

Mapping Creative Health in Norfolk and Suffolk

Exploring the challenges and opportunities to improve health outcomes



Suffolk Artlink. Credit: Gillian Allard

Research report prepared for the Norfolk and Suffolk
Culture Board by Creative Lives - March 2024



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Foreword



Louise Jordan-Hall
Chair Norfolk &
Suffolk Culture Board

We are living in times of extraordinary challenge and opportunity for the cultural sector. As local authorities look closely at the demands on their services and their ability to support culture - we see that there is overwhelming evidence of the importance of cultural participation on health and wellbeing and in building resilient communities.

The creative health movement has grown in the last 20 years into a networked, respected and powerful advocate. We are proud that Norfolk and Suffolk's cultural sector has been a significant part of that movement and has developed and delivered outstanding practice in creative health.

Commissioned by the Norfolk and Suffolk Culture Board, this report shows that our region has a vast and diverse creative health sector from nationally significant cultural leaders to a wealth of flourishing grassroots delivery. We recognise that there is an urgent need to work together, embrace diversity, keep quality

at the forefront of all work and grow the sector by building even stronger connections with health colleagues.

By working together we can make creative health more than the sum of its parts; there is clearly an opportunity for pooling evidence and evaluation, learning, scaling, innovative collaborations, sharing resources, simplifying communications and creating one voice in the creative health sector in the region.

This report has 8 compelling recommendations that reflect on the Board's:

- Deep respect for creative practitioners, the need to support their development and their wellbeing;
- Strategic role in convening high level partnerships (local, regional and national) with health partners, Universities and creative health leaders;
- Commitment to data driven development and compelling evaluation;
- Recognition that there is a need for a network of creative health hubs in the region.

We are working strategically to deliver these recommendations and we are excited to see this work grow and build. By working across sectors to do this, we will develop more knowledge, more innovation and stronger outcomes in both preventing poor health and also in enhancing wellbeing for our communities.

We anticipate that after reading this review, you will join that journey with us in recognition of our shared values.

01. Executive Summary

This report highlights how creative interventions from arts, culture and heritage can meet health and wellbeing outcomes in a safe, evidence-based and cost-effective way. Norfolk and Suffolk host a wide range of nationally (and internationally) recognised creative health activity, that delivers innovative health solutions to tackle a range of physical health, mental health and wellbeing issues. This report reveals how the creative health movement in Norfolk and Suffolk has been led by a vibrant cultural sector, which now seeks further strategic partnership and investment from health colleagues to build on this emerging activity that has huge potential to improve health outcomes across the life course for people in the region. This report demonstrates that creative health can provide a complementary approach to medical interventions that has yet to be fully realised across Norfolk and Suffolk.



Mapping the creative health sector summary

The mapping exercise found over 163 creative health opportunities, evenly split across Norfolk and Suffolk. We predict there are many more voluntary and community groups operating at a hyper-local level that are not currently included. Of the 163, the majority are charities and/or arts organisations delivering multi-art-form activity. Our survey showed that 90% want to increase delivery. Creative health activity in Norfolk and Suffolk was found to predominately support older people (65+), younger people (16-25), children (under 16), people with low-level mental health/wellbeing issues, and people at risk of loneliness. There are potential gaps for maternity care, religious groups, gender-specific groups, people at risk of homelessness, and people within, or at risk of being in, the criminal justice system. Rural challenges for delivery and access are ongoing for the region. Most of the creative health activity in Norfolk and Suffolk is categorised as ‘General, without specific health and wellbeing outcomes’ (47% of respondents). The second most cited, at 46%, was work ‘Targeted at specific vulnerable groups’, 23% delivered work ‘Targeted at a specific clinical aim’, and 15% of respondents described their work as ‘Arts Therapy’.

Investment and funding summary

Summary recommendations



1. Build on current excellence

Norfolk and Suffolk should strive to become a national creative health zone with clearly identified creative health hubs.

2. Meet the health needs in Norfolk and Suffolk effectively

The creative, health and social care sectors need to co-design creative health solutions. Where there are gaps in provision, solutions from outside the region should be explored to expand regional expertise.

3. Establish new funding models that recognise investment from the cultural sector

Larger creative health or voluntary sector organisations (or the Culture Board itself) should lead new ambitious creative health consortia or partnerships, so activity can be delivered at scale. Alongside this, there needs to be regular light-touch grant funding available for grassroots providers.

4. Create formal strategic join-up and good practice networks

High-level, formal strategic links and positions need to be further established through existing creative and health structures, and networks in both Norfolk and Suffolk.

5. Invest in training and professional development to improve practice

The Culture Health & Wellbeing Alliance (CHWA) principles need to be adopted throughout. The Culture Board and the health and social care sector should invest in joint training to address gaps.

6. Improve monitoring and evaluation

Where appropriate, creative health delivery should adopt standardised tools to measure impact such as the Warwick Edinburgh Wellbeing scale or the Norfolk & Waveney or Suffolk Mind tools.

7. Build University partnerships to improve practice and build the local evidence base

Creative health delivery needs to link more strategically with universities across Norfolk and Suffolk and specifically the current MA in Medical Health and Humanities at UEA, which presents opportunities for professional development and research.

8. Use data more effectively

The culture and health sectors should build on the mapping resource built by this review, to initiate a 'creative health database', which can be used as both a commissioning and partnership finder tool.

See more detailed version on page 52

03. About this report

Creative Lives was commissioned by the Norfolk and Suffolk Culture Board to map the current creative health provision and explore the role and potential impact of creative health across Norfolk and Suffolk. This is in the context of the Culture Board's Manifesto - [Culture Drives Impact report](#), published in 2022, which identifies 'health and happiness' as a core objective. To learn more about Creative Lives and the members of the Culture Board please see appendix 10.1 and 10.2. Creative Lives brought together a team of experts including Nikki Crane (King's College London) and Llewela Selfridge (museums and heritage researcher, with lived experience of life changing arts therapy and family therapy during cancer treatment). Jess Plant (Creative Lives, England Director) led the project with support from Gareth Coles and Rosa Torr from Creative Lives. Creative Lives also worked with [Data Culture Change](#) to explore postcode and health outcomes data. The team has also collaborated with the East of England Creative Health Associate Olivia Dean from the National Centre for Creative Health (NCCH) to ensure this report has a legacy. This team brings a wealth of unique experience both practical and personal to exploring the role creative health can play in improving health outcomes in Norfolk and Suffolk.

This work has been funded by Arts Council England, Norfolk County Council, Suffolk County Council and Norfolk &

Waveney Mind. The activity has been supported by an active Working Party (appendix 10.3) made up of experts from across the region.

The project explored four questions:

- What is the current activity being delivered in the creative health sector across Norfolk and Suffolk and how is it being funded, reviewed, and sustained?
- What does good practice look like in creative health and how can it be defined, shared, and potentially scaled up?
- What are the workforce and volunteer needs in terms of support and skills development?
- How can we make the case for creative health stronger in the region and what strategic levers can be drawn on to ensure future investment?

Throughout this report, we have featured several case studies, which seek to demonstrate the rich variety, scale, and quality of creative health provision in Norfolk and Suffolk. These case studies demonstrate the potential of creative health in improving health outcomes across the county, which if fully realised could be transformational.

04. Definitions and Good Practice

It is important to understand what we mean by creative health to map provision and explore its potential. In December 2023 the National Centre for Creative Health (NCCH) and the All-Party Parliamentary Group on Arts, Health and Wellbeing (APPG AHW) published the [Creative Health Review: How Policy can Embrace Creative Health](#). This report includes definitions, case studies and a call to action for national cross-departmental working. In September 2023 the Culture Health and Wellbeing Alliance (CHWA) published a [Creative Health Quality Framework](#). Both these leading national networks, who play a pivotal role in driving the creative health agenda, adopt the following definition:

The National Centre for Creative Health defines Creative Health as creative approaches and activities which have benefits for our health and wellbeing. Activities can include visual and performing arts, crafts, film, literature, cooking and creative activities in nature, such as gardening; approaches may involve creative and innovative ways to approach health and care services, co-production, education and workforce development. Creative health can be applied in homes, communities, cultural institutions and heritage sites, and healthcare settings. Creative health can contribute to the prevention of ill health, promotion of healthy behaviours, management of long term conditions, and treatment and recovery across the life course.

We support the implementation of the above definition as a mechanism to enhance clarity and professionalism across the sector in

CASE STUDY 1



Spotlight on: Community-based early intervention partnerships project

JOY AT THE JOB CENTRE

Joy at the Job Centre is a programme of creative activity developed through collaboration between Colchester and Ipswich Museum Service and Jobcentreplus. The events are conceived, planned and delivered with various creative partners for example DanceEast and New Wolsey Theatre. Targeted Jobcentreplus customers who are experiencing difficulties are invited to come and have fun via creative sessions with the children they care for in a safe and supportive setting. Both adults and children may also have disabilities or additional needs. The creative activities change every day and there are community support organisations available to offer information and support to families at their most difficult and vulnerable times. Originating in Ipswich, the programme is rolling out across centres in Suffolk. The aim is to support families with creative activities, to make the challenging but crucial environment of the Job Centre less

hostile and support the wellbeing of Jobcentreplus customers and families. The Jobcentreplus lead said:

“Working on the creative activity side by side has elicited more information about families in need than 6 months of seeing them across a desk.”

The project boosts confidence, family cohesion and presents a glimmer of joy in sometimes very dark places, reducing stress and anxiety and boosting wellbeing. The project provides an opportunity for health workers to access and signpost help for the people most in need.

“One family included an eight-year-old girl with autism, who was a selective mute and communicated only with her mum. After two days of attending Joy at the Jobcentre, she was so excited about what she made and done, she spoke to her grandmother to tell her about it. Through the power of supporting a young person to express herself creatively her grandmother had heard her granddaughter speak for the first time in three years.”

Philip Carter-Goodyear, JCP UC Service Delivery Team Leader

To learn more

Creativity works - here is the evidence

Rigorous evidence that creativity can have a positive impact on health outcomes is comprehensive and growing.

There is now a large body of research that consistently shows a positive link between better health and wellbeing and time spent taking part in art, nature, exercise, music, creative, expressive, social, or philosophical activities. The Creativity, Health and Wellbeing Alliance (CHWA) has collated the key evidence across the sector on their [Research and evaluation webpage](#). This evidence also shows that these activities can facilitate good health and wellbeing for those with long term physiological or psychological conditions. The National Academy for Social Prescribing has also created [a useful briefing on the use of arts and culture](#) and suggests creative health can have the biggest impact with: mental health service users; migrants; underserved populations; those who live in deprived areas with less access to community resources, or from low socioeconomic backgrounds; as well as people who are lonely, socially isolated and; older adults with cognitive decline (for example problems with memory, reasoning, and language).

The World Health Organisation 2023 report '[What is the evidence on the role of the arts in improving health and well-being? A scoping review](#)' looked at the results from over 3,000

studies and identified a major role for the arts in the prevention of ill health, promotion of health, and management and treatment of illness across the lifespan. The UK government's [Evidence summary for policy: The role of arts in improving health and wellbeing](#), found - 'there is strong evidence that arts can support wellbeing in adults'.

National creative health programmes such as [AESOP's Dance to Health](#) for older people and falls prevention, offer the health system an effective and cost-effective means to address the issue of older people's falls, reducing falls by 58%.

Led by King's College London the [SHAPER - Scaling-up Health Arts Programmes: Implementation and Effectiveness Research](#) is demonstrating statistically significant evidence that creative health interventions can impact outcomes in reducing postnatal depression, improving motor function, decreasing pain, and improving non-motor symptoms of Parkinson's and strokes.

Creative Arts East has created an easy-access reading list of the top local and national creative health evidence available (see Appendix 10.7).

CASE STUDY 2



Spotlight on: Scaleable activity in heritage, museums and library services

RESTORATION TRUST WITH NORFOLK RECORD OFFICE: Scaling Up Change Minds (Norfolk)

Change Minds is a heritage-based approach, using community archives to improve mental wellbeing and build social connection. During a Change Minds programme, there are twelve, three-hour long workshops, facilitated by a project coordinator, a creative practitioner, and supported by local mental health staff. These professionals work with groups of 8-16 people to investigate carefully chosen records of people who were mental health patients in the past.

Scaling Up Change Minds is gathering evidence to support a national roll-out of the programme as a social prescription designed to improve the wellbeing of people who live with mental health challenges. The approach and methodology

have been manualised in order to share the way of working and offer broader opportunities for engagement.

Research by Dr Scaife (2017) and Prof. McArdle (2021) shows that Change Minds has positive wellbeing outcomes for people living with serious mental health problems. Longitudinal evidence, while not statistically significant, suggests that impact persists after the intervention ends.

There have been six Change Minds iterations and the development of a 'Hub' of online resources and offline advice to support future iterations and allow the programme to be manualised. The programme uses standardised validated mixed-methods research measures, including the Warwick Edinburgh Mental Wellbeing Scale. This enables the ongoing accumulation of high-quality, statistically robust, quantitative, and qualitative data addressing the research question: Does Change Minds improve the wellbeing and mental health of people living with mental health challenges who take part in the programme in a cost-effective and efficient way?

"Community heritage is a powerful wellbeing tool, promoting wellbeing through forging a link between identity and archives; developing social relationships between participants; facilitating learning; promoting key resilience factors; developing creativity;

developing empowerment and critical energy; promoting a voice for vulnerable people and making that voice

06. Mapping creative health in Norfolk and Suffolk - the needs and a snapshot of activity</

The strategy identifies 5 key clinical areas, for adults, this

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5%

Types of

Categories of creative health activity

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THE NEW WOLSEY THEATRE, IPSWICH

Tell Your Story is a photography-based wellbeing programme, produced by the New Wolsey Theatre's Creative Communities department and led by artist and award-winning photographer Gillian Allard. The focus of this programme is on those patients (or people) within primary care in the top 5% complex cases of the population. The main body of the project is made up of 9 weekly sessions where participants are supported to explore photography, editing and other forms of mixed-media to express themselves and their story. These sessions run for 2.5 hours and we currently have two groups running weekly.

In a playful, supportive, and safe environment, participants have been learning to use a simple digital app on a tablet to create beautiful images that reflect their interests and personal journey. Participants have also had the opportunity to explore other mixed-media, such as image transferring and cyanotype. At the end of the programme, we will hold an exhibition of participants' work at the theatre.

The New Wolsey Theatre has a thriving Creative Communities department. Our work seeks to blur the lines between professional and community practice, and we produce activities

that nurture creativity, develop skills, broaden horizons and explore diversity.

"Thank you for a journey towards my creativity. Your course has helped me reveal my inner self; it emphasised another identity, allowed me to see myself in another way. Moreover, it is a wonderful way to calm your mind."

"Coming on this course is reclaiming me. This is my journey towards feeling free, fun and creative instead of trapped and locked in where I have been."

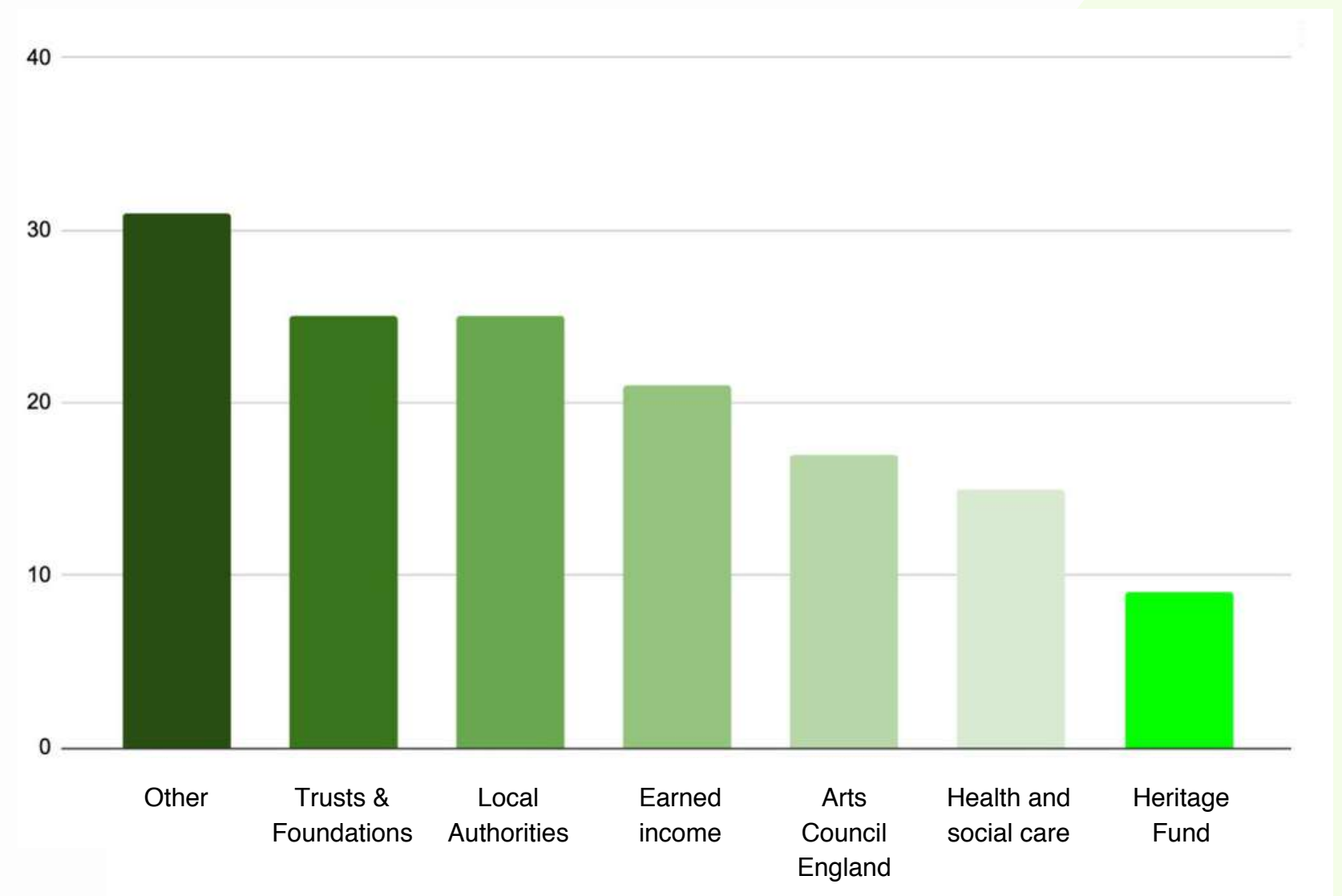
Funding source:

Ipswich and East Suffolk Alliance (SNEE ICB)

07. Investment in creative health and commissioning

The funding and commissioning landscape is complex, and changing at a rapid pace as new Integrated Care Partnerships embed and interplay with evolving Public Health systems and the NHS both locally and nationally.

Our mapping data revealed that a large proportion of funding for creative health comes from both charitable sources (trusts and foundations) as well as from arts and cultural investment. From the respondents to our survey the majority of funding to deliver creative health projects in Norfolk and Suffolk comes from 'other' sources, which is a combination of local donations, fundraising events, member contributions, and sponsorship, as well as combinations of all types of funding sources. There is evidence of significant funding from trusts and foundations and Local Authorities, Arts Council England as well as contributions from health and social care and public health.



Sources of Creative Health funding by survey respondents

CASE STUDY 4

08

- Being responsive to local health needs

09. Summary findings and recommendations

1. Build on current excellence

Finding



There is a wide variety of vibrant, highly effective, committed creative health activity operating across Norfolk and Suffolk. Established arts, culture and heritage organisations, along with grassroots groups, freelancers and practitioners all play different but important roles in delivering specialist creative health opportunities for people in the region. There is however a need for greater coordination of activity so that the impact of this work is optimised.

Recommendation



Norfolk and Suffolk Culture Board should consider the region becoming a national creative health zone (similar to the [Greater Manchester Creative Health Strategy](#) approach), with named creative health hubs in the region that can provide high-level expertise on specific art forms and health outcomes. Sufficiently resourced, and working in partnership with local councils, these organisations could provide place-based coordination, training, support and leadership. There are a range of skilful and well placed organisations that could take on such roles including Britten Pears Arts and Creative Arts East.

2. Meet the health needs in Norfolk and Suffolk effectively

Finding



The creative health sector is meeting the needs of vulnerable populations, that the health and social care sector can find hard to reach. The region is specifically leading on working with older people with chronic health conditions and those at risk of isolation, as well as delivering preventative health and wellbeing interventions across the broader population. However they are doing this with limited resources, which means the offer will be compromised and cannot always be consistent or equitable, leading to gaps in provision and missed opportunities.

Recommendation



Creative health providers and health and social care providers should co-design projects together - this would make for the most effective way of working to achieve long-term commissions and ensure a joined-up approach to delivery and measuring outcomes.

Recommendation



To meet identified health gaps such as postnatal care, health commissioners may want to consider harnessing the support of established, national evidence-based creative health programmes (e.g. [SHAPER](#), [Clod Ensemble](#)) to build on local expertise.

3. Establish new funding models that recognise

4. Creative formal

5. Invest in training and professional development</

6. Improve monitoring and evaluation

7. Build university partnerships to improve practice and the evidence base

Finding



The region has academic and research potential with the University of East Anglia hosting a pioneering MA in Arts and Health as well as Norwich University of the Arts and the University of Suffolk (including the Integrated Care Academy) which have a growing research field in health and wellbeing.

Recommendation



The need to link with universities across Norfolk and Suffolk, and specifically the current MA in Medical Health and Humanities at UEA, presents opportunities for professional development and research.

8. Use creative health data more effectively

Finding



There is no one place for health commissioners to find out about creative health activity. Health commissioners need creative health programmes to be packaged in a way that speaks directly to their needs (local health priorities), with appropriate levels of evidence to meet their priorities.

Recommendation



Create an online portal which showcases the local offer, using the mapping database as a starting point. Utilising shared data about activity and impact could improve the local evidence base.

