



VISUAL ARTS FOR BRAIN HEALTH WEBINAR, TUESDAY 5 APRIL 2022

AGENDA & SPEAKER BIOGRAPHIES

Agenda

10 am **Veronica Franklin Gould**, President, Arts 4 Dementia, UK

10.05 CHAIR: **Professor Martin Orrell** Director, Institute of Mental Health, University of Nottingham.

10.10 **Professor Semir Zeki**, Professor of Neuroaesthetics, University College London

10.15 **Professor Helen Chatterjee**, Professor Biology, Genetics, Evolution and the Environment, Division of Biosciences, University College London.

10.20 **Sue Mackay**, Culture Health and Wellbeing Alliance regional champion, Director, Thackray Museum.

10.25 **Ruth Salthouse**, Wellbeing Coordinator, Linking Leeds

10.30 **Pam Charles**, Leeds Black Elders Association

10.35 **Kate Mason**, Director, The Big Draw.

10.40 **Jessica Santer**, Art by Post, Southbank Centre

10.45 **Holly Power**, Community Learning Producer, The Wallace Collection

10.50 **Sarah Gorman**, Social Prescribing Regional Learning Coordinator.

10.55 **Hamaad Khan**, Development Support Officer for the Global Social Prescribing Alliance, talking on the NHS Social Prescribing Champion Scheme.

PANEL DEBATE

Chair's Summary

Close

VERONICA FRANKLIN GOULD FRSA AMRSPH founded Arts 4 Dementia in 2011 to develop weekly programmes for early-stage dementia at arts venues, training, best practice conferences and reports, with a website to coordinate arts opportunities for dementia in the community. Her inaugural programme, *Reawakening the Mind* (2012-13), won the London 2012 Inspire Mark and Positive Breakthrough in Mental Health Dementia Award 2013. Veronica was named finalist in The Sunday Times Changemaker competition and on publication of *Music Reawakening* (2015), she was appointed A4D president. Her regional guide, *Reawakening Integrated: Arts & Heritage* (2017), maps arts opportunities for dementia and aligns arts within NHS England's Well Pathway for Dementia. Veronica's social prescribing programme (2019-21) opened with a conference *Towards Social Prescribing* (Arts & Heritage) for the Dementias (May 2019, Wellcome Collection). To address cross-sector issues raised, she piloted dance and drama social prescribing programmes to test the process and ran a series of 15 cross-sector conferences around the UK. Findings were disseminated in a two-day conference and report 'Arts for Brain Health: Social Prescribing as Peri-Diagnostic Practice for Dementia' (2021).

PROFESSOR MARTIN ORRELL, FRCPsych PhD, Chair is Director of the Institute of Mental Health, University of Nottingham. Until February 2015 he was Professor of Ageing and Mental Health at University College London and Director of Research and Development at North East London Foundation Trust. Visiting Professor at City University and Honorary Professor at the University of Liverpool, Professor Orrell is Chair of the Memory Services National Accreditation Panel (MSNAP) and a member of the Prime Ministers Challenge on Dementia Research Group. Professor Orrell is a Board member of INTERDEM and of the International Psychogeriatric Association. In 2014 he was elected President of the European Association of Geriatric Psychiatry. He has published over 200 academic papers and is Editor of the journal *Ageing & Mental Health*.

PROFESSOR SEMIR ZEKI is Professor of Neuroaesthetics at University College London, having previously held the Chair of Neurobiology there. He has specialized in studying the organisation of the visual brain; more recently he has embarked on studies of the brain mechanisms that are engaged during the experience of beauty, of love and of desire. He is a Fellow of the Royal Society, a Member of the American Philosophical Society, a member of Academia Europeae and a member of the European Academy of Sciences and Arts. He is author of several books, including *A Vision of the Brain*, *Inner Vision*, and *Splendours and Miseries of the Brain*. He also co-authored *La Quête de l'essentiel* (in French) with the late French painter Balthus.

PROFESSOR HELEN CHATTERJEE is a Professor of Biology at University College London where she runs the world's first MAsc (Masters in Arts and Sciences) in Creative Health, and is currently the Arts and Humanities Research Council's Research Programme Director for Health Disparities. Her research includes evidencing the impact of natural and cultural participation on health and social prescribing; she co-founded the Culture, Health and Wellbeing Alliance, is an Advisor to the All Party Parliamentary Group on Arts and Health, Chairs the Royal Society for Public Health's SIG in Arts and Health, and is a Founding Trustee of the National Centre for Creative Health.

SUE MACKAY is Director of Collections and Programme at Thackray Museum of Medicine. She has been advocating for, and practising, culture and wellbeing work for many years and sits on the management group of Leeds Arts Health and Wellbeing Network Leeds Arts Health and Wellbeing Network (lahwn.co.uk) and is Museum Champion for Yorks & Humber for Culture Health and Wellbeing Alliance.

RUTH SALTHOUSE is a Wellbeing Coordinator for Linking Leeds, worked directly with clients for four years. She delivered the Linking Leeds service out of the Thackray Museum of Medicine meeting people booked in by their GP. Using the Thackray's programme of resources, community space and volunteer programme, Ruth linked clients with activities

that mattered to them. In partnership with the Thackray, Ruth will present about this innovative way of working from the perspective of a Wellbeing Coordinator (also known as a Link Worker). Ruth is now a Locality Manager at Linking Leeds leading a team of 18 Wellbeing Coordinators covering the most deprived areas of Leeds.

PAM CHARLES is Older Persons Advocate at Leeds Black Elders Association. Supporting the Elders, she ensures that their voice, and everything they want to say and do, is heard by the services they wish to access. The role of LBEA within the community is to help the Elders to remain happy and healthy within their own home for as long as possible. As well as providing advocacy support, LBEA organises activities which the Elders themselves request including a weekly men's group, a monthly reading club, seasonal community garden, decorating and gardening. LBEA'S activities organiser runs a weekly activity for all needs, offering arts and crafts, music, dance, exercise, arts and crafts, sewing and knitting.

HOLLY POWER is Communities Learning Producer at The Wallace Collection in London. The Wallace Collection works in partnership with charity and community organisations to overcome the barriers people encounter to engaging with art and culture.

KATE MASON has been Director of The Big Draw since 2015. She also runs The John Ruskin Contemporary Arts & Crafts Prize / Companion, The Guild of St George / Trustee, House of Imagination / Chair - Society of Designer Craftsmen Est 1887.

JESSICA SANTER is Head of Creative Learning at Southbank Centre. In her learning and participation career, Jessica has worked on projects and programmes that give greater access to high quality arts experiences to a broader range of people. With a BA (Hons) in Dance Theatre from Trinity Laban, she began her career in dance organisations, including the Education and Community team at Trinity Laban. Jessica works across art forms at Southbank Centre, developing creative learning programmes in music, visual arts, literature and spoken word, dance and performance. In 2019, she launched a new Arts and Wellbeing strategy for Southbank, where her focus on reducing social isolation and loneliness has become a central part of her work. In September 2021 she became the first Module Leader and Lecturer in Creative Arts, Health and Wellbeing on the BSc Dance Science and MSc/MFA Dance Science at Trinity Laban. Jessica is passionate about the power of arts to make transformative change in people's lives, that the arts are essential to our development, sense of self, and health and wellbeing from childhood to older age.

SARAH GORMAN is Regional Social Prescribing Network Learning Coordinator for north-east England. Sarah is Chief Executive Officer of Edberts House in Gateshead. Edberts House is all about connection: connecting people to one another, connecting people to support and connecting people for community change.

HAMAAD KHAN, who is studying for his Masters in Global Health and Development at University College London, works part-time as the Development Support Officer for the Global Social Prescribing Alliance. His interest in dementia stemmed from his undergraduate studies in Neuroscience at King's, where he began volunteering at the Southwark Playhouse in the Arts 4 Dementia social prescribing workshops with early-stage dementia patients. He hopes to bring the holistic biopsychosocial understanding of health into the medical school curriculum when he begins his studies as a medical student this September.

Veronica Franklin Gould, President, Arts 4 Dementia

A.R.T.S. for Brain Health: Social Prescribing transforming the diagnostic narrative for dementia – From Despair to Desire (A4D report 2021)

Good morning. You are warmly welcome to our Visual Arts for Brain Health webinar – delegates, from all over the UK, from Australia, Canada, Indonesia, the Republic of Ireland, Romania, Singapore, Taiwan, and from North Carolina, Oklahoma Oregon and Texas in the United States of America.

Each year, there are some ten million new cases of dementia, over 200,000 in the UK alone - as yet incurable a terrifying prospect, - a third more undiagnosed. Their symptoms can be eased and confidence maintained if people are empowered to engage in weekly arts and wellbeing activity to preserve their brain health and resilience in the community

You will hear how effectively and enjoyably the visual arts, the subject of our webinar today, triggers people's imaginative and social skills. Exploring and discussing the amazing range of objects in a museum or creating art in a studio or at home and celebrating together at exhibition is a truly engaging way to relieve the loneliness, fear and trauma people feel in the period leading to diagnosis of a potential dementia.

So, our aim being to enable support at this vulnerable stage, we do not debate post-diagnosis, for which arts are well established. Rather, creative ageing models and the social prescribing route from the surgery to museums and visual arts programmes to preserve brain health.

Our speakers today will present a variety of arts opportunities – (though thanks to training in Mild Cognitive Impairment and Early-Stage dementia can be continued post diagnosis) - and how **GPs, patients' first port of call**, can now refer them earlier than ever before - at the outset of symptoms – through their **social prescribing link workers** to local arts opportunities, to protect against cognitive decline, encourage ingenuity and self-expression and bring a joyful sense of camaraderie and accomplishment.

As founder of Arts 4 Dementia, arts post-diagnosis are vital too - our speakers also run programmes for dementia post-diagnosis. But during peri-diagnosis, when people fear the stigma of 'dementia', the use of more positive language stimulates incentive, the idea of taking action, to preserve their own brain health.

I should like to say how grateful we are to Professor Martin Orrell for chairing today's webinar, whose format is – each speaker talks on their subject for 5 minutes, Then a moment for the kettle and then on with the debate, chaired by Martin.

It will be a great honour to hear from

- **Professor Semir Zeki, Professor of Neuroaesthetics at UCL**, on how the brain responds to the pleasure of beauty - Sigmund Freud's pleasure principle, the experience of beauty, not as a luxury, but as a daily necessity
- **Helen Chatterjee, Professor of Biology at UCL**, winner of the Health Humanities Medal for her research into how museums can be beneficial to health, speaks on creative health, connecting research policy and practice and the NASP Academic Partners Collective.
- **Sue Mackay, Director of the Thackray Museum of Medicine**, on how arts organisers can raise awareness of their programmes to preserve brain health, through their regional Culture Health and Wellbeing Alliance network. Sue will be talking as a duo with **Ruth Salthouse**, Wellbeing Coordinator at Linking Leeds,

because brilliantly the Linking Leeds social prescribing service operates from the Thackray Museum – what a model!

- **Pam Charles** then explains how Leeds Black Elders naturally encourages people to continue enjoying their arts activities when cognitive challenges arise and long after.

Down to London, but national:

- **Kate Mason, Director of The Big Draw**, which we know of as a national and international festival, will explain the range of resources available to arts organisers.
- **Jessica Santer** shares **Art by Post**, the terrific Southbank Centre initiative that enabled people to keep creating during lockdown – and then to exhibit there.
- Prescribers reluctant to refer patients to short-term arts programmes, will hear from **Holly Power** of plans for a wide-ranging year-long programme at The Wallace Collection.

On Social Prescribing itself

- **Sarah Gorman**, CEO of Edberts House at Gateshead, is the Social Prescribing Network Regional Learning Coordinator for the North East, supporting and training link workers, explains how they reach out to the cultural sector for opportunities, to help patients/clients preserve their brain health.
- **Hamaad Khan**, now a postgraduate working part-time in development support for the Global Social Prescribing Alliance, will explain the bidirectional benefit of volunteering as a neuroscience student through the NHS Social Prescribing Student Champion Scheme to support people at arts programmes to preserve brain health.

The recording and this verbatim report links will be available online.

Longing to hear you all, it gives me great pleasure to hand over to our chair Professor Martin Orrell, Director of the Institute of Mental Health at the University of Nottingham.

Professor Martin Orrell, Director, Institute of Mental Health at the University of Nottingham – chair

I'm delighted to be here and thank you Veronica for organizing a fantastic meeting and thank you to all the participants move around the world, which is really exciting.

I thought I'd start by saying that I've just had the privilege to be involved with the opera, by Justine Schneider called *Take Care*, which is an opera based on her own research on home care is working with people with dementia, their families, and it was recently put on at Lakeside in Nottingham. I think that's a great way of linking the arts with dementia and helping to really give people an insight into what it's like as a home care and what it's like for people's experiences in that realm, which I think has been very much under undervalued and certainly under-studied.

We've got a really packed programme today, as they say. And I'm very excited to introduce our first speaker professor Semi Zeki who is professor of Neuroaesthetics at University College London. Semir, Thank you.

Professor Semir Zeki

Professor of Neuroaesthetics, University College London

Thank you, chairman. Thank you, Veronica for inviting me to talk, I should try to be brief by addressing the question of necessity, for the experience is not a luxury. We often associate beauty with luxury and class and money, but in fact, it's a necessity for everybody.

To explain that I shall go to Sigmund Freud to ask a simple question. What do people seek? And he answered it by saying they seek happiness. How do they seek happiness?

Pleasure Principle

They seek it by satisfying what Freud called the Pleasure Principle.

Now it's quite important to realise that the Pleasure Principle as he pronounced it, he pronounced it in German and in German pleasure is *Lust* It means both pleasure and desire is conceived.

Medial orbitofrontal cortex and the experience of beauty.

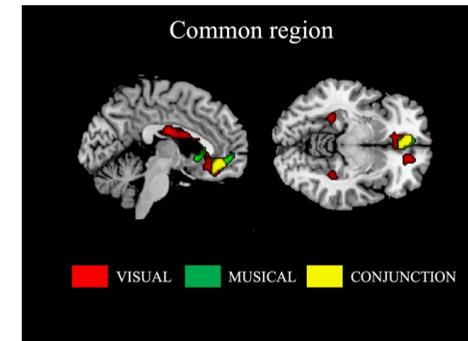
So the experience of beauty from whatever source, whether it's musical or visual or mathematical beauty or beauty from sorrow or from joy, always results in activation in this part which is called the medial orbitofrontal cortex, shown here in yellow. And that part brain is actually also active when people experience reward and pleasure. So, it puts people in a good state, healthy state, euphoric state, and it is a large part of brain, these parts any part of the brain is not there for decoration it's there to be made use of, and one of the uses to which this part of the brain is put is in fact, the experience of pleasure and the experience of reward. And one of the means by which we can experience pleasure and reward is through the experience of beauty.

Hedonic experiences

So there you have it in a way you have got an area of the brain that is specialised for what you might call hedonic experiences. But it is not all sitting there waiting to be activated whenever you feel like. It's just like the spleen or the liver or these things are active all the time and have got to be kept active. And in a way, the reward and pleasure centres of the brain should be kept active; and they can be kept active, among other things through the experience of beauty, regardless of the source from which it is derived.

And so the Pleasure Principle of Sigmund Freud: people disagree about Sigmund Freud's theories, but the pursuit of pleasure as a means of gaining happiness, which he claimed in his *Civilization and its Discontents*, his book, is the main thing that people pursue. The pursuit of happiness is in fact fundamental to our wellbeing. And one of the ways of pursuing that is through beauty, whatever its source.

Thank you very much. [VFG notes, see Debate below]



MO, chair

I now introduce Professor Helen Chatterjee, also of University College London, a professor of biology, genetics, evolution and environment.

Helen, welcome.

Professor Helen Chatterjee, Professor of Biology, University College London

Thank you, Martin. Lovely to be here and hello everybody lovely to see some friends and colleagues here.

Biopsychosocial impacts

My research has focused on understanding the biopsychosocial impacts of engaging in arts, creativity and community-based activities, including nature-based activities. What that means is understanding what happens across the whole body. We're really interested in the emotional effects, cognitive effects, physical and physiological effects, and also the social effects.

Like many people on this call today, I've been involved at various levels of thinking about how we can better connect the research that we do in the universities that here and across the world with what goes on on the ground, and the practice that many of you are involved in delivering with all different types of participants. To that end I've been working with the All-Party Parliamentary Group for Arts Health and Wellbeing (APPGAHW), like many people, Veronica and many people on this call.

Creative Health: The Arts for Health & Wellbeing (July 2017, APPGAHW Inquiry)

I think you'll all be familiar with this report. I hope the *Creative Health* report, which was a key product of that inquiry, that APPGAHW Inquiry, it was published several years ago. It's a great place to go and start understanding the diversity of that evidence-base. What we know about the evidence is that there's a fantastic plethora of evidence showing the benefits of arts creativity in community-based engagement. But we know that we have a big challenge about connecting up that evidence-based with both practice and particularly thinking about how we work better in partnership with healthcare partners, thinking about referral practices, which Veronica mentioned. Two of the really big recommendations came out of the *Creative Health* report and the APPGAHW Inquiry:

National Centre for Creative Health

The first one was to set up a national strategy centre around creative health, thinking about how we can better make links with the health sector. And we did that two years ago. So Lord Alan Howarth is the co-chair of the APPG for arts and health on myself and Alex Colter set up a new national strategy centre called the National Centre for Creative Health. And I'll put you some links in the chat in a second, and that's a great place to go to work in partnership with organisations like the Culture, Health and Wellbeing Alliance, who you'll be hearing from later, we work in partnership with the National Academy for Social Prescribing (NASP), NHS Personalised Care, and many of the different organisations to help think more strategically at a national level about how we can better embed arts, creativity and community-based practices in health to deliver better public health for all populations.

Masters in Arts and Sciences, University College London

Another key outcome was really to think about how we can better educate our new professionals entering both the arts sector and the health sector. To that end, we've created a completely new programme at UCL. It's a completely new qualification, a Master's in Arts and Sciences, recognising the really interdisciplinary nature of the work that we will all do; and also embedding those principles of creative health or health creation, embedding arts, creativity, nature, and community based approaches in public health. I won't have time today to tell you much about the details of that programme. Several of the speakers that you're going to be hearing from come from organisations that we work in close partnership with. Our students go off to visit wonderful collections like The Wallace Collection. They go off to visit and have activities like Green Gym activities, understanding the benefits of nature-based engagement. And all the students work in partnership with a research project with an organisation, some of whom are represented here today, like the National Academy for Social Prescribing (NASP) or like individual arts and creativity organisations. We couldn't really run our programme without those important partnerships.

Linking research policy and practice

I guess that really sums up the sorts of work that we're interested in, which is about those links, as Veronica said, that we need to make better between research policy and practice. I do encourage you to chat and think about what those links could be and think about how we can all work better in partnership together. I think there's some fantastic examples of that coming up. So I'll post some links in the chat and look forward to the discussion as we move through our webinar today. Thank you, Martin.

MO, Chair

Thank you, Helen. That's excellent. I think this working in partnership is key because I'm sure that some of the benefits are also related to the working in partnership element that you have for the arts.

[VFG notes: See Debate]

MO, chair Now we welcome Sue Mackay and Ruth Salthouse who are working in partnership at the Thackray Museum of Medicine in Leeds.



Sue Mackay, Culture Health and Wellbeing Alliance Regional Champion. Director of Collections and Programmes, Thackray Museum of Medicine
Great to be here. Thank you, Martin. I shall start - Ruth and I are going to speak together.

Ruth Salthouse, Wellbeing Coordinator, Linking Leeds, at Thackray Museum

Hi, I deliver the Linking Leeds, social prescribing (SP) service out of the Thackray Medical Museum.

Connections – macro to micro



Sue Mackay

As a medical museum, we have an imperative to develop programmes and partnerships which really help people to care for themselves and for others. That is our mission. Two of the most important connections within this stream of work are with SP and with the Culture, Health and Wellbeing Alliance, which Helen has mentioned.

Ruth and I wanted to expand briefly today on how those strands connect in the work that we're doing from the macro to the micro, and that's how we'll just structure our little talk today.

CHWA

- National
 - ACE funded
 - Inclusive
 - Membership organisation
 - supporting everyone who believes that culture and creativity can transform our health and wellbeing.
- Our vision is a healthy world powered by our creativity and imagination. We **connect, amplify and support** their work to transform people's lives and communities through culture and creativity.



Culture, Health and Wellbeing Alliance (CHWA)

CHWA is a national organisation, an Arts Council funded, free to join membership organisation. I've put the vision up here. I am the regional museum champion for CHWA in Yorkshire and Humber. There is also an arts champion, Deborah Munt.



Our role is to ensure that relevant organisations and individuals in our region are connected in their work: the Lived Experience Network and museum development organisations, Arts Council and other organisations such as the Leeds Arts Health and Wellbeing Network.

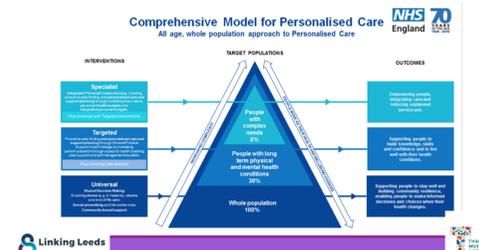
New regional CHWA steering group

We're meeting at the moment to discuss setting up a steering group because for Deborah and me it's quite a load to be representing the whole region. We advocate for the work that CHWA and culture and health generally does, showcasing NASP's national and regional work in forums like this. And we help members to develop their practice. We currently have a call-out for organisations to host, Doing it For Ourselves Together programme, which will be hosted by regional members to explore themes which are relevant to them - either recently completed projects or

things that they're looking to develop, and looking for help for, from other partners and members. So that's what we do nationally and regionally as CHWA, which as Helen mentioned, came out of the *Creative Health* report as well.

Ruth Salthouse, Linking Leeds

Giving some context on where Linking Leeds is coming from as a SP service. Nationally with NHS England, we have a Five-Year Plan for personalised care, which is trying to move away from health being a deficit model – ie, you're only healthy when you are free from disease and looking at it that way into a positive model, which is looking at wellbeing, looking at strengths in the individual. So really trying to empower people with their own health care, their own wellbeing, and looking at it from a positive point of view.



SP is a massive strand in this and has been funded UK-wide. It is predicted that every pound spent on social prescribing saves the NHS £27.50 in costs. What we're doing with social prescribing is empowering individuals to connect with things in their community, whatever that might be, that positively impacts their wellbeing. So, as Veronica mentioned in the introduction where, with brain health, engaging in local creative arts things, as we all know, can really strengthen health for that person

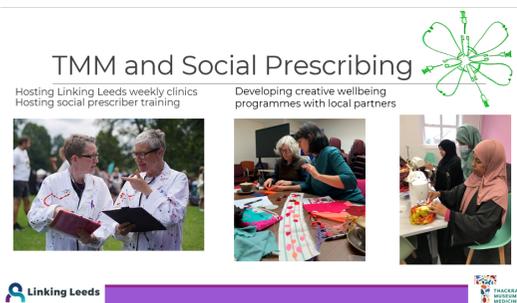
Referrals

What that means for us as Linking Leeds: We are working with over 500 people every month citywide; and we embed ourselves in our local communities as best we can. We work with GPs, we get self-referrals, we get referrals from other organisations as well to then link people up with local groups, services and activities to benefit their health. As you can imagine, we've got lots of things in Leeds that can help people and much of it grassroots. We use a database to find the right services for people that are in front of us. We try and keep track of all the information of all the partnerships we have in Leeds to connect individuals up with depending on their individual needs.

Linking Leeds



Sue Mackay – Thackray Museum the first UK museum to host SP clinics. So how does the work that Ruth and I do play its part in SP at the local level? We were the first museum in the country, as far as we know, to host a SP clinic, which is fantastic and very exciting for us.



SP Training

We also work with Linking Leeds to host SP training. That has involved, as you can see on the left, the art doctors who worked with the Thriving Communities projects that we have in Leeds with both Linking Leeds and ourselves, and other partners to put together training materials that would help the link

workers to really explore what creativity can bring to health. As well as working directly with SP, we also, as a museum develop creative wellbeing programmes with local partners. We've had a particular focus for some reason on textiles at the moment. You can see in the centre, community participants contributing to our [Periods exhibition](#).

Arts for financial wellbeing and improving life chances

We're not only about personal wellbeing. We're also about economic and social wellbeing, so the group of women on the right are learning to use sewing machines, producing products for wellbeing, but also improving their economic and life chances.

We have worked with a number of partners and SP, directly to further our wellbeing work.

Ruth, Linking Leeds

Having the clinic at the Thackray means is that we have a weekly clinic, based in the centre of the community in which we operate.

We work all across Leeds city region, but we work specifically in each of our communities.

Linking Leeds at the Thackray



- Weekly clinic
- More creative & relaxed appointments
- Accessible location
- Direct link into new Social Prescribing opportunities

As a Well-being Coordinator I cover this blue area (above). And as you can see, the museum is right in the heart of it. It provides a really accessible space for me to hold my appointments. And although there are lots of GPs based in the area, many are small, converted family homes and so often don't have the space for myself. Also, they have not been safe for me to use for the last couple of years due to the pandemic.

Having this space at the Thackray means I have a safe space to operate out of, to do my face-to-face weekly appointments. I can have more relaxed and creative appointments. I can use the museum space to walk people through. It's less clinical and it can get people thinking a little more creatively, a little more relaxed into what health and wellbeing means for them.

It has also provided a direct link into new SP opportunities. Everything is soon mentioned there with new activities that they're doing. Those go straight onto our database, that I can use to link people in directly with, but also their volunteering opportunities. I work with the volunteer manager at Thackray Museum to provide that information for people straight away when they walk in the door.

Sue Mackay

I hope that's been beneficial, you've learnt a lot. Certainly, as a museum we've really benefited from the partnership that we have made with social prescribing. It's really encouraged local people to come into the museum, which is a really key aim for us.

There are many barriers for some people to engage in culture. And so all the programmes that we can put together to help overcome those barriers are absolutely fantastic. We have been brought together through the [Thriving Communities](#) funding. Thriving Communities has now come to an end as a project, but as strategic and delivery partners, Together in Leeds, we've pledged to continue to work together.

Ruth and I are setting up a further training session for social prescribers so that we don't lose that link and we continue to introduce new social prescribers to the power of creativity in health.

Thank you.

MO, Chair

Excellent. A joint presentation there. I liked the idea of being an art doctor that sounds like very appealing job for me. I think the idea of also having a living museum which is really connecting with the community is wonderful. SP is something that's the present, but it's also the future. So we're going to need to be more involved in this and to learn more about it.

CHAT:
Katyhocking, retired GP, fine art student, Wales, to Linking Leeds, Why use words clinic and appointment. this medicalises it
Ruth Salthouse - Linking Leeds Katy Hocking - re medical language, we are funded by the NHS so have NHS language in our service. We try to make our service as holistic as possible - hence holding our service in community spaces like the Thackray rather than clinical settings. However, some of the clinical language is part of our service and how we work. It's an interesting point and something to think about.

MO, Chair

I'm now delighted to introduce Pam Charles from the Leeds Black Elders Association.

VFG

This very minute her colleague has emailed that she cannot attend today. Instead, here is Pam explaining her role at Leeds Black Elders at a recent A4D meeting. Leeds Black Elders is a wonderful association, where members meet weekly, and enjoy arts programmes there. If signs of a potential dementia were to creep in, members are always welcome to continue, whether or not they are actually diagnosed. I invited her to talk on this webinar, for her all-round inclusive approach - David Truswell whose guidance on language and approach to brain health practice for all ethnicities

is in our Arts for Brain Health report, is with us today. Pam's earlier talk includes music as well as visual arts:

Pam Charles, Advocacy Support, Leeds Black Elders Association (talk to A4D Yorkshire & Humber meeting, 21 October 2020)

My name is Pam and I work as an older persons advocate for Leeds Black Elders Association. LBEA was started in 1991 by a small group of local residents who realised that the needs of the local older Afro- Caribbean community were not being met by Social Services (now Adults and Health). These needs were cultural needs such as food, language, entertainment and general care needs. As time went on, the need for LBEA's services grew and they began to receive local government funding, gained status as a charity and were able to apply for funding from various streams. Although our name says 'Black Elders', we cater for all elders who may need support – we are very proud to be an inclusive service.



LBEA is part of the Leeds Neighbourhood Network schemes which is made up of 40+ various projects which are based in local communities and work with the elders within that community to reduce social isolation and improve their health and wellbeing. We have now been in operation for almost 30 years providing advocacy, social activities, gardening, decorating, delivering hot meals to elders homes seven days a week and we are also a 'gateway' to the services the elders may need to access. We are the first point of call for many when they do not know where else to turn and have an open-door policy to cater for any needs the elders within the community may have.

My role as 'Older Person's Advocate' is to support the elders in ensuring their voices are heard in the services which they access such as health, housing and finance. We will discuss what their desired outcome is and work towards that. I will work with them until a satisfactory resolution has been reached. My role is extremely interesting as no two days are the same as not, 'one size fits all'. Every elder is an individual and they are treated as such.

Reading group

The activities we provide are at the request of our elders, for instance, we had a few elders who were keen readers and requested a reading group. They told us how they would like this to look and we provided the space and support for them to do it. They took complete ownership of this group and we only got involved at their request. This was a successful group and enjoyed by all who took part.

Weekly activity club

We also run a weekly activity club where we have up to 40 members in attendance. Here we do a variety of activities including dominoes, knitting, different forms of art, we have guest speakers delivering information session on subjects such as health, scams, Wills and we also do an hour of exercise. This is led by a local gentleman who is a professional dancer and exercise coach. He plays the music that the elders know and love and all of his exercises can be done either seated or standing, whichever the elders choose.

For all elders

We used to run a dementia and stroke club some years ago and then decided that it would be nice to bring all of the elders together under the banner of the activity club. We have people who are at different stages of dementia, people who have had strokes, people who have various illnesses, people with various mobility needs and people who just want to get out and socialise. The beauty of this is that a lot of the elders had worked together in the many different industries in Leeds from the 1950's until retirement. We've seen the benefit of bringing everyone together as it creates a wonderfully stimulating environment. It has created a relaxed and open place to learn and understand various illnesses and conditions which can affect people. It arouses the interests and discussions of those who used to work in the medical field, of those who may be experiencing the same conditions and of those who are not experiencing any serious medical conditions. It breaks down barriers and allows those who may need a little extra help to be cared for by their peers.

The music, both live and recorded, is an extremely important part of our activity club. We have seen the positive and energising effect it has on all elders but particularly all those elders who are struggling with their mobility or have dementia. We have seen those with dementia sing a song from beginning to end with lucidity. We have seen them get up and dance while smiling and engaging visually with others. We have seen those with mobility struggles move in ways they thought they couldn't and report relief from some aches and pains which they have been experiencing for some time.

MO, Chair It sounds like a fantastic organisation.

CHAT

bisakha sarker Balbir Singh dance are doing amazing work in and around Leeds

Sue, Thackray Museum yes, big shout out for Balbir! We're working with him to develop creative walks for wellbeing :-)

MO, Chair Now we'll go on to Jessica Santer, who is going to talk about Art by Post. Jessica is from the Southbank Centre, Jessica.



Jessica Santer, Art by Post, Southbank Centre:

Art by Post is a project run by Southbank Centre. We started it in the first lockdown. Southbank Centre already had an arts and wellbeing programme that really focused on social isolation and loneliness, because we knew that that was a huge problem across the country.

To combat loneliness and social isolation

Some of you will know of the research that came out in 2019 showing us that 9 million people in the UK feel lonely some or all of the time. We know that it has huge impacts on our mental health, but also on our physical health as well. So it's something we were already really concerned about. When the pandemic struck, we knew it was going to become a bigger problem for more people across the UK. Although our building was shut and most of our programme closed and or 85% of our staff are furloughed, we felt the arts and wellbeing programme was the one thing we needed to keep doing. We could all see that huge numbers of arts organisations were turning to digital and offering really exciting digital

programmes. But we know lots of people don't have digital technology at home. We wanted to offer something different.

So we created Art by Post, which was a series of booklets that could be sent in the post to people every month, that were free. We commissioned a fantastic range of artists to create these booklets with us. We were really keen to find ways to continue to employ artists through the pandemic. That was really exciting.

We hoped that 300-500 people would sign up for this project, particularly those who were isolated, with long-term health conditions and didn't have digital technology. Almost overnight, 1,000 people signed up to the programme and that the number just kept on rising until we had 4,500 people receiving the booklets, once a month.

We then created a network of national partners to support the project, to help with recruitment, but more importantly, to be able to provide local support to those people, to signpost them to local services. Once people could start to leave their homes and to do face-to-face activities, they'd be able to invite them to that activity as much close to home for some people than London.



We always have this hope that we'd be able to have an exhibition. So along with the booklet participants received a free post envelope to send their artwork back to Southbank Centre; it actually came to my house because the Southbank centre was closed. So the free post was directed to my house. It was a bit like that bit in Harry Potter where the post just keeps coming through the door and hundreds and hundreds of artworks and poems and letters and drawings were sent to us.



In September, 2021, we were able to have an exhibition for two weeks at Southbank Centre, which was called Art by Post of Home and Hope. The exhibition then went on tour to five of the venues in the country to share the artwork with a wider audience. It's been a really wonderful project, a really great way to stay connected during the pandemic.

People talked about looking forward to the yellow envelope coming through the door. We created a bright yellow envelopes, so people could recognize it instantly. There was real excitement about as envelopes arriving in the booklets and finding out about the artists that month. Also people reported that they really felt connected to the large Art by Post community, even though they weren't meeting people.

We are now at the stage of considering what we do next, without bypass, how we continue to stay connected to these people around the country, but how we also returned to in-person face-to-face activity. I'm going to wrap up now but we made a lovely film, a really fantastic documentary about the project and on our website. Thank you. Jessica.santer@southbankcentre.co.uk

MO, Chair

Thank you. That's excellent. It's amazing to think of how many people you're actually in contact with and how many people you connected with in the pandemic. It's really an example of fantastically being able to do, reach out to people. I think we'll obviously have people have lots of questions for the presenters.

MO, Chair, I'd like to introduce Kate Mason, who is director of The Big Draw.

Kate Mason, Director, The Big Draw

First of all, thank you so much for inviting me on behalf of The Big Draw to take part. I feel like I'm in very illustrious company with everyone here. I feel like I'm coming at it from a slightly different angle, perhaps in the terminology that we use at The Big Draw. It's really interesting to hear how everyone's framing it.

For people who don't know The Big Draw, we've been around for 22, 23 years, very much based on our community participatory-based model work. It has really just grown and spread around the world.



I often go into schools or universities and we get this idea of seeing people to think about drawing and visual thinking.

The Big Draw isn't just about pretty pictures and drawing with pencils and paper.

It's about making marks with meaning, and it's looking at how you might make marks across a whole range of different disciplines and sectors in different materials. We work cross sector. It's polymathic, it's interdisciplinary.

So some of the things on the slide (above) that we talk about, which I think probably will resonate with some of the things that you all will be talking about.

"The Big Draw warmly welcomed the principles outlined in the new strategy, particularly the shift to focus more on celebrating 'everyday creativity' and the value of the process. The strategic aim for value and creativity for all aligns perfectly with how the charity has been collaborating and creating for the last 20 (now 22) years" ©



- The democratising power of drawing is universal
- As a non-verbal language its power to adapt to each user's need to find a voice is unique and empowering
- For many it plays a key role in recovery from illness, anxiety and at times of major upheaval, loss and change
- For others it can help them re-connect with a community, combat loneliness and the sense of isolation

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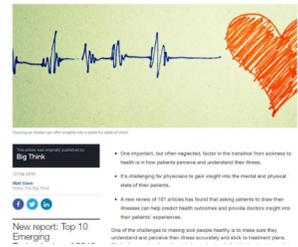
has been struggling with isolation, very popular. Another example in Marigold the maker, it's hard to pull out from so many thousands of events.

Sketch crawls

Another regular thing we do is we run sketch crawls. I think that brings together the, the haptic, the hand to eye it brings the social context, people coming together. It's the outdoors, it's the nature. It's the slowing down. It's the looking at things, fragility of nature around us, all of these things playing into feeling better.



What doctors can learn from patients who draw their illnesses



Lived Experience I mentioned earlier about the people that we choose to partner and work with. We will always go for people with lived experience. One of the things I wanted to talk about very briefly about myself. I mean, I also have lived experience as the Director of The Big Draw and I use drawing and knitting actually, and sewing, to help me feel better. I've written about this. I have severe OCD if untreated and I use my own SP in my everyday life to do what I need to do. This is coming from a very personal perspective as well, which I think feeds into our work.

Lived Experience



Resources



We have lots of resources, online videos, blogs. We have Mini-Mag resources. There are case studies online, all downloadable. If people want to find out more and get in touch with us, they can j email us and I'll put some things in the link later. So a lot to get through, hopefully that helps. Thank you very much.



MO, chair

Thank you. That's really wonderful. I love all the visuals. They're amazing. It's brilliant, the ideas and how it all comes across and seven million people is truly staggering, to think of seven billion being linked up with The Big Draw.

Kate Mason

Well, that's direct participants over the 23 years here, that doesn't include any of our digital audiences which were enormous on top. But I would say to all of the amazing people on the screen today that we want to share and champion what all of these organisations are doing. So if people do have stuff we would love to be able to promote, help, share and promote them, through our **Newsletter** and social media **Twitter:** @The_Big_Draw | @Drawinglives | @KateJMason **Instagram** @thebigdraw

MO, chair Excellent. Thank you very much. Now we move on to Holly Power, who is the Community Learning Producer for The Wallace Collection.



Holly Power, Community Learning Producer, The Wallace Collection

Hello everyone. Thank you so much to Veronica for inviting me to speak today amongst the very esteemed group of speakers. I'm very honoured. So thank you very much for, including me.

I manage the Community Engagement Programme at The Wallace Collection. We are a historic townhouse located just behind Oxford Street in central London. We're a national museum and we have a very large collection. The collection ranges from old master paintings, French porcelain furniture, wax, miniatures, and arms and armour, all of which we use as a basis for a range of programmes that we offer. And I've just included some images so you can get a sense of what we're like. We have a very well-established programme for adults with a diagnosis of dementia, from early-onset dementia, to late stages, we visited a range of settings.

We have a very well-established programme called Out of the Frame where we go in to care homes or bring, invite people into the museum. We have lively conversational sessions around the collection.

But today I'm going to present something slightly different to you. It's a project that we haven't yet done. It's a project that we'd like to do. So presenting some of those ideas to you today – here are my contact details if you like to get in touch. At the Wallace Collection, we're particularly interested in how participation in arts and culture influence feelings of wellbeing and social connection, and how they can support people to lead fulfilling lives as they age.

Regular arts engagement

Through delivering regular sessions what we've seen is that people keep asking us when are you coming back, when can we see you again? It's that regular engagement in arts activities that we feel people are really lacking, or that they would like to be regularly engaged. It's interesting what you were saying about drawing and it being a very democratic thing. I think sometimes we find people are quite nervous about drawing, the amount of times people tell us *I can't draw it*, but it's like we're very much equally. It's not about that. It's about trying things. It's about process. It's about just developing, and creative response. So that's what we're about as much as anything.

Year-long arts programme to preserve brain health

Today I'd like to share some aspirations for a year-long programme that we'd like to run for older adults pre-diagnosis, for those experiencing maybe mild memory difficulties or some cognitive impairment, but not quite diagnosed and they're going to the GP and they're starting that process, pre diagnosis. It can be a long and quite alienating process. We'd like for them to be signposted to our programme.



It would be a year-long programme - three eight-week terms. Working in partnership with organisations would be essential to delivering this programme, particularly link workers and local SP networks, in and around the London area, that we haven't developed as fully as we would like at the moment.

So I'm very open to hearing from you, your advice about working with new co-workers in SP. We can feel that our overall aims of the programme would be that if people engage in weekly arts activities in the months leading up to memory assessment and diagnosis, they'll be able to maintain a sense of identity, fulfillment and belonging in the community.

Social connection

Social connection would be crucial too. Attacking loneliness is something that has been identified as part of the GLA's long-term plan, and learning. This is a key issue in London; and it would be as much about social connection as the arts.

I've just posted a quote on the slide above, I came across this Centre for Cultural Value report last week. It felt very fitting for the seminar today and also what we've hoped to achieve. It talks a lot about cultural participation, affording older people, a range of positive emotional, making them feel happier, and how it talks about how engaging with culture also that all people's feeling sense of achievement through opportunities to experience, challenge, and learn new skills, and about personal identity and building collective identity, which in turn lead to increased confidence and self-esteem. That's all something that we would draw on and hope to achieve with the year-long programme such as this.

Thank you very much for having me. I look forward to talking with you all later.

MO, Chair Thanks very much. That's really exciting what you're doing. I think they were going to be thinking later on about what the arts do, how do the arts work, if you like, which is an important question.

CHAT

katyhocking: Hi holly, do you take carers too? holly.power@wallacecollection.org: Hi Katy, yes absolutely carers are very important part of the programme!

MO, Chair

Now we'll hear from a SP Regional Learning Coordinator. As our invited Regional SP Learning Coordinator was struck down this morning, Nigel Franklin of Arts 4 Dementia will very kindly read the highly informative paper given by the Learning Coordinator Sian Brand to our recent music for brain health webinar:

Sian Brand, NHS England East of England SP Regional Facilitator and Learning Coordinator.

Thank you, to all the previous speakers, I am just so totally inspired. I've been in social prescribing for a number of years now, probably almost seven years from when the Network started the national network - moving from a social movement of SP to national policy in probably the quickest turnaround I've ever seen happen for the NHS in terms of commissioning something.

So where does SP sit? It came around formally within the [NHS England Long-Term Plan](#), which is now three years old. Funding for the link workers has been in place now for 2½ years. We're still relatively new in terms of national policy. But since that point, we've actually grown the workforce of SP link workers to in excess of 1500 across England. That doesn't include SP link workers in the devolved nations or emerging across the world, as we know from Bogdan and the Global Alliance.

NHS Personalised Care: *What matters to you, rather than what's the matter with you.*

It's very much within NHS Personalized Care strategy. You may have heard the saying it's about *What matters to you rather than what's the matter with you*. We're changing that conversation we have with people we're talking to in the NHS and really focusing on their strengths and their assets, their history, what makes them them - music is absolutely a key part of this.

Surgery-based link workers

These link workers generally are based around GP practices. Many are hosted actually by voluntary sector organisations, but they serve a practice-based population. Anybody with a social need should be able to access a link worker at an appropriate point where they need it - and obviously never more so than during the pandemic.

Link workers seeing how music meets people's needs

Have we seen the need for SP link workers and that shift to supporting people in their social needs. And music, absolutely, as we've heard from the evidence, and it's wonderful to have that. Evidence plays a key role in health and wellbeing generally, so that bio-psycho-social model and the link workers play a key role in knowing what's in the community - that comes as a generic part of their role as link workers. But also the need has been mentioned by others, particularly around connecting and knowing what's happening in their communities - it will be different even across the county, as to knowing what's available when, where, and to whom.

How SP learning coordinators / regional facilitators can guide link workers to music/arts

I, in my roles as learning coordinator and regional facilitator support the link workers directly very practically around the learning and development. I am

opening their eyes and I'll absolutely be sharing this webinar with all of my link workers in the east and the national team as well

Supporting Integrated Care Systems

Also I support systems. We have emerging integrated care systems, and these will be the strategic leaders in regions that will be deciding how their money is spent. I will be placing in front of them, things like this, that say, look, look at the evidence, look at what Phil's doing. Look at how Grace is reporting different schemes and look at Victoria's reports. What are we doing? How are we spending our money? And we will work very closely with the [National Academy of Social Prescribing](#) (NASP) and the [regional leads](#) around Thriving Communities.

What's really challenging for those link workers at the moment is working in a pandemic. They have very, very heavy, heavy caseloads. So if organisations or musicians suddenly pass their information to individual link workers, it's very difficult to get that grit around building relationships because they are so stretched. Even though the ambition of NHS England is to grow teams of link workers within primary care networks and GP practices, we're not quite there yet.

Raising awareness to link workers

The easiest way is probably to connect with your [regional facilitator or learning coordinator](#) and link with [NASP Thriving Communities lead](#) for your region as well. That way we can build a sort of mini distribution of knowing what's available for music in a set area and share that in a much more accessible way for the link workers to get hold of that information.

We hold peer support sessions, and many of the areas actually like to have speakers come along and tell them what's going on. There are some really practical ways that we can help you connect. I hope you take that opportunity to link with those appropriate people.

My job after today is to spread the message about this wonderful webinar and the Q&A to the link workers in my region. I'll definitely do it with my other learning coordinators across indeed the country - and the national team as well.

MO, chair

Nigel, thank you very much. That's really great of you to step in and very helpful presentation.

MO, chair

Finally we have, Hamaad Khan, who's the Development Officer for the Global Social Prescribing Alliance. Hamaad, has joined us to speak at quite short notice. We really appreciate your being here and very much look forward to your presentation. Thank you.

Hamaad Khan, Development Support Officer for the Global Social Prescribing Alliance, talking on the NHS SP Student Champion Scheme

Thank you, Martin. I'll just go and talk about my session. My name is Hamaad and I'm a postgraduate student studying for my Master's in Global Health at UCL.

I also work as a Development Support Officer for the Global Social Prescribing Alliance, which is in partnership with the The National Academy for Social Prescribing (NASP).

NHS SP Student Champion Scheme – bidirectional learning & support benefits

But in my second year of my undergraduate studies - that was only two years ago when I was studying neuroscience at Kings College London - I had the absolute pleasure of being introduced to Veronica and the A4D programme.

In my three-month volunteering experience, I learned more about medicine, health and disease than what was offered in my university curriculum even now. I saw first-hand how dementia is more than just its physical symptoms and pathophysiology, that the personal burden of dementia can diffuse across relationships. But most importantly, I saw how patients were empowered by the arts in the very moment they were supposed to be disempowered and disaffected by their diagnosis and dementia, along with many other diseases, as far as too often, defined by loss and deficit, social prescribing, particularly with the A4D programme, allow patients to find their health and wellbeing again. This just won't be my personal experience.

Offered at every UK medical school

NASP now funds the Social Prescribing Student Championship Scheme allowing doctors of the future to learn, engage, and promote SP in their region, just like I did with my volunteering experience. And as a result, I'm proud to say, we now have all medical schools in the UK teaching SP in some form. Some places like Imperial College have now dedicated an entire module to SP.

Medical and healthcare students strengthening medicinal practice of arts and health through SP

This year as we welcome our new cohort of 22 studentship awardees, which I'm delighted to say also includes not just medical students, but allied healthcare students. We hope to further strengthen the truly medicinal practice of arts and health through SP, where students can learn and experience the power of art to our health and change the future clinical practice towards a more personalised holistic biopsychosocial care model and recognise the power of creative arts to our patients.

If anyone is interested in learning more about the Student Championship Scheme for SP, here is my email hamaad.khan@nasp.info

MO, Chair

Thank you. Hamaad, that's really helpful. It's great to hear about your experience.

I'd like us to thank all the terrific speakers this morning. It's really been a wonderful set of presentations and lots to inspire us and lots of connections. I think a lot of people, some of the speakers particularly have joined this, because they're great believers in arts for dementia, but also because it's a wonderful way of developing and maintaining connections.

DEBATE

MO, Chair

At the beginning we talked about the Pleasure Principle and I'd like us to think about how they arts work, how the arts work on humans. One of the things is that it's having an experience of the arts is not just in the moment, it is in the moment, but there's also looking forward to it, the anticipation, it's not just a snapshot experience. At the time it's enjoyable, it's creative, stimulates reflection, but also afterwards, you can reflect and reminisce on it. But also it helps connect us in a relational way to other people and to the world and helps with our identity and sense of dignity. So I think that sometimes people just think of the arts in the moment, but actually there's the before, there's the during, and the after. Would people like to comment on that?

Professor Semir Zeki

Yes, I'd like to comment on that. I think it's an extremely important point. I think what has come out this morning is the realization implicitly, perhaps not explicitly, but the implicit realization that the arts and activity or artistic activity involved in the arts has an organic effect. I think people often believe that art is something spiritual and there's not so many for the GP, for example, to prescribe, but it is and if you want to reward the reward system, if you want to keep it active and going, you have to do that.

I was extremely interested in what Kate had to say from The Big Draw. Why is it so effective? And the reason is that it actually concentrates the brain achieving a concept, the end result of which is the satisfaction of the pleasure principle. I know that in Austria and Switzerland it is used very, very regularly in hospitals, actual drawing classes in hospitals on a daily basis. It engaged them completely until they get the satisfactory answer that gives them the pleasure, which of course excites the pleasure principles. I think as long as we as a society realize that this is not just something which is spiritual, but it is actually organic. I think is implicit in all the talks morning,

MO, Chair

So Semir, can I ask you, do you think it's just a drive related to pleasure and desire, or do you think there's other elements as well? Because that was how you kicked off your talk in relation to the impact on the brain.

SZ

I mean, of course Freud emphasized sex, as he would, but he also emphasized the arts. He did talk a great deal about the arts. I think it is a drive, but why did you have that drive? It is like a hunger. It's got to be sated. You've got to eat. In a way you've got also to assimilate those centres where they cannot be left inactive. So I think it's a built-in drive. Yes.

CHAT:

David Truswell, Some Fresh Thinking (www.demace.com): It would be interesting to:

- * know what success the presenters we have heard from today have had with engaging with minority ethnic communities and including them and their cultural activities in their work. *
- * work more directly with minority ethnic groups and their own cultural forms.

Eva Rista, Jakarta Hospital, Indonesia: I'm interesting in The topik. Many older in my country have serious problem about dementia. The WHY child don't care about the cognitive impairment make the elderly to have dementia. Interesting about art make stimulating cognitive in elderly

MO, Chair

I'd like to move on to a question in the chat from David Truswell, which is about how far people had success, engaging with minority ethnic communities and including them in cultural activities in their work, maybe people do. Kate?

Kate Mason, The Big Draw

We tried something It was a new thing that we did last year We did a number of digital residencies for artists, but we spent quite a lot of time of team time and outreach trying to work very hard on the language and the positioning and how it was promoted. We did do it differently to how we'd done it before.

Adapting language to limit 'othering'

We really did change the language and the approach with a view to limiting 'othering'. Like so many arts charities, The Big Draw is a fairly mainstream arts charity. I think they fall into that category quite easily. We had to work quite hard to do something different. We did change it and we had a totally different result, which was fantastic.

Evaluation – language made all the difference 'I can see that that's for me!'

We were offering nearly £2,000 for a pretty much free reign, digital residency however the artist or the collective wanted to do it, working with us, with support from us and resources and mentoring and all the rest of it. And I'd never seen any of these submissions, these artists, or these groups coming forward before. The evaluation showed that the language made all the difference. There's lots of arts opportunities out there and they'd look at it and think *I will come back and apply for that because that's for me - I can see that that is for me*. It was all down to the language, but also how we encouraged partners, community organisations to support us with the promotion, So at that grassroots level as well. I've been at The Big Draw for nine years. I've worked in the arts cultural sector for 26 years. And I was a bit sceptical actually. I thought, it's not going to make much difference, but it really did make a total difference in who came through, in terms of us being able to then shine a light on those underrepresented and overlooked voices, which is really what we wanted to do. (Kate-The Big Draw adds in the chat: I think it is all about that. Giving safe spaces. Whether physical or virtual platforms of support).

I would say we had some pushback as well, which was quite interesting. We did have few difficult phone calls. We had a few emails who were uncomfortable about the language, saying that it, in some ways excluded them. They were mainly coming, I would say from more of an older, white, more privileged demographic. but we did have that, which was interesting in itself. The residences were hugely successful. Of course they were bringing in their own networks. It's something we would like to do more of again.

CHAT:

Jita, social prescriber, Sandwell PCN: I found it insightful that some communities felt intimidated by new community centres which was the reason they were not taking up their covid-19 vaccination at their local community centre. They felt intimidated by Art

MO, chair

That's excellent, thank you. I know there's been some work on job adverts and job descriptions and the language is crucial in terms of who applies and is put off by it.

Kate Mason, The Big Draw

It really wasn't like that really. It sounds awful. When we were looking at the team, I thought that sounds a bit long-winded, but then I thought no, this is how we need to do it. This is what we need to do to reach the people that we want to reach.

MO, chair

I think people use the term candidacy, in a way where you can see yourself, oh, that's something for me.

KM

Well, that was what we kept hearing. People were saying, *What we could see, this was something for me*, that the people that we got a bit of a pushback on it. We made every effort within all the copy to say that this is open to everybody. it wasn't positive discrimination. It was open to all, but we were encouraging. So it wasn't, It was how the individuals were self-identifying. So actually those individuals that were a bit sniffy felt that they identified for whatever reason as being an underrepresented or an overlooked voice time, whether they should have replied.

MO, chair

Okay, thanks very much. And I think this is an important point about white privilege, because it's something we might not be aware of us ourselves, but it is around.

CHAT

VFG Language is so important, which is why it really helps referring to non-stigmatising 'brain health' for people before they are comfortable with their diagnosis of dementia, which may be years later. So many participants used to say 'I haven't got dementia' 'I haven't got Alzheimer's.' Though more than one A4D participant liked to reassure us that they had a diagnosis simply for the camaraderie, though they were warmly welcome – and did – continue anyway.

MO, chair

Helen, do you want to come in?

Professor Helen Chatterjee, UCL

I was just going to suggest that you bring in Ruth, because she might have some comments from her experience . . . I was actually going to respond to yours and Semi's questions, so maybe we can come back to that.

Ruth Salthouse

Thanks, Helen. As a city-wide service Linking Leeds, we work with everyone. We've only got two referral criteria from our service, which is for people:

- Aged over 60
- Registered with the GP

Translation

We also have access to a translation service over the phone, which is on demand. Around 30% of our clients are people of colour, from different ethnic minorities. We see a lot of people, a really even cross section of the population of Leeds. And in terms of actually getting them into creative activities, groups, that sort of thing, what we find is successful is when, I think Kate mentioned a really good point about feeling like that space is for them.

Project run by community for community

So in their local area, run by people who look like them or have similar experiences to them. One of the activities that the Thackray Museum, the textiles work has been run with a local organisation called Give a Gift who are made up of Muslim women. And they're bringing in people who are of their community, other Muslim women to interact with the museum in that way. And that's where we find it really works. Having big institutions just put on activities that on their website, isn't enough. It's really letting those activities be run by the communities that they are there for.

MO, Chair

And I think that crucial connection and outreach, and actually having an understanding of what actually will work for them.

Sue Mackay, Thackray Museum

I just wanted to build on what Ruth was saying there. We recently relaunched the museum with the aim of engaging with the local community. We're in Harehills, which is one of the most challenged wards in Leeds and in the country. It's an incredibly diverse and dynamic community. We've thought long and hard about this and done various projects since we relaunched to engage the local community.

Giving space – to make your museum a community asset

What we found is that it's about putting yourself out there as a community asset, and truly collaborating the programmes that you put on. We have to acknowledge that there is a complete imbalance in the demographic of people engaged in the arts. We are mostly whites and at leadership level we've mostly middle-aged. So we need to acknowledge that and we need to do a lot about our recruitment and, importantly, as Kate was saying about the artists and the other organisations that we collaborate with, so that's really important.

What we found works is to simply give space. We have the luxury of being funded by the Arts Council as a National Portfolio Organisation over a number of years. And that means that we do have the ability to give space to the community, literally allowing them to come in and use our space for meetings, which enables us to grow really exciting relationships and truly co-create programmes. We find out what people are interested in and then we're able to help them develop programmes around it.

So those are my top tips,:

- Becoming a community asset
- Giving space
- Co-creating and artist collaborations.

Thanks.

MO, chair

Thank you very much, Sue. I think, space is a crucial thing, isn't it? Because a lot of organisations do want to have places to meet. So if you can offer some way that that automatically gives you a link and a way in and showing that you have an understanding of some of their needs as well, space of which is one of them.

Helen was going to comment more on thoughts on how the arts work.

Professor Helen Chatterjee, UCL

It was just going back to that point, really, such an interesting discussion about what it is about arts. I would also include in that nature. A lot of our speakers have talked about the importance of connecting with nature as part of arts and creativity. Semir you mentioned immersion.

Multisensory benefits

I think it's also useful to think about that the part of the benefits of these activities is that they are multisensory and it's a whole body experience. even if that's just for some people simply using their upper body or thinking about things like hand-eye coordination.

So you've got, as Semir says, that deep level cognitive processing, but there's also that emotional connection. A lot of people have talked about psychosocial benefits. So I think it's really helpful to think about these benefits in the round, across the whole body and that sort of embodied experience. There is a physical and a physiological component, and there is this deep level of cognitive processing; and there is also those emotional and social connections.

Creativity is at the heart of all of that. Maybe that links into Semir's ideas about the Pleasure Principle and understanding the cognitive aspects involved in creativity and being creative across the whole body. So I hope that's useful, but it really helps us when we think about articulating the benefits of these sorts of activities to think about the multisensory aspects of it

CHAT:

HC adds two useful papers exploring links and synergies between arts and nature:

* Thomson, L.J., Morse, N., Elsdon, E. & Chatterjee, H.J. (2020). Art, nature and mental health: Assessing the biopsychosocial effects of a 'creative green prescription' museum programme involving horticulture, artmaking and collections. *Perspectives in Public Health*, 10(11), 1–9.

* Fairbrass, A.J., Chatterjee, H.J., Jones, K.E. & Osborn, D. (2020). Human responses to nature- and culture-based non-clinical interventions: A systematised review. *Perspectives in Public Health*.

Ian Witterick, carer, Kings Langley, Herts: May I suggest "Forest Bathing", can also be incorporated into the arts, photography, video on mobile phones and getting back to nature.

VFG: Nature & Heritage for Brain Health is our next Webinar on 10 May.

Professor Semir Zeki

I think Helen has made a very important point. Creativity is one of the most important issues that we can address as a society. And one which about so little is known. why it gives so much satisfaction, why it engages people so heavily, that it satisfies them. I think it's one of the most wonderful subjects, but we've got very little in terms of grants awarded to studies, creativity, to studies of creativity, and very little is known about it. The only thing we do know about it's extremely effective.

MO, chair

Yes. Thank you. It's interesting. Because I think also art has a role in making sense of the world for us. So I wouldn't say that it's just something which is not just about pleasure, but it's actually about helping the making sense of what's going on,

sometimes making sense of trauma, making sense of what you want to be doing, where you want to be and how you relate with other people. We see this as people like watching dramas that they can relate to, you know, amongst other things,

SZ Very important.

MO, chair

Veronica has mentioned the next May webinar will be Nature and Heritage for Brain Health. I see that some of these things are actually about going back to nature. I see in the chat. It's been a very rich and diverse seminar.

SZ

May I just say, so I think you just made an extremely important point, which we've just glossed over about art giving you knowledge about the world. This is an extremely powerful point. I would just put it in a broader context. I would say that in a way it stabilizes our world for us by giving you more knowledge it stabilizes. There's great comfort in that. I think it's an extremely important point to make. Thank you very much for it.

MO, chair

Thank you. That's fine. I'm going to thank you very much all the speakers today and also for the very interesting debates and the excellent points. I think the connections people have made in both in their talks and also in the chat are really very important. And then there's a paper in the chat about 'Art nature, mental health', which is in *Perspectives and Public Health*. So now I'm going to hand over to Veronica for the closing remarks. Thank you all. I'd just like to thank you for organizing this wonderful event.

VFG

Thank you Martin, for your excellent chairing. As Professor of Psychiatry, highly involved in this field, it's been a real privilege to have you as chair. Thank you so much and to you all for speaking today, for sharing your expertise, to help spread the practice, to bridge the gap and empower people earlier than ever before, from the onset of symptoms of a potential dementia – how we must avoid that stigmatising word – to preserve their brain health through the re-energising social and cultural inspiration of arts.

Thank you to all our delegates from near and far – and special thanks too to our A4D Arts for Brain Health Webinar Coordinator Amisha Palmer, especially for licking the recording into shape – what a star! – and Nigel Franklin, always a magnificent support in the webinars.

CHAT:

s.zeki@ucl.ac.uk: Helen, Kate, Holly and Hamad...greatly enjoyed your excellent talks - very inspiring. Kate. get well soon

Tessa Murdoch, Chair of Trustees, Huguenot Museum: Inspiring session which will promote social prescription at the Huguenot Museum and connected French Hospital in Rochester Kent, where residents are of Huguenot Heritage

katyhocking (replying to VFG on avoiding the use of the term 'dementia' for its stigmatising associations until the individual is comfortable with their diagnosis, thus arts to 'preserve brain health'; also, to preserve a sense of normalcy, not to call family partners 'carers' although mindful of their caring roles, until post diagnosis – activities to preserve brain health are for both individual and partner): I understand your point on wording although the companions themselves need to be supported and acknowledged as carers who have their own wellbeing needs.

katyhocking Art encourages you to look at the world differently

Hamaad Khan: Thanks again Veronica for the opportunity to speak about the student involvement in social prescribing. It was a really insightful discussion - especially hearing Professor Semir Zeki talk about the neuroscientific need for creativity.

Kate-The Big Draw Thank you for the kind invite Veronica to speak at this fab event :)

Ruth Salthouse - Linking Leeds Thank you all, great to talk with you all.

Victoria King MA FRSA, Director, Renaissance Commissions, Essex A very interesting informative and stimulating webinar.

Dr Emma Poynton-Smith, Nottingham Thank you!

Sioelan Tjoa, physiotherapist, Cumbria thank you all speakers - so informative and inspirational!

Nicola Chance, art teacher, London Thank you fascinating presentations and discussion.

Jita, social prescriber, Sandwell PCN :Thank you all 🙌🏻

Ian Witterick, carer, Kings Langley, Herts: Thank you all, a brilliant event. Thank you.

katyhocking thank you all

Magda Salvador, teacher, Portugal thank you all

Helen Shearn, Consultant, Arts Heritage & Wellbeing, Surrey: thanks you very much

Helen Tooth, musician, Nottingham. Thank you

Dominiquelevack, Music specialist, composer, Worthing Thank you very much!

VFG recommends, if starting social prescribing to the arts to preserve brain health:

[A.R.T.S. for Brain Health: Social Prescribing transforming the diagnostic narrative for Dementia: From Despair to Desire](#)

Contact

- Local Primary Care Network for social prescriber link workers and
- Regional Social Prescribing Learning Coordinator
- Regional Culture Health and Wellbeing Champion & local arts health & wellbeing networks.
- SP Social Prescribing Student Champion Scheme
- Arts & Medical College
- Signpost your programme on [Arts 4 Dementia](#) to raise awareness to participants.
- If non-UK, Global Social Prescribing Alliance