



Arts and Health

Policy and Strategy

Content

1.0	Background	3
1.1.	Arts Council support for Arts and Health	3
1.2.	Appointment of an Arts and Health Adviser & consultation with the sector	3
2.0	Research Findings	4
2.1	What is Arts and Health?	4
2.2	Where does it take place?	4
2.3	What artforms are involved?	4
2.4	What distinguishes it from other distinct but related practices	5
2.4	The organisation and practice of Arts and Health in Ireland	5
2.5	Identified needs in the Arts and Health sector	6
3.0	Values underpinning the Arts Councils approach to Arts and Health	7
3.1	Long term strategic partnerships and planning	7
3.2	Integration into the healthcare environment	7
3.3	Monitoring and evaluation	7
3.4	Engagement with professional artists and in high quality arts experiences	7
3.5	Inclusive participant-centred approaches	8
3.6	Documentation and dissemination	8
5.0	Strategy	9
5.1	The Promotion of Arts and Health at national level	9
5.2	Resources and supports	9
5.3	Partnership	10

1. Background

1.1. Arts Council support for Arts and Health

The Arts Council has supported the practice of Arts and Health since the late 1990s when it collaborated with the Eastern Health Board on the development of five pilot projects, which were subsequently evaluated and documented. Since then, it has supported projects, programmes and initiatives including research, publications, and conferences. Key aspects of the Arts Council's engagement with Arts and Health prior to 2006 include the publication of *Mapping the Arts in Healthcare Contexts in the Republic of Ireland* (O'Cuiv, R. 2001), the *Arts and Health Handbook* (2003) and the organisation of a two day international conference on Arts and Health in 2004.

In *Partnership for the Arts (2006 – 2008)* the Arts Council committed to establishing the most effective way of providing support services to artists and arts organisations working in the area of Arts and Health. It recognised the valuable role played by Arts and Health in extending and enhancing people's experience of the arts, particularly among a sector of the population that is often excluded from arts provision. It also recognised the important ways in which Arts and Health assists artists in realising their artistic ambitions by providing stimulating and challenging contexts to create work, thereby enhancing artistic practice and extending artform development.

In the subsequent review of *Partnership for the Arts (2006 - 2008)*, the Arts Council prioritised the development of an Arts and Health policy and strategy in order to inform its thinking vis-à-vis support for agencies, organisations and individual artists; the development of a framework for high quality, innovative practice; and the development of a sustainable Arts and Health infrastructure.

1.2. Appointment of an Arts and Health adviser and consultation with the sector

In April 2008, an Arts and Health Adviser was appointed to assist with the development of policy and strategy. In November 2008, an Arts and Health Working Group was established and a series of Arts and Health consultation events took place around the country. In October 2009 a series of strategic arts and health events, *Vital Signs*, was organised by the Arts Council in partnership with Create, the national development agency for collaborative arts, as a means of contributing to the research process. *Vital Signs* included three complementary strands. The first was a national conference attended by 180 delegates from the Arts Council, the HSE, health professionals, artists

and a wide range of local and national arts providers. The second was an exhibition of Arts and Health work drawn from around the country, which took place in a range of gallery and health-related settings in Dublin 8. The third was a series of commissioned opinion pieces by artists and practitioners on their experience of Arts and Health. In April 2010, the *Arts and Health Working Group – Research Report* was completed. Its findings underpin this document.

2. Research findings

2.1. What is Arts and Health?

Arts and Health is the generic term that embraces a range of arts practices occurring primarily in healthcare settings, which bring together the skills and priorities of both arts and health professionals. Good Arts and Health practice is characterised by a clear artistic vision, goals and outcomes. Alongside these, it aims to promote health and well-being by improving quality of life and cultural access in healthcare settings. It may incorporate different approaches, including conventional arts production and presentation, arts participation and environmental enhancement. Arts and Health initiatives may range from once-off events to long-term programmes. The term *Arts and Health* is preferable to *Arts in Health* or *Arts for Health* as it reflects the equal partnership of skills necessary to ensure good practice.

2.2. Where does it take place?

Arts and Health practice takes place in hospitals, residential units, daycare centres, primary care-centres and community settings as well as in arts venues. It can involve health service users of all ages and abilities, their carers, visitors and healthcare staff. Health venues are an important access point to the arts for potentially large numbers of the population. In 2009, it was estimated that over 100,000 health care staff delivered health and social care services and that every member of the population of this country (approx 4.5million) used a health care service at least once during the year.

2.3. What artforms are involved?

Arts and Health is not limited to any particular artform. It can include any artform or indeed, any genre within a particular artform¹.

¹ The Arts Act 2003 defines the arts as ‘any creative or interpretative expression (whether traditional or contemporary) in whatever form, and includes, in particular, visual arts, theatre, literature, music, dance, opera, film, circus and architecture, and includes any medium when used for those purposes.’

2.4. What distinguishes Arts and Health from other distinct but related practices?

Arts Therapies - There is a clear distinction between Arts and Health practice, where a key goal is the experience and production of art, and the arts therapies, where the primary goal is clinical.

Arts and Disability - Arts and Health incorporates both artistic and health aims, whereas Arts and Disability is focused exclusively on the engagement and involvement of people with disabilities in the arts.

Other related practices - Arts and Health can cross over with any number of other arts practices such as: *community-based arts*; *arts and medical humanities*; and *arts and science*. In addition, an individual artist may choose to explore *health themes or content* in their work. The degree to which these practices are described as Arts and Health will depend on the extent to which they incorporate the characteristics described above (see 2.1.).

2.5. The organisation and practice of Arts and Health in Ireland

While Arts and Health has been a growing area of arts practice internationally for several decades (in the UK since the 1970s), it has only developed in Ireland in the past twenty years, and established a consistently visible presence in the last decade. Arts and Health is a complex area of practice that involves a diverse range of stakeholders, each with their own aims, objectives, priorities and approaches. Each of these stakeholders play a role in the dissemination of information, advice and resources.

At national level, the Arts Council and the HSE are the main funders of Arts and Health practice while national arts resource organisations such as Create and Music Network have developed opportunities and resources for information, training, networking and practice development. Age & Opportunity has developed arts programming with older people in health settings over the years.

At regional and local level, HSE personnel, local authority arts officers, arts and health co-ordinators and individuals from arts organisations have been key advocates for Arts and Health. They have worked alongside individual artists, service users, family members and carers to develop programmes across a range of settings including primary care, mental health, hospitals and health promotion.

A small number of dedicated Arts and Health organisations have been established around the country. These include: Waterford Healing Arts Trust, Helium, Galway University Hospital Trust, 4th Promise (now known as Vivartes), and Anam Beo.

2.6. Identified needs in the Arts and Health sector

While the needs of the Arts and Health sector are many and varied, a small number were highlighted in the course of the consultation process over the last eighteen months. These have been suggested as priorities for Arts Council policy and strategy. These include the need for:

2.6.1 Information and advice – There is no dedicated Arts and Health resource organisation at national level and no dedicated Arts and Health website to serve the needs of the sector. As a result, information and learning about partnerships and practices is sometimes lost along with strategic opportunities to build links between the arts and health sectors at national level.

2.6.2 Professional development – Opportunities for learning and development are limited and there is no central organisation or system to address issues of training, mentoring or networking for artists working in this sector.

2.6.3 Advocacy – While there is contact between the Arts Council and the Health Service Executive at national level, there is no strategic partnership in place. Such a partnership could help to build a strategic framework for the development and support of Arts and Health practice at national and regional level into the future.

There is also a need for greater promotion of Arts and Health within the arts sector itself; artists and arts organisations are not aware of the contribution Arts and Health can make in terms of artform / arts practice development and in addressing inequity in access and participation in the arts.

2.6.4 Resources – Current grant support for Arts and Health organisations is limited, resulting in a relatively fragile infrastructure with a high dependency on individuals and once-off projects. This underlines the need for a national resource organisation with capacity to support the sector and develop the practice.

3. Values underpinning the Arts Council's approach to Arts and Health

A small number of key values underpin the Arts Council's approach to Arts and Health, informed by the findings of the consultation process and the specific settings and circumstances of the Arts and Health sector². It is hoped that the prioritisation of these values may also assist the development of good practice in the Arts and Health sector and ensure a high quality experience for the artist, health service staff, service-users and their families.

3.1. Long term strategic partnerships and planning

Good quality arts and health practice is built on a process of ongoing dialogue across the arts and health sectors, and the development of shared understandings, resources and responsibilities. It incorporates both arts and health aims and outcomes and undertakes specific initiatives in the context of long-term Arts and Health strategy.

3.2. Integration into the healthcare environment

Good quality Arts and Health practice is integrated into the setting in which it takes place. It is jointly planned and agreed by the artist, participants and healthcare staff, with consideration of the time, support and funding available, and delivered in accordance with relevant codes of practice, health and safety requirements.

3.3. Monitoring and evaluation

Good quality Arts and Health practice commits to ongoing review of direction, purpose, practice and process. Practice is adjusted in the light of evaluation.

3.4. Engagement with professional artists and in high quality arts experiences

Good quality Arts and Health practice involves skilled, experienced artists who can demonstrate excellence in their artform. High quality, appropriate art materials and the availability of adequate facilities, time, expertise, support and funding are essential in order to ensure good practice.

² Much has been learned from the experience of several decades of collaborative practices in diverse settings including formal and informal educational settings and communities. Of particular interest in this regard is the Arts Council/ Department of Education and Science publication: *Artists~Schools Guidelines: towards best practice in Ireland* (2006).

3.5. Inclusive, participant-centred approaches

Good quality Arts and Health practice considers the wellbeing of participants to be paramount whether in the planning, delivery or evaluation stages. Each participant's contribution should be valued and encouraged in a manner that is fair, equitable and inclusive.

3.6. Documentation and dissemination

Good quality Arts and Health practice includes a process of documentation and dissemination with the permission and involvement of stakeholders, taking account of relevant policies relating to child protection and vulnerable adults.

5. Strategy (2010 – 2014)

The Arts Council recognises the complexity of the Arts and Health sector and the many stakeholders involved in its development. It has developed a five year strategy, which aims to address specific needs appropriate to its role as the national agency for funding, developing and promoting the arts in Ireland. It involves actions and commitments in the following areas:

- The promotion of Arts and Health at national level
- Resources and supports
- Partnerships

5.1. The Promotion of Arts and Health at national level

In 2010 - 2014 the Arts Council will continue to:

- support and develop Arts and Health provision and practice guided by its Arts and Health policy and strategy
- enhance awareness and understanding of the practice across all artforms
- provide a contact point and source of expertise within the Arts Council
- develop strategic partnerships particularly with the HSE (see 5.3)

In 2010 – 2011, the Arts Council will develop the Arts and Health pages on its website in order to:

- profile Arts and Health funding opportunities
- profile previously funded Arts and Health practice
- promote the value of Arts and Health practice

5.2. Resources and supports

In 2011 – 2014, the Arts Council will support the development of a national Arts and Health resource organisation that will build capacity in the sector through:

- the development of a central point for information, advice and support (including the development of a national Arts and Health website)
- the development of new and integrated approaches to partnership, networking, and practice development
- the development of an advocacy and support strategy for the sector

5.3. Partnership

In 2010 – 2014, The Arts Council will further develop a strategic partnership with the Health Service Executive at national level in order to:

- facilitate practical collaboration across respective Arts and Health policies
- facilitate cross sector learning and develop shared understanding and language relating to Arts and Health practice
- build a strategic framework for the sustainable development and support of Arts and Health practice, at national and regional level, into the future

In 2010 – 2014, The Arts Council will liaise with other similar organisations internationally in order to:

- learn from their experience in promoting and supporting the practice of Arts and Health
- strategically place Ireland at the forefront of international Arts and Health practice