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Title: If the arts are positive for participants so too should they

be for the creative practitioners delivering them.

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"If the arts are positive for participants, so too should they be for the creative practitioners delivering them".

Reflecting on her recent research report <u>Artists Practising Well</u> Nicola Naismith, Visual Artist and Clore Fellow, considers how inconsistencies in affective support for creative practitioners working in health and wellbeing settings can be addressed to protect the health of artists and contribute to the best quality practice for participants.

Many of us are aware of growing reliable evidence that engaging in the arts is good for health and wellbeing. There are good practice guides to help practitioners, commissioners and funders plan the best programmes for participants; however there is scant mention of how best to support creative practitioners delivering this work. With the All Party Parliamentary Group report Creative Health: The Arts for Health and Wellbeing proposing "the most successful arts projects in healthcare involve artists who care"(1) it is important that the health and wellbeing of practitioners is protected. Artists Practising Well, my AHRC and Clore Leadership funded research report completed in March of this year, details what kinds of affective support creative practitioners receive when working in health and wellbeing contexts; what they do to support themselves and what they would like in the future. Based on responses to an online questionnaire and semi structured interviews with cultural leaders, organisations and those involved in delivery, the research found that some creative practitioners are receiving good support while others aren't receiving enough or any. Given that protecting the health and wellbeing of creative practitioners facilitates quality practice for participants, how can good support be integrated into participatory arts work?

Support takes two main forms: Instrumental and Affective. Instrumental support is the practical organisation of work and resources, facilitating the participation in and delivery of sessions. Affective support relates to moods, feelings and attitudes, and can be supported by reflective practice activities. The Artists Practising Well research focuses on affective support, as many practitioners are already managing the challenges of living within the precariat, working on a succession of gigs or temporary contacts with poor levels of autonomy and irregular pay (see Susan Jones guest blog CVAN March 2019).

Artists Practising Well uses data from practitioners working in health and wellbeing settings, but the content is applicable to work that takes place in other challenging contexts including prisons, youth offending, homelessness - all contexts where needs and circumstances can be complex. There is an established understanding that participatory work can be demanding and self care, resilience and wellbeing of creative practitioners is a discourse which is gaining momentum. It is essential discussions translate into action under an ambition shared between practitioner, commissioner, funder and policy maker. Artists Practising Well makes a series of recommendations:

- Conversation Creative Practitioners and Commissioners have equal responsibility to initiate conversations about affective support; reaching agreement about what support is being provided and by whom, at what time and in what form. The Support discussion needs to be on the agenda for all stakeholders as early as possible in the project inception process.
- Co-production Artists need to be at the table in arts for health and wellbeing organisations, for project development discussions and when funding decisions, bids and policies are made and strategies explored, developed and written.

- Funding Affective support needs to be funded in both freelance and employed working. This could be either through provision offered and paid for via the commissioner, or it being recognised as a legitimate cost included in budgets and tenders submitted by artists for health and wellbeing work. Funders and Commissioners should recognise that these 'overheads' are necessary.
- Leadership Leadership development programmes need to view creative practitioners as artist leaders, supporting their skill development in acting as sector representatives. Further, programmes should work to ensure all leaders, and their teams, understand the importance of support and options available.
- Peer to Peer Learning Supporting Peer networks which recognise different levels
 of experience, in addition to work in specific sector contexts for example
 Hospitals, Care Homes and Social Prescribing would help practitioners to build
 self supporting structures for the work they do. Funders need to recognise the
 complexity and offer appropriate budget support.
- Recognition Creative Practitioners working in Health and Wellbeing contexts want to work as artists, and need to have their work acknowledged and valued.
- Support Menu and Vocabulary Developing a support menu, and a common understanding of the different types and models of affective support and reflective practice, will aid those already working in health and wellbeing contexts, and those interested in developing this work in the future. The support menu can be used to facilitate productive discussions between creative practitioners, organisations, funders and policy makers about support relevant to context, duration and nature of the work; as well as individual preferences.

Events held in Norwich and London during <u>Creativity and Wellbeing Week</u> allowed the research and associated presentations to be discussed, explored and expanded. Practitioners were vocal in their appreciation that *their* wellbeing was the focus of current research and debate. The events summary reported a series of <u>thoughts</u> and included ideas of:

- Re-framing the exchange between practitioner and commissioner to a 'with' relationship: avoid practitioner as 'deliverer' and offer working methods which are collaborative, working with shared input and responsibility from the outset.
- Forming an accurate picture of the reality of working in this sector. Discuss the work in balanced ways, both when the work is good, joyful, creative; and when it is hard, challenging and difficult.
- Understanding it's ok not to immediately know how to engage in reflective practice and self care.

Finding which affective support and reflective practice methods work best is an exploratory process: coaching, mentoring, action learning and peer to peer conversations could all be helpful. The most useful support takes into consideration personal preferences, and the context and duration of the work. It is a sign of proactive leadership on the part of the practitioner and the commissioner to agree support activities before project delivery commences.

Whether you work in delivery, commissioning or funding, or write the strategies and policies which frame participatory arts work we each have a role to play in promoting affective support. In so doing we protect the health and wellbeing of practitioners, which will in turn results in quality practice for participants. It is a win-win situation, and one we should all be aspiring to play our part in bringing to fruition.

1. All Part Parliamentary Report Creative Health: The Arts for Health and Wellbeing https://www.culturehealthandwellbeing.org.uk/appg-inquiry/ July 2017 page 113.