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1. Foreword

Norfolk and Suffolk Foundation Trust and Suffolk County Council have been very pleased to be able to contribute to the Creative Heritage in Mind (CHIM) project.

It has involved a joining together of Suffolk Museums and the mental health trust serving the Suffolk community that illustrates how true, collaborative partnership working can lead to meaningful opportunities for people experiencing mental health problems that support recovery and sustain wellbeing that no one organisation can develop alone. The benefits to people involved and the broader community have been significant.

The people taking part have felt more connected to their local community and report a positive and meaningful impact on recovery and wellbeing, and local museum services have developed their understanding of mental health and are investing in making their services more inclusive and inviting.

Overall, the project has been an excellent example of what can be achieved by people working together with openness and shared ambition.

Margaret Little
Deputy Director of Operations Suffolk
Norfolk and Suffolk NHS Foundation Trust

Abdul Razaq
Director of Public Health & Protection
Health Wellbeing and Children’s Services
Suffolk County Council
2. Acknowledgements

We are grateful to everyone who contributed to this evaluation by being a part of Creative Heritage in Mind (CHIM), participating in focus groups and evaluation sessions and by completing questionnaires and reflective journals.

The Association for Suffolk Museums (AfSM) would like to thank all the project partners: Norfolk and Suffolk (NHS) Foundation Trust, Suffolk County Council, Museum of East Anglian Life (MEAL), Moyse’s Hall Museum, Gainsborough’s House, Ipswich Museum, and all of the individuals who gave their time to provide a participant voice. We would especially like to thank our Lead Artist, Juliet Lockhart for her dedication and inspiration.

We would also like to thank the Heritage Lottery Fund and Suffolk County Council for their generous support.

Two films are available via the Suffolk Museums website. Please take a moment to watch CHIM in action.

http://suffolkmuseums.org/museums/community/wellbeing/
3. Executive Summary

Creative Heritage in Mind (CHIM) was a year-long heritage and art in mental health project, which delivered a programme of 12 creative courses across four Suffolk Museums. This included three themed courses over three terms. The Heritage Lottery Fund supported it, with match-funding from Suffolk County Council. The project was managed by the Association for Suffolk Museums in partnership with Norfolk and Suffolk NHS Foundation Trust, Lockhart Arts and participants with lived experience.

Museums provide safe and stimulating places where engaging and meaningful programmes of creative activity can be offered, linked to the objects and stories they hold. Making art in response to these stories is a powerful way for people to make individual connections and to consider their own stories. The aims and intended outcomes of this project focused on increasing the engagement in heritage and art of people managing mental health problems; improving the wellbeing of people managing mental health problems; and creating stronger relationships between mental health services and museums for the benefit of people managing mental health problems.

Evaluation was designed to provide insight into how, and to what extent, each of these objectives was met, and to record any significant unexpected outcomes. It also sought to evaluate lessons learned by each of the different partners, in order to provide a platform for learning and development and to inform work of this kind beyond the life of the project. The methodology used to measure and evaluate outcomes embraced a combination of different approaches that would be familiar to, and therefore more likely to be valued by, the different respective partners.

The evaluation shows there was an increased level of engagement with museums on the part of the participants and illustrates how immersion in heritage stories through art benefitted people who were seeking to manage and improve their mental health and wellbeing. It evidences the improvement in participants’ assessment of their own wellbeing and shows how involvement in the project contributed to people’s feelings of increased local connectivity, confidence, resilience, and recovery.

The evaluation helps to demonstrate that the development of practical skills and participation in creative practice provides people with a different and truly effective way into engaging with heritage objects and connecting with their...
stories. Key to this, and to the project’s success overall, was the structure and delivery style of the courses and the role and experience of the Lead Artist. The overwhelmingly positive response of those taking part provides evidence that people managing mental health problems can be helped to feel supported in this type of local setting. It shows museums and mental health professionals that there is continuing merit in working collaboratively and effectively together in the community. It also shows how the project partners drew benefits and learned lessons from the project.

The range and quality of the artwork produced during the project (as evidenced in the booklets and records of the public exhibition) provides its own testimony to the depth of engagement and experience of many of those who took part and provides a form of evaluation in itself.

There were several unexpected outputs and outcomes, which can be seen to have made, and are likely to continue to make, a difference to people. These include two public exhibitions of finished work which brought the project to the attention of a wider audience, and the winning of several awards. The project has also inspired the development of a workshop course for service-users within the Recovery College model.

“... A connection to a larger position of the history and culture and universe you are in, can really ground and help people”
4. Introduction

**Creative Heritage in Mind (CHIM)** was born out of a pilot project (*Objects in Mind*) which sought to bring the heritage and health sectors together to provide a meaningful experience for people recovering from mental ill health, thereby addressing issues of social isolation, and helping to improve people’s confidence and resilience.

Lessons learned from the pilot helped to establish the importance of placing the focus of the courses on a creative heritage outcome rather than one overtly linked to mental health. The Department of Health recognises the value of the Arts in improving wellbeing and with the Arts Council England, published a report ‘Prospectus for the Arts and Health’ April 2007. The report promotes the benefits of the arts in improving wellbeing and health care, stating that the arts can and do make a major contribution to key health and wider community issues ([www.artscouncil.org.uk](http://www.artscouncil.org.uk)).

Over 12 months the CHIM project delivered a total of 12 courses across four museums in Ipswich, Stowmarket, Sudbury and Bury St Edmunds. It also held taster sessions for professionals working in mental health, heritage and community arts which were used to manage expectations and maximise buy-in from key professionals on all sides of the partnership.

The pilot had helped to establish a number of elements of best practice in running art-based courses at museums, including the optimum limits for the length of each course and the importance of limiting participant numbers so that everyone would feel secure and included.

The CHIM courses were held in similar sequences of three at each museum. Each course introduced different artistic techniques and highlighted a different aspect of the museum collections. Some participants attended just one course, but a significant number attended more and completed all three.

In total, 92 places were taken up across the project. A quarter of these went to project volunteers and staff members. Each museum was asked to enrol a volunteer or staff member on at least one course, with a view to enhancing internal communications, maximising the learning opportunities and raising general awareness of mental health and wellbeing within their organisations. The rest were taken up by people who enrolled themselves or had the courses suggested to them and were referred by mental health support workers.

The courses all involved research into the stories behind museum objects and into different artists. They were all designed and led by the Lead Artist, Juliet Lockhart, who was able to develop them as time went on through responding to increasing participant feedback and input from museum staff who provided further insights into the collections.

All the courses included time for each participant to make an individual creative response. Sessions comprised a mixture of practical skills-based creative activities, object handling,
and talks/discussion in the galleries. A tea and cake session took place in each of the participating museums which acted as a bridge in the gaps between courses and provided a further reflective space for participants, volunteers and staff alike. Between courses, a succession of taster days were held for heritage and mental health professionals, and a series of one day workshops were held for potential new participants and continuing participants.

A total of 77 finished pieces of artwork were produced across the project. All of these artworks, plus the objects that inspired them, were photographed at the museums and collated into three high quality end-of-course booklets, celebrating people’s achievement and providing them with a lasting souvenir that could be shared.

A large proportion of the artwork was also put on public display. This was not a requirement or an intended outcome of the project, but as the project progressed the majority of participants warmed to the idea and ultimately two public exhibitions were staged - one in Moyse’s Hall Museum and the other in Ipswich Town Hall.

The project was managed through a simple hierarchy of people responsible for different aspects, and delivered chiefly by the appointed Project Officer and Lead Artist, with some volunteer help and the active support of museum staff.

It was informed and monitored by a steering group comprising AfSM Project Manager and Suffolk Museum Development Manager, Lyn Gash; Norfolk & Suffolk NHS Foundation Trust (NFST) Art Therapist, Maggie Batchelar; Project Officer, Steph Parmee; Lead Artist, Juliet Lockhart; Jane Kelly, a project participant with lived experience and representatives from each of the four partner museums: Jo Rooks from MEAL, Alex McWhirter from Moyse’s Hall, Steph Parmee from Gainsborough’s House, and Eleanor Root from Ipswich Museum. This group met quarterly throughout to hear feedback and agree development.

In addition to the Steering Group, an Advisory Panel was set up with a focus on evaluation throughout the project. This was made up of the Project Manager, 4 participants with lived experience, Heather Balleny, Lead Consultant Clinical Psychologist, NSFT; Maggie Batchelar, and Juliet Lockhart. This panel met quarterly to establish and monitor the evaluation framework and receive feedback.

The NFST Art Therapist, Maggie Batchelar also worked collaboratively with the project throughout in order to provide mentoring for Juliet, to ensure appropriate safeguarding procedures were followed and to co-deliver part of the evaluation process.
5. Aims and Objectives

The intended outcomes of the project were:

1. to increase the engagement in heritage and art of people managing mental health problems;

2. to improve the wellbeing of people managing mental health problems;

3. to create stronger relationships between mental health services and museums; and

4. it was also anticipated that there would be unexpected outcomes.

The aims of the evaluation were:

1. to enable develop and adjust project practice as appropriate throughout the process;

2. to provide insight into how the project outcomes were achieved and to what extent they were met for stakeholders and project partners;

3. to enhance the experience and outcomes for partners and participants in the project; and

4. to enable learning and development to take place which could inform work beyond the life of the project and support continuing advocacy.
6. Methodology

The way the project was evaluated was very important. We wanted to ensure the process would act as a valuable tool for all the participants and partners, enabling people to reflect on their work and the knowledge and skills gained, as well as on their mental wellbeing.

To ensure that the evaluation would have weight and meaning for all partners, methods were adopted from both the heritage and mental health sectors.

To measure the success of the project against its objectives, the following methods were used:

6.1 WARWICK-EDINBURGH MENTAL WELLBEING SCALE (WEMWBS)

WEMWBS is a scale widely used by mental health professionals to provide an indicator of an individual’s wellbeing at a specific moment. It was selected as a good and well-established wellbeing measure on the advice of our NSFT mental health partners. See appendix 1.

WEMWBS consists of 14 positively worded item scales, with five response categories covering most aspects of positive mental health (positive thoughts and feelings) currently in the literature.

The indicator was used at the beginning and end of each set of courses as part of the participants’ reflective journals. Advice from NHS senior clinician on WEMWBS implementation removed a slight weakness in its implementation after course 1, including the artist’s concerns about intruding into participants’ personal situations.

6.2 PARTICIPANT REFLECTIVE JOURNALS

Participant reflective journals made up of baseline data recorded at the start of each course, supplemented by on-going weekly reflections after each session and end of course data. Participants set their own pre-course learning and wellbeing objectives and these were measured at the end. See appendix 2.

6.3 PARTICIPANT BEFORE AND AFTER STATEMENTS.

At the start of a course participants were asked to rate their level of confidence in achievement against several statements relating to the project outcomes. They repeated this exercise at the end of the course. See outcome 7.2.2.

6.4 TEA AND CAKE CATCH UP SESSION EVALUATION

These were reflective, informal evaluation sessions for course participants (including museum staff and project volunteers) and led by the Lead Artist. Conversations were digitally recorded, with consent from participants.
6.5 **POST COURSE EVALUATION SESSIONS**

An extra session was incorporated after three of the courses to gather specific feedback about people’s experiences. These sessions were different from the tea and catch up sessions and innovative in concept in that they used art-based creative techniques to promote discussion and elicit responses.

An example of a creative evaluation response.

Participants were asked to create a collage based thinking about their experience of being on a course. They were then invited to talk about what they had made:

“I didn’t realise when I set out to make my shadow box, inspired by Gainsborough’s experiments with light and composition, that it was going to turn into such a personal story – that I would end up thinking about how to create a safe life, from one that had been discarded”

6.6 **PARTNER TASTER DAYS SESSION EVALUATION**

Two taster days were held at the mid-point of the project. They were designed to give professionals in partner organisations an introduction to the work of the project and to act as a signpost for the courses. These were evaluated by an informal discussion by workshop participants on the days and written comments recorded as part of the sessions.

6.7 **PROJECT PARTNERS PRE AND POST PROJECT SURVEY**

All partners involved in the project took part in this evaluation. It was based on the *Inspiring Learning for All* framework to capture and evaluate qualitative data and used a Likert scale to capture partner’s understanding and involvement in a mental health project in a heritage setting. See appendix 3.

6.8 **ADVISORY PANEL**

Consisting of partners’ representatives, including a participant voice, this panel met on a quarterly basis to review evaluation, address any concerns and make recommendations. It focused on ways to ensure that all of the partners and participants valued and felt positively
about the evaluation methodology and were happy with how the processes were carried out.

6.9 AWARDS

Entering the project for awards provided an opportunity to evaluate it in a wider context and to gauge peer response. Where participants themselves nominated the project it provided an additional and revealing insight into which aspects of the courses they found most beneficial.

‘For me, seeing the paintings and drawings first hand gives a real sense of connection with them. I am really learning to use the collection for inspiration in my own art.’ Participant.

6.10 RESPONSE TO SHARED/EXHIBITED WORK

Three high quality booklets were produced at the end of each course, containing all the participants work from each of the four museums. Copies were given to each of the participants and valued as:

“A good way to show what you have done to people who might not look at art”
Participant.

“The book allows you to look back and becomes your memories- causes you to reflect”
Participant.

Concerns to do with the vulnerability of the group precluded an open website presence but people were invited to join a closed Facebook site managed and monitored by LockARTS in liaison with project partners. This carried pictures of the work, as well as links to publicity and press coverage etc.

There were two private showings, one held at each of the two public exhibitions where the work remained on general public display. The Museum of East Anglian Life (MEAL) displayed work in a community cabinet. Links to the project films have also been widely circulated by all the partners.

“It was really lovely to see the photos of everybody’s work in the Town Hall Gallery yesterday” Participant.

“Oh wow! The exhibits look so good. Lovely to see them as an integral part of the museum” Participant.

“People unrelated to the project saw the exhibition and were impressed by the quality of the work” Museum partner.
7. Outcomes

7.1 Outcome 1: Increased engagement in heritage and art of people managing mental health problems.

“Becoming a regular visitor to the museum has opened me up to a whole new experience. I see things in a different way and question more what I see” Participant.

As a result of participating in this project people have come into their local museum, sometimes for the first time. We know this from information captured in the enrolment forms which asked about people’s previous experience.

Further comments and personal testimony captured during post-course evaluation sessions, recorded in individual weekly journals or provided in response to pre- and post-course statements show that people have been inspired to make, or now feel more confident about making, return visits to museums and heritage sites.

“It has inspired me to visit other museums and to look at things much more critically than I ever have before” Participant.

“Museums can be daunting places but through repeated visits to Gainsborough House I have felt more comfortable in this environment and am more likely to visit other museums” Participant.

The way in which participants have engaged with local heritage can also be seen to have changed, showing an increased depth in the way they were inspired and enabled to explore stories behind the collections. People have increased their capacity to make personal links with those stories through a variety of art making, learned a wide range of new art skills, and discovered more about artists engaged in similar work.

Above: One of the made boxes inspired by the Gypsy Traveller Collection at MEAL.

“I never really thought about a museum being an environment to create and inspire” Participant.
“I have had a very interesting time at Moyse’s Hall, learning about the various artefacts and researching further at home. This course has encouraged me to learn more about Suffolk” Participant.

At the start of a course, participants were asked to rate their level of confidence against a number of statements. They repeated this exercise at the end. The greatest average increased rating related to the statement:

I feel able and encouraged to do more art and get involved with museums e.g. volunteering, further courses, visiting other museums.

The taster sessions meant that professionals from the health and social care sector were also able to see and experience the value of engaging with heritage collections first-hand, enabling them to feel more confident about recommending this type of activity and its benefits.

“I feel that I can accurately describe the ideas to service users and NSFT (I would be) interested in supporting individuals to attend groups in the future. (It) fits in with Recovery College” Mental Health support worker attending Taster Session.

“Having access to objects from museum stores enriched the content of the course and led to participants discovering stories and objects that they would not have been able to as a general visitor” Juliet Lockhart, Lead Artist.

7.2    Outcome 2: Improvement in the wellbeing of people managing mental health problems.

“Mental wellbeing is helped by people being able to ‘think about thinking’. The project supported people to make a step from ‘just doing’ to being able to reflect on what they were doing” Heather Ballen, Lead Consultant Clinical Psychologist, NSFT.

“This project has been a lifeline. It gives me something to look forward to, a reason for getting up” Participant.

“I can arrive at the class feeling life is on top of me, but leave with a new outlook” Participant.

“This has helped me with my recovery” Participant.

7.2.1    WARWICK-EDINBURGH MENTAL WELLBEING SCALE (WEMWBS)

The collated WEMWBS data showed a statistically significant improvement in mental wellbeing across all the courses.
7.2.1.1 Data quality and capture

Outcome data pertaining to the subjective Wellbeing of participants were collected prior to and following the completion of each term. In total, 148 people took part, and attended at least one term. Of these, twenty-six were male (17.6%), whilst the remaining 122 (82.4%) were female. It should be noted that as data capture participants may have attended more than one term the overall attendance rate of 148 must be considered artificially high due to multiple counts. In essence, the data relates to the number of potential wellbeing questionnaire returns across all the terms of the project.

48 participants were new to the project (37 Female & 11 Male). 81 participants had returned to the Museum’s Project for at least a second term (11 Male & 70 Female). 15 participants (4 Male & 11 Female) were recorded to be volunteers. Of the remaining four Female participants, there were no data available to confirm their project attendance status (New, Return or Volunteer).

Return participation data was unavailable for one female participant. There was no statistically significant association between gender and status as a new, return or volunteer participant ($\chi^2 = 3.548; 3$df; $p = .315$). See Tables 1 and 2 below.

<table>
<thead>
<tr>
<th>New or Returning</th>
<th>Male</th>
<th>Female</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not indicated</td>
<td>0</td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td>New</td>
<td>11</td>
<td>37</td>
<td>48</td>
</tr>
<tr>
<td>Return</td>
<td>11</td>
<td>70</td>
<td>81</td>
</tr>
<tr>
<td>Volunteer</td>
<td>4</td>
<td>11</td>
<td>15</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>26</td>
<td>122</td>
<td>148</td>
</tr>
</tbody>
</table>

**Table 1: CHIM Participation (New, Return or Volunteer) Status**

<table>
<thead>
<tr>
<th>Gender</th>
<th>Frequency</th>
<th>Percent</th>
<th>Valid Percent</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>26</td>
<td>17.6</td>
<td>17.6</td>
<td>17.6</td>
</tr>
<tr>
<td>Female</td>
<td>122</td>
<td>82.4</td>
<td>82.4</td>
<td>100.0</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>148</td>
<td>100.0</td>
<td>100.0</td>
<td></td>
</tr>
</tbody>
</table>

**Table 2: Participants by Gender**
Table 3: Number of participants who undertook the project by each participating museum

<table>
<thead>
<tr>
<th>Museum</th>
<th>Percent</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gainsborough House</td>
<td>37</td>
<td>25.0</td>
</tr>
<tr>
<td>Moyse’s Hill Museum</td>
<td>23</td>
<td>40.5</td>
</tr>
<tr>
<td>Museum of East Anglian Life</td>
<td>41</td>
<td>68.2</td>
</tr>
<tr>
<td>Ipswich Museum</td>
<td>47</td>
<td>100.0</td>
</tr>
<tr>
<td>Total</td>
<td>148</td>
<td>100.0</td>
</tr>
</tbody>
</table>

7.2.1.2 Subjective Wellbeing Pre- and Post-Completion of CHIM

To determine whether involvement in CHIM might have had an effect on the subjective wellbeing of those who attended, at intake and upon completion of each term, the participants were invited to complete the Warwick-Edinburgh Mental Wellbeing Scale (WEMWBS). 43 participants did not complete the outcome measure; meaning that the subsequent statistical analysis was conducted on the remaining 105 participants. Overall response rate was therefore 70.9%.

24 participants (36.5%) only completed WEMWBS items one to twelve. These respondents’ scores were therefore pro-rated (the missing variable for a given participant is replaced with their mean score on other items on the same scale) prior to data analysis, as only 15% of their questionnaires were deemed incomplete.

Table 4: WEMWBS Completion rate

<table>
<thead>
<tr>
<th></th>
<th>Percent</th>
<th>Cumulative Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Missing</td>
<td>43</td>
<td>29.1</td>
</tr>
<tr>
<td>Complete</td>
<td>105</td>
<td>100.0</td>
</tr>
<tr>
<td>Total</td>
<td>148</td>
<td>100.0</td>
</tr>
</tbody>
</table>

There was no observed statistically significant association between the rate of questionnaire return and whether the participants were new to or returning to the project (Standardised C = .121; p = .533); or gender and rate of questionnaire return $\chi^2 = 4.73; 1df; p = .491$
Figure One shows a histogram including a normal curve detailing the distribution of the participants WEMWBS scores prior to them commencing the project.

Figure Two shows a histogram including a normal curve detailing the distribution of the participants WEMWBS scores having completed the project.
Table Five

Table Five shows participants mean, median and standard deviation WEMWBS scores prior to and following their completion of the project. Additional descriptive statistics capturing the distribution of scores include both the range, and the maximum and minimum values.

<table>
<thead>
<tr>
<th></th>
<th>WEMWBS Score at Intake</th>
<th>WEMWBS Score upon Completion</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mean</td>
<td>42.08</td>
<td>49.35</td>
</tr>
<tr>
<td>Median</td>
<td>42.00</td>
<td>50.00</td>
</tr>
<tr>
<td>Standard Deviation</td>
<td>8.10</td>
<td>8.18</td>
</tr>
<tr>
<td>Maximum</td>
<td>20.00</td>
<td>23.00</td>
</tr>
<tr>
<td>Minimum</td>
<td>62.00</td>
<td>69.00</td>
</tr>
</tbody>
</table>

Figure Three

Figure Three shows a Whisker and Box Plot dealing the minimum, first quartile, median, third quartile, and maximum of the WEMWBS dataset. The box plots display variation in participant’s scores without making any assumptions of the underlying statistical distribution. The spacing’s between the different parts of the box indicates the degree of dispersion (spread) in the data, and shows outliers.
7.2.1.3 Statistical Analysis

A Within-Participants t-test was used to compare the participants WEMWBS scores prior to and following their participation in CHIM. Using the repeated-measures t-test, a statistically significant difference was observed between the participants mean pre- and post-self-rated scores ($t = 9.91$, $df = 102$, $p < .0000$). This finding appears to suggest that the participants rated their subjective wellbeing as being significantly higher following taking part in CHIM.

An Independent Samples t-test was used to determine whether there were any significant differences in mean WEMWEB scores by Gender or by Participation Status (New, Return or Volunteer)

No statistically significant difference observed in terms of Gender X Mean WEMWBS scores at Intake ($t = 0.12$, $df = 102$, $p= .907$) or Completion ($t = 1.30$, $df = 101$, $p=.894$). See table 6 below.

<table>
<thead>
<tr>
<th></th>
<th>N</th>
<th>Mean</th>
<th>Std. Deviation</th>
<th>Minimum</th>
<th>Maximum</th>
</tr>
</thead>
<tbody>
<tr>
<td>WEMWBS Commencement Total</td>
<td>Male</td>
<td>17</td>
<td>42.2941</td>
<td>6.84438</td>
<td>53.00</td>
</tr>
<tr>
<td></td>
<td>Female</td>
<td>87</td>
<td>42.0402</td>
<td>8.35625</td>
<td>62.00</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>104</td>
<td>42.0917</td>
<td>8.09664</td>
<td>62.00</td>
</tr>
<tr>
<td>WEMWBS Completion Total</td>
<td>Male</td>
<td>17</td>
<td>47.0000</td>
<td>7.23669</td>
<td>57.00</td>
</tr>
<tr>
<td></td>
<td>Female</td>
<td>86</td>
<td>49.8198</td>
<td>8.30766</td>
<td>69.00</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>103</td>
<td>49.3544</td>
<td>8.18256</td>
<td>69.00</td>
</tr>
</tbody>
</table>

Table 6: Observed gender differences in mean WEMWBS Scores prior to and following participation in ‘CHIM’.

7.2.2 SUMMARY OF RESPONSES FROM PARTICIPANT REFLECTIVE JOURNALS

Participants were asked to set themselves two wellbeing targets at the beginning of each course. On a scale of 1-4, they rated how confident they felt about achieving the targets and then at the end of the course, rated how well they felt they had achieved them. 1 is the lowest score 4 is the highest.

Examples of the most common target statements that were set are:

- Contributing to discussions;
- Talk to other members of the group;
- Challenging myself to try something new;
- To become more confident; and
- To attend each week.

There were 72 completed responses. All statements scored highly both before and after the courses, showing participants were confident and optimistic about the courses potential before they started. This result was influenced by participants who returned to take part in the second and/or third course.
Participants were also asked to rate on a scale of 1-4 the following statements:

- I feel that the CHIM course will be beneficial to my wellbeing
  Before average 3.5
  After average 3.7

- I feel I will increase my knowledge and skills by attending the CHIM course in a museum
  Before average 3.5
  After average 3.8

- I feel able and encouraged to do more art and get involved with museums e.g. volunteering, further courses, visiting other museums.
  Before average 3.1
  After average 3.8

Pre-course, participants on average rated their likelihood of achieving these targets a 2.5 out of 4. When reflecting at the end of the courses, the average score on how well they felt they did rise to 3.4 out of 4

“Getting there, meeting new people, staying for the whole session, talking to someone, having a drink, completing all seven sessions – this is the really valuable bit, achieving goals. I can look back at what I have done and it gives me hope” participant at Museum of East Anglian Life (MEAL).
7.2.3 A PARTICIPANT CASE STUDY

The participant journals provide significant testimony and insight into the way taking part in the courses affected individual feelings of wellbeing and confidence.

The following example illustrates how taking part influenced one participant’s assessment of her own wellbeing and helped with her mood management.

<table>
<thead>
<tr>
<th>Self-set learning targets</th>
<th>Pre-course score (1-4)</th>
<th>Post-course score (1-4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 to rekindle my creativity</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td>2 to experiment with new media</td>
<td>2</td>
<td>4</td>
</tr>
</tbody>
</table>

Self-set wellbeing targets

| 1 To challenge myself to try something new | 2 | 4 |
| 2 to use art to manage my mood | 1 | 4 |

Her WEMWBS score increased dramatically. At the beginning of the course she scored a 2 for 50% of the statements and a 3 for the remaining 50%. At the end of the course she rated her wellbeing with a top score of 4 for all statements.

<table>
<thead>
<tr>
<th>Reflective journal</th>
<th>I achieved</th>
<th>I feel</th>
</tr>
</thead>
<tbody>
<tr>
<td>Session 1</td>
<td>I didn’t take too long to make the leporello (I can be too much of a perfectionist)</td>
<td>OKish – but a bit apprehensive (at the high art skills of others in group). My picture of floorboards didn’t go well</td>
</tr>
<tr>
<td>Session 2</td>
<td>knowledge of Gainsborough’s Art, learnt new skill using FIMO</td>
<td>my FIMO keyring didn’t go well, I was unimaginative. Also my artistic skills not at the level of most of the group. But, got a good idea of how to create a miniature bust and want to use this in my box!</td>
</tr>
<tr>
<td>Session 3</td>
<td>Enjoyment! Satisfaction! Beginning of idea for my box</td>
<td>happy, sense of achievement, energised, bright. Increased sense of self-worth. Chose my museum object which gave me a theme for my collage</td>
</tr>
<tr>
<td>Session 4</td>
<td>idea of what to include in the box frame and made a list of what to do to achieve this</td>
<td>happy, fulfilled, achieving, organized</td>
</tr>
<tr>
<td>Session 5</td>
<td>Unable to attend</td>
<td></td>
</tr>
<tr>
<td>Session 6</td>
<td>everything I had to do to be on target for putting items in frame box next week. I completed all tasks I’d set myself for today.</td>
<td>High wellbeing, sense of achievement and purpose, a success, focused.</td>
</tr>
<tr>
<td>Session 7</td>
<td>I finished my box!</td>
<td>happy, fulfilled, energized and calm</td>
</tr>
</tbody>
</table>

An excellent course – helped me to maintain mood levels at a time of the year when I usually struggle with my depression. It has reawakened my interest and enjoyment of creating on my own, so that it becomes part of my everyday life.

My greatest achievement has been completing on time a piece of art of which I am proud.
7.2.4 PROJECT PARTNER SURVEY

The attitude of staff and volunteers working for participating partner organisations was also seen as a key contributing factor to project’s general atmosphere of wellbeing, particularly in museum settings.

Pre- and post partner statements were collected focusing on attitudes and skills development with regard to mental health. These forms record positive improvements of experience over anticipation and are a valuable contribution to the overall learning and potential development of the initiative.

Pre- and post-project forms recorded an average rise from 2.6 to 3.4 (out of a possible 4) in the response to the following statement:

My local museum is a welcoming place for people with mental ill health

“Our staff are very welcoming and friendly but it can be quite busy and crowded, which could be overwhelming” Eleanor Root, Collections and Learning Curator, Ipswich Museum

“I have seen the difference in participants over the courses and heard how they appreciate a safe space and an opportunity to explore museum collections in a different way” Jo Rooks, Learning and Participation Officer, MEAL

Evidence of skill development for those staff came with an even greater Pre- and Post form rise from 2.1 to 3.6 (out of a possible 4) to the statement:

I feel confident welcoming visitor with /recommending a visit for, people with mental ill health to my local museum

“I feel much more confident now we have been involved with the project and we are exploring the possibility of creating a ‘safe’ space within the museum” Jo Rooks

“...being involved in the project has had two main benefits for me. Firstly in terms of my working practice it has allowed me to explore more when considering adult learning opportunities. As adults we are often constrained by the opportunities available to us and we don’t have much time to play. The courses provided time to experiment with new skills and with ideas and concepts and I will definitely be looking to promote these types of opportunities in my future work” Learning Officer, Gainsborough’s House
7.3 Outcome 3: Stronger relationships between mental health services and museums

“The project really benefitted from the different strengths and knowledge of each partner – museums, artist, health sector and, not least, participants - and without this, it would have been a shadow of what it was. It was interesting to see how our approach to things subtly changed over the time of the project and I certainly learnt to listen a lot more closely to what people said, rather than rushing on to get the next thing done. The co-production approach helped us all feel we were correctly on track” Museum Development Manager and Steering Group Chair.

“When learning a new skill (social, educational, practical) you come with what you already know. Then there is a stretch. If the gap between what you know and the new skill is too great this will cause anxiety. You need to have a little gap to develop and this is what these courses provide for each of the participants” Lead Consultant Clinical Psychologist, and Advisory Panel Chair.

Project Partner Forms provided insight into what expectations were held and how these were met or developed: 62.5% of respondents had worked on a mental health/museum project before (largely due to the pilot, which had already worked across two of the four museums involved). However, of that 62.5%, twice as many had worked in partnership involving only museums and artists than had previously made any link with the NHS. Similarly, most NHS mental health professionals who had previously worked with artists, had not previously worked with museums or heritage collections.

“I often work with artists, but have not worked with the NHS before” Damien Etherington, Senior Collections and Learning Curator at Ipswich Museum.

The partnership with NSFT gave much needed support to the artist and provided clarity and development for museum staff in welcoming people dealing with mental health problems. Again, (and as detailed above) this was borne out in a pre- and post-rise in responses to the statement:

I feel confident welcoming visitor with /recommending a visit for, people with mental ill health to my local museum.

“As my own knowledge of local museums has developed, I feel more confident about recommending them to others” Maggie Batchelor, NSFT Art Therapist.

Winning the Suffolk Foundation Working Together Award provides further evidence of the impact of working in partnership. See 7.4.4.
Extract from the Award application

The difference working with others made falls into three main areas: recruitment and support of participants, project evaluation (both its implementation and the skills of people to implement it), and the quality of the experience for participants with their subsequent increased ability to manage or progress from their mental ill-health.

The partnership between the artist, four museums with professional education staff, and the Norfolk & Suffolk NHS Foundation Trust was the initial bedrock of the project but it has now developed into more of an up-front co-production model of working where the voice of the participants is central.

While all professional partners were aware of and had practiced some co-production models of working in the past, this particular area of working with and for people with mental ill health in museums over a period of time had not been explored before.

Everyone involved in the project recognises the healing and uplifting power of being involved in meaningful art activity, but that does not mean to say it is always a smooth journey of discovery.

Our links with and guidance from the NHS has informed the way we involved participants and we look to build on our relationship.

7.4 Outcome 4: Unexpected outcomes

7.4.1 RECOVERY COLLEGE

Norfolk and Suffolk NHS Foundation Trust’s Recovery College was set up in 2013 to empower people with mental health problems to become experts in their own recovery. The college provides a range of courses and workshops to service users, carers and members of staff to develop their skills, understand mental health, identify goals and support their access to opportunities. All of the courses provided at the college are designed to contribute towards wellbeing and recovery.

An unexpected outcome from CHIM was the development of a one-day workshop; ‘Art, Museums and Wellbeing’, on the Recovery College timetable which is held in three local museums. It is aimed at developing knowledge about local museums and their collections and exploring working with objects in an imaginative way, to increase confidence and support personal identity. It is co-tutored by the art therapist involved in CHIM, the artist who delivered the courses in CHIM, one of the museum curators who hosted a CHIM course, and a participant from the project.

The Recovery College quality assurance panel feedback was extremely positive. It is therefore now an established part of the programme. Recovery College is paying the museums for the cost of room hire, the museums are training their staff to co-deliver the courses. AfSM is paying for the artist’s time, and working with Suffolk County Council on other sources of statutory funding to support this. See appendices 4, 5, and 6.
“Trainers created a warm, safe, friendly learning environment, fantastic range of activities to explore the stories about ourselves, good reflection and lived experience.” Participant.

“The course has inspired me to go into museums and take a look with a whole new perspective” Participant.

“It would be really good if the workshop could be developed into a longer course” Participant.

“It is difficult to cover such huge topics as ‘Art and Museums in one workshop – perhaps expand to a course?’” Participant.

“Make into a course so that we can expand on what we have learnt over a series of weeks” Participant.

Developing these workshops into a course is a key area for future development.

7.4.2 CARERS COURSE PILOT PROJECT

Carers were attending the CHIM courses. Although the course content fits, it was felt that there was a place for a group who had similar concerns and issues. The impact of caring can make carers more susceptible to mental health issues. They have discrete needs that can be better met within a dedicated group to meet these needs.

SHARE Museums East granted AfSM £2,000 to run a seven-week pilot course at Museum of East Anglian Life in September 2016. During the summer we established a partnership with BSEVC (https://www.bsevc.co.uk/) which was already doing work with family carers, delivering one to one life coaching sessions. We combined the two workshops, with most of the relevant students taking up the opportunity to attend the sessions alongside the course.

A total of eight students enrolled, which was our target, with very positive feedback.

7.4.3  ADDITIONAL PROJECT SESSIONS IN MUSEUMS

On the advice of the advisory panel, a change was made to the planned summer sessions which were to have been run by museum staff as a bridge between courses and as a way of attracting new participants. Partly in response to limits on capacity, these turned into self-led studio sessions requiring minimal facilitation. Each museum offered a 10 minute introduction to an object and attendees were invited to make a creative response to the its story.

This was found to be a more sustainable way for this type of work to continue as it does not require the resource (particularly time) of organising and running events. In addition, and in order to help attract new participants, the artist ran one-day introductory workshops at each museum and in two other towns (Felixstowe and Newmarket).
7.4.4 AWARDS

Entering the project for awards provided an important validation of the project and contributed to the celebratory element for participants and partners alike.

- NSFT Putting People First Awards 2016. Finalist in the public choice outstanding care and compassion award. See appendix 7.

- Suffolk Adult Learners Award – CHIM was nominated by course participants in the following categories: Health and Wellbeing, Arts and Culture and inspirational learner of the year. The project had 20 separate nominations. Juliet Lockhart received the Health and Wellbeing Award for the CHIM project and runner-up in the Arts and Culture Award.

- High Sheriff Awards – commendation received for the CHIM Project as part of the charity run by LockArts.

- The project won the Suffolk Foundations Working Together Award in September 2016 and were presented with a cheque for £5000 for future work in this area.

Above: Presentation of the Working Together Award
7.4.5 EXHIBITIONS

There was no expectation that a public display of work would be held but the quality and quantity of the work produced prompted the idea, quickly embraced by a majority of participants, that this would be a positive and affirming addition to the programme. Inclusion was voluntary, and not everyone wished to be acknowledged or name-checked, but all the work was represented and many of the participants also attended the private views.

This was a very different experience from receiving the course booklets which every participant received. Two temporary public exhibitions that were held during September and October, in Ipswich Town Hall in association with Subterranean Arts and at Moyse’s Hall Museum in Bury St Edmunds. Participants were also invited to fill a Community Cabinet at the Museum of East Anglian Life (MEAL), which is a changing exhibition in Abbot’s House curated by community groups.

Above Left: Community Cabinet display at MEAL. Above right: Ipswich Town Hall exhibition

7.4.6 FILM

Two short films were created, one by AfSM and one by NSFT, as an advocacy and awareness tool for the work carried out throughout the project. It presents something of the powerful impact of working creatively with museum objects and stories for those experiencing mental ill-health. These films can also be accessed via the Suffolk Museums website.

http://suffolkmuseums.org/museums/community/wellbeing/

7.4.7 PUBLICATIONS

Facebook

A closed group Facebook page has been set up highlighting participant’s work and documenting the heritage and creative aspects of the project.
Booklets

Booklets and a leaflet were produced for all three courses and distributed to all course participants, partner organisations and were available at two exhibitions of course work produced throughout the project, at Ipswich Town Hall and Moyse’s Hall Museum. The booklets were valued by participants, the artist and mental health practitioners as an important part of the course.

“The booklets look amazing – like a mini gallery. They give value to my work and make me feel proud” Participant.

“With my work on the wards, the books have really spoken to people who might be potential participants” Art Therapist.

“The booklets are testimony to what we are doing, further to this, they are an important advocacy and awareness tool” Juliet, Project Artist.

Insight Magazine

Insight Magazine is produced by the NSFT Communications Team, working with service users, carers and mental health professionals to deliver stories about mental health issues that affect people in Norfolk and Suffolk. The Spring/summer 2015 issue featured a spotlight on art therapy and CHIM. The Autumn/Winter issue of 2016 featured a follow up piece about the success of CHIM, including the resulting one-day workshop ‘Art, Museums and Wellbeing’ developed as part of the Trust’s Recovery College programme.

British Association of Art Therapists

The project is cited as an example of innovative practice on the website for art therapists who have a commitment and interest in working in museums and galleries. This is a Special Interest Group under the British Association of Art Therapists, the professional body representing art therapists. Maggie Batchelar, the art therapist involved in the project, is a member of the group (MagSIG) and has shared her practice with this project in this group and on their website at www.atmag.org which is developing a widening membership and record of exciting and innovative practice.

Advancing Healthcare Awards 2017:
Guardian Award for Innovation in Mental Health Services

The project was nominated for the Advancing Healthcare Awards 2017, Guardian Award for Innovation in Mental Health. Although it was not successful, the organisers recommended that it was included in a best practice showcase publication.

Creative Health: The Arts for Health and Wellbeing

The All-Party Parliamentary Group on Arts, Health and Wellbeing published *Creative Health: Arts for health and wellbeing*, which followed an inquiry into practice and research in the arts in health and social care, with a view to making recommendations to improve policy and practice in using and commissioning arts and heritage activity to support recovery, improvements and maintenance of wellbeing and good health. CHIM was referenced as an example of good practice in the report, on page 76, section 5.6.


Above left: A shadow box displayed at Moyse’s Hall

Above right: A participant and her work
8. Key Lessons and Recommendations

An important element of the evaluation was to gather evidence that could inform work beyond the life of the project. This largely came from comments gathered at taster days and the final advisory panel, but also from reflective journals (completed by staff and volunteers as well as other participants) plus the Project Officer’s and Lead Artist’s logs.

8.1 OWNERSHIP

While the overall impact of running the courses in museums was a positive one for participants and staff alike, some collaborations did appear to work better than others. Affording behind scenes access to collections, being flexible about the use of the galleries, being ready to provide background information and enthusiastic about sharing achievement were all high on the list of things that made the experience meaningful and special for all concerned.

The project underlined the importance of shared ownership from the start and highlighted what it takes to embed a project like this. Whilst the involvement of a (consistent) member of staff able to understand and respond to changing needs was key, the project highlighted the need for good and receptive communication across the board, so that information reaches all levels of staff and management, not just the individuals taking part.

“Alex’s commitment to the project went over and above his role [at Moyse’s Hall Museum]. He was able to accommodate every single request we as a group put to him and we were able to handle objects - fostering a sense of being very privileged. His knowledge and willingness to talk about objects in the collections inspired participants to follow up and engage in researching outside of the sessions. This has all contributed much to participants’ experience of the museum being a welcoming and high accessible space.” Lead Artist

“Many of those who attended the courses seemed typical of people who had stopped, or would not normally think of (re) visiting museums. The project gave them a sense of ownership –they spoke of feeling they had "permission" to be there. Importantly, it also encouraged them to be curious about other museums. They truly ‘got’ the importance of the links between objects and stories and clearly valued the contributions and insights of museum staff when they were able to share background information about the collections ...

People recognised and appreciated the special atmosphere of museums (repeatedly described as safe, as well as relaxed and inspiring)

[They showed] it was important to take part in this as a group. Not only was it inspiring to see what everyone else was doing, the whole experience helped people to “feel part of something”. The course structure encouraged people to keep attending, even if they weren't feeling well or were not having a particularly good day. They always felt they left in a better place” Ruth Gillan, freelance museum professional working with AfSM.
“[What worked was] small groups with inspiring tutor, offering drinks – the hospitality, a gentle welcome, gradual steps. That it happens in local museums”

I found the activities and structure very thought provoking and interesting. I like how it ties in with (the Museum Association’s) Museums Change Lives” Museum professional

8.2 THE COURSES – Structure and support

Getting the structure and content of the courses right is particularly important with this client group. This extends beyond the limiting of numbers attending sessions and the length of the courses (both identified as crucial in the pilot and subsequently borne out in practice here). It relates to things like the level of challenge, the inspiration provided by facilitated access to heritage objects and their stories, the consistency of the environment, and a general feeling of being welcomed, and a little privileged, to be working in a unique setting.

“When learning a new skill (social, educational, practical), you come with what you already know, then there is a stretch. If the gap between what you know and the new skill is too great (too big a stretch), this will cause anxiety. You need to have a little gap to develop and this is what these courses provide for each of the participants” Clinician.

“Having to tailor a course around four very different collections was challenging. I struggled at times, but on the whole I really enjoyed the challenge and believe that it impacted on the course content in a very positive way, resulting a much richer learning experience for participants” Lead Artist.

“Interesting what we bring of ourselves when we look at objects in a museum... I found the idea that by changing how we label museum objects we can change how people label themselves really interesting” Member of museum visitor services staff.

“Consistency is important – you know the museum and the tutor. Often in mental health care, professionals change and you have to start again”

“The course was structured, but I felt it was sufficiently flexible to accommodate the different skills-base and speed at which the participants wished or were able to work”

“...what I need to feel valued and a worthy part of the group”

“The museum environment is important because it gives us a first-hand resource to learn from and be inspired by. It is good for me to approach things as an adult, which I have previously approached as a child. Museums can be daunting places but through repeated visits to Gainsborough House during the course I have felt more comfortable in this environment, and am more likely to visit other museums”

The project showed how important and valuable it was for the artist and museum staff to have access to advice and ongoing support from mental health professionals. The visible presence of two senior members of staff was also seen as having a very positive impact on participants and their relationship with the Trust.
“Community artists are often employed to work with vulnerable adults or people who can have emotional or behavioural issues. This project has given me a regular supervision or reflective practice space and time which has been invaluable and made me feel supported and confident and reassured that there is a clear line of accountability” Juliet Lockhart, LockARTS.

8.3 HIDDEN EXTRAS

The project highlighted a variety of outcomes and outputs which were either beyond its original brief or took on greater importance than anticipated.

Among these was the importance and value of embracing public recognition as well as a personal record of what had been achieved. The staging of the public exhibitions and their accompanying private views proved popular, although it was important to introduce this to course participants in a timely manner (i.e. when they were ready, rather than as a requirement or a given at the onset of the process). These were also a very valuable internal and external advocacy tool for awareness-raising with press, partners not directly involved in the project, and the wider public.

“An exhibition is a really nice way of showing we are not just stigmatised by our label – look what we achieved, an emphasis on us as an artist” Participant.

“(It) would be off-putting to know right from the start that you would be having an exhibition – especially if you were new and didn’t have any art experience. Better to find out half way through.” Participant.

The high-quality end of course books given to every participant were also highly prized, but for slightly different reasons.

“(The books were) ... something to take home, more personal and easy to show to friends and relatives” Participant.

“With my work on the wards, the books have really spoken to people who might be potential participants.” Maggie Batchelar, Art Therapist.

“I have been impressed by the work completed by those on the course and the process has been an enabling and confirming one for them. The courses are inclusive and supportive and offer great opportunities to learn new skills and meet new people in a safe, explorative environment” Social worker
9. Conclusions

This evaluation shows that the CHIM project achieved what it set out to do in bringing together museums and mental health services to increase the engagement in heritage and art of people managing mental health problems and improve their wellbeing.

In terms of outcomes for participants managing mental health problems it exceeded expectations. This is evidenced by the wealth of individual testimony collected and borne out by the use of the WEMWBS scale to measure mental well-being. It is a real strength of this evaluation that this measure was one recommended, and therefore recognised, by NHS partners.

The project resulted in an amazing body of creative work which served to illustrate how making art in museums can help people to relate to different aspects of heritage in personal and sometimes unexpected ways. In doing so it has opened up fresh ways of approaching heritage collections and shown how much this kind of access is valued. Participants can be seen to have gained new skills and knowledge throughout the project, to have grown in confidence and resilience and to have enjoyed a greater interaction with their communities.

Professionals and volunteers from mental health, museum, heritage and community arts backgrounds have all improved their understanding of each other and gained a better insight into the environments in which they work. This is particularly clear from comments collated in relation to the taster days and the advisory panel meetings.

The collaborative approach to managing, monitoring and delivering the project has resulted in increasing awareness of the benefits of working together and contributed to a clearer idea of what ideally needs to be in place, especially in terms of ownership, pre-planning and on-going support (for staff and volunteers as well as participants). The outcomes show that the more welcoming the environment and the more embedded with collections and stories, the better the courses work.

The project succeeded in brokering closer and more effective cross-sector working between partners and taught everyone valuable lessons about how this kind of work could be developed and strengthened in the future. The evaluation used a varied mix of meeting methods to capture relevant feedback, including looking for the kind of generic learning outcomes that would be familiar to staff with a museum learning background. Whilst the role of the artist continued to be pivotal throughout, the growing contribution of participants and hands-on involvement of museum staff and volunteers enhanced the planning and delivery of the courses.

The special partnership-working which evolved between the artist, NHS and heritage professionals and participants with lived experience also contributed to a number of unforeseen outputs and outcomes, including the decision to stage two public exhibitions of work, the development of a sustainable model for self-led sessions in museums between courses and the development of a creative workshop, which has since been incorporated
into the official NHS Recovery College programme. The success of the project has meant it has also garnered awards, which included funding for a modest extension of the courses to include at least one other local museum.