

Reviews

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Review

Health through Arts: Connecting People & Communities,
A Sidney De Haan Research Centre Webinar Series, Kent,
UK, January–June 2022

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Between January and June 2022, scholars and practitioners from the United Kingdom, Europe, United States and Australia joined the Sidney De Haan Research Centre for Arts & Health (SDHRC) at Canterbury Christ Church University (CCCU), Kent, United Kingdom, for four research webinars, centred around the theme *Health through Arts: Connecting People and Communities*. The webinar series explored ground-breaking research about the impact of participatory art-based applications for individuals in healthcare and well-being contexts, including bedside theatre for children in hospital, choral singing for people with learning disabilities, puppetry and disability in healthcare, and virtual reality (VR) experiences with young people with serious conditions in hospital. The webinar series was held on MS Teams live events which was hosted and managed by colleagues from the SDHRC. The academic panel consisted of one or more presenters, who shared details of their research and findings, alongside another expert in the field who joined the presenter(s) in a later discussion. What follows in this review is

an explanation of the topics and format of the webinar series, followed by a discussion of some key points raised. Together, the four webinars demonstrated a range of the vital work happening in the cross-section between arts and health and suggested some ways forward for art-based applications in healthcare settings.

In Webinar 1, Persephone Sextou, joined by Sydney Cheek-O'Donnell, discussed the evaluation of an applied theatre project for children in hospital as perceived by hospital teachers. The project aimed to explore factors such as engagement and learning and to improve the hospital experience. The study concluded that applied theatre in paediatrics can engage children with hospital schooling and learning during treatment, enhance the management of emotions and help them relax and communicate with the outside world. Webinar 2 discussed key findings from the first ever-known evaluation of a participatory choir for adults with a learning disability. Esther Coren, Julia Moore and Jacqueline Tallent, joined by Daniel Marsden, reflected on a collaboration between SDHRC and East Kent Mencap (a charity for adults and children with learning disabilities, based in Margate, United Kingdom), who facilitated the choir. Alongside key findings, the presentation also discussed future steps in developing data collection processes to record responses of vulnerable populations. Emma Fisher-Owen and Cariad Astles were joined by Susan Linn for Webinar 3, presenting research in applied puppetry in healthcare. The testimonies of puppeteers working with patients in healthcare settings and the use of puppets with trainee doctors and nurses to explore notions of empathy, care and anatomy were discussed. Webinar 4 reviewed findings of the 'Future Stories' pilot project, where VR experiences were co-designed with three young people in hospital. Michael Balfour, joined by Robyn Ewing, discussed how the VR worlds were

fully navigational, meaning the participants could become embedded in their creations. The designs used photogrammetry mapping to make the worlds as realistic and functional as possible and, the participants could share their VR worlds with hospital staff and family members.

All four webinars followed the same three-part structure consisting of a presentation, a discussion between the presenter(s) and another expert in the field and a Q&A with questions from attendees. Each section was approximately twenty-minutes long. The discussion segment made it possible for presenters and discussants to delve further into the research discussed and to compare their experiences. In the Q&As, the speakers answered a selection of thought-provoking questions and observations from attendees, with specific examples as follows: ‘Is there the opportunity to use storytelling through lay people in hospital settings as an extension to take this forward?’, ‘The comment on pain, and distraction from pain through singing is very significant, did this point emerge from the evaluation?’, ‘How do you think disability studies might better inform the future work of artists in healthcare?’ and ‘Were you able to complete VR projects for patients who were discharged, or were patients identified on their length of stay in hospital?’. After the webinars, it was reported how several discussions from the Q&As had prompted further conversations via e-mail, creating new contacts and networks for the SDHRC. The three-part structure was noted by both panel members and attendees as a format that opened up new dialogues, offered the opportunity for knowledge exchange and ultimately created a more democratic and pluralistic event.

The report data generated from MS Teams provides an idea of the research impact of the webinars in terms of how many people attended and how they interacted. Over a

hundred people participated in the webinars, representing many different institutions, from universities in the United Kingdom and abroad (including countries such as Italy, the Netherlands, Greece, Poland, Ireland and Australia), the United Kingdom's National Health Service (NHS), as well as arts organizations and publishing houses across the United Kingdom. To help promote more attendees for future webinars, the SDHRC hopes that representatives from different organizations will feed back news about this series to their colleagues. Through MS Teams report data, we would be able to compare attendee numbers across series and record any measures of success. Recordings of the webinars have been made publicly available on the SDHRC's website^[1] with the aims of providing a continued interest and inspiration to those seeking information on arts and health research.

The webinar series showcased some of the important research that is currently happening in the cross-section between arts and health. It was striking to see that all four webinars demonstrated how the arts can give agency to vulnerable individuals and groups in healthcare settings, lending participants a creative space to explore self-expression and identity without the sole focus relating to their illness or disability. For example, Sextou emphasized how intimate and synergistic bedside performance engages hospitalized children with stories as a distraction from illness, creating space for entertainment, learning and the expression of emotions within the safety of the fictional world. This approach offers children an opportunity to gain greater control of their hospital experience, which is often unavailable to them in the hospital context. Similar themes were also echoed in Webinar 4, with Balfour explaining how young people with serious conditions in hospital often feel a low status in this type of environment. Through co-

production of designing VR worlds, individuals were allowed to become ‘specialists’ in their field, acquiring authorship of the bedside VR experience. Inviting allied healthcare professionals to navigate the participants' worlds created a temporary role reversal of the patient/professional relationship. Initiatives like the Galaxy Choir demonstrate the value of art-based practices in disability contexts. Individuals frequently face inequalities and isolation and are often excluded from decisions about their care. Providing an inclusive space through participatory arts can give individuals agency, allowing them a greater sense of control in social situations and help to improve their communication skills. The recurring theme of agency was also reaffirmed by Fisher-Owen who described how self-expression can be mirrored through puppetry, with Astles adding that the child can imprint a part of their identity onto the puppet, using it as a mediator to project feelings to the broader space. In all these instances, the arts were used to promote well-being through agency by creating different forms of safe spaces for individuals who are usually in precarious situations because of their health.

The challenges in this field are as many as the opportunities, and whilst the webinars were able to illustrate some of the promising findings for art-based projects in healthcare settings, they are all, to a large extent, individual projects. It is therefore a goal for researchers and practitioners in arts and health to work towards integrating art-based projects more systematically in healthcare contexts, both in the NHS in the United Kingdom and healthcare systems abroad, as a constant provision for alternative, non-medical and non-pharmaceutical forms of treatment. One area this could be explored is through the concept of telehealth and its importance for art-based applications in healthcare. Establishing the advantages of long-term communication and accessibility

using electronic resources, could help shape future research in arts and health. Despite the disparities in healthcare systems worldwide, it has been observed how incorporating arts into healthcare settings has the power to ‘increase positive clinical outcomes’ (WHO 2022: n.pag.). Moving forward, investigating such improvements could help to promote greater patient care satisfaction. Researchers and practitioners in arts and health also need to develop sustainability through art-based projects to create more robust platforms for establishing values and partnerships in the United Kingdom and abroad, through shared learning and practice. Training artists in healthcare together with healthcare professionals and vice versa, to develop their understanding and familiarity with combined cultures and practices, alongside initiatives such as organizing ‘pop-up’ art-based workshops to create a better understanding of what artistic projects aim to achieve, are just some examples of how partnerships could be sustained. Building relationships based on trust and working in collaboration to help break down the barriers between healthcare professionals and artists can be achieved through a mutual interest in improving the lives of vulnerable individuals.

The aims and hopes of the SDHRC are that this webinar series can contribute to making participatory arts projects, including physical performance and digital resources in healthcare settings, a more sustainable venture in the future and help bridge the gap between arts and health by strengthening individuals and communities. We appreciate that not all healthcare systems are the same worldwide, not all patients have the same needs and not all societies can afford the same services. We must be realistic with what we promise to the world. However, the arts can bring about change when it is needed. Arts can empower patients and their families and inspire practitioners and professionals.

Arts can offer support in difficulty, hope in despair and tools for education in its broadest sense. Arts can teach us how to live a better, more compassionate, creative, productive, imaginative and balanced life. Both artists and healthcare professionals need to work closer together, consider the cultural and structural differences in their projects, and enhance their understanding of arts as an important component of healing, health and well-being. Collaborations between the arts and health must address and meet the needs of individuals and communities with care and sensitivity and consider different cultures and values, in addition to different economic, political, educational and healthcare systems. There is no one road to progress but rather many paths to be explored. Let us continue the dialogue.

Reference

World Health Organization (WHO) (2022), 'Arts and health',

<https://www.who.int/initiatives/arts-and-health>. Accessed 28 June 2022.

Note

1. Recordings are found here: <https://research.canterbury.ac.uk/sidney-de-haan-research-centre-for-arts-and-health/arts-and-health-research-based-training-resources/>.

Accessed 5 September 2022.

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Charlotte Grainger is a research assistant at the Sidney De Haan Research Centre for Arts & Health at Canterbury Christ Church University, Kent, United Kingdom. She has an MSc in music, mind and brain from Goldsmiths, University of London and holds a BA (Hons) degree in music from the University of East Anglia. Charlotte has worked in participatory arts projects with vulnerable children and young people with mental health disorders and learning disabilities, communities, schools and prisoners, with the aims of improving health and well-being. She is committed to furthering her interests in enabling inclusivity and making the arts accessible to all.

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Lars Harald's educational background includes a BA in theatre studies from the University of Bergen, Norway and McGill University, Montreal, Canada, an MA in Shakespeare studies from King's College London and Shakespeare's Globe Theatre and an MA in directing from London Academy of Music and Dramatic Arts (LAMDA).

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