



Arts on Prescription  
in Sefton

Programme Report  
December 2009

**Sefton MBC & NHS Sefton**

Cover design: Jessica Bockler

Cover image: Selina Dunne

**Creative**  
Alternatives



*"...simply the **best**  
prescription around!"*



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# Acknowledgements

The Creative Alternatives team would like to thank Invest To Save for enabling the development of this initiative and Sefton MBC and NHS Sefton for supporting the programme so substantially through managerial, advisory and administrative partnerships. Special thanks go to Philip Wroe, Sefton MBC and Pat Nicholl, NHS Sefton for all their efforts in providing strategic advice in addition to vital practical operational assistance. We would also like to thank Dr. Jeff Morgan for his contribution to the steering group and for his informal advice behind the scenes.

The development of this programme would not have been possible without the dedicated work of our programme officers, Jessica Bockler and Elizabeth Lovell, and our many artists who have helped shaped the programme in its first three years of operations. In particular we extend thanks to our core team of creative facilitators Wibke Hott, Sheryl Clowes and Selina Dunne.

Above all, we are profoundly grateful to our clients for their trust and dedication to the programme. Their presence has helped the growth in understanding of arts and health and made the efforts of all who work on Creative Alternatives deeply worthwhile.

# Executive Summary

## Creative Alternatives: Arts on Prescription in Sefton

Creative Alternatives is an innovative 'arts on prescription' programme that offers a range of stimulating and challenging creative activities to those in Sefton experiencing mild to moderate depression, stress or anxiety.

Founded in November 2006, the programme was made possible by a three-year funding award from the Invest To Save budget offered by HM Treasury and which built on the legacy of an earlier arts and health pilot study in Sefton. An interdisciplinary steering group that reflects the partnership between Sefton MBC and Sefton PCT is charged with overseeing general programme strategies and development. Creative Alternatives operates within NHS Sefton's Social Prescribing network that aims to assist people in improving their physical health and emotional well-being through social activities and events beyond traditional healthcare settings.

## Programme Principles and Aims

Creative Alternatives resembles a community arts programme heavily influenced by the principles of Expressive Arts Therapy. It subscribes to the belief that creative practice is inherently therapeutic and thus promotes a multi-disciplinary approach to arts practice, nurturing self-exploration and expression in all its participants. Creative Alternatives aims to:

- Increase the treatment options available to individuals experiencing depression and/or anxiety.
- Reduce reliance on antidepressant or tranquiliser medication.
- Reduce the amount of GP contact time devoted to those with depression and/or anxiety.
- Decrease the symptoms of depression and/or anxiety.
- Improve quality of life and increase self-esteem and confidence.
- Improve a number of key and transferable skills (social, literacy, planning, etc) with the aim of increasing employment prospects.
- Increase participation in arts and cultural activities across the borough of Sefton.
- Provide a model of best practise for 'arts on prescription'.



*Creative Alternatives brings joy, respite, creativity, health and wellbeing to the people of Sefton!*



## Creative Provision

Creative Alternatives provides a free programme of creative activities across Sefton that are open to clients for a period of up to six months. The activities include weekly core workshops focusing on expressive work in the visual arts (e.g. painting, sculpture and mosaic), creative writing and storytelling and also regular additional workshops exploring art forms that require specialist equipment (e.g. photography and pottery). All of the programme's activities reflect the clients' own interests and are led by experienced arts facilitators. Creative Alternatives also provides a schedule of frequent outings to local galleries, festivals, concerts, performances and other regional cultural events.

## Client Base

Creative Alternatives has a total capacity of 72 clients per year. To date (July 2009) 355 individuals have interacted with the programme, 187 of whom have been assessed and have been accepted onto the programme. Analysis of demographic information shows that the majority of those 187 clients are female (73%), over the age of 40 (72%), economically inactive (87%) and accessing other mental health services (73%), with 67% taking medication for a mental health condition. In addition to depression and anxiety many clients report other mental health diagnoses, such as obsessive compulsive disorder, as well as physical health problems, alcohol addiction and serious difficulties in their social and family relationships.

## Key Findings

Creative Alternatives' evaluation, which combines a range of quantitative and qualitative data acquisition tools, demonstrates **highly significant reductions** in both depression and anxiety amongst the client population as follows:

- ❖ **The Hospital Anxiety and Depression Scale** shows a decrease in the symptoms of depression in 65% of clients, a decrease of anxiety in 65% of clients and a dual decrease in the symptoms of anxiety and depression in 48% of clients - results that are classed as **statistically highly significant**.
- ❖ **The Dartmouth COOP Chart**, which assesses general health, shows highly significant improvements in the clients' feelings, daily activities, social activities and overall quality of life post programme participation.
- ❖ The Creative Alternatives Lifestyle Questionnaire identifies 75% of clients as reporting an improvement in their mental health. The Lifestyle Questionnaire also monitors the extent to which clients alter levels of anti-depressant or tranquiliser medication during and post programme participation. 27% of clients report a reduction in medication and 11% of clients have stopped taking medication completely - figures which indicate a significant improvement in mental health and well-being.

- ❖ The Lifestyle Questionnaire and other evaluation tools, such as artist diaries and client feedback questionnaires, indicates a wide range of other benefits to clients including the development of social and communication skills, improvement in diet and physical fitness, reduction in smoking and alcohol consumption and the uptake of voluntary work and education opportunities.



Formby Core Workshop. Photos: Jessica Bockler.

## Organisational Challenges and Recommendations

Over the past three years Creative Alternatives has faced a number of considerable challenges which have shaped the programme's current provision and which will inform its future structure. Centrally the following issues have been identified:

**Managing programme demand:** For the past two years Creative Alternatives programmes have been fully subscribed resulting in the generation of substantial waiting lists of up to up to twenty-five clients for a single core workshop. To alleviate the pressure of high client numbers, the capacity of the programme's core workshops was temporarily increased in 2009, an increase resulting in a significantly larger client base which placed an additional strain on artists and programme officers that proved unsustainable. Maximum capacity has now been reset to twelve participants per core workshop. This experiment demonstrated that no increase in capacity was possible without a corresponding increase in the staffing levels capable of controlling and managing a higher client base.

**Staff time:** The Creative Alternatives officers work to part-time commissions that struggle to accommodate the growing demands of the programme. For the operations to continue at current or expanded levels, additional funding is central to enabling an increase in the scope of existing officer commissions or the commissioning of an additional member of staff.

**Client support:** Client support is a vital programme service. The programme implementation plan attached to Invest To Save funding suggested that additional client services would be sourced through a local organisation (Council for Involuntary Tranquilliser Addiction: CITA) although no budgetary provision had been made for this. To compensate for the failure of this anticipated

partnership to materialise, these services became the responsibility of the programme's officers and led to a strain on core programme delivery, both in terms of emotional demands and heavy workload. The quality and breadth of Creative Alternatives support services could be enriched by further 'in-house' specialist expertise provided either by an additional trained member of staff or through an increase in the level of proactive Sefton PCT involvement.

**Staff support:** Programme clients require a high level of emotional support which impacts on the demands made on staff. Despite the dedication and professionalism of the Creative Alternatives team, specialist clinical supervisory support for the programme officers is an essential requirement for the effective delivery of these roles and it is felt this currently operates at an inadequate level. Team meetings and training sessions have provided a valuable outlet for the sharing of concerns and relieving tensions although the establishment of a formalised clinical staff support system would provide a more rigorous and secure structure and allow for advice on an individual or group basis as necessary. Any staff support network should operate from within NHS Sefton given that the issues most directly affecting staff are those rooted in the mental-ill health of the client group and in the tensions and stresses generated by working to the mental health agenda.



Netherton Core Workshop. Photos: Adela Jones.

**Client attendance:** Regular workshop attendance is of central importance to effective Creative Alternatives operations. The impact of creative activity in improving health and well-being may only be demonstrated by regular workshop attendance and the social benefits of the programme are increased through high levels of client commitment, allowing relationships to be formed with artists and other participants. Unfortunately, full core workshop subscription does not always equate to full workshop attendance. Due to the combination of mental ill-health and the additional challenges of poor physical health and motivation, many clients struggle to fulfil their weekly obligation to their core workshop.

**Length of client involvement:** Original project funding objectives suggested that creative interventions should be of six to eight weeks duration per client. To expect changes in client mental health and well-being within this time frame became unrealistic (even though a more demanding workshop schedule was originally suggested). In order to maximise the effectiveness of Creative Alternatives on the client, the period of access was extended to a total of six months programme membership; a timeframe shaped by available project funding and client flow. Client feedback suggests that six months membership may still be of insufficient length for the programme to impact

on client recovery from depression and/or anxiety and that this should be increased to provide the option of a time extension should this be beneficial on a case-by-case basis.

**Sefton's geography:** Sefton is a difficult borough to navigate as it spans 21 miles from Bootle in the south to Southport in the north and, to acknowledge this obstacle, core workshops have been strategically sited to ensure that any one workshop is within travelling distance for clients resident in any part of Sefton. Despite this accommodation, many clients experiencing depression and anxiety find the issue of travel a prohibitive barrier to programme participation either through issues of cost or due to the stress of public transport use. The establishment of additional workshops in the locations of Bootle or Maghull, areas where programme demand has been recorded, would address the issue of physical access although not without an influence on funding or staffing levels.

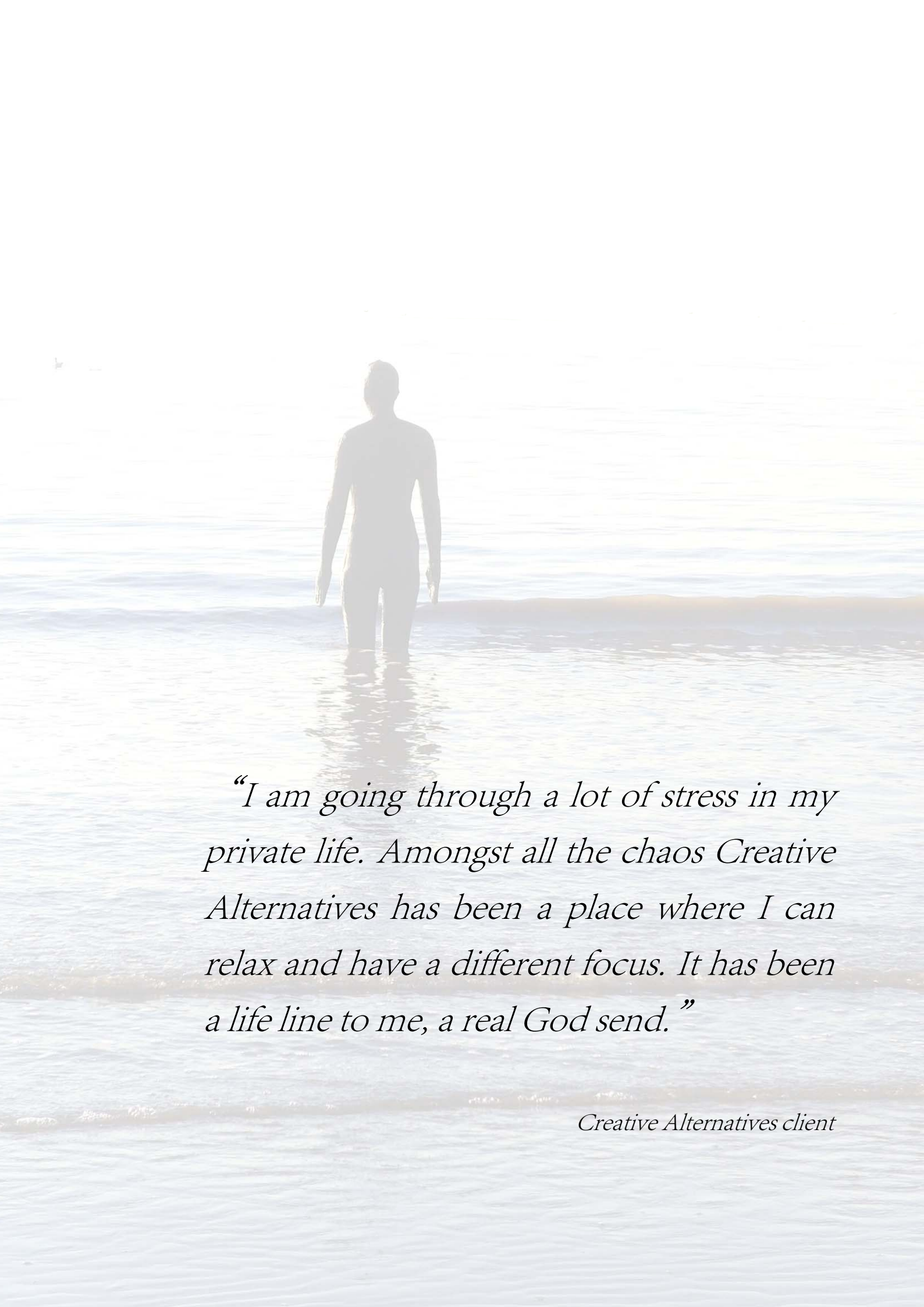
**Additional costs for clients:** There is currently no budgetary provision to support clients on low incomes with childcare or travel expenses and, as a consequence, this has become a barrier to Creative Alternatives membership for some. An ability to address this issue would widen accessibility and further democratise the programme by ensuring that all those in need may benefit from its service, irrespective of personal financial circumstances.

**Volunteering Scheme:** Creative Alternatives has identified a need from both clients and health professionals for access to volunteering opportunities within the programme. Volunteering potential could allow for individuals to increase their skills base while boosting their confidence and career options, an ambition capable of implementation within current staffing expertise. While it would be desirable to develop a service element that satisfied this need, the implications on budgets and staff time currently make this option undeliverable.

**Additional Health Promotion:** Clients have frequently requested that additional health-related services be available through Creative Alternatives with suggestions including workshops on alcohol awareness, confidence building, self-help techniques for anxiety or depression and healthy diets. Although staff offers this service to clients on an individual basis, group workshops led by experienced PCT facilitators would be of tangible benefit should appropriate delivery mechanisms be identified. Given the nature of service users, Creative Alternatives is well placed to promote a range of health messages to a receptive and vulnerable target group within familiar community venues, a development warranting closer consideration by NHS Sefton.



Southport Core Workshop. Photos: Wibke Hott.

A silhouette of a person standing in shallow water, looking out at the ocean under a bright, hazy sky. The person is centered in the frame, and their reflection is visible in the water. The background is a vast expanse of water meeting a bright, overcast sky.

*“I am going through a lot of stress in my private life. Amongst all the chaos Creative Alternatives has been a place where I can relax and have a different focus. It has been a life line to me, a real God send.”*

*Creative Alternatives client*

# Introduction

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*“Arts Council England believes the arts play an essential part in creating a sense of wellbeing and improving quality of life, and that this, in turn, contributes to the health of individuals, communities and the nation.”*

A prospectus for arts and health (2007, p. 2)

The body of evidence linking creative activity to improvements in mental well-being is compelling and now increasingly accepted by healthcare professionals with the publication of each new research study. Arts service providers have long recognised that creativity has a beneficial impact on feelings of personal fulfilment, self expression and social cohesion amongst participants and audiences alike and that the arts can be uplifting in ways which are often hard to define and yet are fundamental to who we are, both as individuals and as communities.

This report takes a further significant step in measuring and questioning this impact in one of the most thorough and exciting initiatives in the field of arts and health in recent years. Sefton MBC has long been pioneering in its use of the arts as a valuable social, health and economic tool and, through the Creative Alternatives programme, has now developed a nationally acknowledged model of good practice which rewards the close strategic and operational partnership between Sefton's arts service and NHS Sefton. Sefton Leisure Services is proud of its support for arts and health initiatives and gratefully acknowledges the role of Invest To Save funding in supporting Creative Alternatives from its inception. I am confident that the programme will continue to have a far-reaching influence on the health of Sefton's residents long into the future.

Graham Bayliss  
Director of Leisure Services, Sefton MBC

Tackling health inequalities is a priority for NHS Sefton and Sefton Council. We know those experiencing mental health problems also frequently have poor physical health. Creative Alternatives has demonstrated that it not only improves clients' mental health but also impacts on overall health behaviours. The evaluation information shows an increased motivation to adopt a healthy lifestyle and a reduction in harmful coping mechanisms, such as smoking and alcohol abuse. As such, Creative Alternatives has demonstrated that it can offer a cost-effective treatment option that enhances self-care and sustainable health improvement.

Dr. Janet Atherton  
Director of Public Health, NHS Sefton

# Depression and Anxiety: Symptoms, Prevalence and Treatments

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*“Depression is as old as the human race, and rare is the person who has not felt its touch.”*

Rowe (2003, p. vii)

*“It’s only human to feel anxious ... some of the time. After all, it is part of our survival kit – none of us would live long if anxiety didn’t stop us from taking foolhardy risks.”*

Griffin & Tyrrell (2007, p. xv)

## Defining Depression and Anxiety

The sphere of mental ill-health can embrace a wide range of conditions of which the most common includes eating, anxiety and affective (depression) disorders and schizophrenia. These conditions directly affect one quarter of the population of the UK in any single year (Mental Health Foundation, 2006).

Creative Alternatives operates within the territory of the common mental health disorders of depression and anxiety, both of which may be experienced independently or in combination. Sanders & Wills (2003) propose that anxiety is based on the anticipation of future problems, e.g. *I will lose my job, I will make a fool of myself*, whereas depression is associated more with past reflections e.g. *I've been abandoned, I've failed*.

According to Stirling & Hellewell (1999) depression is one of those conditions within the diagnostic grouping of ‘affective disorders’ along with bi-polar depression (where an elevation in mood is also experienced), and post-natal depression (associated with childbirth). Creative Alternatives is a service to all those experiencing the milder to moderate range of depressive illness.

### The major symptoms of depression (adapted from DSM IV, 2000) include:

- Low mood.
- Lack of interest or pleasure in daily activities.
- Decrease or increase in appetite leading to significant weight loss (when not dieting) or weight gain.
- Sleeping difficulties - insomnia or hypersomnia.
- Feelings of worthlessness or excessive/inappropriate guilt.
- Difficulty concentrating or making decisions.
- Recurrent thoughts of death or suicide.

The majority of Creative Alternatives clients demonstrate symptoms of a generalised anxiety disorder. As with depression, there are different diagnostic categories of anxiety including post traumatic stress, panic disorders, agoraphobia, social phobias and obsessive compulsive behaviour, (Griffin & Tyrrell, 2007).

**The major symptoms of generalised anxiety disorder (adapted from DSM IV, 2000) include:**

- Excessive worry.
- Feeling tense/wound up and easily irritated.
- Difficulty relaxing.
- Insomnia.
- Difficulty concentrating or making decisions.
- Anxiety attacks – sudden and intense periods of anxiety, commonly called ‘Panic Attacks’.
- Abdominal discomfort and/or diarrhoea.

Although many of these symptoms are common and within the expected range of human experience, their prolonged severity and intensity would suggest a problem beyond normal coping mechanisms and which would require specialist intervention.

**The prevalence of depression and anxiety**

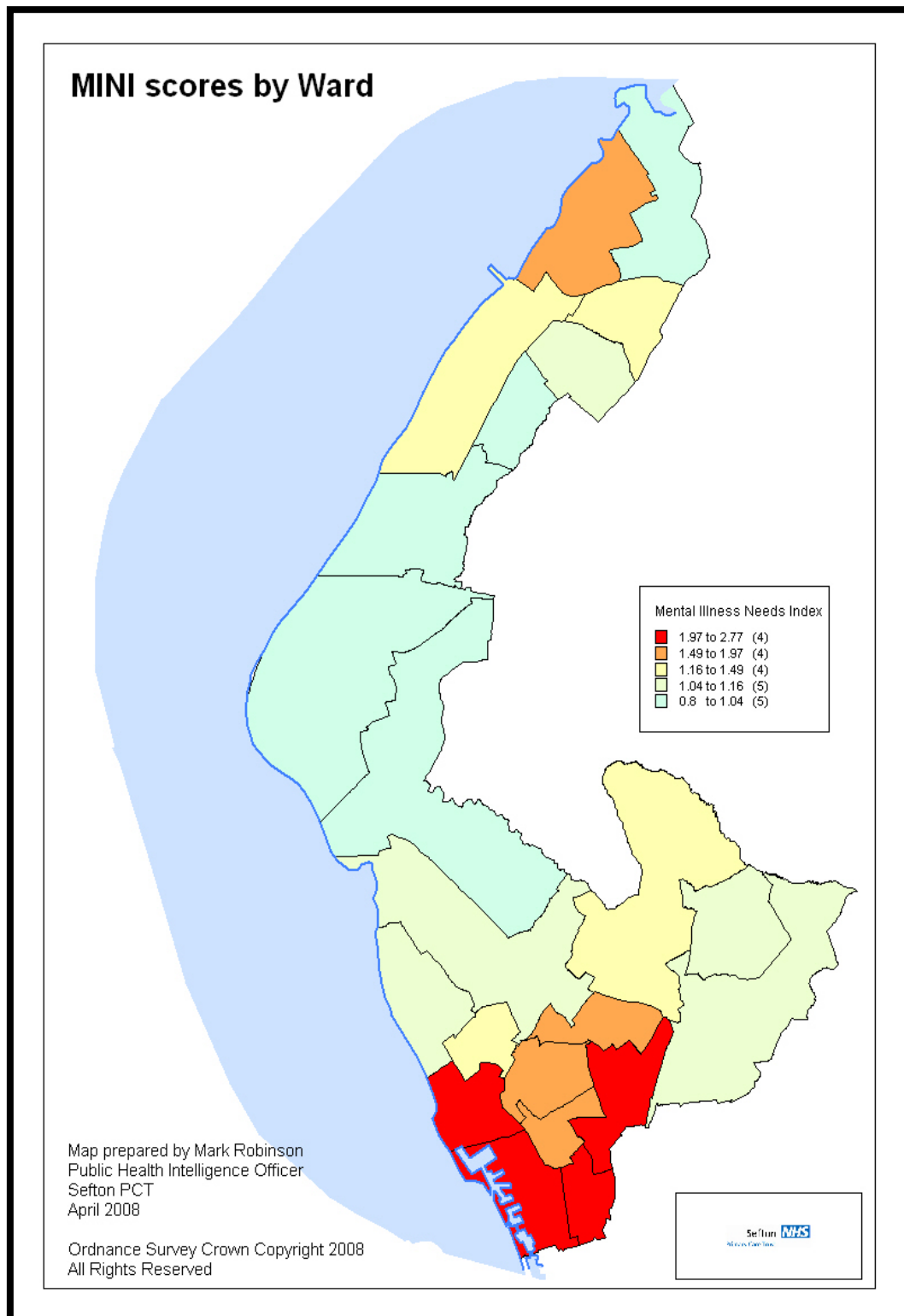
A number of factors have prevented the accumulation of accurate data relating to the scale of depressive illness: many of those experiencing recognised symptoms fail to seek professional support and the range of mental health conditions and their scales of intensity further serve to complicate and confuse wide analysis. As Hurcombe (2007) writes, *“According to the World Health Organisation, depression will become the world’s second most pervasive debilitating condition by the year 2020, second only to heart disease”* (p. xv).

The Office of National Statistics (2000) concluded that one in six adults in Great Britain experienced a neurotic disorder (such as anxiety and depression), while one in seven had considered suicide at some point in their lives. The most common mental disorders were: mixed anxiety and depression (7% for men, 11 % for women), anxiety (4 % for men, 5 % for women) and depression (2% for men, 3 % for women).

According to Sefton NHS Public Health Intelligence (2009), modelling indicates that in Sefton the figure for those with mixed anxiety or depression could be as high as 27,000, with an additional 8,000 suffering a depressive episode.

A recent analysis of NHS antidepressant prescribing data by the Mental Health Foundation (2009a) revealed that 22 of the 25 highest prescribing primary care trusts were located in the North of England with Sefton being ranked 31 out of the 152 PCT’s in England. In response to the analysis Dr. McCullough, Chief Executive of the Mental Health Foundation, proposed that *“People should be offered a range of treatment options for depression and other common mental health problems, not just antidepressants, which can have unpleasant side effects for some people”* (2009).

The **Mental Illness Needs Index (MINI)** is a measure of social deprivation and also predicts levels of mental ill-health in a population. Sefton has above national average MINI Scores, with some very high scores in certain council wards, indicating high concentrations of those experiencing mental ill-health. Furthermore, research by NHS Sefton Primary Care Trust shows that the borough had above national average rates of prescriptions for both antidepressants and Benzodiazepines between April 2008 and March 2009.



## Causes of depression and anxiety

No two experiences of depression or anxiety are comparable, combinations of symptoms tied to complex personal histories serves to create a unique clinical profile of an individual leading to various causal hypotheses from among the healthcare profession. One school of thought, advocated by Clinical Psychologist Dorothy Rowe, holds that depression and anxiety are normal reactions to life circumstances, that symptoms are *'reactive'* - Stirling & Hellewell (1999, p. 52). In her bestselling book *'Depression, the way of out of your prison'* Rowe (2003) describes how life events and a person's reaction to them may lead to a depressive state, a point reinforced by the high incidences of bereavement, unemployment and/or physical ill health from among the Creative Alternatives client base.

An alternative theory, advocated by Stirling & Hellewell, suggests that the root of depression/anxiety may be *"endogenous, which literally means 'arising from within'"* (1999, p. 52). Hurcombe (2007) explains that depression has been linked to problems relating to the brain's level of the neurotransmitters serotonin and dopamine, chemical messengers which impact on our mood and behaviour. Griffin and Tyrrell explain the biological basis of anxiety in relation to the *'fight or flight response'*. When faced with danger the body reacts to increase its chances of survival, e.g. muscles tense ready for action, the heart beats faster to improve circulation, and breathing increases to force oxygen intake.

*"This excellent system has served us well for millions of years. But it was designed to deal with circumstances in which we could take action. The stresses we face today are less often of the life-threatening kind. More usually, we find ourselves in circumstances where we feel psychologically threatened"* (2007, p. 13).



Netherton Core Workshop. Photo: Adela Jones.

In these situations it is often not appropriate to *'fight or flee'* although the physical response still occurs, leaving a *'residue'* of biological and psychological reactions that lead to states of anxiety.

Other explanations for the causes of depression/anxiety include a genetic link (Layard, 2005), faulty cognitive processes (Sanders & Wills, 2003), lack of social support (Stirling & Hellewell, 1999) and dietary problems (Geary, 2001).

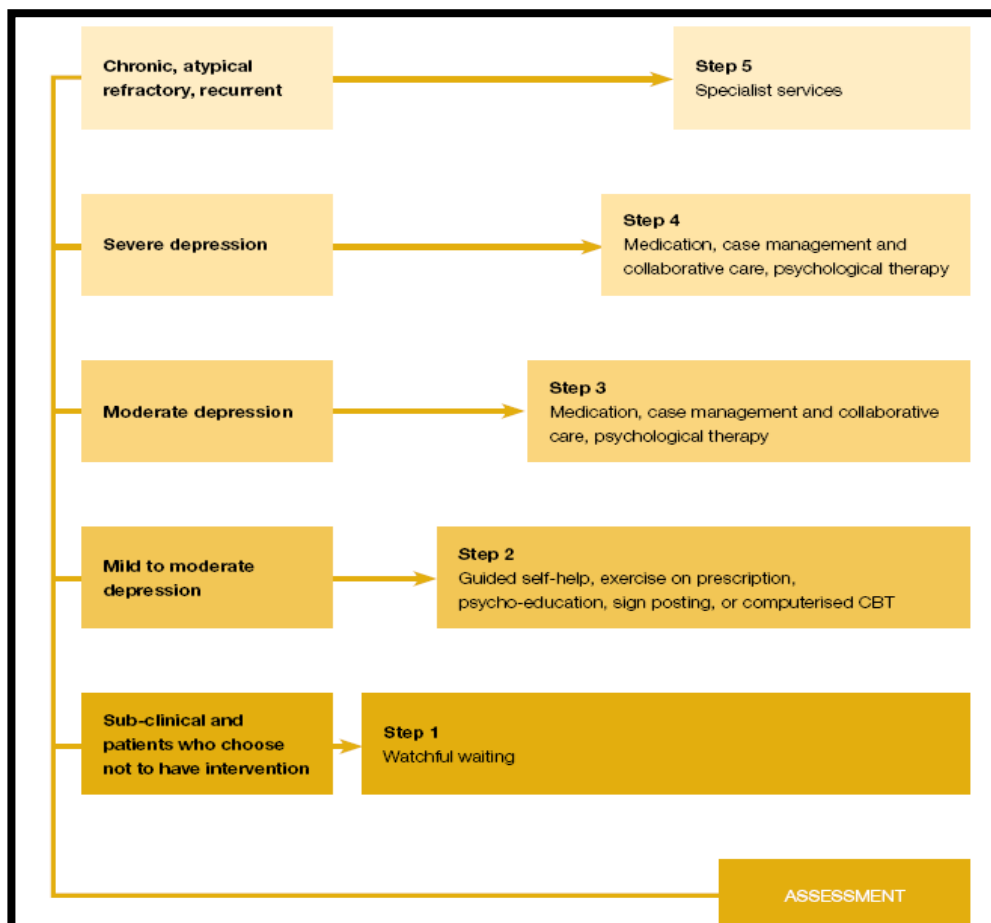
## Treatments for depression and anxiety

Irrespective of the triggers to depression or anxiety, once their symptoms are beyond a normal and controllable range, professional help may be sought. Current treatment options available include:

- ✓ Medication: antidepressants, tranquilisers, Benzodiazepines and mood stabilisers.
- ✓ Talking therapies: counselling, cognitive-behavioural therapy and psychoanalysis.
- ✓ Self-help exercises: relaxation techniques and computer based programmes, such as 'Beat the Blues' and 'Fear Fighter'
- ✓ Social Prescribing programmes: Creative Alternatives lies within this definition.
- ✓ Group support – often established by people with experience of the condition as a way of offering mutual support within the local community.

**Improving Access to Psychological Therapies (IAPT)** is a government initiative from 2006 that aims to present a range of psychological therapies to those with depression and anxiety disorders within the primary care system. These therapies are approved by the National Institute for Health and Clinical Evidence (NICE) and include guided self-help, psycho-education groups, counselling, and cognitive behavioural therapy.

This initiative operates a **Stepped Care Model**. Creative Alternatives contributes towards offering access to a broader range of psychological therapies, particularly at Steps 2 and 3, thereby reducing the overall average waiting time for intervention.

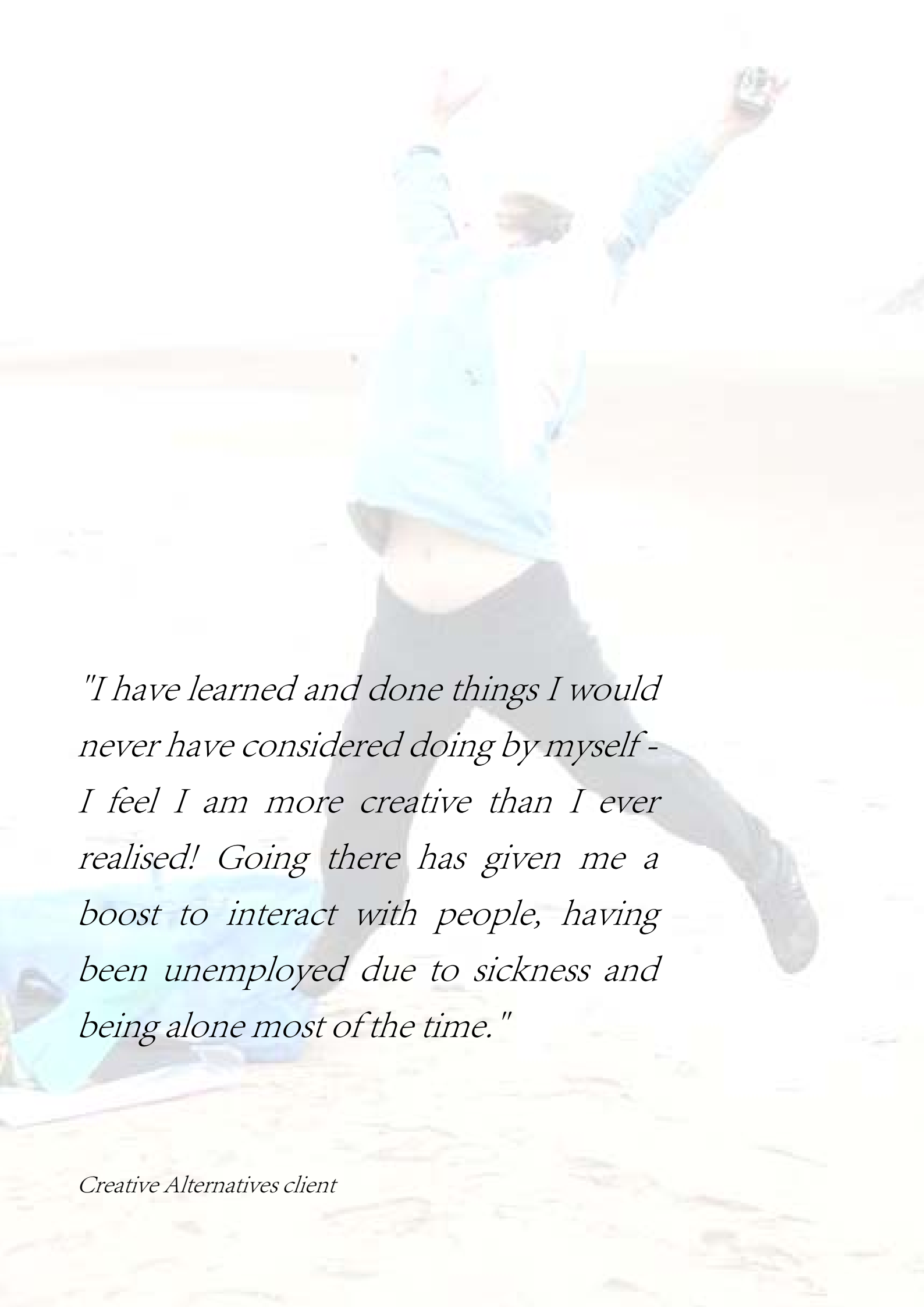


Stepped Care Model, NHS Sefton.

**Social Prescribing** is the use of non-medical interventions within community settings to improve mental health and well-being and may be accessed at any stage within the stepped care model. Creative Alternatives operates as part of a network of social prescribing programmes within Sefton that also includes Active Sefton (physical activity), Relax and Revive (physical activity, including yoga and tai chi), Active Reading (bibliotherapy) and the Citizens Advice Health Outreach scheme. These programmes recognise the importance of social, economic and cultural factors on well-being and provide Sefton residents with a 'menu' of treatment options that encourage levels of self-help, personal responsibility and social and community engagement. The collateral benefit of this approach is the easing of pressure on more traditional healthcare resources, including contact time with GP's and psychological services. Research by the Mental Health Foundation (2005) concludes that 60% of GP's would prescribe antidepressants less frequently should alternative options be available to them. In response to the NHS Prescription Cost Analysis for England in 2008, the Head of Policy for the Mental Health Foundation, Simon Lawton-Smith, noted,

*“This data shows how over-reliant we’ve become on anti-depressants, with a near doubling in the number of prescriptions in a decade. Medication can be helpful for some people but it is not the only or always the best answer. We need more choice for doctors and their patients, including psychological therapies, exercise schemes and social prescribing. At the moment GPs often want to provide these kinds of alternatives but they are not available locally”* (Mental Health Foundation, 2009b).



A person wearing a light blue hoodie and black leggings is captured in a joyful moment, jumping with their arms raised high in the air. They are standing on a sandy beach, and the background is a bright, overexposed sky and ocean. The overall mood is one of happiness and freedom.

*"I have learned and done things I would never have considered doing by myself - I feel I am more creative than I ever realised! Going there has given me a boost to interact with people, having been unemployed due to sickness and being alone most of the time."*

*Creative Alternatives client*

# An Arts & Health Partnership

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Creative Alternatives unites the disciplines of the arts with health care in a programme that uses a range of creative approaches in the treatment of mild to moderate depression and anxiety. The meeting of these two disciplines is reflected in the programme's managerial structure that is based on a partnership established in 2005 between Sefton MBC's Leisure Services Directorate (Arts Development) and NHS Sefton. This partnership was forged with the joint commissioning of arts consultant Jessica Bockler for the delivery of a pilot research project examining the effectiveness of arts interventions on well-being in south Sefton, a project which ultimately identified the value of concentrating such activity within the clinical area of mental health (see Bockler, 2006).

Creative Alternatives' interdisciplinary approach is reflected in the experience and credentials of its delivery team who possess a wide-ranging skills base within the fields of psychology, psychotherapy, counselling, art therapy, applied music, drama and the visual arts (see 'Programme Team' for more details).

The disciplines of arts and health have long been combined in a variety of contexts:

- ✓ **Health care promotion:** Artists have been instrumental in delivering health messages to the public through awareness campaigns, issue-based workshop programmes and health care marketing.
- ✓ **Health care environments:** Artists increasingly work within hospitals and other health care settings to improve surroundings and services for patients and staff.
- ✓ **Medical Humanities:** The humanities (e.g. literature, arts, philosophy) are used to encourage medical practitioners to be more reflective in their work and to increase their understanding of the experience of ill health and suffering.
- ✓ **Analytical Art Therapy:** The term 'art therapy' was coined by Adrian Hill in 1942. Art therapy is a distinct professional field that combines the practice of visual arts with psychotherapeutic theories and techniques and involves a therapeutic encounter or relationship between a client and an officially qualified Art Therapist. Art Therapy places its emphasis on the analysis of the symbolic content of the art produced by the client. Other forms of creative therapies (e.g. drama therapy and music therapy) have also been developed with some placing more emphasis on a psychoanalytic approach than others.
- ✓ **Expressive Arts Therapy:** Expressive Arts Therapy postulates that all creative practice is inherently therapeutic and focuses on promoting an intermodal creative process that fosters self-exploration and expression. Major contributors to this approach include Edward Adamson (e.g. 1991) and Natalie Rogers (e.g. 1997).

- ✓ **Community arts programmes:** In recent decades there has been a shift towards providing health care within community settings, particularly for the treatment of mental ill-health. As part of this shift there has been an emergence of out-patient and community based arts programmes with a health focus. Arts Council England (2007) highlights the important role of the arts within the community, *“...the arts have a major part to play in helping to galvanise community engagement and participation in civic life.”*

Within the plethora of arts & health approaches, Creative Alternatives most closely resembles a community arts programme heavily influenced by the principles of Expressive Arts Therapy. It principally promotes a multi-disciplinary approach to arts practice which nurtures self-exploration and expression in all clients and which is inherently therapeutic. For more information on the programme’s philosophy see ‘Creative Alternatives: Approach & Principles’.

Creativity has been applied successfully to the management, psychological adjustment and recovery process from the following health conditions:

- Chronic pain (Lamers, 2005)
- Pain caused by rheumatoid arthritis (Schorr, 1993)
- Chronic illness (Reynolds & Vivat, 2008)
- Dementia (Allan & Killick, 2000)
- High blood pressure (Konlaan et al, 2000)
- Cardiovascular problems (White, 1999)
- Parkinson’s disease (Pacchetti, 2000)
- Post traumatic stress disorder (Landy, 2009)
- Anxiety and depression levels in patients receiving chemotherapy treatment (Staricoff, 2003)



Creative Writing & Meditation Workshop.  
Facilitators Sheryl Clowes & Jessica Bockler.

## Arts & Health today

Increasingly, the credibility and value of the interdisciplinary partnership of arts and health is emphasised with the publication of each new study or research data.

In 2007, Arts Council England and the Department of Health jointly produced '*A prospectus for arts and health*', a document celebrating the link between the two disciplines, presenting exemplary case studies and examining current research findings.

*"The Department's policy is that the arts have a major contribution to make to well-being, health, health care provision and health care environments, to the benefit of patients, service users, carers, visitors and staff, as well as to communities and the NHS as a whole." (2:2007)*

The international *Journal of Applied Arts and Health* was launched in 2009 at the international conference '*Inspiring Transformations: Applied Arts and Health*' at the University of Northampton, England and serves as a forum for the publication of debate in this interdisciplinary field, providing a place for 'high quality scholarly activity'. The journal is aimed at a wide community of researchers, artists, health care professionals, therapists and policy-makers.

London Arts in Health Forum (LAHF) works nationally to develop the role of culture in well-being. The organisation supports a network for professionals in the field to share their research findings and examples of best practice.

*"Twenty years ago, the role of the arts in health and care was largely decorative, increasingly, there is an understanding that participation in the arts and access to a range of arts opportunities can dramatically improve health outcomes and increase wellbeing." (LAHF, 2009).*

Locally, Arts for Health at Manchester Metropolitan University contributes to the development of this national network with specialism in research, advocacy and regional strategic development. Over the past three years Arts for Health has undertaken a research project for Invest To Save, building the evidence base as to the effectiveness of creativity, culture and the arts on health and economic outcomes. Arts for Health supports a number of initiatives across the Northwest, including the Greater Manchester Arts and Health Network (GMAHN) which promotes best practice in arts and health and builds awareness of programmes in the local area. For more information visit: <http://www.artsforhealth.org>

Between 2007 and 2010 Arts Council England, North West and the Department of Health, Public Health, North West are working to develop the regional arts and health infrastructure. Plans are now under way to initiate a Merseyside wide arts and health network akin to GMAHN, which will be managed by a Merseyside arts and health coordinator.

# Arts on Prescription: The Healing Power of Creativity

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*“It’s not that we think the arts are some kind of catch-all medical panacea – that listening to the Beatles is some kind of cure for illness – but projects up and down the country that involve partnerships between arts and health professionals are demonstrating real benefits – improving patient self esteem, helping people make connections and engendering a sense of community.”*

Rt. Hon. Alan Johnson, MP (July 2008)

While the therapeutic benefits of creative engagement on mood and well-being have long been recognised, many within the medical community have maintained a resistance to the increasing body of evidence that substantiates and validates these benefits. The ability of the arts to provide essential routes to self-expression and communication for those to whom other options are restricted is supported by cogent professional analysis (Killick, 1999; Allan, 2000). Studies have demonstrated the power of the arts to assist individuals in regaining control over their inner world (Jensen & Blair, 1997) and to help improve cognitive and social skills (Snow et al, 2003). The following studies have further demonstrated that those with mental health problems derive significant benefits from arts participation.

1. Seckler et al (2007) noted improvements in participants’ mental health (as measured by CORE), social inclusion and their sense of empowerment. Seckler also reported improvements in confidence, self-acceptance, a sense of pride and achievement and an alleviation of worries.
2. A review by the Health Education Authority (1999) into community based arts projects demonstrated that participation in creative activity improves mental health by:
  - ✓ Increasing a sense of connectedness to others
  - ✓ Enhancing motivation
  - ✓ Providing a more positive outlook
  - ✓ Reducing a sense of fear, isolation or anxiety.
3. A study commissioned by the Department for Culture, Media and Sport in 2005, entitled *“Mental health, social inclusion and arts: developing the evidence base”*, showed that participation in the arts leads to significant improvements in health, can boost self esteem and reduce feelings of isolation and exclusion.
4. Prior to this study, the Department for Culture, Media and Sport (1999) commissioned a number of case studies exploring the impact of referral from health and social services into arts activities. These case studies found that participants used in-patient and other hospital services less often and that the risk of relapse was reduced.

## Arts on Prescription

Arts on Prescription programmes are part of the wider move towards Social Prescribing and are flourishing across the UK, offering creative interventions as an alternative to standard treatments such as medication and talking therapies.

In 1995 Stockport MBC and PCT introduced one of the first Arts on Prescription programmes in the country. Huxley (1997) evaluated Stockport's pioneering programme that aimed "to increase the level of mental well-being of participants using a wide range of creative processes" (Newell and Gournay, 2000, p. 412). The report showed that there was an improvement in self-expression, self-esteem, social functioning and social participation with evaluation demonstrating evidence of a reduction in the use of GP, social worker and other support services by participants. For further details visit [www.artsforrecovery.com](http://www.artsforrecovery.com).

Established in 1986, Start in Salford now operates a leading and international award winning Arts on Prescription service – 'Time Out'. Start in Salford is funded by Manchester Mental Health and the Social Care Trust. For further details visit [www.startinsalford.co.uk](http://www.startinsalford.co.uk).

In 2008 Leeds PCT commissioned a scoping report of 'Arts on Prescription' projects; contributory programmes established that the majority of their participants reported a range of improvements to their mental health and well-being, including:

- Increased engagement with their community (63%)
- Personal development, i.e. increased self-confidence/self-esteem (63%)
- A reduction in mental health symptoms (36%)
- A reduction in GP visits (36%)



# Meeting Government Guidelines

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The work of Creative Alternatives is informed by the latest government guidelines and recommendations, as outlined below.

## The programme:

- ✓ Increases individuals' options, it encourages personal responsibility for health and the ability to make informed choices.
- ✓ Focuses on strengthening factors such as positive well-being, building resilience, developing coping skills and aiding recovery.
- ✓ Builds stronger communities and presents a positive public image of mental health.
- ✓ Reduces stigma, discrimination and social exclusion.
- ✓ Provides a service for individuals with mild to moderate mental health problems, preventing the development of more severe mental illness and reducing the risk of suicide or self-harm.
- ✓ Assists those with long-term physical health problems and individuals affected by drug/alcohol misuse.

The public health White Paper, **Choosing Health (2004)**, sets out the key principles for public guidance on healthier and more informed lifestyle choices. The paper asserts an overarching priority to improve mental health and highlights the importance of community-based models of practice.

**Making it possible – improving mental health and well-being in England (2005)** recommends positive steps which can be taken to improve well-being which include:

- Doing something creative
- Learning a new skill
- Getting involved and making a contribution

Creative Alternatives also shares the vision of **Our Health, Our Care, Our Say (2006)** which establishes plans to improve community-based health and social care services and focuses on preventative interventions and the promotion of health and emotional well-being.

Creative Alternatives addresses a number of the HM Treasury **Public Service Agreements (2007)** under the sub-heading “Stronger communities and a better quality of life,” as follows:

- “Promote better health and well-being for all.”
- “Ensure better care for all.”
- “Build more cohesive, empowered and active communities.”
- “Reduce the harm caused by Alcohol and Drugs.”

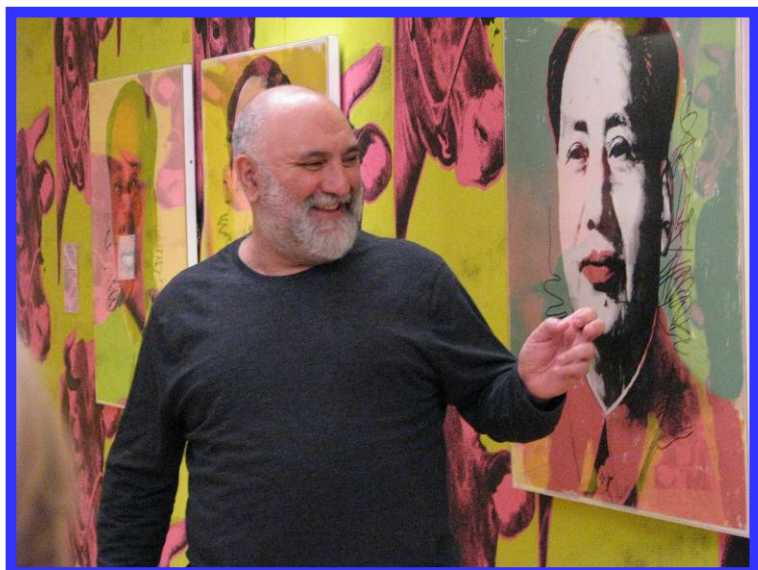
NHS Sefton’s **‘Better Health Better Life’** strategic plan 2008 – 2013, identifies improved mental well-being as a key objective with a particular drive to reduce the number of deaths by suicide in the region. Creative Alternatives subscribes to this plan which focuses on *“prevention, lifestyle change, longer and better life and the shift of services from secondary to primary care and community settings”* (5).

Creative Alternatives contributes towards the plan’s aims to:

- *“reduce the burden of mental illness and mental ill-health on individuals, households, communities and the economy”*
- *“stem and reverse the unacceptably high levels of alcohol misuse”*

Creative Alternatives fulfils the levels of mental health improvement intervention as outlined in **Sefton’s Mental Health Improvement Strategy - ‘Positive Living’ (2007)**:

- “Strengthening Individuals”
- “Strengthening Communities”
- “Reducing Structural Barriers to Mental Health”



Clients and staff at an outing to TATE Liverpool, meeting Alexei Sayle.  
Photos: Wibke Hott.

Creative Alternatives contributes towards **Sefton's Local Targets 2007 - 2010:**

- "Improvement in mental well-being for individuals, communities, and organisations."
- "Suicide prevention and suicide reduction by at least 20% from baseline in 1996."
- "Increased access to 'social prescribing' interventions for self-care."

Creative Alternatives addresses Sefton Councils **Local Area Agreement (2007) Indicator 124:** *"People with long term conditions supported to be independent and in control of their condition"*.

Creative Alternatives addresses the following of **Sefton MBC Corporate Objectives:**

- Improving health and well-being
- Creating a learning community
- Creating inclusive communities
- Improving the quality of council services

Creative Alternatives meets the following **Sefton MBC Leisure Services Departmental Objectives:**

- To seek to deliver a high quality service that is valued by the community
- To work with the community and others to improve facilities and services
- To use existing resources effectively and seek to attract new resources
- To develop and promote the role of Leisure Services as a key contributor to the health, social, environmental, economic and educational well being of the community.

# Creative Alternatives: Approach & Principles

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## A Person-Centred Philosophy

Creative Alternatives' approach is broadly underpinned by a person-centred philosophy, as advocated by humanist psychologist Carl Rogers (e.g. 1951). The programme follows the principles of what Rogers identified as the 'Actualising Tendency':

*"Individuals have within themselves vast resources for self-understanding and for altering their self-concept, basic attitudes and self-directed behaviour; these resources can be tapped if a definable climate of facilitative psychological attitudes can be provided"* (1980, p. 115).

This approach acknowledges that the potential for increased health and well-being resides within each client and it is the task for Creative Alternatives to allow this innate potential to be realised.

Rogers emphasises the role of the therapist in the creation of a climate conducive to personal growth. He asserts that therapists ought to adopt a congruent, genuine, non-judgemental and empathic attitude towards their clients. Similarly, the Creative Alternatives ethos is to forge non-judgemental, caring, and respectful relationships with clients throughout the programme by engendering an atmosphere of trust, empathy and unconditional positive regard.

As Carl Rogers' daughter Natalie Rogers (1997) explains, *"Empathy and acceptance give the individual an opportunity to empower herself and discover her unique potential. This atmosphere of understanding and acceptance also allows you, your friends, or your clients to feel safe enough to try expressive arts as a path to becoming whole"* (p. 4).

## On the Creative Process of Self-discovery

Creative Alternatives subscribes to the approach that every person has an innate capacity for creativity and that creative activities are inherently healing and life-enhancing. The programme encourages exploration and play across all art forms, enabling clients to discover their own unique ways of accessing and expressing their creative potential. As the composer Stephen Nachmanovitch states, *"What we have to express is already within us, is us, so the work of creativity is not a matter of making the material come, but of unblocking the obstacles to its natural flow"* (1990, p. 10).

Creativity has long been a mechanism by which the deeper levels of the psyche are explored, facilitating greater self-awareness and insight: *"The seeds of much of our creativity come from the unconscious, our feelings, and our intuition"* (Rogers, 1993, p. 4). As creative practice unfolds the

discovery of unknown psychological facets ultimately engenders an increased sense of wholeness, self-acceptance and harmony.

The process of creative self-discovery can be joyous, empowering and uplifting – but it can be equally unsettling, stirring and disconcerting. Art therapist Pat Allen (1995) has noted that *“Art is a way of knowing what it is we actually believe”* (p. 3) and confronting our deep-seated beliefs and values can be an uncomfortable process. Suzi Gablik (1991) suggests that *“What we are learning is that for every situation in our lives, there is a thought pattern that both precedes and maintains it. So that our consistent thinking patterns create our experience. By changing our thinking we also change our experience. [...] The basic step is to confront what we actually believe”* (p. 27). To confront our beliefs often means to confront our resistance to change and *“Fear will throw up difficult and unpleasant images at the gate of the imagination. Many of us worry that if we delve too deeply, we may find terrible things, or nothing at all, no options, no solutions”* (Allen, 1995, p. 4). In recognition of the potential for expressive work to overwhelm a vulnerable mind, Creative Alternatives seeks to encourage a gradual forward momentum while respecting fears and resistances.

Any personal crisis may carry within it the seeds for transformation and healing. It has been well demonstrated that consistent engagement with the imagination allows individuals to become more flexible in their beliefs and thought patterns and enable them to view challenges in their lives from new perspectives.

While Creative Alternatives recognises the healing power of creative play, the process is not comparable to a standard art therapy approach, as the Creative Arts Facilitators operate as artists and not as therapists engaged in a psychoanalytic context. Rather, the facilitators draw on the powers of **Active Imagination**, i.e. the creative engagement with images and impulses emerging from the unconscious via spontaneous play in any expressive medium, as conceived by Carl Gustav Jung (e.g. 1935). Jung advocated that Active Imagination alone would initiate a natural healing process and asserted that Active Imagination exerts a *“sort of magical effect, that is, a suggestive influence which goes out from the images to the individual, and in this way his unconscious is extended and is changed”* (Jung in Chodorow, p. 148) – a process which analysis could later consolidate but which it could never initiate or replace.

**It is a central principal of Creative Alternatives that creative exploration and expression engender a deeper emotional understanding and that it is this deeper knowing and recognition which is the gateway to profound transformation and healing.**

*“I am just very grateful that you to let me join this course. I don’t think I would have looked into myself as much as I have done because I have been afraid of what I might see. I feel so much better in myself and I think that is because of time spent concentrating on putting my feelings into pictures, using colours as a way of showing how I feel.”*

*(Creative Alternatives client)*

## Programme Principles

Throughout Creative Alternatives the following person-centred based principles are maintained:

- ***All workshops and activities are client-led.*** Clients are encouraged to participate in the programming of cultural visits and activity, their workshop access is structured to allow for the shaping of activity around personal needs and the programme's output is responsive to consultative process. Within the protected allocated space of the workshops, clients may work independently or within social groupings, as personal circumstances and preferences dictate.
- ***All clients have an innate capacity to be creative.*** As arts activity is focussed on the creative process rather than on the creation of an art 'product', so clients use expressive creative play across all art forms in a non-judgemental or non-competitive context.
- ***Creative exploration and play are nurturing, healing and life-enhancing.*** While creative activity may indeed expose subliminal self awareness leading to a more balanced sense of identity, within this process also lies the key to unlock suppressed anger, sadness or suffering. Creative Alternatives offers a supportive environment in which emotions may be safely expressed and constructively channelled as part of the gateway to transformation and health.
- ***Safe, supportive relationships foster personal growth.*** Creative Alternatives' operational guidelines underscore the importance of mutual respect, understanding and compassion between clients, and specific workshop guidelines have been developed to ensure high quality service experience for every client.

*"I have consistently discovered that the core process of healing through art involves the cultivation and release of the creative spirit. If we can liberate the creative process in our lives, it will always find the way to whatever needs attention and transformation. The challenge, then, is first to free our creativity and then to sustain it as a disciplined practice."*

(Shaun McNiff, 2004, p. 5)

## Creative processes & Client Journeys

The programme's Creative Arts Facilitators maintain detailed session diaries in which the clients' individual creative processes are recorded. The following extracts from these diaries provide a flavour of workshop practices, with client's true identities being protected by synonyms.

# Southport Core Workshop

18<sup>th</sup> April 2008: Attended by 11 clients

Artists: Wibke Hott & Sheryl Clowes

## Session Theme

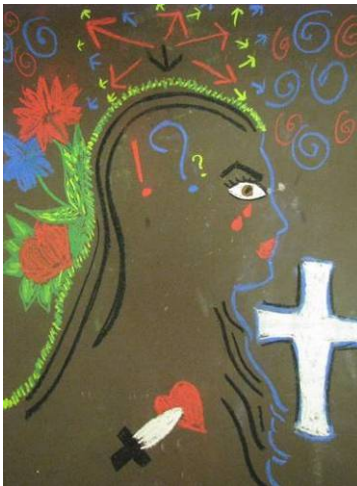
Our new theme is identity. We began by asking 'Who are you?' and recording our spontaneous answers. We then created large silhouettes of every person on paper, inviting the clients to decorate, fill in, paint on and around their individual silhouettes and create collages of themselves with whatever materials they fancied, bringing in any of answers they had just given...

## Sample Reflections

"Christina teamed up with Anna for the exercise and the two of them really seemed to get into the activity. Christina felt very protective about her list and guarded it closely. She said the exercise was really thought-provoking and went on to draw a beautiful rainbow around her silhouette. It looked like a beautiful aura."

"For Patrick this activity was really difficult. Patrick is very open to Creative Alternatives and consciously decided to give it a whole-hearted go. So, he opened up to the activity and then very quickly realised that it was bringing up things for him he didn't want to think about, feel or deal with. He decided to stop with the activity and take himself away from it, even out of the room for a short while. He spoke to us about this afterwards and we explored how it felt for him. He was concerned that he hadn't done the exercise, that he had let us down, that he failed. We shared with him that we felt he had done it, been right there, feeling his emotions, his response to the activity and then had made a conscious decision to stop it when he realised that it felt uncomfortable for him. We explained how we felt that this was really positive and to us seemed to reflect that he was looking after himself, listening in on what was healthy for him."

"Phil appeared 'ready' when he arrived. There was no sign of hesitation or nervousness, at least not on the outside. He seemed very interested in the theme and created a collage with words from his list and using mixed media. He was really open to the activity and enjoyed the process. He was keen to continue working on the picture next week and also identified areas and aspects of the process which he would like to continue working on. We checked in with him in respect to his wood working experience, wondering if he might want to work with sculpture or installation to further explore the theme."



# Formby Core Workshop

17th September 2008: Attended by 12 clients

Artists: Sheryl Clowes & Selina Dunne

## Session Theme

Textile self-portraits. Some people brought in materials from home that have personal history, there was also ample choice in other materials to decorate the individual portraits. Some of the group members worked on their own choice of art project, adding to the general buzz and variety around the room.

## Sample Reflections

“A former client visited the group and shared with everyone a painting that she has been working on in her art group, in which she had combined mod roc with acrylic painting. She explained that she was really proud of this piece and was glad that CA had given her the opportunity to explore some mediums and materials that she had never been introduced to before.”

“Penny spoke of the panic attack she had experienced last week, she explained that she had not suffered one in a very long time and had forgotten how debilitating they are. She was proud of the visit she had made to the group last week and said that she had needed an excuse to get out of the house or else she feared that the attack may have taken hold of her life, making her become fearful of leaving the house altogether and meeting people. She was very sociable throughout the session, working on her textile portrait. She was also quite reflective today, mentioning her pending completion on the programme. She spoke of her new found appreciation for art (at galleries and museums): what she sometimes used to dismiss as 'rubbish' she now spends time appreciating, exploring the meaning behind works and the techniques used to create them. She spoke of her own development during the last six months, explaining that at the beginning she used to be very self-critical of her work and now she can enjoy the experience of creating a piece without having prior expectations.”

“Next week is Karen’s last session. She spoke about this quite a few times, it is obviously playing on her mind. She mentioned how she will miss the group and the company. We suggested she join the ‘Go With The Flow’ group in Southport and she said she would 'give it a go' but was nervous about it not being so much of a supportive group but a formal 'art class'. We reassured her that there will be faces in the group which she will recognise, former clients who have moved on to the group, and that the feel of the group would resonate with the Formby workshop.”

“Marilyn was a bit brighter in spirits this week. She mentioned how last week had 'done her the world of good' getting her out of her house and breaking away from the grieving process she has been in over one of her friends’ sudden death. She picked up her textile image and appeared pleasantly surprised at what she had created in the previous weeks.”

“Carina arrived a little late for the session. The table was already full when she arrived, so she suggested sitting in the corner of the room. When we proposed that a spare table could be moved to join the group table she appeared to well up. We moved outside the room to talk, as Carina appeared to feel uncomfortable sharing her emotions within the group setting. She spoke of her menopause and how it is affecting her emotions, causing her to become very tearful and upset at unpredictable times. She explained that last week she had been crying a lot, and it had prevented her from coming to the group because she was worried about upsetting others. She has seen her GP about this, and she has been assured that this is all part of a woman's time of 'change' - but the idea frustrates her because she has no way of knowing when this will end and when she will feel in control again.”



# Netherton Core Workshop

24<sup>th</sup> September 2008: Attended by 8 clients

Artists: Wibke Hott & Selina Dunne

## Session Theme

Herbal pillows and potato printing. The herbs and spices introduced different sensory experiences to enhance people's well-being and play with smells.

We provided a list of herbs and detailed their healing energies and properties to invite participants to create their own personal mix according to their own personal needs. There was a real buzz in the group and people mixed very well, sharing stories and laughter.



## Sample Reflections

“Kendall finished his pillow for his daughter. He said he is looking forward to giving it to her and is looking forward to seeing her reaction to a piece of art work which he has made for her. He told us that his daughter's visit is the highlight of his week. [...] He also said that when he coming to CA his legs feel like jelly and he has to hang on downstairs for a few minutes to calm himself down and also gear himself up to come upstairs. Once he's here though he really enjoys himself.”

“Stephan brought along images he had taken from past Southport Flower Shows and his own garden to share with the group, exchanging expert gardening tips with everyone! We wonder if we couldn't do another creative gardening day next spring!”

“Madeleine continued working on her herbal pillow and also her wheat pillow. She told us that she found it difficult to come into the workshop - but once she was here she felt it had a beneficial effect. She told us that she was struggling with the sewing, her hand was swelling up and we helped her with that.”



# Formby Core Workshop

8<sup>th</sup> July 2009: Attended by 7 clients  
Artists: Selina Dunne & Sheryl Clowes

## Session Theme

Perspex window designs! Inspired by last week's work with painting to music where the wonderful display of colours & images provided an interesting starting point. We also brought additional stimuli in the way chakra and Mandala images with their interesting patterns and fantastic use of colours. We touched on the use of colour therapy and the effect colours have on our moods. There seemed to be a strong interest from a couple of the clients regarding the meanings of the chakras and the healing sounds connected with each.

## Sample Reflections

"Diane arrived with her mum at today's workshop. She expressed that she would stay for as long as she felt able to today and that she had brought her mum for some additional support. Diane was keen to see the DVD of the recent puppetry show and so a space was set up for her and her mum to watch this. She seemed to really appreciate being back at the workshop, expressing that she has missed attending."

"Ingrid seemed keen on the new theme and shared her own experiences of working with colours & moods in her college course. During the workshop Ingrid described creativity as 'sometimes difficult to express', admitting that she often 'over thinks' her ideas and that she is interested in working in a more spontaneous way. Towards the end of the workshop Ingrid enjoyed sharing her own works with her peers. She expressed that she liked the 'therapeutic' angle of artwork and that she wanted to dive further into this next week."

"Marcus arrived a little later seeming distressed. He expressed that he had a very negative experience at work and that he felt nearly pushed to 'hit out' at his boss. He shared that his colleagues are causing him a lot of stress and that he feels that he has to try and find a job elsewhere – or else he might become 'ill' again. Marcus was angry and upset about this and together we decided to use today's session to help him express his feelings around this work stresses. He seemed most keen to work with pastels and created a very striking image inspired by his tattoo on his arm. At the end of the workshop we revisited his work experiences and we suggested that he try Connexions for assistance with CV writing, one of his main concerns in for searching for a new job. Marcus seemed to be a lot more relaxed. He also received some encouraging peer support from the other members of the group and appeared to benefit from being able to share his feelings within the group."

"Anthony arrived seeming in good spirits. He listened with intrigue to the introduction of the new theme and he seemed most keen on the use of the chakras in mediation. Anthony also mentioned that he really enjoyed the 'painting to music' exercise we tried last week and that he found it a very 'librating' way to work. He also mentioned that his choice to work with his back to the group during this exercise was deliberate and that he would have felt too 'self-conscious' otherwise. Anthony made a couple of references to feeling socially isolated here in Sefton. He told us that on some days he doesn't speak to anyone but his wife. At the end of the workshop we had longer chat about this and we suggested that he'd give the 'Go with the Flow' group in Southport a try. We are delighted to include here that Anthony subsequently visited the group, introduced himself to the artist and has now decided to join the group!"



# Programme Team

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## Management & Delivery

Creative Alternatives operations are overseen by a steering group charged with the development and scrutiny of programming, evaluation and system processes and in ensuring that funding obligations are met. The steering group provides a forum for the strengthening and formalisation of the partnership between Sefton MBC and NHS Sefton and allows for the exchange of current information on policies and strategies.

### Steering group members:



Philip Wroe  
Principal Arts Development Officer  
Sefton MBC Leisure Services



Pat Nicholl  
Deputy Head of Health Improvement  
NHS Sefton



Jessica Bockler  
Arts Officer  
Creative Alternatives



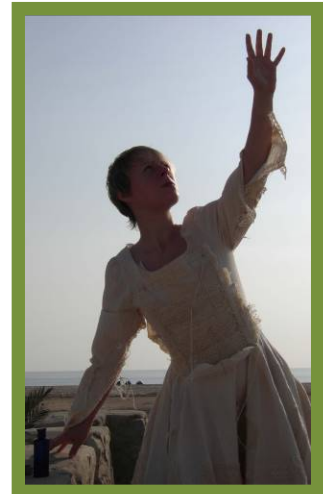
Elizabeth Lovell  
Referral Officer  
Creative Alternatives



Dr. Jeff Morgan  
Independent Consultant Psychologist &  
Occupational Health Specialist

Philip Wroe of Sefton MBC's Leisure Services has overall managerial and budgetary responsibility for the programme, is the access route to the range of support services and venues available within Sefton MBC and submits regular programme and budget reports to HM Treasury and The Department of Culture, Media and Sport under the conditions of Invest To Save Funding. Philip also represents Creative Alternatives on the Sefton Social Prescribing forum. Day-to-day operations are implemented by Referral Officer Elizabeth Lovell and Arts Officer Jessica Bockler with both officers working to part-time freelance commissions that equate to a three-day working week (Jessica Bockler) and a four-day working week (Elizabeth Lovell).

**Jessica Bockler, Arts Officer:** Jessica is an experienced theatre practitioner, project manager and lecturer with expertise in Transpersonal Psychology and consciousness studies. Over the past ten years she has devised and delivered many arts projects with people of all ages and backgrounds. She has directed youth & community theatre, has co-ordinated arts festivals and conferences and has facilitated a wide range of creative workshops in community, arts & health and educational settings. Her creative works are nurtured by spiritual practices of self-exploration, from martial arts and meditation, to ritual theatre, expressive movement and dance. Jessica is currently completing a PhD with Liverpool John Moores University, exploring 'Theatre as Transformative Practice.'



**Responsibilities:** Jessica is responsible for the management of Creative Alternatives' artistic programme including core workshops, specialist workshops, outings and exhibitions. She line manages all artists commissioned to deliver the programme, maintains their workshop diaries and client registers and also operates the programme's new website. Jessica communicates with all clients through a regular newsletter that is circulated by email and post and, in addition, works with Elizabeth Lovell on the evaluation of the programme.

**Elizabeth Lovell, Referral Officer:** Elizabeth is a qualified counsellor and member of the British Association for Counselling and Psychotherapy. She has experience of counselling within the NHS and the charity sector and takes a person centred approach to relieving mental distress, underpinned by an interest in the therapeutic benefits of creative activity and social prescribing. Elizabeth has written and delivered training programmes on mental health awareness that challenges the stigma of mental ill-health and encourages a consideration of mental health from a positive perspective. Elizabeth has a first class degree in Applied Psychology.



**Responsibilities:** Elizabeth is responsible for all aspects of client referral into the programme which includes the management the Creative Alternatives waiting lists, assessing potential clients, client support, signposting to other organisations and assisting clients on their completion of programme access. Elizabeth works with a wide range of health professionals and local organisations on programme promotion and fosters positive inter-disciplinary working relationships while also sharing, with Jessica Bockler, ongoing evaluation responsibilities.

### **Current Artist Commissions**

Creative Alternatives commissions three Creative Arts Facilitators on long-term contracts to deliver programme core content. The Arts Officer maintains a database of local and regional multi-disciplinary artists that currently holds details of forty-seven individuals and companies working across a broad range of art forms, including metal work, puppetry and textile design. This database is the source from which additional artists are recruited for the delivery of specialist workshops, complementing the work undertaken by the Arts Officer and Creative Arts Facilitators.

### **Development of Artist Commissions**

In the first eight months of Creative Alternatives operations, twelve local artists were commissioned on short-term contracts to deliver the emerging programme.

Between September 2007 and August 2008 a team of four Creative Arts Facilitators were commissioned on year-long contracts to deliver core programming content, these annual contracts were shaped to provide continuity, stability and familiarity to Creative Alternatives' vulnerable clients. While dependence between artist and client is discouraged, it is recognised that familiar, friendly faces play an important part in clients' recovery processes in which social interaction and trust are as crucial as creative activity.

In September 2008 Creative Alternatives operations were streamlined with the reduction of the Creative Arts Facilitators from four to three. This restructuring allowed for the three remaining facilitators to deliver the core workshops as a team and so add a greater coherence to creative output. For one year, the three facilitators operated on annual contracts that, unlike standard freelance contracts, committed a guaranteed income for the duration of the commission. In return for this security, the facilitators agreed to cover sessions for each other in the event of absences due to other commitments or ill health. This system proved difficult to maintain as the facilitators could not always offer the agreed cover and, as funds were allocated to deliver this structure, no additional artists could be commissioned in their place, resulting in the Arts Officer providing emergency cover. With effect from September 2009, the facilitators have returned to standard freelance contracts. Despite the difficulties outlined, the current team of three Creative Arts Facilitators has proven highly efficient in delivering Creative Alternatives' core programme which has been maintained without unscheduled interruption into the year 2009/ 2010.



## Creative Arts Facilitators

**Sheryl Clowes:** Sheryl co-facilitates the core workshops in Formby and Southport. She trained in physical theatre at Rose Bruford College of Speech and Drama, London and began her career in community arts with a six-month self-funded voluntary working experience in India where she co-ordinated and facilitated several community drama & storytelling projects with disadvantaged young people. Following her return to the UK, Sheryl has worked creatively with a variety of arts organizations including 24:7 Theatre Network, Cardboard Citizens Theatre Company, Wythenshawe FM, Urbis, Sefton C.V.S and Creative Partnerships while also writing and directing her own theatre work across fringe venues in Manchester.



**Wibke Hott:** Wibke co-facilitates the core workshops in Netherton and Southport. She is passionate about working creatively with people and is particularly excited about the therapeutic value of creative expression through visual arts and crafts, digital arts and creative technology, storytelling, singing/song-writing, voice work, dance and movement. Wibke is a qualified person-centred counsellor and has undergone additional training to work as a therapist with children and young people. She also runs a varied programme of workshops and projects, singing groups and community choirs for people of all ages across the Greater Merseyside area.

**Selina Dunne:** Selina co-facilitates the core workshops in Netherton and Formby. She is a qualified Art Therapist who has used creativity alongside psychotherapeutic techniques with children with learning disabilities and adults with mental health problems.

Although Selina is not fulfilling a role as an Art Therapist within her work for Creative Alternatives, she strongly believes that any artistic expression offers enormous therapeutic benefit, allowing individuals the opportunity to discover new aspects of themselves and enabling them to begin their own journey of self-healing. Selina runs her own Community Arts Facilitation Service offering Schools and Community Groups creative workshops targeting expression, exploration and self-development.



# Conferences, Networking & Staff Development

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Sharing the programme's successes and learning from other organisations has been instrumental in the development of Creative Alternatives and team members have attended and presented at local, regional, national and international conferences on a regular basis. The Referral and Arts Officers and the Principal Arts Development Officer have publicised the work of the programme through meetings with other organisations and by playing an active role in professional networking groups. The success and maturity of Creative Alternatives operations and systems has seen it established as a model of good practice with other arts or health organisations who seek advice and guidance. Team members regularly attend a variety of training opportunities aimed at developing the skills base and enhance service levels.

## Conferences & Events

- ✓ September 2009: **Inspiring Transformations: Applied Arts and Health**. International conference held at the University of Northampton. Paper and poster presentation.
- ✓ June 2009: **Arts in the Recovery of Mental Health** at Manchester Art Gallery. Attended by the Principal Arts Development Officer (Sefton MBC).
- ✓ March 2009: **Transforming Social Care for Better Health, Well-being and Greater Choice**. Hosted by Sefton Health & Social Care Directorate. Presentation and information stand.
- ✓ July 2008: Launch of arts on prescription project **Creative Remedies**. Organised by Arts and Sports Engagement Team, Warrington Borough Council. Attended by the Arts Officer and Principal Arts Development Officer (Sefton MBC).
- ✓ April 2008: **UKPHA Annual Public Health Forum**. Held at Liverpool Echo Arena. Poster presentation.
- ✓ November 2007: **Art of Living, a Creative Health and Wellbeing Event**. Organised by the Liverpool Culture Company. Information stand.
- ✓ November 2007: **GP Forum**. Sefton PCT. Information stand.
- ✓ October 2007: **Creative Health Forum**. Organised by The Comedy Trust, Liverpool. Presentation and discussion group facilitator.
- ✓ September 2007: Launch of **Extraordinary Journeys**. Organised by the Liverpool Culture Company. Attended by the Arts Officer and Referral Officer.

- ✓ March 2007: **Arteries, Improving Health & Wellbeing Through Involvement in the Arts.** Organised by Greater Manchester Arts and Health Network. Attended by Referral Officer.
- ✓ December 2006: **Art of Living, a Creative Health and Wellbeing Event.** Organised by Liverpool Culture Company. Attended by the Arts Officer and Referral Officer.

### Professional Networks

- **North West 'Arts on Prescription' Network:** The network was established in January 2008 with the preliminary meeting hosted by the arts and health organisation 'Start' in Salford and Creative Alternatives hosted the network's second meeting in April 2008. The network consists of representatives from across the region, including Warrington, Oldham, Leeds and Pendle and seeks to provide a supportive environment in which professionals can share their expertise and experiences.
- **North West Arts and Health Network:** This network was initiated by Arts for Health from Manchester Metropolitan University and it consists of an informal programme of bi-monthly seminars designed to support arts and health programmes in the North West through information sharing and practical support. The work of this network supports the work of the London Arts and Health Forum in its drive to generate national policies and strategies through its relationship with the department of health.
- **Applied Arts and Health:** This is an online network for researchers and practitioners in the field of arts and health. The network was established following **Inspiring Transformations**, the conference on arts and health held at the University of Northampton in 2009: <http://appliedartsandhealth.ning.com>.
- **L20 Zone:** This networking organisation is managed by Sefton Council for Voluntary Services and brings together professionals delivering services within the L20 postcode area. A Creative Alternatives representative attends the organisation's meetings and contributes to their email bulletin and newsletter that is delivered to all residences and health centres in the L20 area.
- **NHS Sefton, Social Prescribing Forum:** The Principal Arts Development Officer (Sefton MBC) represents Creative Alternatives at the groups meetings along with managers from other local social prescribing projects.
- **Merseyside Arts Officer Forum:** This forum is attended by The Principal Arts Development Officer (Sefton MBC) and is currently developing a strategic arts and health post for Merseyside with support from Arts Council England and the collective Merseyside PCT's. This post seeks to liaise between the PCT's and arts service delivery organisations to highlight good practice, promote arts and health operations and standardise referral and evaluation methodology across the region. Both the Creative Alternatives Referral and Arts Officers have attended meetings of the forum to assist in the formulation of this role.

## Creative Alternatives as a Model of Best Practice

Through networking and publicity, Creative Alternatives has encouraged and supported the development of other arts and health programmes across the UK. The maturity of Creative Alternatives systems, processes and documentation have been operationally tested over a lengthy period, providing a secure knowledge bank from which younger projects and schemes elsewhere may learn. Organisations that have benefited from the Creative Alternatives model include:

- NHS Warrington & Warrington Borough Council: Creative Remedies
- Blackpool PCT and Blackpool Council (Arts Department)
- Wirral PCT
- Wigan Council
- Gloucestershire County Council: Art Lift
- Leeds PCT
- Folkestone PCT
- Shaw Trust, Preston
- Nottingham PCT
- Lambeth PCT
- Merseyside Forum of Arts Officers
- Arts on Prescription initiative Light Box, Bristol
- Arts and Minds, Cambridge

## Raising Local Awareness

Presentations relating to Creative Alternatives programming and objectives have been delivered to a wide range of local organisations and these include:

- G.P. Surgeries
- Medical Centres
- G.P. Practice Managers
- Children's Centres
- Mersey Care NHS Psychological Services
- NHS Sefton Psychological Services
- NHS Sefton – Medicine Management
- Community Mental Health Teams
- Perinatal Mental Health Action Groups
- Job Centres (including Conditions Management Programme)
- Social Prescribing programmes, such as Active Sefton, and Citizens Advice Bureau
- Voluntary Sector Organisations, such as SWAN Women's Centre, Sefton Alcohol Services, and Sefton Choices

## Publicity Events

- **October 2008:** World Mental Health Day, Bootle Strand Shopping Centre. Publicity stand offering creative taster activities, including 'herbal pillow' making, African drumming, and collage making.

- **October 2007:** World Mental Health Day 2007, Feelgood Factory, Netherton. Drop-in taster workshop in visual arts and crafts.
- **May 2007:** Presentation and taster workshop for Children’s Centre Managers. Seaforth Children’s Centre.
- **February 2007:** Creative Alternatives Launch Event held at Formby Hall & Golf Club. The event was attended by seventy delegates from a range of agencies including NHS Sefton, Sefton MBC Council, and the voluntary sector. The event included presentations by Clive Parkinson, from Manchester Metropolitan University; John Taylor, Head of Arts and Cultural Services, Sefton MBC; Pat Nicholl, Health Promotion Specialist, NHS Sefton and Creative Alternatives’ including singing and Indian dance.



#### Launch event feedback:

*“A very informative day. Enjoyed the participation. Will be referring to you.”*  
Maureen Koynne, Maghull Health Centre

*“Really good event – enjoyable and informative.”*  
Zoe Clarke, Crosby Library

*“Wish we could have tried the other workshop!!”*  
Kate Fletcher, Mersey Care NHS

*“Well organised and thought up event that highlighted the network and encouraged people to freely offer their support and identify their role in it! Well Done.”*  
Anonymous

*“I feel there is a great opportunity to develop partnerships with mental health organisation to further develop a pathway approach to use of this service.”*  
Lynn King, Mersey Care NHS

## Collaborations & Funding

- **International Centre for Digital Content (ICDC), Liverpool:** In December 2008 Creative Alternatives secured a grant of £20,000 from ICDC, enabling the programme to substantially develop its website, purchase audio-visual equipment and offer a range of specialist workshops. For further details see 'Creative Provision'.
- **School of Natural Sciences and Psychology, Liverpool John Moores University:** Professor of Transpersonal Psychology, Brian Les Lancaster, has offered continued support to Creative Alternatives through advice on programme research methodology, including data acquisition and analysis.
- **Squash Nutrition, Liverpool:** In 2007 Creative Alternatives collaborated with the Liverpool based arts and health initiative Squash Nutrition, an organisation promoting creative health education through workshops, courses, events and training. Squash Nutrition delivered a creative cooking course in addition to a taster day for Creative Alternatives clients.
- **Liverpool Culture Company & Chaturangan:** Creative Alternatives collaborated with the Culture Company on its 'Waiting' Project, exploring all aspects of 'waiting' in the health care system (from waiting rooms in hospitals and surgeries to the psychological process of waiting for treatment). Creative Alternatives invited the Indian Dance Company Chaturangan to work with clients and staff from Mersey Care NHS Psychological Services, Hesketh Centre, Southport. Chaturangan delivered a taster day using Indian dance and storytelling through which processes of waiting were explored.
- **Mersey Care NHS Psychological Services, Hesketh Centre, Southport:** As part of the Waiting Project described above, Creative Alternatives commissioned the creation of public artwork for the waiting room of Psychological Services at the Hesketh Centre. Clients at Creative Alternatives' core workshop in Southport created the artwork, further details of which can be found in 'Creative Provision'.
- **Inspiring Transformations:** In September 2009, following funding from Arts Council England, Northwest, the Arts and Referral Officers were able to attend Inspiring Transformations, an international conference on arts and health held at the University of Northampton where they presented a paper on Creative Alternatives, sharing good practice with practitioners and organisations from across the UK and abroad.

## Staff Training

Dates & Facilitators	Description
<p>9<sup>th</sup> May 2007</p> <p>Jessica Bockler &amp; consultant Dr. Jeff Morgan</p>	<p><b>INHOUSE: ARTIST TRAINING</b></p> <p><b>Attendees:</b> The training day was attended by seven of the Creative Alternatives artists along with Referral Officer Elizabeth Lovell and Principal Arts Development Officer Philip Wroe, Sefton MBC. Thirteen of the Creative Alternatives clients attended a shared lunch and gave informal feedback on their experiences of the project.</p> <p><b>Aims &amp; Content:</b></p> <ul style="list-style-type: none"> <li>• To enable the artists to understand the basis, overview &amp; scope of the programme.</li> <li>• To help artists and leaders explore the clients' individual journeys through the project.</li> <li>• To help artists identify their own needs for personal and professional support.</li> <li>• To facilitate a shared vision of, and commitment to, the project.</li> </ul> <p>The programme of the day also featured a presentation by Barbara Parratt from Sefton PCT, addressing the wider perspective of the government's white paper 'Choosing Health'.</p>
<p>7<sup>th</sup> November 2007</p> <p>Jessica Bockler</p>	<p><b>INHOUSE: ARTIST TRAINING</b></p> <p><b>Attendees:</b> Arts Facilitators Selina Dunne, Wibke Hott, Sheryl Clowes and Adela Jones, Referral Officer Elizabeth Lovell.</p> <p><b>Content:</b> This training day addressed artist support, supervision and future training needs while also streamlining programme evaluation and establishing operational frameworks relating to such aspects as the purchasing of arts materials, storage of artwork in various workshop locations and the organisation of upcoming CA events.</p>
<p>17<sup>th</sup> June 2008</p> <p>British Red Cross, Liverpool</p>	<p><b>EXTERNAL: FIRST AID AT WORK</b></p> <p><b>Attendees:</b> Arts Facilitators Selina Dunne and Wibke Hott &amp; Arts Officer Jessica Bockler</p> <p><b>Content:</b> The course addressed the following topics: personal safety, assessing the incident; unconscious casualty; resuscitation for adults; choking; dealing with blood loss and shock; burns and scalds; fractures; heart attack; diabetes; strokes; seizures; reporting and recording of incidents as required by HSE and contents of HSE approved first aid kit.</p>

## Staff Training - continued

Dates & Facilitators	Description
8 <sup>th</sup> August 2008	<b>INHOUSE: ARTIST TRAINING</b>
Jessica Bockler	<p><b>Attendees:</b> Arts Facilitators Selina Dunne, Sheryl Clowes and Wibke Hott, Referral Officer Elizabeth Lovell.</p> <p><b>Content:</b> Annual review CA operations and development of plans for the coming year.</p>
26 <sup>th</sup> August 2008	<b>EXTERNAL: WORKING OUR WAY TO MEN'S HEALTH</b>
Sefton PCT	<p><b>Attendees:</b> Referral Officer Elizabeth Lovell.</p> <p><b>Content:</b> This training opportunity examined ways of encouraging men to access health services.</p>
11 <sup>th</sup> September 2008	<b>INHOUSE: TEAM TRAINING "WALKING THE LABYRINTH"</b>
Psychotherapist Elizabeth Clarke & Jessica Bockler	<p><b>Attendees:</b> Arts Facilitators Selina Dunne, Sheryl Clowes and Wibke Hott, Referral Officer Elizabeth Lovell and Principal Arts Development Officer Philip Wroe, Sefton MBC.</p> <p><b>Content:</b> This training workshop introduced ideas around creative bodywork and the use of labyrinths for personal exploration and expression. Labyrinth themes and bodywork were subsequently used within the CA core workshops.</p>
4 <sup>th</sup> December 2008	<b>EXTERNAL: TEAM TRAINING IN DIGITAL TECHNOLOGIES</b>
9 <sup>th</sup> December 2008	<p><b>Attendees:</b> Arts Facilitators Selina Dunne, Sheryl Clowes &amp; Wibke Hott, Arts Officer Jessica Bockler.</p>
11 <sup>th</sup> December 2008	<p><b>Content:</b> Following the successful funding bid to the International Centre for Digital Content, the CA team attended three training days, exploring the use of digital - as follows:</p> <p><b>4th December:</b> the team were familiarised with Adobe Photoshop and Adobe Elements.</p> <p><b>9th December:</b> the team familiarised themselves with a range of new equipment including digital cameras and graphics tablets.</p> <p><b>11th December:</b> the team developed skills in the use of audio recording, editing and animation technology.</p>

## Staff Training - continued

Dates & Facilitators	Description
24 <sup>t</sup> February 2009 Splinter	<p><b>EXTERNAL: WEBSITE MANAGEMENT</b></p> <p><b>Attendees:</b> Referral Officer Elizabeth Lovell and Arts Officer Jessica Bockler.</p> <p><b>Content:</b> Following the re-development of the Creative Alternatives website, the officers attended a training session with the web design company, learning the basics of the website's Content Management System which allows for the editing and updating of web content and the management of on-line forums.</p>
14 <sup>th</sup> May 2009 John Ayling	<p><b>EXTERNAL: POTTERY</b></p> <p><b>Attendees:</b> Creative Arts Facilitators Selina Dunne, Sheryl Clowes and Wibke Hott, Arts Officer Jessica Bockler.</p> <p><b>Content:</b> Potter John Ayling delivered an introductory training day, preparing the artists for delivery of workshops in August 2009.</p>
23 <sup>rd</sup> May 2009 Lesley Hellam at Pebblestones	<p><b>EXTERNAL: INTRODUCTION TO ART THERAPY</b></p> <p><b>Attendee:</b> Referral Officer Elizabeth Lovell</p> <p><b>Content:</b> The day introduced the officer to theories of Art Therapy through participation in experiential learning sessions across a variety of therapeutic creative activities.</p>



Clients immersed in creative pursuits at the Netherton core workshop.  
Photos: Wibke Hott.

*“I am learning to express my feelings through creative outlets. I have always struggled to express my feelings. I find it hard to speak about things – this has made counselling difficult. Now I take my art with me and I am benefitting from counselling more.”*

*Creative Alternatives client*



# The Clients and their Path through the Programme

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Creative Alternatives became fully operational at the end of January 2007 and, to date (July 2009), 187 people have been assessed and accepted onto the programme.

<b>Client Demographics</b>	
<b>Category</b>	<b>Percentage</b>
<b>Gender</b>	
Male	27
Female	73
<b>Age Range</b>	
18 - 24	3
25 - 40	25
40 - 65	67
Over 65	5
<b>Ethnic Origin</b>	
White British	88
White Other	6
Mixed White & Asian	1
Mixed Other	1
Asian/Asian British - Other	1
Black/Black British - Caribbean	1
Prefer not to say	2
<b>Employment Status</b>	
Employed	13
Unemployed	72
Economically Inactive	15
<b>Other Services</b>	
Currently accessing other mental health services	73
Not currently accessing other mental health services	27
<b>Medication</b>	
Currently prescribed anti-depressants and/or tranquilisers	67
Not currently prescribed anti-depressants and/or tranquilisers	33

Creative Alternatives draws its client base from those experiencing mild to moderate depression and/or anxiety although these 'umbrella terms' also cover a range of more specific symptoms and diagnoses which include uni-polar depression, bi-polar depression, post natal depression, seasonal affective disorder, generalised anxiety disorder and social anxiety. These conditions are often

compounded by the addition of difficult life circumstances and physical ill health for which clients may develop coping mechanisms with negative health impacts (e.g. high alcohol consumption).

In addition to depression and anxiety, certain clients experience more severe health diagnoses, such as eating disorders, schizophrenia or obsessive compulsive disorder. These clients are only accepted for Creative Alternatives intervention if the additional and complicating conditions are either controlled by medication or minimised through professional healthcare support.

The following table identifies some of the additional health issues reported by the client group:

Additional issues faced by client group	Number of clients
Additional mental health diagnosis	42
Physical health problems	49
Hearing/visual impairment	4
Chronic pain	11
Carer	17
Single parent	16
Housing issues	18
Relationship difficulties	15
Alcohol issues	14

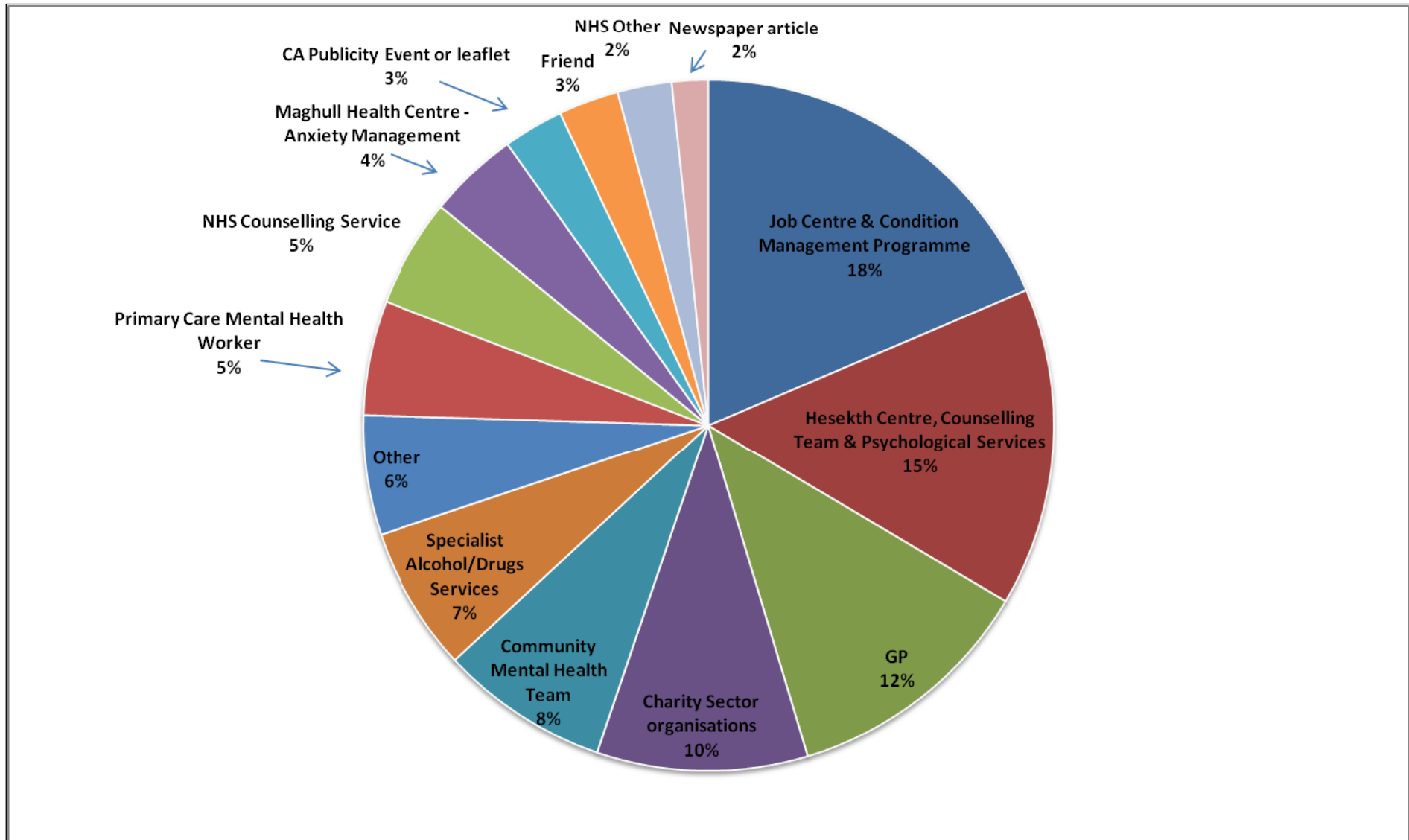
### Referral Sources:

Clients are referred by one of two routes:

- Professional Referral:** This may be by any professional who is involved in the care of an appropriate potential client and may include psychologists, psychiatrists, counsellors, mental health workers, GPs, community workers and Job Centre advisors. The professional completes a programme referral form and returns this to the Referral Officer who will then make contact with the client. The professional is kept informed of the client's journey through the programme.
- Self-Referral:** Potential clients may contact the Referral Officer directly with enquiries relating to the programme and its access requirements. Through the self-referral route clients must provide details of a professional who may be contacted for a reference, a process which enables those not currently accessing targeted care to enter the programme. Self-referral tests client commitment to the programme by demanding a proactive approach, levels of self-motivation and an understanding of the need to take control of their health through new challenges.

### Total of Referrals:

To date (July 2009) 355 referrals have been processed. The following chart illustrates the sources of these referrals:



**Referral Criteria:**

Creative Alternatives clients must:

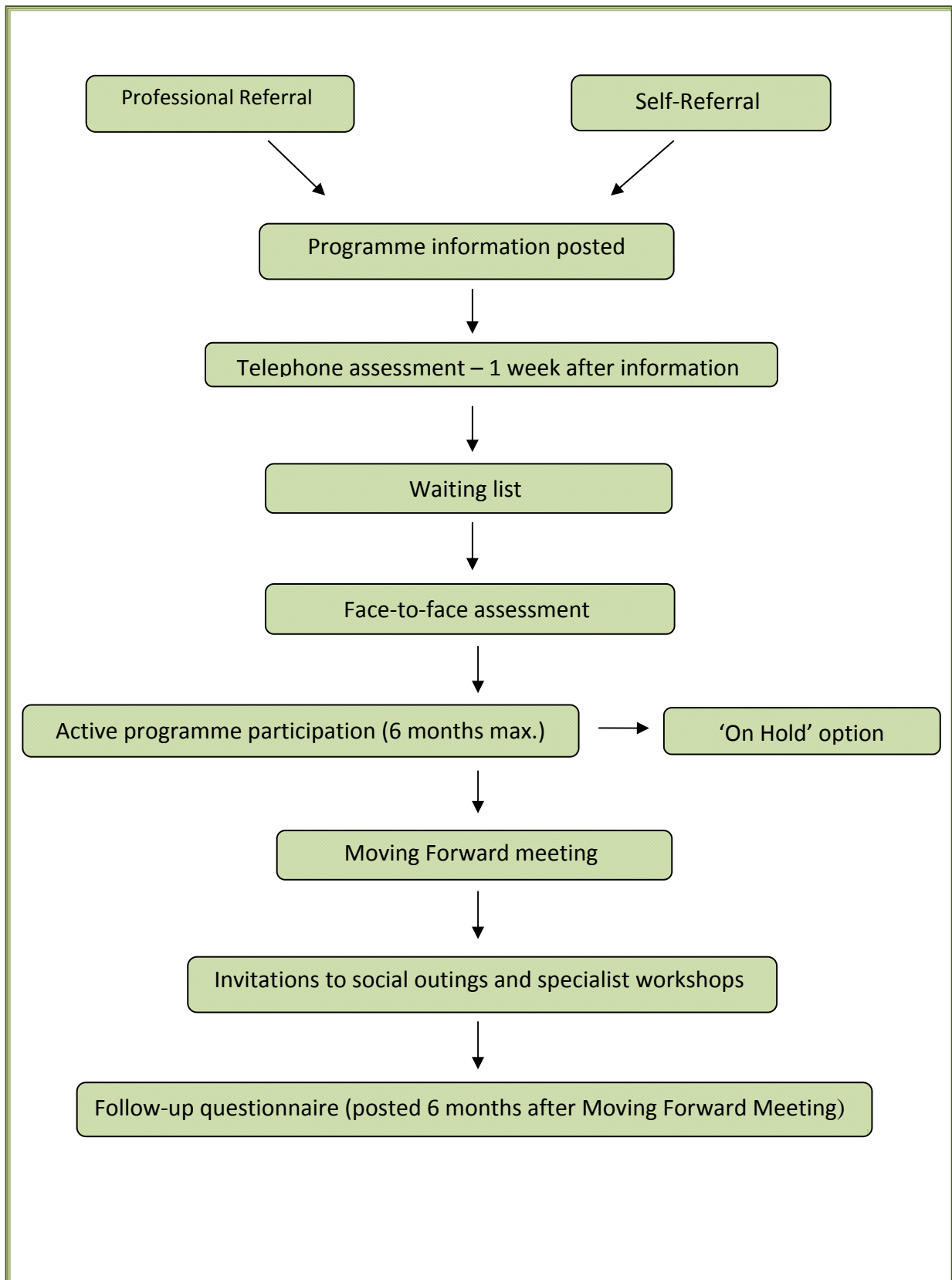
- ✓ Live in Sefton.
- ✓ Be aged 18 or over.
- ✓ Currently be experiencing mild to moderate anxiety, depression and / or stress. Those with a dual diagnosis of more severe mental health problems may be considered if their symptoms are currently controlled and they are receiving adequate support from other professionals.
- ✓ Have the social skills and motivation to independently join a small group of participants (maximum 12) meeting on a weekly basis. Support workers cannot join their clients at Creative Alternatives workshops.
- ✓ Be able to travel independently to events and meet their own costs. While all other aspects of programme access are provided free of charge, individual travel or childcare expenses cannot be met.
- ✓ Respect Creative Alternatives policy by not attending workshops or events while under the influence of alcohol or non-prescription drugs.



Client artwork. Photo: Adela Jones.

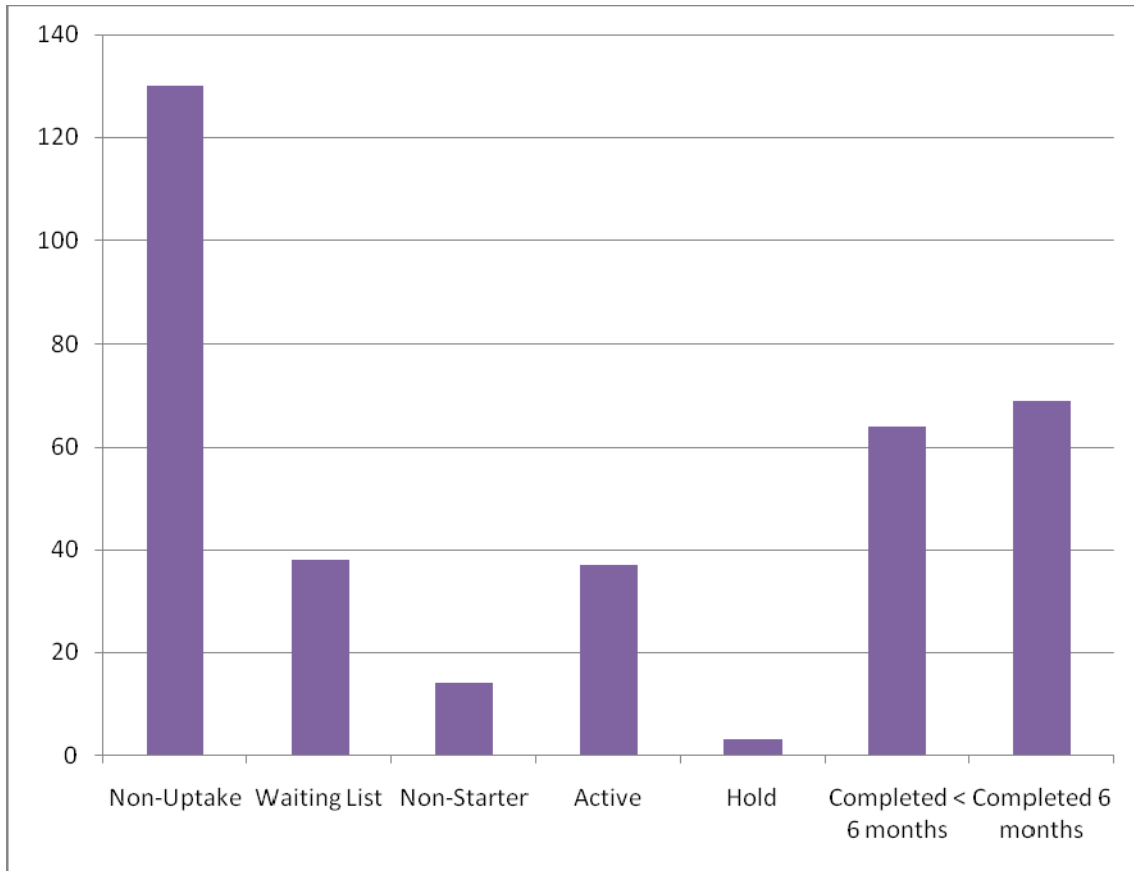
**Client pathway through programme:**

In their involvement with Creative Alternatives the clients pass through the following programme stages:



### Programme Uptake:

The following chart shows how the 355 referrals have engaged with the programme to date (July 2009):



**Non-uptake:** 130 of referrals received have progressed no further through the programme pathway other than receiving information either by post or via a telephone assessment. The reasons for this are varied: the Referral Officer may have difficulty making contact; the person may have decided against participation or may be resistant to a referral made on their behalf by a healthcare professional or agency. A number of referrals are invalidated due to a higher level of anxiety/depression that prevents participation and the workshop timetable or locations may prove a barrier to participation for others. Those potential clients experiencing minimal depressive symptoms are identified during initial assessment and not accepted onto the programme upon which time, they may be signposted for alternative creative, leisure or social provision within mainstream services. This complex management of referrals, many of whom do not lead to Creative Alternatives participation, has a time hungry impact on the Referral Officer workload with minimal discernible benefit to programme outcomes or core objectives.

**Waiting List:** Demand for the service has increased in proportion to its development, with numbers of appropriate potential clients now outnumbering available places - an over-subscription resulting in the creation of a waiting list for each of the core workshops. At the primary referral stage, clients undertake a telephone assessment to ensure their suitability at which point they will join a waiting list for their preferred core workshop. The Referral Officer will also identify from the client any additional services being accessed and suggest a range of options aimed at improving their mental

health while waiting for their place to become available. These options may include joining one of the two associated but mainstream art workshops 'Go With The Flow' in north and south Sefton or pursuing other activity within the social prescribing range of programmes. Waiting times vary from one week to six months depending on core workshop preferences and the weight of active participants at any one time and on several occasions, waiting lists for Southport and Formby workshops have been closed due to extreme demand. In this event, successful referrals are placed on an 'expression of interest' list and contacted at a later date once the pressure on places has been relieved. It has been found that in some cases referrals waiting for long periods ultimately follow other solutions in their search for improved mental health. Currently (August 2009) the programme has a combined total of 38 people on both its waiting and 'expression of interest' lists, as follows: Netherton = 4 people; Formby = 9 people; Southport = 25 people.

**Assessment:** Once a place becomes available, the Referral Officer meets the referral for their initial assessment. At this assessment the referral's suitability for the programme and current mental health needs are explored and full information on programme content and entitlement is given. Programme evaluation begins at this stage with the completion of the COOP scale and Hospital Anxiety and Depression Scale.

187 of the 355 referrals received have met with the Referral Officer for a face-to-face assessment and have been accepted onto the programme. 104 of these were referred via a professional with the remaining 83 being self-referrals. As those referrals unsuitable for Creative Alternatives intervention are screened out during the preliminary telephone evaluation, no client has been denied access following the face-to-face assessment.


**Non-Starter:** Following assessment, and despite ongoing support and encouragement from the Referral and Arts Officers, 14 clients to date have failed to take up their allocated place. A variety of reasons for this has been identified including travel issues, lack of childcare and heightened depression/anxiety levels.

**Active:** Approximately 36 programme places are available at any one time (based on 12 clients per core workshop). Currently, 37 clients are actively engaged in the programme.

**Hold:** An option exists for each client actively engaged with the programme to put their place 'on hold' should their attendance be interrupted by episodes of physical ill-health or commitments to other healthcare treatments. For prolonged periods of unavoidable absence, a client's place may be reallocated in which instance they will be placed at the top of a waiting list once they are ready to re-enter the programme. There are currently three clients on hold, all due to severe physical health problems.

**Completed in < 6 months:** Each client is allocated a place on Creative Alternatives for a maximum of 6 months (equivalent to 23 - 25 core workshop sessions, workshop breaks, such as Christmas and summer holidays, are not included). Offering this as a maximum period allows clients the flexibility of leaving at a time of their choice and without the pressure of making a long-term commitment. To date, 64 clients have chosen to exit the programme in advance of their six-month allocation with a variety of reasons being identified, including a return to education or employment, additional health problems or lack of confidence. The average length of stay for those within this category is 15 weeks.

**Completed in 6 months:** 69 clients have completed their full six months of programme access and many of these continue their involvement with Creative Alternatives via the regular newsletter, organised social outings or invitations to specialist workshops.

A photograph of two women standing together in an office. The woman on the left has her arm around the woman on the right. Both are smiling. The woman on the right is holding a camera. The background shows office equipment and windows.

*“Creative Alternatives puts me in a place that is productive and has set goals. I need targets and something to aim for. I’ve realised that the quality of the end product is not as important as the personal discovery en route. Plus the environment places me with caring and dedicated staff - and puts me alongside folk who like me have troubles to overcome. There is a common bond here that, though unspoken, gives comfort - we’re all in it together.”*

*Creative Alternatives client*

# Creative Provision

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## Core Provision - Locations and Scheduling:

During the initial eight months of operations, the programme's creative provision evolved in accordance with the emerging client base and in acknowledgement of clients' complex needs and interests. A choice of weekly workshops was established at three locations in north, central and south Sefton that have evolved into Creative Alternatives 'core workshops' and now form the backbone of creative provision. New clients select one workshop location for attendance during their Creative Alternatives membership:



**Netherton Arts Centre** (active since 29<sup>th</sup> January 2007): The majority of initial referrals were south Sefton based and the establishment of this workshop, in the Creative Alternatives administrative centre and a major Sefton MBC arts services community facility, provided an ideal opportunity to service this demand.

**Formby Methodist Church** (active since 5<sup>th</sup> February 2007): Although originally based at Formby Clinic (NHS Sefton), this workshop transferred to its current location to accommodate popular demand in an area previously lacking arts programme provision.

**Atkinson Art Gallery, Southport** (active since 28<sup>th</sup> May 2007): This workshop offers the programme core provision in north Sefton and was established in response to increased demand from Mersey Care NHS, local GP's and Job Centres.

### Content and Delivery:

Creative Alternatives' core workshops are open to the clients for a period of up to six months and, following their initial assessment with the Referral Officer; each client is allocated to the core workshop location of their choice. Each workshop is delivered by two of the Creative Arts Facilitators who engage participants in both group and individual activities with an emphasis on one-to-one support. Activities in the workshops have included expressive painting and drawing, print making, mask making, photography, sculpture, mosaic, glass work, clay sculpting, creative writing, singing, movement work and storytelling.

Currently the programme has established a capacity of twelve places per core workshop, allowing for a total programme capacity of 36 clients. The establishment of waiting lists is an acknowledgement that Creative Alternatives has been operating beyond capacity for some time. However, the complexity of healthcare and lifestyle challenges facing members of the programme often results in low attendance at core workshops. A variety of strategies to address this issue are described under 'Challenges and Future Considerations'.

### Overview of average core workshop attendance between 2007 and 2009:

Core Workshop Attendance			
Workshop	CORE 1	CORE 2	CORE 3
Location	Netherton	Formby	Southport
Start Date	29 <sup>th</sup> Jan 07	5 <sup>th</sup> Feb 07	28 <sup>th</sup> May 07
Sessions per year	40	40	40
Average attendance per session			
Jan 07 – Aug 07	5	6	5
Sept 07 – Aug 08	5	7	8
Sept 08 – Aug 09	7	7	9



Netherton core workshop.  
Photo: Adela Jones.

## Specialist Workshops

In addition to core workshop provision, Creative Alternatives delivers a range of specialist workshops that vary from year to year, reflecting clients' particular interests and the availability funding.

Specialist Workshops in 2007				
Art Form	Location	Dates	No. of participants	Description
Creative Writing	May Logan Centre	12 <sup>th</sup> March – 14 <sup>th</sup> May 2007	3	A ten-week writing workshop exploring techniques for story and character creation. Attendance was low in this first special workshop due to the small client base during this period. Delivered by writer Crystal Stewart & art therapist Selina Dunne.
Creative Cooking	May Logan Centre	4 <sup>th</sup> June – 30 <sup>th</sup> July 2007	7	An eight-week cooking course, exploring creative ways of preparing healthy food. Delivered by arts & health organisation Squash Nutrition.
Creative Gardening	Atkinson Art Gallery	12 <sup>th</sup> March – 14 <sup>th</sup> May 2007	5	A ten-week workshop resulting in the creation of indoor table-top gardens displayed at the Atkinson Art Gallery. Delivered by visual artist Gemma Lewis-McAlpine & horticulturalist Keith Marshall.
Photography	Netherton Arts Centre	16 <sup>th</sup> July – 17 <sup>th</sup> September 2007	9	A nine-week workshop, exploring creative working with non-digital and digital cameras. Delivered by visual artists Gemma Lewis-McAlpine & Lisa Barry.



Creative Cooking workshop.  
Photo: Squash Nutrition.

## Specialist Workshop in 2008

Title	Location	Dates	No. of participants
Walking the Labyrinth	Bootle Town Hall	9 <sup>th</sup> October – 27 <sup>th</sup> November 2008	10

Labyrinths are used worldwide as tools for personal development in health and education settings. Labyrinths are distinct from mazes in that they have only one path which leads the person to the centre and back out. Creative Alternatives provided a seven-week labyrinth workshop which combined expressive movement and voice work with walking meditation, drawing and journaling. The aim of the workshop was to explore emotions, personal beliefs and self-images connected to depression and anxiety. The workshop was facilitated by theatre practitioner Jessica Bockler and psychotherapist and labyrinth trainer Elizabeth Clarke. Alongside the expressive arts media the facilitators used a large labyrinth painted on a floor canvas which served as the starting point for the walking meditations and personal explorations.

*“A beautiful balance to today’s session, there was fun, energy and a buzz to the movement, then time to really relax and unwind. It was a calmer way to approach the labyrinth and search its secrets. I’m so grateful for this support from the professionals, the group and the environment.”*

*“Absolutely Brill – Mind resting, blowing, interesting and colourful.”*

*“From a week that started with gremlins today has sent them back to where they belong. I feel strong, confident and relaxed.”*

*“One of those truly special days in your life, precious hours shared in harmony. Thank you everyone and most of all to Jess and Liz. Peace, perfect peace.”*



Labyrinth workshop  
Photo: Ray Osliff.

## Specialist Workshops in 2009

Specialist workshops in 2009 were made possible through funding from the International Centre for Digital Content, Liverpool. Creative Alternatives received a sum of £20,000 for investment in the digital development of the programme including the commissioning of a new website - see below for further details. Creative Alternatives now has new resources consisting of 2 laptops, 10 digital cameras, 2 graphics tablets and several pieces audio recording equipment, all of which help to provide specialist art workshops on a more regular basis.

Art Form	Location	Dates	Participants	Description
Creative Writing & Meditation	Bootle Town Hall	30 <sup>th</sup> March – 14 <sup>th</sup> April 2009	8	A four-day workshop which introduced participants to a range of meditation and creative writing techniques alongside expressive body work, leading to the creation of personal visualisation and meditation scripts. Resulting scripts were recorded and uploaded to the Creative Alternatives website and made available to all clients on CD. The workshop was facilitated by theatre practitioners Sheryl Clowes and Jessica Bockler. A copy of the CD is available on request.
Pottery	Netherton Arts Centre	13 <sup>th</sup> – 27 <sup>th</sup> August 2009	13	This workshop introduced participants to basic pottery techniques including coiling, joining clay and glazing. Participants produced shrines containing images and objects of personal significance. Facilitated by potter John Ayling and arts therapist Selina Dunne.
Photography	Ainsdale City Learning Centre	7 <sup>th</sup> October – 18 <sup>th</sup> Nov 2009	17 booked	This forthcoming workshop will utilise the medium of photography as a catalyst for the exploration of personal images and themes. Facilitated by counsellor and multi-media artist Wibke Hott.



Meditation & Creative Writing workshop  
Photo: Ray Osloff.

## Events & Outings

Creative Alternatives organises monthly outings and regular special events which offer current and former clients the opportunity to:

- ✓ Interact with those attending other core workshops and foster a wider sense of Creative Alternatives community.
- ✓ Maintain social networks beyond and outside the Creative Alternatives structure.
- ✓ Increase their awareness of regional cultural and leisure provision.
- ✓ Develop their social confidence and independence.



Creative Alternatives at Bootle Strand Shopping Centre, World Mental Health Day 2008. Photo: Jessica Bockler

**Outings and special events organised between March 2007 and August 2009:**

<b>EVENTS &amp; OUTINGS between 2007 AND 2009</b>			
<b>Event Detail</b>	<b>Date</b>	<b>Location</b>	<b>Number of participants</b>
Doves and Dreams: The art of Frances Macdonald and J. Herbert McNair	25.03.2007	Walker Art Gallery, Liverpool	1
General collections	04.04.2007	TATE Liverpool	4
Curator's walk	13.05.2007	Liverpool L8, with Tate Gallery staff	4
Liverpool Philharmonic Orchestra Lunchtime concert	08.06.2007	Bootle Town Hall	8
General collections	11.08.2007	Walker Art Gallery, Liverpool	5
Hope Street Festival	17.09.2007	Liverpool	9
African drumming workshop	26.09.2007	Atkinson Art Gallery, Southport	11
Turner exhibition	04.10.2007	TATE Liverpool	6
CA exhibition launch	29.11.2007	Southport Arts Centre	23
Theatre: Hoof!	11.12.2007	Unity Theatre, Liverpool	9
Christmas Special Event	17.12.2007	Netherton Arts Centre	17
Liverpool Philharmonic Orchestra Lunchtime concert	24.01.2008	Bootle Town Hall	16
Concert: African Soul Rebels	24.02.2008	Liverpool Philharmonic Hall	15
Theatre: Veil	02.04.2008	Southport Arts Centre	8
TATE Birthday Weekend with Alexei Sayle.	03.05.2008	TATE Liverpool	14
Gustav Klimt: Painting, Design and Modern Life in Vienna 1900	12.06.2008	TATE Liverpool	9
African drumming workshop	20.06.2008	Atkinson Art Gallery, Southport	16
Indian dance workshop	14.07.2008	Southport Arts Centre	16
Art picnic	19.08.2008	Formby Squirrel Reserve	5
Portrait workshop	22.08.2008	Atkinson Art Gallery, Southport	22
Hope Street Festival	21.09.2008	Liverpool	5

## EVENTS & OUTINGS between 2007 AND 2009 - continued

Event Detail	Date	Location	Number of participants
Launch of Public Artwork at Psychological Services	08.10.2008	Hesketh Centre, Southport	19
Drop-in event for World Mental Health Day	10.10.2008	Strand Shopping Centre, Bootle	53
Concert: United in the Pulse	15.10.2008	Crosby Civic Hall	9
Liverpool Philharmonic Orchestra Lunchtime concert	13.11.2008	Bootle Town Hall	14
Christmas Special Event, featuring pottery, photography and creative writing workshops	18.12.2008	Netherton Arts Centre	48
Gallery visit & felt making workshop	23.02.2009	National Conservation Centre, Liverpool	10
Dance: Dear Body	05.03.2009	Southport Arts Centre	9
William Blake: The River of Life	24.03.2009	TATE Liverpool	5
Concert: Music from Outer Space	18.04.2009	Liverpool Philharmonic Hall	9
Creative Re-awakenings Curator Team meetings & outings	19.03.2009 30.04.2009 06.05.2009 29.05.2009 18.06.2009 23.06.2009 24.06.2009 25.06.2009 26.06.2009	Manchester Art Gallery Netherton Arts Centre Atkinson Art Gallery, Southport Atkinson Art Gallery, Southport Netherton Arts Centre Atkinson Art Gallery, Southport Atkinson Art Gallery, Southport Atkinson Art Gallery, Southport Atkinson Art Gallery, Southport	2 - 9
Creative Re-awakenings Exhibition launch	27.06.2009	Atkinson Art Gallery, Southport	168
Jazz @ the Walker	16.08. 2009	Walker Art Gallery, Liverpool	4

## Exhibitions & Public Artwork



### Early Exhibitions

The first public exhibition of work generated within the Creative Alternatives workshops was held at Southport Arts Centre Gallery between 29<sup>th</sup> November 2007 and 31<sup>st</sup> January 2008 and featured examples of paintings, drawings, collage and digital photography.

A second exhibition of work by clients at Southport Arts Centre from 22<sup>nd</sup> May to 12<sup>th</sup> July 2008 showcased creative writing as part of the Sefton Celebrates Writing Festival.



Creative Alternatives Exhibition  
Southport Arts Centre  
29<sup>th</sup> November 2007  
Photos: Jessica Bockler

### Public Artwork Commission for Psychological Services, Hesketh Centre, Southport

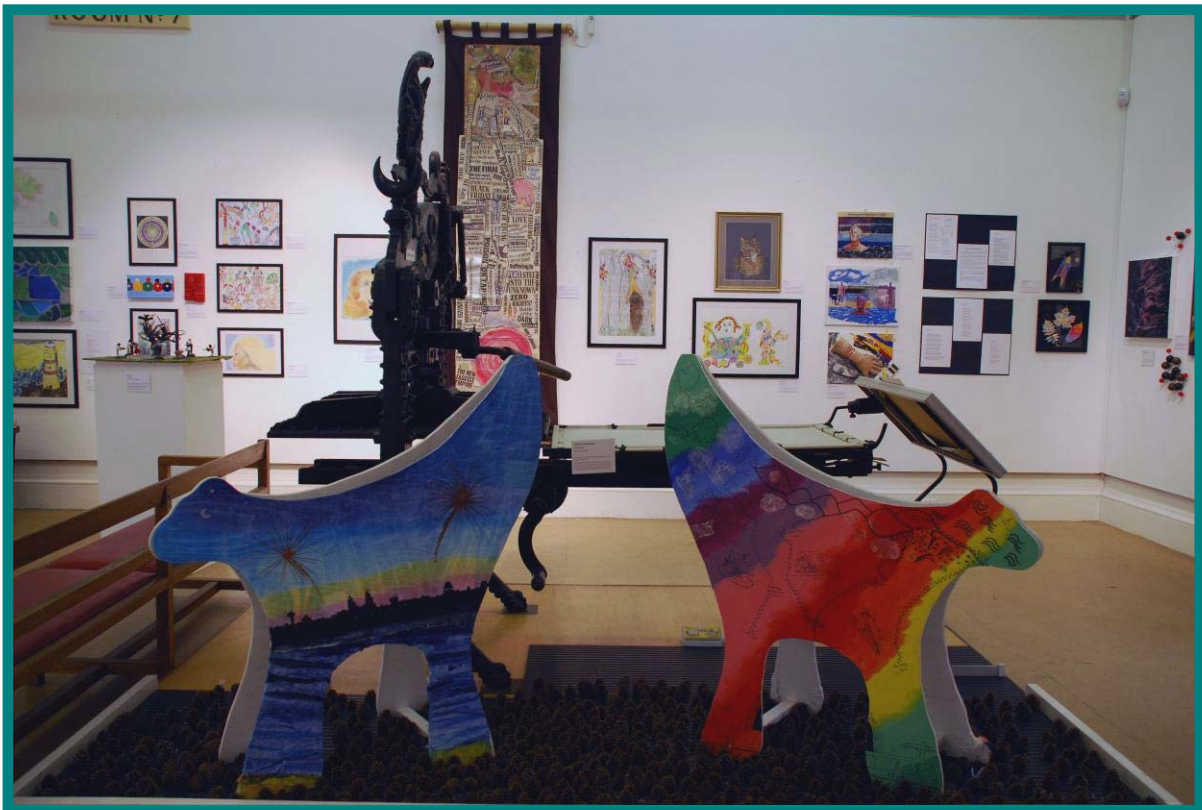
Following an initiative from a former client, the Psychological Services Department of Mersey Care commissioned Creative Alternatives to create a series of artworks for the waiting room of their Hesketh Centre premises in Southport. The former client worked in partnership with Creative Arts Facilitator Wibke Hott to produce, with members of the core Southport workshop over an eight-week period, three artworks - consisting of a *Tree of Life* wall hanging, a *Four Elements and Seasons* table mosaic and stained glass window art. All pieces are now on permanent display.



Hesketh Centre Launch  
8<sup>th</sup> October 2008  
Photos: Jessica Bockler

## Creative Re-Awakenings

Between 27<sup>th</sup> June and 30<sup>th</sup> August 2009 the largest and most comprehensive exhibition of work from Creative Alternatives clients was held at The Atkinson Art Gallery in Southport. *Creative Re-Awakenings* featured over 100 artworks across a range of media and formats and included paintings, textiles, pottery, photography, puppetry, sculpture and creative writing. A 'Meditation Zone' within the exhibition was built around *Creative Meditations*, an audio CD resulting from a specialist creative writing and meditation workshop in April 2009. Creative Re-Awakenings was organised by a curatorial team of programme clients led by the Arts Officer who were responsible for selecting, framing and hanging the work, poster design and interpretation panels. The exhibition was opened following a special preview event attended by over 150 guests including exhibitors, their families and healthcare professionals.



Creative Re-Awakenings Launch  
27<sup>th</sup> June 2009  
Photos: Jessica Bockler

## **Programme Website**

The initial Creative Alternatives website was created in 2007 by web designer Ryan Forrest, and it provided details of the programme aims and creative provision while also offering information on referral pathways, the programme team, client feedback and general arts and health policies and strategies.

Following financial support from the International Centre for Digital Content in 2008, the website was expanded and updated with the addition of public galleries, news bulletins and interactive discussion forums. Creative Alternatives clients may now log into the site to upload their own artwork and communicate through forum postings and instant messaging. The site also features a new resources section that allows the general public access to audio and video files.

**Please visit:** [www.creativealternatives.org.uk](http://www.creativealternatives.org.uk)

## **Client Support**

The challenging complexity of client health and lifestyle histories demands a high level of individual support beyond creative provision. Both the Arts and Referral Officers are available to clients throughout the week via telephone or email; with the option of personal meetings should this be required.

The Arts and Referral Officers are accessible for practical queries relating to routine programme issues that may include booking for attendance at special workshops and outings, registering a temporary absence from a workshop or seeking arts-related advice.

Those clients in need of additional psychological support are signposted to appropriate healthcare professionals and organisations, are offered advice on relaxation techniques or provided with the opportunity to express their concerns and anxieties in empathic and non-judgemental private meetings with the Referral or Arts Officer.

Ongoing client support begins once initial contact with the programme is made and often continues beyond the formal Creative Alternatives term. The community of current and former clients is encouraged through the schedule of social and cultural outings which is engineered to permit the strengthening of mutual support networks and friendships.

## Moving Forward: Exit Strategies

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Acknowledging the difficulties encountered by clients when leaving the support network of Creative Alternatives has prompted the development of a multi strand exit strategy, named 'Moving Forward' in recognition of the objective of encouraging clients to enter mainstream services and regain more control of their lives. The development of social, creative and expressive skills during engagement with the programme arms each client with an increased capability to enter the wider world with greater confidence and independence.

On entry, all clients are made aware that their involvement is time limited and, within their fifth month, are reminded that their 'Moving Forward' meeting with the Referral or Arts Officer will shortly be arranged. At this point, opportunities exist for the client to raise any particular concerns or issues that may complicate their exit from the programme.

Alongside the Initial Assessment, the 'Moving Forward' meeting serves as the second major assessment point for all clients. During this meeting, the client once again completes the COOP chart and HAD scale and also the Lifestyle Questionnaire that assesses lifestyle changes following engagement with Creative Alternatives. The assessing officer gathers feedback from the client and explores the client's feelings about leaving the programme, examines the programme's benefits and weaknesses and encourages suggestions for improvements to programme delivery.

The client's future creative ambitions are explored and the officer gives advice and guidance through the signposting of a range of local arts opportunities. Each client receives a comprehensive 'Sefton Arts Directory' (compiled by the programme's officers) containing a wide range of information on current local and regional arts provision.

The assessing officer explores the client's current state of mental health and determines whether further healthcare intervention is required. This would include information on the full range of local healthcare support services, NHS Expert Patients Programmes, counselling or GP services.

Not all former clients retain ambitions to continue creative activity but rather seek opportunities in the voluntary sector, further education or employment. In these instances, advice on the best routes to progress these ambitions is made available.

### **Home Activity Pack**

At the Moving Forward meeting each client receives a free Home Activity Pack that contains a number of fully resourced arts activities. Although the Arts Officer originally developed the pack for use by all clients to promote arts activity outside of Creative Alternatives schedules, the high expense of this ambition determined that the pack is now only distributed during the 'Moving Forward' meeting to those clients successfully completing their six month programme access. This serves to recognise and reward commitment shown by the client to improving their health and encourages continued arts activity in the absence of programme membership.

The pack features a range of exploratory arts activities including creative writing exercises, visual arts projects and visualisation and meditation exercises. All art materials required for the completion of the activities are included in a reusable and durable environmentally friendly bag branded with the Creative Alternatives logo.

### **Go With The Flow**

Operating alongside Creative Alternatives programmes are two associate workshops named 'Go With The Flow' which potential, current and former clients may access for additional arts provision within sympathetic settings. Although these workshops are part of the mainstream Sefton MBC arts services workshop programme and are open to the general public, they were founded with the needs of Creative Alternatives clients in mind to satisfy their demand for a more tailored arts opportunity. These workshops, based in The Atkinson Art Gallery, Southport and Netherton Arts Centre, act as a bridging or transitional activity between the security of Creative Alternatives workshops and full mainstream public programmes and are run by an artist, Sarah Richards, who works closely with the Arts Officer and Principal Arts Development Officer in understanding the special status of these workshops and can shape the arts content and tone of the sessions accordingly. Through participation in these workshops, current and former clients must exercise a degree of independence and initiative.

### **Continued Support**

Former clients continue to be invited to Creative Alternatives' outings and special workshops and so maintain contact with the programmes wider community. The Referral and Arts Officers receive regular requests for advice on mental health issues and creative projects to which they respond, giving guidance as time permits.

*"I'd like to give weight to the importance of the on-going support CA has provided for former clients. In several cases I'm aware of (myself included) the time since the 'official' programme ended has been difficult at times and that continued interest, inclusion, opportunity and friendship has proved invaluable – perhaps even life-saving. The 'Go with the Flow' workshops are greatly appreciated."*

Creative Alternatives client

Furthermore, with the development of the Creative Alternatives website and its internal discussion forums, current and former clients have access to a resource which actively encourages communication and facilitates peer advice and signposting.

# Research Methodology & Results

## Research Methodology

The impact of Creative Alternatives upon its client base is very broad and this is reflected in the range of qualitative and quantitative evaluation tools. The following table itemises the evaluation tools employed at each stage of a client's engagement with the programme.

Stage of programme interaction	Evaluation Tool
Initial Assessment	HAD scale and COOP chart completed in the presence of the Referral Officer.
Throughout active engagement with the programme	<p>Client support via telephone and in person. All communication is tracked via individual communication trails which capture essential information/client feedback.</p> <p>Artist workshop diaries: Following each workshop, the artists write a brief summary which informs the Arts and Referral Officers of the creative activities delivered and describes how each individual participated during the session. The purpose of these diaries is to assist the officers in supporting clients and highlighting issues which may need follow-up in-between workshops.</p> <p>Occasionally additional evaluation tools such as the 'mood maps' may be administered.</p>
Midway through programme – approx. 3 months after initial assessment	Open-ended review questionnaire and Lifestyle questionnaire (the latter from July 09 onwards), administered by post.
Moving Forward Meeting – approx. 6 months after initial assessment	HAD scale, COOP chart and Lifestyle questionnaire (from July 09 onwards), completed in the presence of one of the programme officers.
Follow-up – 6 months after Moving Forward Meeting	Open-ended follow-up questionnaire and Lifestyle questionnaire (July 09 onwards) administered by post.

Despite a rigorous approach to programme evaluation, there exist limitations to data collection with which many researchers will be familiar. Occasionally, it is not always possible for a Moving Forward exit meeting to be held which, in turn, deprives the programme of a range of valuable information. Evaluation relies on the cooperation of clients and, especially from a vulnerable group experiencing complex problems, the incidence of a failure to complete postal questionnaires accurately or at all is high.

## Programme Results

### ➤ Hospital Anxiety and Depression Scale

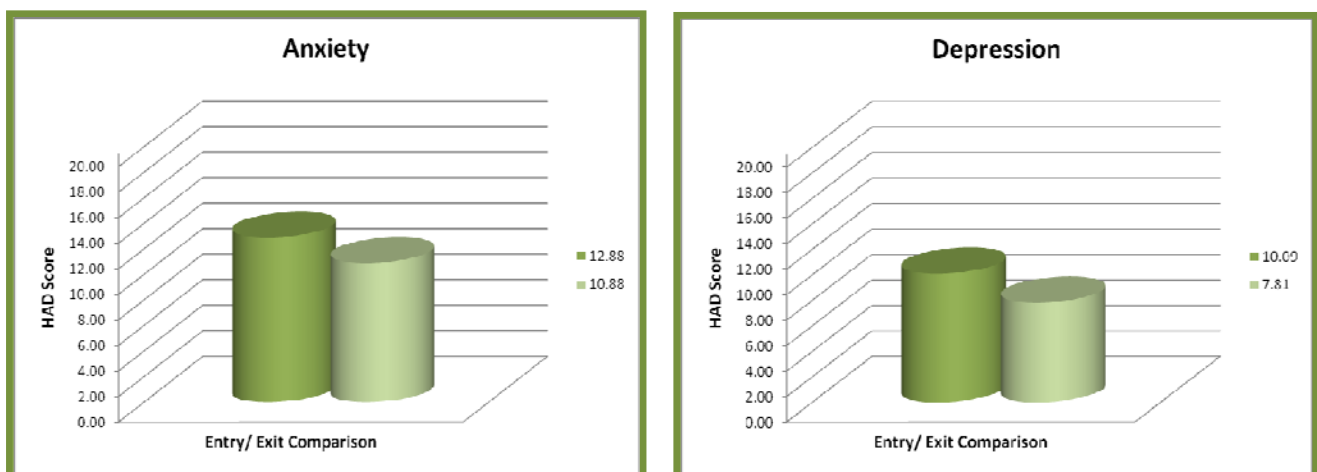
The Hospital Anxiety and Depression Scale (HAD) is utilised to measure the clients' levels of depression and anxiety before and after active involvement with the programme. The scale consists of fourteen statements, seven relating to the symptoms of generalised anxiety disorder and seven relating to the symptoms of depression. The clients rate themselves on each of the statements, using a scale of 0 – 3 on which '0' represents the optimum level of emotional wellbeing and '3' the poorest. The scale provides each client with two scores, one for anxiety and one for depression. Scores are divided into four ranges: normal (0-7), mild (8-10), moderate (11-15) and severe (16-21).

The data from the HAD scale shows that Creative Alternatives has a very positive impact upon both the levels of anxiety and depression. The results reported below are based on 64 clients from data collected between 23<sup>rd</sup> November 2006 and 9<sup>th</sup> April 2009.

#### HAD Results:

**42 of the 64 clients reported a decrease in anxiety symptoms (65%); similarly 42 of the 64 clients reported a decrease in depression symptoms (65%), and 31 of the 64 clients reported a decrease in the symptoms of both anxiety and depression (48%).**

As the following figures show, the results indicate statistically **highly significant** reductions in both anxiety and depression:



On average, **anxiety is reduced by 2.00 points** across the client population. Statistical comparison of the entry and exit data shows that the change is **highly significant** ( $p = 0.00001$ ). On average, **depression is reduced by 2.28 points**. Statistical comparison shows that the change is again **highly significant** ( $p = 0.00001$ ).

### Dartmouth COOP Chart

The Dartmouth COOP Chart is utilised to enable clients to self-assess changes in their general health. The chart consists of nine categories that are measured on a scale of 1 – 5 (1 being the optimum level and 5 being the poorest level). The chart is administered prior to clients entering into Creative Alternatives and following their completion of the programme. The results reported below are based on 72<sup>1</sup> clients. The data was collected between 23<sup>rd</sup> November 2006 and 9<sup>th</sup> April 2009.

Category	% of clients who report improvement	Results according to statistical analysis
Physical Fitness	40%	<b>p = 0.016</b> <b>Significant</b>
Feelings	56%	<b>p = 0.00000001</b> <b>Highly Significant</b>
Daily Activities	53%	<b>p = 0.00008</b> <b>Highly Significant</b>
Social Activities	63%	<b>p = 0.00000001</b> <b>Highly Significant</b>
Pain	31%	p = 0.375 Not Significant
Changes in Health	38%	<b>p = 0.014</b> <b>Significant</b>
Overall Health	33%	<b>p = 0.005</b> <b>Significant</b>
Social Support	33%	p = 0.117 Not Significant
Quality of Life	44%	<b>p = 0.00004</b> <b>Highly Significant</b>

<sup>1</sup> The COOP chart was administered alongside the HAD scale. In total 72 clients completed both COOP and HAD. However, 8 of the 72 completed HAD scales were rendered invalid due to clients making errors when completing the scale, leading to 64 valid HAD scales and 72 valid COOP charts.

## Lifestyle Questionnaire

Acting on a request from NHS Sefton, a lifestyle questionnaire was recently devised aimed at evaluating specific changes in lifestyle and health behaviours following engagement with the programme. The questionnaire features eleven categories, eight of which are measured on a scale of 1 – 5 (1 being the poorest level and 5 being the optimum level). The remaining three categories invite a choice between 1 ('no') and 2 ('yes'). For all eleven categories the clients had the option to select 0 ('does not apply').

The lifestyle questionnaire was initially administered via mail-out to all former clients in July 2009 and is now administered to clients during their mid programme postal review and upon programme completion. The results reported below are based on 59 clients. Clients who selected 'does not apply' for any category were not included in the percentage calculation. The data included was collected between 1<sup>st</sup> July and 3<sup>rd</sup> August 2009.

<b>Levels of physical activity</b>				
(9 clients selected 'does not apply')				
Much reduced: 0%	Reduced: 2%	Unchanged: 26%	Improved: 52%	Much improved: 20%
<b>Quality of diet</b>				
(8 clients selected 'does not apply')				
Much worse: 0%	Worse: 4%	Unchanged: 49%	Improved: 43%	Much improved: 4%
<b>Smoking habits</b>				
(44 clients selected 'does not apply')				
Much worse: 0%	Worse: 0%	Unchanged: 53%	Improved: 27%	Stopped smoking: 20%
<b>Levels of alcohol consumption</b>				
(31 clients selected 'does not apply')				
Much worse: 0%	Worse: 0%	Unchanged: 57%	Improved: 32%	No longer drink: 11%
<b>Levels of medication</b>				
(11 clients selected 'does not apply')				
Much increased: 0%	Increased: 10%	Unchanged: 52%	Reduced: 27%	Stopped medication: 11%
<b>Number of GP visits</b>				
(6 clients selected 'does not apply')				
Much increased: 2%	Increased: 2%	Unchanged: 55%	Reduced: 25%	Much reduced: 17%
<b>Levels of social activity</b>				
(1 client selected 'does not apply')				
None: 2%	Reduced: 2%	Unchanged: 28%	Increased: 53%	Much increased: 15%
<b>Changes in your mental health</b>				
(No clients selected 'does not apply')				
Much worse: 0%	Worse: 5%	Unchanged: 20%	Improved: 51%	Much improved: 24%
<b>Take up of voluntary work</b>				
(7 clients selected 'does not apply')				
No: 58%		Yes: 42%		
<b>Take up of paid employment?</b>				
(13 clients selected 'does not apply')				
No: 93%		Yes: 7%		
<b>Entered into education</b>				
(8 clients selected 'does not apply')				
No: 59%		Yes: 41%		

### Mood maps

Between February and May 2008 and over a period of ten weeks, clients were invited to reflect upon the impact of their weekly core workshop in terms of mood and stress reduction. The tool used for this measurement was an open 'mood map' with clients completing an individual mood map at the end of each session. The map invited them to briefly describe their feelings 'before the workshop' and immediately 'after the workshop'. Participants could also draw images to represent their thoughts/ feelings. Some participants chose to make an overall statement about the impact of the workshop.

The following tables feature extracts from the mood map results, clearly showing the positive impact of workshop attendance on relaxation and mood. Although some clients felt content and happy at the beginning of the workshops, many reported feeling “down”, “tense” and “anxious”. In contrast, after the workshops more people felt “relaxed”, “uplifted” and “inspired”. A number of clients also reported that their enhanced mood lasted for the rest of the day or even several days.

<b>Netherton Core Workshop (11<sup>th</sup> February – 19<sup>th</sup> May 2008)</b>		
	<b>Before the workshop</b>	<b>After the workshop</b>
<b>Week 1</b>	“Nail biting with apprehension due to low confidence and feeling different.”	“Feel less on my own, more part of something due to team work.”
	“Today before the workshop I was feeling very tired with a headache and bad neck and shoulders. I have a weight across my back. But I was really looking forward to coming here. Because I forget my worries and lose myself in creating things which makes me feel really good each time I've been.”	
<b>Week 2</b>	“I was very preoccupied with all my problems.”	“The workshop gave me a chance to think about other things. It was a break from all the other things that bother me.”
	“I felt quite good today and the workshop helped this more. My sculpture is coming along. Great. And I love doing arts.”	
	“I was feeling very (image of sad face) this morning but the workshop really helped to raise my spirits.”	
<b>Week 3</b>	“Bored.”	“Inspired.”
	“Rubbish.”	“Marvellous.”
	“Head all over the place, too many thoughts. I just love this lesson. We went outside to the canal, so much to see and photograph. Loved doing my painting. Pity it's not more often. Thank you girls.”	

	Before the workshop	After the workshop
Week 4	<p>"I was really on a high today."</p> <p>"I was a bit nervous this morning. Went to see parents. Both not well, got upset."</p>	<p>"And I was even happier after."</p> <p>"I feel happier now after seeing friends and trying new things."</p>
Week 5	<p>"I was a bit tense."</p> <p>"Agitated."</p>	<p>"I am very relaxed."</p> <p>"Agitated because I'm going back home."</p>
	<p>"Needed to be here today. Always something different but thankfully the same lovely faces. Making a picture from screwed up paper which brought back memories from childhood, loved this type of art. We have a laugh as well as being taught and given ideas. Had to leave early to go to the doctors."</p>	
Week 6	<p>"Tired."</p> <p>"Was in a good mood."</p>	<p>"Brighter."</p> <p>"Now in a better mood. Feel very uplifted."</p>
	<p>"Horrendous weekend, family issues. Not able to see any way out but, hey presto, Jessica phoned. It put all things right, then I came to the session and then I felt whole again - what a wonderful way to get well. Art, chats, laughs. I believe this group should be known to all who deserve it and I certainly do. Thank you very much!"</p>	
Week 7	<p>"Tense and anxious."</p>	<p>"Much better."</p>
	<p>"Had a brilliant day, gave the art 100-10%, enjoyed every minute working with clay and plaster. This art group is just a marvellous therapy. The group company does me the world of good. Have a chat and laugh and generally excellent spirit."</p>	
Week 8	<p>"Quiet."</p>	<p>"Talked a bit."</p>
	<p>"Was in a good mood before I came this afternoon. Really enjoyed this afternoon. Feel even better."</p>	
Week 9	<p>"Felt very anxious and had a migraine coming on."</p> <p>"Felt low, shaky."</p>	<p>"I was glad that I attended. The tutor Jessica was very helpful. I had time for myself, it was very peaceful."</p> <p>"Felt a bit better."</p>
	<p>"This art is marvellous for confidence, self-esteem, laughter, noise and music. You go home with a brighter spirit."</p>	
Week 10	<p>"Was going to cancel as was depressed, but glad I did come."</p> <p>"Very anxious today."</p>	<p>"Depression lifted slightly, anxiety lifted slightly."</p> <p>"A lot better."</p>

## Formby Core Workshop (20<sup>th</sup> February – 28<sup>th</sup> May 2008)

	Before the workshop	After the workshop
Week 1	<p>“Nervous.”</p> <p>“Flat, tired, bored. The group is a good collection and mix of people all helping each other and supporting people.”</p> <p>“Mood was low when I arrived and apprehensive. Full of cold and did not really want to do much.”</p>	<p>“Relaxed and happy.”</p> <p>“Happy, supported, having done something.”</p> <p>“Really enjoyed session - feel quite energised. Not cured the cold! But good company, coffee and creative time.”</p>
Week 2	<p>“Good, looking forward to today.”</p> <p>“A bit lost and at a loose end.”</p>	<p>“Good! Glad I came. Had a good laugh. Please can I stay for another six months!!!”</p> <p>“Happy with for having company, this is the only kind of time I go out and see other people.”</p>
Week 3	<p>“Anxious, worried.”</p> <p>“Rushed and highly motivated.”</p>	<p>“Really enjoyed the physical creativity. Distracted me from my other thoughts and worries.”</p> <p>“After putting myself into the art I feel un-relaxed and need to calm down. But very happy as I enjoyed the session.”</p>
Week 4	<p>“Bored and tired.”</p> <p>“Fed up, weather crap, bored, lonely.”</p> <p>“Arrived feeling quite down. Did nearly turn to go back home.”</p>	<p>“Happy having done something. Best class ever! Went really fast as doing and enjoying it so much! Thank you!”</p> <p>“Fantastic atmosphere today, feel loads better simply for the company and conversation. Concentrated well → good distraction from current situation.”</p> <p>“Feel great - really enjoyed session. Worth the effort, glad I stayed!”</p>
Week 5	<p>“Apprehensive yet also excited as Wednesday afternoon has become a highlight.”</p>	<p>“High as a kite, really enjoyed - can't wait till next week.”</p>

	Before the workshop	After the workshop
Week 6	<p>"Uptight."</p> <p>"Nervous."</p> <p>"Rushing and a lot on my mind."</p> <p>"Bit floaty."</p>	<p>"Wonderful."</p> <p>"Very good."</p> <p>"Inspired and relaxed."</p> <p>"Struggled to concentrate but relaxed and enjoyed the company. I feel cheery now and chilled."</p>
Week 7	<p>"This week I was looking forward to the session - no fear as before."</p> <p>"Nervous, anxious, tearful, in the toilets: 'Why am I here?' It was the day after my son's 6th anniversary of day he died."</p>	<p>"Relaxed, satisfied, started to get to know some of other people."</p> <p>"Glad I came, able to paint some of what I was feeling."</p>
Week 8	<p>"Nervous and anxious."</p> <p>"Disorganised, overburdened, awkward."</p> <p>"Calm, looking forward to it, looking forward to meeting certain people."</p>	<p>"Calmer and more outgoing."</p> <p>"Reassured, calm."</p> <p>"Good, satisfied with what I achieved, relaxed."</p>
Week 9	<p>"Low because of physical pain."</p> <p>"Very bad day - very low mood. However, the workshops remain a highlight of my week - my work is focusing on both my ups and downs."</p>	<p>"Pleased that I stayed for two hours. Still physical pain but lighter emotionally."</p> <p>"Felt safe enough in group to expose bandaged arm, knowing that I would not be judged. Very useful session."</p>
Week 10	<p>"Good."</p> <p>"Flat."</p>	<p>"Very good."</p> <p>"More alive."</p>

## Southport Core Workshop (15<sup>th</sup> February – 16<sup>th</sup> May 2008)

	Before the workshop	After the workshop
Week 1	<p>"I was depressed and angry. I felt lost, isolated, unwanted. I did not know what to do positively."</p> <p>"This morning I felt anxious and nervous (with that comes sickness)."</p>	<p>The benefits are that I am relaxed for two hours, concentrating on something for myself. I feel I have done something positive and gone on a little journey of exploration. I have never socialised so much and met like-minded people. I have arranged to go out myself independently from CA with others. Creativity is very positive and helpful. I want to do more for me without grades or competition."</p> <p>"I realise after each workshop that I am managing to totally switch off to any worries and my nervousness and sickness passes. This has never happened before, I always seem to have thing on my mind so it feels great to 'switch off' and enjoy what I am doing and the company! Thank you!"</p>
Week 2	<p>"Tired this morning (not much sleep last night!!) Not happy about filling in these forms!!"</p> <p>"I have had a lot on my mind this week, lots of worries &amp; lots going on, so haven't been feeling too good at all, but was looking forward to today's class."</p>	<p>"Still tired, but happy and motivated."</p> <p>"One again I managed to switch off and concentrate on what I was doing. I felt like today's class went well for me. Although there was no more mod roc I felt that was good for me as I took time to think about what I wanted to do and progressed well and felt I achieved more than I thought I would."</p>
	<p>"Coming here lifts my mood for the rest of the day."</p>	
Week 3	<p>"Stressed, tired, jaded."</p> <p>"Bit grumpy! Too much sleep."</p>	<p>"Calmer, happier, more positive."</p> <p>"Happy, motivated."</p>
	<p>"I was feeling a bit apprehensive and slightly anxious before I came today, as I was absent last week, and always feel nervous about coming back after I have been away for some reason. However, coming to the class with the help of Sheryl and Wibke especially I felt at ease again and my anxiety lifted. I find Wibke and Sheryl very supportive and great to talk to and they are good listeners. I felt much better after the class than I did at the start and hope to carry this good feeling throughout the weekend."</p>	

	Before the workshop	After the workshop
Week 4	“Very stressed. Jittery. Had bad night again so was late which made me more stressed.”	“Feeling much calmer and surprised that I calmed down after painting something as delicate as an egg. Didn't think I'd be able to do it. Only dropped it once!”
	“At the start of the workshop I felt rather tired and a bit jaded - as it is near the end of the week. Now I feel more energetic and more sociable. I also feel quite relaxed and generally happy that I have managed to create something I like.”	
Week 5	“Stressed but optimistic.”	“Calmer.”
	“Really looking forward to our two hours together.”	“Splendid! Enjoyed every minute.”
“The workshop always cheers me up and helps me.”		
Week 6	“Bit tired (lack of sleep) and needless to say grumpy...”	“Motivated and happy.”
	“Stressed and lacking inspiration when I arrived.”	“More relaxed, managed to find some inspiration. Enjoyed the workshop as always. The inspiration stays with me when I have and helps me to stay more relaxed and positive for a few days afterwards.”
Week 7	“In great pain from a minor accident.”	“Still in pain but feel slightly more optimistic about the future and feel more fulfilled.”
Week 8	“Peed off.”	“Energised, happier.”
	“Unsettled, have been for a week.”	“Calmer, more focused.”
	“Stressed and a little down.”	“Feel a lot lighter, thanks!”
Week 9	“Apprehensive.”	“Unusually pleased with myself.”
	“A little anxious.”	“A lot better.”
“Very enjoyable, as always helpful and worthwhile.”		
Week 10	“Confused. Very tired.”	“Still confused. Bit calmer. Still tired but a good tired.”
	“Preoccupied and a bit down.”	“Engrossed in working with my painting - didn't want to stop. Time always goes too quickly.”

## Discussion of Results

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**Invest To Save Funding Objectives:** The principal goals of the Creative Alternatives programme, as agreed within the Invest To Save Budget Implementation Plan in 2006, were as follows:

- ✓ To provide an accessible arts on prescription programme throughout Sefton for individuals suffering from depression or anxiety as an alternative to the prescribed medication Benzodiazepine or to aid withdrawal for those who have been long-term users of the drug.
- ✓ To provide access to other physical and cultural activities, social networks and support agencies which may help address some of the root causes of a user's illness.
- ✓ Reduce the reliance on Benzodiazepines by at least 100 individuals over the lifetime of the project in Sefton.
- ✓ Reduce the volume of prescribed Benzodiazepines in Sefton.
- ✓ Reduce the amount of GP contact time taken up by users.
- ✓ Establish arts activities as a permanent option within the Sefton MBC Arts service GP referral scheme.
- ✓ Improve client's quality of life.
- ✓ Improve transferable skills for clients with the aim of increasing employment prospects, social skills, literacy, and planning skills.
- ✓ Increase participation in arts and cultural activities across the borough.

**Benzodiazepine-Related Targets:** At an early stage of programme delivery in 2007, it was necessary to adjust the obligation to specifically target Benzodiazepine users for Creative Alternatives interventions. Despite the full co-operation of a wide range of partner organisations both within the PCT and other healthcare groups, the identification of Benzodiazepine-related clients and their recruitment onto the Creative Alternatives programme in sufficient numbers was complex and difficult. The anticipated source of Benzodiazepine-dependent clients in Sefton, the Council for Involuntary Tranquilliser Addiction (CITA), proved not to have access to this target group in sufficient numbers to make this objective viable and no budgetary allocation had been made at the outset to fund the services of CITA as a feeder organisation for Creative Alternatives. ISB funders and Sefton's PCT therefore approved the widening of the client base to allow for a more inclusive service which addressed the needs of those prescribed other medication for their depression/anxiety. At this time, Creative Alternatives also adopted a preventative role to those with the symptoms of mild to moderate mental-ill health and who were vulnerable to exclusively medication-centred treatments. The adjustment in client eligibility has resulted in 355 referrals onto the programme set against the 100 Benzodiazepine-related clients targeted under the original funding conditions.

The effectiveness of Creative Alternatives in addressing remaining Invest To Save objectives is as follows:

**Mental Health:** The HAD scale demonstrates that 65% of clients report a decrease in anxiety symptoms and 65% of clients report a decrease in depression symptoms. 48% of clients report a dual decrease in the symptoms of anxiety and depression. In addition, COOP data shows that 56% report an overall improvement in their feelings post programme, results that indicate that clients feel less affected by emotional problems and mood fluctuations. Since joining Creative Alternatives 75% of clients responding to the Lifestyle Questionnaire report an improvement in their mental health, results that are further supported by client feedback given in the mood map study. Many of those reporting feeling stressed, tense and anxious before a workshop session consistently reported calmer, relaxed and more focused feelings following the session. The distracting influence of creative activity on depressive mood and the ability to find personal space in a safe environment seems to be a significant factor when accounting for the difference between pre and post workshop responses. Many clients noted their depression or anxiety levels lifting as a direct result of attending workshop sessions, results that demonstrate the positive impact Creative Alternatives has on mental health and particularly on the symptoms of anxiety and/or depression.

**Medication:** Additional measures of programme impact on mental health are pre and post programme levels of medication among clients. The Lifestyle Questionnaire monitors the extent to which clients have altered levels of anti-depressant or tranquiliser medication since involvement in the programme. 27% of clients reported a reduction in medication and 11% of clients had stopped taking medication completely, figures which indicate a significant improvement in mental health and well-being. Reducing reliance on medication suggests the potential for a financial saving to NHS budgets. 52% of clients had not made any changes to their medication while 10% reported an increase in their medication since being involved in the programme and 11 respondents reported that the question relating to changes in medication did not apply to them, suggesting that a percentage of clients choose not to take medication for anxiety and/or depression. A number of clients enter Creative Alternatives with a resistance to pursuing medication-linked treatment or have undergone treatments that have included medication and have found this an unhelpful or unsuitable approach for their conditions.

*"I've only gone on antidepressants since my mum passed away, Creative Alternatives helped me stay off them longer."*

*"I have found that the Creative Alternatives course helped me prolong the time when I didn't have to go onto an anti-depressant."*



Formby core workshop. Photo: Selina Dunne.

**GP contact time:** Apart from reducing reliance on medication, reduced GP contact time also relieves pressure on mainstream healthcare budgets and services. From the Lifestyle Questionnaire, 42% of respondents reported a reduction in the number of occasions in which GP services have been accessed, an indication that those experiencing reduced anxiety or depressive symptoms require less GP support. However, it is also worth noting that 2% of clients reported an increase in the number of visits to their GP and, while this may reflect a decline in their mental health, it may also suggest a greater willingness to confront and control their healthcare in a more proactive way by seeking professional help.

*"I feel stronger and more balanced, I have not had to go to the surgery since joining Creative Alternatives and have now discussed with my doctor about reduction in medication."*

**Social impact:** The Lifestyle Questionnaire shows that, through programme access, 68% of respondents reported an increase in levels of social activity. Similarly, data from the COOP chart demonstrates that 62% notice an improvement in their level of social activities post programme while 33% feel a greater sense of social support available to them. These statistics add weight to the assertion that one of the major impacts of Creative Alternatives membership is the generation of increased social interaction, an assertion further supported by mood map studies. Many clients have emphasised the central role which friendship, companionship, team work and conversation plays in their road to recovery, qualities which are embedded within the Creative Alternatives approach to service delivery. Initial and habitual fears of social interaction are overcome through a workshop structure in which the Creative Arts Facilitators deliver challenging, inventive and expressive activity that encourages teamwork, dialogue and communication. As workshop participants share a range of depressive health conditions and all acknowledge their vulnerability, so this factor helps generate a common bond into which new clients are more easily drawn through mutual-supporting peer networks.

The client base consists of a majority of those without employment and the social interaction routinely enjoyed within the workplace is absent from their lives. The isolation which unemployment brings adds to depressive episodes and countering this has become a feature of Creative Alternatives operations. Many lasting friendships have been forged between clients through the programme of regular cultural outings and events; and additional social activity, including holidays, have been organised independently and informally among former programme members. Furthermore, those initially entering the programme often experience heightened anxiety that, once overcome, has allowed them to support the integration of newer members.

*"I am not alone, I have learned to interact with other people who suffer the same as myself, and also help them."*

*"The social aspect of meeting different people boosted confidence in myself ... that I could still interact and get on well with people. It is a place and time where I can give my mind a rest and let my imagination take over, and the benefit of it helps me through the week."*

**Daily activities:** COOP chart data reveals that 51% of clients report that physical and emotional health proves less restrictive in their daily lives after engaging with Creative Alternatives. This may be attributable to a number of factors amongst which may be that clients are more effective at managing their conditions or they may have developed greater levels of motivation and independence since programme membership.

**Physical fitness:** Extensive research into the effects of physical activity on mental health has been undertaken which shows the beneficial effect that physical activity has on relieving tension, improving mood and increasing self-esteem. The Lifestyle Questionnaire shows that 72% of clients reported an improvement in levels of physical activity resulting from programme membership. COOP chart readings also show that 38% of clients report an increase in physical fitness after participating in the programme. Lack of motivation and/or energy is one of the basic symptoms of depression and therefore a decrease in physical activity can be anticipated while the social situations which those experiencing anxiety seek to avoid also has an adverse effect on physical health. An increase in physical activity is a benefit of programme engagement through the simple mechanism of providing a motivation to leave the home, travel to workshops, engage with the world and attend social outings and events. Various group outings have a more specific physical health impact through the use of Indian dance, Yoga exercises, movement classes, African drumming sessions or trips to the beach. Clients are routinely signposted to local health centres and the Active Sefton programme that provides free gym membership and personalised exercise regimes. Mood map study reveals that clients move from feeling 'tired' to 'brighter' and from 'flat' to 'more alive'.



Indian dance & outing to Formby beach.  
Photos: Jessica Bockler.

**Diet:** Research has demonstrated the role which diet can play in improving emotional health. Amino acids affect the brain's production of the neurotransmitter serotonin, the levels of which correlate with the increase or decrease of depression, and although caffeine can increase alertness and concentration, excessive consumption is associated with symptoms of anxiety. Data from the Lifestyles Questionnaire shows that 47% of clients report dietary improvements following programme engagement. Creative Alternatives encourages dietary improvement through the provision of healthy refreshments at all workshops and events and the commissioning of arts and health organisation Squash Nutrition to deliver positive food information through creative workshops.

*"Since being involved with Creative Alternatives I've felt motivated to make some positive changes to my diet, I don't eat as much chocolate and I have a lot more fruit and vegetables."*

**Smoking:** Lifestyle Questionnaire data shows that 25% of clients smoked on entering the programme, a figure that is higher than the national average of 21% of the population of Great Britain, as reported by The Office for National Statistics in 2007. Within this 25%, 27% of individuals reported a reduction in smoking habits since programme membership with a further 20% stopping smoking completely. This change may be the result of increased self-confidence, a realisation that positive changes are possible or that improved mental health brings the strength to implement such change. Details of NHS Stop Smoking Support Services are signposted to clients by the Creative Alternatives Officers.

*"I've tried giving up smoking before but I never had the energy and discipline to keep it up - whereas now after Creative Alternatives I have! With a smoking habit of 30 years this is no small accomplishment!"*

**Alcohol:** 'Mind' report that "30 to 50 per cent of people with mental health problems also have current drug or alcohol issues." The Lifestyle Questionnaire sought information from clients on their alcohol consumption pre and post programme participation. No client reported an increase in alcohol consumption and 57% reported no change. 32% of respondents reported a reduction in alcohol consumption with 11% stopping drinking completely. As has been noted with smoking habits, reduced alcohol consumption may reflect an increase in self-esteem or a more positive approach to lifestyle changes. Creative Alternatives works with a number of clients experiencing alcohol problems and referrals are accepted from local services offering treatment for addiction. Those clients identified with an alcohol problem will discuss this with programme officers who may then signpost the services of local alcohol support networks. Although clients are requested to not consume alcohol before attending workshops, some latitude is given to those with a physical dependency.

**Pain:** Creative interventions have been used to assist in the management of chronic pain in a number of settings such as recovery from spinal injury, in pain management centres and in hospices. The creative process can provide a distraction from pain and may also serve to express and communicate a personal experience of pain. COOP chart data indicates that 29% of clients reported less bodily pain post programme and although this is not a statistically significant result, it does indicate the impact of creative activity on the easing of physical pain. A number of clients attribute their physical health problems or chronic pain as a contributory influence on their depression and/or anxiety and have noted that Creative Alternatives workshops have provided a valuable distraction and change of focus resulting in a degree of relief from discomfort.

*"It's a time I can be distracted from my pain and be involved in something which is about me as an individual rather than someone with chronic pain and back problems."*

**Quality of life & overall health:** According to COOP data, 42% of clients report an increase in their perceived quality of life. 32% of clients report an improvement in their overall health while 37% have noticed an improvement in their overall health in the past 4 weeks. Both of these results are statistically significant. This improvement may reflect a number of factors and is convincingly associated to the results concerning mental health, alcohol, smoking, pain and physical activity.

*"Creative Alternatives has been beneficial to me as it is totally away from the normal things I would do in everyday life. I find going to the classes therapeutic and relaxing, the staff and people who attend make you totally at ease."*

**Transferable skills:** The Lifestyle Questionnaire sought to record levels of activity from clients beyond their membership of Creative Alternatives. 42% of respondents reported commencing voluntary work, 7% entered paid employment and 41% took up further educational opportunities. The influence of Creative Alternatives on the development of transferable skills among clients is persuasive. These skills include communication, planning and social skills, the execution of physical and mental tasks, increased independence and mobility and the ability to fulfil basic administrative and monitoring requirements. The programme officers have strong working relationships with local service providers and are energetic in directing clients into voluntary, education and employment opportunities throughout their engagement with the programme and as part of the Moving Forward meeting.



Design of Superscousebananas at Formby core workshop.  
Photos: Selina Dunne.



### **Client Case Studies**

The following four client case studies were drawn from interviews with the Referral Officer and were compiled into a 'Creative Journeys' booklet to coincide with the Creative Re-Awakenings exhibition in 2009. The clients hope that the sharing of their personal experiences will communicate the deep impact the programme has had on their wellbeing and serve to encourage wider participation in Creative Alternatives.



## *Jack's Journey*

Prior to 1994 I had a good life and lifestyle. I was an outgoing social person. Enjoyed sports, bit of a daredevil, from car racing with my Dad, into motorcycling and even a bit of pot holing. Risks were a buzz to me. I worked, had a good family life and looked forward to waking up.

Then in 1994 I had a very serious accident at work, my body and especially my mind became totally different. Psychologists told me I was suffering from post traumatic stress. I didn't know who I was or what was happening to me. My mind was racing about with confusion. Phobias were inside my head, fear of dying and yet fear of living, fear of doctors, hospitals, health and full agoraphobic for 6 years. I became a zombie living in an egg shell. Being in a negative world was scary, lonely and yet it was embracing me. Twenty odd years of marriage were slipping away as I was hard to live with in such a depressive state of mind. The story goes on, but, it would take a book to write it all down!

I began seeing a psychologist at the Hesketh Centre who helped me talk things through. She knew I had enjoyed art in the past and so suggested Creative Alternatives to me.

The first steps to getting involved were not easy, I was extremely anxious about going out of my safe zone and being with a new group of people. The staff were excellent; they put me at ease and helped to make me feel welcome and comfortable in the group.

It was very rewarding to get involved in a project with people who also had their own problems, and I felt that was the first break through for years. It was a warm feeling to find that I actually enjoyed being out of my safety zone and art and social life outside my safe zone meant something very important to me. My mind was starting to work again!

I started painting at home and looking forward to the class on a Friday morning. It was such a help to share with others, talk and to be involved in a group project. During my depression all I see is blackness but getting in touch with my creative side has helped me see the world in a new light – now there is shape and colours, smooth brush strokes and a feeling of inner warmth.

Don't get me wrong, I'm not recovered yet – it's a long journey – but Creative Alternatives has been a very big stepping stone for me. Now I have my art to help my moods.

**This isn't just an arts project – it's caring about people and giving us hope.**



Jack finds that creating symmetrical artwork helps him relax and calm his mind.

## *Sue's Journey*

I came to Creative Alternatives after engaging in a range of interventions to help me come to terms with years of abusive personal experiences. I had been helped by counselling and stress management and felt that something else was needed to unlock a part of me which was really difficult to reach.

In the workshops I was able to be myself, doing something for me just because I wanted to – not because anyone was telling me I had to. It felt like a safe place, being with others who had had something in their lives that they needed help with – I was not the only one trying to survive and putting on a mask. There were no expectations on me, no judgement and no pressure. I didn't have to tell people anything about myself if I didn't wish to, and if I did people would be respectful. I enjoyed having fun with the other people in the group; we laughed a lot which I hadn't done for a long time.

For me Creative Alternatives was a journey of self exploration. I learned that it's ok to be me. I expressed and worked through a lot of painful experiences. After the workshops I would often be tearful and emotional, but this was a positive thing as it was all about me processing my experiences.

One of the techniques the artists showed me which helped was using my non-dominant hand to paint. This helped me to express myself, I was free to make mistakes, do what I want, have fun.

I gained a lot from the story, 'Women Who Run with the Wolves', this helped me to see things from my past in a different light, I was able to put some things to rest and start to process others.



Creative Alternatives was a 'spring board' onto other things for me. Since leaving the programme I have gone on to do a life coaching course and a watercolour course.

The past no longer controls my life, I don't feel guilty or ashamed as I once did and I know none of it was my fault. I'm now more assertive and in control of my life, I know that no one has the right to abuse me. I'm still on a journey but now the journey is exciting, and I look to the future. Don't get me wrong, life isn't perfect, but now I can cope when things go wrong. I am now living rather than existing.

**This has been a powerful, life changing experience for me, which is hard to put into words. Words alone cannot express how powerful Creative Alternatives has been for me. I would like to think that many more people could benefit from it in the future like I have. Creative Alternatives gives people so much more insight, confidence, and power to change their lives without the need for medication.**

## *Rod's Journey*

When I first came to Creative Alternatives I was not in a good place mentally. I was not working and felt like I was a difficult to live with; I lacked motivation and was very miserable. I was seeking help from psychiatrists who were trying to find a diagnosis, and terms like bi-polar were mentioned but I felt that I was not getting the help I needed. It felt like clinicians just wanted to give me medication to dull my senses and that's not what I wanted, as it wouldn't have helped to make me better. I needed something different, something more. I was fed up of being pushed from pillar to post and no one really seemed to care about my wellbeing.

My Job Centre advisor recommended the programme to me and initially I was a little sceptical about how beneficial Creative Alternatives could be but I was surprised by how useful it was to me.



At first I was withdrawn and nervous in the group but gradually the other people and artists brought me out of myself and I soon gained the confidence I was lacking. I felt cared for by the staff and what they provided me with was very therapeutic. The artists helped to keep me focused on a piece when my mind was wondering.

There was even an occasion when the artists managed to get me singing in a group exercise, this is something I would never have expected to be able to do but I guess I just felt comfortable with the people and they helped me to come out of my comfort zone.

Two hours a week is not a lot, but I really looked forward to it and it was so beneficial to me.

I tried lots of different activities in the group, but unfortunately never finished any of them! This was okay though, as for me it was more about trying different things and simply being in the group. Through coming to the workshops I got interested in photography again. This is something I had enjoyed as a teenager but now I embrace the digital age! This gave me more motivation to go out and take photos in the local area, and I started looking at things in a different way – noticing reflections, shadow, light and colours.

**I am now working full time and do not take any anti-depressants. I'd recommend this programme to anyone, there are alternatives to medication!**

## Joanne's Journey

I have struggled with anxiety since I was fourteen and tried various things to help me but not found any of them as effective as I would have hoped. So for me creative alternatives was a final attempt, I was willing to try anything because my life was going nowhere and I wanted to do things which I couldn't do because of my anxiety.

I found the group beneficial as it was a place where no one judged me, I could do what I wanted and come and go as I pleased and knew that everyone else there had had problems too. Through the group I have formed some special friendships which have lasted over the years since I left the programme.

It was refreshing to be part of a group that wasn't obviously focused on mental health issues. The focus was on having fun, escaping your problems and enjoying creative activities. The staff were very young and enthusiastic and that attitude was infective. I have done many things through the programme which I never would have thought I would do – they have encouraged me out of my comfort zone many times – things like dancing and singing. I learned that the process of creating art is just as/if not more important than the end product, and I have become more open to a range of creative techniques.

As well as going to my weekly workshop I also attended other workshops and outings. Although I found this difficult at first it has really increased my confidence in travelling to different places.

After I had left the programme I came back to help run a series of workshops creating art for a psychological services waiting room. This was a big achievement for me and I loved seeing what a difference I could make to other people.

Since leaving the programme I have been doing voluntary work at a wildlife trust. This is a big step forward for me as I had not worked for nine years as a result of anxiety.

I hope in the future to go into paid employment again and I feel that my time with creative alternatives and subsequent voluntary work have really helped towards this. I have kept up my interest in art and photography. I regularly exhibit in local exhibitions where some of my work has been sold.

**I have halved my medication and now feel more in control of my anxiety, it doesn't stop me from doing things as much as it used to, now I am living my life instead of just existing.**



### Organisational Feedback:

In June 2008 forty-five questionnaires were distributed to a range of health care professionals with a history of client referral into the Creative Alternatives programme. The aims of the questionnaire were to:

- ✓ Gain the referral agents' perspective on the effectiveness of the programme for their clients.
- ✓ Gain the referral agents' perspective on the quality of the referral process and the communication pathways to programme officers.
- ✓ Offer referral agents the opportunity to suggest improvements to the current programme.

### The feedback received was overwhelmingly positive:

*"I have referred several patients to this service, all of whom have benefited greatly – increased confidence, they are able to socialise more easily, they are less isolated and there is general improvement in depressive/anxiety symptoms."*

Dr. Willis, Bootle CMHT, Mersey Care, NHS.

*"From my point of view I feel it is an extension of therapy because you offer social activities it gives our clients the chance to push their comfort zones in a safe environment."*

Dr. Lund, Hesketh Centre, Mersey Care, NHS.

*"Historically Occupational Therapy departments have provided this service for people with mild to moderate mental health problems, due to gross under investment this has ceased to exist in O.T departments. Creative Alternatives has 'plugged the gap' and is providing this very valuable service for this group of people."*

Helen Tuzio, Occupational Therapist, Mersey Care, NHS.

*"Frequently clients suffering with anxiety or depression require longer term support than the NHS can offer. The fact that this is done at a social and creative level adds empowerment for the client, builds confidence and aids recovery." "I greatly value Creative Alternatives as a resource for many clients – it is an imaginative and flexible initiative I would like to see continue."*

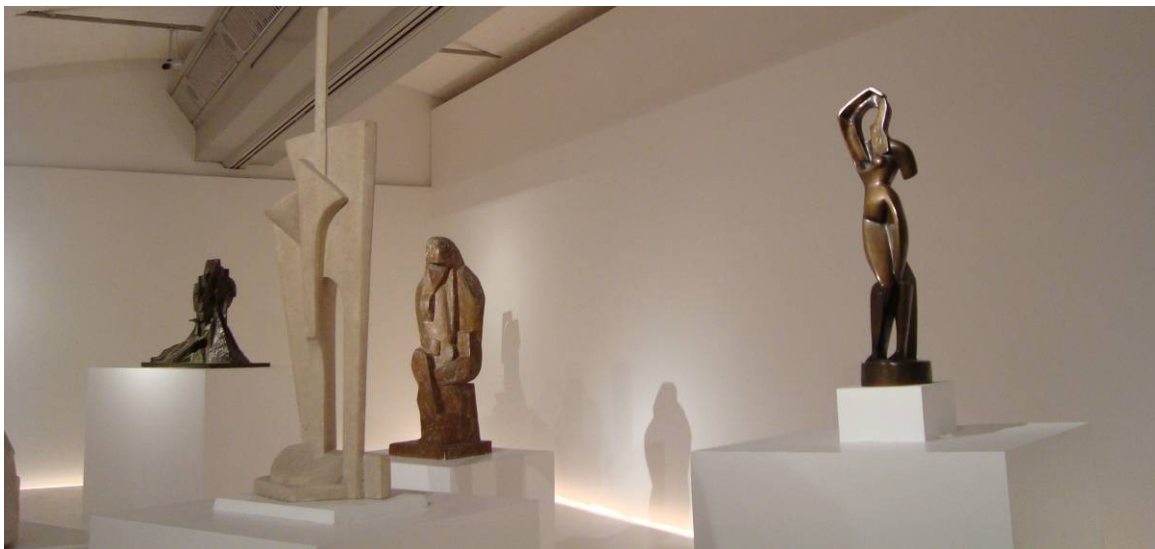
Sally Belsham, Manager of North Sefton Counselling Service, Mersey Care, NHS.

*"Helps improve patients' self-esteem and confidence. Good because encourages self expression through art and also increases social interaction. Patients are very pleased with their sessions."*

Dr. Finn, Chapel Lane Surgery, Formby.

### Impact on Sefton MBC's Arts & Leisure Services:

The impact of Creative Alternatives is not only felt on its clients but is also reflected in the mutually-dependent relationship with Sefton MBC's Leisure Services department whose wide ranging cultural provision is a central plank of programme planning and strategies. Benefits to the programme of operating within the Sefton MBC Arts Development Unit lie in the privileged status of Creative Alternatives when accessing the resources of the wider arts service for the delivery of its operations, and this has included the contributions of free venue, marketing and administrative support. While Creative Alternatives has been made possible by this relationship, the Arts Service is also rewarded through the development of new service users from among current and former clients. The ability of the Arts Service to feed the appetite for cultural activity generated by Creative Alternatives in its clients helps to fulfil key Sefton MBC arts services objectives.



Creative Alternatives outing to TATE Liverpool. Photo: Jessica Bockler.

Creative Alternatives outings introduce clients to a range of arts and leisure services in Sefton including Sefton Libraries, Southport Arts Centre, Bootle Town Hall, The Atkinson Art Gallery, Netherton Arts Centre and Crosby Civic Hall, and Sefton MBC's arts and cultural events and services are promoted to clients through the monthly newsletter and programme website. During the Moving Forward Meeting, clients receive a pack of current 'What's on' information including exhibition, music and theatre performances, mainstream workshops, festivals and events. A directory collated by the programme officers lists all of Sefton's major cultural service providers and venues.

Friendships that have formed between clients have been sustained by visits to galleries, concerts and mainstream workshops outside of Creative Alternatives schedules and programmes and the active support of former clients has been the catalyst for the success of the mainstream 'Go With The Flow' workshops. Clients are the beneficiaries of a range of specially discounted tickets for performances at Southport Arts Centre's theatre, either individually or within the structure of group outings. While current clients are provided with free tickets to organised outings, former clients may attend at the discounted rate.

Sefton's Arts Service is currently developing a volunteer programme aimed at offering a range of opportunities for public involvement in professional arts service delivery including the development of skills and experience in marketing, exhibitions, performing arts and technical arts support. Once fully operational, the volunteer programme will provide a valuable route for continued active arts involvement for current and former Creative Alternative clients while encouraging greater social integration.

*“I enjoy looking at the art and sculptures at Southport Art Gallery where I have never been before. Also, the lunchtime concert at Bootle Town Hall was very enjoyable and again something I wouldn't have gone to on my own.”*

*Creative Alternatives client*



## Challenges & Future Considerations

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As the programme has developed over the past three years, a wide variety of challenges have been faced and the ways in which these challenges have been met have shaped the current programme and will inform the programme's future structure. At this point, it is important to share these challenges, examine how they have been overcome and, where appropriate, identify how Creative Alternatives may be improved in the future.

### **Staff time**

The Referral Officer and Arts Officer posts are part-time and, for beyond the past twelve months, both officers have struggled to meet the growing demands of the project. It is often difficult to contain within their schedule all the day-to-day demands of programme delivery alongside the level of additional client support required. With this strain on staff time in mind, early in the programme's development, the plan to offer personal visits to housebound clients was abandoned. In a further attempt to meet the demands of the programme, the Referral Officer's working hours were increased in October 2008 from three to four working days per week. For Creative Alternatives to continue at current operational levels, the Arts Officer post requires a readjustment which would either result in an increase in weekly paid commitment or, preferably, the recruitment of an additional member of staff. This readjustment would allow for the expansion of the programme in those areas already identified and reduce the risk of permanently operating at the extreme margins of staff capacity.

### **Website**

The recent development of the programme's website made possible by the funding from ICDC has brought many benefits. The website now provides clients with an online community where they can 'chat', share their artwork and recommend different creative activities and suggestions for greater mental well-being. The ICDC funding provided extra staff time for the Arts Officer to oversee the development of the site and, although this external funding has ended, the website retains an ongoing time commitment for its management and updating. This obligation has increased the officer's role and responsibilities without a commensurate increase in funding and, again, the solution for this challenge lies in additional staff time, an additional staff member or the winding down of this service.

### **Client Support**

Client support is a vital aspect of Creative Alternatives. The programme implementation plan attached to Invest To Save funding suggested that client support and Benzodiazepine-dependent clients would be sourced through a local organisation (Council for Involuntary Tranquilliser Addiction, CITA) although no budgetary provision had been made for this. To compensate for the absence of this anticipated partnership, client support became the responsibility of the programme's officers and led to additional strain on their ability to deliver the core programme in terms of unanticipated emotional demands and heavy workload. The programme services would be enhanced by further 'in-house' client support being provided by an additional member of staff or through a more integrated partnership with Sefton PCT services.

### **Staff Support**

Clients on the programme require levels of emotional support which impact on the front-line staff who are trained in the field of mental health and have the emotional maturity capable of coping with the intricate demands of this work. Despite the dedication and professionalism of these individuals, additional support is necessary to enable them to fulfil these roles effectively. While the Creative Arts Facilitators receive mutual support from their co-facilitators and from the Arts and Referral Officers, the officers, as prime originators of the programme systems and content, have fewer avenues for support apart from containing and absorbing issues between themselves. A number of situations have been identified when additional specialist support for the officers would have been of value: the death of a client, clients facing very serious illnesses and the management of a number of 'difficult' individuals and 'personality clashes' within groups. In addition, there is an ongoing strain in providing a therapeutic space for those with depression, anxiety and challenging personal and healthcare histories. Team meetings and training sessions have provided a valuable outlet for the sharing of concerns and relieving tensions although the establishment of a formalised clinical support system would provide a more permanent and structured solution and offer advice on an individual or group basis as required. Ideally, this staff support system would operate from within the Sefton PCT given that the issues most directly affecting staff are rooted in the mental-ill health of the client group and the tensions and stresses generated by working to this challenging agenda.

### **Managing Programme Demand**

Each of the programme's core workshops accommodates twelve clients per session and for the past two years all three core workshops have been fully subscribed resulting in the generation of substantial waiting lists of up to up to twenty-five clients for a single core workshop. To alleviate this pressure, in 2009 the capacity of the workshops was temporarily increased from twelve to fifteen places. However, this increase had several adverse effects: it placed additional strain on the artists delivering the sessions who found that, if all clients were in attendance, they could no longer sufficiently engage with them on a one-to-one basis. Secondly, the capacity increase resulted in a significantly larger active client base, placing considerable additional strain on the Arts Officer and particularly the Referral Officer who struggled with the additional workload of supporting all active clients. Maximum capacity has now been reset to twelve participants. This experiment has shown that no increase in capacity is possible without a corresponding investment in personnel.

### **Client attendance**

Regular workshop attendance is of central importance to effective Creative Alternatives operations. The impact of creative activity in improving health and well-being may only be demonstrated by regular workshop attendance and the social benefits of the programme are increased through frequent on-going commitment which allows relationships to be formed with artists and other participants. Unfortunately, full core workshop subscription does not always equate to full workshop attendance. Due to the combination of mental ill-health and the additional challenges of poor physical health and motivation, many clients struggle to make the weekly commitment to their core workshop. While non-attendance reduces the average number of participants per session, it actually adds to the workload of the Referral and Arts Officers who make the effort to follow up each lapse in attendance, to investigate the causes and to encourage the client to return to the workshop. This

problem became apparent within the first six months of operation and, for this reason, the following attendance guidelines were put in place:

*“Clients are advised to inform us as soon as possible when they are forced to miss workshop sessions. If a client misses 2 successive sessions without informing us of his/her absence, a letter will be sent, giving a deadline for reply. If we do not hear from the client within the advised time, we reserve the right to remove the client’s name from the project register. Clients who are forced to miss more than 2 out of 6 successive workshop sessions due to family emergencies, urgent appointments and/ or poor health (and other circumstances beyond their control) are advised to inform us of their difficulties, so that we can decide together upon the best course of action. Possible courses of action are:*

*The client takes an agreed leave of absence from the project and the client’s name is put ‘on hold’ in the project register, so s/he can return to the project at a more suitable time.*

*The client agrees to leave the project.”*

Clients are informed of these attendance guidelines during their initial assessment and are given a written copy as part of their welcome booklet. However, due to the high number of recurring lapses it quickly became impractical for the Referral and Arts Officer to strictly enforce these guidelines, particularly during those times when the active client base was enlarged from approximately thirty-six clients (based on twelve participants per core workshop) to approximately forty-five clients (based on fifteen clients per core workshop). Two and a half years into operations the officers endeavour to follow up lapses in attendance although they lack the time to strictly enforce the guidelines systematically. Only increased working hours or support from an additional member of staff would make such enforcement possible.

### **Length of client involvement**

The original project bid suggested that creative interventions should be of six to eight weeks duration per client. To expect changes in client mental health and wellbeing within this time frame was unrealistic (even though a more demanding workshop schedule was originally suggested). In order to maximise the effectiveness of Creative Alternatives on the client, the period of access was extended to a period of up to six months programme membership; this timeframe was the best that project funding and client flow would allow. In practice, this period varies slightly according to the needs and support levels of each individual and is dependent on negotiation between the Creative Alternatives staff and the client. Client feedback suggests that six months membership may still be an insufficient length of time for the programme to impact on client recovery from depression and/or anxiety and that this should be increased to provide the option of a time extension should this be beneficial.

*“The only thing I can suggest to improve Creative Alternatives is to allow people to access it for longer. When you find something that is helpful, and you enjoy it and it’s useful to your emotional wellbeing then it’s a great shame to have to end.”*

### **Sefton's geography**

Sefton is a difficult borough to navigate as it spans 21 miles from Bootle in the south to Southport in the north and, in acknowledgement of its challenging geography, core workshops have been strategically sited to ensure that any workshop is within travelling distance for clients resident in any part of Sefton. Despite this, some clients still may travel up to five miles or further in order to attend specialist workshops that may involve navigating up to three trains/buses to reach their destination, resulting in travel time to and from the workshop location of up to 90 minutes duration. For many clients suffering with depression and anxiety, the issue of travel can be a major barrier to programme participation with some being too anxious to use public transport or drive to unfamiliar areas while others find the costs prohibitive. Clearly, the establishment of additional workshops in strategic locations such as Bootle or Maghull, areas where programme demand has been recorded, would be a solution to the issue of accessibility although one with substantial funding and staffing implications.

### **Venues**

The programme's core workshops are delivered from community multi-purpose buildings chosen for their many advantages including relative ease of accessibility and the availability of additional support services within the venue although they also suffer the drawbacks of lack of storage and display facilities and an absence of private areas during sessions. The workshop venue at Netherton Arts Centre, in spite of various structural issues, does offer a designated room for programme activity and was comprehensively redecorated by the officers to create a more welcoming and relaxing atmosphere. This space, being 'owned' by the programme, allows a permanent display space and small library of arts or mental health related books and leaflets. Unfortunately, the core workshops located in Formby and Southport, take place in spaces shared by the general public or other groups, which create restrictions on the ability to operate freely.

### **Core Workshop times**

As the programme has developed, the Arts Officer has attempted to make the workshops accessible for the majority of clients. Currently, all core workshops are delivered during weekdays with the timing of the workshops aimed at accommodating those taking children to and from school. Unfortunately, due to cost and staffing factors, Creative Alternatives has so far been unable to respond positively to requests for evening or weekend workshops in order to accommodate those in need of the service and currently in employment. Workshops are timed to offer the optimum opportunity to the greatest number and this, therefore, reflects the unemployed status of the majority of clients. The starting time of 10am for both Southport and Netherton workshops has presented difficulties for those clients who, as a consequence of their health problems, find morning activity problematic. Ongoing operations continually uncover difficulties, both minor and major, which could be overcome with ideal and secure funding levels but which are currently beyond the programme's capacity to influence and must therefore be merely noted rather than solved.

### **Core Workshop duration**

At the outset in 2007, all core workshops were of a two-hour duration. As clients reported that two hours were inadequate to settle into the workshop, plan their work and fully engage with the creative process, the Netherton and Formby sessions were increased to 2.5 hours although,

unfortunately, this extension was impossible to achieve for the Southport workshop due to restrictions on venue access.

### **Additional costs for clients**

There is currently no budgetary provision to support clients on low incomes with childcare or travel expenses and, as a consequence, this has resulted in a number being unable to participate in Creative Alternatives. An ability to address this issue would widen accessibility and further democratise the programme by ensuring that all those in need may benefit from its service, irrespective of personal financial circumstances.

### **Volunteering Scheme**

Creative Alternatives has received many requests by individuals wishing to volunteer their time to the programme. Requests have come from professionals in training, such as counsellors and occupational therapists, and from former clients. To date the programme has been unable to establish a volunteering scheme due to lack of staff and financial resources. It is felt that such a scheme would add value to the programme, providing opportunities for individuals to develop their skills, build their confidence and boost career options. The skills to establish a volunteering scheme already exist within the current staff team, the Referral Officer having extensive experience from working with Sefton Volunteer Centre.

### **Additional Health Promotion**

On occasion, clients have requested that additional health related services be available through Creative Alternatives with suggestions including workshops on such issues as alcohol awareness, confidence building, self-help techniques for anxiety or depression and healthy diets. Although this service is offered on a one-to-one basis, it is felt that group workshops led by experienced facilitators would be of tangible benefit to clients should appropriate funds be made available. Given the nature of its service users, Creative Alternatives is well placed to deliver a range of health messages to a receptive audience within familiar venues, a development warranting closer consideration from NHS Sefton.

### **Cost-Effectiveness**

While the culture of targets measuring impact and value for money is now central to the provision of public services, Creative Alternatives has found the financial value aspect the most problematic as detailed cost saving comparisons of arts provision against standard medical care is difficult, if not impossible, to provide. To deliver an accurate and scientifically-valid comparison would require double blind trials on each patient within a client group and a control group and, to date, no research project has been established to conduct research on such a basis. Research on this scale, which would also have carried complex practical and ethical implications, was beyond the remit of Creative Alternatives as outlined within the implementation plan tied to original Invest To Save funding.

At present, Creative Alternatives service costs are comparable to costs incurred for standard counselling and psychotherapy treatments available through NHS Sefton and Mersey Care. With an annual operational budget of £70,000 and an average of 78 clients per year, Creative Alternatives

currently costs £897 per person (based on a total of 196 clients over 2 ½ years, at September 2009). Included in this cost are:

- ✓ Twenty-five core workshop sessions over approximately six months.
- ✓ An unlimited number of outings (continues after formal programme engagement).
- ✓ An unlimited number of specialist workshops (continues after formal programme engagement).
- ✓ Additional creative opportunities (e.g. in 2009 clients formed a curator team for the programme's 'Creative Re-awakenings' exhibition).
- ✓ Personal psychological and practical support via telephone, email and meetings with the Referral & Arts Officers.
- ✓ Sign posting to other psychological services and creative opportunities in the local area.
- ✓ A home activity pack provided upon exit from Creative Alternatives.

This cost calculation does not take into account the additional support offered by the Referral Officer to those with programme enquiries but not ultimately joining the programme (a total of 130 individuals at September 2009).

The aims of Creative Alternatives are not focused exclusively around questions of financial value, economic gain or losses but rather centre on personal and cultural value. In line with this, the UK government's current rationale is changing and reflects research conducted by the independent *centre for well-being* at **nef** (the new economics foundation: [www.neweconomics.org](http://www.neweconomics.org))<sup>2</sup> which steers away from direct cost comparisons in favour of action-based research which takes into consideration the "important drivers of mental capital and well-being" (Aked et al, 2008, p. 1).<sup>3</sup> Such research develops "a long-term vision for maximising mental capital and well-being in the UK for the benefits of society and the individual" (ibid). The research highlights the importance of mental capital in economic considerations. The latest report from nef's *2008 Mental Capital and Wellbeing Project* (ibid) identifies five key actions that enhance general wellbeing and mental functioning and, accordingly, develop the mental capital of the population. The identified actions revolve around the themes of strong social relationships, increased physical activity, enhanced awareness, the promotion of learning and the importance of sharing and giving to others. Creative Alternatives' programming firmly centres around, and promotes, the identified five key actions.

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<sup>2</sup> "nef is an independent think-and-do tank that inspires and demonstrates real economic well-being. The centre for well-being aims to promote the concept of well-being as a legitimate and useful aim of policy and to provide people with the understanding and tools to redefine wealth in terms of well-being" (Aked et al, 2008, p. 1).

<sup>3</sup> Full access at: [http://www.neweconomics.org/gen/z\\_sys\\_publicationdetail.aspx?pid=265](http://www.neweconomics.org/gen/z_sys_publicationdetail.aspx?pid=265)

### **Future Funding of Creative Alternatives**

The three years of Creative Alternatives funding from Invest To Save concluded in September 2009. At this point, NHS Sefton offered financial support of £30,000 that, with the addition of £10,000 from Sefton MBC's arts service, allowed the programme to continue normal operations until the end of March 2010. NHS Sefton has now agreed to an annual award of £20,000 from the Mental Health Inequalities Fund until at least 2012. Creative Alternatives enjoys the continued support, assistance and management provided by Sefton MBC and plans are well advanced for Sefton's arts service to commit additional funds to ensure the programme's survival in some form. While, under Invest To Save funding conditions, Creative Alternatives operated within a minimum budget of £70,000 a year, the uncertainty of future funding levels and the possibility of a budget reduction would severely jeopardise programme effectiveness at a time of unprecedented demand. This would result in a scaling down of activity and a possible dismantling of certain programme services that would have a corresponding negative impact on capacity. Programme staff, Sefton PCT and Sefton MBC are currently exploring funding options for the period beyond March 2010.

#### **Summary of recommendations for programme expansion and improvement:**

- ✓ Additional member of staff to support the Referral and Arts Officers
- ✓ Increased Arts Officer time
- ✓ Staff support (clinical supervision)
- ✓ Additional core workshops (in a new area of Sefton and held during weekends or evenings)
- ✓ Increased length of client involvement
- ✓ Fund for low income clients
- ✓ Volunteering scheme
- ✓ Health promotion workshops

*"I hope Creative Alternatives continues. The organisers and artists are wonderful people who give you hope and inspire you. Many, many more people should have the benefit of better health through the staff and courses of Creative Alternatives".*

## Conclusion

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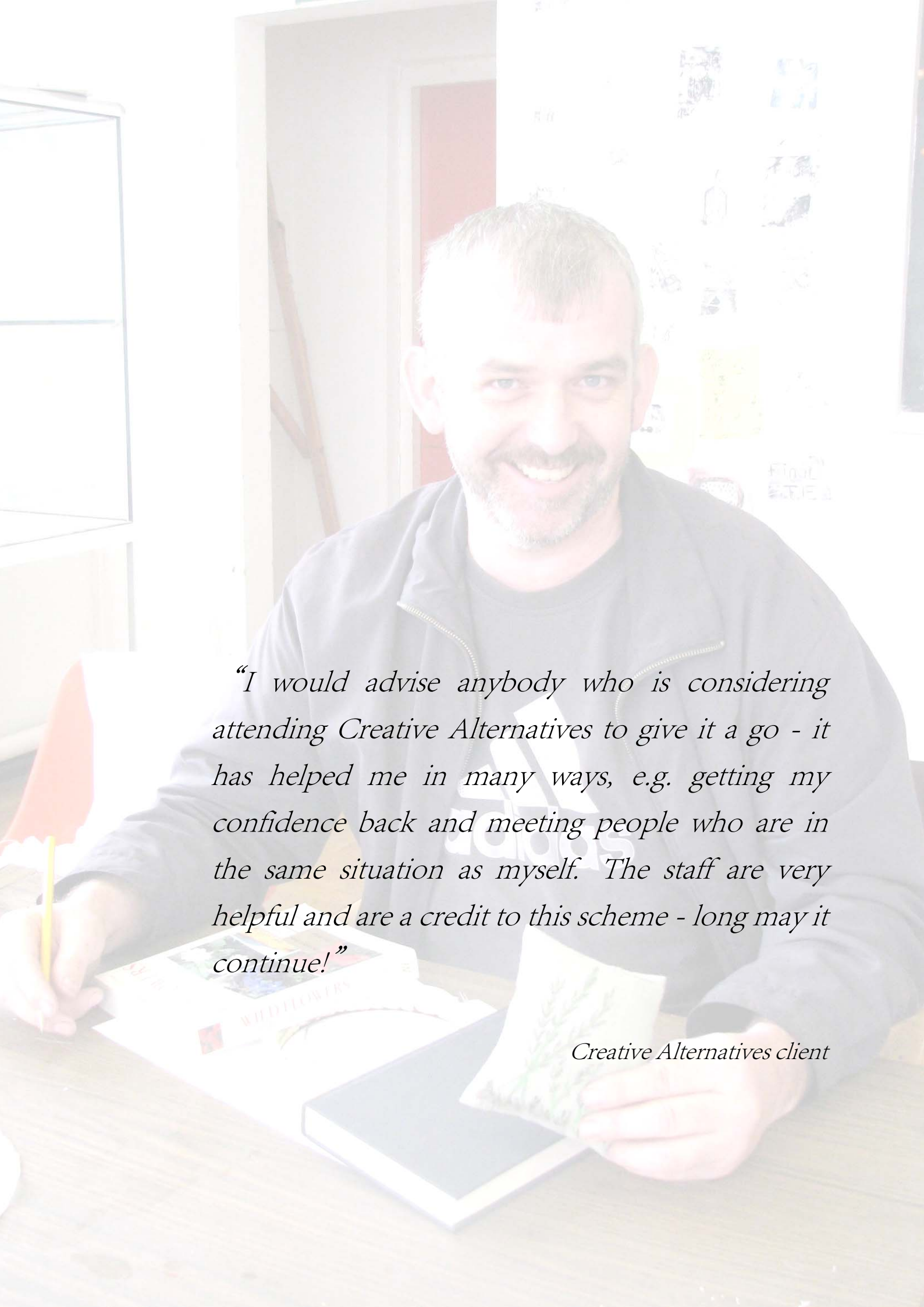
Under the terms of the Invest To Save implementation plan, Creative Alternatives has succeeded, and in some instances surpassed, its core objectives with many more clients benefiting from programme access than originally targeted. The extensive and wide-ranging data collated over three years demonstrates a positive impact on a range of health indices, not only in relation to mental well-being but also on diet, physical activity, smoking, alcohol consumption, overall health and social interaction. While the influence of Creative Alternatives interventions on Benzodiazepine-related clients proved impossible to quantify, the success of the programme in other areas of healthcare exceeded expectations with the link between programme activity and the measured health benefits to clients proving convincing and impossible to ignore.

All existing client data, combined with the experiences of staff gained over the lifetime of Creative Alternatives development and operations, has resulted in an evidence base which points to the expansion of programming to enable the participation of those in work, the housebound or those experiencing childcare or financial issues. It is felt that, with the programme now operating at capacity, the scope for any expansion or even a consolidation of existing services is impossible without further sustained investment. The structure of Creative Alternatives has evolved tentatively over a prolonged period to ensure that its systems and programmes were deliverable, effective, responsive and operationally tested. This gradual evolution has been within the security of a three year budget which ensured that programme operations at current levels have reached the most rigorous standard possible. The programme's success and thoroughness has, paradoxically, also served to identify those areas open to greatest potential development should further and increased investment be achieved. Clearly, any reduction in current funding levels must bring a corresponding contraction from current programme provision, leading to a less ambitious and effective service for fewer clients. The data contained in this report captures programme outcomes over the past three years under current budgetary conditions and these outcomes will rise or fall in relation to greater or lesser future funding commitments.

The life-cycle of Creative Alternatives has seen a strengthening of the strategic partnership between the triumvirate of Sefton MBC, Sefton PCT and the operational team. This partnership reflects recognition of the value and validity of an arts programme embedded within a Social Prescribing network and the growing importance of the arts as a tool for the delivery of a range of healthcare goals. Sefton MBC also acknowledges the role of Creative Alternatives in contributing towards both its corporate and Leisure Services objectives.

The ongoing challenge to Creative Alternatives in the future will be one of matching increasing client expectations to the programmes capacity to deliver, based on whatever available budget may be sourced during universally testing and competitive times for the financing of public services.

Elizabeth Lovell, Creative Alternatives Referral Officer  
Jessica Bockler, Creative Alternatives Arts Officer  
December 2009



*“I would advise anybody who is considering attending Creative Alternatives to give it a go - it has helped me in many ways, e.g. getting my confidence back and meeting people who are in the same situation as myself. The staff are very helpful and are a credit to this scheme - long may it continue!”*

*Creative Alternatives client*

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