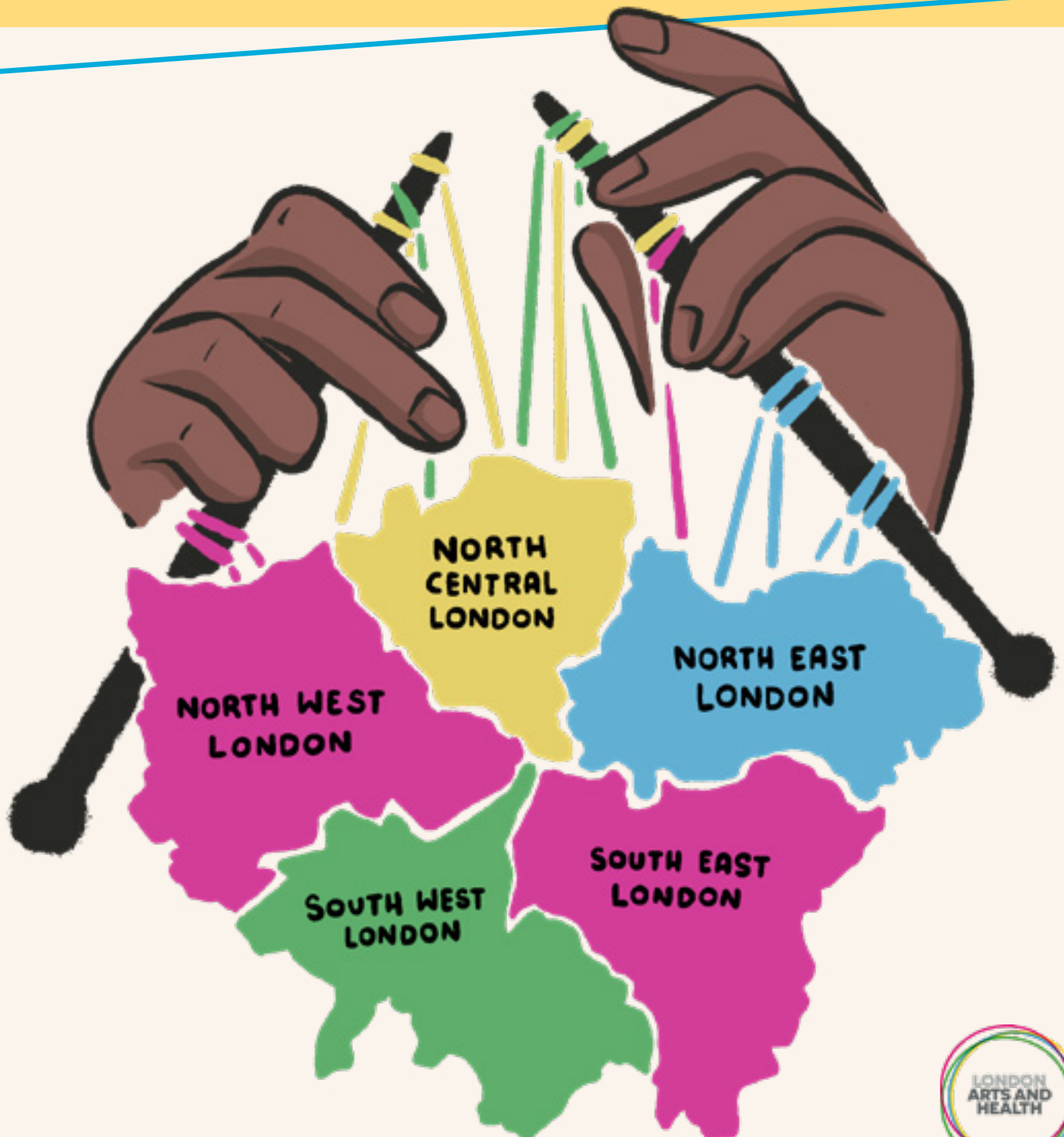


**MAYOR OF LONDON**

# **Understanding Creative Health in London**

**The Scale, Character and Maturity of the Sector**



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**Greater London Authority  
September 2024**

This report was commissioned by the GLA to London Arts and Health and Rebecca Gordon-Nesbitt.

The report was written by Rebecca Gordon-Nesbitt with additional research undertaken by London Arts and Health: Amalia Restrepo and Anna Woolf.

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# SUMMARY



## OVERVIEW

**The idea that creativity, culture and heritage can improve our health and wellbeing and increase equity is widely accepted. This way of thinking and working is collectively known as creative health. For this study we adopted a broad definition of creative health, which included creative, cultural and heritage activities that directly or indirectly benefit physical and mental health and wellbeing.**

Across London, people are practising creative health by animating hospitals and care homes, transforming social work, activating creativity in the community, enlivening culture and nature and providing professional development for healthcare staff. Until now, we did not have a clear picture of where this work was happening, who was doing it and how it was being funded.

At the end of 2023, the Culture, Creative Industries and 24-hour London Unit at the Greater London Authority invited Dr Rebecca Gordon-Nesbitt and London Arts and Health to explore the evolution, scale, character and maturity of the creative health sector in London. Between January and April 2024, extensive scoping was undertaken of the history and current realities of the sector, using a combination of desk-based research and interviews with almost 50 experts. This report presents the results of that research.

## EVOLUTION OF THE SECTOR

From its beginnings in the first half of the 18th century, creative health properly took root in London in the early 20th century with a scheme to promote murals

in hospitals. In the post-war era, art and music continued to find their way into healthcare settings through passionate champions and dedicated organisations.

In the 1960s, the community arts movement began to consider the health, wellbeing and equity of Londoners, achieving unstoppable momentum by the 1970s. In the 1980s, these efforts were complemented by pioneering cultural organisations engaging with their neighbours. In the 1990s, creative health made its way into educational settings, initially through the training of healthcare professionals.

This evolution of London's creative health sector is visualised in two illustrations, specially commissioned from artist Rae Goddard, which are made up of local timelines and pertinent national developments (see pages 32 and 33).

## SCALE, CHARACTER AND MATURITY OF THE SECTOR

Building on this illustrious history, *Understanding Creative Health in London* considers the present-day creative health sector, finding it to be concentrated in health and care settings, in the community, in cultural and heritage venues and at educational sites.

For this report, a wealth of activity has been captured across the capital, sometimes in unexpected places. This suggests a groundswell of creative health work that is much greater than the sum of its often-fragmented parts and enables millions of Londoners to restore and maintain their health and wellbeing.

**Given the vast amount of activity in the creative health sector, determining the exact number of individuals working in the sector is challenging. Data from the Culture, Health and Wellbeing Alliance (CHWA) estimates the presence of 5,000 to 10,000 practitioners, while London Arts and Health reaches more than 30,000 people across their channels.**

This includes advocates embedded in two of London's five integrated care systems, hospital arts coordinators and practitioners, individuals and organisations aligned with doctors' surgeries and many more people working within local authorities, cultural and heritage organisations and the wider community, and it is likely to be an underestimate.

Because financial support is rarely, if ever, categorised as 'creative health', it is not possible precisely to capture the funding coming into the sector. The contribution of Arts Council England alone is estimated to be in the region of £4 million, which is complemented by the work of the National Lottery Heritage Fund and several prominent trusts and foundations. What is clear is that funding is almost invariably short-term and piecemeal, and the sector lacks statutory support. As a result, organisations that are vital to the lifeblood of London's creative health are being run on a shoestring.

**The main threat to the sector is this lack of secure, long-term funding, which deprives Londoners of the consistency that is vital to health and wellbeing and denies the workforce stability and space to innovate.**

Analysis of recent survey responses reveals an over-stretched and precarious workforce that is poorly paid and in need of training, professional development and support. The case studies presented in this report were drawn up with artists working across the sector and demonstrate realities on the ground.

## **REFLECTIONS AND RECOMMENDATIONS**

This report presents a series of reflections on the main challenges facing the sector, including an urgent need to diversify the workforce and leadership, which will require structural change.

### ***Understanding Creative Health in London concludes with four overarching recommendations to the sector as a whole:***

- 1.** Advocate for continued support from commissioners and funders to foreground their contribution to building a sustainable creative health sector.
- 2.** Bridge the gap between health and the arts – more opportunities for training which bring health and arts practitioners together, continue to embed creative health into the 5 NHS regions for London (NB GLA has supported one role in NHS South East London and the Arts Council England has supported another in NHS North East London as pilots).
- 3.** Help support efforts to diversify the sector – spotlight the work of London Arts and Health's Diversity in Leadership in Creative Health and the Anti-Racist Action Group in Arts & Wellbeing and encourage more paid training opportunities for global majority artists.
- 4.** Provide more support to practitioners – work with the Creative Health and Wellbeing Alliance's Quality Framework.

If the sector orientates its work towards meeting these goals, London will continue to enjoy good creative health long into the future.



# GLOSSARY

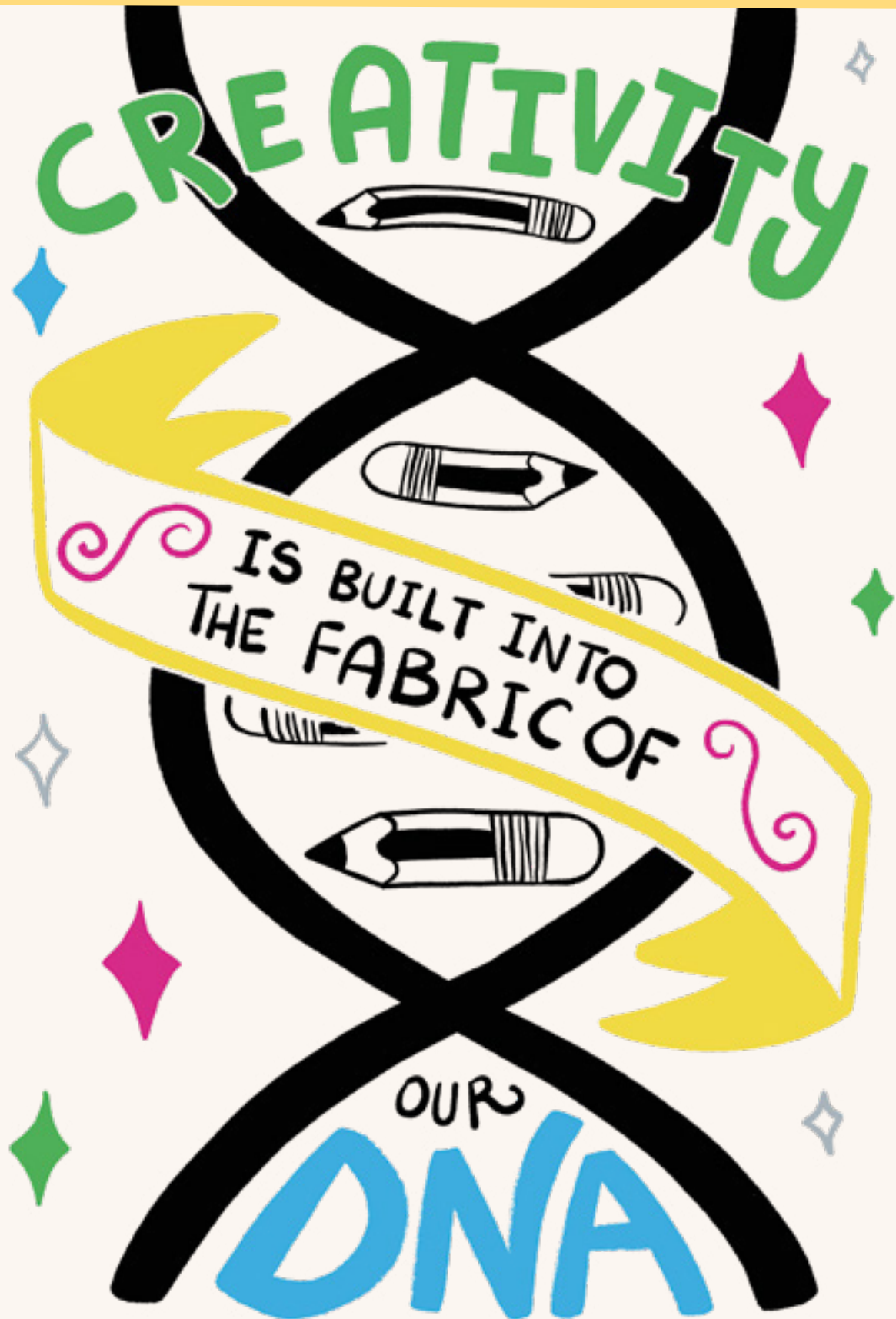




<b>ARRS</b>	Additional Roles Reimbursement Scheme
<b>APPGAHW</b>	All-Party Parliamentary Group on Arts, Health and Wellbeing
<b>ARAG</b>	Anti-Racist Action Group
<b>ACE</b>	Arts Council England
<b>CABE</b>	Commission for Architecture and the Built Environment
<b>CIC</b>	Community Interest Company
<b>CQC</b>	Care Quality Commission
<b>CLPE</b>	Centre for Literacy in Primary Education
<b>CAMHS</b>	Children and Adolescent Mental Health Service
<b>CHWA</b>	Culture, Health and Wellbeing Alliance
<b>DCMS</b>	Department for Culture, Media and Sport
<b>DoH</b>	Department of Health
<b>DBS</b>	Disclosure and Barring Service
<b>ENB</b>	English National Ballet
<b>GOSH</b>	Great Ormond Street Hospital
<b>GLA</b>	Greater London Authority
<b>GLC</b>	Greater London Council
<b>GP</b>	General Practitioner
<b>HDA</b>	Health Development Agency
<b>HARCA</b>	Housing and Regeneration Community Association
<b>ICB</b>	Integrated Care Board
<b>ICS</b>	Integrated Care System
<b>LACH</b>	London Action for Creative Health
<b>LAH</b>	London Arts and Health
<b>LAHF</b>	London Arts in Health Forum
<b>LIFT</b>	London International Festival of Theatre

<b>NASP</b>	National Academy for Social Prescribing
<b>NAPA</b>	National Activity Providers Association
<b>NAAHW</b>	National Alliance for Arts Health and Wellbeing
<b>NAHN</b>	National Arts in Hospitals Network
<b>NCF</b>	National Care Forum
<b>NCCH</b>	National Centre for Creative Health
<b>NHS</b>	National Health Service
<b>NLHF</b>	National Lottery Heritage Fund
<b>NELICS</b>	North East London Integrated Care System
<b>PCN</b>	Primary Care Network
<b>PHF</b>	Paul Hamlyn Foundation
<b>Primary Care</b>	The first point of contact with the health system, typically through GPs, community pharmacists, opticians and dentists
<b>QMUL</b>	Queen Mary University of London
<b>RIBA</b>	Royal Institute for British Architects
<b>RSPH</b>	Royal Society for Public Health
<b>SHAPER</b>	Scaling-up Health-Arts Programmes: Implementation and Effectiveness Research
<b>Secondary Care</b>	Refers to treatment that is not given at the first point of contact with the health system, typically refers to hospitals and clinics
<b>SELICS</b>	South East London Integrated Care System
<b>SLaM</b>	South London and Maudsley NHS Foundation Trust
<b>SCHWeP</b>	Southwark Culture Health and Wellbeing Partnership
<b>UCL</b>	University College London
<b>UCLH</b>	University College London Hospital
<b>V&amp;A</b>	Victoria and Albert Museum
<b>VCFSE</b>	Voluntary, Community, Faith and Social Enterprise

# FOREWORDS



## **JUSTINE SIMONS OBE, DEPUTY MAYOR FOR CULTURE AND CREATIVE INDUSTRIES**

**Quite simply, culture is in our capital's DNA. The creativity of London underpins everything that makes this city unique.**

Culture is especially powerful when it comes to our health and wellbeing. Dance is helping Londoners living with Parkinson's and dementia. Socially prescribed singing and breath work is rebuilding the lungs of those suffering from Long COVID.

New friendships are being forged at book clubs, building connections and helping with loneliness and isolation. Murals painted in hospitals are reducing patient anxiety.

All across our city, art and culture are transforming Londoners lives for the better – helping us all to thrive. But we know that, despite our best efforts, access to culture is unequal and inconsistent.

We also know that this work is under resourced and underappreciated in an already stretched health care system, with many artists delivering creative health work earning below the living wage in the last financial year. In the hospital system alone, this growing and brilliant workforce meets and supports 2.9 million people every year. This is clearly unsustainable.

There has been a worrying rise of physical, mental health and wellbeing issues across London and beyond.

So it's a complicated picture, with social, health and culture systems at a stretch following sustained underinvestment, the legacy of the pandemic and the cost-of-living crisis.

This report seeks to unpack some of this complexity. So we can better understand creative health in our city, how it works and what the challenges and opportunities are.

It reveals the long and rich history of creative health in London – from community organisations leading the way in the 19th century, to hospital trusts, arts organisations and GP surgeries working today.

It celebrates the pioneering individuals, organisations and networks changing the lives of Londoners through creativity. The collaborations between the health, cultural, social, voluntary, community and faith organisations.

What we discover in these pages is the breadth and depth of the creative health work happening across London and the immense diversity of art forms and cultures it embraces. Much more than the sum of its parts, this movement is demonstrably improving health outcomes for our citizens.

This report also points the way to the future – highlighting the lack of sustainable resourcing and the crucial recognition needed to ensure creative health activity happens across all parts of the city. So, as well as giving you deep and fascinating insights into the world of creative health, it is also a call to action. An invitation to join us in championing this vital work – combining the strengths of public health, social work, community work and culture professionals.

**Culture is a profound and transformative force for our health and wellbeing – together we can unlock its power for everyone.**

**PROFESSOR KEVIN FENTON CBE,  
STATUTORY HEALTH ADVISOR  
TO THE MAYOR OF LONDON**

For years public health services have focused on tackling challenges such as mental health, loneliness and social isolation through traditional means. It is proven that arts have a profound impact on our wellbeing and our health – from improving mental health and reducing chronic illnesses to providing comfort in difficult times like hospitalisation or end of life care. The beauty of the arts lies in their versatility and accessibility.

This important and timely report shows London's creative health offering is diverse and eclectic – it is happening on our hospital wards, in our homes and our local parks, delivered by a wide range of independent practitioners, organisations and major cultural institutions.

The arts offer solutions that can be easily integrated into existing healthcare frameworks. However, unlocking this potential requires collaboration and sustainable funding. The findings celebrate how the arts are already building bridges between sectors, supporting all Londoners to access culture as part of their wellbeing journeys, for healthy hearts and minds.

I look forward to continuing to champion the critical conversations between health, public health and social care.

**MOIRA SINCLAIR OBE, FORMER  
CHAIR OF THE MAYOR OF  
LONDON CULTURAL LEADERSHIP  
BOARD, CHIEF EXECUTIVE OF  
PAUL HAMLYN FOUNDATION**

When I worked in an arts and health setting, I was always surprised by the number of doctors who would comfortably tell me how playing an instrument or singing or painting relieved their stress and anxiety, and in the same breath would tell me that concerts in the hospital offered no value at all.

Some years later, we can see this understanding of the power of arts to heal is shifting; it is widely recognised that arts contribute to our wellbeing – a testament to the quality of the collaborative working led by a multitude of organisations and individuals.

The past few decades have seen a flourishing of interconnections between the health and cultural sectors. This report gives us a generous snapshot of the sector in London, while highlighting the stark inequalities and gaps that must be addressed.

As we strive to build bridges to bring the benefits of creativity to all Londoners, we must ensure we are bringing everyone along, laying solid blocks for a sustainable sector to thrive. For this, we must be at the forefront of innovative partnership working, exploring governance models to distribute resources that meet the potential of this cross-sector work.



# INTRODUCTION AND CONTEXT



...IT'S ALL ABOUT THE

# SOCIAL CHANGE!

**In London, the idea that creativity, culture and heritage can improve our health and wellbeing is by no means new. In the 1730s, a young William Hogarth understood this beneficial relationship when he offered to paint biblical scenes on the walls of St Bartholomew's Hospital.**

Since then, creative health has developed steadily in the capital, gaining in momentum in the 20th century and moving beyond hospitals into other aspects of health and care, cultural venues, heritage sites and communities.

For this research project, the Culture, Creative Industries and 24-hour London Unit at the Greater London Authority (GLA) asked us to consider how creative health in London has evolved and what the sector looks like now – where activities are happening, who is commissioning and delivering them, what kind of training, professional development and support are available for this work and whether it is possible to make a living from it.

We adopted a broad definition of creative health, which included activities that directly benefit physical and mental health and wellbeing and those that do so indirectly, by enriching the environments in which Londoners are born, grow, live, work and age and by shaping the structures and forces shaping our lives.

On the one hand, activities might be aimed at particular conditions, like dementia, Parkinson's Disease, Long COVID or mental health. On the other hand, as Dan Hopewell at Bromley by Bow Centre reminded us, 'art isn't just good for people who've got diagnoses; art is good for everybody, and creative activity is good for everybody. It's an innate function of being a human being to be creative'. Head of Arts at Royal Brompton and Harefield hospitals Mary Paterson told us that creative health ought to be thought of as creating relationships rather than pursuing an instrumentalised cause-effect model.

**This report presents our findings on the evolution, scale, character and maturity of the creative health sector in London, and it draws on the wisdom of many people working in the sector, including artists and facilitators. It concludes with a series of reflections and recommendations to the sector as a whole.**





# METHOD



**In order to chart the evolution of the sector in the capital and to gauge its character, maturity and scale, it has been necessary to use a combination of methods.**

To identify organisations pivotal to the sector's evolution, we began by trawling historical documents. An article by Hugh Baron and Lesley Greene, published in the *British Medical Journal* in 1984, provided a valuable overview of the development of the arts in hospitals. Also helpful were [\*Art for health: A review of good practice in community-based arts projects and initiatives which impact on health and wellbeing\*](#), published by the National Health Service (NHS) Health Development Agency (HDA) in 2000 and [\*A review of evaluation in community-based art for health activity in the UK\*](#) by John Angus, published by the HDA two years later, both of which contain a plethora of pioneering projects set up in the preceding decades.

This was complemented by a study of early publications, including those produced by the King's Fund and Calouste Gulbenkian Foundation; 1980s accounts of the Greater London Council's support of community arts; Peter Senior and Jonathan Croall's appraisal of hospital arts, *Helping to Heal: The Arts in Healthcare* (1993); Mike White's *Arts Development in Community Health: A Social Tonic* (2009); Alison Jeffers and Gerri Moriarty's edited collection *Culture, Democracy and the Right to Make Art* (2017); and *The Healing Arts: The Arts Project at Chelsea and Westminster* (2019), kindly made available to us by CW+.

We organised our findings chronologically, according to the main settings in which creative health takes place (detailed below). In illustrating and animating the timelines we compiled, we were fortunate to work with artist Rae Goddard, who immediately understood what we were trying to convey

and provided a succinct framework within which we could do this, with subsectors colour-coded by setting. The volume of activity we uncovered has necessitated two separate visualisations – one covering London-based activity across the main subsectors and one capturing pivotal national and educational developments.

Rae's visualisations are complemented by a more detailed picture, provided in Appendix A, which, as far as possible, names the people responsible for the developments in the timelines. This was not intended as a mapping exercise, and the snapshot we provide here is by no means complete. We would welcome additional information to help us fill gaps.

To gain an overview of current activity, we cross-referenced a variety of sources, including directories of projects, such as those produced by the Baring Foundation, and grant information published by Arts Council England (ACE) and 360 Giving. We also conducted two surveys. One asked people working with the arts in hospitals for information about their programmes – how long they had been running, how they were funded, how they commissioned artists and how many people were reached. This survey was kindly disseminated to the London members of the National Arts in Hospitals Network (NAHN), with findings interwoven into this report.

Between February and April 2023, national sector support organisation the Culture, Health and Wellbeing Alliance (CHWA) conducted an extensive [survey](#) of the creative health workforce with Arts, Culture, Health & Wellbeing Scotland, the Wales Arts, Health & Wellbeing Network and Arts Care (Northern Ireland). Among 200 respondents from across the UK, 30 were working in London. CHWA generously made available to us anonymised data pertaining to these

practitioners, which are analysed in the Workforce section below, filtering out those practitioners working in the whole of England to leave 23 respondents.

For our second survey, we abridged this UK Scale of the Sector survey. We asked artists working in London's health and care, cultural, heritage and community organisations how they were contracted to carry out their work, whether they received a standard fee, how much they earned from their work last year and whether they had undertaken – or would like to undertake – any training or professional development. We analysed the results of this survey in conjunction with the findings of the UK Scale of the Sector survey.

We supplemented our understanding of the sector, derived from the methods described above, by interviewing a wide range of people who have worked in London's creative health sector. This included pioneers, who were active in the sector during its formative years; organisational representatives working in the sector today; and artist-facilitators making up the creative health workforce. A list of interviewees and their affiliations is provided in Appendix B. Findings from our conversations with practitioners formed the basis of a series of case studies in each of the main settings in which creative health work is taking place.

We asked pioneers to tell us about formative moments in the sector, including the genesis of organisations or projects as well as policy developments and publications. We asked people working in the sector for their impressions of current realities and challenges. We asked artists about the conditions in which they work within creative health settings. We asked funders for their perceptions and priorities. We asked everyone we interviewed what would help them in their work and which voices were missing from the sector.

**We are aware that many organisations in London are working for the benefit of their local communities and helping to increase equity without considering themselves a part of – or perhaps even being aware of the existence of – the creative health sector.**

Often these projects work with, and are run by, marginalised groups. To gain an idea of the scale of the sector, we did our best to ensure that people working in economically deprived but culturally rich communities were involved in the research.

Our interlocutors confirmed our impression that there is a significant proportion of people from the global majority working in the creative health sector, who are often excluded from the mainstream and tend to opt out of research like ours through a combination of exhaustion and cynicism. Indeed, we reached out to people who had been recommended to us, and few consented to be interviewed. Those who did so revealed a rich seam of community arts, fertilised by the diaspora of other countries. As far as possible, we have represented this, and other forms of diversity, in the timelines of the sector's evolution and throughout this report.

In addition to formal interviews, we approached people to tell us about specific aspects of the creative health sector, from ACE, the National Academy for Social Prescribing (NASP) and London Plus, to NAHN and Southwark Culture Health and Wellbeing Partnership (SCHWeP). We also asked several people to review aspects of our findings. We are immensely grateful to everyone who took part in this research.

# FINDINGS



**In this chapter – which forms the body of the report – we present our main discoveries. We begin with the evolution of the creative health sector, from its beginnings in early 18th century London and its modern incarnation in the early 20th century right up to the present day.**

Grounded in health and care settings, the sector has grown in parallel with developments in community arts and cultural outreach. Below, we present a textual description of the sector's evolution, with local and national developments intertwined. This is complemented by two illustrations in which the local and national are separated.

The contemporary creative health sector is concentrated in health and care settings, in the community, in cultural

and heritage venues and at educational sites, and we consider each of these settings in turn and in detail. The case studies we present as part of the snapshot of current activity provide insights into the successes achieved and challenges faced by practitioners in various locations.

Having broadly located whereabouts in London creative health is happening, we focus attention on who is responsible for its delivery. We identify a workforce that is highly motivated and effective while also being over-stretched and on the brink of despondency. We reveal realities on the ground to be informed by wider public-sector funding strictures and a factor of the piecemeal way in which work is commissioned. We address this dismal picture in the reflections that follow these findings and make a series of recommendations aimed at fortifying the sector.



# EVOLUTION OF THE SECTOR

**Through a combination of interviews and historical research, we have sketched the evolution of the creative health sector in London. This did not happen in a vacuum, and it is noteworthy that several of the people we interviewed told us about events that had taken place in locations outside the capital. We also heard about the local impact of national policy and strategy, and we were given the impression that creative health had drifted into and out of fashion when priorities were being set.**

Studying the visualisation of the sector's evolution, it seems clear that the sector developed at different rates in different settings. Considering the more detailed information represented in the timelines (Appendix A), it is apparent that a range of champions drove the growth of the sector through their vision, passion and tireless work. In this section of the report, we highlight some of the landmark moments that we uncovered.

## **IN THE BEGINNING**

Following on from Hogarth's seminal work in the 18th century, community organisations founded in the 19th century, like the Harrow Club and Blackfriars Settlement, adopted a holistic approach to work with marginalised people, in West London and Southwark respectively. In the early 20th century, art found its way into hospitals in a more sustained way, through a committee for murals, founded by D S McColl and Charles Aitken in 1911, which particularly encouraged work by young artists.

Between 1947 and 1949, at the invitation of surgeon Norman Capener, Barbara Hepworth spent time producing sketches in London's operating theatres. In 1948, inspired by the work in military hospitals of the Entertainments National Services Association, ACE employee Sheila McCreery set up the Council for Music in Hospitals (now Music in Hospitals and Care). In 1959, Sheridan Russell, almoner at the National Hospital for Neurology and Neurosurgery, now part of University College London Hospital (UCLH), established Paintings in Hospitals and began to build a collection of artworks to brighten the capital's hospital walls.

**In 1975, the North wing of St Thomas' teaching hospital opened, which benefited from 0.1% of the construction budget having been allocated to the acquisition of more than 250 artworks.**

Funded by trustees, ACE and other benefactors, Naum Gabo, Robyn Denny and other leading artists of the day were commissioned to make site-specific works. A book, documenting the new wing, quotes the governors of the day saying that the 'Hospital is not only responsible for training minds but also for training characters. Any university fails when it neglects to create an environment in which its students can receive some measure of inspiration from being in a place where people are devoted to the pursuit

of the sciences and the arts for their own sake'.<sup>1</sup> The merged Guy's and St Thomas' Hospital Trust would go on to build an impressive and valuable collection of more than 4,500 artworks, dating back to the 1500s.

In the second half of the 1970s, Shape Arts (founded in 1976) began offering workshops in geriatric and psychiatric hospitals. At the end of the decade, the [King's Fund](#) established the Murals for Hospital Decoration scheme (later known as Art in Hospitals), to commission young artists to paint murals for London's NHS buildings. Spearheaded by Hugh Baron and Lesley Greene, jointly financed by the King's Fund and the Greater London Arts Association and administered by the Public Art Development Trust, this scheme gave rise to a spate of contextual artworks throughout the following decade. Many of the London hospitals that benefited from murals would go on to develop their own arts programmes, often a combination of commissions for their buildings and participatory work with patients and staff.

By 1983, sufficient momentum had been achieved for the King's Fund to host a [conference](#), entitled Art and the National Health Service, and to commission a series of six prints from the leading artists of the day, selected by critic Richard Cork, which were made available for hospitals to purchase for £950 per set. In December 1984, such developments motivated Richard Smith to write an editorial in the British Medical Journal calling for 0.5% of health budget to be diverted to the arts.

This era was also notable for creative health moving beyond hospitals and into the community.

<sup>1</sup> St Thomas' Hospital 1976, p. 5.

<sup>2</sup> George Nicholson, Introduction, *Campaign for a Popular Culture: A Record of Struggle and Achievement – the GLC's Community Arts Programme 1981–86* (London: GLC, 1986), p. 3.

**From the 1960s onwards, many of the arts organisations that developed in London were dedicated to improving the health, wellbeing and equity of their local communities.**

In 1963, the Arts Council's New Activities Committee began to consider proposals that fell outside the conventional art form categories.

Our timeline illustrates the explosion of community arts activity that occurred in the capital during the 1970s and 1980s. Almost invariably, these organisations were set up by artists to address social factors that we now understand to have an impact on health. Examples range from the early-1970s Free Form Arts, with a focus on community regeneration in Hackney, Spitalfields Music Festival (founded 1976), Portugal Prints (founded 1979) and Magic Me (founded 1989) to black-led organisations born in the 1980s, mentioned by our interviewees, such as Ujaama Arts, Heritage Ceramics, Adzido Dance Ensemble, Sakoba, Mahogany Carnival Arts, Zuriya Theatre Company and Roots Community (now 198 Contemporary Arts and Learning), which sprang from the Brixton uprisings as a platform for African-Caribbean and Asian artists.

**Creative health in the community, as it might now be known, was abetted by the existence of the Greater London Council (GLC)'s Arts and Recreation Committee (1981–6), and fuelled by a belief that 'there was an enormous reservoir of latent, untapped and frustrated talent amongst Londoners – all Londoners'.<sup>2</sup>**



In an early position statement, chair Tony Banks argued that the committee 'should bridge the gap between the arts and the people and should go about this by funding community based arts activities'.<sup>3</sup> The focus of the committee was on high-quality, culturally appropriate work across the full range of art forms. The arts budget was doubled to £18.5m by 1983, and more than 60% of this funding went into deprived areas, according to need, as either capital or revenue funding.

Among the 292 organisations and groups supported by the GLC's Arts and Recreation Committee were several making up the contemporary creative health landscape, including Age Exchange, the Albany, Apples and Snakes, Battersea Arts Centre, Chats Palace, Graeae Theatre Company, Half Moon Theatre Company, Hoxton Hall, Jacksons Lane, Live Music Now, Sadlers Wells and Spare Tyre.

In the cultural field, this period corresponded with a handful of organisations springing to life. The start of the 1980s saw the inception of the London International Festival of Theatre (LIFT) by Rose Fenton and Lucy Neal, and the end of the decade witnessed the birth of Tamasha Theatre Company and Sadlers Wells Company of Elders. Also in the 1980s, a handful of cultural organisations began to look beyond the delivery of high arts and pay attention to their local communities.

In 1984, Gillian Wolfe, a head of year at Greenwich Park Secondary School, was seconded to Dulwich Picture Gallery by the Inner London Education Authority, which sought to fortify links between schools and cultural organisations. Supported by socially conscious director [Giles Waterfield](#), Gillian set up a comprehensive social programme,

beginning with art for the unemployed and for school children, encompassing activities for young people on remand and in gangs and progressing to Good Times: Art for Older People, which [won](#) the 2011 RSPH arts and health award. Secondary school students were trained as young explainers to mediate art to the public, and Gillian told us many moving stories about the initial reluctance of local community members to engage being displaced by a lifelong passion for the arts. Health and wellbeing were never mentioned explicitly, but there was a clear understanding of the role of art in precipitating happiness and social mobility.

## MIDDLE YEARS

The 1990s saw a further upsurge of creative health activity in London. During the early part of the decade, the Chelsea and Westminster Hospital was constructed as an amalgamation of seven hospitals on the site of the 19th century St Stephen's Hospital. The hospitals had amassed a collection of some 600 contemporary artworks, perhaps most notably a 16th-century altarpiece by Paolo Veronese that was bought for the chapel of Westminster Hospital in 1951. Thanks to the vision of orthopaedic surgeon James Scott and his consultant colleagues Richard Staughton and Adam Lawrence, the new hospital, which opened in 1993, had an arts programme from the outset. Arts for Health (founded in Manchester in 1988) was commissioned to develop the programme and recommended the theme 'theatre for health', with patients and staff conceived as both actor and audience. Arts consultant Susan Loppert was brought in to oversee the commissioning of artworks within sensitively designed spaces and to continue building the collection, which

<sup>3</sup>Tony Banks, *Campaign for a Popular Culture*, p. 6.

now stands at more than 2,000 artworks.<sup>4</sup> In 1994, Natasha Freedman joined the team and developed a performing arts programme, which won a sizeable British Council award.

At the end of the 1980s, Hammersmith Hospital had set up an arts committee, working with volunteers to manage creative programmes. In 1994, Hammersmith Hospitals NHS Trust was formed from all hospitals in the borough. This led to the formation of a trust-wide arts committee, supported by an arts administrator and a retired Tate curator who together initiated the first temporary exhibition programme at the hospital and began cataloguing its works. This would eventually lead to the foundation of the Imperial College Healthcare Trust and to the Imperial College Healthcare Charity (now Imperial Health Charity).

In 1995, director/choreographer Suzy Willson and composer Paul Clark founded the company [Clod Ensemble](#). In parallel with their performance work, Suzy began to develop the [Performing Medicine](#) initiative with the Faculty of Medicine and Dentistry and the School of English and Drama at Queen Mary University of London (QMUL). Since then, the Performing Medicine team has consistently used performing arts techniques to provide training and support for medical students and healthcare professionals across London, the UK and internationally. Evolving out of the NHS at this time was [Rosetta Arts](#), a hub for creative learning in West Ham. Also in 1995, Shaun Caton began taking experimental arts into [Homerton Hospital](#).

In 1996, [Vital Arts](#) was founded at the Royal London Hospital by Barts Health NHS Trust, with creative producer Jane Willis at the helm and funding from the hospital charity. Now operating

across five hospitals in East London, the programme continues to combine commissions by well-known artists, working in close consultation with patients, as well as a staff choir and creative works that make visible the often-unseen and low-paid members of staff. Music has played a prominent part of the Vital Arts programme, not least through an extensive collaboration with Spitalfields Music. In the Royal London and Newham hospitals, musicians from the [London Symphony Orchestra](#) offer improvised sessions to patients from birth to end of life.

It was around this time that the [City of London Sinfonia](#), a chamber orchestra founded in 1971, began working in health and care settings, and [Akademi](#) (founded in 1979) began to take South Asian dance into hospitals, through its [Dance Well](#) programme, playing a significant part in the development of performing arts in hospitals and community settings.

In the same year as Vital Arts was founded, Network Arts was piloted with South London and Maudsley NHS Foundation Trust (SLaM). With start-up funding from the Maudsley Charity, the organisation would become [Arts Network](#), accepting referrals, mainly from secondary care, of people suffering from severe mental illness in South East London. People finding their way to the charity are offered an initial taster session to think about how they would like to explore their creative practice, with the option of becoming long-term members of a multidisciplinary arts and crafts community.

In 1997, the [Bethlem Gallery](#) was set up at Bethlem Royal Hospital in Beckenham, working across South East London to lead change in health and society through the visual arts. In the same year,

<sup>4</sup> *The Healing Arts: The Arts Project at Chelsea and Westminster Hospital* (London: Unicorn, 2019).

a church whose vicar, Andrew (now Lord) Mawson, had overseen its development into a community hub, became the country's first healthy living centre. [Bromley by Bow Centre](#) has continued to nurture and celebrate the culture of the surrounding ethnically diverse, working-class communities, on the understanding that societal inequities determine whose culture is valorised. In the early days,

**GPs in the Bromley by Bow Centre would refer patients to creative activities by walking them to other parts of the building; eventually, a link worker role developed.**

This set a precedent for what we now think of as social prescribing, which is discussed in greater detail below.

Also in 1997, Lucinda Jarrett set up [Rosetta Life](#). Among their early projects was Lifestories, which involved setting up digital arts centres in several London hospices, alongside artists in residence who enabled residents to share their stories digitally. The following year, Dr Nick Rhodes set up the [Nightingale Project](#) at South Kensington and Chelsea Mental Health Centre, staging temporary exhibitions and commissioning permanent displays, entering into an enduring [collaboration](#) with Quentin Blake and extending its work across London.

In 1998, Guy's and St Thomas' became one of the first of London's hospitals to have an arts coordinator in the form of Karen Sarkissian, later joined by performing arts manager Yvonne Farquarson (2008–12), who would develop Breathe Arts Health Research.

The 1990s were also notable for a series of national developments that impacted on London. In 1993, the Wellcome Trust hosted a seminar on arts and health; a series of publications was produced, centred on arts in hospitals; a meeting to discuss this phenomenon was convened by chief medical officer Sir Kenneth Calman and attended by health minister Gerry Malone; London Arts Board developed a partnership strategy for the arts and health sectors called the Art of Wellbeing; and Clean Break Theatre Company commissioned François Matarasso to write *Use or Ornament?* which explored the social value of the arts. Perhaps the most significant developments came at the end of the decade, in the form of a report on the arts and sport by the Department for Culture, Media and Sport (DCMS), Policy Action Team 10 (known as PAT 10) to the Social Exclusion Unit and two conferences funded by the Nuffield Trust – styled as Windsor I and II – which laid the foundations of a strategy to 'promote the arts from the margins into the very heart of healthcare planning, policy-making and practice'.<sup>5</sup> The decade concluded with the Culture, Health and the Arts, World Symposium (CHARTS) in Manchester to which several of our interviewees referred.

In the community, new organisations appeared in London throughout the decade that referenced health as part of their creative work. These ranged from [Core Arts](#) and [Sound Minds](#) (both founded in 1992 to tackle mental health problems) to [Outside Edge Theatre Company](#) (working with people affected by substance misuse since 1999). Also in 1999, four men with first-hand experience of using mental health services – Mark Roberts, Simon Barnett, Robert Dellar and Pete Shaughnessy – set up [Mad Pride](#), which sought to raise

<sup>5</sup> Robin Philipp, Michael Baum, Andrew Mawson and Kenneth Calman, *Beyond the Millennium: A summary of the proceedings of the first Windsor Conference* (London: The Nuffield Trust, 1999) p. 8.

the profile of mental illness through creative public manifestations. At the turn of the millennium, the capital's creative health sector was consolidated by the foundation of London Arts in Health Forum (LAHF), now known as London Arts and Health (LAH), as a sector-support organisation.

In the 21st century, creative health has continued to grow apace, beginning with a flourish in the form of a King's Fund millennium project known as Enhancing the Healing Environment. Directed by Sarah Waller, the project involved 48 London NHS trusts in its first phase and was undertaken in collaboration with the Commission for Architecture and the Built Environment (CABE), which was active in this space together with the Royal Institute for British Architects (RIBA). Increased attention to the built environment of healthcare – precipitated by the foundation in 1992 of Architects for Health – would lead Evelina Children's Hospital to be [shortlisted](#) for a RIBA Stirling Prize in 2006.

The King's Fund was also instrumental in scoping and setting up a National Network for Arts and Health, which ran for six years (2000–6). During its period of operation, the [network](#) began to define the field; 'learned that understanding and appreciating government department agendas fully is vital for the future'; identified that a 'lack of financial resources is perhaps the single largest threat to the field' and made a case for developing the evidence base.

Alongside the King's Fund, another important funder was the Wellcome Trust, which supported creative health work, including the development of strategy, and acquired the archives of several creative health organisations

in Greater Manchester as part of a wider creative health collection. Their Sustaining Excellence programme would provide arts organisations – including Clod Ensemble, Fevered Sleep and Fuel – with significant funding to develop collaborations across arts, health and biomedical science.

In 2000, the Mental Health Community Theatre Company was created at Arcola Theatre, and Abundance Arts was set up by singer/songwriter Folasade Babarinde. In October of the same year, the London Arts Board and Tate Modern hosted the first London regional conference of the inspired arts movement (i am, previously the Arts in Mental Health Forum). This event, known as 'i am London', had been proposed by community arts organisations working with mental health – including the Bethlem Gallery, Studio Upstairs and Survivors' Poetry – and it enabled a wide-ranging discussion of the arts and mental health.

**Also in the early years of the new millennium, Dr Roy Macgregor, senior partner at the James Wigg Practice within the [Kentish Town Health Centre](#) (founded 1973) inspired the creation of a purpose-built health centre 'where not only medicine, but health and art come together for the community'.**

The centre houses a studio with a sprung floor, an exhibition space and a garden, and it became home to an arts and wellbeing charity initially called the [Free Space Project](#).

In 2002, Victoria Hume moved from Chelsea and Westminster Hospital to Royal Brompton and Harefield hospitals to establish an arts programme now known as [rb&hArts](#), inspired by the success of Enhancing the Healing Environment.

In 2003, Sarah Wheeler, who experienced severe mental health problems throughout her life, founded the creative group [Mental Fight Club](#), which would go on to collaborate with Tate Britain and give rise to the Dragon Café in Southwark offering creative drop-in sessions every Monday.

In 2005, UCLH established [Arts and Heritage](#), headed by curator Guy Noble, who had earlier set up the arts programme at Addenbrookes Hospital in Cambridge. The following year, Great Ormond Street Hospital (GOSH) set up [GOSH Arts](#), which began to develop a collection, a programme of temporary exhibitions and participatory work for patients, families and staff.

Also in 2005, a group of arts organisations working with mental health in the community – including CoolTan, Mad Pride, Portugal Prints, Core Arts and the Bethlem Gallery – set up a network called Creative Minds: London Arts and Mental Health Forum. One of the member organisations – [Creative Routes](#), set up by creative thinker Sarah GemTonin for people with lived experience of the mental health system – would stage the first of three iterations of [Bonkersfest](#), an arts festival on Camberwell Green in 2006.

**The same year, Jude Kelly was appointed artistic director of the Southbank Centre, bringing with her a [vision](#) of 'health, education and arts as sacrosanct', which saw the Festival of Britain site being opened up to the people.**

**Also in the new millennium, creative health work became more widespread in the cultural and heritage sector, often growing out of education, access and participation programmes.**

As part of Enhancing the Healing Environment, the King's Fund partnered with Tate Modern, where Liz Ellis – a trained artist, educator and former mental health nurse with a rights-based approach to the arts – worked with large cohorts of nurses, patients and estates managers to find creative solutions to grim health and care environments.

Tate Modern also built relationships with local Sure Start centres and libraries, offering free access to resources. The institution also partnered with Helen Shearn at Southwark Directory, to bring SLaM patients to the gallery for participatory activities and to stage an arts and mental health showcase and conferences in 2004 and 2005. As head of arts strategy at the Maudsley Hospital (2013–17), Helen would go on to develop the [Journeys of Appreciation](#) programme, funded by the Maudsley Charity, with Tate, Dulwich Picture Gallery, Horniman Museum, Museum of the Mind and South London Gallery, which encouraged dementia in-patients to visit galleries and museums and take part in creative workshops.

At this time, ACE benefited from a team of people who understood the health and wellbeing value of the arts, which included Pauline Tambling, Karen Drezdic (now Taylor), Nikki Crane (who headed up the arts and social inclusion unit) and Meli Hatzihrysidis. This led to Rosalia Staricoff being commissioned by ACE to conduct a [review](#) of the medical literature pertaining to the arts in health, published in August 2004.

In 2005–6, the sector suffered a setback. In August 2005, the *Sun* featured the headline 'Taking the Picasso', which derided money being spent on hospital arts commissions, in particular a granite sculpture outside UCLH, with the *Daily Mail* amplifying the outrage. In January 2006, the right-wing think tank Policy Exchange published *Culture Vultures*, a collection of essays, which asked rhetorically 'is UK arts policy damaging the arts?'. Editor Munira Mirza [wrote](#) that the 'expansion of "arts in health" activity has led to a confusing and almost misleading impression that the arts in general are good for our health, and that they should be supported on this basis'.

**The sector rallied, with National Director for Patients and the Public at the NHS Harry Cayton setting up an Arts and Health Working Group to explore the role of the Department of Health (DoH) in promoting creative health.**

The group met for the first time in September 2005 and [reported](#) in April 2007, recommending that the department 'should make a clear statement on the value of arts and health, build partnerships and publish a Prospectus for arts in health in collaboration with other key contributors'. This led to a collaboration between DoH and ACE on *A Prospectus for Arts & Health*, published later in 2007, which provided a roadmap for joint working between health and the arts.

The following March, Lord Howarth of Newport – the parliamentarian who has done most to advance creative health in the UK – [asked](#) the government how it intended to develop policies to link the arts with healthcare. Also in 2008, the Royal

Society for Public Health (RSPH) initiated a series of health and wellbeing awards with arts and health as a distinct category.

In 2011, [Kazzum Arts](#) (founded in 1989) began offering creative activities to children susceptible to trauma through spending time on hospital wards. In 2012, the year of the London Olympiad, LAHF initiated Creativity and Wellbeing Week, and the National Alliance for Arts Health and Wellbeing (NAAHW) was formed, following a sustained period of scoping, with LAHF director Damian Hebron as the representative for London. In the same year, an evaluation was published of [Be Creative Be Well](#) – managed by ACE as part of Well London, a £9.5m Big Lottery Fund project – which foregrounded the contribution of the arts to the New Economic Foundation's [Five Ways to Wellbeing](#) in deprived communities. In 2013, Lord Howarth co-founded the All-Party Parliamentary Group on Arts, Health and Wellbeing (APPGAHW).

## RECENT YEARS

The past decade has seen creative health activity diversifying across London.

**In 2015, [Healing Justice London](#) began as a collaboration by women of colour using creative approaches to centre marginalised people, advocating for structural change within health systems and supporting lived-experience leaders to shape change.**

In the same year, artist Daniel Regan set up Arts & Health Hub CIC to support artist-facilitators working in the creative health sector. The following year, curator and filmmaker Ashley Joiner set up

Queercircle in Greenwich to champion LGBTQ+ artists. Also in 2016, Guy's and St Thomas' NHS Foundation Trust appointed as head of arts Liz O'Sullivan, who had previously set up Platform for Art (now Art on the Underground).

In 2017, the APPGAHW published the results of a two-year inquiry involving more than 300 people working in the sector. [Creative Health: The Arts for Health and Wellbeing](#) was researched and drafted by the author of this report and launched in Parliament. Several of the people we interviewed pointed to this as a pivotal moment in the evolution of the sector, making the case at a parliamentary level for the health and wellbeing benefits of creativity, culture and heritage. Evaluating the first six months of creative health work at Queercircle, the report [Queering Creative Health](#) rectifies the omission of LGBTQ+ communities from the Creative Health report.

The year after *Creative Health* was published, the Culture, Health and Wellbeing Alliance (CHWA) was formed as a merger of NAAHW and the National Alliance for Museums, Health and Wellbeing (NAMHW, founded in 2015). In 2020, LAH and the GLA came together with ACE to convene London Action for Creative Health (LACH). This stakeholder group was [inaugurated](#) 'initially as a way to improve communication and sharing of information, ideas and best practice on a pan London arts and health basis'. In 2021, LAH and CHWA began to collaborate on Creativity and Wellbeing Week, expanding it into a national festival.

Also in 2021, the National Centre for Creative Health (NCCH) was formed, in response to the first recommendation of the *Creative Health* report, and the GLA instigated a three-year project with Thrive LDN, funded by the Baring Foundation,

called [Thriving Through Culture](#), exploring how culture supports the mental health of children and young people in the capital. In the same year, University College London (UCL) began offering a [Masters in Arts and Sciences](#) (MASc) in Creative Health, convened by Professor Helen Chatterjee and Dr Thomas Kador.

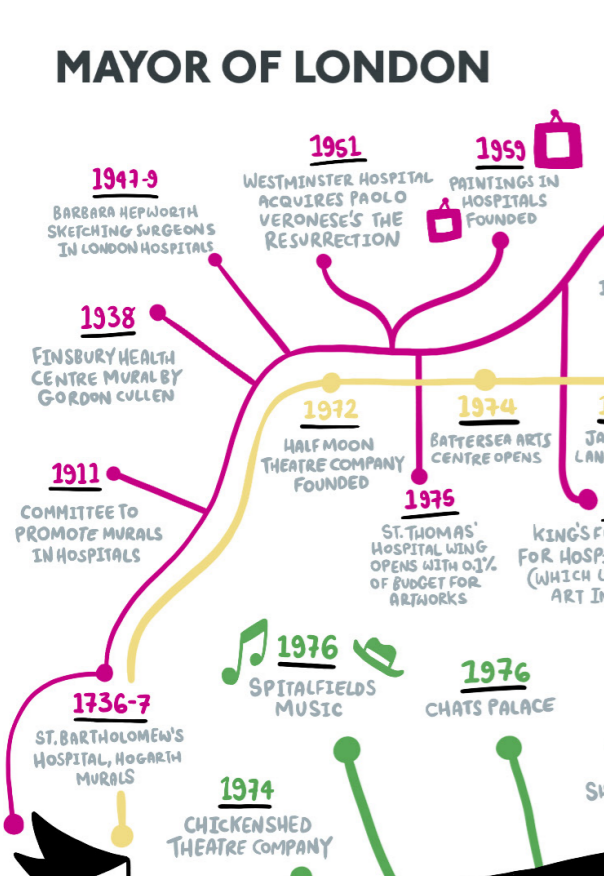
At the end of 2022, Greater Manchester Integrated Care Partnership published the [Greater Manchester Creative Health Strategy](#), written by the author of this report, building on the work of Professor Clive Parkinson.

**In 2023, Frances Williams of Queercircle published a historiography of the sector called [When Was Arts in Health?](#)**

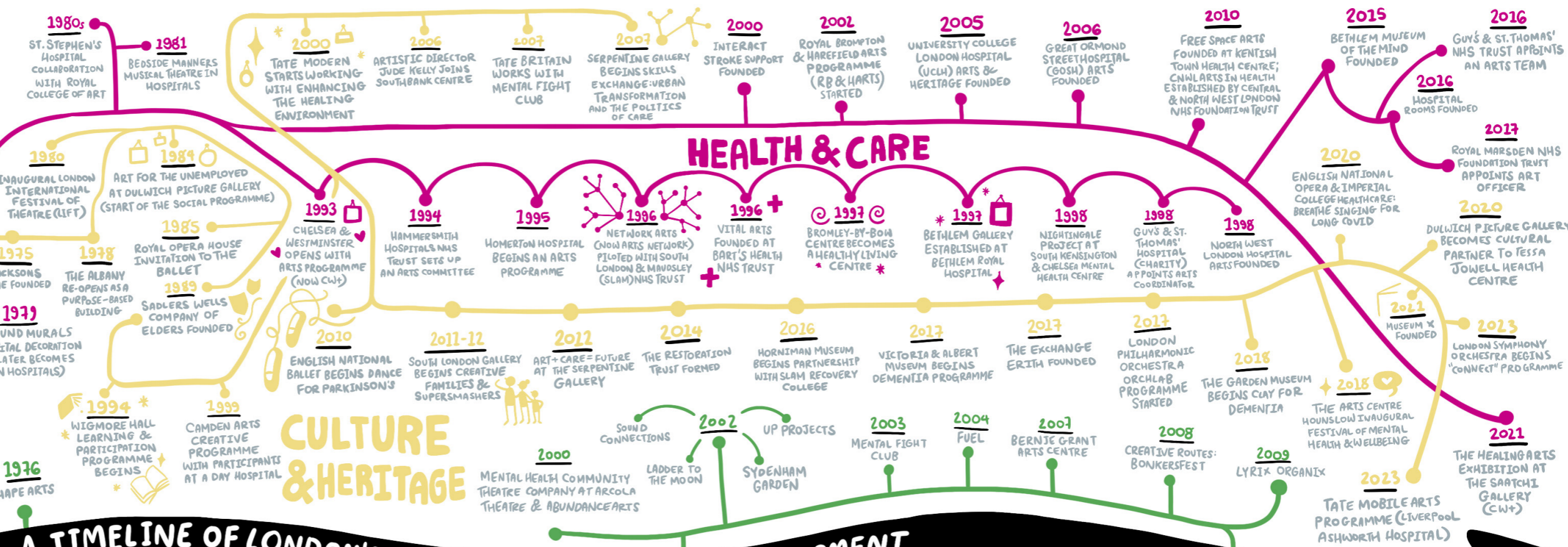
In the same year, ACE funded NCCH to appoint a creative health associate in each of the seven NHS regions, one of which was based in London – within North East London Integrated Care System (ICS), and the GLA collaborated with South East London ICS and the six constituent boroughs to install a creative health lead there. The creative health associate role is supported by £5,000 of Baring Foundation funding to facilitate the sharing of lived experience of mental health.

At the end of 2023, NCCH and the APPGAHW published a review of five years of progress since the *Creative Health* report. Based on the work of a commission of experts and drafted by NCCH Research and Policy Manager Hannah Waterson, [Creative Health Review: How Policy Can Embrace Creative Health](#) made a series of recommendations to national and local government to inform future work in the sector.

# MAYOR OF LONDON



# HEALTH & CARE

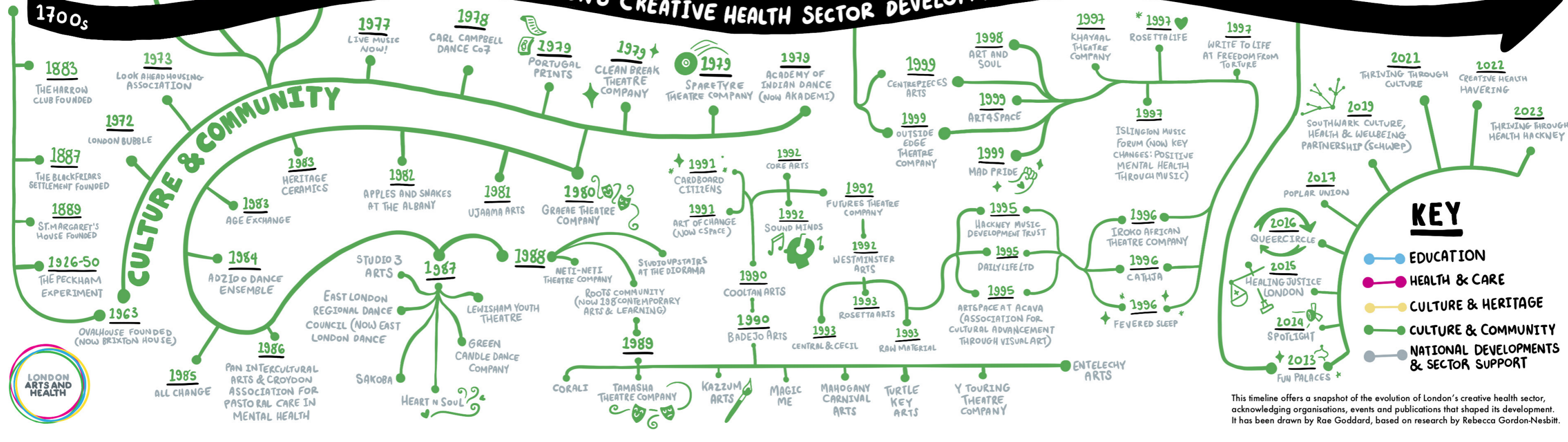


# CULTURE & HERITAGE



# A TIMELINE OF LONDON'S CREATIVE HEALTH SECTOR DEVELOPMENT

# CULTURE & COMMUNITY

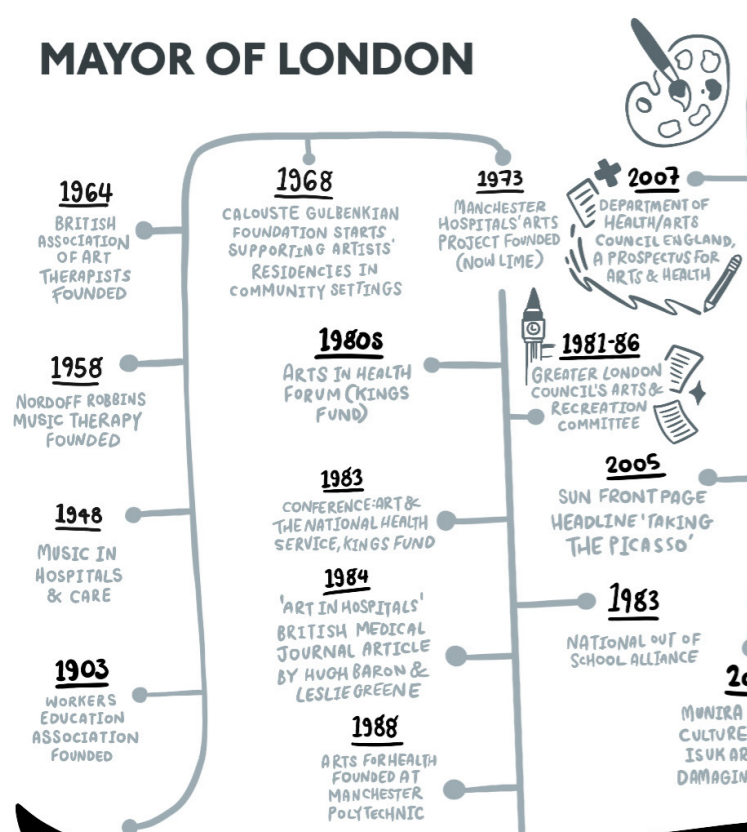


This timeline offers a snapshot of the evolution of London's creative health sector, acknowledging organisations, events and publications that shaped its development. It has been drawn by Rae Goddard, based on research by Rebecca Gordon-Nesbitt.

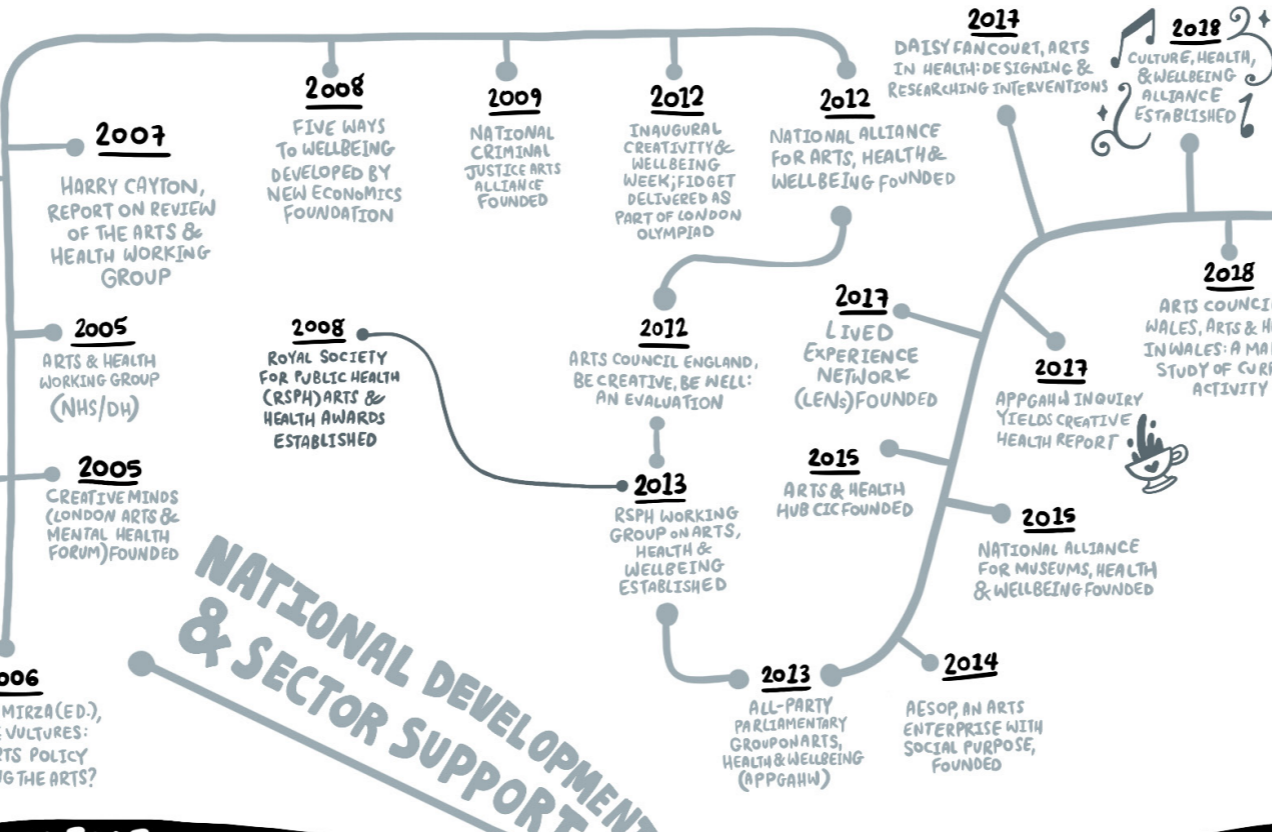




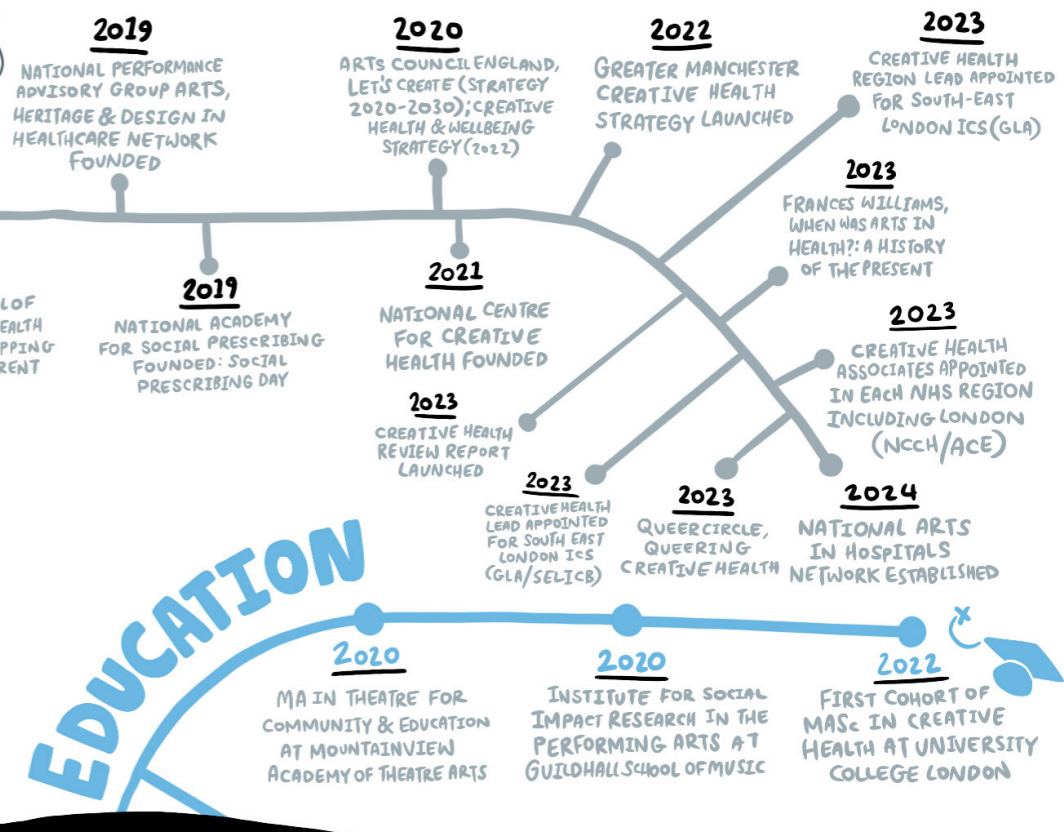
# MAYOR OF LONDON



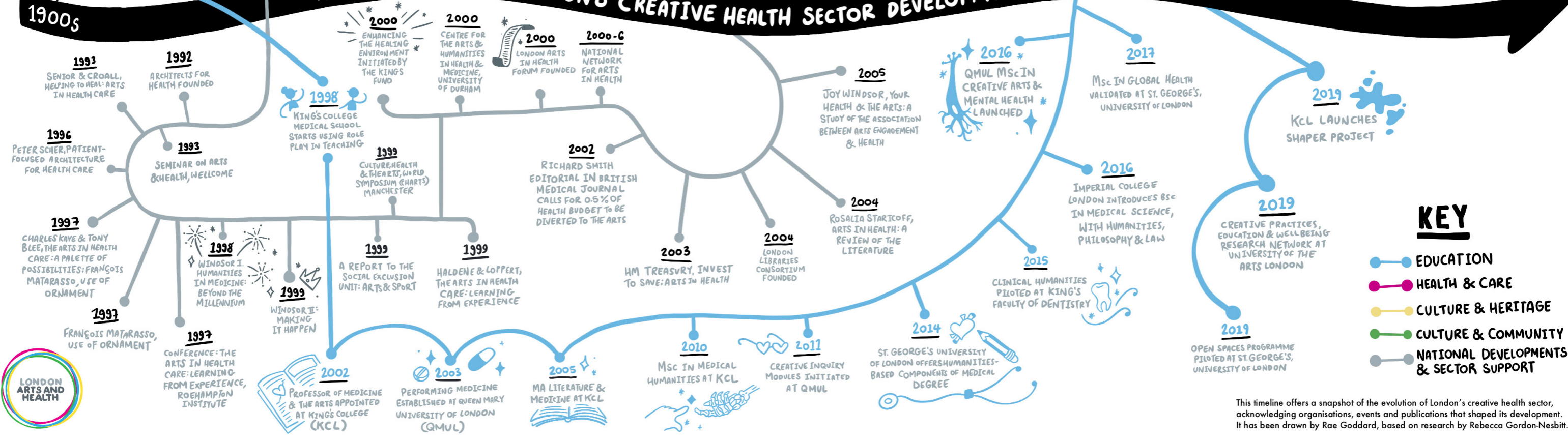
# NATIONAL DEVELOPMENTS & SECTOR SUPPORT



# EDUCATION



# A TIMELINE OF LONDON'S CREATIVE HEALTH SECTOR DEVELOPMENT



## KEY

- EDUCATION
- HEALTH & CARE
- CULTURE & HERITAGE
- CULTURE & COMMUNITY
- NATIONAL DEVELOPMENTS & SECTOR SUPPORT

This timeline offers a snapshot of the evolution of London's creative health sector, acknowledging organisations, events and publications that shaped its development. It has been drawn by Rae Goddard, based on research by Rebecca Gordon-Nesbitt.

# OVERVIEW OF SETTINGS

**During the course of our research, we found London's creative health activity to be concentrated in certain sub-sectors:**

- Health and care settings
- Community settings
- Cultural and heritage settings
- Educational settings

These categories are by no means fixed, with many community arts organisations, for example, becoming part of ACE's national portfolio of cultural organisations. In turn, some community-based organisations, such as [Lyrix Organix](#), offer participatory activities in health and care or cultural and heritage settings. To some extent, this is symptomatic of health, care, cultural and heritage institutions not being connected to appropriately trained practitioners and preferring instead to work with organisations with a track record. Also in London, [dementia-friendly venues](#) offering arts activities span cultural and leisure sites, health buildings and community organisations.

**The executive director of CHWA, Victoria Hume, told us that creative health in hospital settings was becoming increasingly robust, with approximately 100 arts coordinators around the country, many integrated into the NHS workforce.**

Work in this setting is being fortified by the inception of [NAHN](#), hosted by NHS

Charities Together, which evolved from the National Performance Advisory Group's Arts, Heritage and Design in Healthcare Network (founded in 2019) and formally launched in 2024. The [aim of the network](#) is 'for every hospital in the UK to engage their staff and patients through the arts to promote health and wellbeing'. NAHN co-chair Laura Waters told us that approximately 15 of the UK's 100 hospital arts coordinators were based in London.

**Creative health in London's communities is equally strong, with scores of organisations reconciling the arts with health and wellbeing and ACE increasingly thinking in terms of community wellbeing.**

Reports published by the former National Alliance for Museums, Health and Wellbeing (NAMHW) in [2016](#) and [2018](#) identified 53 museums in London engaging in creative health activities. Among them were a skills-exchange project by the Serpentine Gallery, operating across several boroughs; Gardener's Lodge Art Group, involving the Wallace Collection and the V&A; a museums-on-prescription programme for socially isolated older adults with the British Museum, British Postal Museum and Archive and Islington Museum and Archives; work by the National Portrait Gallery in clinical settings; Creative Families, run by the South London

Gallery and SLaM; Singing for the Brain, run by Epping Forest and City of London Corporation; a volunteer project at the Museum of London for people with mental health problems; and a collaboration between mental health and dementia services and the Cinema Museum, Dulwich Picture Gallery, Horniman Museum and Gardens, Tate Modern and Tate Britain. In 2017, UCL and Canterbury Christ Church University [won](#) the RSPH arts and health award for their museums-on-prescription programme.

We were given the impression that the cultural and heritage subsector was slightly less well developed than those in health/care and the community. Among people who have been working in the creative health sector for some time, there seems to exist a little caution about large cultural and heritage institutions entering the sector, reinventing the wheel and subsuming funding, but this is waning a little as ACE support for creative health is bedding in.

When it comes to educational settings, a 2007 mapping exercise, commissioned by ACE and the London Centre for Arts

and Cultural Enterprise, [identified](#) 29 collaborations between higher education and creative health in London. Among them were a singing for breathing project for young asthmatics led by King's College London in Lambeth, Southwark and Lewisham; a digital artwork encouraging walking to tackle obesity led by Middlesex University; and a critical reflection on cognitive behavioural therapy by performance artist Bobby Baker working with a clinical psychologist at Queen Mary's Hospital.

In 2023 the GLA commissioned LAH to undertake research into creative health networks active in London, which became known as Mapping the Mappers. The research unearthed many of the networks discussed in this report as well as anchor networks such as Arts and Health Alliance Ealing and seed networks including Arts Network Sutton. More generally, something of a cold spot for creative health networks was identified in the west of London. This is being compensated for by several organisations and projects, some of which are mentioned below.





# SNAPSHOT OF CURRENT ACTIVITY

**Victoria Hume told us that CHWA has around 6,500 members and estimated that between 10,000 and 20,000 people work in creative health across the UK. As people are concentrated by geography, Victoria expected that approximately half the creative health workforce (5,000–10,000) would be based in London.**

This estimate largely excludes people working in community arts organisations, meaning that the total is likely to be higher. Indeed, LAH reaches more than 30,000 people through its social media and e-newsletter. In this section, we look in a little more detail at creative health activity in each portion of the sector.

## HEALTH AND CARE SETTINGS

### Integrated Care Systems

The NHS has recently been divided into 42 integrated care systems (ICSs), each of which is responsible for rethinking the ways in which health is delivered in their area, including taking account of community assets that help to keep the local population healthy. London is split across *five ICSs*, each run by an integrated care board (ICB). Thanks to the aforementioned schemes, run by the NCCH/ACE and the GLA, South East London ICS and local boroughs, the capital benefits from a creative health associate in one ICS and a creative health lead in another. Conni Rosewarne works four days a week within North East London Integrated Care Board (NELICB), employed by the NCCH and funded by ACE, while Flora Faith-Kelly, working three days a week within South East London Integrated Care System (SELICS), is employed by the

ICS and jointly funded with the GLA and London boroughs of Greenwich, Lambeth, Lewisham and Southwark.

With seed funding from the UCL East Engagement team, two academics – Stacy Hackner and Thomas Kador – have scoped the co-production of a Creative Health Manifesto for East London, centred on Hackney, Newham and Tower Hamlets, which is informing work in NELICB. Working within the Health Inclusion and Improvement team, Conni Rosewarne has been mapping creative health organisations and projects across the ICB area, through interviews and network meetings, as well as collating existing mapping undertaken by the GLA, LAH and ACE and identifying funding sources, including local authorities, trusts and foundations.

**Mapping has revealed a highly skilled and knowledgeable creative health sector working to increase equity in North East London.**

Conni has also been introducing clinicians to creative health work appropriate to their areas of expertise, as well as presenting the value of this work to the chief medical officers in all five of the capital's ICBs and the London Clinical Executive Group. Building on the partnership with UCL, an ICB-wide creative health strategy is being discussed alongside plans to amplify awareness of creative health. Thought is also being given by ACE and the ICB

to ways in which the creative health associate role could be continued beyond October 2024.

In SELICS, Flora Faith-Kelly sits within the personalised care team, which is likely to be integrated into core work under a cost-reduction process currently underway.

**Despite this uncertainty, staff within the ICS, primary care networks and local authorities' public health and culture departments, as well as social prescribers, have been receptive to creative health.**

Rather than having to make the case anew, Flora is helping teams to embed and scale work, with both Lewisham and Lambeth poised to include creative health in their cultural strategies. Where boroughs have less capacity for developing creative health, Flora is working with grassroots organisations, and SCHWeP is helping to extend the benefits of creative health beyond the usual demographics. It is hoped that the creative health agenda will be sustained in South East London beyond Flora's 18-month contract, which might involve forming a network of people working in all aspects of the sector. Rebel Led Training and Consultancy CIC have been appointed by the GLA to evaluate progress and share thoughts for future development.

**The GLA and ACE are exploring the potential of expanding these pilot programmes so that each ICS in London has an embedded creative health role.**

## Hospital Settings

As we have already seen, exemplary work is taking place in London's hospitals. All of the initiatives mentioned in the Evolution of the Sector section, and more besides, continue to thrive.

The art programme at Guy's and St Thomas' NHS Foundation Trust makes thoughtful use of its impressive art collection, commissions artists to work in situ and offers performative and participatory experiences at different locations including specialist wards, Evelina Children's Hospital and the Florence Nightingale Garden.

**As part of an integrated approach, artists are invited to work with architects and others involved in the construction and renovation of parts of the hospital complex.**

In February 2021, Guy's and St Thomas' merged with Royal Brompton and Harefield hospitals, and both arts teams now operate under the umbrella of Essentia Arts.

At Royal Brompton and Harefield, rb&hArts works across three strands. From the outset, the participatory programme Singing for Breathing has been running at both sites of this specialist heart and lung hospital trust, inspiring the [British Lung Foundation](#) to train hundreds of singing leaders. This is complemented by environmental work such as music on the wards (in collaboration with Live Music Now!), visual arts commissions, a wellbeing programme and responsive work with patients, visitors and staff. The third

strand of the programme has been designed for young patients (0–25 years) facing an array of complex health challenges and/or life-limiting conditions – including congenital heart disease and cystic fibrosis – often involving extensive treatment regimes. Vocal Beats is a singing, music-making and beatboxing project, delivered by professional vocalists and beatboxers. With a flexible design, it offers personalised creative music engagement for young musicians during their stay and was a [finalist](#) in the 2019 RSPH arts and health awards. The programme has been [extended](#) into the Royal Marsden NHS Trust and into a post-treatment programme.

GOSH Arts combines commissioning and participatory work with clinicians, patients and families. Resident artists offer weekly workshops, and young people have been involved in co-producing spaces within the hospital such as the Children and Adolescent Mental Health Service (CAMHS). Creative organisations are invited into the hospital to engage with patients, such as [Second Hand Dance](#), whose improvised, interactive early-years work gently encourages dancing, play and touch. GOSH also hosts a young people's forum, which has worked imaginatively with organisations like [Little Angel Theatre](#) to develop a show that evokes a magical world beyond the clinical walls and has toured to other paediatric hospitals around the country.

**Hospital arts programmes continue to spring up across the capital.**

In 2016, [Hospital Rooms](#) was set up to enliven mental hospitals with artistic commissions. This has diversified into a [Digital Art School](#), complemented by free, high-quality art boxes sent to every mental health trust in England.

In South West London in 2017, the [Royal Marsden NHS Foundation Trust](#) appointed as art officer sociology, psychology and nursing graduate Ben Hartley, who is developing a programme for cancer patients that draws on his postgraduate study of creative health. In 2023, [Kingston Hospital Foundation Trust](#) followed suit with a gallery in a corridor between two hospital wings that is programmed by health and wellbeing chaplain Steve Summers and his team.

Allied to Central and North West London NHS Foundation Trust is [CNWL Arts in Health](#), which offers a programme of creative and cultural activities to support adult mental health. This includes in-person and online studio time, visits to galleries and museums and a 'community table' at which activities are co-produced using arts-based methods.

Paintings in Hospitals is still going strong, with a collection of 3,500 works of art, purchased by a committee on the basis of their contribution to health and wellbeing. The organisation operates an extensive loans programme, with exhibitions in GP surgeries, hospitals, care homes and hospices, co-curated with host organisations, patients and staff. Director and chief executive Sandra Bruce-Gordon relayed that artworks cost £150 to loan, and the largest showcase of work remains UCLH, complementing the Arts and Heritage programmes.

## CASE STUDY

### Artist working in health/care setting (commission)

**Contractual arrangement:** Freelance

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**Successes:** Repurposing a dementia unit into a mother and baby unit, with eight en-suite bedrooms and a tiny budget, which involved consulting with mothers, decorating every room, as well as a treatment room and shiny yellow-painted corridor, pulling in favours to design and plant a garden and to have work fabricated.

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**Challenges:** Humanising badly designed environments, often littered with public-information signage and poor lighting.

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**Artists coming into the sector need to know:** More about the practicalities involved, including how to build relationships with clinicians and patients, which materials and fabricators to use, what to do about insurance and intellectual property and how to manage projects and budgets.

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**What would help:** Less experienced artists shadowing more experienced artists.

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## CASE STUDY

### Artist working in health/care setting (participatory work)

**Contractual arrangement:** Freelance

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**Successes:** Using art to delve deep into people's past and childhoods and work through stuff, but also doing creative work as an artist, as a way to stabilise and calm the nervous system.

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**Challenges:** The strain of being a sole facilitator and being expected to hold the trauma of the group for the period of a session with little training or support.

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**Artists coming into the sector need to know:** The skills needed to facilitate workshops, as well as safeguarding information and what to do in cases where the safeguarding threshold is not met.

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**What would help:** Joint facilitation, more opportunities for peer supervision and reflective practice, perhaps especially in the area of children and young people's mental health, and a minimum standard payment of one day to cover preparation, travelling and recovery time, with a London weighting added.

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## Primary Care

Social prescribing is [defined](#) as a 'means for trusted individuals in clinical and community settings to identify that a person has non-medical, health-related social needs and to subsequently connect them to non-clinical supports and services within the community by co-producing a social prescription – a non-medical prescription, to improve health and well-being and to strengthen community connections'. As Suzy Willson from Clod Ensemble noted in interview,

**social prescribing 'draws on a long history of unrecognised practice' within the creative health sector.**

Since 2019, primary care networks (PCNs) have been able to apply for funding via the NHS [Additional Roles Reimbursement Scheme](#) (ARRS) to cover the salary costs of someone who 'Connects people to non-medical community-based activities, groups and services that meet practical, social and emotional needs, including specialist advice services and the arts, physical activity and nature'. This role is variously described as a link worker, community navigator or social prescriber and includes scope for clinical- or self-referral. Use of ARRS funding for this purpose is discretionary, and the more deprived and diverse areas of London [report](#) fewer people being employed to mediate social prescribing, potentially denying them of health improvements.

Leading thought development and advocacy in the field, NASP recognises London as an area where intense activity is happening. NASP told us there are 3,400 link workers across England. While

they do not hold data about how many of these are based in London, they indicated that five of the 30 active members of their link worker advisory group are in the London region.

**Sometimes called cultural social prescribing, creative health work within primary care tends to be either targeted at a particular health complaint or age group or involve more universal creative health pursuits.**

NASP has developed an [evidence briefing](#) for arts, culture and heritage.

The former National Lead for Arts and Culture at NASP, Tola Dabiri, told us that organisations offering creative and cultural activities for health and wellbeing often expressed frustration that patients are not being referred to them. Dan Hopewell at Bromley by Bow Centre observed that this is because people are arriving at their doctors' surgeries with acute needs relating to housing, debt, employment rights, welfare or immigration status, added to which they might find cultural activities intimidating. As an antidote, he suggested:

*We need to site cultural and creative activities within the heart of communities, and we need to normalise access to them by weaving cultural activities into the daily happenings of the community. So that it's not seen as something that other people do, but it's seen as something that people like us do, and that neighbours feel comfortable, because when they arrive at the art activity, it's full of other people who live on their*

*same housing estate, who are doing art with them. And it's run by a tutor who's very skilled at making art feel accessible to people who may have never done it before, certainly in their adult lives.*

This suggests a need for organisations to take activities into communities rather than expecting community members to come to them.

In 2018, Free Space Project at Kentish Town Health Centre changed its name to [Creative Health Camden](#). Workshops in drawing, singing, dancing and gardening are offered to Camden residents, sometimes targeted at particular communities – like the [Social Shapla](#) art group for Bangladeshi women. There is a close relationship between the charity and the 12 full-time GPs making up the practice, with doctors and clinical advocates serving as trustees. Creative Health Camden is represented at weekly clinical meetings, to remind doctors to refer their patients to the creative activities on offer in the building, as well as offering quarterly creative taster sessions to clinical staff. As social prescribers, charity staff have access to patient records, which aids safeguarding and enables information-sharing and follow-up.

Tipping the balance in favour of creative activities, [Spotlight](#) (founded in 2014) supports 4,000 young people per year aged 11–19 (25 for those with additional needs). The organisation operates across five sites in Tower Hamlets, the London borough with the highest level of child poverty, and its workforce is representative of the area it serves. The flagship centre at Langdon Park was co-designed with young people and offers industry-standard facilities in dance, drama, music, art and fashion, with sessions run by the team and in collaboration with such organisations

as the Victoria and Albert Museum (V&A) and London College of Fashion. The purpose-built hub also houses [HealthSpot](#), a welcoming GP clinic run by Dr Helen Jones and her colleagues, offering support with physical, mental and sexual health, addiction and trauma. GPs and youth workers mediate health appointments, and young people can refer themselves. Other GPs in Tower Hamlets and beyond, as well as clinicians from the Royal London Hospital, refer their patients to Spotlight's creative activities.

Between October 2019 and March 2023, ACE ran a £1.8m programme called [Thriving Communities](#) with NASP. Organisations were able to apply to the [Thriving Communities Fund](#) for 'arts and culture, including libraries, museums and heritage', and five of the 35 funded projects were in London. London Plus – which runs the [London Social Prescribing Network](#) – partnered with [councils for voluntary services](#) in each of the capital's five ICS areas to support the voluntary, community, faith and social enterprise (VCFSE) sector to engage with social prescribing. Among other things, this saw young people in [Greenwich](#) engaging creatively during the COVID-19 pandemic and networks being built in [Haringey](#) and [Tower Hamlets](#) to enhance social prescribers' awareness of the creative health activities on their doorstep.

As part of this programme, the [Health Tree](#) was established as a creative health network at St Margaret's House in Bethnal Green (founded in 1889), with connections to Tower Hamlets' GP Care Group and to partner organisations – including LAH, Fevered Sleep, Outside Edge Theatre Company, Social Action for Health, Spare Tyre and Clod Ensemble/Performing Medicine – which facilitated creative health sessions with local communities. The network hosted quarterly meetings

to hear presentations from partners and to discuss funding opportunities and training needs. A GLA-commissioned evaluation of the Health Tree found that relationships had been established with 16 social prescribers across the borough, which increased the volume of creative health referrals. Creative and cultural activities were entered into the borough's CLARITY social prescribing database to aid future referrals. St Margaret's House subsequently became one of ACE's National Portfolio Organisations (NPOs), among several specialising in creative health.

**Historic England has produced a [guide](#) to heritage-based social prescribing, drawing on a body of evidence showing that visiting heritage sites can increase wellbeing and reduce visits to GPs and psychotherapists.**

Somers Town History Club is included in the guide as the only London-based case study. Building on research investigating healthcare professionals' experiences of the pandemic, Performing Medicine has designed and delivered responsive workshops to support primary care teams including GPs, nurses and non-clinical staff.

Transformation Partners in Health and Care hosts the [London Social Prescribing Map](#), which gives some detail about activity in particular boroughs and a handful of case studies. The map shows varying levels of activity in different locales, with some services spanning every PCN in the area and some confined to one. As there is no statutory requirement to collect such data, further scoping is warranted to discover the extent to which creative health activities are part of this picture.

In the meantime, organisations like Outside Edge Theatre Company have been [using the map](#) 'not only to solidify existing Social Prescribing contacts and referral pathways, but to discover and create new partnerships which have already proved mutually beneficial'. They stipulate, however, that there are still huge gaps in this knowledge, and small-scale arts organisations have to be proactive and invest a lot of resources in keeping abreast of the ever-shifting referral landscapes to pursue opportunities.

Until recently, it was not possible to track creative health activities as a discrete part of the social prescribing landscape, but there is now a SNOMED code which allows prescribers to log creative, cultural and heritage activities, meaning that the scale of creative health social prescribing in London will be quantifiable in the future.

### Social Care

Creativity has increasingly been entering into social care. The Care Quality Commission (CQC), which regulates care homes, [lists](#) 805 facilities in London. Creative health approaches have been enthusiastically embraced in residential care homes and by the [National Activity Providers Association](#) (NAPA). A [report](#) produced by NAPA, the Baring Foundation and the National Care Forum (NCF) – the body for non-profit care homes – found that 82% of NCF homes offered creative activities across a range of art forms. If we apply this percentage to the CQC-regulated facilities in London, it equates to 660 creative health care homes.

London's diverse creative production has found its way into care homes and day centres from the music of the [English Symphony Orchestra](#) and [London Mozart Players](#) to the circus of [Upswing](#) and the stop-frame animation of [Salmangudi Films](#).

Paintings in Hospitals has produced [Creative Care Homes](#), an A-Z of creative activities that might appeal to residents.

Since 2017, the Mayor of London's [Borough of Culture](#) initiative has been grounding creativity and culture in the local, 'supporting work designed and led by local people, empowering communities and contributing to the increased health and wellbeing of residents'. The torch has been passed from Waltham Forest (2019) to Brent (2020) to Lewisham (2022) and Croydon (2023), and it will travel to Wandsworth in 2025 and Haringey in 2027.

As part of the Borough of Culture initiative, Mayor of London-funded Cultural Impact Awards have enabled strong bid elements to be realised. Initially funded by one such [award](#) over four years, [New Town Culture](#), led by visual arts curator Marijke Steedman, has been bringing social care workers together with cultural practitioners through a [shared desire for social change](#). In Barking and Dagenham, where the project is currently based, 76% of the council budget is spent on social care, and a large proportion of residents are in social housing. Building relationships based on lived experience is a statutory part of social work, but this is falling off the agenda due to budgets being cut. New Town Culture's work [demonstrates](#) that

**"Creative work in social care can support systems and processes to be more engaging and accessible, to uncover knowledge about people's needs, build new relationships, build confidence, support change, shift fixed narratives for service users and provide a space for exploring cultural identity." <sup>6</sup>**

Tailored creative support has included clubs, resources, tools and knowledge exchange with staff and people using social care services. Artists and curators are embedded in the practice of social workers, child practitioners, youth offending service workers and foster carers working with children and young adults.

Dr Gayle Chong Kwan, an artist working with New Town Culture, emphasised to us that this work does not involve bringing creativity into care but rather it represents a cross-fertilisation of arts and social work practice and encourages creative problem-solving between people with decades of lived experience. This breaking down of barriers between the constructs of 'experts' and 'creativity' stimulates thinking about the creative tools and methods social workers use. An arts vocabulary can aid play and empower participants.

Creative social work is now being discussed as part of policy within Barking and Dagenham; the project is receiving core funding from the council; and options are being explored for this way of working to be extended into other boroughs and subsectors. The Head of Service Development and Transformation for Children's Care and Support Services has been working closely with New Town Culture to shape campaigns aimed at bringing new staff to work in the borough, building on the idea of creative social work.

<sup>6</sup>Russ Bellenie, Principal Social Worker, London Borough of Barking and Dagenham. *New Town Culture pamphlet*, p. 3.

# CASE STUDY

## Artist working in social care

**Contractual arrangement:** Freelance

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**Successes:** Exploring fluidity and the potential for mistakes in creative practice with young mothers and their children, trying things out that encouraged creative play. Encouraging internal perspectives – such as accessing the voice of the child through social workers writing to their younger self, through safe sharing and playful unknowing – enabled thinking about the care needed by social workers themselves and the young people and adults with whom they work.

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**Challenges:** Creative practice needs to be contextualised and framed by the social work team to give it meaning and purpose and pave the way to new ways of thinking and working. On the rare occasion this has not happened, with adult social work practitioners, participants struggled to understand the relevance to their work.

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**Artists coming into the sector need to know:** You have to be able to hold your own in sessions with social workers. Begin by assisting others rather than plunging straight into a sector where specific experience is needed. Think about starting in arts education to gain lived experience of working with people who are not artists. Understand theoretically why you are exploring certain topics within sessions while keeping the flexibility to improvise.

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**What would help:** More funding in health, social care and creative health. Giving more credence and power to social workers, maybe through micro grants for materials, to enable creative projects. Exploratory methods without clearly defined boundaries being brought to different subsectors.

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## COMMUNITY SETTINGS

As we saw above, creative health has been happening in London's communities for several decades. This has encompassed both the direct targeting of particular health conditions, perhaps especially mental health, and the indirect tackling of the social determinants of health.

### Local Authorities

Among London's 32 boroughs and the City of London, those known to

be exploring creative health include Camden, Greenwich, Hackney, Havering, Islington, Kingston, Lambeth, Lewisham, Newham, Southwark, Tower Hamlets, Wandsworth and Westminster, with varying degrees of engagement from the local council.

As is clear from the sector's evolution (Appendix A), local champions often drive creative health work.

The arrival, in September 2022, of Lélia Gréci as Arts and Culture Programme and Partnerships Manager at Wandsworth Council is a case in point. Lélia and the head of arts and culture, Sara O'Donnell, began to explore creative health with LAH, ACE and CHWA; encouraged creative health organisations in the borough to apply for public health and community grants; and began to advocate for [creative health](#) within the council.

Section 106 funding was secured to cover Lélia's two-year post as creative health lead and to commission eight [programmes](#) from established local organisations able to demonstrate how they aligned with the borough's [health and wellbeing strategy](#). Programmes have been running in accessible locations such as children centres, libraries, sports centres, churches and schools. There is a breadth of organisations involved, working in different parts of the borough, which together constitute a creative health community of practice. In addition to local organisations, Breathe Arts Health Research was commissioned to deliver its [Melodies for Mums](#) programme, targeting postnatal depression (a fathers' version of which is being piloted with funding from Southwark Council).

Funding of £50,000 per year over five years has been secured for three additional commissions via the council's Start Well, Live Well, Age Well programme. As part of Wandsworth's successful bid to become 2025 London Borough of Culture – in which creative health featured prominently – Lélia's post will continue until at least 2026.

Previous boroughs of culture, such as Waltham Forest, are building a legacy by making creative health a key component of their cultural strategy. As part of supporting the recent bidding process

for the London Borough of Culture programme, officers at the GLA curated a range of workshops for borough officers, including creative health.

**As a result, many boroughs are actively exploring creative health as part of cultural strategy refreshes.**

[London's Mentally Healthier Councils Network](#), coordinated by Thrive LDN, offers opportunities for councillors and council officers working to improve the mental health of their residents. There is scope for creative approaches within this scheme.

In Westminster, Dan Hopewell is facilitating quarterly meetings of the local creative health sector, including libraries, social prescribing link workers, household health and wellbeing outreach workers and the larger national arts and culture organisations and community arts organisations in the borough. Sponsored by Westminster Council's libraries and arts teams and developed with Westminster's social prescribing team, the meet-ups attract between 40 and 50 participants.

**The intention is to build relationships, enhance understanding of mutual benefit and opportunity and increase social prescribing referrals to creative health.**

There is also scope for the co-production of programmes between arts/cultural organisations, link workers and community groups, which have

begun to attract dedicated funding from Westminster Council. ACE is involved in discussions about this model being replicated across London boroughs.

[Future Parks Accelerator](#) – a collaboration between the National Lottery Heritage Fund (NLHF), the National Trust and the Department for Levelling Up, Housing and Communities – is working with local authorities to ‘protect and develop natural resources in urban areas, and make sure quality green space is accessible for everyone, now and into the future’. As a part of this programme, called [Parks for Health](#), the London boroughs of [Camden](#) and [Islington](#) have reconceptualised local green spaces as a vital part of the health infrastructure and are working to make them welcoming to everyone in the community.

### Creative Health Zones

In October 2022, with support from the Health Tree, [Creative Health Havering](#) was convened at the Queen’s Theatre in Hornchurch, to explore the potential of creative health in the context of [social prescribing](#). This network brings council departments for education, housing, public health, culture and leisure together with health and care organisations such as NHS North East London Health and Care Partnership, Age UK and Alzheimer’s Society to think about how creative health approaches can help to tackle inequities. Following an initial pilot year, the network has secured three years of funding to enhance joined-up working. Although unsuccessful in its bid to become a London Borough of Culture, Havering has launched a new strategy and fundraising campaign – called A Good Life – which aims to put culture at the heart of the council’s long-term plans.

Something similar is happening in Hackney, with the [Hoxton Creative](#)

[Health Hub](#). With a strong track record in youth creative activities (funded by Young Hackney), 19th-century music hall [Hoxton Hall](#) occupies a prime location in a busy Hackney street. Chief executive Stuart Cox has been working with Lucy McMenemy at Hackney Council to formalise a network of community-minded cultural and leisure organisations. The medium-term goal of the network is that community navigators from [Shoreditch Trust](#) will be able to refer people to funded, evaluated activities along the length of Hoxton Street.

**The long-term goal is that there will be no distinction between the organisations’ programming and their creative health work.**

Other hubs are emerging, such as [Creative Newham](#), led by Rosetta Arts, an independent alliance of arts, cultural, educational, social and voluntary organisations committed to growing and strengthening cultural mobility.

### Community Arts Organisations

**Community arts organisations continue to offer a boundless range of creative activities to their neighbours.**

A [directory](#) of arts and mental health projects published by the Baring Foundation in 2022 included more than 70 initiatives in London. The vast majority of these are located in the community, rather than health/care or cultural/heritage environments, and many have been established for decades. It is to be noted that the focus of the directory

is explicitly on mental health and thus excludes projects considering physical health or the wider determinants of health.

It is broadly accepted that the early years of a person's life can shape their future. Between 2019 and 2022, with funding from the Mercers' Company Early Years Special Initiative, the National Literacy Trust sought to improve the home learning environment of disadvantaged children in Barking and Dagenham, Southwark, Westminster and Kensington & Chelsea. Using multiple languages, [Early Words Together](#) helped parents and carers to engage with their children via shared reading, songs and mark-making. A total of 2,500 families experienced the positive results of this programme, and, while they may not consider themselves a part of the creative health sector, 237 early-years practitioners were involved in delivering this work.

Since 2002, [Sound Connections](#) has been supporting children and young people to thrive through music. Several organisations and projects in London encourage children with special educational needs and disabilities to be creative. Examples range from the pioneering Chickenshed Theatre Company to London Bubble's Speech Bubbles – a drama programme for young children with communication needs – and the Royal Academy of Dance's RADiate programme of inclusive and accessible dance for primary-aged children.

Thrive LDN's [Right to Thrive](#) commitment to celebrate and protect London's diversity has seen organisations – including Lewisham Youth Theatre, [Music on My Mind](#) and [REZON8](#) at the Albany

– being funded to work with marginalised communities. As part of Lewisham's Borough of Culture year, the youth-led research project [A Big Conversation](#) looked at the role of the arts and culture in young people's mental health.

The pan-London project [2.8 Million Minds](#) – a partnership between the GLA, Bernie Grant Arts Centre, Chisenhale Gallery, Thrive LDN and the vacuum cleaner (artist James Leadbitter) with funding of £125,000 from the Baring Foundation matched by the Mayor of London – encourages creative responses to the mental health needs of young Londoners. A [manifesto](#) for 2.8 Million Minds was launched at an event led by young artists at the Houses of Parliament in May 2022.

The social determinants of health include not only the conditions in which we live but also the structures and forces shaping our lives. Run by Platform London, [Shake!](#) raises the voices of young people from marginalised communities through creative activism that drives social change. Responsive to the needs of young people, Shake! uses anti-oppression, trauma-informed creative approaches to tackle systemic injustice and influence the practice of mainstream institutions.

Educational charity [Global Generation](#) works with children and young people, businesses, residents and families in Camden, Islington and Southwark to create healthy, integrated and environmentally responsible communities using land-based activities. The [Music and Social Justice Network](#) exists to bring greater equity to musical work with children and young people.



The conditions in which we age determine our health and life expectancy. Thanks to dedicated investment by the Baring Foundation,

**creative ageing has been recognised as an important part of the creative health sector,**

which has been covered in depth by this author in [Older and Wiser?: Creative Ageing in the UK 2010–19](#). In 2019, the [Age Against the Machine](#) festival of creative ageing was funded by a London Borough of Culture Cultural Impact Award and produced by Entelechy Arts and the Albany in Lewisham, building on [Meet Me at the Albany](#), an arts and social club that has been running for many years.

### Other Community Venues

**Creative health activities are also taking place, formally and informally, in homes, libraries, cafés, cinemas, parks, city farms, barbers' shops, laundrettes and food banks.**

This suggests that there exists what might be thought of as an 'established' creative health sector – made up of individuals and organisations working very deliberately at the intersections between creativity, culture, heritage, health and wellbeing – and a groundswell of activity on the fringes of the sector.

In 2015, ACE commissioned Simetrica to [scope](#) the health and wellbeing benefits of public libraries, which valued 'medical cost savings associated with library

engagement at £1.32 per person per year'. DCMS and ACE have enabled the purchase of books to support mental health and wellbeing from a list compiled by health experts for the [Reading Well](#) project, delivered by the Reading Agency and Libraries Connected. London's libraries are often used as hubs for creative activities, and NASP [embraces](#) libraries as playing a 'vital role in the delivery of social prescribing at a hyperlocal level'. Since 2014, [Upswing](#) has been animating libraries with circus performances and interactive [workshops](#).

Spearheaded by Christian Algar, the British Library's Heritage and Communities project is committed to challenging historical imbalances, working with local people to ensure that the full diversity of the community and collection is reflected in the stories that are told. On the understanding that history belongs to everyone, the library is running a research skills programme to widen access to the collection and gather and amplify untold stories from marginalised communities. This is being accompanied by workshops that investigate and celebrate different cultures, histories and interests, activating people's discoveries through scrapbooking, zine-making and performance. The project is also connected to the Last Word community hub, home of the Community Book Circle, which encourages shared reading.

Launched in 1999, the [Idea Store](#) concept has given rise to five purpose-designed learning environments in Tower Hamlets. More than libraries, the idea stores offer opportunities for lifelong learning. Every morning from Monday to Saturday, children under five are invited to take part in story-time sessions. Every Saturday afternoon, each of the five

stores runs an art club for children and families, the results of which are displayed in the art club gallery.

[Opening Doors London](#) exists to support LGBTQ+ people over 50 to connect and offers Singing for Fun, Hackney Art Group and a Women's Film Club. The organisation worked with the British Library on a project called If Homes Had Ears, which used the library's archive of domestic sounds. Helping to alleviate loneliness, [book clubs](#) are springing up across London, often in association with Age UK.

Between 2022 and 2026, ACE's [Creative People and Places](#) scheme is supporting creativity and culture in areas of low provision. Six out of 42 funded projects are in London, grounded in consortia in the boroughs of Barking and Dagenham, Bexley, Havering, Hounslow, Newham and Redbridge.

Our interviewees told us about people working in creative health who do not

describe their work in this way. In addition to organisations appearing throughout this report, we heard about [Headway in East London](#), working with music, cooking, printmaking, ceramics and video games for brain recovery; [Betsan Corkhill's Knitting for the Brain](#); [Dorcas Societies](#) of Caribbean women crafting; [Posh Club](#) cabarets for older adults run by Duckie; [Resonant Tails](#) – a multi-sensory interactive arts project run by Yvon Bonenfant, working in dialogue for children with profound learning difficulties; [Extant's](#) work with disability rights; and [Windrush](#) commemorations.

Daniela Nofal, producer at Counterpoints Arts (founded in 2012), told us of creative work alleviating the trauma of asylum seekers and refugees – at Counterpoints, Compass Collective (Brixton), Freedom from Torture: Write to Life, Hear Me Out (Bethnal Green), Kazzum Arts and Together Productions – 'focusing specifically on displacement and migration, and lived experiences against the backdrop of the hostile environment policies in the UK'.

## CASE STUDY

### Artist working in health/care setting (participatory work)

**Contractual arrangement:** Employed part-time

**Successes:** Seeing members overcome struggles and gain in confidence. Establishing a popular group for sculpture, which can be very therapeutic but is often seen as inaccessible.

**Challenges:** People with severe mental illness engaging with arts activities develop trusting, consistent relationships with facilitators, which can lead to the sharing of other challenges. Sadly, there is often not enough capacity to respond to this need, and the introduction of a formal internal advocacy role created a conflict with therapeutic creative health activities.

**Artists coming into the sector need to know:** Listen to the inspiring ideas of people using the service. Bring what you are eager to bring to the table while being open and adapting. Always remember that you believe in what you are doing. You came into the sector for all the right reasons. Your passion and energy will take you a long way.

**What would help:** More one-to-one support for people working in the sector, especially following difficult situations.

## CULTURAL VENUES AND HERITAGE SITES

The Museums Association [acknowledges](#) the health and wellbeing benefits of their members' work. However, the only two London-based examples listed on its website are: Art & Heritage Wellbeing at [Turner's House](#) – which engages with people receiving mental health support to promote mental and physical wellbeing, alleviate loneliness, encourage creativity and build confidence – and Imagine, a programme designed for people with dementia and their carers, run by [Orleans House Gallery](#), Richmond, which has engaged more than 150 people since January 2014 through art workshops, talking art sessions and training events.

Similarly, the Baring Foundation's [report](#) on mental health support at museums, produced in collaboration with the Association, included only one specialist museum in London (Bethlem Museum of the Mind, established in 2015 alongside Bethlem Gallery) and two non-specialist museums (Dulwich Picture Gallery and the Foundling Museum). Since 2020, [Dulwich Picture Gallery](#) has partnered with Arts Network and with the Tessa Jowell Health Centre to run creative workshops and [commission](#) contemporary artworks.

**London is home to many of the national orchestras, theatres, galleries, museums and dance companies, most of which have health and wellbeing elements to their programmes.**

So, for example, the [Royal Philharmonic Orchestra](#) offers participatory music [sessions](#) for mental health and wellbeing,

centred on the London Borough of Brent, and the [National Theatre](#) runs Public Acts, with eight community groups and professional actors making up a cast of 200.

Since 2010, English National Ballet (ENB) has been running [Dance for Parkinson's](#) alongside other programmes for younger and older people. Highly trained and mentored dance artists and musicians work with groups of up to 45 people per session from ENB's premises in Newham and hubs in England and Wales. Engagement director, Fleur Derbyshire-Fox, who has run the programme since its inception, told us that participants find sessions empowering and emotive, and ENB takes responsibility for its continuity in the face of funding ebbs and flows. The programme – which, alongside Melodies for Mums and Rosetta Life's [Stroke Odysseys](#), is being scaled up with funding from Wellcome, via the Scaling-up Health-Arts Programmes: Implementation and Effectiveness Research ([SHAPER](#)) project – features as a case study in the Mayor of London's [Health Inequalities Strategy](#). Dance for Parkinson's has turned a national company into an organisation that learns from people with lived experience.

**Beyond the national companies, the capital is also home to many leading cultural organisations offering opportunities for local community members to engage with the art forms in which they specialise for the benefit of their health and wellbeing.**

Since 2001, East London Dance has been running [Leap of Faith](#), a weekly dance performance group for people over the

age of 60. Since 2017, the organisation has been responding to the surge of mental health issues amongst young people by working with HeadStart Newham to support the emotional resilience of 10 to 16 year-olds through dance. From 2004, RSPH award winner [Old Vic New Voices](#) encouraged young people to explore their dramatic talents through masterclasses and workshops. This has evolved into the [Community Club](#), which works with 10 groups in areas local to the Old Vic, to support health and wellbeing through encounters with theatre. In collaboration with Resonate Arts and Kensington, Chelsea and Westminster Memory Service, the V&A has [pioneered](#) the first museum-based Cognitive Stimulation Therapy programme for adults with mild to moderate dementia.

Certain cultural venues are seeking to involve and embolden their communities and increase equity. So, for example, [Southwark Playhouse](#) hosts a black writers' collective, a young company, an elders' company and a people's company, the latter of which 'aims to give local people a voice in the future of the community, empowering creativity and giving members a voice in Southwark's creative scene'.

**This ceding of power at neighbourhood level will be vital to London becoming a Creative Health City.**

When it comes to heritage, UCL and its hospital trust have [explored](#) the use of artefacts within hospitals and other healthcare settings and found that object handling improved patients' perceptions of their health and wellbeing. The [Restoration Trust](#) (founded by Laura Drysdale in 2014) has been consistently using heritage

and creativity to alleviate mental ill health. Supported by the NLHF, the trust instigated [Change Minds](#), which encourages people to produce creative responses to mental health archives. In the summer of 2020, [Bethlem Museum of the Mind](#) partnered on this project to draw on 150 years of the hospital's history.

In 2021, the Baring Foundation published a [report](#) with the Restoration Trust, looking at creativity and mental health activity in heritage settings. Among the examples given in the capital were participatory interpretative activities for men at the Historic Royal Palaces; sifting the Thames foreshore led by Museum of London Archaeology; and the use of archives to enhance wellbeing at Bethlem Museum of the Mind.

In relation to natural heritage, in 2002 [Sydenham Garden](#) was established – by local GP Jim Sikorski and his artist wife Sarah – as a wellbeing centre for people recovering from mental and physical ill health. Operating across two sites in Lewisham, the organisation offers a wide range of gardening, growing, arts and crafts activities for young people (18–25), adults with mental health problems, local residents with African-Caribbean heritage and people with dementia and their carers. Referrals come via Lewisham Wellbeing Hub (commissioned through SELICS and Lewisham Council) or via the community. Participants – or co-workers as they are known within the garden – can take part in two consecutive year-long programmes, and they reflect the diversity of the surrounding area.

Natural England has [identified](#) Bankside Open Spaces Trust as a case study, addressing local deficiencies in access to nature, as identified in the London Plan, by reinventing green space that would

otherwise remain unused, to reconnect people with the natural environment. The charity has been working with multiple partners in Lambeth and Southwark, including the local authorities, to stimulate communal gardening, food growing and outdoor recreation.

[Groundwork](#) is a 'federation of charities mobilising practical community action on poverty and climate change'. [Groundwork London](#) supports local communities to 'build capacity and resilience as this is vital if we are to tackle hardship, achieve a just transition to net-zero and help nature recover in a way that reduces inequality and leads to better work and healthier, happier lives'.

Between 2018 and 2021, London Wildlife Trust ran a programme called [Keeping it Wild](#) as part of a £10 million NLHF-funded project called [Kick the Dust](#), which aimed to stir up the heritage sector. This 'inspired over 1000 young people aged 11-25 to become actively involved in the protection and promotion of London's natural heritage' and involved paid traineeships and participation in a youth forum. The project has secured further funding from the Mayor of London, the NLHF and other sources to continue until 2024.

There is ample scope for artists and cultural and heritage organisations to work with social care.

## **Cultural and heritage venues provide an alternative meeting place to badly lit offices and fast-food restaurants.**

They also offer sites for engagement, and New Town Culture has commissioned three resources from Tate that encourage visitors to explore [groundings](#), [transitions](#) and [life markers](#).

Since 2012, South London Gallery has been running [Supersmashers](#), an art and play programme for looked-after children, in partnership with Southwark Social Services. Between 2019 and 2022, as part of New Town Culture, the Serpentine Gallery ran a project called [Radio Ballads](#) which shed light on adults' lived experience of social care in Barking and Dagenham.

Founder of the NAMHW Professor Helen Chatterjee told us that a lot of creative health work is going on in culture and heritage but it needs scoping. Project officer at Thrive LDN Nadia Holland recommended that the sector drew on the expertise of the [National Museum Directors' Council](#), based at Tate Britain, to help make the case for more creative health within museums.

# CASE STUDY

## Artist working in cultural organisation

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**Contractual arrangement:** Freelance

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**Successes:** Participants taking over the space, moving away from a fear of their children doing something wrong to being relaxed about exploring. Bonds made between groups of adults and children. People from global majority backgrounds, with English as a second language, starting to use more English in a playful way. Positive affirmation around the room. Participants' increased confidence in their own creativity.

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**Challenges:** Making sure that participants' privacy was protected outside the safe space of the gallery when mutual connections were revealed within sessions. Managing extrovert and introvert characters so everyone was heard. Ensuring that high-stress situations at home were not reflected in the project, e.g. by not strictly enforcing timings. Normalising the food element of the project for a participant with an eating disorder.

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**Artists coming into the sector need to know:** How to practise cultural humility – understand that people are different and try to meet people where they are. Empathy and flexibility are important qualities to have or to learn. Set boundaries for the sake of your own wellbeing – be clear about where your role ends. Factor in time to debrief with someone (a facilitator or critical friend). Have confidence in your instincts – if there is a concern, raise it with someone. High-quality materials make people feel special and valued and build self-esteem more quickly.

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**What would help:** More training, professional development and networking opportunities. Skills are often learnt through doing, rather than conferring knowledge of what is going on in the sector. Greater opportunities to talk to other facilitators would confer positive reinforcement.

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# CASE STUDY

## Artist working in natural heritage organisation

**Contractual arrangement:** Employed part-time

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**Successes:** Watching young neurodivergent and queer adults find satisfaction and joy through socialising and creating. Being able to protect a space and time for young adults to practise slowness, authentic communication and self-confidence. Finding ways to incorporate my own creative and horticultural interests into session design and being able to adapt these technical skills to fit the interests of the group. Accessing larger institutions and sharing their resources with young adults that wouldn't usually use these spaces. Watching them take ownership of collections, museums and galleries.

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**Challenges:** Learning to break through inherited mental health/funders' frameworks and create data-capture methods that serve both the user and the organisation/funder. Finding a direction for a young adults' group – specifically how we make art, why we make art and how it relates to our connections with nature. Being able to create an alternative mental health support space that doesn't lean into clinical terminology. Sustaining myself with the average wage for roles like mine. Being able to advocate for myself as worthy of more, considering my training and skill levels and the demanding emotional and logistical aspects of the role. Staying employed as an Autistic person coming up against neurotypical workplace practices and day-to-day experiences that are disabling.

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**Artists coming into the sector need to know:** That non-clinical mental health services don't need to follow the pathology-based methods of clinical services. That people crave community and opportunities to explore communication styles through art- and nature-based activities. That wellbeing is a non-linear experience, and quantitative data won't capture the importance and vitalities of your work or someone's experience of your project. That we all need to work together to improve the perception of 'skill' in this industry and ultimately improve our quality of life (we can't solve late-stage capitalism, but we can mitigate its harmful effects).

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**What would help:** Better wages.

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## EDUCATIONAL SETTINGS

In the overview of settings, we mentioned several collaborations between higher education and creative health in London.

### **In addition to university departments, the capital benefits from six dedicated medical schools:**

- Faculty of Medicine and Dentistry, Queen Mary University of London
- Imperial College London Faculty of Medicine
- King's College London GKT School of Medical Education
- London School of Hygiene and Tropical Medicine
- St George's, University of London
- University College London Medical School

The RSPH is currently conducting an ACE-funded review of the literature on creative content in medical education. Ranjita Dhital, who chairs the RSPH's special interest group on arts, health and wellbeing, intimated that London's medical schools would be represented among the findings to be published in 2024.

Clod Ensemble's [Performing Medicine](#) team has been working at the Faculty of Medicine and Dentistry at QMUL since 2001. Their programme supports all medical students to become providers of high-quality, compassionate care throughout their undergraduate years. Co-designed with medical educators to meet the needs of the core curriculum into which they are embedded, all of the mandatory courses have arts or cultural elements; they are taught by artists and use arts-based methods to support students in developing skills that are integral to their medical learning and practice. Themes include communication, critical thinking, managing transitions, self-care and presentation skills. These

elements are not specifically assessed, but, because they are integrated into the core curriculum, they contribute to the skills students use in their end-of-year exams. Performing Medicine also offers two student-selected components, centred on Anatomical Art and Medicine and Photography, which are assessed through coursework and presentation.

Performing Medicine has also delivered programmes across Guy's and St Thomas', Imperial NHS Trust and Barts Health NHS Trust. In 2014–17, they were funded by Guy's & St Thomas' Charity to pioneer arts-based learning across the trust and produced a new framework with Dr Peter Jaye, [Circle of Care](#), which outlines the ways in which arts methods can help to develop skills central to good clinical practice.

**Since 2007, a novel interdisciplinary field of health humanities has been moving beyond a concern with training health professionals through the arts and humanities, by seeking to bring the medical humanities together with arts and health approaches to advance creative public health.**

Imperial College London Faculty of Medicine offers an optional additional [BSc in Medical Sciences with Humanities, Philosophy and Law](#) across three themes – the body, the mind and death and dying – alongside an independent project on a self-selected topic. Students are invited to take part in creative and reflexive activities, which include a number of artist-led workshops such as life drawing, sculpture, photography and creative writing. Creativity is also



incorporated into six rigorously assessed assignments – from analysing patient and carer stories to producing a visual narrative to illustrate an aspect of death and dying. Learning outcomes include explaining and evaluating how creativity can inform approaches to complex conceptual and practical problems in medicine. As part of their independent project, students are required to produce artworks for inclusion in a curated exhibition at Imperial College's [Blyth Gallery](#).

Medical students at Imperial have other opportunities to engage with the arts. Parts of the course integrate drawing/ making activities or encourage creative reflection. All medical students choose a credit-bearing module in their second year from a selection offered by the [Centre for Languages, Culture and Communication](#), including arts-based options, with further opportunities to engage with the programme in other years. Imperial's [Medical Education Innovation & Research Centre](#) offers a student-selected component on exploring experiences in medicine through creation in the arts. Imperial is also known for its partnership with the Royal College of Music in the [Centre for Performance Science](#).

Building on a long history of including the arts and humanities within teaching at dedicated healthcare university St George's, University of London, Dr Deborah Padfield has developed the Open Spaces programme. In collaboration with Birkbeck, science, medical and healthcare students are taught alongside arts and humanities students, through seminars, events and workshops. Open Spaces encourages the use of creative practices and humanities methodologies to which students and staff might not otherwise have access, including singing for lung health, creative writing, photography and

music and wellbeing. Additionally, the programme provides a space for open dialogue across levels of experience and areas of practice, encouraging exchange between those at varying stages of their careers and with different skills and perspectives. In collaboration with Goldsmiths, a new module – Arts and Health: Culture, Community and Co-Creativity – has been devised and validated for delivery in 2024–25.

The College of Medicine and Integrated Health has five student [social prescribing champions](#) within London's medical schools. The scheme is chaired by founder Dr Bogdan Chiva Giurca, who is also global and clinical lead at NASP.

Alongside the training of future medical professionals, art schools have considered health and wellbeing. In the 1980s, Quentin Blake at the Royal College of Art initiated a collaboration between his students and St Stephen's Hospital. In the 1990s, co-founder of North West London Hospital Arts, Sue Ridge, began teaching on the MA in Design for Environment at Chelsea College of Art and Design. This is reflected in the performing arts with an [MA Theatre for Community and Education](#) at Mountview Academy of Theatre Arts in Peckham and applied theatre courses at the [Royal Central School of Speech and Drama](#) and elsewhere.

The [Primary Arts](#) programme, run by A New Direction, offers high-quality creative and cultural activities to children in London's primary schools and special educational needs and disabilities settings. A selection of performances and participatory workshops is being offered to schools, alongside free tickets to films and performing arts, with the cost covered by the City of London Corporation City Educational Trust.

**In schools, creative work is interacting with education as a social determinant of health.**

Emerging from the Cultural and Learning Consortium in 2009, the Cultural Learning Alliance – a membership organisation funded by the Paul Hamlyn Foundation (PHF) and Esmée Fairbairn Foundation – champions a right to arts and culture for every child. The work of the Alliance is fuelled by an [understanding](#) that ‘children with an arts deficit are disadvantaged educationally and economically while their more fortunate peers who do participate in the arts are more resilient, healthier, do better in school, are more likely to vote, to go to university, to get a job and to keep it’. In a similar way, ACE is investing in [Local Cultural Education Partnerships](#), which support children and young people to fulfil their creative potential and access high-quality cultural experiences within and beyond school.

Responding to the youth mental health crisis and the relative absence of the arts in

the national curriculum, [Fresh Arts CIC](#) – a producer of participatory arts projects for children, young people, and their families – has been running the [Bounce](#) project in schools in Barnet, Brent, Croydon, Ealing, Harrow and Kensington and Chelsea. Centred on drama (with music, creative writing and visual art components),

**Bounce supports delivery of the personal, social, health and economic curriculum to increase self-awareness, emotional regulation and wellbeing in primary-age children.**

An evaluation of the first cohort, conducted by LAH, found that participants showed improvements in emotional intelligence and life skills.

Ensuring that the benefits of creative health are not confined to mainstream education, [Kazzum Arts](#) offers creative opportunities to children in pupil referral units.



# CASE STUDY

## Artist working in education

**Contractual arrangement:** Freelance

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**Successes:** Healthcare professionals seeing themselves reflected in performances and having fun outside their challenging daily environments. Deeper conversations with clinicians and academics fascinated by embodied presentations of research, which offer a view beyond illness. Shifts in body language, engagement and confidence within healthcare professionals being given 'permission' to care for themselves and each other during the rigours of their work.

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**Challenges:** Early scepticism to arts-based approach to health (now largely dissipated). The realities of a system under extreme pressure that will not be resolved through one workshop alone. It is impossible to talk about self-care without also talking about a lack of collective care. These concerns must not be invalidated, and the arts must not be a sticking plaster for systemic failure. Healthcare professionals are busy and might struggle to take time to focus on wellbeing.

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**Artists coming into the sector need to know:** How to facilitate skilfully. How to communicate with, and hold space for, one another. This is very different from being an amazing artist. You need to be able to research, inform yourself, adapt to knowledge gained and be flexible.

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**What would help:** More funding, shadowing and mentoring. Serious conversations about the arts and money: how to value and articulate one's worth, how to budget and save money, how to be self-employed and pay national insurance contributions. The self-sacrifice required of artists, with their needs disregarded, is not self-sustaining.

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# WORKFORCE

**As part of our research, we were keen to understand the character of London's creative health workforce – including pay and conditions – as well as the opportunities that exist for training, professional development and support.**

## CHARACTER

Victoria Hume from CHWA told us in interview that the creative health workforce tended to be predominantly women in the 30-60 age range, having come into the sector as a second career. Practitioners' motivation seems to be either personal experience – a health crisis of their own or that of a loved one – or a background in education that increasingly veered into health and wellbeing work. These mid-career professionals are experienced but not particularly confident about articulating their value.

**The sector as a whole has traditionally been undervalued, which had been due in part to a lack of care by commissioners.**

Analysis of the UK-wide State of the Sector survey revealed that 11 of 23 respondents working in London had formal employment contracts, sometimes combined with freelance work, with the remainder (including the director of an organisation) working entirely freelance or on a voluntary basis. Among the 11 employment contracts, five were part-time. Several practitioners reported raising funds to run projects or using their own money to fund programmes. One respondent mentioned having quit full-time permanent employment due to their negative

experience. Only two practitioners working in London (8.7%) admitted to being very optimistic about the future of the sector, which was lower than the UK average (14%); the remainder who chose to answer were either ambivalent or somewhat optimistic.

London-based practitioners who completed the State of the Sector survey had generally been discovered online or by word of mouth, and many of the organisations with which they were working received referrals via social prescribing pathways (i.e. primary care).

**The majority of arts coordinators in acute and specialist trusts who completed our hospital arts survey found artists through a combination of established networks and open calls.**

Some only work through existing networks, whereas [CW+](#) at Chelsea and Westminster Hospital exclusively recruits new artists through a competitive process.

rb&hArts programmes are run by external freelancers, managed by the core team; one practitioner runs Singing for Breathing, and there is a rota of six musicians for the wards and eight for Vocal Beats. At Creative Health Camden, at least two facilitators run every workshop, working on a freelance basis and paid according to [Artists' Union England's rates of pay](#). English National Ballet's Dance for Parkinson's offers paid planning and training time, with freelance artists being highly valued and paid accordingly.

One of the artist-facilitators we interviewed told us that 'smaller organisations have been a lot more open to paying the union rate'. The situation becomes more complicated for longer-term work, where day rates tend not to apply and travelling time and cost is generally not included, meaning that artist-facilitators are expected to cross-subsidise such commissions from other work.

Our hospital arts survey respondents told us that freelance practitioners were paid between £150 and £250 per day from annual budgets of between £58,000 and £1 million. A fee of £4-5,000 for mid-scale commissions and £8-9,000 for large-scale commissions was offered to artists working with Imperial College Healthcare Trust.

Practitioners reported earning between £1,400 and £15,000 from their creative health work in the last financial year, which represented 85% of annual earnings for the former and 50% for the latter. Those few survey respondents who reported charging a standard rate, as recommended by unions or professional bodies, invariably accepted a lower rate on occasion. This reflects the conclusions of Industria's [research](#) into the pay and working conditions of visual artists in the UK, which 'demonstrates the volume of artistic labour which goes unrecognised and unremunerated'.

For a relatively modest contribution, hospitals are reaching thousands of in-patients and out-patients across London.

**Those with the most established arts programme estimate their work being engaged with by 20,000 patients per year.**

This can be [multiplied](#) across 18 acute trusts and 16 community, specialist and

mental health trusts in the capital and has the potential to span many more primary care trusts.

## TRAINING

In 1993, hospital arts pioneer Peter Senior wrote that:

*To work as an artist in [hospitals] it is necessary to be aware of the pressures, concerns and constraints of the jobs of the health care staff, and to get to know how the organisation works. Artists have to be educated to look at art in a different way. [...] They also soon learn the need to develop new skills in order to relate and explain their work to people, or to work alongside them.<sup>7</sup>*

One of the artists we interviewed described how work in hospitals was a far cry from gallery exhibitions. They told us that artists need to think about the ethics of working with healthcare staff and people experiencing ill health, who are vulnerable, away from familiar environments and often in pain or distress. Artists also have to consider how, at a practical level, artwork in hospitals has to be made of sterile, wipe-clean materials, often by specialist fabricators.

The UK State of the Sector survey revealed that all but one of the 23 practitioners working in London had attended at least one training session, with the majority self-funding some or all of them. Nine practitioners reported receiving creative health training as part of a degree course, often at postgraduate level. In addition to the aforementioned MASc in Creative Health at UCL, it is possible to undertake postgraduate study of creative health at several universities around the country, including an MSc in [Creative Arts and Mental Health](#) at QMUL, which also hosts the Social Prescribing

<sup>7</sup> Peter Senior and Jonathan Croall, *Helping to Heal: The Arts in Health Care* (London: Calouste Gulbenkian Foundation, 1993), p. 7.

and the Arts Network. Leading Creative Enquiry modules at QMUL, GP Louise Younie has been instrumental in advancing the cause of creative health within education, latterly as Professor in Medical Education and co-chair of the Royal College of General Practitioners' creative health special interest group (supported by NCCH).

New Town Culture and Goldsmiths have developed a [module](#) in Creative Social Work. Taught by social workers and creative practitioners, this explores the theory of social work alongside visual art, dance and performance, and it encourages the sharing of knowledge and skills. The three-day course can be used as training or completed as part of a diploma course or a Masters degree, and it is accompanied by group reflective practice.

Artistic director at Creative Health Camden Antonia Attwood identified a significant lack of training in the sector and advocated paid training for under-represented groups. Only six practitioners reported having undertaken longer-term non-academic training or professional development courses, again self-funding in the majority of cases. Fourteen of 23 practitioners stated a desire for further training in areas covering the practicalities of running programmes, including best practice, budgeting, co-production and risk assessment; evaluation; commissioning; and navigating NHS processes.

**Practitioners told us they would benefit from support with making funding applications, simplified and more humane application processes for open calls and better partnerships and knowledge exchange, with an emphasis on collaboration rather than competition.**

It is proving hard for the sector to develop a training model that is both financially sustainable and inclusive. At a national level, CHWA offers an online [training course](#) in Culture, Health and Wellbeing, estimated to take nine hours, which includes six modules:

- An introduction to health and wellbeing
- Partnership and co-creation
- Types of audiences and activities
- Measuring impact
- Organisational change
- Next steps

Similarly, [NASP](#) offers regular webinars that cover the fundamentals of creative health, specifically where it interacts with primary care, and [Performing Medicine](#) runs a substantial workforce development programme including an accredited live online training course in arts-based social prescribing. Following a pilot in Southwark and Merton (2020–21), funded by the GLA, ACE and Healthy London Partnership, Performing Medicine was funded by ACE to provide its workforce development programme in four priority boroughs – Brent, Croydon, Enfield and Newham. This programme was designed to develop knowledge and awareness of the positive health and wellbeing impacts of engaging with arts and culture and to build a foundational cross-sector network to support this work.

National creative health programmes being run from London, such as ENB's Dance for Parkinson's and Aesop's Dance for Falls Prevention, benefit from in-house training and mentoring. In Brent in 2022, the [Royal Philharmonic Orchestra](#) worked with community groups to recruit three local musicians to undertake paid training to offer creative sessions to people interacting with mental health services. The [Royal Horticultural Society](#) offers a range of

courses that require a commitment of time and resources. [Thrive](#) runs courses and workshops in social and therapeutic horticulture. At a local level, Wandsworth Council has partnered with South West London and St George's Mental Health NHS Trust to offer [mental health first aid training](#). SLAM Recovery College runs an [Introduction to Coaching Techniques for Recovery](#).

The Baring Foundation's [Creatively Minded and Ethnically Diverse](#) funding stream has been nurturing practitioners with global majority heritage to become leaders in the field of creative (mental) health. This has given rise to [Singing for Our Minds](#), a programme to train artist-facilitators at Together Productions, and enabled East London Dance and Protégé DNA to train artists to work in mental health settings.

For two decades, [Tamasha Theatre Company](#) has been running a development programme, originally for British South Asian theatre artists, broadening to encompass 'cultures that are otherwise left in the shadows'. For 2024, Tamasha secured funding from the Baring Foundation to run a [Creative Wellbeing Lab](#), in partnership with Creative Health Camden and King's College London, for global majority theatre makers to undertake paid training to become creative health facilitators. Lab participants are learning about relevant practice, and they will have the opportunity to shadow practitioners and design and pilot a mentored creative health project.

[Spare Tyre](#) offers master classes and mentoring with experienced participatory artists. At [Lewisham Youth Theatre](#), young artists with lived experience of mental health problems have been trained as drama facilitators as part of A Big Conversation. Sound Connections

offers [training](#) that 'supports creative practitioners, teachers, producers and managers to be more inclusive in their practice'. With Baring Foundation [funding](#), African-led music development agency [Yaram Arts](#) in King's Cross is training global majority musicians in the [Singing Mamas](#) approach for perinatal wellbeing.

Groundwork's NLHF-funded [New to Nature](#) project offers 96 young people – particularly those who are disabled or from an ethnic minority or low-income home – a year-long paid traineeship in environmental organisations. In London, this has led to placements at the Bat Conservation Trust, British Ecological Society, Chelsea Physic Garden, CPRE: The countryside charity, Habitats and Heritage, the Royal Parks, Wildlife and Countryside Link and the Zoological Society of London.

The Centre for Literacy in Primary Education (CLPE) works across ten London primary schools to provide creative literacy training and support for primary school staff. Its project [Reflecting Realities in the Classroom](#) seeks to raise standards in language and literacy, encouraging teachers to be more critically reflective and actively engaged in ensuring inclusive and anti-racist practices in literacy teaching and learning, through arts-based approaches. As part of the aforementioned Primary Arts programme, CLPE is collaborating with A New Direction to provide masterclasses to London's teachers.

**Increasingly aware of the trauma underlying much lived experience, organisations are moving to respond.**



Acknowledging the stressors of adverse childhood experience, Kazzum Arts has [developed](#) a unique and influential trauma-informed practice for creative health practitioners and organisations. [Clean Break](#) runs Leading with Kindness training to inform theatre-based and community work.

Conni Rosewarne at NELICS identified an overlap between creative health work around anti-racism and the training offered to NHS staff by the Health Equity Academy in North East London. Lélia Gréci recommended we liaise with the [Ethnicity in Mental Health Improvement Project](#) – a partnership between South West London and St George’s Mental Health NHS Trust, South West London ICS and the global majority VCSFE sector, convened by Wandsworth’s [Community Empowerment Network](#).

Integrating creativity into the lives of people with life-limiting diagnoses and at the end of their lives, [St Christopher’s Hospice](#) in Sydenham has offered training in the creative arts to nurses, healthcare assistants, care home managers and other allied health professionals. Paintings in Hospitals has initiated a training programme for artists in co-curatorial methods, teaching local artists to work with health and care sites.

**CHWA is poised to launch a hub that draws practitioner training opportunities together in one place and enables analysis of whether skills gaps are being met.**

Mary Paterson spoke with frustration about volunteers at rb&hArts being mentored extensively but having no opportunities to make the transition to

paid work. At Sydenham Garden, staff have historically been recruited from volunteers, but director Beth Jaichand told us that neither volunteers nor staff are representative of the diversity of Lewisham. Young people at Spotlight can progress from wellbeing ambassadors to peer mentors, receiving training in reflective practice and how to deal with difficult situations, and volunteers can become employees.

Mary Paterson also told us that it takes six months and significant expense to bring freelancers on board in hospital contexts as they go through contractual issues and Disclosure and Barring Service (DBS) checks as well as having the necessary vaccines. Mary suggested the creation of a database of artists who had been through enhanced DBS checks and had up-to-date vaccines, as well as having undertaken training and professional development in requisite skills. While this would save time and money as well as potentially increasing the pool of practitioners on which hospitals could draw, the creation of an approved list of artists runs the risk of narrowing the field.

Artists need to be seen as a safe pair of hands, but reducing risk also reduces diversity. Executive director of Arts & Health Hub CIC Daniel Regan worried about the ‘over-professionalising and accrediting of skills for artists’ because the sector could become ‘exclusionary’, with cost being a barrier to gaining qualifications. He emphasised that ‘if you want to work with people in this field, you need to be good with people, you need to be non-judgmental, you need to be compassionate, you need to listen’; such a person-centred approach cannot be theorised; it must be practised.

**Daniel also reminded us that 'You can go on a training course about how to be with people and still be terrible with people – just because you've got the certificate doesn't mean that in practice you'll be any better. Sometimes life experience is the thing that makes people amazing in this work, and that can't really be taught – it has to just be experienced'.**

Indeed, we asked hospital arts coordinators in London which qualities they looked for in the artists they commissioned, and they mentioned awareness, common sense, compassion, resilience, personality, empathy, friendliness, flexibility, adaptability, confidence, imagination and good communication skills. This was secondary to training, previous experience and practical skills in planning and delivery.

CHWA's [quality framework](#) has been set up as an alternative approach to skills development which keeps the field open to newcomers. Rather than being a professional qualification, the framework is intended to support practitioners of participatory work, aimed at identifying best practice, supporting partnerships, improving working conditions, increasing confidence in articulating value and improving outcomes for participants. Practitioners we spoke to expressed a desire for training around evaluation, which could perhaps be undertaken in conjunction with the quality framework.

Charlotte Wilson at Arts Network told us it would be helpful to have leadership training that was financially accessible to people running small charities and flexible to the demands of their role.

SELICS is running the [Collaborate South East London System Leadership Programme](#), which guides an annual 30-person cohort through an experiential programme, grounded in action learning and mentoring, to strengthen partnerships in the area covered by the ICS.

## **PROFESSIONAL DEVELOPMENT**

In addition to a lack of training in the sector, there is also a dearth of opportunities for professional development. We saw earlier

**only a quarter of practitioners responding to the UK State of the Sector survey had taken part in professional development,**

and people we interviewed were generally unable to point to appropriate programmes.

The Baring Foundation's Creatively Minded and Ethnically Diverse strand supported Brixton-based Raw Material Music and Media – co-chaired by SLaM mental health specialist Jide Ashimi – to develop an intensive artist development programme known as [Raw Sounds+](#). Out of this evolved the [Artists' Represent Recovery Network](#), funded by ACE and the GLA and convened by Raw Material, LAH and the Arts & Health Hub in 2023. An initial cohort of 10 creative health practitioners with diverse ethnic heritage took part in six paid training sessions and four action learning meetings before being invited to deliver creative sessions over two days in a SLaM mental health ward. This has inspired other programmes including Tamasha's Creative Wellbeing Lab.

Wandsworth's creative health community of practice now includes around 35

organisations. Every two to three months, Wandsworth offers professional development sessions, which have included speakers from South West London ICS. The London Borough of Lewisham [signposts](#) to support services for creative practitioners including those working in creative health. Although LAH is top of the list of support organisations, this list would benefit from a greater focus on health and wellbeing. The [Lewisham Fundraising Development Programme](#), funded for three years (2022–5) by Lewisham Council, provides free support to practitioners and groups working in the arts and culture. In 2023–24, Performing Medicine piloted a professional development programme for artist practitioners who wish to work in the creative health sector.

Among the many talent development organisations that exist in London are those working to overcome the social determinants of health and to diversify creativity, culture and heritage. Examples include [Theatre Peckham](#) – a black-led performing arts academy providing education and access to the theatre and film industry for children and young people experiencing disadvantage who live in Southwark – and the [Camden People's Theatre](#) – which offers professional development opportunities to artists experiencing marginalisation. Similarly, young people who have passed through rb&hArts' Vocal Beats programme and want to develop their musical careers have the opportunity to work with Youth Music, Sound Connections or the Roundhouse.

## SECTOR SUPPORT

Creative health practitioners in London benefit from having two sector-support organisations – London Arts and Health (LAH) and the Culture, Health and Wellbeing Alliance (CHWA) – at local and national levels respectively.

With partnership working at their core, these two organisations advance systems change. They foreground underrepresented groups and grassroots knowledge, giving voice not only to organisations but also to freelance practitioners who are so often at the core of creative health work.

In 2023, ACE accorded both LAH and CHWA the status of Investment Principles Support Organisation (IPSO). This shift from their previous NPO status shows how creative health is being integrated into national strategy, with an emphasis on supporting the sector via training, influencing and disseminating information to build impact and scale. CHWA has been able to increase capacity via a champions model, with regional volunteers being influential in drawing the sector together in their areas, picking up on problems and proposing localised solutions; LAH is one of CHWA's London champions. LAH and CHWA have also supported the creative health associates employed by the NCCH, which has involved sharing knowledge to inform NHS colleagues.

This sector-wide work is complemented by age-specific creative health support – from the [London Early Years Music Network](#) and [Wired4Music](#), both convened by Sound Connections, to [Flourishing Lives](#), a London-wide coalition for 'Creating a blueprint for excellence in arts and wellbeing services for older people'.

**Many of the people we spoke to expressed a strong desire for one-to-one support in the face of challenging situations.**

In 2021, the Baring Foundation gave the Claremont Project in Islington £9,500 for Flourishing Lives to provide therapist-

led [reflective practice](#) support for artists working in mental health contexts to help develop their working practice. Facilitators at Arts Network have taken part in these sessions as well as receiving mental health first aid training.

[Wellbeing in the Arts](#) helps to support the mental health of artists. In addition to this, participatory artists in London can draw on the Arts & Health Hub, which delivers four different types of support: professional development; a peer-to-peer group for artists with lived experience of mental health problems and those at risk of secondary trauma; supervision or 'work therapy' groups for artists working in challenging environments who need a reflective space; and one-to-one mentoring opportunities with industry professionals. Groups have variously met at Hoxton Hall, the Southbank Centre and Queercircle. The Hive, run by Team London Bridge, has also supported workshops,

either through commissioning or use of space, but the availability of consistent space remains an issue. Prior to the pandemic, there were around 300 London-based artists in the network, which expanded rapidly online as lockdown was implemented. The Arts & Health Hub currently has three-year funding from ACE (c.£105,000), the GLA (c.£20,000) and the Baring Foundation (c.£35,000).

Counterpoints Arts is developing artist networks, partnerships and creative programming across the arts, refugees and mental health. Daniela Nofal described this as 'nurturing an ecosystem of practitioners interested in the conversation around the mental health of communities'. This entails building support structures for people working with mental health, nurturing relationships and learning from artists whose practice is rooted in the social sphere.





# FUNDING AND COMMISSIONING

**In addition to the setting-based consideration presented above, funding and commissioning provide further clues about the scale, character and maturity of London's creative health sector.**

**The UK State of the Sector survey suggested that the majority of funding for creative health work came from ACE, trusts, foundations and local authorities, and it largely went towards service delivery.**

**During the course of our research, we spoke to representatives from:**

- Arts Council England (ACE)
- National Lottery Heritage Fund (NLHF)
- Paul Hamlyn Foundation (PHF)
- The Baring Foundation
- Local authorities
- The Culture, Health and Wellbeing Alliance (CHWA)
- Hospital arts leaders
- Cultural and heritage representatives
- Community creative health representatives

In 2017, ACE undertook scoping work in two areas of public policy – health and criminal justice. Since then, ACE's long-running Creative People and Places scheme has, somewhat inadvertently, supported place-based improvements in health and wellbeing through creativity and culture. This is consistent with ACE's 10-year strategy, [Let's Create](#), and related [Creative Health and Wellbeing](#) plan, the

latter of which commits to supporting the creativity of people and communities, especially in areas of inequity.

Director of Creative Health and Change at ACE, Hollie Smith-Charles, told us that that 'in the current National Portfolio, around one third of Organisations are delivering work in creative health'. Of almost 1,000 NPOs around England, 280 are in London, one third of which equates to 93. We conducted a preliminary analysis of ACE's London-based NPOs and identified 118 organisations that were either centred on creative health, supporting creative health as part of their programmes, running creative health projects or training or undertaking less explicit creative health work.

Added to this, organisations outside the national portfolio are eligible to apply for National Lottery project grants, and ACE published [specific guidance](#) in February 2024, covering creative projects in clinical and cultural settings and in the community. Hollie reported that 'funding for creative health project grants across England quadrupled between 2017 and 2022, from £4m p/a to £16m p/a'. Based on the London proportion of NPOs, we might assume that a quarter of current funding – £4 million per year – is centred on the capital's creative health.

In its previous strategy, the NLHF included a [wellbeing](#) outcome which saw investment in communities to build social capital. The current strategy, [Heritage 2033](#), outlines priorities for disbursing £3.6 billion over the next decade. Within this, heritage is broadly defined to include

'anything from the past that people value and want to pass on to future generations'. Among four investment principles is 'inclusion, access and participation'; this includes an ambition to increase diversity and lends itself to tackling the social determinants of health via enriched environments and consideration of structural inequities. The NLHF liaises with ACE and with trusts and foundations to coordinate support.

[Paul Hamlyn Foundation](#) (PHF) works towards a 'just society in which everyone, especially young people, can realise their full potential and enjoy fulfilling and creative lives'. Alongside a comprehensive portfolio of social justice giving, PHF supports several of the projects and organisations mentioned in this report, including Bounce, Global Generation, Speech Bubbles, Theatre Peckham, Camden People's Theatre, Reflecting Realities in the Classroom, RADiate and Shake! Grants range from £40,000 over two years to £232,000 over three years. Chief executive Moira Sinclair OBE spoke to us about how a consideration of wellbeing (as opposed to health) aids PHF's discussions about who is involved in making creative work. The charity is moving in a similar direction to London as a Creative Health City, with a focus on genuine co-design, co-production, dispersed leadership, equity and diversity in the community.

Between 2010 and 2019, the Baring Foundation invested its arts funding in creative ageing, much of which had a direct or indirect health and wellbeing dimension. When the foundation began to support creative approaches to mental health in 2020, almost half of the 87 funded organisations in the first year were found to have an annual turnover of less than £100,000 and almost a quarter less than £30,000. Accordingly, grants were

revised downwards to between £8,000 and £12,000 per year, depending on organisational turnover, with up to £50,000 for projects spanning a longer period.

We encountered other exemplary funders such as the Mercers' Company, which, through its charitable arm, supports a wide range of creative health activity including:

- Early-years creative activity to support childhood development including literacy and oracy
- Creative health activities for young people, including those with disabilities, in schools, cultural organisations and the community, to support mental health, wellbeing, resilience and attainment
- Creative health for working-age adults including refugees
- Creative activities for older people, including those from global majority backgrounds, in the community or residential care, who might be isolated, lonely, frail, visually impaired or have dementia
- Intergenerational creative health work
- Community gardens including those involving people with mental health problems
- Participatory creative activity with young carers

The charity of the City of London Corporation, the [City Bridge Foundation](#), supports children, young and older people and mental health as well as building a robust civil society. The [London Community Foundation](#) increases equity by supporting small organisations and inspiring community leaders to respond to local challenges. The [Foundation for Future London](#) works in East London, 'putting funding, resources and support straight into local people's hands' to 'provide new jobs, learning, training and educational programmes through the

means of arts, culture, innovation, public realm and creative placemaking’.

UK-wide [Garfield Weston Foundation](#) supports charities working in community, environment, education, health, arts and heritage. The [Prudence Trust](#) has committed to exploring what works for young people’s mental health and funds a three-year training programme on cultural social prescribing for south London’s link workers, led by Performing Medicine on behalf of Dulwich Picture Gallery in collaboration with the Tessa Jowell Health Centre. The [Creative Health Trust UK](#) offers grants to hospices to fund creative therapies, environments and materials.

For creative health organisations working to tackle the social determinants of health, the [Rayne Foundation](#) supports ‘creative ways of tackling entrenched social issues through the arts, health and wellbeing’. In a similar vein, [John Lyon’s Charity](#) believes in ‘transforming the lives of children and young people by creating opportunities to learn, grow and develop through education’. Supported art forms range from crafts, growing and shared reading to creative writing, visual arts, music, singing and theatre. The [Henry Smith Charity](#) offers grants to reduce social and economic disadvantage and supports Sydenham Garden.

**Richard Ings from ACE emphasised that ‘None of this work is sustainable in the long term just through ACE funding or Paul Hamlyn or trusts and foundations [...]; if it’s going to be sustained, it has to be sustained by the health system. And that doesn’t just mean the NHS, but it means public health, local authorities’.**

At present, there is no ICS-wide support for creative health. Within hospitals, the major source of funding for creative health is their associated charities. So, for example, the arts programmes and collections at Imperial College Healthcare Trust are managed by [Imperial Health Charity](#), which provides the entirety of its £300,000 annual budget. Likewise with the Royal Marsden Cancer Charity, which provides the £100,000 budget for an annual arts programme and encourages [arts-focused donations](#). The nascent arts programme at Kingston Hospital Foundation Trust is currently working without a budget.

Arts teams are often funded by the hospital charity to carry out their work as members of the NHS workforce. At GOSH Arts, half of staff costs are covered by the charity and half by the hospital trust. At rb&hArts, core staff costs are covered, somewhat reluctantly, by the hospital charity, with the cost of freelance practitioners largely covered through external fundraising. This creates inequities between salaried and project-funded workers and between health and arts professionals.

Sometimes charitable funding for core costs is supplemented by donors, trusts and foundations to cover programming. At rb&hArts, for example, Vocal Beats costs £110,000 per year, almost half of which is covered by Youth Music with the remainder coming from the hospital charity.

In primary care, core costs at Creative Health Camden are covered by a private donor, and external funding is sought for particular projects from such sources as ACE, the Baring Foundation and Camden and Islington Trust. Spotlight is core funded by Poplar Housing and Regeneration Community Association



(HARCA) – which was instigated by Bromley by Bow Centre’s founder, Andrew Mawson – with hubs supported by Tower Hamlets Council and the HealthSpot clinic funded through the Tower Hamlets GP Care Group.

Within local authorities, we have seen that work at Wandsworth Council has been funded via Section 106 and public health. We also heard from Flora Faith-Kelly at SELICS that the South East London boroughs’ health inequalities funds are open to community-led creative health approaches.

**In the absence of core support, creative health organisations are forced to compete for time-limited grants from a finite pool of funders.**

A 2022 [report](#) found that £900 million is spent by UK charities on making funding applications and that ‘Small and medium charities face particularly high costs to access funding, having to devote more than a third of their resources to applying for charitable grants’. Indeed, we learned that Bromley by Bow Centre spends about a third of its effort seeking, monitoring and reporting on funding and maintaining donor relationships.

**Dan Hopewell told us that ‘Being a community charity is a high-powered game in which those with the best bid writers are funded’.**

It is clear that this situation is unsustainable.





# REFLECTIONS

CREATING  
A SHARED

LANGUAGE  
TOGETHER!



**Research has the power to bring together many disparate views. With this project, we have been privileged to access the memories and experiences of a range of respected people working in creative health. Synthesising what we heard – and read – has brought London’s creative health sector into sharper focus.**

## **SCALE, CHARACTER AND MATURITY**

While there is no simple way to convey scale, we have looked at a number of indicators – from the volume of projects and organisations currently operating to the likely size of the workforce, number of beneficiaries and funding invested. We were surprised by just how much creative health activity we were able to uncover, and we are aware that much more work is happening without being labelled as creative health.

In considering the character of the sector, we have looked at the main subsectors in which creative health activity takes place, describing the particularities of work in health and care settings, in the community, in cultural and heritage venues and at educational sites.

Taking scale and character together, it is clear that an abundance of high-quality, varied work is happening across the capital, encouraging and celebrating creativity, culture and heritage in the lives of Londoners. Some of this work has deep roots, dating back several decades, but the sector’s maturity does not preclude new initiatives from springing up.

### **a) Joined-up working**

London’s creative health sector is making a contribution to the capital’s health, wellbeing and equity that cannot be understated. At the same time, the sector

faces major challenges, not least its disparate nature, with work often taking place in localised pockets, unconnected to the wider movement. The head of arts at one of the capital’s best-established hospital programmes told us they would welcome a ‘resource to help find local artists and organisations in the same field’. A director of a natural heritage organisation told us they would like to be better networked to their peers and better able to share their expertise with smaller groups. London becoming a Creative Health City would help to secure the future of the sector by fostering such connections.

### **b) Long-term funding**

We asked all our interviewees what would help them in their work. Almost universally, the answer that came back was: long-term funding.

In 2006, director of the National Network for Arts and Health, Lara Dose, noted that a ‘lack of financial resources is perhaps the single largest threat to the field’. Almost two decades later, there is still no statutory investment in creative health. It was suggested to us that a tiny percentage of health funding would go a long way and have a significant multiplier effect, leading to upstream savings for the health system in the medium- to long-term and greater security for the creative health sector.

**Despite a substantial evidence base and a certain respect for creative health work, health and care commissioners are reluctant to take the risky first step of investing in the long-term potential of creative health,**

which requires time and belief. Conni Rosewarne at NELICS told us that there remained a lack of connectivity between the health/care and creative/cultural/heritage sectors and a gap in the knowledge about how to prescribe to creative health activities. Similarly, chief executive of Hoxton Hall, Stuart Cox, told us that, in cultural organisations and the community, an induction into the basics of creative health – including social prescribing – was needed to ensure that everyone was working at the same level, because no one fully understood the landscape and the language could be quite alienating.

London's ICSs are in the process of making 30% cuts to their budgets, which will have a devastating impact on the provision of services. Within local authorities, reductions in funding from central government have left everyone competing for crumbs.

We heard from someone working in hospital arts that, since 2010, the effects of austerity have become an urgent reality as services have been eroded with sometimes fatal consequences. Others working in the sector told us that community arts organisations, museums and libraries are increasingly expected to pick up the slack without any additional resources or specialist training. It was impressed upon us that the sector should not be expected to solve huge social problems in the absence of funding for the work and the workforce. Without this support, experts told us, the sector needs to push back.

We heard repeatedly about the strain a lack of financial security puts on artists, organisations and participants. In addition to its being incredibly time-consuming to run short-term projects, this 'disrupts the process of engagement with communities as well as being soul destroying for the

people who are delivering the activity'. Consistency – of schedule and facilitators – is paramount for participants, enabling relationships to be built over time.

**Antonia Attwood described workshops at Creative Health Camden as a 'lifeline', alluding to the 'amount of people that say to me "I wouldn't be here without this project"'.**

**The lack of long-term funding for creative health work denies the workforce a place of stability.**

Freelance practitioners are left exposed and unable to make a living from their creative health work. There is little scope for organisations to invest in professional development or in fostering partnerships with ICSs or local authorities. Several people told us it would help to have the cost of an administrative post covered to allow the creative director(s) time and space to innovate.

### **c) Workforce development**

Workforce development was identified as a priority by NCCCH director, Alex Coulter. From members of the workforce, we received a range of ideas for how this might look.

**Artists working with health and wellbeing identified a need for practical support.**

In community and cultural/heritage settings, a clear desire was expressed by facilitators for a best practice guide that would specify optimal group sizes, provide

safeguarding guidance and recommend rates of pay, which could be given by practitioners to organisations to set the parameters for their work.

CHWA's [quality framework](#) covers safeguarding, rates of pay and the need for time to prepare, reflect and build relationships. It is designed to help practitioners set parameters, and evaluation suggests that freelancers are using it in this way. NAHN is in the process of developing a guide specifically for practitioners working in hospitals.

We received a sense that practitioners are teaching themselves to facilitate sessions, which makes it difficult for new people to come into the sector. More than one of the artists we interviewed had turned to the arts therapies for [training](#). In London, the development of arts therapies, in parallel to what we think of as the creative health sector, has radical beginnings in the 1930s.

Artist-facilitators told us of a wide range of training needs from the practicalities of running programmes to applying for funding. Alongside training and mentoring, there is a demand for a peer-support network that meets regularly. The Arts & Health Hub is a useful resource in this area.

#### **d) Evidence**

As is often the case in such discussions, demand was expressed for a research portal and evaluation tools, enabling discussions about the value of this work that people – including clinicians – can understand. Mary Paterson at rb&hArts would like to see rigorous evaluation that illustrates best practice as well as failures, amplifying the patient's voice, which is often neglected within the NHS.

#### **e) Diversity**

Another significant challenge for the sector is diversification of the workforce

and its leadership. Alex Coulter told us it was problematic that the workforce was not more representative and signalled NCCCH's intention to host a workshop based on the [Inclusion Framework For Change](#). Responsibility at a national level sits primarily with CHWA and ACE. CHWA is developing a theory of change, to be launched in summer 2024, and has drawn up a [roadmap](#) 'to build an alliance which is representative of and relevant to the people most likely to benefit from changing the culture of health and wellbeing', particularly tackling systemic racism and ableism.

**Even in a diverse city like London, there is little diversity at leadership level within the established creative health sector.**

We heard time and again that the beneficiaries of creative health activities were reflective of local communities but the staff running and leading the organisation were not. We know that discrimination works both directly and indirectly, with people tending to recruit people who look, think and act like them, denying others a chance to gain the experience needed to progress.

In 2023, with additional funding from City Bridge Foundation, LAH convened the first meeting of Diversity in Leadership in Creative Health, which aims to diversify leadership and to support people to stay in leadership roles. The group is chaired by Tola Dabiri and involves a range of participants, including Mah Rana, Daniel Regan, Errol Francis and Jide Ashimi. The group aims to meet quarterly, to reflect on how a programme of work might support creative health leaders from global majority backgrounds and how LAH might

support this programme, securing funding and training and offering a longer-term perspective.

Spotlight is developing a cohort of young people from diverse backgrounds who understand the power of creativity to support health and wellbeing.

**Spotlight told us that barriers did not disappear when young people were employed by institutions; change needed to come from within,**

and diversification of the sector would rely on organisations making people from deprived and minority-ethnic backgrounds feel welcome. Moira Sinclair OBE noted that organisations understood this at an operational level but some had not yet realised that this would require structural change.

This observation fits with Art Fund research, conducted by two black-led organisations – Museum X and Culture& – into ethnic diversity in the arts and heritage

sector (1998–2021), which [found](#) that work on diversity had tended to target entry-level roles. Among ACE NPOs, museums have the lowest diversity, with only 6% of workers identifying as black, Asian or ethnically diverse. Artist-facilitator at Kazzum Arts Monique Jackson told us that targeted opportunities were needed to redress the balance, with paid training and meeting time, which allows flexibility, promotes diversity and forms part of a collective anti-oppression model.

Responding to the under-representation of disabled people in culture and heritage, [Curating for Change](#) has been offering eight 18-month fellowships and eight 40-day traineeships in museums to 'create strong career pathways for d/ Deaf, disabled and neurodiverse curators'. As part of this national programme, the [Horniman Museum and Gardens](#) hosted a trainee, as did the [Imperial War Museum](#) at its Duxford site, with London's institutions otherwise conspicuous by their absence. It is clear that such targeted work needs to be undertaken in London's creative health sector if it is to be representative of the metropolis it serves.



# REFLECTIONS

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The creative health sector in London has deep roots, with new initiatives continuing to spring up

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A wide range of creative health activity is happening across London

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Creative health activities can be found in health and care settings, in the community, in cultural and heritage venues and at educational sites

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The creative health sector is making a significant contribution to the capital's health, wellbeing and equity

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The sector is often quite disparate and would benefit from being better networked

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In the absence of statutory provision, the creative health sector is woefully underfunded

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Health and care commissioners remain reluctant to invest in the long-term potential of creative health

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Cuts to health and local authority budgets are having a devastating effect, with community organisations increasingly expected to ameliorate the effects of austerity

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Without additional resources or training, the sector is unable to conform to this expectation

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Lack of long-term funding disrupts continuity and denies participants a lifeline

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Lack of long-term funding deprives the creative health workforce of stability and room to innovate

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Workforce development is a priority, with clear demand expressed by practitioners for practical tips, training, mentoring, networking and peer support

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Evaluation and research need to be rigorous and shared more widely

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Diversification of the sector's workforce and leadership is an urgent challenge

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Change needs to come from within, with organisations making people from deprived and diverse backgrounds feel welcome.

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**CHS** HEALTHY  
LIVING

# RECOMMENDATIONS TO THE SECTOR

IT'S A PLACE OF  
**POSSIBILITY**

WHERE WE CAN  
HAVE GOOD IDEAS  
**TOGETHER!**



**Taking account of the views of people working in London's creative health sector, we have drafted four overarching recommendations. We hope that these recommendations will have resonance for the creative health sector beyond the capital and that national bodies will derive value from them in devising future strategy.**

## **1. ADVOCATE FOR CONTINUED SUPPORT**

London's clear need for creative health must be matched by financial investment. In order to ensure that the sector fulfils its potential, it is vital that long-term funding is secured. This is particularly pertinent to work on prevention, equity and public health, which falls under the purview of the NHS and local authorities.

At a local and national level, it will be necessary to keep advocating for systemic investment in creative health. Political leaders – including Members of Parliament and the Mayor of London – should be invited to make a commitment to creative health. A London-wide network of creative health champions – including leads in ICSs, NHS trusts and local authorities – should be convened to devise the best routes into long-term funding.

We urge all commissioners and funders to foreground their contribution to creative health. This includes the support of activities that tackle the social determinants of health by enriching environments through creativity, culture and heritage and by tackling the structures and forces that militate against people fulfilling their potential. We encourage new funders to enter into, or return to, this space, and we applaud those funders that work in a concerted way to maximise impact.

We recommend that a dedicated fund for London's creative health is set up. Ring-fenced funding would not only enable continuity of service but also facilitate the evaluation of long-term impact. A portion of this funding ought to be diverted to communities to enable culturally appropriate activities to be delivered by community members, as is happening in [Bradford](#). Increasingly, this will involve investment at a hyper-local level in the ordinary, everyday spaces people use.

As the majority of support has tended to find its way into earlier and later life, there is something of a funding gap in the middle years for working-age adults and people out of work. This demographic intersects with social prescribing and ought to attract proportionate investment.

## **2. BRIDGE THE GAP BETWEEN HEALTH AND THE ARTS**

There remains a gulf between people working in health and care and those working with creativity, culture and heritage. Within ICSs, health and care organisations, local authorities, cultural/heritage organisations and the community, a need has been identified for more joined-up working.

At ICS level, a dedicated creative health lead is needed to bridge the gap between health/care and creativity/culture/heritage, speaking the language of both sectors and recommending appropriate activities. In this endeavour, the translational role of allied health professionals, such as physiotherapists and occupational therapists, will be significant.

A similar situation persists within local authorities, where work is taking place at the forefront of public health and social care. Each of London's local

authorities would benefit from scoping and foregrounding the creative health work taking place in their area and thinking about how this work can help them to achieve their objectives as part of their wider cultural strategy. Creative health leads in each of London's five ICSs, 32 boroughs and the City of London would be able to advance this work and encourage collaboration.

More opportunities are needed for health and care professionals and link workers to experience arts-based activities and training which helps them to understand the value of arts and culture and to reflect on and enhance their own practice. Pan-London bodies could use their advocacy power to help secure articles about creative health in the professional health and social care press to stimulate demand.

Within cultural, heritage and community arts organisations, there remains a need for an introduction to health and wellbeing for those who might be unfamiliar with this way of working. This might take the form of a guidebook or videos, containing bite-sized information about creative health. Such an introduction could usefully be complemented by insights into developments in the health system, including social prescribing, which is not universally known about or understood. This will enable conversations between people in the health system, those working in creative health and others undertaking similar work who might not understand it as creative health.

### **3. HELP SUPPORT EFFORTS TO DIVERSIFY THE SECTOR**

In addition to London Arts and Health's Diversity in Leadership in Creative Health panel, work needs to be undertaken to diversify the creative health workforce

at every level. A sustained effort will be needed to effect structural change within organisations delivering creative health. This is perhaps especially true of the culture and heritage sector, which is least representative of its neighbouring communities. This might usefully be undertaken in association with the [Anti-Racist Action Group \(ARAG\) in Arts & Wellbeing](#) – developed by Flourishing Lives, the Race Equality Foundation and HEAR Network – which 'includes representatives from a diverse range of black, Asian and minority ethnic groups and organisations, to ensure that community members are directly involved in the strategy, design and delivery of cultural programmes across the sector'. Help could also be sought from community arts organisations, particularly those led by and working with people from diverse backgrounds who understand the value of creativity, culture and heritage to health and wellbeing. This might be complemented by diversity and anti-racism training for less representative organisations.

Also in a bid to increase diversity, creative health work should be promoted in communities, schools, further education colleges, art schools, medical schools and universities. More paid training opportunities should be created for people from global majority background to not only enter the sector but also to lead it.

### **4. PROVIDE MORE SUPPORT TO PRACTITIONERS**

The sector needs better trained and supported practitioners. More accessible, flexible training is needed at every level.

Basic training, including safeguarding, should be provided to artists wishing to make the sometimes-daunting transition to work in health and social care. This

should not be done in such a way that over-professionalises the sector, creates barriers to entry or operates at the expense of creative and critical thinking. Once the Creative Health and Wellbeing Alliance's training hub is active, it will be possible to identify and fill gaps in London's skills provision. Existing resources to guide creative health practitioners, such as the Creative Health and Wellbeing Alliance's [quality framework](#), should be publicised, with training provided where required.

In health and care settings, a shadowing scheme would be useful, whereby more experienced practitioners are accompanied by less experienced artists, ideally those local to the site. In cultural,

heritage and community settings, artists with a range of experience should jointly facilitate sessions, enabling a sharing of responsibility and an exchange of perspectives.

Artists working in the creative health sector should be offered trauma-informed support in a sustained way, with regular funding and a fixed venue. Pan-London bodies need to understand how to support work in this area.

And finally, a London-based repository of creative materials that could be accessed by health, care and creative practitioners, akin to the [Library of Things](#), would be immensely useful to the sector.



# APPENDICES



# APPENDIX A

## EVOLUTION OF LONDON'S CREATIVE HEALTH SECTOR

Appendix A contains data points gathered throughout the research process. Pioneers are linked to specific data points when individuals were mentioned in connection with those events. Any gaps in this column indicate that no pioneers were specifically attributed to those events.

### HEALTH AND CARE

Date	Event	Pioneers
1736–7	Hogarth murals at St Bartholomew's Hospital	William Hogarth
1911	Committee to promote murals in hospitals	D. S. McColl Charles Aitken
1938	Finsbury Health Centre mural by Gordon Cullen	–
1947–9	Barbara Hepworth sketching surgeons in London hospitals	Norman Capener
1948	The Council for Music in Hospitals (now Music in Hospitals and Care)	Sheila McCreery
1951	Westminster Hospital acquires Paolo Veronese's <i>The Resurrection</i>	Rev. Christopher Hildyard
1959	Paintings in Hospitals	Sheridan Russell
1975	St Thomas'; Hospital wing opens with 0.1% of budget for artworks	–
1979	King's Fund Murals for Hospital Decoration (later Art in Hospitals)	Geoffrey Phalp Lesley Greene Jeremy Hugh Baron
1981	Bedside Manners musical theatre in hospitals	–
1980s	St Stephen's Hospital collaboration with Royal College of Art	James Scott Sir Hugh Casson Quentin Blake
1992	Arts St George's	Sarah Grainger-Jones
1993	Chelsea & Westminster opens with arts programme (now CW+)	James Scott Richard Staughton Adam Lawrence Susan Loppert (1993–2003) Victoria Hume (1998–2002)

Date	Event	Pioneers
–	–	Trystan Hawkins (2013–) Rosalia Staricoff Tamsin Dillon
1994	Hammersmith Hospitals NHS Trust sets up a trust-wide arts committee	Daphne Glyn Rosemary Harris (2004–15) Lucy Zacaria (2015–)
1995	Homerton Hospital arts programme	Shaun Caton
1996	Vital Arts at Bart's Health NHS Trust	Jane Willis (1994–2001) Moira Sinclair OBE (2000–4) Anne Mullins (2004–15) Catsou Roberts (2015–)
1996	Network Arts (now Arts Network) piloted with South London and Maudsley (SLaM) NHS Trust	Helen Shearn Matthew Couper (2012–14)
1997	Bromley by Bow Centre becomes a healthy living centre	Rev. Andrew Mawson Dr Sam Everington Alison Trimble
1997	Bethlem Gallery at Bethlem Royal Hospital	Beth Elliott (2007–18) Sophie Leighton
1998	Guy's and St Thomas' Hospital (charity) appoints an arts coordinator and, later, a performing arts manager	Karen Sarkissian (1998–2011) Yvonne Farquarson (2008–12)
1998	Nightingale Project at South Kensington and Chelsea Mental Health Centre	Nick Rhodes Stephen Barnham
1999	North West London Hospital Arts	Candice Hurwitz Sue Ridge
2000	InterAct Stroke Support	Caroline Smith
2002	Royal Brompton and Harefield arts programme (rb&h)	Victoria Hume (2002–15) Karen Taylor (2014–20) Conni Rosewarne Amanda Smethurst, Arts Service Manager, Royal Borough of Kensington and Chelsea (2002–8)
2005	University College London Hospital Arts & Heritage	Guy Noble (2005–)
2006	Great Ormond St Hospital (GOSH) Arts	Victoria Jones (2006–13) Susannah Hall (2013–21) Vivienne Reiss (2017–22)
2007	Imperial College Healthcare Trust	Lucy Zacaria
2010	Free Space Arts at Kentish Town Health Centre	Dr Roy Macgregor John & Elizabeth Horder Iona Heath Daniel Regan



Date	Event	Pioneers
2010	CNWL Arts in Health established by Central and North West London NHS Foundation Trust	–
2015	Bethlem Museum of the Mind	–
2016	Guy's and St Thomas' NHS Foundation Trust (disaggregated from the charity) directly appoints an arts team	Liz O'Sullivan Christina Andersen Marie-France Kittler
2016	Hospital Rooms	Tim A Shaw Niamh White
2017	Royal Marsden Arts Programme	Ben Hartley
2021	The Healing Arts exhibition at Saatchi Gallery	CW+

## COMMUNITY

Date	Event	Pioneers
1883	The Harrow Club	–
1887	Blackfriars Settlement	–
1889	St Margaret's House founded	–
1926–50	The Peckham Experiment into the impact of 'self-organisation' by communities and families on health and wellbeing includes activities such as ballroom dancing and dressmaking	–
1963	Ovalhouse (now Brixton House)	–
early 1970s	Free Form Arts	Martin Goodrich, Jim Ives Barbara Wheeler-Early
1972	London Bubble	Sylvan Baker
1973	Look Ahead Housing Association	Mary Jones
1974	Chickenshed Theatre Company	Jo Collins Mary Ward
1976	Shape Arts	Gina Leveté
1976	Chats Palace	–
1976	Spitalfields Music	Judith Serota, Philip Flood, Clare Lovett, Sarah Gee, Abigail Pogson
1977	Live Music Now!	Yehudi Menuhin
1978	Carl Campbell Dance Co 7	–
1979	Portugal Prints	Gaynor Reynolds
1979	Spare Tyre Theatre Company	Clair Chapwell, Harriet Powell, Katina Noble
1979	Academy of Indian Dance (now Akademi)	Tara Rajkumar
1979	Clean Break Theatre Company	Jackie Holborough Jenny Hicks

<b>Date</b>	<b>Event</b>	<b>Pioneers</b>
1980	Graeae Theatre Company	Nabil Shaban Richard Tomlinson
1981	Ujaama Arts	–
1982	Apples and Snakes at the Albany	–
1983	Age Exchange	Pam Schweitzer
1983	Heritage Ceramics	Anthony Ogogo
1984	Adzido Dance Ensemble	George Dzikunu Hilary Carty
1985	All Change	Jim Mason
1986	Pan Intercultural Arts	–
1986	Croydon Association for Pastoral Care in Mental Health	–
1987	Lewisham Youth Theatre	–
1987 (1989)	Green Candle Dance Company	Fergus Early
1987	Sakoba	Bode Lawal
1987	Heart n Soul	Mark Williams Alix Parker
1987	East London Regional Dance Council (now East London Dance)	–
1987–2023	Studio 3 Arts	–
1988	Roots Community (now 198 Contemporary Arts and Learning)	Zoë Linsley-Thomas John 'Noel' Morgan
1988	Studio Upstairs at Diorama	Douglas Gill Claire Manson Jo Hill
1988	Neti-Neti Theatre Company	–
1989	Corali	Virginia Moffatt
1989	Tamasha Theatre Company	Kristine Landon-Smith Sudha Bhuchar
1989	Kazzum Arts	Peter Glanville
1989	Magic Me	Susan Langford
1989	Mahogany Carnival Arts	Clary Salandy Michael Ramdeen
1989	Turtle Key Arts	–
1989	Y Touring Theatre Company	Nigel Townsend
1989	Entelechy Arts	–
1990–2018	CoolTan Arts	Michelle Baharier
1990	Badejo Arts	Peter Badejo
1991	Cardboard Citizens	Adrian Jackson
1991–2	Art of Change (evolved into cSPACE in 2002)	Loraine Leeson

<b>Date</b>	<b>Event</b>	<b>Pioneers</b>
1992	Core Arts	Paul Monks
1992	Sound Minds	Paul Brewer et al
1992	Futures Theatre Company	Caroline Bryant Kerry Brabant
1992	Westminster Arts	Kath Gilfoy
1993	Central & Cecil	–
1993	Raw Material	Tim Brown
1993	Rosetta Arts	Yvonne Humble
1995	Hackney Music Development Trust	–
1995	Daily Life Ltd	Bobby Baker
1995 – 2017	Artspace at ACAA (Association for Cultural Advancement through Visual Art)	–
1996	IROKO African Theatre Company	Alex Oma-Pius
1996	Cathja	–
1996	Fevered Sleep	Sam Butler David Harradine
1997	Rosetta Life	Lucinda Jarrett
1997	Islington Music Forum (now Key Changes: Positive Mental Health Through Music)	–
1997	Write to Life at Freedom from Torture	Sonja Linden
1997	Khayaal Theatre Company	Lugman Ali Eleanor Martin Mo Sesay
1998	Art and Soul	Maggie Hughes
1999	Art4Space	Julie Norburn, Elinor Seath and Danielle Lees-Smith
1999	Centrepieces Arts	–
1999	Outside Edge Theatre Company	Matt Steinberg
1999–2012	Mad Pride	Mark Roberts Simon Barnett Robert Dellar Pete Shaughnessy
2000	Mental Health Community Theatre Company at Arcola Theatre	Mehmet Ergen Leyla Nazl
2000	Abundance Arts	Folasade Babarinde
2002	Sound Connections	Antony MacDonald David O'Donnell Lesley Wood Pamela McCormick
2002	Ladder to the Moon	–
2002	UP Projects	–

<b>Date</b>	<b>Event</b>	<b>Pioneers</b>
2002	Sydenham Garden	Dr Jim Sikorski Sarah Sikorski
2003	Mental Fight Club	Sarah Wheeler
2004	Fuel	Louise Blackwell Kate McGrath Sarah Golding (née Quelch)
2007	Bernie Grant Arts Centre	–
2008	Creative Routes: Bonkersfest	SarahGem Tonin (organiser) Bobby Baker (artist)
2009	Lyrinx Organix	–
2013	Fun Palaces	Sarah-Jane Rawlings Stella Duffy
2014	Spotlight	–
2015	Healing Justice London	Farzana Khan
2016	QueerCircle	Ashley Joiner Frances Williams
2017	Poplar Union	–
2019	Southwark Culture, Health and Wellbeing Partnership (SCHWeP)	William Nicholson Cedric Whilby, Nikki Crane
2021	Thriving Through Culture	Thrive LDN / GLA
2022	Creative Health Havering	–

## ***CULTURE AND HERITAGE***

<b>Date</b>	<b>Event</b>	<b>Pioneers</b>
1972	Half Moon Theatre Company	–
1974	Battersea Arts Centre	–
1975	Jacksons Lane	Nicky Gavron Melian Mansfield Jan Brooker
1978	The Albany reopens as a purpose-based building	–
1980–2005	LIFT – the London International Festival of Theatre	Rose Fenton Lucy Neal
1984	Art for the Unemployed (start of social programme) at Dulwich Picture Gallery	Gillian Wolfe
1985	Royal Opera House 'Invitation to the Ballet'	–
1989	Sadlers Wells Company of Elders	–
1994	Wigmore Hall Learning and Participation (Music for Life)	–
1998	The Roundhouse Trust	–

<b>Date</b>	<b>Event</b>	<b>Pioneers</b>
2000	Tate Modern work with Enhancing the Healing Environment	Liz Ellis
2000	Camden Arts Centre runs creative programme with participants from a day hospital	–
2006	Southbank Centre undergoes programming shift that aims to broaden access and better reflect the communities the organisation serves	Jude Kelly Gillian Moore Shan Maclennan
2007	Tate Britain (work with Mental Fight Club)	Sarah Wheeler Felicity Allen
2010	English National Ballet: Dance for Parkinson's	Fleur Derbyshire-Fox
2011	Creative Families at South London Gallery	Helen Shearn Frances Williams Heather Kay Katriona Beales
2012	Supersmashers at South London Gallery	–
2012	Serpentine Gallery Art + Care = A Future	Janna Graham
2014	The Restoration Trust	Laura Drysdale
2016	Horniman Museum begins partnership with SLaM Recovery College	–
2017	V&A dementia programme	–
2017	London Philharmonic Orchestra OrchLab programme started	–
2017	The Exchange Erith Ltd.	–
2018	The Arts Centre Hounslow inaugural festival of Mental Health and Wellbeing	–
2018	The Garden Museum Clay for Dementia Programme begins	–
2020	English National Opera + Imperial College Healthcare: Breathe singing for Long COVID	–
2020	Dulwich Picture Gallery becomes cultural partner to Tessa Jowell Health Centre	Jennifer Scott
2021	Museum X	Sandra Shakespeare Errol Francis Tracey Sage
2023	Tate Mobile Arts Programme (Liverpool Ashworth Hospital)	–
2023	London Symphony Orchestra Connect programme	–

## MEDICAL EDUCATION

Date	Event	Pioneers
1998	Kings College Medical School starts using role play in teaching	–
2002	Professor of Medicine and the Arts appointed at King's	Brian Hurwitz
2003	Performing Medicine established at Queen Mary University of London (QMUL)	Suzy Willson
2005	MA in Literature and Medicine at King's	Brian Hurwitz Neil Vickers
2010	MSc in Medical Humanities at King's	Brian Hurwitz Lara Feigel
2011	Creative Enquiry modules initiated at QMUL	Louise Younie
2014	St George's, University of London offers humanities-based components of medical degree	Annie Bartlett
2015	Clinical Humanities piloted at King's Faculty of Dentistry	Flora Smyth Zahra
2016	Imperial College London introduces BSc in Medical Science, with Humanities, Philosophy and Law	Giskin Day
2016	Queen Mary's University MSc in Creative Arts and Mental Health	Bridget Escolme
2017	MSc in Global Health validated at St George's, University of London	Carwynn Hooper
2019	Scaling-up Health-Arts Programmes: Implementation and Effectiveness Research (SHAPER) funded by Wellcome at King's	Nikki Crane Tony Woods
2019	Creative Practices, Education and Wellbeing Research Network at University of the Arts London	–
2019	Open Spaces programme piloted at St George's, University of London	Deborah Padfield
2020	MA in Theatre for Community and Education at Mountview Academy of Theatre Arts	Maria Askew
2020	Institute for Social Impact Research in the Performing Arts at Guildhall School of Music	–
2021	MASc in Creative Health at UCL	Helen Chatterjee Thomas Kador Stacy Hackner

## NATIONAL DEVELOPMENTS AND SECTOR SUPPORT

Date	Event	Pioneers
1903	Workers Education Association	–
1948	Music in Hospitals and Care	–
1958	Nordorff Robbins Music Therapy	–
1964	British Association of Art Therapists	Adrian Hill Edward Adamson
1968	Gulbenkian Foundation starts supporting artists' residencies in community settings	–
1973	Hospital Arts, Manchester (now LIME)	Peter Senior Brian Chapman Langley Brown
early 1980s	Arts in Health Forum	King's Fund
1981–86	GLC's Arts and Recreation Committee	Tony Banks (chair May 1981–Jan 1984) Peter Pitt (subsequent chair) George Nicholson (chair community arts sub-committee)
1983	National Out of School Alliance	–
1983	Conference: Art and the National Health Service, King's Fund	Sir Patrick Nairne
1983	King's Fund prints	Richard Cork Richard Long Anish Kapoor Bruce McLean
May 1984	View Through a Window May Influence Recovery from Surgery' ( <i>Science</i> article by Roger Ulrich)	Roger Ulrich
December 1984	Art in Hospitals' ( <i>British Medical Journal</i> article by Hugh Baron and Lesley Greene)	Jeremy Hugh Baron Lesley Greene
1985	Attenborough Report on the Arts and Disabled People	Richard Attenborough Peter Senior
May 1988	Arts for Health founded at Manchester Polytechnic	Peter Senior
1992	Architects for Health	–
1993	Seminar on Arts and Health, Wellcome	–
1993	Senior & Croall, <i>Helping to Heal: Arts in Health Care</i> (Gulbenkian)	Peter Senior Jonathan Croall
1 June 1996	Peter Scher, <i>Patient-focused architecture for health care: a study for Arts for Health</i>	Peter Scher

Date	Event	Pioneers
1 July 1996	Charles Kaye & Tony Blee, <i>The Arts in Health Care: A Palette of Possibilities</i>	Charles Kaye Tony Blee
16 December 1996	Meeting convened by Sir Kenneth Calman (chief medical officer) at DH	Sir Kenneth Calman Gerry Malone (health minister)
1997	<i>Use or Ornament?</i>	François Matarasso
September 1997	Conference: The Arts in Health Care: learning from experience, Roehampton Institute	–
March 1998	Windsor I. Humanities in Medicine: Beyond the Millennium	Peter Williams Richard Parrish Kenneth Calman
July 1999	<i>A Report to the Social Exclusion Unit: Arts &amp; Sport</i>	Department for Culture, Media and Sport, Policy Action Team 10
September 1999	Windsor II. Making it Happen	–
1999	Haldane & Loppert, <i>The arts in health care: learning from experience</i> (King's Fund)	–
1999	Culture, Health and the Arts, World Symposium (CHARTS), Manchester	Peter Senior
2000	Centre for the Arts and Humanities in Health and Medicine, University of Durham	Kenneth Calman Mike White Jane Macnaughton
2000	Enhancing the Healing Environment (King's Fund)	Sarah Waller
2000–6	National Network for Arts in Health	Lara Dose
2000	London Arts in Health Forum (now London Arts and Health)	Jenni Regan Damian Hebron Victoria Hume Anna Woolf
2000	i am london arts and mental health network launch	–
December 2002	Richard Smith editorial in <i>British Medical Journal</i> calls for 0.5% of health budget to be diverted to the arts	Richard Smith
2003	<i>Invest to Save: Arts in Health</i> , HM Treasury	Clive Parkinson
2004	Rosalia Staricoff, <i>Arts in health: a review of the literature</i> (ACE)	Pauline Tambling
2004	London Libraries Consortium	–
2005	Creative Minds (London Arts and Mental Health Forum)	Joanna Gore Helen Shearn
2005	<i>Sun</i> headline 'Taking the Picasso'	–



Date	Event	Pioneers
2005	Joy Windsor, <i>Your health and the arts: a study of the association between arts engagement and health</i> (ACE)	Joy Windsor
2006	<i>Culture Vultures</i> , Policy Exchange	Munira Mirza
2007	Harry Cayton, <i>Report on Review of the Arts and Health Working Group</i>	Department of Health Sir Nigel Crisp Harry Cayton
April 2007	<i>A Prospectus for Arts and Health</i> (ACE, DH)	Harry Cayton Peter Hewitt David Lammy MP Andy Burnham MP
2008	Royal Society for Public Health (RSPH) Arts and Health Awards established	–
2008	Five Ways to Wellbeing developed by New Economics Foundation	–
2009	National Criminal Justice Arts Alliance	–
2012	<i>Be Creative, Be Well: An Evaluation</i> (ACE)	Richard Ings Nikki Crane Marsaili Cameron
June 2012	Creativity and Wellbeing Week	Damian Hebron
2012	Fidget delivered by LAHF	Damian Hebron
Autumn 2012	National Alliance for Arts Health and Wellbeing	Alex Coulter Damian Hebron Deborah Munt Clive Parkinson Gavin Clayton
2013	RSPH Working Group on Arts, Health and Wellbeing	John Wyn Owen
June 2013	International Conference on Culture Health and Wellbeing, Bristol	–
2013	All-Party Parliamentary Group on Arts, Health and Wellbeing (APPGAHW)	Alan Howarth (Lord Howarth of Newport)
2014	Aesop, an Arts enterprise with a social purpose, founded	Tim Joss
2015–17	APPGAHW Inquiry yields <i>Creative Health</i> report	Alan Howarth Alex Coulter Rebecca Gordon-Nesbitt
2015–18	National Alliance for Museums, Health and Wellbeing	Helen Chatterjee
2015	Arts and Health Hub CIC	Daniel Regan
2017	Daisy Fancourt, <i>Arts in Health: Designing and researching interventions</i> (OUP)	–
2017	Lived Experience Network (LENs)	CHWA lived-experience champions

Date	Event	Pioneers
January 2018	<i>Arts and Health in Wales: A Mapping Study of Current Activity</i>	Arts Council of Wales
April 2018	Culture, Health and Wellbeing Alliance (merger of the two national alliances)	Alex Coulter Victoria Hume
October 2019	National Academy for Social Prescribing	–
2019	National Social Prescribing Day	–
2019	National Performance Advisory Group: Arts, Heritage and Design in Healthcare Network	Guy Noble Laura Waters
2020	ACE, <i>Let's Create</i> (strategy 2020–30)	–
2020	London Action on Creative Health (LACH)	Anna Woolf, Clare Lovett Clara Giraud, Richard Ings
2021	National Centre for Creative Health (NCCH)	Alan Howarth Helen Chatterjee Alex Coulter
2022	ACE, <i>Creative Health and Wellbeing</i> (strategy)	Amy Vaughan
2022	<i>Greater Manchester Creative Health Strategy</i> launched	Rebecca Gordon-Nesbitt Julie McCarthy
2023	<i>Queering Creative Health</i> published	–
2023	Frances Williams, <i>When Was Arts in Health?: A History of the Present</i> (Palgrave Macmillan)	Frances Williams
2023	Creative Health Associates appointed in each NHS region, including London (NCCH/ACE)	Programme Manager – Jayne Howard East of England – Olivia Dean London – Constance Rosewarne Midlands – Jane Hearst North East and Yorkshire – Alice Thwaite North West – Elaine Ryan-McNeill South West – Penny Calvert South East – Esther Watts
2023	Creative Health Lead appointed for South East London ICS (GLA/SELICB)	Flora Faith-Kelly
2023	Creative Health Review reports (APPGAHW/NCCH)	Alan Howarth Alex Coulter Hannah Waterson
2024	National Arts in Hospitals Network launched	Guy Noble Laura Waters

# APPENDIX B

## INTERVIEW PARTICIPANTS

Interviewee	Affiliation
Alaa Alsaraji	Artists' Represent Recovery Network (ARRN)
Maria Askew	Performing Medicine
Antonia Attwood	Creative Health Camden
Khadija Begum, Emma Chapman, Treaser Jassal, Emma Kafero, Helen Jones	Spotlight
Sandra Bruce-Gordon	Paintings in Hospitals
Professor Helen Chatterjee	Museums, Health and Wellbeing Alliance / University College London / National Centre for Creative Health
Dr Gayle Chong Kwan	Artist, New Town Culture
Alex Coulter	National Centre for Creative Health (NCCH)
Stuart Cox	Hoxton Hall
David Cutler	Baring Foundation
Nikki Crane	Guy's and St Thomas' Charity / King's College London (SHAPER)
Tola Dabiri	National Academy for Social Prescribing (NASP)   Electric Piers
Fleur Derbyshire-Fox	English National Ballet (ENB)
Ranjita Dhital	Royal Society for Public Health (RSPH)
Liz Ellis	National Lottery Heritage Fund (NLHF)
Flora Faith-Kelly	South East London Integrated Care System (SELICS)
Lélia Gréci	Richmond and Wandsworth Councils
Damian Hebron	London Arts and Health Forum (LAHF)
Nadia Holland	Thrive LDN
Dan Hopewell	Bromley by Bow Centre
Victoria Hume	Culture, Health and Wellbeing Alliance (CHWA)
Richard Ings	Arts Council England

<b>Interviewee</b>	<b>Affiliation</b>
Monique Jackson	Artist-facilitator / Kazzum Arts
Beth Jaichand	Sydenham Garden
Kerry Lemon	Hospital artist
Guy Noble	University College London Hospitals / National Arts in Hospitals Network (NAHN)
Daniela Nofal	Counterpoints Arts
Alex Oma-Pius	IROKO Theatre Company
Catherine Peters	Clod Ensemble / Performing Medicine
Professor Clive Parkinson	Arts for Health / Manchester Institute for Arts, Health and Social Change
Mary Paterson	Royal Brompton and Harefield Hospitals
	Baring Foundation
Ella Phillips	South London Gallery
Mah Rana	Lived Experience Network / Royal College of Art
Daniel Regan	Arts & Health Hub
Carey Robinson	Southwark Culture Health and Wellbeing Partnership (SCHWeP) / South London Gallery / The Fitzwilliam Museum
Conni Rosewarne	North East London Integrated Care System (NELICS) / Royal Brompton and Harefield Hospitals
Moira Sinclair OBE	Paul Hamlyn Foundation (PHF)
Marijke Steedman	London Borough of Barking and Dagenham
Paloma Tendero	Artist / Arts & Health Hub
Lucy Thomas	Arts Network (facilitator)
Dr Frances Williams	Queercircle
Charlotte Wilson	Arts Network
Professor Suzy Willson	Clod Ensemble / Performing Medicine, Faculty of Medicine & Dentistry QMUL
Gillian Wolfe	Dulwich Picture Gallery

## ***PHOTO CREDITS IN ORDER OF APPEARANCE***

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### **1. 2.8 Million Minds**

Photo: Tyreis Holder & co, Joy Jumpers (2022). Photography by Shakyra Lodge & Filip Skiba

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### **2. Manor Park Arty Ladies**

Photo: Alex Oma-Pius, courtesy of IROKO Theatre Company

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### **3. ENB Move**

Photography by ASH, courtesy of English National Ballet

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### **4. T-shirt**

Photo: Mehrdad Pakniyat, courtesy of Rosetta Arts

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### **5. Map**

Photo: JC Candanedo, courtesy of Rosetta Arts

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### **6. Clay**

Photo: Jimmy Lee, courtesy of New Town Culture

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### **7. Drawing**

Photo: Antonia Attwood, courtesy of Creative Health Camden

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### **8. Rings**

Photo: Sean Pollock, courtesy of Hoxton Hall

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### **9. Arms**

How's the Weather in Your Head, by Becky Warnock and the OOST Collective

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### **10. Looking through**

Photo: Jimmy Lee, courtesy of New Town Culture

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### **11. Around table**

Photo: Antonia Attwood, courtesy of Creative Health Camden

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### **12. ENB Drawing**

Photo: S. Knowles, courtesy of English National Ballet

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### **13. Drawing**

Photo: Jimmy Lee, courtesy of New Town Culture

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### **14. Drawing**

Photo: Antonia Attwood, courtesy of Creative Health Camden

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### **15. ENB Dance**

Photography by ASH, courtesy of English National Ballet

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**Illustrations by Rae Goddard**

## ***OTHER FORMATS AND LANGUAGES***

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