

the support hub



IMPACT REPORT :

The Support Hub at The Arts & Health Hub

Evaluation by Helen Shearn

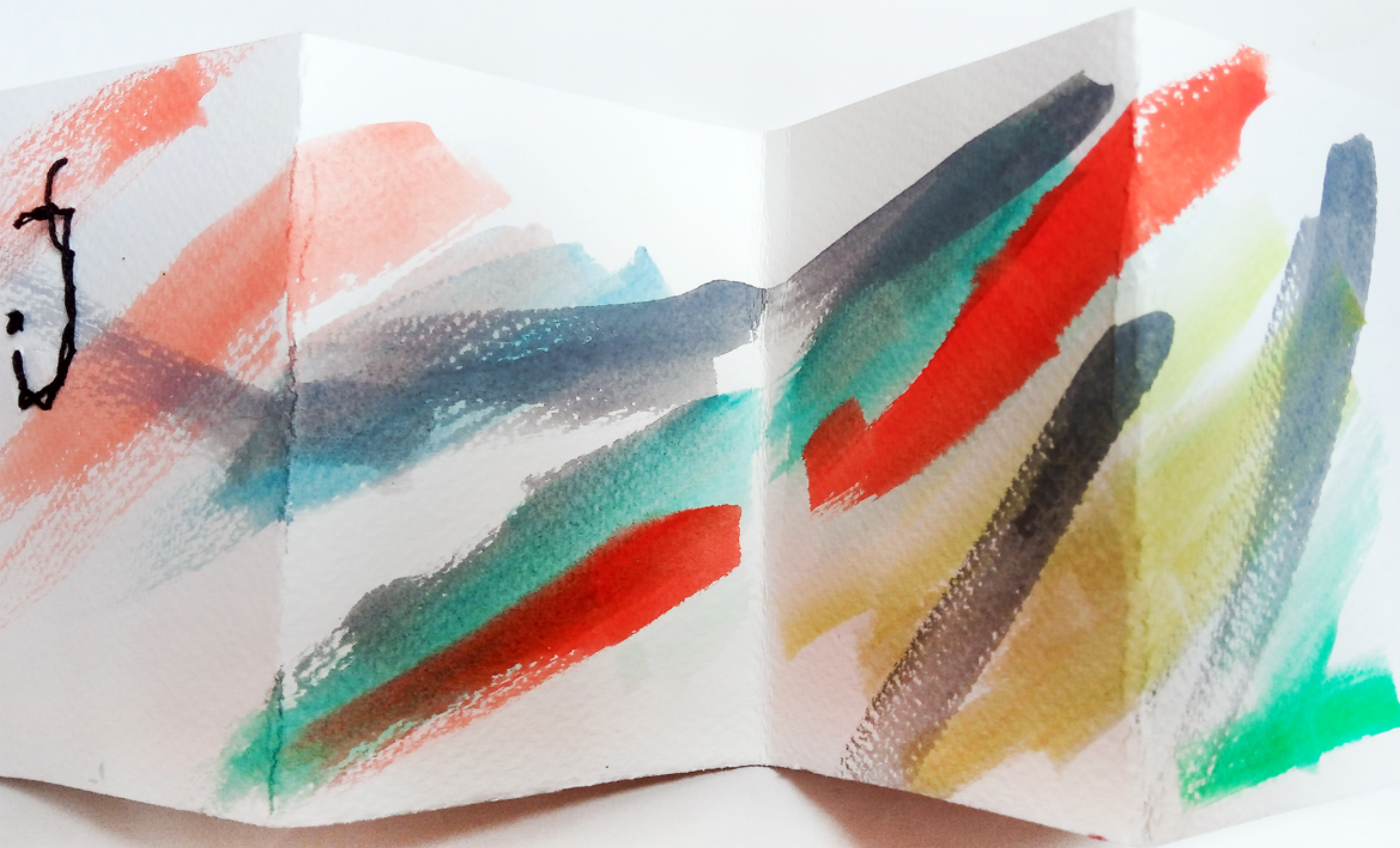
with support from Daisy Danziger and Eve Loren

October 2021

CONTENTS

	Page Number
Overview	4
Project Impact and Outcomes	
Phase 1: Peer-to-Peer Mental Health Support	12
Phase 2: Supervision	20
Phase 3: Mentoring	23
Challenges	29
Future Ideas and Recommendations	32
Key Learning	36
Next Steps and Sustainability	40
Further Information	42





OVERVIEW

The Support Hub provided a multi-layered approach to support (including mental health support) for artists working in the arts & health sector, to members of the Arts & Health Hub¹, which from here on is referenced as the Hub. The Hub is a London based not-for-profit organisation supporting artists & cultural producers in the arts and health sector to be the best they can be. The Hub runs events, professional development workshops, offers peer-to-peer support, commissions creatives & manages an online community of like minded artists.

The Arts & Health Hub began in 2015 in response to the isolation Daniel Regan felt as a disabled artist making work on mental health. The network's ethos focuses on peer support, not competition. At the time of this report there are approximately 900 artists and cultural producers in the network.

The Support Hub had 3 distinct phases running from November 2020 to August 2021, which they delivered during the COVID-19 pandemic. As advertised on the Hub website² the Support Hub provided:

- 1. Peer to peer mental health support for 14 artists with lived experience of mental health difficulties;***
- 2. Clinical supervision for 6 artists working in stressful and demanding environments;***
- 3. 1-2-1 mentoring for 3 early career artists, matched with experienced artists/producers in the sector.***

The Support Hub project was funded by Arts Council England's Project Grants, with additional funding for phase one from the National Survivor User Network (NSUN)³.

It was developed and managed by the Hub's Executive Director Daniel Regan, with support from artist and producer Eve Loren who oversaw the project. Integrative counsellor and artist Jessica Mitchell provided mental health support for the artists in phase one, whilst art psychotherapist Frederica Brooks delivered phase 2's supervision, and art therapist Jacqui McKoy-Lewens provided supervision to those working on the project.

1 <https://artsandhealthhub.org>

2 <https://www.artsandhealthhub.org/about>

3 <https://www.nsun.org.uk/>

Project Partners

The Support Hub has been supported and promoted by London Arts in Health⁴ who have a *“keen focus on supporting the wellbeing of artists & are a member of Arts Network’s newly formed micro network of arts & mental health charities.”* The project was also supported by the Culture, Health and Wellbeing Alliance (CHWA)⁵, *“a national membership organisation representing everyone who believes that creativity and cultural engagement can transform our health and wellbeing”*. CHWA are very interested in supporting care for artists and pilots and have various resources⁶ in place. Their 2020 and 2021 conferences focussed on care and Daniel Regan spoke at both.

The key findings in the report will be disseminated with partners, individuals in the arts and health sector, membership groups and social media channels to enable further support to the sector.

Purpose of the Support Hub Project

The purpose of the Support Hub according to the successful funding application to the Arts Council England was:

“[...] to explicitly provide mental health and practitioner support (rather than specifically professional development) to artists who were: struggling with their mental health, work in incredibly stressful environments, or would benefit from more personalised support.”

As Daniel Regan, Executive Director of the Arts & Health Hub stated:

“The experience of participants is rooted in themes of care, support and recognition of the impact that our practices can have on our own wellbeing. I want artists to feel that this is a positive step towards building resilience, engaging and building their own peer-to-peer support networks (project legacy), and investing in outcomes that can be reported and feedback into the wider arts and health sector.”

4 <https://londonartsandhealth.org.uk/>

5 <https://www.culturehealthandwellbeing.org.uk/>

6 <https://www.culturehealthandwellbeing.org.uk/resources-culture-care>

Delivery & Frequency

Participants within phases 1 and 2 engaged with the Support Hub online, whilst participants receiving mentoring engaged both face-to-face and online. The phases consisted of:

- 4. Peer-to-Peer Mental Health Support: Six online sessions, once a month, for 6 months;**
- 5. Supervision: Six online supervision sessions, once a month, for 6 months;**
- 6. 1-2-1 Mentoring over a 3-4 month period, in person and online.**

Project Rationale

The Support Hub was initiated in response to a survey undertaken by the Hub during the first wave of COVID-19 to support the immediate needs of artists in the network.

The Hub's COVID Impact Report⁷ found that during the pandemic:

- 47% artists suffered from mental health difficulties;**
- 44% stated their mental health was moderately affected, with 12% reporting a severe impact.**

The respondents stated what they wanted from the sector:

- 50%: more peer-to-peer support networks;**
- 46%: access to mental health support for artists;**
- 51%: access to 1-2-1 mentoring and support.**

⁷ <http://artsandhealthhub.org/covidimpactreport/> (91 responses)

In their funding application to Arts Council England the Hub reported that:

"The issue of practitioner wellbeing is a rising concern across the arts and health sector, including amongst my project partners. The Arts & Health Hub has become highly successful in facilitating peer-to-peer support networks, with numbers significantly increasing during the COVID crisis. However, the specific issue of mental health support is a key topic that is raised by members in the network repeatedly.

People were desperate for help for support for their mental health for the challenges they had in the workplace, around power imbalances, cultural and systemic issues, racial injustice, issues around sexuality and gender identification, the way that people just don't feel supported in the work that they do in the sector. And that was really loud and clear through the whole process."

The Culture, Health & Wellbeing Alliance (CHWA) has undertaken and gathered a number of studies and research relating to the pandemic shared on their website.⁸ They undertook practitioner and sector surveys⁹ in 2020 and 2021 and in October 2021 launched a new resources page on Practitioner support¹⁰, an event on practitioner support and a new resource pack (as part of a series #CreativeNetwork – Wellbeing with Creative Lives).¹¹

"In the last decade, social support has fallen increasingly to civil society. The 'frontline' now includes many people working with the arts and culture - from freelance artists to librarians. As inequalities rise, we know that the people we work with are in increasingly complex and vulnerable positions. The need for support has been exacerbated by a pandemic that has exposed and heightened existing inequalities and therefore the challenges faced by workers in this field."

Artists Practicing Well (2019) Nicola Naismith

A key research report is Nicola Naismith's seminal Artists Practicing Well (2019)¹² which could be the first piece of research specifically focused on affective support for artists working in health and wellbeing. Naismith referenced the *Changing Arts and Minds - A Survey of Health and Wellbeing in the Creative Sector* (Shorter et al 2018)¹³ (answered primarily by residents in Northern Ireland or the Republic of Ireland and not specifically those working in health settings).

8 <https://www.culturehealthandwellbeing.org.uk/surveys-and-research-relating-covid-19>

9 <https://www.culturehealthandwellbeing.org.uk/evidence-were-gathering>

10 <https://www.culturehealthandwellbeing.org.uk/practitioner-support>

11 <https://www.creative-lives.org/join-creativenetwork-wellbeing>

12 <https://www.nicolanaismith.co.uk/research-writing/artists-practising-well>

13 <https://www.inspirewellbeing.org/media/9236/changing-arts-and-minds-creative-industries-report.pdf>

It showed the challenges practitioners are facing:

The working environment and lack of appropriate recognition of the value of the work is conducive to stress and mental health difficulties.

Also, over 20% of those in the creative sector are being paid at a level which is below the poverty line.

Naismith stated that:

"The landscape of affective support for creative practitioners is mixed, with some receiving good support, while others aren't getting enough or any."

Naismith made the following 7 recommendations (summarised):

1. CONVERSATION :

creative practitioners and commissioners - equal responsibility;

2. CO-PRODUCTION :

artists need to be at the table;

3. FUNDING :

affective support needs to be funded;

4. LEADERSHIP :

to view creative practitioners as artist leaders;

5. PEER TO PEER LEARNING :

networks which recognise different levels of experience and contexts;

6. RECOGNITION:

to work as artists with their work acknowledged and valued;

7. SUPPORT MENU AND VOCABULARY :

a common understanding of the different types and models of affective support and reflective practice.

The Impact of COVID-19 on Arts and Health Charities: Case Study Healing Expressive and Recovery Arts Project (HERA) Brighton Research Report July 2021¹⁴ (Fotopoulou, A., Shearn, H., Warrington, C. 2021)

The author of this Support Hub report, Helen Shearn, has also co-authored a recent research report for the University of Brighton with Dr Aristeia Fotopoulou, & Claire Warrington on: *The impact of COVID-19 on arts and health charities: Case study HERA Brighton July 2021* (Fotopoulou, A., Shearn, H., Warrington, C. 2021) which will be published by the end of 2021.

One of the report's recommendations is to:

Invest in team wellbeing and team building: moving to online or hybrid work impacts negatively on the working culture of health and arts charities. This research indicates that there is need to invest in team wellbeing in order to mitigate against the adverse effects that the transition to an online environment has had to the working culture, such as heightened feelings of isolation. Additionally, prioritising team building and effective cross-sector communication can help better understand the working priorities of different partners during a crisis situation. These activities could include: team supervision, regular check-ins and therapeutic support.

The report (Fotopoulou et al 2021) referenced the research such as:

Although some issues may have existed before the pandemic, the economic instability and adversity of the crisis meant that creative freelancers have been in particular need of tailored wellbeing and peer support (May, T., Warran, K., Burton, A., & Fancourt, D. 2020)¹⁵

and

That art facilitators benefit from the creation of a "therapeutic alliance" including clinical supervision and affective support (Holt et al 2020)¹⁶. Often artists act as "boundary spanners" (Daykin 2019)¹⁷ within health and care settings, which adds to why they may need such additional affective support. As Daykin (2019) notes, they build bridges and forge relationships while they navigate power relationships with "a complex web of stakeholders", e.g., participants, staff, managers, researchers, funders and the public through building resilient healthcare professionals equipped with the tools to communicate effectively in chaotic, busy environments, and to better look after themselves and each other.

¹⁴ *The impact of COVID-19 on arts and health charities: Case study HERA Brighton, July 2021* Dr Aristeia Fotopoulou, Helen Shearn & Claire Warrington, University of Brighton <https://research.brighton.ac.uk/en/persons/aristeia-fotopoulou> <https://www.brightonhealthandwellbeingcentre.co.uk/healing-arts/hera>

¹⁵ *Socioeconomic and psychosocial adversities experienced by creative freelancers in the UK during the COVID-19 pandemic: A qualitative study.* <https://doi.org/10.31235/osf.io/74sdr>

¹⁶ Holt, N. J., Dr, Matthews, J., & Elliott, C. (2020, November 4). *Art on prescription: Practice and evidence.* <https://doi.org/10.31234/osf.io/qvd4m>

¹⁷ Daykin, N. *Social movements and boundary work in arts, health and wellbeing: A research agenda*, *Nordic Journal of Arts, Culture and Health* Volume 1, No. 1-2019, p. 9-20 ISSN online: 2535-7913

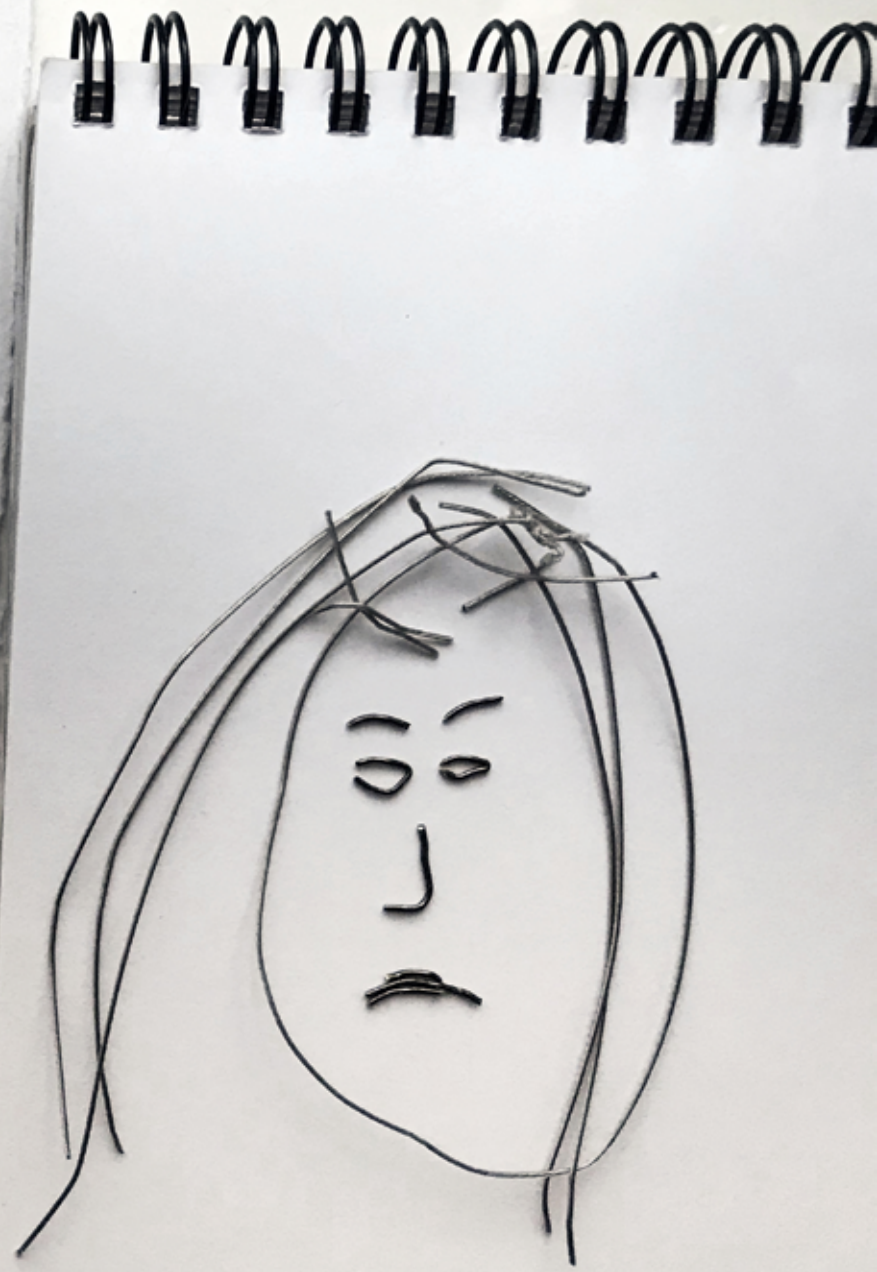
Creative Facilitation for Health and Wellbeing, Julia Fortier Puebla, Doctoral Research Study

Julia Fortier Puebla, for her doctoral research study Creative Facilitation for Health and Wellbeing with the London School of Hygiene and Tropical Medicine¹⁸, is currently researching *Creative Facilitation: Navigating the benefits and challenges of delivering arts, health and wellbeing activities, including during the COVID-19 pandemic*. She also suggested and supervised the Masters student Daisy Danziger who contributed to this report by evaluating phase 2 on supervision.

How was Data Collected for this Case Study?

- *The expectation to take part in the evaluation for the project was written in the application form;*
- *All participants were also contacted independently by Eve Loren to confirm that they were taking part in the evaluation to be shared in the final report;*
- *The participants who were interviewed for the two case studies gave their consent to be named;*
- *Demographic information was tracked from all participants, including age, gender, ethnicity etc;*
- *Participants' mental health/wellbeing both before and after project engagement, using a mixture of standardised scales (WEMWBS) and custom-made questionnaires;*
- *Surveys using Culture Counts, an online evaluation tool;*
- *One-to-one interviews were conducted online or by phone;*
- *Daniel, Jessica (psychotherapist) and Eve (associate artist) kept a reflective practical journal to document the project progression;*
- *Both Daniel and Eve took part in a reflective conversation with evaluator Helen Shearn;*
- *The data was anonymised and analysed for themes and trends by the evaluator.*

¹⁸ <https://artsandwellbeingpractice.wordpress.com/>



PROJECT IMPACT AND OUTCOMES

Phase 1

Question: What does Peer Support Mean to You?

There seemed to be a general consensus amongst the group about what peer support meant to them such as sharing ideas, learning different approaches and techniques, giving and receiving support and a helping hand, with people with similar or different experiences.

"People with similar experience e.g., freelance/artist/experience of mental health issues being there to listen, hold space, do creative things together. Not advice. More empathy and solidarity. Comradeship!"

"Peer support is very important as with my mental health I have often felt quite alone and isolated. To be able to share thoughts and ideas with people who have had similar experiences or even different ones I believe will be very beneficial."

Question: Were you Supported by your Peers, and/or able to Offer Support to Others?

The overall impression was that group members felt that their peers were very supportive, generous and sincere in their feedback. They felt able to talk openly and honestly which helped others to speak more, because they could see others had allowed themselves to be honest and vulnerable. *"They got it, felt these things too. I am not alone."*

Some felt reassured to hear similarities in lived experiences and enriched by sharing work and finding resonances to understand more fully. Although there were some different experiences, empathy and understanding was expressed in the group.

"Yes - really felt connected with them despite the surrealness of it all being online and struggling with a certain disconnect because of that and difficulties with reading the temperature of the room as you would in real life."

"I've been processing it all amid the madness of home life and reflecting on how amazingly beautiful it was to be comforted like that by people I have only met online once. It is because they get it. They feel these things too. I am not alone. I have felt deep compassion to the others in the group and a realisation that perhaps because someone else in the group had allowed themselves to be bravely honest and vulnerable - that allowed it for me too."

"Specifically, the generosity and sincerity of people's comments in the feedback session was amazing. It really encouraged me to be more open and to risk sharing some vulnerability when I responded to other people's work. It's been liberating not to worry about whether or not to disclose my mental health difficulties when talking about my own work or responding to someone else's..."



Cara Macwilliam

Statements Pre-to-Post Programme Survey

One participant did not answer all questions in the post questionnaire. However, this is still a small sample to make significant claims, but it provides some indications.

Further investigation would need to occur to understand some varying answers, particularly on questions no. 6. *on struggling with self- esteem* & no. 9 *feeling positive about my recovery / growth as an artist with lived experience*.

Changes

1. I'm feeling isolated

8/8 less isolated

2. I'm feeling lonely

8/8 less lonely

3. I'm feeling connected

7/8 more connected

4. I have access to practical support

5/8 increased

5. I'm feeling confident

7/8 more confident

6. I'm struggling with my self-esteem

5/8 reduced

7. I'm struggling to express myself

7/8 reduced

8. I'm feeling empowered

6/8 more empowered

9. I'm feeling positive about my recovery/growth as an artist with lived experience

5/8 more positive

Reflections on the Sessions and Activities

"I thought overall it was a gentle, supportive space. Everyone was kind, emotionally intelligent and there was an instinctive understanding of our lived experiences."

"A very warm space, it was heartening to see how everyone was supported."

"I loved them - especially the self-portrait with eyes closed! I thought they were well planned and clearly explained. I really appreciated having a choice of activities. Although it was initially daunting to have such a tight time limit, in the end it was beneficial: for example, because I knew the stream-of-consciousness writing could only last 10 minutes, I felt, somehow, more secure and so was able to go deeper."

"I think taking part in the Hub has loosened up my making. It was great working quickly during the sessions, deliberately experimenting with new media and sharing in the practices of artists working in other media. It was liberating making work that wasn't 'about' the themes but explored them through the making process itself e.g., non-judgmental collage making."

CASE STUDY WITH ARTIST IMAN LUNA

"I found that being in a room, virtual room, with other artists talking about our work and how mental health affects it, was transforming. Because I've never done that before. And it just allowed me to do reflective practice in a way I've never done before. So it was like putting the dots together and creating a better image of how I work, how other people work. And the link between mental health and being an artist."

Q: Did it meet your hopes and expectations?

"I think it exceeded my expectations because obviously I've never done it and then realising how beneficial it is and how much I got from meeting other people and sharing experiences with them.... that's invaluable. People were really open and the facilitators were wonderful. Like, really gentle, really, they created a really good pace. Both from the participation and the organisation. I was very impressed. I did, however, feel that we might have benefited a bit more from being able to create more of these links between mental health and work. Sometimes towards the end I felt I could do with more talking about those things and I think that the group might have benefited from just touching on that a little bit, sometimes a bit more."

Eve: How have you been feeling since the programme?

"I'm not working, I'm not creating, I'm not doing anything because my mental health doesn't allow me to, because I'm going through a lot personally. I'm going through a transition as a transgender person, so it's too much. It's hard to think about how I've felt since doing the programme because I haven't had a good chance to see it reflecting on my artistic practice, but I know how I feel after and it's... I feel legitimised. I think the impact is huge. I feel a bit more held by my own self, like it's given me tools. Somehow by this virtual presence, even if I don't see the group again, I know there's a group of people out there that go through very similar stuff, you know, and it's real."

"I'm not alone, you know? That's so big for people in general. I mean, just sharing your experience with others you're suddenly not alone. You know? And being alone is one of the worst things that can happen to anyone you know, feeling numb. Because it means you don't have a support system of any sorts. All it means... it doesn't mean that you don't have it but I think it means that you're struggling to find that support system. [...] these activities created some kind of support system that wasn't there before."

Eve: Is there something you can pinpoint about - maybe the facilitation of it, or the structure of it - that enabled that switch, that sort of ease to happen at that point? (The group taking shape, realising what they've been offered properly and being more relaxed with the group).

"The gentleness. The structure. The specific content probably. I think it was probably. I mean, if it's happened like that, it's because it's been facilitated. If it's not been facilitated, I don't see it happening so much, you know?"

Eve: Was there anything about your participation in the whole programme that surprised you at all?

"I feel proud. Because I'm being bolder in allowing myself to be myself and be a very active participant when I'm in things. And a very reflective one. And I think it also helps me understand who I am, and how I work with people. And, I think I'm a very valuable asset [laughs]. And I don't believe in humbleness when you're seeing something in front of you. I'm an advocate of being self asserting. And I think everyone can - everyone is so valuable."

Eve: Is there anything you think we could have done, any more we could have done, or more we could do in the future...?

"Maybe, yes! Maybe a reflection on that exactly - on how you try to make it integrative for all sorts of human experiences. And, that sounds so robotic! But you know what I mean! Of allowing everyone to come with individual human experience and challenges and that everyone can support it. Maybe a little reflection on that."

"And I really wanted to stress how important it is. It's hugely important Eve. And I think you should be told that. Because, [inaudible] actually you've helped me with my individual human experience that is so particular and so challenging in this culture today. You know, in this society. And because I'm sure, other members of the group suffer that and suffer a lot of discrimination and a lot of injustice because of their mental health situation, because of their identity. Like I'm sure I'm not the only one. But from my side, I want to stress how important it is... it's just being human and helping other humans you know? From the human side. That's why it's so important. Your job. Your labour. I want to say work, but, it's labour."

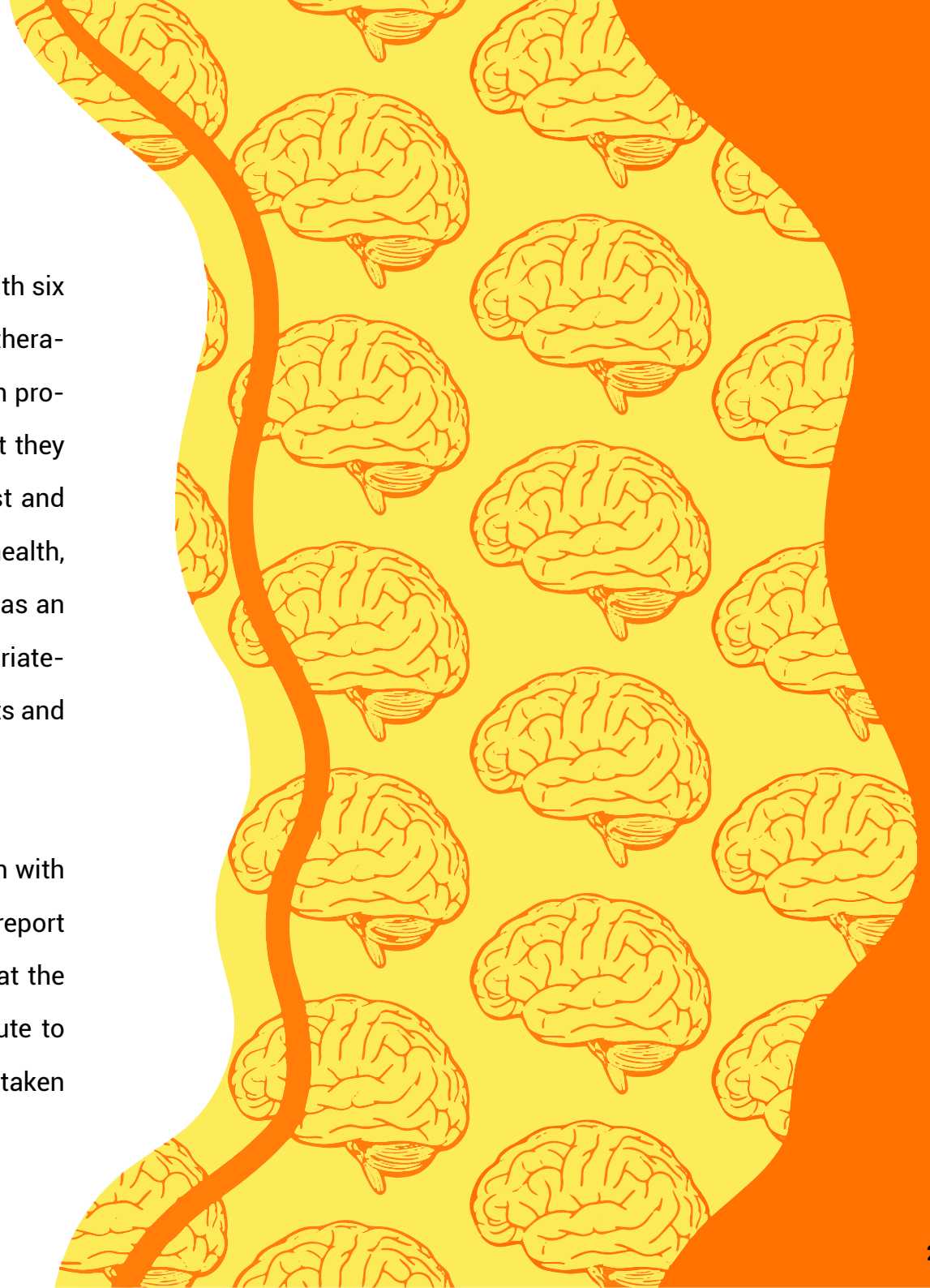


Lucy Edwards

Phase 2 - Supervision Programme

This phase was delivered over six months from April 2021 with six participants meeting on a monthly basis with an art psychotherapist. Participants were recruited through an open application process via the Arts & Health Hub website with the criteria that they should be working in the UK, identify as a non-clinical artist and have no formal art therapy training and currently working in health, community, nature, educational and home settings. There was an exclusion criteria and an assessment by the team on appropriateness of supervision for the participant. Five were visual artists and one a therapeutic clown.

This phase was evaluated by Daisy Danziger in collaboration with the Arts & Health Hub. At the time of the publication of this report Daisy Danziger is an MSc student in Global Mental Health at the London School of Hygiene & Tropical Medicine. To contribute to this Impact Report Daisy interviewed participants who had taken part in the supervision programme.



Research study: Exploring the Role of Supervision for Non-Clinical Artists working in Healthcare Settings, MSc Project Report 2020-2021 by Daisy Danziger, towards a MSc in Global Mental Health, London School of Hygiene & Tropical Medicine

The following is an extract from the study.

Abstract

Many healthcare systems struggled from a lack of fiscal and human resources for mental health services, a problem which was only exacerbated by the additional strain of the COVID-19 pandemic. This lack of resources has led to an increased use of non-clinicians to deliver services. As the body of work supporting the effectiveness of art as therapy grows, so too does the use of clinical and non-clinical artists in healthcare sectors. While clinically trained Expressive Arts Therapists receive clinical supervision to support them in their practice and wellbeing, non-clinical artists working in the health sector do not. To develop an understanding of what supervision may look like in the field of non-clinical arts in the health sector, further exploration of its role and the needs of the artists is needed.

The Aim and Objectives of the Study

To gain insight into the role of supervision for non-clinical artists working in the health sector.

- *To explore how receiving supervision affects non-clinical arts workers both personally and professionally.*
- *To explore what supervision looks like in the field of non-clinical arts in health.*
- *To explore the feelings of non-clinical arts workers regarding supervision.*
- *To explore and understand the needs of non-clinical arts workers.*
- *To explore non-clinical arts workers' perception of the scope of their work.*

Methods

The study used mixed methods with a questionnaire and semi structured interviews over the Zoom video conferencing service. Ethical approval was granted and consent forms completed.

Results

Table 1. Coding Categories

Main Category	Subthemes
Needs	<ul style="list-style-type: none">• Boundary-setting• Reflection• Validation• Additional Challenges
Impact	<ul style="list-style-type: none">• Practical Impact• Impact on personal wellbeing
Future Supervision	<ul style="list-style-type: none">• Adjustments• Format• Seeking out supervision

Main categories and sub themes from Daisy Danziger's thematic analysis

Though challenges and needs varied somewhat between them, common responses from participants were that they were seeking support in building confidence in their practice through the acquiring of new practical skills, that they felt a need for a space in which to reflect and process their work, and that a sense of community in the field was helpful in solidifying their perception of themselves and their work.

Conclusion

While there is much research still to be done on the role of supervision for non-clinical artists working in the health sector, results from this study indicate that it is a necessary component in ensuring their maintained success and continued benefit to their clients. Non-clinical artists need a place to discuss their work and feel supported both in their practice and emotional wellbeing. As the use of non-clinical approaches to mental healthcare grows, so will the need for support for those providing services. Though supervision is not the only way in which to provide support to non-clinical artists, there is enough evidence to encourage the use of it in the field.

Further research needs to be conducted in different cultural contexts to determine alternative roles of supervision for non-clinical artists.

Phase 3: Mentoring Programme

The 3 pairings all expressed how much they all enjoyed the experience. The mentors were photographic artist Daniel Regan¹⁹, poet, writer and health researcher Bakita Kasadha²⁰ and gallerist and producer Jennifer Gilbert²¹.

The mentors stated they would love to mentor again in the future but that this would need to be funded. They each built up good rapport, with a conversational style and as one mentor said *"there's no power dynamic happening."* They all felt that the mentees opened up to them and one mentor said the honesty added quality to the relationship and they were able to share health conditions and experiences:

"We have a shared experience of navigating misunderstood/stigmatised health conditions. I think it helped that we're both women of colour. I am not from a south Asian background, but could relate to the nuances of having a health condition and experiencing that as a racially minoritised woman."

"Having an open conversation at the beginning about our health difficulties was really important for both of us. We both shared the challenges that we face as equal humans, not as mentor and mentee."

One mentor stated they *"weren't setting the agenda or how we will do things, but being truly collaborative"* and they were *"really keen to make sure it was a partnership"*. But this meant being *"clear about what the mentee needed and what the mentor could offer"* and being realistic about expectations and limitations. And that the mentee *"showing she cared about pushing herself forward by"* putting the 'effort in' with 'homework' and follow up.

The mentors reflected on the session timings and venues – they were flexible to fit around work and sometimes in person or virtual. Going forward they would consider the length of each session as they hadn't *"factored in much time for all the behind the scenes thinking that is also part of the mentoring process."*

¹⁹ <https://www.danielregan.photography>

²⁰ <https://www.bakitakk.com>

²¹ <https://www.jenniferlaurengallery.com>

They introduced their mentees to others such as artists *"to talk about making art about mental health and how much to share/not share."*

"I felt that it would be great for her to meet other artists that I know in the sector."

The mentors also gave practical tips and support such as how to grow as a writer and completing a creative practice funding bid.

"I just loved that it wasn't all about talking and writing notes, he would just physically show me things, and examples and websites. So, when he would think of a website or someone's Instagram, he would pull that up on his phone or his computer or something."

"So, it was just so nice, you know, just having all these different resources there and available."

"And also, I was asking him questions about how to take photos, because I bought myself a mirrorless camera and just haven't used it yet."

Regarding the question: What has been the least helpful advice or support so far? All three mentees replied there was nothing to suggest or this question was not applicable.

"Everything covered was important."

"It's all good. I'm just sad it's finishing."

"Thank you for this. It has really changed my life and made me feel that my art is worth continuing"

CASE STUDY: MENTEE KIMBERLEY REFLECTS ON HER EXPERIENCE OF BEING MENTORED

Less Afraid of Working with Different People

"I think just the general knowledge around handling different conditions, different mental health, everything that's out there. I'm less afraid of it now. Just because I haven't experienced things or know anything about it... I'm less afraid of working with different people now because of everything I've learned through him really."

On Structuring and Facilitating a Session

"He just taught me how to develop a lesson, and how to structure it, how to choose a theme, and how to lead it really, and other little scenarios that might pop up... say if you've got a service user who's a bit stuck, and they don't know what to do... just talk to them. Ask them how do you feel? Or what would you like to do? Or have you used these materials before? And maybe I could show you how to use them. Just little ways of making them feel comfortable. Definitely the 'how to structure a whole session' was really, really good."

"Just to break it down in timings, like how much time to spend on this section, like the introduction, the actual like, body of the session, maybe an evaluation part at the end, where we get to reflect on our work and show each other what we've done. So that was helpful, because initially, I thought a one hour session would be good enough."

"I'm just really comfortable at facilitating these things now. And I'm hoping to do more as I sort of expand and you know, work with others, maybe with more particular needs."

Progressed when it came to Applying for Jobs

"I would say I'm kind of a different person almost, or maybe not different, more like... I've just gone up a level like... I've enhanced. I've progressed, that's something that I've definitely spotted when it comes to applying for jobs now. Obviously, I still get nervous in interviews. And there might be times where I'm repeating myself, but at least I've got more to talk about in terms of arts and health and well-being."

"I think I've learned to just not put yourself down anymore because as long as you're active, and you're actually doing something, whether it's like small things... that's how you learn. That is how you progress. It's not something that you'll learn straight away overnight."

"Since I started the programme I've been offered two jobs."

"Advice on being employed - how nerve wracking that can be. Sometimes it's sorting out your taxes, and you know, just getting all your paper work and your invoices in order."

Helped with their Mental Wellbeing

"It's definitely helped with my mental wellbeing as well. There's moments when you have your doubts. And I think ever since exploring more into this sector and getting the mentoring, it has helped me mentally... it's just made me realise like you can do stuff, there will still be moments where you're going to be down. It's more like you kind of have more control over it now. And you do pick yourself up a lot quicker."

It's all Worked Together

"The programme has helped a lot [...] it's almost like getting a form of therapy as well, actually, I guess it's like you're getting the benefits of work and then your personal development and then some kind of therapy. It's just all worked together."

Mentors' Learning

The mentors mentioned on how much they had learnt from their mentees and had reflected on such as:

"She's reminded me to pace things more and take breaks."

"She has taught me a lot through her different diagnoses."

"Made me realise even more than I did, the access issues people face when they have a multitude of diagnoses, and just how difficult certain things/ being challenged."

"I wanted her to be able to ask me things that may challenge me and the ways in which I work in the sector."

"I think the experience made me reflect on my own journey into the sector as it isn't something I think about too often."



CHALLENGES

Phase 1

Some Preferred more Facilitation

14 artists began the peer support programme with three leaving between sessions 1-4. Reasons were that one artist would have preferred more facilitation, one felt too unwell to take part and another missed a few sessions so felt the group had bonded without them.

Experiences with Online Sessions

"At times things were intense for me and I didn't always understand what was required of me in the group discussions. I really enjoyed the opportunity to play, and have activities then to be able to talk about other people's creations was really nice."

"Managing a lot of sudden changes and additional stresses at home managing their home learning online and an overload of work. I was already overwhelmed and anxiety was really high. I am on Zoom for work a lot at the moment and finding the social interaction part of it all really hard. My mind goes blank and I experience a lot physical symptoms that are hard to deal with."

Phase 2

53.4% responded to the statement in the survey 'I feel depleted, burnt out, or at risk of burnout' with statements such as *"feeling tired and becoming unmotivated"* (before engaging in supervision). Another statement was that the *"worry that they carried"* permanently due to their work made them question their ability to carry on (from interview).

All participants stated that working freelance made funding for supervision difficult in the current model.

Phase 3

Reconsider the Length and Spread of Mentoring Sessions in the Future

"We got on very well from the beginning. I think perhaps it was my mistake in making the sessions a bit long – 4hrs – although we did take lots of breaks and they always flew by. I think going ahead I would halve them to 2hrs. I also didn't factor in much time for all the behind the scenes thinking that is also part of the mentoring process. It could have been more useful to say we would meet once a month for six months (if we had more time for phase 3), as sometimes we were meeting in just 2/3 weeks which didn't give my mentee much time to make progress".

"Looking back, I think it would've been better to have half day sessions rather than 90min virtual ones. Fewer half day sessions (compared to a higher number of 90mins sessions) gave more space for reflection between sessions, which I think is useful. Towards the end, this is what we began to do. I think spreading 90 minutes sessions over every 2-4 weeks would have been fine, but it didn't work with an August deadline."

Mentors Reflected on their own Practice and Understanding of a Mentee's Access Issues and Challenges

"This mentoring has made me realise even more than I did, the access issues people face when they have a multitude of diagnoses, and just how difficult certain things become, that I might often take for granted. So, I am grateful for that learning and have been and will continue to make changes to my practice and sharing of knowledge based on this."

"She has taught me a lot through her different diagnoses and how she sees the world differently to me, and this has opened my eyes for sure. I've also learnt more about how ADHD affects people as this is a relatively new diagnosis that she is currently exploring through her art".

"Her questions really got me to reflect on my own practice over the past few years and how I navigate telling my own story in a way and making sure that I didn't project my perspective onto her. I was keen to say that my way is an example but not the only way of living openly with a stigmatised health condition."

Being Clear and Realistic about Expectations

"I was really keen to make sure that this was a partnership of some kind, so discussing openly from the beginning felt really important. Making sure that we were clear about what she needed and what I could offer. Also, about the limitations of what this may be: being realistic about expectations."

The Arts and Health Sector can be Opaque to Access

"So much of it is about connections, being introduced to people and having a very active presence. The field is so opaque that it can seem impossible to get a foot in the door. It makes me think about how helpful these mentoring programmes can be because they can be a way to introduce people to others."

Opportunities for Job Shadowing or Attending Live Workshops to Learn from Demonstration

This has been impacted by COVID-19 due to many physical workshops being paused/stopped.

Funding for More Mentorship Programmes

"I hope there will be more programmes like this for other up and coming creatives, as in the past people in the creative industry haven't always been taken seriously or there has been a lack of support so it's good that we are being more recognised now and that there is help out there."

"I really love mentoring people and would like to do it more, but it would have to be paid. It is making me think about how to expand how we offer this at the Hub by thinking about ways to fundraise (i.e crowdfunding) so that we can support more mentorship programmes."

FUTURE IDEAS AND RECOMMENDATIONS

Phase 1

Suggestions for Zoom / video meetings:

- *One word check-in is good to gauge where everyone is at;*
- *Grounding, meditation, breathing exercises at the start;*
- *Discussions around disclosure and how this can relate to triggering content
(which can be explored in ground rules);*
- *More of heads up (i.e "in 5 mins we'll be...");*
- *Encourage usage of the chat box;*
- *Encourage use of the 'hands up' function;*
- *Breakout groups were changed mid-way which one person felt awkward but
thought they'd get used to it and would be bonded by the end.*

Phase 2

These recommendations come from Daisy Danziger's research study:

Non-Clinical Arts Workers

- For those freelance practitioners that write their own grants to request funding: add the cost of supervision to their budget plans;
- For practitioners who are working for a charity or other organisation: request supervision from their employers.

Funders

- Provide additional resources to be used strictly for supervision.

Supervisors

- Keep a balance between leading the group in discussions and activities and allowing participants to lead the conversation;
- Have an element of artmaking as part of the sessions;
- Clearly define the space from the first session (i.e., the difference between therapy and supervision);
- Request that participants give trigger warnings before discussing certain topics;
- Make sure to have safeguarding resources in place for participants who may require extra support.

Researchers

- Conduct further studies with a larger sample size;
- Include artists who use different mediums (e.g., musicians, actors, etc.);
- Conduct research with non-clinical arts workers outside of the UK.

Phase 3

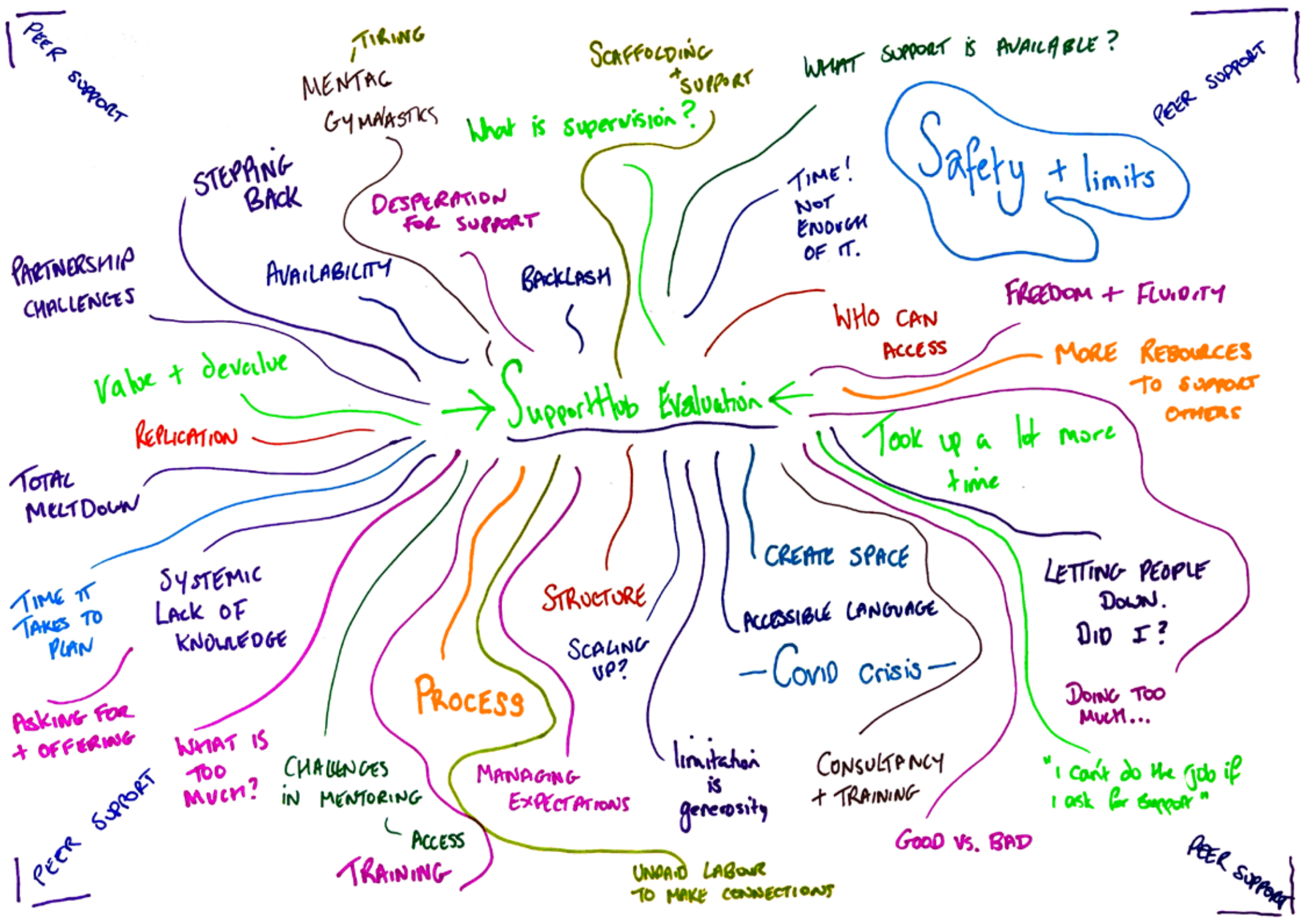
- Appropriate time allocation (to allow both mentor and mentee time to process etc);
- Clear and realistic agreement surrounding about expectations
- If possible, the mentor could consider opportunities to signpost to helpful networks and make introductions;
- Additional funding;
- Mentor to consider opportunities for job shadowing and demonstrations;
- Opportunities for reflection and learning for mentors regarding issues that mentees face: access issues, health challenges (including comorbidity of illnesses);

This statement by Culture, Health and Wellbeing Alliance (CHWA) on their practitioner support²² page resonates with the findings in this report.

"We aim to broaden the definition of practitioner wellbeing to acknowledge the needs of all practitioners in this field, from freelance artists/ consultants to senior leaders, from link workers to volunteers. We are all important parts of the ecology and at the alliance are keen to promote and support initiatives that are working to support all practice. Our broader aim is to move towards a culture of care that acknowledges that support must be a mutual effort. Commissioners, partners, participants, funders and practitioners all need to be invested in this culture of care for each other.

We believe that practitioner wellbeing also needs to be embedded in to the bigger questions and actions relating to determining quality, nurturing sustainability and driving innovation."

²² <https://www.culturehealthandwellbeing.org.uk/practitioner-support>



KEY LEARNING

Reflections from Daniel Regan and Eve Loren

Some Applicants did not Fully Understand what Supervision is

"It became really clear in the applications that people needed something else. They either wanted coaching, professional development, or that they wanted to run some workshops. I think that's just the confusion around it unless you've worked in a healthcare environment where supervision might be more common, or at least it's discussed. Most artists don't have a real grasp on what supervision is."

It's not a Mental Health Service

"Creating a clear differentiation between what this kind of support project is from a clinical mental health service can be difficult. It was, at times, difficult to draw the boundaries with some participants. We tried to make sure that the wording that we used in each phase was clear – stating that this was not a mental health service. But of course at times people want to tip over into talking about difficult subjects that really require specialist mental health services and we had to be cautious that we were offering support whilst also recognising the limits of what this project was, whilst signposting participants to other sources of support."

Some People Really want you to be the Expert

"A helpful reflection is on those power dynamics and imbalances because, my kind of gut, always wants to go towards equalising power, and not being the expert and decentring expertise and allowing the group, sort of enabling and creating a space where the group pulls expertise, but not everyone wants that. Some people really want you to be the expert, and some people need experts to go and say you do this."

The Challenging Experiences of Managing the Project

- Feeling anxious at times about being a gatekeeper and feeling that they were denying people opportunities;
- However, hearing from a supervisor that *"limitation is generosity"* turned their thinking round;
- *"I wasn't expecting so much need for checking in, lots of instances when things were quite heavy."*

"The mental gymnastics of the work. It's about valuing the time and the depth required at those levels of thinking, not just the practical and logistical stuff, but being able to think about how people might feel in a space, or number of spaces, and how that might play out in groups.. And when we put together a formal application form, we're asking the right questions: we're asking people what do you need, how can we do this in a safe way, how can we make sure that we are within our limitations meeting the needs that we are able to meet."

Diversity Issues

"[...] In phase 2 I'm pretty sure they were all white women, which was interesting, because obviously in phase one that was artists who may be working artists, and maybe they don't make money from their art, but it was about being an artist making work around health with lived experience, whereas the supervision was very much about, you must be a working, participatory artist.

And if that that's the majority of people that come through the door, is white women, then it's really indicative of the culture of the Arts and Health sector, isn't it, that there's a majority type of person that's accessing those work opportunities, which felt quite disappointing and that there was a real lack of diversity."

"Maybe it's about the resources, that we could have pushed it to different organisations who are supporting more diverse artists, and it's very much an open call maybe if we'd done a bit more outreach to let organisations know about this opportunity..."

Diversity Issues (cont.)

"I do think there is something about the way in which this sort of Arts and Health language is very accessible to middle class white people."

"There are lots of practitioners that are doing incredible community work, but they wouldn't consider themselves like Arts and Health artists, they might do something that's much more about their culture and community where the arts and health aspect of it is secondary. So, they don't primarily identify as being an artist in the Arts and Health sector. They might see themselves as somebody that does music work with black youth. They don't think the health aspect is the primary outcome."

"So maybe people don't feel that that's an opportunity that they would apply for, even though they may have benefited from supervision because they're also listening to really difficult stories, but the language that we're using is not, it's not reaching everybody."

The use of the term Artist could be Reconsidered

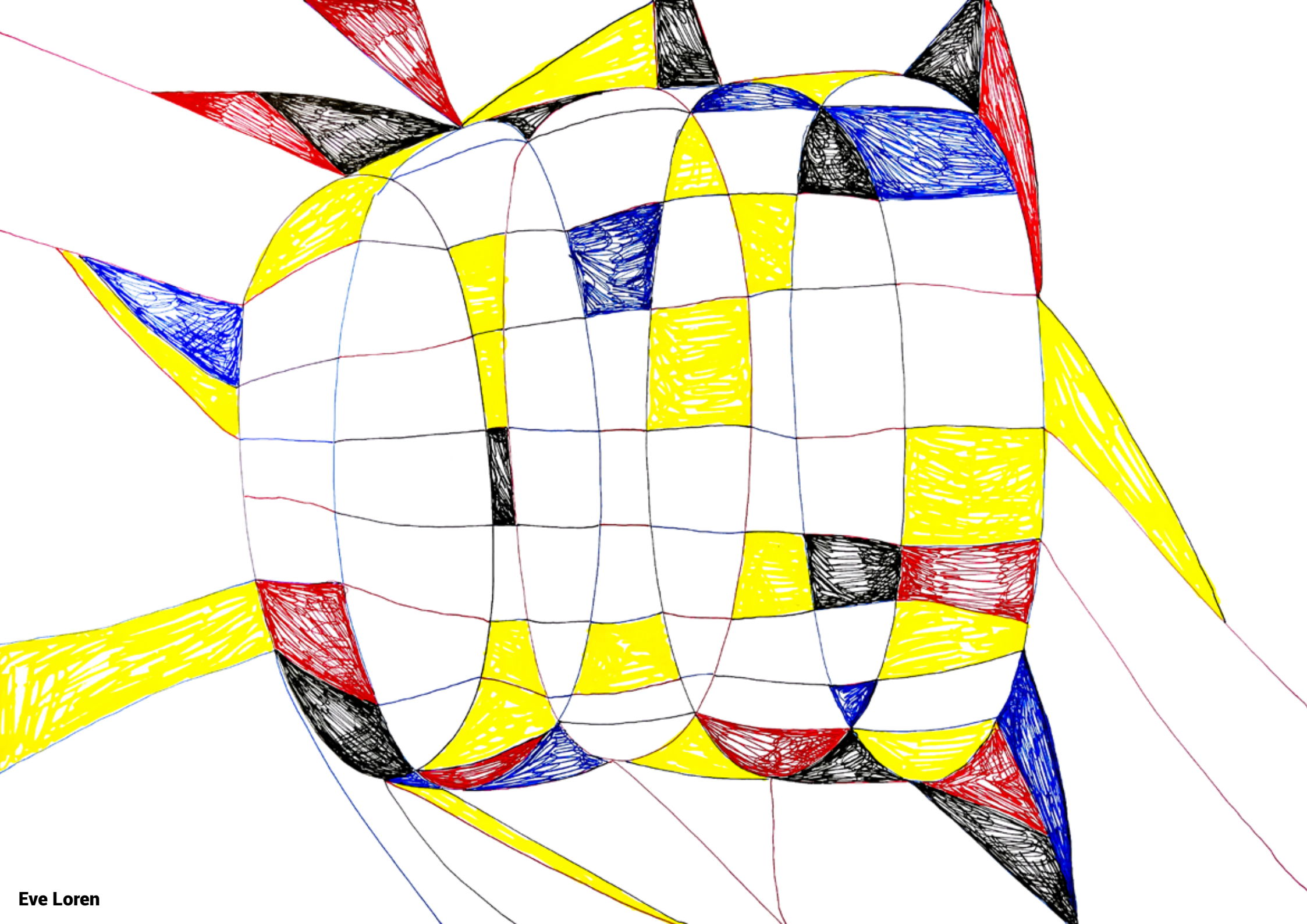
The term artist is quite exclusive – perhaps use creative practitioner, or something like that.

The Curation and Structure of the Project Needs to be Further Considered

Building the scaffolding, fluidity, time limits, boundaries, duty of care and limited resources:

"So, for some people knowing this is six sessions or this is ten sessions or this is twenty. You immediately decide or start to decide what you feel comfortable sharing and what you feel or isn't the space to share. You kind of select and work out yourself that gives you the autonomy, the choice and the freedom to work out how much of me am I going to bring to this space how much am I going to need to hold back or how much am I going to take elsewhere or you start to really take that, that power back mental gymnastics, of the work."

"It's about valuing the time and the depth required the levels of thinking, not just the practical and logistical stuff, but being able to think about how people might feel in a space, or number of spaces, and how that might play out, groups, and just making sure that when we come to advertise something."



Eve Loren

NEXT STEPS AND SUSTAINABILITY

Daniel considers that:

"There's no shortage of people that want to access this. So, I don't think the scaling up aspect of it is a problem, you know, in terms of finding people that want to access these opportunities, but the infrastructure that it needs... It needs, far more financing. So, I think that's one of the main things is using this as a stepping stone to then expanding it into whatever that looks like."

Daniel thinks for a roll out of this project he needs to have further conversations with the networks such as Arts & Health Network, Brighton & Hove, Leeds Arts Health and Wellbeing Network (LAHWN) and other regional networks, and consider the most appropriate and manageable model.

Going Forward in Future Bids

The following would need to be built in order to create structure, enable sustainability and support the emotional labour and mental gymnastics involved in the organisation:

- Realistic funding and resources to sustain an increase in capacity;
- Checking-in time for colleagues to debrief and self-care;
- Consideration for separation of roles (i.e facilitator vs operational);
- Realistic time allocation for developing and maintaining the project (it took a lot more than anticipated);
- 'Critical friends' to support the development;
- Coaching and other specialist consultancy to call upon for both workers, but also for participants as an additional form of support;
- Connecting better with diverse community groups and leaders and facilitators, some of whom may not necessarily define their practice as arts and health or identify or use the title or term artists;
- Recognition of the essential time and energy required to find and establish future collaborations that share mutual ethos and vision.

Support for Artists, Creative Practitioners and Non-Clinical Art Workers in Community, Health and Social Settings

- **PEER SUPPORT:**

- *Could help artists with lived experience feel less isolated and lonely, more connected, confident and empowered, helping with self expression;*
- *Further input on how to create increased access to practical support, building self-esteem and feeling more positive about recovery/growth as an artist with lived experience;*
- *Consider how the Hub “creates spaces where people can design and co-design the things moving into the future of the development of the Hub.”*

- **SUPERVISION IS RECOMMENDED** to be factored into budgets, resourced and to be requested in employment. A supervisory approach and need for further research have been suggested - see the phase 2 recommendations by Danziger (2021).

- **MENTORING** has the potential for mutual learning and sharing, and assisting career progression, networking, confidence and skills development.

FURTHER RESOURCES

Arts & Health Hub Resources

<https://www.artsandhealthhub.org/resources>

Arts & Health Network Brighton & Hove

<https://www.creativefuture.org.uk/arts-health-and-wellbeing/arts-health-network-brighton-hove/>

Arts & Health South West

<https://www.ahsw.org.uk>

Culture, Health and wellbeing Alliance (CHWA) Practitioner Support Resources

<https://www.culturehealthandwellbeing.org.uk/practitioner-support>

Leeds Arts Health and Wellbeing Network

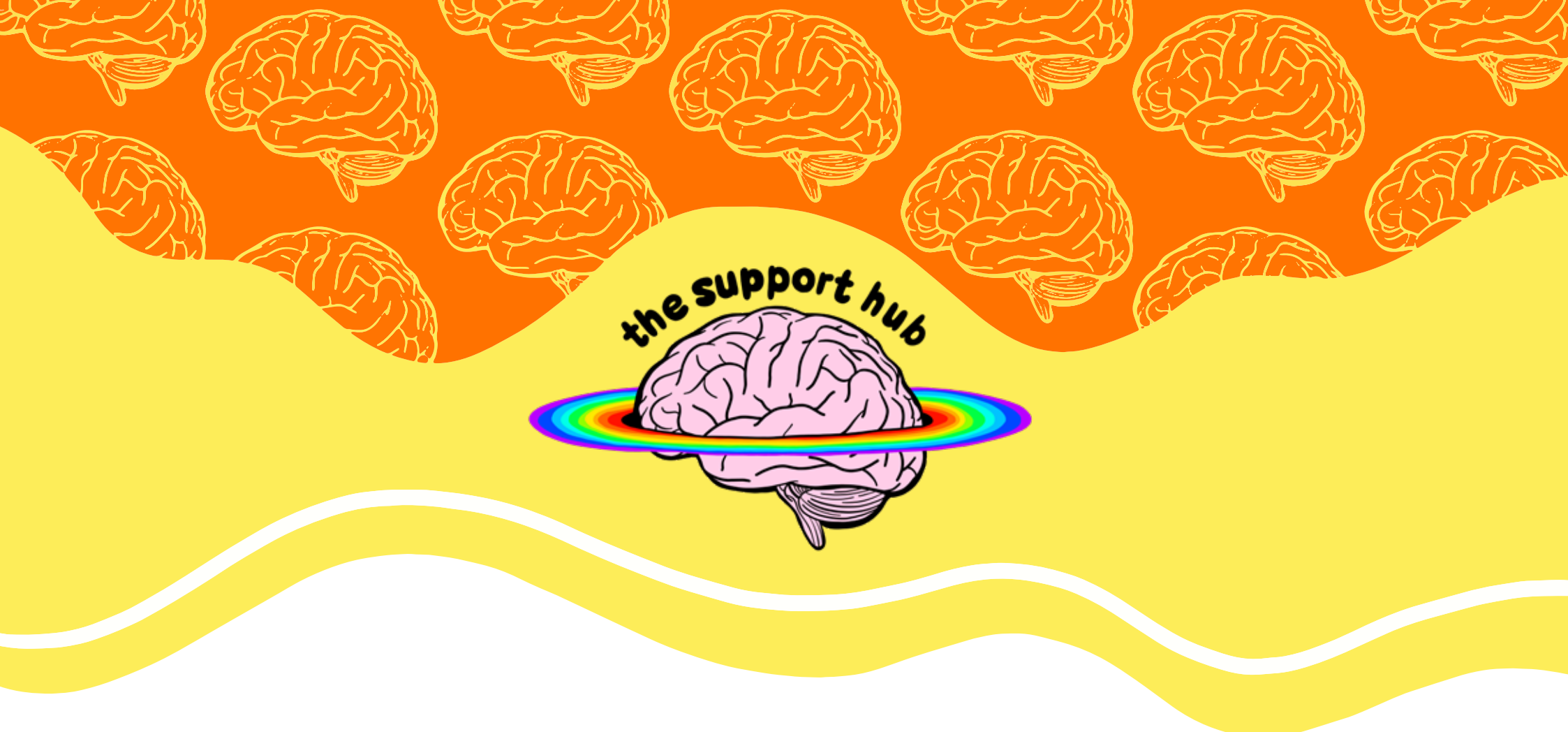
<https://www.lahwn.co.uk>

London Arts & Health

<http://www.lahf.org.uk/>

Wales Arts Health and Well-being Network (WAHWN)

<https://wahwn.cymru/about-us>



SUPPORTED BY:



Supported using public funding by
**ARTS COUNCIL
ENGLAND**



**National Survivor
User Network**

