

Autumn 2022

VOLUME 3, ISSUE 3

Welcome to this issue of the RSPH Arts, Health and Wellbeing SIG newsletter.
Dr Ranjita Dhital and Dr Louise Younie are co-ordinators of this volume



Image shows Peter Fagan, MPharm student from Keele University, UK's painting of "Memory tree". He adds "the dying parts of the tree and falling leaves symbolise loss of memories and the progressive deterioration of someone with dementia."

This current issue features examples of emerging arts and health research, practice and policy development.

This also includes examples of student outputs through creative pharmacy education from Keele University (UK), and details of events from the UK and India, which we hope will be a source of inspiration to you. SIG members please share

copies of this newsletter with those you think may be interested in the work of this special interest group.

New SIG members are welcome from the broad area of public health including researchers, practitioner-researchers, practitioners in public health, the arts and any health and social care setting globally. Students from anywhere and any background are encouraged to join the SIG.

For more information about the SIG and the RSPH membership please go to: <https://www.rsph.org.uk/membership/special-interest-groups/join-our-arts-and-health-group.html>

Follow us on Twitter @RSPH_artshealth

Details on submission can be found at the end of the newsletter.

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Autumn 2022

VOLUME 3, ISSUE 3

Current practice and case studies

The Art of Pharmacy

By Dr Maria Allinson, Senior Lecturer in Pharmacy Practice, School of Pharmacy and Bioengineering, Keele University, UK

In October 2021, a new option topic was introduced to a small group of final year pharmacy students in the School of Pharmacy and Bioengineering at Keele University, UK. Evidence shows that different art media can be used to further develop empathy and compassion in healthcare students.^{1,2} This is important because greater empathy and compassion in healthcare professionals helps build trust with patients and has been associated with better treatment adherence, greater satisfaction and well-being among patients and reduced burnout among healthcare professionals.^{3,4,5}

The purpose of the option topic was two-fold: (i) to further develop students' empathetic approach to patients with specific health conditions; and (ii) to help students to understand the role of the arts in patient rehabilitation. Over the course of ten weeks, students were introduced to six different media: pottery, film, music, poetry,

performance and painting. Lecturers in Music and Film led their respective interactive sessions as experts in their field. Activities throughout the option topic ranged from attending a pottery workshop that is offered to patients living with mental health conditions or recovering from stroke and addiction, to forum theatre. This was where students watched a performance of breaking bad news to a cancer patient, and then directed the actors to act out a better way to convey the information. Two external speakers shared their personal journeys with the students, one, a survivor of cancer, the other a long-term carer for a parent with dementia. Padlets (electronic platforms) were set up for students to post health-related artwork and poetry that spoke to them. Group discussions ensued in a 'safe space' so students could freely share their views and at times, their personal experiences. As an educator, I was in a very privileged position to listen and share with them.

An overview of the media and associated health conditions addressed throughout the option topic can be seen in Figure 1. These both involved students having a greater understanding of patient journeys and seeing how effective art rehabilitation therapy can be in these areas.

Assessment was varied and involved an academic review of literature to

Art media	Health condition
Pottery	Mental health conditions, drug addiction, stroke
Film	Cancer
Performance	Cancer
Poetry	Dementia
Music	Drug addiction, dementia, Parkinson's Disease
Art	Mental health conditions, cancer

Figure 1. Outline of media used and health conditions addressed

support a chosen art form, and a reflection on the impact of what they had observed and learned. They also were given free rein to design their own piece of art work based on a patient's journey. The students presented very powerful and moving examples, mostly in the form of poetry and painting. See examples by Keele University MPharm students: "Memory tree" painting about dementia by Peter Fagan; "Missed Opportunities" poem about Poly Cystic Ovarian Syndrome by Ella Siddle; and "Anxiety" a poem by Paula Matovu. Feedback following evaluation has been very positive, with students finding the option topic "enjoyable"

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Autumn 2022

VOLUME 3, ISSUE 3

and “stimulating”. As one student stated: “I thoroughly enjoyed every aspect of this option topic. I have learnt so much about art therapy and how it is used to help patients.” And another: “Excellent option topic that really helped to understand the patient’s perspective going through their illness.”

I am delighted that the option topic will be running again this coming academic year with a slightly larger cohort of students, whilst some elements have been incorporated into the full year group teaching.

Acknowledgements

Many thanks to Dr Neil Archer, Senior Lecturer in Film and Dr Fiorella Montero Diaz, Senior Lecturer in Music at Keele University, UK for their expertise and help in delivering the option topic.

References

- 1 McTighe et al., 2016, Effect of Medical Education on Empathy in Osteopathic Medical Students. *J Osteopathic Med* 116(10), pp. 668-674
- 2 Sampson S et al., 2018, Medical student interpretation of visual art: who’s got empathy? *MedEdPublish* 7(3)
- 3 Kim SS, Kaplowitz S & Johnston MV. The effects of physician empathy on patient satisfaction and compliance. *Eval Health Prof* 2004;27(3):237–251. doi: 10.1177/0163278704267037
- 4 Del Canale S, Louis DZ, Maio V et al. The relationship between physician empathy and disease complications: an empirical study of primary care physicians and their diabetic patients in Parma, Italy. *Acad Med* 2012;87(9):1243–1249. doi: 10.1097/ACM.0b013e3182628fbf
- 5 Post SG. Compassionate care enhancements: benefits and outcomes. *Int J Pers Cent Med* 2011;1(4):808–813. doi: 10.5750/ijpc.v1i4.153

Missed Opportunities By Ella Siddle

Just another cycle
The same as any other woman
They all must show up
They all must work
They all must look pretty
They all must “be a man”
Although the very thing they go
through isn’t something any man has
ever experienced

Maybe it is the violent waves of
crimson that vandalise my wardrobe
and deposit into the crevasses of my
inner thighs, like ships anchoring into a
foreign harbour, only for their entitled
sailors to overstay their welcome,
invading the world around them

Maybe it is the twisting and churning
of the womb my mother created in
her own maternal home that rejects
me as its owner and stampedes its
boundaries in the hopes to break free
and escape the carnage that has left
behind a once homely cottage to a
now derelict house

Maybe it is the budding internal
flowers that blossom to surround and
conceal my ovaries, filling themselves
with poison that upon eruption
can shake cities to the ground and
obliterate everything in its path,
leaving rubble where families once
embraced each other and ash where
lovers once lay

Maybe it is the way the bathroom
tiles scorch my face as they act as my

cold and unwelcoming pillow whilst
the screaming and squirming take
centre stage to allow the audience
to see and feel the scorching of lava
that rushes to every nerve ending in
my body

Maybe it is the numbness that
disperses itself within my limbs
halfway up the M6, turning my
estimated time arrival from 6:54pm
in the arms of loved ones by the
fire to 2:46am in an unfamiliar
hospital room with only the company
of a rusted gas and air tank and
goosebumps surrounding me

Maybe it is the routine bag check for
keys and cards that are drowning in
pills from the dispensary inside that
make the world fuzz and separate

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Autumn 2022

VOLUME 3, ISSUE 3

my blood as thinly as the ice I walk on
every time the question “what are my
chances of a family” is asked, bravely
but still quivering in delivery

Maybe it is the deflation and
humiliation of being asked “how
many weeks” from expecting and
hopeful mothers who have come to
see their child residing peacefully,
when my sight that day is not to
see if my baby has grown but if the
craters occupying its rightful place
have at last caved the walls in beyond
recovery

Maybe it is the regression of mindset
that invades any intimate connection
as the concepts of selective breeding
will eliminate me from meaningful

relationships, that although I have a
right and the biological framework to
reproduce, the guarantee of offspring
is not one I have the privilege to offer

Maybe it is the way mother nature
does not grant me a sense of relief
each month when she knocks on
the door of yet another young broke
female, but rather an unwelcoming
yet probing reminder from the
grim reaper that another month
has passed and at that, another
opportunity missed

Maybe it is the way my waves become
invaders

Maybe is the way my maternal home
becomes a derelict house

Maybe it is the way my flowers
become volcanos

Maybe it is the way my pillow
becomes bathroom tiles

Maybe it is the way my loved ones
become goosebumps

Maybe it is the way my bag becomes
a dispensary

Maybe it is the way my baby
becomes a crater

Maybe it is the way my right
becomes a privilege

Maybe it is the way my mother
nature becomes the grim reaper

Maybe it is the way just another cycle
becomes a missed opportunity

Anxiety By Paula Matovu

Hello I'm anxiety

Not sure when or where I was born

I don't know how I got here

*My friends love to hate me but that's
okay I'm here to stay*

To chest pains and headaches,

Nothing will make me go away.

The thoughts can invade,

I am a plague.

*Spreading through the body and
paralysing the brain.*

*I will not leave despite the
constant pleas.*

I am a mental illness

*My victims are compelled by my
restlessness*

DANGER, PANIC, FEAR, nervousness

*You cannot escape me, I enjoy
the darkness*

You will never see me

But you'll definitely meet me, feel me

I cannot let you be free

Why do you run and try to hide

*Always seeking comfort in those
pills prescribed*

*Hello, I am anxiety I am struggling to
hold on but too afraid to let go and
risk losing control*

*If you're not careful I will be
your demise*

*So for now wear that disguise
Pretend I do not exist, all my
friends do*

But do not fret, I will visit you

*For I am anxiety, I am stuck on you,
I am like glue*

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Autumn 2022

VOLUME 3, ISSUE 3

Lorna Collins: advocating lived experience in arts and health

I am an artist, filmmaker, arts educator and writer. I embody and practice 'arts and health', by using the arts to make sense of the extraordinary experiences I have, caused by my damaged brain. Although I am an academic and seem completely 'normal', I hallucinate. I have written, spoken and made films about this. My hallucinations are profuse, vibrant, sometimes violent, always creative. I use painting, writing, film and performance to express, release, come to terms with them.

I present my organic creativity to the RSPH and this SIG, to show how we can—and should—engage lived experience and creativity to test out and express this field. My art practice facilitates my health. It then brings me a unique scholarly position.

My hallucinations present themselves as live theatre installations. I see scenes and characters, who speak to me and tell me a story. As I wrote this morning (trying to make sense of my experiences):

I breathe, and reams of characters scurry across the air I emit.

This scenario is an infinite: bubbles on the base of a tidal wave crash on the sea; an avalanche of thick, icy snowfall shoots down a mountain.



'A house on my head'

Each elemental particle builds their own character. I see them bubbling away, becoming separate but conjoined identities. A flurry of beings, in transition, in transmission.

I see them waving to me, inviting me to join them. I am the voyeur, ever-watching, immediately proximate in this colourful, intricate immanence.

This goes on, is endless (like the mind, like creativity). My hallucinations usher multiple viewpoints.

When I paint or write, in response to these experiences, I am able to express, calibrate and manage them. They become data, a method, and content for my unique position.



'Sun vision'

We all have unique positions. It is important to return to lived experience, for data, proof and meaning—in all policy, scholarship and theory. I am asking: how can we incorporate personal narratives with parity, as valued expertise, in this field?

'A house on my head' and 'Sun vision' (pictured) are more hallucination installations. My latest book is not a scholarly monograph, but—equally valid—a compilation of hilarious stories for the whole family (all taken from hallucinatory experiences); 'Squawk: A Book of Bird Adventure', coming out with Pegasus in 2022.

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Autumn 2022

VOLUME 3, ISSUE 3

News from the sector

Arts and health research, policy and development: joining the dots in the WHO Collaborating Centre on Arts & Health, UCL

The body of research on the relationship between the arts and our health and wellbeing continues to grow. The last decade has seen many developments in the field, not just in the numbers of research studies, but also in the range of methods and approaches used to explore this topic.

The Social Biobehavioural Research Group at UCL uses a range of methods to carry out world-leading research on the role of social factors, including arts and cultural engagement, on health. Combining quantitative (statistical, numbers-based) and qualitative (non-numerical) approaches, the team explore not only what the impact of social factors is on health wellbeing, but why and how these impacts happen. It's this dedication to high quality, impactful research that has recently led the World Health Organisation to designate the Group a WHO Collaborating Centre on Arts and Health.

The Group's current projects related to arts and health range from using large data sets to explore the



population-level long-term effects of arts engagement, to on-the-ground research into the impact and experiences of a range of services and activities, including social prescribing, singing for postnatal depression and dance for young people's mental health.

The team also theorise how and why the arts affect us. Their Multi-Level Leisure Mechanisms Framework identifies over 600 processes to explain the relationship between leisure engagement (including the arts) and health: the how of arts and health. And the INNATE Framework identifies 139 potential 'active ingredients' of arts in health activities, helping us to explore what is 'in' arts engagement that may activate the underpinning processes that lead to effects on health.

Work from the team receives wide academic acclaim, with publications in the British Medical Journal and Lancet Psychiatry, and Associate

Professor Dr Daisy Fancourt regularly presents research to parliament, the media and health leaders.

The WHO Collaborating Centre status now gives the team the mandate to both grow their research portfolio and look beyond academia to apply their work to global policy and sector development for arts and health. They aim to do this via toolkits, briefings, training initiatives and partnerships. The team will therefore be liaising with people working in arts and health, including practitioners, health leaders and policy makers, about the key questions our research should be addressing, and how the Centre's research can be used to support the sector.

You can learn more about the work the team are doing by visiting their website or having a look at their latest YouTube video here: https://youtu.be/WiB7e_LTqV8.

Contact: rosie.dow@ucl.ac.uk

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Autumn 2022

VOLUME 3, ISSUE 3

Music and Parental Mental Wellbeing: Online events hosted by the Royal College of Music, London

The Royal College of Music London has convened two international meetings on the role of music in parental mental wellbeing. Held online in January and May 2022, over 50 attendees joined the meetings hosted by Prof Rosie Perkins and doctoral student Debi Graham from the College's Centre for Performance Science. The events included a series of presentations and discussions designed to bring together the wide community of people working in this area, with the aim of scoping an

ongoing network including grass-roots organisations and charities, music and health practitioners, people with lived experience, policymakers, and researchers in health and music.

These events are timely because factors affecting parents' mental wellbeing require our urgent attention. For example, at least 10% of women in the UK are thought to experience perinatal depression and many parents experience loneliness and social isolation. While some treatments are available for illnesses such as postnatal depression (PND), alternatives are still needed and solutions for loneliness can be difficult to come by. Psychosocial interventions are increasingly being implemented in health care, and previous and current research into music to

support parents' mental wellbeing shows promise. For example, the Music and Motherhood research led by the RCM showed that group singing interventions can speed up recovery from moderate-severe PND as well as support social connections and perceived mother-baby closeness. Recent research on the Songs from Home project is showing similarly promising results for online songwriting programmes to support mothers experiencing loneliness.

Future events will be held subject to funding, aiming to bring research and practice together to build on the existing evidence-base and to raise the profile of music to support parental mental wellbeing. Please contact debi.graham@rcm.ac.uk for further information and to join our mailing list.

Emerging research

Each issue will highlight examples of recently published research in arts and health by SIG members. Please send the full reference and a link to the published URL. Open access articles are particularly welcomed.

Principal Investigator Prof. Monica Lakhanpaul from UCL Great Ormond Street Institute of Child Health @ProfLakhanpaul, with Co-Investigators Prof. Marie Lall, Dr Priti Parikh @pritiParikh73, Dr Lorna Benton @LornaBenton9, Prof. Rajib Dasgupta, Prof. Virendra Kumar Vijay @vkvijayitd, Dr Rajesh Khanna, Dr Hanimi Reddy, Dr Logan Manikam and Hemant Chaturvedi @HemantC28705161, have been working on the PANCHSHEEL project using the arts to engage community members and bring together interdisciplinary partners

from the UK and India to explore the factors that influence Infant and Young Child Feeding (IYCF) practices and nutrition in India.

PANCHSHEEL: Participatory Approach for Nutrition in Children: Strengthening Health, Education, Environment and Engineering Linkages, funded by the Medical Research Council, was designed to bring together partners from the UK and India to explore the factors that influence Infant and Young Child Feeding (IYCF) practices and nutrition in India. The project aimed to foster

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Autumn 2022

VOLUME 3, ISSUE 3

collaboration between research institutions, local schools, Anganwadi centre workers and communities to develop solutions addressing ICYF in villages in Banswara, India. Partners included Save the Children India, Indian Institute of Technology and Jawaharlal Nehru University. India was chosen specifically because the country faces a triple burden of childhood malnutrition: 48% (61 million) under-five's are stunted, childhood obesity is on the rise, and most have a micronutrient deficiency. The Government of India has been implementing key nutrition and behaviour change interventions through frontline workers but barriers still include outreach, variable levels of sanitation, social-inequity and the feasibility and effectiveness of localised integration.

Our project included working with children aged 6-24 months and their families in the Banswara district in rural India through engagement and co-design with the community. This incorporated art to raise community awareness about the importance of good childhood nutrition and hygiene, especially topics such as the stages of effective hand-washing and the safest ways of preparing food for mothers. We worked with a local artist to produce wall art that would reach as many members of the public as possible in 3 village centres and a drama skit with children aged 10-15 in coordination with teachers



Wall art on the topics of 'Key Times to Wash Hands' and 'Steps of Giving Clean and Healthy Food'. ©PANCHSHEEL project.

in a local school. The wall art was chosen for maximum accessibility due to the large percentage of illiterate community members in the rural

village and we chose to perform the drama skit on a national day in a local school to reach an audience of 400 community members. We are

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Autumn 2022

VOLUME 3, ISSUE 3

pleased to share that there has since been demand from school teachers and health workers in 6 further neighbouring villages for their own wall art.

[You can read our research publications and watch our study film here.](#)

Authors: Prof. Monica Lakhanpaul, Hemant Chaturvedi and Marta Koch from UCL Great Ormond Street Institute of Child Health

Image shows Drama skit on handwashing being performed by schoolchildren.

©PANChSHEEL project.



Submitting to the Newsletter and deadlines

We very much welcome your contributions to future issues of the newsletter. Your contributions could be related to news from the sector, up-and-coming conference or events, case study and research.

To submit material please do so in a Word document that is attached to an email with the subject line "RSPH SIG newsletter".

Please keep submissions to about 300- 400 words or less. Send submissions to the newsletter's coordinator, Dr Ranjita Dhital r.dhital@ucl.ac.uk or Dr Louise Younie m.l.a.younie@qmul.ac.uk

Copy deadline for the next issue is 30 November 2022. Publication date will be within 30 days of the respective copy deadline whenever possible so please keep this in mind regarding future dated submissions for conferences and CPD events.

The newsletter can also accept up to two photos per submission; if people can be identified in a photograph (frontal views) you will need to submit a photo consent form obtainable from Meghan Cordery at: mcordery@rsph.org.uk



Dr Ranjita Dhital



Dr Louise Younie

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