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Mike White has been at the forefront of the arts in health movement in the UK since 1988 and is a researcher of international renown. He developed the first arts in health program in a doctor's practice in England, has commissioned public art for hospitals, run artist residencies in primary care, developed long-term community-based arts in health and arts for older people programs. Mike was awarded the first international fellowship in arts in health from Healthway, Western Australia in 2007. Mike talks to Focus about arts and health and his forthcoming visit to Port Macquarie for a major international conference in November.

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ike White is Senior Research and Development Fellow in Arts in Health, Centre for Medical Humanities and St Chad's College, University of Durham, UK and the author of the recently published book Arts Development in Community Health: A Social Tonic (Radcliffe Publishing). He has lectured widely on arts in health in the UK, EC, Japan, South Africa, USA and Australia and undertaken large-scale community arts programs such as Vancouver World Expo, Glasgow City of Culture and the Ulverston Lantern Parade.

Mike talks to Focus about arts and health and his forthcoming visit to Port Macquarie for a major international conference in November.

> Mike, what does 'arts in health' mean?

Arts in health can be broadly defined as creative activities that aim to improve individual or community health using arts-based approaches and that seek to enhance healthcare delivery through provision of art works or performances. Arts in health has become a wide field of practice that includes work in hospitals, primary care, respite care and rehabilitation, public health, social services settings and the places where arts therapies are practised, as well as venturing into schools and communities to help address the health dimension of a whole range of social policies.

The practice of arts in health is not so much a single professional role, but a skills partnership of people who come together, in creative activities, to improve health and well-being. A 'practitioner' is not exclusively an artist; it can be anyone with a professional role in the preparation, delivery and evaluation of the work.

The area is now so diverse. Some projects may focus on the therapeutic benefits of the arts, some on environmental improvements to support health staff in delivering their services and some on producing creative kinds of health information. Some focus on arts-led regeneration to improve the health and prosperity of a community. > How does arts in health in Britain relate to what is happening in the field in Australia?

In Britain we have finally got serious about arts in health at policy level. In 2007 the Department of Health and Arts Council England undertook a national evidence review. Conclusions were that arts in health should be recognised as integral to health, healthcare provision and healthcare environments, including supporting staff. Arts in health initiatives deliver real and measurable benefits across a wide range of priority areas for health; and there is a wealth of good practice and a substantial evidence base.

There are many arts in health projects in England that are in parallel with Australian initiatives, and much could be exchanged by way of reciprocal observation, co-mentoring and reflective practice. The forthcoming conference will provide an unparalleled opportunity for meaningful international exchange of ideas, information and research.

> What types of projects have you recently been involved in?

Recent projects include a literature review of arts and mental health for the UK Government's Social Exclusion Unit, surveys of arts in health in the Northern, Yorkshire and East Midlands regions, and a national advisory forum for the evaluation of community-based arts in health. I have just collaborated on producing a Code of Practice for artists

and healthcare professionals in Ireland. And I have just joined a steering committee to re-establish an arts in health network for the UK.

> Tell us a little about your first visit to Port Macquarie in 2007.

I visited Port Macquarie under the auspices of a research fellowship from the UK's National Endowment for Science Technology and the Arts and was invited to address members of Port Macquarie Hastings Council and community organisations on the subject of culture-led regeneration and its impact on community health. After viewing plans for the Glasshouse, I was able to include a local context.

My wife Catherine, son Jonah and I also stayed on for Christmas on the North Shore. The family highlight was Santa coming across the Hastings River by ferry and finding a toy kangaroo in his sack for Jonah.

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> What were your impressions then of the Glasshouse?

The project seemed to meet the key criteria for a successful, socially-engaged arts facility, with quality architectural design, a focus on community partnerships, a central location to provide ancillary benefits to the local economy, commitment to programming that addressed the region's demographics and cultural interests while broadening horizons through a mix of national and international arts, a desire to embed local arts development in a wider regeneration strategy, and provision of training in the cultural industries for young people. Hopefully, this building can deliver

on the promise of its name as an incubator that will nurture local creativity and enterprise. > The Glasshouse is opening this month after much controversy. Do you have any comments to make?

In my professional experience of UK local government and in university research, it is common for a new arts facility to encounter controversy on grounds of cost, accountability and cultural relevance. I have also seen ex-

amples of high-quality arts facilities attracting significant investment into their region. Cultural provision has become an important economic indicator.

> You were responsible for spearheading the famous Angel of the North sculpture in Newcastle Gateshead, which last year celebrated its 10th anniversary. Is there a lesson here for Port?

The 20 metre high Angel, by British sculptor Antony Gormley, has had an accumulator effect on the local economy that a high quality arts facility can have. Although at first hugely controversial, the Angel quickly became a national icon and is now the most publicly recognised contemporary sculpture in Britain. It has generated over \$140 million in tourism promotion and helped Gates-



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head Council make a credible case for investment. The area now has a major art gallery, The BALTIC, (cost \$80 million), an international concert hall, The Sage, designed by British architect Norman Foster (cost \$160 million) plus a science park, tertiary college, new housing and leisure development (\$250 million). With a new Millennium Bridge over the Tyne (cost \$50 million) connecting Gateshead's flagship arts facilities with Newcastle, this revitalised conurbation is now a major destination for tourism and new investment. It is frequently cited as the key UK example of arts-led regeneration, providing badly needed jobs and educational opportunities for the next generation.

And the population health profile of the town has significantly improved in recent years. > What is the subject of your keynote speech at the international arts and health conference in November?

The practice of arts in community health has rapidly become a small-scale global phenomenon. My presentation will consider how and why this field of arts development has come about, the characteristics of its practice and the challenges it poses for evaluation, and will summarise what has been learned from case studies and research from the UK and elsewhere.

Arts in community health is characterised by the use of participatory arts to promote health. It has not evolved as a result of the successful advocacy of an arts sector keen to demonstrate its relevance to health, but rather through the wider recognition of a connection between engagement in cultural activity and well-being.

> What are your next challenges?

I am developing the arts in health component of a multi-disciplinary 5-year research program in medical humanities which explores the question 'what makes for human flourishing?' And I might have a crack at riding a surfboard while I am in Port.

The Art of Good Health and Wellbeing international arts and health conference will be held at the Glasshouse from 10 to 13 November, 2009. Details from Arts and Health Australia on www.artsandhealth.org phone 0416 641 482 or email info@artsandhealth.org

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