulnerable to social isolation and loneliness, reducing their quality of life and wellbeing, and are more dependent on care from others, including health and social care services. The growing burden of age-related chronic diseases is a pressing health issue - by 2050, 1 in 5 of the world’s 9 billion people will be aged over 60 years. In the UK, numbers of older people are projected to rise to 15.5 million in 2020 and to 19 million by 2050.

• Mental health issues can have a negative impact on health and wellbeing. According to the charity, Mental Health Foundation, 1 in 4 people will experience some kind of mental health problem in the course of a year, and depression affects 1 in 5 older people. In particular, there are concerns about the mental and emotional wellbeing of children, young people and adults who experience social and economic deprivation in their lives.

Political, social and global forces coming together to tackle these issues

a) Public health decentralised in the UK

‘Health is no longer the sole responsibility of the NHS (National Health Service), which cannot tackle health inequalities alone.’

Important changes to public health in the UK have been made to improve the health and wellbeing of the nation and reduce the costs of the NHS. Changes to public health include decentralisation of governance to local authorities, and a renewed emphasis on taking a people-centred approach. Identifying and evidencing key public health issues for local communities, and developing health and social care based on these needs, will be an important role for the new statutory Health and Wellbeing Boards at the local level, which bring together the NHS, public health and social care leaders in each local authority area to work in partnership.
b) Health and wellbeing as a societal issue

The idea of a societal, or holistic, approach to public health is not new, but ways of thinking in the medical profession have been shifting from thinking about health in terms of an individual medical model to the perspective of a community or holistic model. This model sees the factors (or determinants) of health and wellbeing as multiple and complex, influenced by individual lifestyle factors, social and community networks and general socio-economic, cultural and environmental conditions (see Figure 1).

Prevention becomes even more critical, as does health promotion and education. Rather than simply looking for medical cures to health problems, people are supported to live independent lives and take responsibility for their health and wellbeing, as well as that of their families and communities. Medical professionals like Dr Richard Smith, editor of the British Medical Journal (BMJ), argue that health should be about finding ways to adapt, make sense of and accept what is happening to us physically and mentally:

‘More and more of life’s processes and difficulties - birth, death, sexuality, ageing, unhappiness, tiredness, loneliness, perceived imperfections in our bodies - are being medicalised. Medicine cannot solve these problems. It can sometimes help - but often at substantial cost. People become patients. Stigma proliferates. Large sums are spent. The treatments may be poisonous and disfiguring. Worst of all, people are diverted from what may be much better ways to adjust to their problems.'

Source: Dahlgren and Whitehead, 1991

Figure 1: The factors determining health and wellbeing
Source: Dahlgren and Whitehead, 1991
c) Wellbeing and sustainable futures

We may have greater material wealth than in the past but our emotional health is not improving - we are not any happier. Current economic models seem increasingly limited when describing individual, community and national value and for ensuring a sustainable future. National and supra-national organisations are increasingly looking to wellbeing as an explicit policy goal and, for some governments, it has replaced material prosperity as the indicator of national value and success.

• The UN has passed a resolution on ‘Happiness: towards a holistic approach to development’ (2011), held an international conference on Happiness (2012) and commissioned the first World Happiness Report, which found that more important for happiness than income are social factors like the strength of social support, the absence of corruption and the degree of personal freedom.

• The Office for National Statistics in the UK has started to collect and publish a variety of statistics on national health and wellbeing.

Shifts in international practice: museums, health and wellbeing

Internationally, there has been increasing interest in the role that museums can play in contributing to health and wellbeing. There has been some scepticism, and not everyone is convinced. However, the evidence that museums can contribute to health and wellbeing is growing, leading to a critical shift in thinking in international museum policy and practice.

a) Museum policy and initiatives

Initiatives such as the UK Museums Association’s vision for the impact of museums, Museums Change Lives, Culture Unlimited’s publication Museums of the Mind: Mental Health, Emotional Wellbeing and Museums, and the Happy Museum project champion the role of museums in contributing to the health and wellbeing of communities. And not only from the museum perspective - a recent 2013 report by the Working Group on Arts, Health and Wellbeing for the Royal Society for Public Health - Arts, Health and Wellbeing Beyond the Millennium - endorses the benefits that museums and galleries can have for individual and community health and wellbeing:

‘Arts activities are being used to encourage individuals to take responsibility for their own health through lifestyle choices and a re-assessment of personal values.’
b) Museum practice

There is a growing body of museum practice addressing community health and wellbeing, health promotion and education and tackling health inequalities. Many of these projects are innovative or experimental, stimulating new ways of using collections or addressing specific themes, groups or issues.

- Manchester Museums and Galleries have an established programme of health and wellbeing initiatives and projects, including *Who Cares?*, a health and wellbeing project (2009-2011) run by health professionals, researchers, and six museums in North West of England including the Whitworth Art Gallery which created a therapeutic space within the gallery, providing a stimulus for curiosity, exploration, reflection and meditation, and *Culture Shots*, a week-long programme of creative events run in five Manchester University Hospitals, which supported the enhancement of professional practice and patients’ health and wellbeing.

- *Meet Me at MoMA* is the New York Museum of Modern Art’s programme for people in the early stages of dementia, or Alzheimer’s disease, and their carers, which is designed to make art meaningful and accessible. The aim is to give ‘those living with the degenerative disease an expressive outlet and forum for dialogue’.

The value of museums for health and wellbeing is being captured and evidenced, by practitioners and researchers, to convince others and stimulate further practice. Writing in 2002, Jocelyn Dodd (RCMG, University of Leicester) promotes the role of the museum as a public forum to explore health and social issues through their collections, to open up debate, show the complexity of health matters, and tackle challenging subjects. Helen Chatterjee (University College London) and colleagues have been engaged in extensive research to understand the contribution that museums and galleries make to individual health and wellbeing, such as through object handling, to map activity across the sector, and develop a generic methodological tool that would enable museums to capture and evidence the impact on participants’ health and wellbeing.

Bringing together a range of sources, the Royal Society for Public Health suggests a role for museums and galleries in building emotional resilience, morale and coping skills, strengthening identity and social inclusion.

c) Future directions

There is considerable practice and innovation in museums around health and wellbeing but still much untapped potential and more to be done. There is increasing understanding of how taking part in a cultural or creative activity can have a demonstrative and measurable impact on mental and physical health and wellbeing, or how regular cultural attendance (visiting a museum, art gallery or attending a concert) provides ‘a distinct stimulus to human beings that has an impact on their wellbeing to such a degree that it prolongs their lives’. However, many questions still need to be asked, making it an exciting time for museums.
This publication was born out of a year-long action research project, *Museums, Health and Wellbeing*, focused around the creation of a network of museums in the East Midlands region of England. Funded by Arts Council England, the project enabled five museums from the region to develop projects which would contribute to the health and wellbeing of their communities.

**a) The East Midlands region**

The third largest region in England, the East Midlands has a relatively small population compared to the other English regions with just over 4.5 million people in 2011 (only the North East has a smaller population)\(^4\). It is comprised of six counties, Nottinghamshire, Derbyshire, Lincolnshire, Northamptonshire, Leicestershire and Rutland (Figure 2), which vary greatly in population size (Figure 3). The region is at heart rural in character, with some 81% of the land area used for agriculture\(^1\), with larger urban centres concentrated around the cities of Nottingham, Leicester, Derby and Northampton.
The health and wellbeing profile of the region is close to the average for England, with pockets of health and social inequalities which are closely linked to deprivation. For example, the health of people living in affluent areas like Harborough, Rushcliffe and South Northamptonshire is generally better than the health of people in less affluent areas like Nottingham, Mansfield and Derby. Priorities for the region are to address these health inequalities, along with tobacco and alcohol use, obesity and lack of physical exercise, affordable warmth and the health of children and young people.\textsuperscript{43}

There are around 230 museums (of which about half are Accredited) in the East Midlands including larger city services as well as a significant number of smaller, local authority and independent museums. Many of these smaller museums are located in rural and semi-rural areas and many are run by volunteers. Figure 4 shows the five museums participating in the project: Crich Tramway Village & Museum in Derbyshire; New Walk Museum & Art Gallery in Leicester; The Cottage Museum, Woodhall Spa in Lincolnshire; Kettering Museum and Art Gallery in Northamptonshire; and Nottingham City Museums and Galleries.

Figure 3: Population totals for the East Midlands counties

Figures 4: Location of five participating museums in Museums, Health and Wellbeing
b) The Network

The Network brought people together from different museum contexts in collaboration with partners from public health, adult social care and Children’s Hospital School, Leicester to explore how museums can support the health and wellbeing of their communities, and contribute to health and wellbeing agendas.

An open process, the Network helped to stimulate new thinking, enabled participants to try new things, and to take risks within a framework:

‘Because the project was set up as a research project, I felt very much we were coming at it from that angle… it wasn’t just about achieving these projects and getting an outcome. It was about the whole process being a learning process, a learning curve for all of us.’

(Jo Kemp, Nottingham Museums and Galleries)

Exposed to new partnerships, recent research and ways of thinking, the Network enabled experimentation and the generation of new ideas. It encouraged ambition and developed confidence by giving participants time to talk and reflect, and to develop their project ideas with support from mentors Esmé Ward and Wendy Gallagher from Manchester Museums and Galleries. Participants were inspired by visits to Islington Museum and the Wellcome Collection, and listening to guest speakers Mike White from the University of Durham and Helen Chatterjee from University College London, who have extensive experience working in the area of museums, arts and health.
4. RESPONDING to HEALTH and WELLBEING NEEDS

By starting with their communities, museums can begin to locate evidence of health and wellbeing need, expanding out to national and global policies and initiatives. Museums cannot do this work alone and to make the right partnerships, they need to be aware of how public health is organised in their area. Collections are at the core of this work; sometimes these are collections with direct links to health matters but also those collections with no direct link can be used to stimulate discussion, encourage creative thinking and reflect on personal identity.

a) Locating evidence of need

‘Arts and health not only provide a unique empowering approach to engage with individuals or groups, but also enhance human abilities to take responsibility for their health and wellbeing and support sustained behaviour change.’

Responding to health and wellbeing needs means museums are looking outside the institution and starting with the needs of their communities. Being aware of community needs helps museums to focus their attention on how best they can use their collections, programmes, exhibitions and collective experience to meet those needs. As our project in the East Midlands demonstrated, this can be done in a number of ways - there is no one approach.

Local health issues also resonate at the national and global level. Museums need to be mindful of these as finding evidence of wider policies, initiatives and practices may lead to helpful partnerships, networks and new ways of thinking about health and wellbeing issues:

- Global health concerns include an ageing population, increases in diseases such as heart disease and diabetes (with increased risk from poor diets, being overweight, lack of exercise and smoking), and an increase in mental and behavioural disorders such as depression, anxiety and drug use.

- National governments are increasingly adopting approaches to measuring the health and wellbeing of their populations, including New Zealand, Germany, Bhutan, Japan, and Korea. In the UK, the focus is on reducing preventable deaths associated with modern lifestyles and health inequalities, for example smoking, drinking, lack of physical exercise, sedentary lifestyles, poor mental health and unhealthy diets. Public Health England is leading the new public health service, and for the public health practitioners involved in our project, the following priorities are critical:
Public Health England priorities

• Helping people to live longer and more healthy lives by reducing preventable deaths and the burden of ill health associated with smoking, high blood pressure, obesity, poor diet, poor mental health, insufficient exercise, and alcohol

• Reducing the burden of disease and disability in life by focusing on preventing and recovering from the conditions with the greatest impact, including dementia, anxiety, depression and drug dependency

• Protecting the country from infectious diseases and environmental hazards, including the growing problem of infections that resist treatment with antibiotics

• Supporting families to give children and young people the best start in life, through working with health visiting and school nursing, family nurse partnerships and the Troubled Families programme

• Improving health in the workplace by encouraging employers to support their staff, and those moving into and out of the workforce, to lead healthier lives

• Promoting the development of place-based public health systems

• Developing our own capacity and capability to provide professional, scientific and delivery expertise to our partners

How did the museums involved in the project respond to local health and wellbeing needs?

In the UK, the health and wellbeing of communities can be affected by environment and place, levels of social and economic deprivation, employment and education opportunities, community networks and relationships, levels of trust and social capital (e.g. sociability, trust, reciprocity and civic engagement). In the East Midlands, we used evidence from the multi-agency Health and Wellbeing Boards to find out the health and wellbeing priorities for the region. The Health and Wellbeing Boards are responsible for producing the Joint Strategic Needs Assessment (JSNA) and Health and Wellbeing Strategy, which outline and evidence the public health priorities, and the current and future health and wellbeing needs of the local population across the region.
Encountering the Unexpected: reaching older people in Lincolnshire, Northamptonshire and Derbyshire

The need to keep older people active, physically and cognitively, and involved in social activities, was behind the Encountering the Unexpected project. Keeping physically and socially active, maintaining cognitive and emotional health, living happy and fulfilled lives and staying independent is important to the health and wellbeing of older people, which can be seriously affected by factors such as depression, cognitive decline, social isolation, poverty, disability, increasing frailty and vulnerability to injury.50 Encountering the Unexpected involved smaller museums from Derbyshire, Lincolnshire and Northamptonshire taking their collections out to engage and interest older people living in the community and in residential or care homes. Each county has made the health and wellbeing of older people an important priority.

With a growing elderly population, some of whom are living in social isolation, Lincolnshire’s priority is to make sure that older people have more choice and control, receive the help they need and are valued and respected within their communities.51 The Cottage Museum, Woodhall Spa is part of the district of East Lindsey which has the largest proportion of older people aged 65 and over in the East Midlands (26 per cent).52 Objects were chosen for their curiosity value, intended to stimulate creative thinking, questioning and encourage active minds amongst older people.

In Derbyshire, the Health and Wellbeing Strategy for 2012-2015 aims to give older people the right support in the right environment to help them enjoy a good quality, active, healthy and fulfilling life.53 Crich Tramway Museum in the Amber Valley worked with an intergenerational group of older and younger people, using their collections to explore the theme of life journeys, dreams, memories and independence, at the same time as strengthening social ties amongst the group.

Northamptonshire’s Health and Wellbeing Strategy prioritises maintaining the independence of older people, keeping them happy and healthy at home, and providing services to support older people with dementia and depression. The town of Kettering has an older population compared to the county average, projected to increase over the next ten years to 1 in 5 people aged over 65, and the project with Kettering Museum and Art Gallery worked with older people living in residential or care homes.54 Collections of objects familiar to older people from their childhood and younger days were used to invite discussion, make connections between the past and present, and create an enjoyable, sociable experience.
Live Today, Think Tomorrow: tackling smoking prevalence in Nottingham

Smoking has been identified as the main contributor to Nottingham’s low life expectancy, a major cause of death from cardiovascular disease, chronic lung disease and cancer. At 28%, smoking prevalence in Nottingham is higher than the national average of 20% (Figure 5): although it has fallen from 39% in 2008, the city council wants to reduce this to 20% by 2020. Ranked as the thirteenth most deprived local authority in England (out of 324), there is a clear link in the city between poverty and smoking prevalence, deaths from smoking contributing to half the life expectancy gap between the most and least deprived areas. The high prevalence of smoking in the city may also have a connection to the presence of the John Player & Sons cigarette factory, once one of the larger employers in Nottingham.

The extensive John Player & Sons Archive, which is held by Nottingham City Museums and Galleries, presented an opportunity to use a historical collection to address a contemporary health issue - to reduce smoking prevalence in the city. Using the rich collections from the John Player & Sons Archive, which includes striking adverts and packaging produced at a time when the dangers of smoking were not so well known, Nottingham’s project developed and piloted a set of resources which could be used with schools and youth groups. Most people start smoking when they are teenagers, on average around age 16-17, so interventions are increasingly focused on trying to stop young people from starting smoking in the first place. Critical to this project was the involvement of Peer Mentors (photographed opposite), young people who understand the pressures and anxieties facing their peers, making them more effective at getting the message across to young people. Instead of lecturing young people about the dangers, Peer Mentors focus on raising the issues around smoking, encouraging young people to engage with these issues and to make their own (informed) decisions about smoking.

Figure 5: Smoking prevalence in Nottingham compared to the national average, 2006-2011
b) Using museum collections

Collections are at the core of museum initiatives to address health and wellbeing. Whilst some collections have obvious links with health and wellbeing themes, all collections have the potential to be used in this work and our projects used a mixture of collections from trams and travel, 1950s domestic items, costumes, to ‘world culture’ artefacts. These were used to engage participants with objects, to pose questions, stimulate thinking and curiosity, and encourage them to take part in a social experience - all of which contributed to positive (mental) wellbeing.

Body, Mind, and Spirit: museum collections and hospital schools

When picturing a hospital school, we might think of children lying in a hospital bed. However, hospital schools provide a much wider range of services to children and young people whose medical needs prevent them from attending their home school. Alongside education for children and young people in hospital, Children's Hospital School, Leicester provides a day school for children unable to attend their own school because of ill health, provides education within the adolescent psychiatric unit, and an outreach service for children and young people who are taught in their own homes.

Young people in hospital schools face serious challenges to their health and wellbeing, including profound and recurrent medical, psychological and emotional needs. Many have a limited range of life and cultural experiences because of illness, which Children's Hospital School, Leicester sought to address in partnership with New Walk Museum & Art Gallery. Encounters with objects were used to develop a website Body, Mind and Spirit (www.journeyintothemuseum.co.uk) which can be used by children and young people in hospital schools unable to visit a museum to create their own cultural experiences. Designed as a ‘journey of discovery’, young people can access objects in a museum store cabinet through layers of media - exploring the objects visually and up close, through sound, interrogating the objects through the themes of body, mind and spirit, and uploading their own content (text, videos, objects) to the site.

The project with New Walk Museum & Art Gallery acted as a pilot to develop the website, enabling young people to connect museum objects with their own wellbeing and identity through the themes of body, mind and spirit. A group of students able to leave the school made two visits to New Walk Museum & Art Gallery to explore the collections and objects on display, facilitated by the museum’s learning team. With their selected objects, the young people used a series of questions (both contextual and imaginative) to respond to the themes of body, mind and spirit, thinking about the connections between the object and their personal identities, and prompting invaluable new insights to objects for their teachers and museum staff:
‘We were in tune with the fact that if you’re a child, you can ask those questions that adults forget to ask… It might get the curators thinking more about the physicality of who we are and what we actually bring to a process of understanding things.’ (George Sfougaras, Headteacher, Children's Hospital School, Leicester)

It is an ambitious project, with interest from the National Association of Hospital School Leaders network to extend the website to more hospital schools, and, potentially, more museums across the UK, and internationally through the Children's Hospital School, Leicester involvement with the LeHo European project (Learning at home and in Hospital), from 2013-2016.
c) Partnerships

Working in partnership is critical for museums to address health and wellbeing. To form the right partnerships, museums need to be aware of how public health is organised in their area. For our project, this meant understanding how in England, local authorities are responsible for improving health in their local communities in collaboration with partners including GP-led Clinical Commissioning Groups, public sector organisations and charities. Museums are well placed to get involved - it is a matter of finding the right people.

- Marie Billyeald, Service Manager for Prevention, Adult Social Care, part of the local authority in Derbyshire, was keen to work with museums like Crich Tramway Museum to develop projects that keep older people independent and living in their own homes for longer.

- Nottingham City Museums and Galleries (NCMG) worked with Kate Thompson, Smokefree Nottingham Co-ordinator and Public Health Development Manager, Ellyn Dryden, who advised them on how best to use the John Player & Sons Archive to tackle smoking prevalence in the city.

- As part of Kettering Borough Council, Kettering Museum and Art Gallery worked to reach older people living in sheltered accommodation and care homes.

- The Cottage Museum, Woodhall Spa worked with Age UK and Tanglewood Care Homes to reach older people across Lincolnshire. Both partners are keen to build on the activities that have taken place as part of this project.

As well as making partnerships, maintaining them is important. They need to be nurtured, negotiated, and time is essential for thinking through ideas and finding common ground. It can lead to new ways of thinking beneficial to both partners:

‘I hadn’t thought about [museums] in any particular detail before I was approached to do this project. So from a personal point of view, and my role in prevention, what this project has done is open my eyes to the use of museums in this way. And it’s a completely different angle to anything else that’s being delivered at the moment.’ (Marie Billyeald, Service Manager for Prevention, Adult Social Care, Derbyshire County Council)

Programmes not projects: reflecting on practice

Here Jo Kemp, Learning, Engagement & Collections Manager, reflects on Nottingham City Museums and Galleries’ journey into health and wellbeing.

Health and wellbeing has been a thread running through the community engagement work at Nottingham City Museums and Galleries (NCMG) for the past 20 years. Very broadly speaking, the range of health and wellbeing work we have covered includes mental health, physical health, age-related health and disability-related health (learning and physical). However, it was not until the Museums, Health and Wellbeing project that I realised health and wellbeing was not an overt objective, nor had we maximised its potential.

Work started in the early 1990s, driven by Jocelyn Dodd, then Education and Access Manager. This was also a period when the Outreach Officer in post had come from an NHS role, and therefore had plenty of useful connections and ‘ways in’ to key contacts within the health authority. Health was the main focus of our work during the 1990s and early 2000s, and in particular the broadest understanding of wellbeing. There was an Anti-Poverty Strategy for Nottingham in the early 1990s and from 1999, Nottingham was a Health Action Zone (HAZ), receiving additional Government funding to tackle ill-health that results from poverty. Our engagement work aligned closely with that, targeting and engaging Nottingham’s hardest to reach communities in activities aimed at developing their creative skills, encouraging social interaction, developing their interest in arts, culture and heritage - and, through all of that - raising their self-esteem and confidence.
Our programme for community engagement began to take shape alongside and in response to health agendas; we developed programmes for older people such as tea dances and reminiscence sessions; sessions for mental health service users to express their thoughts and feelings through their artwork; projects for new mothers and their children led by a very culturally engaged midwife and events for ex-smokers needing distraction activities. Ground-breaking exhibitions included *Our Bodies Ourselves*, an exhibition by women photographers on the subject of health, and *Sexwise*, an exhibition supported by a programme of outreach sessions to address high levels of teenage pregnancy in Nottingham. We designed programmes which utilised our unique collections and also our wonderful outdoor spaces, in particular, our grounds at Wollaton Hall were popular for ‘walks on prescription’. Other sessions focused on healthy eating through facilitated bread baking sessions at Green’s Windmill and utilising interesting, sometimes baffling, medical items from our Community History collection. These were popular programmes while they lasted, but sadly, as is the case with many short-term funded projects, there were no long-lasting partnerships made for sustaining such activities linked to NHS referrals.

By the mid 2000s there had been a change of personnel delivering our community engagement programme and a change of focus for Nottingham City Council. Children and Young People and Adult Learning became our mantra - still under the broad theme of wellbeing, but more about skills development than addressing health agendas. We worked with children and young people from difficult and challenging backgrounds; those in, or just leaving, care, excluded from school, attending an alternative curriculum, and with behavioural and learning difficulties. Programmes focused on media that young people were interested in - photography, film-making, music, creative writing, spoken word and fashion-related projects. Positive mental health and wellbeing was the agenda for most of these projects, aimed at increasing the young people’s confidence and self-esteem through providing new experiences for them.

Our Adult Learning programme partnered with local colleges to support the delivery of basic skills courses - our buildings, grounds and collections provided ample creative material for this. We continued to explore exciting avenues through working with hard to reach communities such as prison residents, who we involved in a creative learning programme. Other adult programmes addressed the needs of a much older population, those residing in care homes and visiting day centres, and enabled people in the last months and weeks of their lives to express themselves through creative writing in response to the museum collections.

More recently, Renaissance East Midlands ran a funded programme, *Museums of the Mind*, to encourage museums in the region to work within the mental health realm. This was not a new area for us, but working with patients suffering from dementia was. The *Suitably Sensory* project enabled the development of a loans box containing items that were appropriate for dementia patients and their carers. Renaissance funding also enabled another innovative sensory project, the production of a multi-sensory installation for the Long Gallery at Nottingham Castle.

*Museums, Health and Wellbeing* prompted this review of Nottingham City Museums and Galleries’ previous and current work, and I was surprised by the volume and the range we have achieved over the past 20 years. Perhaps similar to other large local authority museums, we had, to some extent, lost sight of a clear vision due to ever expanding and changing demands and agendas. We had an inspiring and enlightening day working with Esmé Ward, who had been engaged as a consultant on the project. A time to reflect and to have rationales questioned, made us realise that for too long we have tried to cover all bases. Focusing on health and wellbeing as a way forward, builds on our successful work to date and gives us a framework through which to shape our future programmes.
The Five Ways to Wellbeing are a set of evidence-based actions to improve and promote personal wellbeing. They were developed by New Economics Foundation (NEF), who were commissioned by the former UK Government’s Foresight project on Mental Capital and Wellbeing in 2008.57

The Five Ways to Wellbeing provide a useful framework to inform how museums can think about, contribute to and enhance health and wellbeing.

What do NEF mean by ‘wellbeing’? The concept of wellbeing consists of two elements - feeling good and functioning well. Feeling good means that we experience feelings of happiness, contentment, enjoyment, curiosity and engagement. Functioning well means that we have experience of positive relationships, have some control over our lives and a sense of purpose.

The Five Ways are founded on the premise that mental health is intrinsic to wellbeing - a positive state of mind and body, feeling that you can cope, feeling safe, and feeling connected to people, your community and the wider world.58 Each action (connect, take notice, give, keep learning, be active) contributes to wellbeing in a positive way, making people feel good and boosting their ‘mental capital’ - including resilience (ability to adapt to change), self-esteem, cognitive capacity, and emotional intelligence. Another important aspect of the Five Ways to Wellbeing is social participation. Evidence shows that for people of all ages, relationships are critical for promoting wellbeing and acting as a ‘buffer’ against mental ill health.

How are the five ‘actions’ connected?

‘For example, ‘giving’ by doing something nice for someone will, in most cases, provoke a thank-you, which increases a feeling of satisfaction and the likelihood of doing something nice for someone again. Alternatively, learning something new (like how to cook your favourite food) may lead to a sense of achievement and, as a result, a greater sense of competence and autonomy, which, in turn, leads to feelings of contentment and self-worth. This is reflected in research findings showing that simply having positive emotions changes how people think and behave and enhances psychological resources like optimism and resilience.59

Figure 6: Connection between the Five Ways to Wellbeing, wellbeing, good functioning and mental capital60
The Five Ways to Wellbeing are valuable because they are based on evidence, they show ‘what works’ for positive mental wellbeing. It is a framework which sits comfortably with public health bodies and with museum practitioners, as we found through the Network:

‘It’s like the lights have just been turned on… it just turned the way that you think with regards to everything that you’re providing, the service you’re providing for people and how it can create a balance to their lifestyle.’

(Lisa Jacques, Learning Officer, Contemporary Visual Arts, Leicester Arts and Museums)

The Five Ways to Wellbeing were used in the three museum projects as a new lens to shape museum activity, including planning activities for the sessions with participants and describing potential outcomes. The Five Ways to Wellbeing formed an integral part of the planning for the three museums involved in Encountering the Unexpected. The project objectives for each of the museums were directly linked to the Five Ways to Wellbeing - shown here are the project objectives used across the three museums.

Project Objectives

• To offer learning opportunities and activities that encourage people to connect with people and ideas (connect and learn)

• To provide new experiences through encounters with objects through enjoyable social activities (take notice)

• To provide opportunities for people to give, take ownership and achieve (give)
Collections are at the core of museums’ work on health and wellbeing. They are what give museums their unique role and contribution to health and wellbeing, both in the qualities that objects possess and the uses to which they can be put. Increasingly, research suggests that there is something very important about the bodily, cognitive and emotional connections that objects enable us to make, and which are linked to positive wellbeing. We need to convince more museums of the value of health and wellbeing initiatives and convince public health practitioners of the value of museum objects.

**a) The qualities of objects**

Most collections have qualities which can work well for health and wellbeing projects, providing opportunities for tactile engagement and playful encounters. There is something in the material properties of objects that gives them intrinsic value, encouraging active thinking and imagination. When participants are invited to touch and to hold objects, to work out what they are for (as in the *Encountering the Unexpected* project), one starts to see how this sparks curiosity and interest - you see people turning objects over, feeling their weight, asking questions of the person next to them, trying to open objects (if possible), to smell them, listen to them, examine the object closely. Objects may be familiar or unfamiliar, and different objects will spark different reactions depending on the person handling them.

- At an Age UK taster event in Maplethorpe, Lincolnshire, participants were invited by The Cottage Museum, Woodhall Spa to look into the drawers of a small Edwardian chest filled with objects, to handle and talk about the objects inside in their own way and at their own pace. Participants commented on the physical properties of the objects - ‘heavy’ and ‘cold’ - and talked about their expectations of what they would find in the drawers. Surprise, curiosity and intrigue to find out more were shown in these moments of exploration. Different levels of confidence were shown by participants when looking at objects. Some people wanted to assign a function, label an object whether it was ‘right’ or not. They made up their own minds. Others were interested to learn from other people about the object’s history or function. Verbal feedback from participants included ‘fascinating’, ‘exciting’, ‘testing my memory’, evidence of their active engagement.

The link between object handling and wellbeing is not completely clear, but holistic ways of understanding health and wellbeing, which connect body and mind, suggest that the bodily connections made through touch and other senses stimulates cognition and emotions, acting as a trigger for thoughts, ideas, feelings and memories. We learn through our bodies, and one of the routes to positive wellbeing is to ‘keep learning’. Chatterjee, Vreeland and Noble (2009) found that object handling triggered two main responses - people talked about themselves and their ideas, or they wanted to learn about the objects. This interaction helped to promote positive feelings of wellbeing in most people.

Another important property of objects is their age and their ‘authenticity’ - they are the ‘real thing’. They provide a connection to the past, to lives lived long ago, to the people who made, owned or used the object - giving some participants the feeling of being in another context or time. This can promote positive feelings of belonging, feeling part of the continuity of time or a wider context, or help people to understand their place in the world.

Studies have also shown the value attached to being allowed by the museum to touch these valuable and historical objects - it is a privilege, which has also been linked to engendering positive feelings of value and self-worth.

- At New Walk Museum & Art Gallery, students from Children’s Hospital School, Leicester were invited to handle 3,000 year old Egyptian amulets from the collections. Their teacher, Denis Root, described the excitement that it engendered in the students to be able to make a connection with the past, to work out what value such objects had to people ‘that are long gone.’ It was not only a spiritual exercise, getting into the mindset of an ancient civilisation, but the sheer excitement of coming into direct contact with something so old: ‘In the end the kids you are talking to today... you talk about the 1990s and that’s a long time ago to them. You then mention 3000 years ago, that’s pretty exciting stuff, isn’t it?’
She stood at the altar
A maiden so fair
She spoke with her lips
But her heart was not there
She stood at the altar
As her brain it was rocking
As she thought of the terrible
Big hole she had in her stocking

A. E. Mansfield
The comments from the students showed they appreciated this chance to make a connection with the past. Abby thought it was ‘cool, it’s like you’re touching part of the past. You think maybe an Egyptian touched that at some point.’ Daniel described it as ‘awe-inspiring’, amazed that he was allowed to touch real, ‘precious objects, knowing that not many people will have handled these’.

• In Kettering, however, ordinary domestic items from the 1950s were used with older people living in sheltered accommodation and care homes. It was the link to the ordinary that enabled participants to make connections with the objects, which included string shopping bags, hand food mixers, lavender soap, compact for face powder, recipe books, hats, shoes and glasses. There was some amusement as to why the museum would collect such mundane objects, one participant commenting that they ‘had thrown stuff better than this away’, but the objects generated lots of interest. Although some groups started off looking at the objects in silence, with participants lacking the confidence to handle the objects, by the end of the sessions, people were talking and laughing, trying things on (hats, glasses) or taking an interest where before they had been reluctant.

b) Many ways to use collections

Museum collections can be used in so many different ways to promote health and wellbeing, contributing to improved quality of life, reduced social isolation and cognitive and emotional stimulation. It is not only the qualities that objects and collections have which promote health and wellbeing, but the themes and subjects that they represent or can connect with, which includes contemporary health concerns and issues. Collections can be used for health promotion and education, for directly tackling social issues or working with communities that are experiencing health and social inequalities in their daily lives. Here we show some of the ways in which collections can be used.
Using collections to address health and wellbeing issues linked to a specific group

In *Encountering the Unexpected*, museums went out into their communities with objects to respond to the need to keep older people active, independent, living fulfilled lives and feeling valued and respected in their communities. Objects were used to provoke interest and discussion, encouraging playful encounters and give them something to talk about with others, particularly for those who are less independent or living in care homes. However, it was not only discussion around themes that the objects represented (which included domestic items, costume, 1950s homeware and objects associated with ‘going out’, objects related to trams and journeys) but an opportunity to address personal issues of health and wellbeing in a less intimidating way than asking direct questions. Marie Billyeald, Service Manager for Prevention, Adult Social Care at Derbyshire County Council explains: ‘You tend to find that people get talking a bit easier when they’ve got something to talk about... It encourages people to talk about things and takes the pressure off them personally.’ It links to research which shows how objects can be used to raise sensitive issues whilst keeping the dignity and self-respect of the individual. Skilled facilitators used the objects to raise questions, maintain interest, and keep minds active, encouraging creative and imaginative connections to be made. Making social connections was also important by working in small groups and encouraging individuals to work together to find out about the objects, and to create a positive, relaxed atmosphere in which people could enjoy themselves and get to know each other better.

Making meaning from collections - of objects, yourself, and the world around you

Collections invite meaning to be made, not just of the object but of the person exploring the object. Research shows that objects stimulate people to create their own stories, trigger memories and encourage interactivity, which can help to influence mood, self-worth or general sense of wellbeing. This was the approach taken in *Body, Mind, Spirit* which used objects to help young people in hospital school, who have very different life experiences to their peers, think about their identity and wellbeing. During a visit to New Walk Museum & Art Gallery, young people were invited to handle and to make connections with objects, using questions to stimulate responses linked to the three themes of body, mind, spirit. For example:

**Body:** What is this object made from? What does it feel like? What might it be like to be this object?

**Mind:** What is the context of this object? What does this object remind you of? If this object did not exist, would we have to invent it?

**Spirit:** How does this object make you feel? What amazes you about this object? What special value could this object have for a previous owner?

Questions of body, mind, spirit (who we are, what we are, where we come from) are important to all of us in our interpretation of life events and experiences. But these questions become particularly complex and poignant for children and young people experiencing mental health issues or physical impairment:

‘Mind, body and spirit are of course affected by the way that we look, are, feel, but the complication of illness, the challenge of illness, was the thing we wanted to bring out... to capitalise on the challenges and insights of young people who are complex, who have got health problems’ (George Sfougaras, Headteacher, Children’s Hospital School, Leicester)
The importance of understanding ourselves, and the world around us, is seen as fundamental to health and wellbeing - as the quote from Richard Smith (p.5) suggests, if health is about adapting (resilience) and making sense of yourself and what is happening to you and others, this is a critical role for museums that could be developed more.

The importance of having autonomy and independence to make meaning of objects is further underlined by wellbeing research which suggests that good functioning includes having some control over one's life. Effective sessions were designed to encourage people to feel in control and make their own choices about what objects to look at, what objects to touch, to influence the flow and focus of the session but also to share, listen and discuss with others (*Encountering the Unexpected, Body, Mind, Spirit*).

**Health promotion and education**

Using collections to tackle health and social issues and inequalities, and promote health agendas, is not a new thing for museums, including Nottingham City Museums and Galleries (NCG). An earlier exhibition and outreach project, *Up in Smoke*, raised awareness of the impact of smoking on people's lives, past, present and future. For *Museums, Health and Wellbeing*, NCG used the extensive collections from the John Player & Sons Archive to address the problem of high levels of smoking in the city, and contribute to the city council’s aim of reducing smoking prevalence to 20% by 2020. Working with Kate Thompson of Smokefree Nottingham, and Ellyn Dryden, Public Health Development Manager, NCG explored how they might use the collections to respond to the health ‘problem’. There are many challenges associated with using the collections, for example Smokefree Nottingham are concerned to avoid showing images of people smoking like those that appear in many of the older adverts. However, a focus group held by the museum (attended by participants from a range of backgrounds including public health, archives, museums and researchers in marketing and history) was very positive about the power of artefacts like advertising and packaging to convey an anti-smoking message, if used provocatively.

Current approaches in public health focus on young people and preventing them from starting to smoke in the first place and NCG’s project focused on developing and piloting a set of resources that could be used to inform young people of the dangers of smoking and get them to think about the implications of smoking for their health and wellbeing. The resources are a mixture of activity, fact and debate which, rather than lecturing young people about the dangers of smoking, intend to stimulate thinking and discussion. Key to this approach is the use of Peer Mentors who understand the experiences young people are going through and can get the message across in an engaging and relevant way. The collections were used to powerfully show how cigarette companies have persuaded, even manipulated, people to buy their products through the glamour of their packaging, or to link cigarette smoking to positive health and wellbeing, for example, it relaxes you, it makes you feel better, and even improves your fitness.
Evidence of impact and outcomes from museum health and wellbeing work is important - it helps to give the work credibility and demonstrates that museums can make a difference. Evidence can improve practice and encourage funding. It shows us what works, for whom, and in what circumstances. To be valued by public health organisations, evidence needs to be rigorous and robust as well as ethically responsible (especially when vulnerable groups are involved). Finding a common language to describe the impact and outcomes of museum projects on health and wellbeing that has resonance across the museum and public health sectors is therefore critical. Tools that have been used and tested in the UK include UCL’s Museum Wellbeing Measures toolkit and the Warwick-Edinburgh Mental Wellbeing Scale.

In the UK, it is increasingly accepted that both quantitative and qualitative research methods are needed to give a complete picture of the impact on participants’ health and wellbeing. Here, we give a flavour of the methods we used and the evidence we collected for our project.

**a) UCL’s Museum Wellbeing Measures Toolkit**

The Museum Wellbeing Measures Toolkit was developed by UCL to capture evidence of impact on participants’ wellbeing, responding to the need for museum-focused measures of wellbeing (following similar measures as the Museum, Library and Archive Council’s Generic Learning Outcomes and Generic Social Outcomes). The toolkit contains Generic Wellbeing questionnaires and Positive and Negative Wellbeing Umbrellas in generic and specific versions for older and younger adults.

The Wellbeing Umbrellas (see photo) were used to capture evidence from participants in two Museums, Health and Wellbeing projects - Encountering the Unexpected and Body, Mind, Spirit. The questions are adapted from clinical scales which measure psychological wellbeing, but are designed to be shorter and more effective for using in situations where time is limited. There are two Wellbeing Umbrellas that can be used with participants, one with six positive emotions (active, alert, enthusiastic, excited, happy, inspired) and the second with seven negative emotions (anxious, distressed, irritable, nervous, scared, unhappy, upset).

Both Wellbeing Umbrellas were developed to capture changes in positive and negative feelings by measuring these feelings before and after a session. Participants are asked to rate how they feel for each emotion on a scale from 1 (not at all) to 5 (extremely). Extensive piloting by UCL has demonstrated the value of the Wellbeing Umbrellas for collecting evidence from participants:

‘Participants liked the UCL Museums’ Wellbeing Umbrellas as they were attractive and easy to pick up and use. The general feeling was that if time was taken to prepare the means of evaluation, then time would be taken to fill it in’. (Linda Thomson and Helen Chatterjee, University College London)

The toolkit is different to other forms of museum evaluation; it captures how participants feel about themselves, their feelings before and after a session, rather than asking them to rate the session itself. When combined with qualitative methods such as interviews and observation of participants, the meaning of why positive feelings increased can be explored.
**Encountering the Unexpected: a positive impact on older people’s wellbeing**

Using the Wellbeing Umbrellas, evidence from the smaller museum projects showed a significant increase in positive feelings of wellbeing for older people after taking part in a session with The Cottage Museum, Woodhall Spa and Kettering Museum and Art Gallery, or the series of sessions with Crich Tramway Museum. A total of 93 participants who completed a Generic Wellbeing Umbrella before and/or after a session were included within the analysis, which was carried out by Linda Thomson of UCL. 

On average, participants showed higher scores for all six positive emotions on the Positive Wellbeing Umbrella following the session (post-session) compared to before the session (pre-session) (Table 1). This is very positive as it suggests that the museum sessions improved their feelings of wellbeing. All improvements in positive emotions were highly significant except for the word ‘alert’ where the small increase was not significant.

<table>
<thead>
<tr>
<th>Positive emotions</th>
<th>Rating taken</th>
<th>n</th>
<th>Range</th>
<th>Min.</th>
<th>Max.</th>
<th>Mean</th>
<th>Std. Dev.</th>
<th>Variance</th>
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<tbody>
<tr>
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<td>Pre-session</td>
<td>65</td>
<td>4.00</td>
<td>1.00</td>
<td>5.00</td>
<td>3.292</td>
<td>1.086</td>
<td>1.179</td>
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<tr>
<td></td>
<td>Post-session</td>
<td>65</td>
<td>4.00</td>
<td>1.00</td>
<td>5.00</td>
<td>3.600</td>
<td>1.087</td>
<td>1.181</td>
</tr>
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<td>Pre-session</td>
<td>70</td>
<td>5.00</td>
<td>0.00</td>
<td>5.00</td>
<td>3.829</td>
<td>1.454</td>
<td>2.115</td>
</tr>
<tr>
<td></td>
<td>Post-session</td>
<td>70</td>
<td>5.00</td>
<td>0.00</td>
<td>5.00</td>
<td>3.829</td>
<td>1.454</td>
<td>2.115</td>
</tr>
<tr>
<td>Enthusiastic</td>
<td>Pre-session</td>
<td>71</td>
<td>5.00</td>
<td>0.00</td>
<td>5.00</td>
<td>3.620</td>
<td>1.087</td>
<td>1.182</td>
</tr>
<tr>
<td></td>
<td>Post-session</td>
<td>71</td>
<td>5.00</td>
<td>0.00</td>
<td>5.00</td>
<td>3.620</td>
<td>1.087</td>
<td>1.182</td>
</tr>
<tr>
<td>Excited</td>
<td>Pre-session</td>
<td>49</td>
<td>5.00</td>
<td>0.00</td>
<td>5.00</td>
<td>3.837</td>
<td>1.028</td>
<td>1.056</td>
</tr>
<tr>
<td></td>
<td>Post-session</td>
<td>49</td>
<td>5.00</td>
<td>0.00</td>
<td>5.00</td>
<td>3.837</td>
<td>1.028</td>
<td>1.056</td>
</tr>
<tr>
<td>Happy</td>
<td>Pre-session</td>
<td>84</td>
<td>4.00</td>
<td>1.00</td>
<td>5.00</td>
<td>3.857</td>
<td>1.055</td>
<td>1.112</td>
</tr>
<tr>
<td></td>
<td>Post-session</td>
<td>84</td>
<td>5.00</td>
<td>3.00</td>
<td>5.00</td>
<td>4.393</td>
<td>.728</td>
<td>.531</td>
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<tr>
<td>Inspired</td>
<td>Pre-session</td>
<td>66</td>
<td>5.00</td>
<td>0.00</td>
<td>5.00</td>
<td>3.212</td>
<td>1.130</td>
<td>1.277</td>
</tr>
<tr>
<td></td>
<td>Post-session</td>
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<td>0.00</td>
<td>5.00</td>
<td>3.788</td>
<td>1.222</td>
<td>1.493</td>
</tr>
</tbody>
</table>

Table 1: Descriptive statistics, positive emotions (Linda Thomson, UCL)
Figure 7 shows visually the increase in mean scores for each of the six positive emotions, pre- and post-session, especially for ‘happy’ and ‘inspired.’

The differences between pre- and post-session scores were analysed to find out which of the six positive emotions were most important to participants. The words ‘happy’ and ‘enthusiastic’ appeared to be the most important to participants, contributing to 55 per cent of the overall increase (Table 2):

<table>
<thead>
<tr>
<th>Positive emotions</th>
<th>R Square change</th>
<th>Contribution to model</th>
</tr>
</thead>
<tbody>
<tr>
<td>Happy</td>
<td>0.28</td>
<td>28%</td>
</tr>
<tr>
<td>Enthusiastic</td>
<td>0.27</td>
<td>27%</td>
</tr>
<tr>
<td>Active</td>
<td>0.16</td>
<td>16%</td>
</tr>
<tr>
<td>Alert</td>
<td>0.10</td>
<td>10%</td>
</tr>
<tr>
<td>Inspired</td>
<td>0.10</td>
<td>10%</td>
</tr>
<tr>
<td>Excited</td>
<td>0.09</td>
<td>9%</td>
</tr>
</tbody>
</table>

Table 2: Regression analysis (Linda Thomson, UCL)
Very small numbers of participants completed a Negative Wellbeing Umbrella (n=18) and therefore statistically it was difficult to draw any firm conclusions regarding the decrease in negative emotions other than the likelihood that participants felt less anxious.

Comparing these findings to the national pilot of the Museum Wellbeing Measures Toolkit undertaken by Linda Thomson of UCL found that most of the participants in *Museums, Health and Wellbeing* showed much higher levels of wellbeing both before and after the activities in which they were involved compared to other groups. For the Positive Wellbeing Umbrella, participants in *Museums, Health and Wellbeing* (n=65-84, as not everyone completed all ratings) averaged a pre-session score of 3.5 rising to 4.0 post-session whereas other participants (n=80) averaged a pre-session score of 2.5 rising to 3.0 post-session.

These Wellbeing Umbrellas were completed by older people who were living in their community or in residential accommodation - those older people with complex needs, such as dementia, were not asked to complete a Wellbeing Umbrella. Although most participants confidently took part in the museum sessions, the facilitators from The Cottage Museum and Kettering Museum and Art Gallery noticed some initial uncertainty. Some participants lacked the confidence to handle objects or were hesitant about engaging in a new activity with external facilitators they had not met before. The participants in the Crich Tramway Village project did not really know each other at the beginning of the project, although they were seen as a group. However, as the sessions progressed, participants visibly grew in confidence, the very tactile and open nature of both these sessions encouraged them to relax, become more comfortable and immersed in the conversation with the facilitators and their neighbours. This change, which was noticed in several venues, could have contributed to the increased levels of positive wellbeing. It was also a new and unusual session for participants, many had not taken part in such an experience before. Participants used words such as ‘enjoyable’, ‘interesting’ and ‘fun’ to describe their experiences of a session. Speaking to participants from the Willingham Friendship Group (13 March 2013) they said that they had not expected the session to be so active - they enjoyed unwrapping the objects and feeling close to history. It made them think of the people who held them, ‘the life of things.’ One woman, Diana, had the idea of creating a similar box of objects for her grandchildren. At other sessions, participants told the facilitators that they appreciated the chance to socialise with others, to come together as a group, and, in residential homes, were pleased to see communal venues so full of people. The social element was also important to participants at Crich, who noticeably grew in confidence over the sessions, learning more about each other through sharing dreams, memories and ideas. The facilitators agreed that they had seen the group grow closer over the series of sessions - ‘They definitely made a connection [in] the exchanges they had... there was a lot of giving in an abstract way,’ (Jan Barratt, Learning Manager, Crich Tramway Village).

The success of the smaller museum sessions (when related to the NEF concept of wellbeing) was in helping people to feel good and enjoy a collective, sociable experience that was different from the everyday.
Young people attending hospital school face very serious and challenging circumstances due to their health, both medical and emotional, which impacts on their lives in a very profound way. To this extent, it can be anticipated that their feelings of positive and negative wellbeing would be quite different to young people attending a mainstream school, particularly when collected using a subjective assessment method like the Wellbeing Umbrellas. Critical to this process is understanding the context of the participants and adapting the evaluation framework to suit that context. Here, the Wellbeing Umbrellas are used alongside observation and interviews which helped to flesh out the very small scale data obtained from the Umbrellas (small sample sizes is a well-known problem when capturing evidence from arts and cultural work in health, as much of it involves intense work with a small number of participants).

Adapting a wellbeing scale for the young people that used three positive emotions (happy, excited, inspired) and three negative emotions (irritable, nervous, scared), overall the young people showed an increase in positive feelings of wellbeing, and a decrease in negative feelings of wellbeing following the session at the museum. Figure 8 gives a flavour of the students’ reactions to the sessions at the New Walk Museum & Art Gallery visit using the aggregated mean scores for 5 pupils - these students felt more inspired, excited and happy and less irritable, nervous and scared after the visit to the museum.78

With such small numbers, the individual response of a student became very important - one student’s negative scores were noticeably higher than the other students, because (as he explained) he was affected by external anxieties by something happening after the museum visit rather than the museum session itself. Knowing this information means that the results can be understood more fully.
Interviews with the students and teachers reinforced the value of the museum sessions for the young people’s wellbeing. Students Ben, Abby and Daniel enjoyed their visit to the museum; they described it as ‘fun’, and enthused about coming into contact with objects including Egyptian amulets, paintings, sculpture and even finding personal connections (a piece of the Barwell meteorite on display prompted a story from Daniel about his great Granddad who was hit on the head by the meteorite when he was cycling home from work). For young people who find it difficult negotiating public spaces, they found the museum familiar (some had visited before) and comfortable: Daniel described it as having a nice and welcoming atmosphere, with ‘kind and caring’ staff. Their teachers and museum staff were delighted with the students’ response, their concentration and motivation, and the insights that they gave into the chosen objects: the students ‘felt empowered by being part of it’ (George Sfougaras, Headteacher, Children’s Hospital School, Leicester). Part of that was the role of Lisa Jacques, the museum’s facilitator, who worked hard to make the young people feel comfortable and able to contribute to the session. Both this project, and Encountering the Unexpected, demonstrate the importance of having skilled facilitators who are able to create the conditions where participants feel relaxed, open to discussion and exploration, feel safe, and can contribute in a meaningful way:

‘Going outside of perceived boundaries is quite challenging for them... But I was impressed with them. I thought Lisa (Jacques), who we worked with, had a wonderful relationship with the students and therefore put them at ease’ (Denis Root, Humanities Teacher, Children’s Hospital School, Leicester).

The experiences of the young people at New Walk Museum & Art Gallery fed into the development of the website, Body, Mind and Spirit, which will continue to grow outside the remit of this project. It is clear that there is much more to be explored around the impact of cultural experiences on young people attending hospital school.
c) Evaluating a health issue: *Live Today, Think Tomorrow*

*Live Today, Think Tomorrow*, Nottingham City Museums and Galleries’ (NCMG) project using the John Player & Sons Archive, used historical collections to address a contemporary health issue in the City. Through the project, NCMG piloted a set of resources for schools and youth groups that would address issues around smoking, explore the role of packaging and advertising, and aim to contribute to lowering the high smoking prevalence within the City. To capture the impact of the sessions on the young people taking part and their attitudes towards smoking, a response card (see below) and questionnaire were designed in collaboration with NCMG and Ellyn Dryden, Public Health Development Manager, Nottingham City Council.

63 young people completed a response card and 50 young people completed the short questionnaire. They were a mixture of ages - 70% of young people were aged 11-16 years, 20% were aged 17-24 years and 5% were aged 9-10 years. The findings show that the session had an impact on the young people’s understanding and attitudes towards smoking, the majority (71%) enjoyed the event and 69% agreed that they found out something new or unexpected about smoking (Figure 9).
Young people liked the opportunities for discussion and having a say, including Alex (aged 24), Louise (aged 18) and Maddie (aged 13) who enjoyed looking at the collections from the museum, whilst Tyler (aged 19) and Andrew (aged 11) enjoyed learning facts and new information about smoking. Some young people (n=21) said that they found out something interesting about the smoking industry, including Nicky (aged 12) who learnt that ‘child labour still goes on’. Tom, Sean and Annie (all aged 12) seemed surprised to find out that smoking was not a modern activity but ‘goes back to the 1800s’!

Although it is only a snapshot, 65% of young people changed their attitudes towards smoking as a result of the session (Figure 10) and 67% claimed that in a year’s time they would definitely not be smoking. Many of the young people changed their minds about smoking as a result of finding out about the harm it causes to health and wellbeing. Poignantly, Joe (aged 15) wrote ‘Made me realise I’d like my family to stop smoking after I’ve heard the harm’.

A smaller number of young people talked about the controversy surrounding the use of tobacco advertising and packaging, which they realised had an impact on consumption of cigarettes.

It was sobering to see that 43% of young people completing a questionnaire (n=50) had tried smoking a cigarette, even if it was only a puff or two. The average age at which they had tried smoking was 13 years old. However, the number of participants who smoked regularly was much lower, with only 8% (n=4) saying that they usually smoked more than 6 cigarettes a week.
Trust 
GOLD LEAF 
to taste good
BACHELOR
Tipped

Add flavour to the fun!

Christmas pack
50 FOR 8’9

Player's BACHELOR Tipped
The myths that have arisen about smoking being relaxing and even supportive of wellbeing can be powerfully traced through the John Player & Sons Archive, with cigarette adverts claiming cigarettes were good for sport, getting girls, and improving confidence. The image above shows an original advert for ‘Bachelor Tipped’ cigarettes, suggesting that cigarettes are associated with fun, sportiness (the skier on the front of the box) and attracting beautiful women. The altered advert on the right however shows the reality - that second-hand smoke is ‘not all hot air’ and contains many cancer-causing chemicals including benzene, arsenic and formaldehyde.

These myths can be enduring as the young people’s responses to a series of statements about smoking seemed to show as the only statement that the young people unanimously agreed to be true was ‘smoking can cause lung cancer’. Relatively high proportions of young people seem to agree that ‘smoking helps people cope better with life’ (34%) and perhaps even more surprisingly considering the messages conveyed in the session, 24% of young people agree that ‘smoking is not really dangerous, it only harms people who smoke a lot’ (Table 3).

<table>
<thead>
<tr>
<th>Statement</th>
<th>True</th>
<th>False</th>
<th>Missing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Smoking can cause lung cancer</td>
<td>100%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>If a woman smokes when she is pregnant, it can harm her unborn baby</td>
<td>96%</td>
<td>4%</td>
<td></td>
</tr>
<tr>
<td>Smoking makes your clothes smell</td>
<td>94%</td>
<td>6%</td>
<td></td>
</tr>
<tr>
<td>Other peoples’ smoking can harm the health of non-smokers</td>
<td>92%</td>
<td>8%</td>
<td></td>
</tr>
<tr>
<td>Smoking can cause heart disease</td>
<td>90%</td>
<td>8%</td>
<td>2%</td>
</tr>
<tr>
<td>Smoking makes people worse at sports</td>
<td>80%</td>
<td>20%</td>
<td></td>
</tr>
<tr>
<td>Smokers get more coughs and colds than non-smokers</td>
<td>80%</td>
<td>18%</td>
<td>2%</td>
</tr>
<tr>
<td>Smoking helps people relax if they feel nervous</td>
<td>64%</td>
<td>34%</td>
<td>2%</td>
</tr>
<tr>
<td>Smokers stay slimmer than non-smokers</td>
<td>30%</td>
<td>70%</td>
<td></td>
</tr>
<tr>
<td>Smoking is not really dangerous, it only harms people who smoke a lot</td>
<td>24%</td>
<td>70%</td>
<td>6%</td>
</tr>
<tr>
<td>Smoking gives people confidence</td>
<td>20%</td>
<td>78%</td>
<td>2%</td>
</tr>
<tr>
<td>Smokers are more fun than non-smokers</td>
<td>14%</td>
<td>80%</td>
<td>6%</td>
</tr>
</tbody>
</table>

Table 3: Above are a few things people say about smoking. Some people think they are true and some people think they are false. What do you think?

Finding ways of collaborating with public health agencies such as Smokefree Nottingham and Public Health England to develop more sophisticated and longer-term measures of health and wellbeing assessment (particularly for measuring the impact of health promotion and education) would be a good way forward for museums to be able to demonstrate their contribution to health and wellbeing agendas.
‘This is a time of opportunity for the arts [culture] and health to play a crucial part in creating social capital, more resilient individuals and communities, and a secure and stable world.’

Museums can powerfully impact on health and wellbeing - there is ample evidence to demonstrate this.

• Collections are at the core of health and wellbeing work and can be used in many ways - to encourage positive wellbeing, address health issues and promote health and wellbeing. As the projects in this publication show, it is not only large museums which can contribute but smaller museums can make a worthwhile contribution to the health and wellbeing of their communities.

• Health and wellbeing needs to start with the needs of communities. Many museums have a strong track record working in this area; they are close to communities and are used to working in partnership. The increased emphasis on holistic approaches to health and wellbeing, and changes like those in the UK to local decision-making about public health, put museums in a strong position to contribute to new ways of thinking and new approaches to strengthening community health and wellbeing through encouraging resilience, being active and helping people to make the right choices for themselves and their communities.

• The Five Ways to Wellbeing provide a credible and useful framework for museums to plan and develop programmes around health and wellbeing. The focus on learning, keeping active (mentally as well as physically), making connections with people and the world around you, and giving something back is at the core of the projects described in this publication, projects that build on and reinforce the importance of cultural experiences as part of positive wellbeing.

• It is vitally important to capture and evidence the impact of health and wellbeing programmes and projects in museums. To promote this work internally and beyond the sector and to demonstrate that museums can play a significant role in contributing to the health and wellbeing of their communities. Museums could work more closely with public health agencies to develop more sophisticated and longer-term measures of health and wellbeing assessment alongside tried and tested methods such as UCL’s Museum Wellbeing Measures Toolkit.
**Live Today, Think Tomorrow:**
*John Player & Sons Archive*
Unlocking historical collections to address a contemporary health issue

*Live Today, Think Tomorrow* was led by Nottingham City Museums and Galleries (NCMG), using their extensive collections from the John Player & Sons Tobacco Archive to develop and pilot a set of learning resources to explore health-related issues with children and young people. As a city with one of the highest rates of smoking in England, the project taps into a significant health and wellbeing agenda for Nottingham City Council. The Council wants to reduce the uptake of smoking by young people and reduce the high prevalence of smoking within the city to 20% by 2020 (see Figure 5, p16). The project was underpinned by the values of partner SmokeFree Nottingham, who work to reduce the harm caused by smoking and focus on preventing the uptake of smoking, and the value of Peer Mentoring for getting the message across to young people.

Historic collections represent a rich seam of resources, including advertising, packaging, and oral history reflecting the long history of John Player & Sons in Nottingham as a significant local employer. However, this history, and the changes in social norms and expectations of smoking and cigarette advertising and packaging, threw up many interesting ethical challenges for using the collections to promote an anti-smoking message. Working in partnership with the Smokefree Nottingham Co-ordinator for Nottingham City Council and holding a focus group helped NCMG to explore and address these issues, negotiating the complexity of a history that recognises Nottingham has a strong relationship with the tobacco industry - it creates jobs, contributes to the city’s economy - but the reality is that people are dying from smoking. The wealth of historic advertising and packaging shows how attitudes and social norms towards smoking have changed radically over the past century but it also shows the lengths that the tobacco industry has gone to encourage people to take up smoking. There are many ways in which these adverts could be used in provocative ways to show young people how they are being manipulated, even exploited, to take up smoking by the tobacco industry.

A resource pack was developed and piloted as part of this project, using the John Player & Sons Tobacco Archive to stop young people from smoking. The resources include a set of stimulus and learning materials for youth groups and secondary schools that are designed to instigate debate amongst young people, enabling them to explore the issues and statistics relating to smoking. NCMG sought to find a balance between use of the collections and factual content, including high quality copies of Player’s advertising images to be used in debates, useful national and local statistics, a structured debate, and range of perspectives for young people to explore. There is a strong emphasis on Peer Mentoring - involving young people who understand the pressures and experiences that their peers are going through. Rather than lecture them about the dangers of smoking, the Peer Mentors seek to engage young people in the issues and help them to make informed decisions about smoking. Included in the pack is a film of a debate on smoking led by Peer Mentors from Fresh Futures Nottingham, exploring ‘Does smoking only affect your health?’ Responding to questions from an audience of young people, the Peer Mentors use the debate to make young people aware of how cigarettes are branded and advertised, the chemicals used in cigarettes, and the implications of the global tobacco industry (which includes child labour) as well as the impact of smoking on health. As the Peer Mentors describe in the debate, their slogan is ‘No pressure’ - they do not want to pressure young people to stop smoking but to stop young people from starting to smoke in the first place by giving them advice and information to make an informed decision. For example, when thinking about the role that celebrities and families play in encouraging young people to smoke, Peer Mentor Rebecca Cassidy explains:

‘You have choices, you make your own decisions, you don’t have to follow in the life choices that your parents chose. You are your own person.’

Historical adverts from the John Player Archive have been altered, made into sets of cigarette cards and used to provoke young people into thinking about the reality of smoking behind the images that cigarette companies use to promote their products. For example, the advert shown here associates smoking with the familiar figure of Father Christmas, who implies Player’s is his favourite brand. The altered version plays on this by reminding us that addiction is ‘not just for Christmas’.
PLAYER'S always PLEASE
The resources were piloted with children and young people aged between 9 and 24 years old, in schools and youth groups, including those who live in Clifton, an area of Nottingham which has a high prevalence of smoking. Most of the young people attending the sessions (such as the Peer Mentors pictured opposite) had people in their family who smoked. An evaluation of the responses to the pilot sessions showed that the session had an impact on the young people’s understanding and attitudes towards smoking. The majority of young people (71%) enjoyed taking part in a session: Alex (aged 24) ‘enjoyed the discussion and having my say’. Louise (aged 18) and Maddie (aged 13) enjoyed looking at the collections from the museum, whilst Tyler (aged 19) and Andrew (aged 11) enjoyed learning facts and new information about smoking. 69% of young people said that they had found out something new or unexpected as a result of the session. Some young people (n=21) said that they found out something about the smoking industry, advertising and tobacco farming, which surprised them. 65% of the young people said that the session had changed their attitudes towards smoking as a result of finding out about the negative effects of smoking, particularly the harm it caused. A smaller number of young people talked about the controversy surrounding the use of tobacco advertising and packaging, which they realised had an impact on consumption of cigarettes. A questionnaire captured young people’s experiences of smoking and their understanding of its impact and effects on health and wellbeing. It was sobering to see that 43% of young people completing a questionnaire (n=50) had tried smoking a cigarette, even if it was only a puff or two. The average age at which they had tried smoking was 13 years old. However, the number of participants who smoked regularly was much lower, with only 8% (n=4) saying that they usually smoked more than 6 cigarettes a week. Although only a snapshot at the end of the session, 67% of the young people agreed that they would definitely not be smoking a year from now, and a further 19% said that they would probably not be smoking (see pages 31-34 for more evidence of impact).

Following the pilot, NCMG intend to extend the use of the resources into secondary schools and community groups across the City and continue to build on their work in health and wellbeing - this project has been part of a wider body of work around health and wellbeing as Jo Kemp, Learning, Engagement & Collections Manager, describes on pages 20-21. Esmé Ward, Head of Learning and Engagement at Whitworth Art Gallery/Manchester Museum, has been a critical friend and mentor, helping them to think about and reflect on how they can take their health and wellbeing work forward. From this valuable process, NCMG staff intend to develop a different approach, focusing on programmes not projects: building a continuous and conscious strategy around health and wellbeing rather than a series of projects; taking the family as a core focus as part of a continuous offer; talking to more people; making new connections and linking into strategic frameworks; and making museums more visible by showing their impact and value on health and wellbeing.
**Encountering the Unexpected**

**Using objects to help older people keep active, independent lives**

*Encountering the Unexpected* shows how three small museums - Crich tramway Village & Museum in Derbyshire, The Cottage Museum, Woodhall Spa in Lincolnshire, and Kettering Museum and Art Gallery in Northamptonshire - contributed to the health and wellbeing agenda in their local area, linking their collections and community networks to strategic priorities around the health and wellbeing of older people (see page 13). With growing numbers of older people in the East Midlands, including those experiencing complex needs (including physical and mental disability) keeping older people independent, active, engaged, and preventing feelings of isolation, loneliness and depression are key to ensuring that older people have a better life. The three museums devised projects that connected with these aims, used their collections to stimulate positive feelings of wellbeing through sparking curiosity and involvement through creative activity and group work. These are more than reminiscence sessions, as participants were invited to think about their lives in the present as well as the past, facilitators using objects to invite a range of responses from awe to curiosity, looking at the beauty and craftsmanship of objects to associating objects with everyday life experiences - going out, cooking, dressing up - and major life experiences. These are shared events and experiences that everyone could relate to. Facilitators were open, sensitive and inclusive of all participants, supporting those who needed more time to develop the confidence to take part (for some participants this was a new activity and they did not know what to expect). Evidence captured from 93 participants using the UCL Museum Wellbeing Measures Toolkit revealed significant increases after a session in five positive emotions - happy, enthusiastic, active, inspired, excited - and a smaller increase in feeling alert. When compared to a national pilot study undertaken by Linda Thomson of UCL, increases in positive feelings were much higher for participants in the East Midlands than for other groups, supporting the positive comments from the project leaders, who saw first-hand the enthusiasm and value given to the activities by participants.

The three projects illustrated below show how smaller museums can embed health and wellbeing in their work and come to see the value of making partnerships and connections which will enable them to continue working in this area. All three museums were taking their collections out into the community, reaching new audiences and raising the profile of the museum - many of the older participants had not come into contact with a museum in this way before and found it to be inspiring. The Five Ways to Wellbeing provided an effective framework for thinking about how a range of collections (including costume, objects related to trams and tram heritage, unfamiliar and familiar domestic items) can be made relevant to the health and wellbeing of older people, and in the case of Crich Tramway Village, younger and older participants.

Located in the picturesque dales of Derbyshire, **Crich Tramway Village** is home to the National tramway Museum, telling the history of trams from the 1860s to the 1960s. It is an independent educational charity with a small staff, and relies on volunteers giving their time to help restore and run the tramcars. Led by Jan Barratt, Learning Manager, the Museum worked in partnership with Kate Travers, Project development: Learning and community, Marie Billyeald, Service Manager for Prevention, Adult Social Care, and Gill Clarke, Intergenerational Practice Officer, both of Derbyshire County Council, to develop an intergenerational project for a group of younger and older people from a deprived area of Chesterfield. The group had an existing connection, meeting at a local secondary school where the younger people (who attend the school) volunteer to mentor the older people in IT skills, part of a wider scheme to develop better relationships between the school and the community.

Meeting for four sessions at the school, with a visit to the museum at the end for the older participants, the session themes reflected the integration of the museum’s collections with the Five Ways to Wellbeing. These included ‘Getting to know you’, ‘Connecting people’, ‘Home and Leisure’, and ‘Life Journeys’. This was a new way of working for the project partners, as Gill Clarke explained: ‘It’s completely new to us, certainly from my perspective anyway, to develop something with a museum,
starting with the artefacts’, but the impact of the project on the participants showed Jan Barratt the value of this approach: ‘I’ve felt inspired by it… it’s given me something I can build on.’ A key outcome for the project was better relationships developing between the younger and older participants. Although they had worked together previously the group members had said little more than ‘hello’ and this project was a chance to get to know each other better. Both Gill Clarke and Jan Barratt described how ‘as a group they’ve gelled more together’, particularly because through the themes of the sessions (life journeys, hopes and dreams) participants shared things that they had not shared with other people before: ‘They definitely made a connection… there was a lot of giving in an abstract way… sharing experiences’ (Jan Barratt).

Stereotypes held by the younger and older people were challenged, showing that age is not always important to what you do with your life - for example, some of the younger people were surprised by how active the older people were and had ‘actually done some quite exciting things’. But there was also an opportunity for the older people to get to know each other better; some participants attended as a couple, others were much less confident and ‘kept a lot of the personal stuff to themselves’ (Jan Barratt), but started to open up as the project progressed. The enthusiasm of the older participants for the project was infectious; they ‘really enjoyed’ every moment of the project, particularly the trip to the Museum and a ride on one of the trams which was ‘fantastic’ and a ‘lovely surprise’. The older people enjoyed working with the young people and sharing their knowledge and experiences - ‘The girl that we had (in our group) answered a lot of questions that we couldn’t answer and we could tell her things that she didn’t know.’ For Gill Clarke, the project helped to cement relationships between old and young more widely in the community: ‘If they feel more confident with one young person, they’ll probably feel more confident just to say hello to young people… it just makes you see people in a different light.’ For Crich Tramway Village & Museum the project represented a new, exciting way of working and the museum is keen to develop similar projects: ‘Just being part of this project has opened up lots of other doors, which has been really, really good’ (Jan Barratt).

**Kettering Museum and Art Gallery** tells the history of the Borough, with collections covering archaeology, natural history, geology and costume. The Museum sits in the Community Services department of Kettering Borough Council, and whilst they hear about health and wellbeing projects from their colleagues in the Council, it is not something that they had taken on board before. Taking part in *Museums, Health and Wellbeing* was therefore a chance for Kettering Museum and Art Gallery, as Ellie Baumber, Museum Officers explained, to try something new and work more closely with their colleagues in Community Services. Working with Kate Travers, museum learning consultant, and Kettering Borough Council, who provided access to older people living in sheltered accommodation and care homes, Kettering Museum and Art Gallery used the project to give their existing reminiscence collections, themed around life in the 1950s, a new lease of life, taking them out of the museum to care homes. With discussions themed around ‘dreams and memories’, including leisure time, home and health, and community, participants were encouraged to think about their relationship to the objects, share memories and experiences. Questions were framed so that participants were encouraged to think about their lives in the present as well as in the past, to think about how their lives had changed and what that meant to them. The sessions were also a chance for people to socialise and listen to music from the 1950s, providing a different experience to their everyday.

The sessions were enjoyed by participants, most of whom were open to sharing their memories and associations in response to the objects. The collections were essential to this process. As Ellie Baumber described, handling, exploring and talking about the objects engaged all the senses of participants and helped to replicate the senses and environment in which people had used those objects. They were not just something to look at but they enabled the connection with memories to be made, further encouraged by the facilitator’s questions and encouragement. With the objects, the connections made were personal and led to richer, in-depth discussions. Without the objects, people would not have opened up so much about their personal stories. This was not always comfortable for participants - some objects brought up quite negative associations, and older people with particular needs, such as dementia, were not always
comfortable taking part in the session. Yet the facilitators noticed a change as these participants realised what they were being asked to do, they became more comfortable with engaging with the objects, conversation increased and participants enjoyed the opportunity for interaction and talking. The session gave people ‘a sense of something different’ (Ellie Baumber) which helped their confidence. There was clearly a need for new activities and opportunities for interaction, and the sessions gave participants a chance to think about something different and talk to new people. Usually, participants would meet for their usual coffee morning and do the same each week, and the museum session changed this familiar pattern and gave participants something new to think about. The experience of the project has given Kettering Museum and Art Gallery new ideas about how to use the reminiscence boxes, and they have a successful model from which to develop their work with communities in the future.

The Cottage Museum, Woodhall Spa is a small community, independent museum in East Lincolnshire run entirely by volunteers. The Museum, housed in a flatpack 19th century bungalow made of corrugated iron, preserves, displays and promotes the heritage of Woodhall Spa and its immediate surrounds, from its beginnings to the present day. Supported by Kate Travers, Project development: Community and learning, the project helped the Museum to reach new audiences and new venues in Lincolnshire, often miles away from Woodhall Spa. Working in partnership with Age UK, who provided access to taster sessions, coffee mornings, friendship groups and advice sessions that they run, and Tanglewood Care Homes, the Museum’s collections were taken out to older people in the county. Sessions revolved around an ornate chest of drawers, which was filled with objects, carefully wrapped up. Participants were invited to open the drawers and given the freedom to explore the objects inside, to ask questions, indulge their curiosity, enable time for reflection and invoke memories and stories about the objects and wider life experiences. Sessions were adapted to suit the context of participants, depending on the space and time available - costumes were added following on from one of the sessions - and in response to inspiration from the communities they encountered. One participant, for instance, told the story of how he had found money stuffed inside cotton reels after the death of his father - ‘Dad hid his £5 notes in the cotton reels and hid them in the button tin. We found them after he’d died’ (Horncastle Age Concern, 14th February 2013). This inspired Jackie Goodall to collect people’s memories, asking participants to think about a happy memory (past or present), write it onto paper and then push the paper into a cotton reel, a creative way to involve people in the Museum and make a record of their lives.

What impact did the sessions have? For many participants, the objects provided a vehicle through which to engage in conversations with people they did not know, and help facilitate a sense of belonging to a group with shared interests. As Jackie Goodall, Chairman of the Museum described, the sessions clearly met a need for the Museum to engage with older members of the community: ‘Whenever we attended an arranged session, we were invited to attend more.’ Participants described how they enjoyed the sessions - although some were nervous to begin with, the conversation and skill of the facilitators soon relaxed them and they felt able to contribute. Participants described sessions as ‘exciting’, and ‘interesting’, there was humour too - ‘Being a forerunner of the little black number’ said one man in response to an evening dress, there was lots of laughter when looking at liberty bodices and suspenders, or amazement at the craftsmanship evident in some objects. Objects encouraged social relations, one participant described the objects as a ‘good icebreaker, it made me talk to strangers’, and the cabinet itself was very popular: ‘Very interesting, evocative’ said one participant, ‘it reminds me of my childhood… the cabinet’s appearance made me explore it.’ Being able to contribute to the sessions and being given the freedom to explore at their own pace, participants felt valued by the sessions: ‘Volunteers were genuinely interested in what they had to say and offer to the group… this in turn improved confidence and a sense of wellbeing’ (Jackie Goodall). For the volunteers at the Museum who took part in the sessions, many of whom are retired themselves, the project also contributed to their sense of wellbeing, providing the opportunity for creative thinking, active involvement, getting out of the house and meeting new groups. This was particularly important for one volunteer, in her late 70s, who had lost her husband after being married for over 50 years. For her the involvement with the Museum ‘was a life-line and gave her the confidence and will to keep going’ (Jackie Goodall).
Encouraged by the popularity of the sessions and the enthusiastic response from the community, The Cottage Museum aims to continue working with older people’s groups and extending their work out into the community. As Jackie Goodall describes the ‘project has kick-started us towards new and exciting horizons… It has opened our eyes to the fact that care organisations, friendship clubs and individuals want to engage with us and thus has opened up a number of interesting strands for us to develop.’ Being part of a wider network has also increased Jackie’s confidence in organising and delivering activities around wellbeing, it has given them a ‘clear and purposeful direction’ in which to develop new possibilities, such as making connections with the wider health community and working with vulnerable groups in creative ways.
Body, Mind, and Spirit
Opening up cultural experiences to children and young people in a hospital school

Body, Mind, and Spirit is a partnership between Children's Hospital School, Leicester, New Walk Museum & Art Gallery, Leicester, and Alex Woodall, Project development: Learning and Digital, which aims to transform how children and young people in hospital school experience museums. The development of an online learning platform, Body, Mind and Spirit, enables young people who for many reasons cannot visit museums, to access and engage with objects, think about their meaning and relevance, and in doing so, reflect on their health and wellbeing through participation in a wider cultural environment. It enables young people to upload their own content to the website and share their own thoughts and ideas on the significance of objects within a framework of questions inspired by the themes of mind, body, spirit. The framework is a series of questions for interpreting an object which encourage children and young people to think about identity, feelings and wellbeing ‘through’ an object or a collection.

The typical image of a hospital school is a child lying in a hospital bed; however, hospital schools provide a range of services for children and young people who are unable to attend mainstream schools because of ill health. Children’s Hospital School, Leicester, does provide education for young people in hospital, but it also provides an outreach service for children and young people who need to be taught at home, it provides education within the adolescent psychiatric unit, and a day school for young people whose ill health means that they cannot return to mainstream school. What children and young people attending hospital school do share are limited cultural experiences because of the serious challenges to their health and wellbeing that they face. Young people may experience profound and recurrent medical, physical, psychological and emotional issues, for which the journey of recovery can be a challenging and complex one. The role of Children’s Hospital School, Leicester is to support, educate and assist students in their recovery:

‘In terms of wellbeing, it’s about enjoying life, being happy, relating to others, managing emotions… being able to manage the illness… The staff here do an enormous amount in terms of supporting, nurturing, and challenging [the students] as appropriate’ (George Sfougaras, Headteacher, Children’s Hospital School, Leicester.

The themes of body, mind, spirit were chosen because they are of significant importance in our interpretation of life events and experiences, but have perhaps greater resonance in the lives of children and young people with profound physical and psychological needs, as George Sfougaras explains: ‘They’re important to all of us, but we spoke about the added complexity of adolescence and then on top of that about the added complexity of mental illness or physical disability… the challenge of illness was the thing we wanted to bring out.’ The framework is flexible enough to allow almost any subject to be explored, to look at an object in depth or explore an entire collection.

To develop the online resource, the Hospital School worked with the staff and collections at New Walk Museum & Art Gallery in Leicester. Established in 1849, the Museum’s collections cover decorative arts, costume, textiles, archaeology, natural history, geology and Egyptology. Two sessions were held at the Museum with a small group of students from the school aged from 13 to 16 years old, who explored selected objects from the collections using the questions from the body, mind, spirit framework, including:

Body
What is the object made from?
What does it feel like?
What might it be like to be this object?

Mind
What is the context of this object?
What does this object remind you of?
If this object did not exist, would we have to invent it?

Spirit
How does this object make you feel?
What amazes you about this object?
What special value could this object have for a previous owner?
These were young people ‘facing quite serious challenging circumstances due to health, whether it be medical or emotional’ (George Sfougaras), and getting to the Museum was a big challenge for them, because it was ‘going outside of perceived boundaries’ (Denis Root, Humanities Teacher). It was rewarding for the Museum staff and their teachers to see the young people respond well to the activities at the museum. In the sessions led by Lisa Jacques, Learning Officer Contemporary Visual Arts at the Museum, the young people showed a genuine interest in the objects and their surroundings. Students, Abby (aged 15) and Ben (aged 16) described the visit to the museum and handling objects as ‘awesome’ and ‘fun’. Although they had visited the Museum before they ‘got to see stuff… we didn’t see before. They bought some stuff out of the cases for us to look at’ (Ben). Abby remembered handling Egyptian amulets that were thousands of years old, ‘They’re cool, it’s like you’re touching part of the past… you think maybe an Egyptian touched that at some point.’ The students knew that the website that they were helping to create would be valuable for young people. Daniel thought it was important to have something that was interactive for young people who could not visit to look around the museum, ‘I think real is going to win always… [but] it’s very important because if you’re not well, you don’t get out much and if you don’t go to school and you worry about what happens if you go out… it can be quite challenging.’ Their teachers could see the value of the project for the young people and were impressed by how engaged they were. George Sfougaras described how the students ‘felt empowered by being part of it’ and Denis Root described how ‘when they were handling the objects and being asked some specific questions, you could tell that it meant quite a lot to them.’ Part of the success of the sessions was the relationship between Lisa Jacques and the students: ‘Lisa was absolutely brilliant, really lovely with the students’ (Emma Compton, Art Teacher). Lisa Jacques described how it was important to enable the young people to feel comfortable within the environment, to help them feel relaxed and able to explore a public space, and found that they responded well to that approach: ‘they all got on extremely well, they all had great rapport with each other.’

Drawing on the experiences of the young people at the Museum, the website was developed with Manchester design agency d2Digital. The objects that were selected represented a range across the museum’s collections, including the Rutland dinosaur, a piece of the Barwell meteorite, Russian and Ghanaian dolls, a Chinese shoe, two German woodcuts, a Buddha statue, Egyptian amulets, and a teacup. Young people can engage with objects via a virtual learning platform in the form of a cupboard - users can open the many doors in the cupboard to reveal the objects inside. Selecting an object leads the user to a page of audio-visual content connected to the object (such as a video and images which enable the object to be seen from all angles and close up) and read content which explores the object through the themes of body, mind, and spirit. What is really unique about the website is that children and young people will be able to upload their own objects, and to write their own contributions and (after being moderated) share them with others. Anyone can upload content to the site and have it moderated, creating powerful potential for how knowledge about cultural artefacts is created and who has access to that knowledge. As Headteacher George Sfougaras described, he can imagine a ‘huge body of knowledge’ flowing into the basement, creating new opportunities and linking the portal to other projects. The potential for creating new kinds of access to objects, and the creation of knowledge around objects, was exciting for the school and the museum as the content generated by the young people could have an impact on the content management systems and processes of the Museum, including ‘personal reflection and human interest stories’ (Malika Kraamer, Curator) as well as more traditional forms of knowledge.

It is anticipated that the website will have real value for children and students in hospital school, the ability to upload their objects and see them on display creating a real sense of ownership. The ambition of the project is also larger than this (pilot) project, and the website has been designed so that more objects can be embedded into the site from different museums - there is huge potential for the website to be used with hospital schools and museums across the UK. Already, several hospital schools have expressed an interest in becoming further involved in a second phase of the project.
FOOTNOTES


3 Ibid.


7 Health and Social Care Information Centre, Health Survey for England 2011, Trend Tables.


16 RSPH, Arts, Health and Wellbeing Beyond the Millennium.


21 RSPH, Arts, Health and Wellbeing Beyond the Millennium.


25 Atkinson et al, Wellbeing and Place.


29 Wood, Museums of the Mind.

30 The Happy Museum (2013)”http://www.happymuseumproject.org/” [retrieved 02 08 2013]

31 RSPH, Arts, Health and Wellbeing Beyond the Millennium.


39 RSfPH, Arts, Health and Wellbeing Beyond the Millennium.
40 O’Neill, Cultural attendance and public mental health: 25.
44 Royal Society for Public Health (2013): 18
46 RSfPH, Arts, Health and Wellbeing Beyond the Millennium.
49 See Atkinson et al, Wellbeing and Place.
56 RSfPH, Arts, Health and Wellbeing Beyond the Millennium.
57 Aked et al, Five ways to wellbeing.
58 RSfPH, Arts, Health and Wellbeing Beyond the Millennium.
59 Aked et al, Five ways to wellbeing: 14
60 Ibid.
61 Chatterjee et al, Museopathy.
63 From observation notes made by Kate Travers, 7 February 2013.
66 Camic and Chatterjee, Museums and art galleries as partners for public health interventions.
67 RSPH, Arts, Health and Wellbeing Beyond the Millennium.

68 Ibid.

69 Camic and Chatterjee, Museums and art galleries as partners for public health interventions.

70 RSPH, Arts, Health and Wellbeing Beyond the Millennium: 46.


72 WEMWBS was developed to measure wellbeing at population level through a 14 or 7 item scale for assessing positive mental health by capturing thoughts and feelings.

73 RSPH, Arts, Health and Wellbeing Beyond the Millennium.

74 The data includes 7 young people involved with the Crich Tramway Village project.

75 This was found using a non-parametric, within participants, Wilcoxon test suitable for ordinal level rating data: Active (p<0.001), Alert (p<0.100), Enthusiastic (p<0.001), Excited (p<0.001), Happy (p<0.001) and Inspired (p<0.001). A one-tailed test was used as it was predicted that the scores would increase from pre- to post-session based on previous findings. A parametric, within participants, one-way Analysis of Variance (ANOVA) showed a similar pattern of significance to the Wilcoxon test.

76 The different values of n (number) indicate that not all participants (n=93) responded to all six words on the umbrella. In order (with words that most participants responded to coming first) these are Happy, Enthusiastic, Alert, Active, Inspired and Excited.

77 This was done by a linear regression analysis, using the forward, stepwise method.

78 It was not possible to analyse these findings statistically because of the small numbers of students involved in the sessions (9 students visited New Walk Museum & Art Gallery for the first session, 8 students for session 2).

79 RSPH, Arts, Health and Wellbeing Beyond the Millennium.

**RCMG RESEARCH TEAM**

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Kate Travers Project Development, Community & Learning

Alex Woodall Project Development, Learning & Digital

Catharine Braithwaite Communications Consultant

Richard Sandell Professor of Museum Studies

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Wendy Gallagher Partnership Arts for Health Manager, Whitworth Art Gallery/ Manchester Museum

Report photography by Julian Anderson and Kate Travers

Design by Tom Partridge
## PARTNERS

### Live today, Think Tomorrow

<table>
<thead>
<tr>
<th>Organisation</th>
<th>Name</th>
<th>Position</th>
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</thead>
<tbody>
<tr>
<td>Nottingham City Museums &amp; Galleries</td>
<td>Jo Kemp</td>
<td>Learning, Engagement &amp; Collections Manager</td>
</tr>
<tr>
<td>Nottingham City Museums &amp; Galleries</td>
<td>Maria Erskine</td>
<td>Collections Access Officer</td>
</tr>
<tr>
<td></td>
<td>Elaine Stenson</td>
<td>Freelance Community Engagement</td>
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<td></td>
<td>Adrian Stenson</td>
<td>Freelance Film Maker</td>
</tr>
<tr>
<td>Community Protection,</td>
<td>Kate Thompson</td>
<td>Smokefree Nottingham Coordinator</td>
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<tr>
<td>Nottingham City Council</td>
<td>Ellyn Dryden</td>
<td>Public Health Development Manager</td>
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### Encountering the Unexpected

<table>
<thead>
<tr>
<th>Organisation</th>
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<tbody>
<tr>
<td>The Cottage Museum, Woodhall Spa</td>
<td>Jackie Goodall</td>
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</tr>
<tr>
<td>Age UK - Lindsey</td>
<td>Philippa Haresign</td>
<td>Chief Officer Age UK Lindsey</td>
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<td>Age UK - Lindsey</td>
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<td>Paul Johnson</td>
<td>Health Network Coordinator (East Lindsey)</td>
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<td>Eleanor Baumber</td>
<td>Museum Officer</td>
</tr>
<tr>
<td>Kettering Borough Council</td>
<td>Kish Lad</td>
<td>Community Services Officer</td>
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<tr>
<td>Kettering Borough Council</td>
<td>Shaun Birdsall</td>
<td>Community Services Officer - Health and Wellbeing</td>
</tr>
<tr>
<td>Crich Tramway Village</td>
<td>Jan Barratt</td>
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</tr>
<tr>
<td>Derbyshire County Council</td>
<td>Marie Billyead</td>
<td>Service Manager - Prevention</td>
</tr>
<tr>
<td>Derbyshire County Council</td>
<td>Gill Clarke</td>
<td>Intergenerational Practice Officer</td>
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### Body, Mind, Spirit

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<tr>
<th>Organisation</th>
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<tbody>
<tr>
<td>Children's Hospital School</td>
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<td>Simon Lake</td>
<td>Curator (Fine Art)</td>
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<td>Mark Evans</td>
<td>Curator (Natural Sciences)</td>
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<tr>
<td>Leicester Arts and Museums</td>
<td>Jane May</td>
<td>Curator (Decorative Arts)</td>
</tr>
<tr>
<td>Leicester Arts and Museums</td>
<td>Malika Kraamer</td>
<td>Curator (World Cultures)</td>
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<tr>
<td>d2 Digital by Design Ltd</td>
<td>Luke Turner</td>
<td>Account Manager</td>
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<tr>
<td>d2 Digital by Design Ltd</td>
<td>Carl Worthington</td>
<td>Project Administrator</td>
</tr>
<tr>
<td>Asta Films</td>
<td>Kim May</td>
<td>Film Maker</td>
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## COLLABORATORS

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<thead>
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<tbody>
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<td>Cheryl Smith</td>
<td>Heritage Manager, Islington Museum</td>
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