This is a version of the paper first given at *The Art of Good Health and Wellbeing, an International Conference in Arts and Health* in Port Macquarie, Australia on Friday 13th November 2009.

**The Arts, Popular Culture and Inequalities**

A few months ago, an exhibition in the English city of Bristol closed, having seen the highest number of visitors it had ever achieved. It ran for 12 weeks and had around 4,000 visitors a day, over 315,000 in total. This matched the museum’s annual turnover in just 12 weeks. Voluntary donations to the museum were generous, reaching in excess of £45,000 – nearly four times the annual amount. Bristol Museum itself employed an extra 30 temporary staff to work over the three-month period. More than that, the effect of people coming into the city brought an extra £10 million into the local economy.¹

The work in question was that of the graffiti artist Banksy and whilst he certainly got the popular vote in the UK, some art critics were keen to point and jeer. But who is it that the critics are really attacking? The plumb-voiced English art critic Brian Sewell typifies this.

"The two words 'graffiti' and 'art' should never be put together...the public doesn't know good from bad... It doesn't matter if they [the public] like it. It will result in a proliferation of entirely random decoration, for want of a better word."²

My opinion on the merits of Banksy are beside the point. What I am interested in, is how the media and its self-styled critics report on contemporary work in a way that divides, a way designed to sell papers and in fact a way I believe, that negatively influences public opinions and reinforces stereotypes.
This has created appetites for sensation that have furthered social 
divisions and perhaps made the arts more impenetrable and exclusive. 
There are vast swathes of people who think the arts aren’t for them. And if 
the tabloids are so quick to react to art that challenges and provokes, 
how on earth can this arts and health agenda survive any red-top, tabloid 
onslaught?

The front cover of the UK tabloid; the SUN in October 2005, ran a banner 
headline that read; ‘Taking the Picasso, £9m NHS art bill’. This exclusive 
story went on to describe how, ‘barmy health bosses have blown an 
incredible £9 million on hospital art in just two years.’ Well, I think we all 
know that this story was inflated hokum designed to sell newspapers and 
cause a stir. And you know what; it worked!

This was the same period when the Department of Health and Arts 
Council England were both showing a real interest in the transformative 
power of the arts and two national strategic documents were in the 
offing. In 2007 the Prospectus for Arts and Health and Arts Council 
England's Framework were both published, but were launched with 
something of a whimper considering the expectations form the 
communities of interest.

And why was this? Because the ministers and civil servants behind this 
work were scared to go public; scared to expose themselves to the 
spotlight of tabloid journalism and perhaps, just that little bit scared of 
engaging in public debate. Well the story told by the SUN was lazy 
journalism, appealing to the lowest common denominator but striking 
terror at the hearts of media conscious politicians.
The following year that the ‘Picasso’ headline hit the press, Josie Aston in her very useful Arts in Hospital: Handling the Media provided us with a useful rebuttal to unsubstantiated claims of NHS overspending, commenting that;

‘…very little NHS money is spent on arts projects. Instead the money is raised from grants and donations from business, charities and the public. Even if this were not the case, the figure of £9 million spent on the arts….quoted in the media is tiny compared with the overall NHS budget, which is projected to reach £90 billion by 2008; in fact it’s less than 1/10,000th of one percent.’

Josie Aston’s publication was timely, useful for people working in health settings concerned with public art and clearly written. But it felt very much like a document that was taking a reactive stance, something produced in response to the furor of the previous year.

And of course, media criticism isn’t solely confined to the commissioning of the arts in hospitals. Four months after this advice on handling the media was published, the SUN launched another attack on arts/health spending, with another lame and ill conceived header; ‘Be Lard of the Dance on the NHS.’ It claimed, ‘Health bosses are hoping overweight people will lose excess lard by learning to dance on the NHS. Under a new Government fitness drive, TAXPAYERS will fork out for Britons to go on a range of free exercise regimes.’ This article was describing a government investment in referrals to activity, to motivate people to take exercise, enjoy dance, discover new opportunities; and we all know the benefits of taking part in community activity and it’s not just the potential of losing weight, but improving peoples sense of well being and connectedness.
And for once, in promoting this work, the Department of Health, were tapping into popular culture and the impact of ‘reality TV’ where; we, the public, get to vote for our favourites. The series Strictly Come Dancing, was very much the motivating factor behind this drive and with upwards of ten million people watching the show each week in the UK and over twenty million watching the shows final, (almost a third of the population of the UK) the reach of these programmes and of popular culture, is huge.\(^7\)

Across the globe, organisations interested in tackling health, social and environmental issues are harnessing the potential of the media. And a good example of this is Breakthrough TV, an innovative, human rights organization using the power of popular culture, the media and community education to transform public attitudes and advance equality, justice, and dignity. Through initiatives in India and the United States, Breakthrough TV addresses critical global issues including violence against women, sexuality and HIV/AIDS, racial justice, and immigrant rights. Bell Bajao, or the Ring the Bell project is Breakthrough’s newest campaign, asking men and boys to contribute to bringing domestic violence to a halt. \(^8\) Through the television, cinema adverts and the internet, this very short, but powerful film has been seen by over 124 million people and I guess the challenge for Breakthrough is to find out how that’s impacting on the lives of the women it targets.

Perhaps nowhere more poignantly has the potency and reach of popular culture been illustrated as a vehicle for raising awareness, than in the increase in breast screening following Kylie Minogue’s diagnosis of breast cancer.
An article on Medicine and the Media in the Medical Journal of Australia, (2005), unpicked the impact of celebrity illness on breast cancer screening, and concluded that:

‘There was a 20-fold increase in news coverage of breast cancer, which emphasised that young women do get breast cancer and that early detection was critical. Overall screening bookings rose 40% in the 2 weeks of the publicity, with a 101% increase in non-screened women in the eligible age-group 40–69 years. Six weeks after the publicity, bookings remained more than a third higher in non-screened women.’

The summary of this report suggests that health advocates should develop anticipatory strategies for responding to news coverage of celebrity illness.

In the UK over the last few years, a similar story has been rolled out, covered by most of the daily newspapers, but again particularly the SUN. This concerned the ‘reality TV’ celebrity, Jade Goody; one-time Big Brother contestant and vilified for her racist comments, for which the SUN described her in shockingly vitriolic and pejorative terms. Following her subsequent diagnosis of cervical cancer, treatment and youthful death, the same paper offered virtual beatification.

Whilst she was in Big Brother the Sun columnist Dominic Mohan in 2002, wrote some truly repellant features, including: ‘The pig with the biggest mouth on TV has finally been nominated for eviction and now YOU have the power to roast her.’ By February 2009, the same paper was running a daily update on her health status as she died very publicly under the banner of Our Brave Jade.
It’s worth noting that the columnist Dominic Mohan who was responsible for some of the most inflammatory Jade Goody articles, went on to become the editor of the SUN, the UK’s biggest selling newspaper and part of the News Corporation portfolio. Interestingly, the National Literacy Trust tells us that, ‘16% of adults in England have literacy below Level 1 (Level 1 literacy being the equivalent to 5 GCSEs at grade D-G.) This does not necessarily mean that they cannot read. However, they may give up on anything not written as simply as a tabloid newspaper or magazine.’

The power of the tabloids therefore, cannot be underestimated.

Like the ‘Kylie effect’ the impact of Jade Goody’s death played out in the popular press has had a visible impact on cervical screening in the UK.

The UK report, Cervical Screening Programme, England 08 – 09, shows a downward trend in the screening of women aged 25 to 64 was reversed dramatically last year, with an extra 400,000 having the check in 2008-09, according to the NHS Information Centre. The increase was particularly pronounced in young women.

Following the reports publication, Secretary of State for Health Andy Burnham commented, “These figures show the quite remarkable effect Jade’s tragic case has had in reversing a downward trend in the number of young women attending cervical screening.”

I’d like to share something of the work of the educationalist and public health pioneer Mark Burns, who in his report, Sex and Drugs and Rock & Health explores the potential of popular culture and social marketing, based on real conversations and the real passions of communities he engages with.
Burns is a health professional with a nose for engagement and he understands that by harnessing the passions and interests of marginalized communities, you can develop real and meaningful dialogue. In this expansive and outward looking report he provides some wonderful examples of grass roots activity.

By utilising the things of everyday life like the cinema, newspapers, stand-up comedy, football, pubs and bingo; Burns opens up a whole palette of potential engagement tools for those of us concerned with health inequalities.

He cites public health workers in Mexico who have used light romantic fiction as a vehicle for tackling the thorny health issues associated with prostitution, whereby writers and sex workers devised plots and characters for novellas that would enable the women to develop dialogue to use with clients who were pressurising them to practice unsafe sex.

And this use of genres like romantic fiction is shrewd. In the USA alone in 2004, romantic fiction generated $1.2 billion in sales and in the same year accounted for 54.9% of all fiction sold in the states, read by over 64 million Americans and typically sold through outlets like Wal-Mart.\textsuperscript{15}

In the UK Burns describes the work of Dr Foster Intelligence, an organisation bridging professional and public access to health and social care information, who tap into the very culture of the lifestyle magazine, with glossy publications targeted at specific groups and available for free from major retail outlets.
Magazines like ‘Your Life’ aimed at 18-35’s, ‘Fit’ for men and ‘Prime’ for women over 40, all tap into that ‘Hello’ style branding of popular culture. The national pilot of Your Life! was evaluated using in-depth interviews. This found that;

- 90% of readers liked the magazine and found it accessible
- 86% found the information it contained useful or very useful
- 67% said they had already changed their behavior as a result of reading the magazine or planned to do so

Among these 67%, the most popular behavioral changes were:

- Improved diet/weight loss (60%)
- Increased exercise (40%)
- Stopped smoking (25%) \(^{16}\)

And thinking about the way messages are communicated need not be confined to working with community groups. Burn’s gives the example of an annual public health report published in Wales. Bethan’s Story was produced by Dr Peter Donnelly, the Director of Public Health in the form of a paperback novel, which essentially followed the life of 15 year old Bethan, a fictional character whose brushes with local health services were used as lead-ins for factual information, including Bethan getting pregnant by her drug-abusing boyfriend, whilst her father is involved in a tanker accident. Like a bad soap opera storyline perhaps, but it had a major impact; people actually wanted to read it.

In Sex & Drugs & Rock & Health, Burns call’s for us to adapt some of the tools of the commercial world and he makes some sound observations. In particular his adaptation of the advertising and marketing conceptual model AIDA, is one that he utilizes plausibly.
He gives the example of using a music event as a vehicle for delivering a health message.

- **Get Attention**
  ‘That band’s playing a song I like. I think I’ll check this out’

- **Hold Interest**
  ‘They’re performing a musical about teenage pregnancy. It’s quite moving and relevant to my worries about my daughter’

- **Arouse Desire**
  ‘I really don’t want us to end up in the same situation as the people in the musical. I’ve left sorting this out too long.’ (Suggests a feeling state but could be intellectual too.)

- **Obtain Action**
  ‘I’m going to talk to the health workers by the side of the stage, about my daughter.’

The key to everything Mark Burns raises seems to me to be about working with the very human resources, interests and passions of the communities in question. This might be on an inner city housing project, or equally be in a country torn apart by way, much in the way that Breakthrough TV or WAR CHILD work.

So here’s the picture so far; there’s a history of skepticism towards the arts in the popular press; this is magnified when there’s the chance of a good story, so spending on the arts in health contexts is seen as a scandalous waste of ‘tax payers’ money, and yet the media have the power to influence opinions and change behaviors and we have the imagination to harness what we need from popular culture. Now let’s throw into the mix, the global economic downturn.
In the current climate I can see how arts organisations might be a little fearful of where their next pay-cheque’s coming from. Yet I’ve already described the impact that Banksy has had on the economy during this period of recession, so we know there are some economic arguments out there.

But where to now, and how do we stand tall and convince the world that the arts have something to offer? And is it really in economic terms that we should be ‘measuring’ the value of arts and health?

I want to be honest with you; if I were an outsider to this movement, I’m not entirely sure I’d be convinced by the argument for arts and health.

Those of us here in working in this field are positively evangelical about our work. It’s a passion and a way of life for us. But let’s say you’re the parent of a seriously ill child in hospital; your priority is for your child to get the best treatment in the most caring environment. And if you were a single parent, coping with drugs problems, not sure who your friends were and feeling guilty about the child who looks after you when your ill…this arts and health agenda might seem a million miles away from your experience of life.

The place of the arts in education; in prisons; as a means for humanising health environments and all the potential for reducing inpatient times; medication and quality of services is well known. Researchers like Roger Ulrich have taken this agenda a long way in our understanding of the instrumental benefits of the arts.
But when we talk about health services, I think in general terms we’re talking about services that support us when we’re unwell and all those services are inevitably geared up to sickness and crisis; put simply it’s a deficit model, focused on morbidity and ill-health and of measuring as Bobby Kennedy so eloquently put it, ‘everything in short, except that which makes life worthwhile.’

Between 2005 and 2008 the World Health Organisation gathered international evidence on the social determinants of health from policy makers and specialists form around the world. Last year they published their findings in the report; Social Determinants of Health, Closing the Gap in a Generation. The report set out to scrutinize growing levels of inequity in global health and make recommendations for action that included an express need for practical, accessible research through expanded knowledge networks.

This report is something that got the attention of the editors of the forthcoming issue of Arts & Health An International Journal for Research, Policy and Practice who shake their heads at the lack of citation for the arts and health movement in the report commenting in their editorial that;

‘Throughout this entire process it would appear that no-one anywhere made a sufficiently compelling case for the value of the arts in improving health and addressing health inequalities. Not even a single case-study on the value of engagement in music, dance, literature or the visual arts for health and wellbeing, appears in the final report.’
The authors go on to reflect that searching for cultural and artistic activity, perhaps wasn’t at the forefront of the WHO agenda when faced with inequalities on a global scale, but then as part of their canon of evidence, go on to cite the place of the singer Annie Lennox crooning with the Agape Choir to Nelson Mandela on his 90th birthday as some kind of pinnacle of arts and health achievement.

In its call for examples of arts that impact on inequalities, this editorial does cite some well known examples, making brief reference to the work of the late Augusto Boal; more of whom in a moment.

I’d suggest that if the arts sector is going to have a meaningful dialogue with global policy makers, we start by understanding our area of interest in relationship to inequalities, but in a way that is meaningful and expansive. Let me explain.

My initial thoughts about inequalities were that everything must relate to poverty, but I think it’s more than poverty itself; it’s about the distance in between people who live cheek by jowl next to each other with such disparity in life and aspiration. I have 3 children and although they have all the trappings of juvenile material wealth; an Xbox, mobile phones and laptops, it’s harder for my Arsenal supporting 13-year-old son to find somewhere he’s allowed to play football. Communal spaces seem in very short supply.

It’s been very easy to see how all of us have been sucked into conspicuous consumption, and of course, people on lower incomes have been encouraged to be jealous of those on perverse amounts of money.
And we all know the impact this can have on us, financially by driving us to enviously, mimic the lifestyles of those the media tell us are exemplars of taste, or just by eroding our feelings of self worth.

The inequality gap is one that has clearly deepened under the market triumphalism of the last few decades, and I don't want us to think we should just judge our arts and cultural success’ by economic measurements...look where cost-benefit-analysis culture has got us. I think if we want to move away from the deficit model that I’ve alluded to, we have a real trump card in this arts/health movement and one that isn’t just some kind of palliative add-on to health services. Let me explain.

In his enlightening and timely book, Arts Development in Community Health, A Social Tonic, Mike White gives a lovely anecdote of his meeting with health educationalist Michael Wilson, who describes the hierarchical ‘war’ model of medicine geared to crisis intervention verses the ‘peace’ model of health in the community. Wilson commented; ‘I am loath to think of health education work as medicine. It is part of a peace culture, and this development with the arts, gives it a new face.’

Whether we choose a combative approach against deficit and illness, or embrace Wilson’s gentler ideology, I think the arts might just offer us a way of shifting the way we look at inequalities across the board, from a deficits model to an assets model. What we need to do, is refocus on the untapped wealth of our arts and cultural assets as part of a global collective enquiry.
There’s been an assumption as markets have crashed, and our TV and newspaper reports have been filled with stories of big business and political corruption, that humans are just greedy, competitive and Machiavellian, but we do have another capacity as humans too; for co-operation, learning, sharing, friendship and for love.

Perhaps this fundamental characteristic has been squashed, by our media-fuelled, unachievable aspirations.

Central to everything I believe, is that the arts have the potency to heal some of the damage that inequality brings and question some of the causes. I want to quote from a wonderful book I’ve just read called, The Spirit Level;

‘…the quality of social relationships has always been crucial to well-being, determining whether people are feared rivals or vital sources of security, co-operation and support. So important are these dimensions of social life, that lack of friends and low social status are among the most important sources of chronic stress affecting the health of populations in rich countries today.’ 22

Now I think that a lot of the arts/health work we hear about, has some very similar and strong, shared characteristics. Perhaps we can discuss what these are, but I’m guessing that you’re all rightly proud, not only of the art produced within your settings, but of the relationships formed in your social spaces. The friendships and aspirations developed over time through your practice.
And enterprising models of participatory, community practice offer us something profound and yet very basic. Through their activity, of arts and creative engagement, often over food, or better still growing it; they offer co-operation, mutuality and friendship...a real contribution to the growth of civic good and a sense of place. The thing more broadly described as social capital.

After I finished the Invest to Save Project, a three-year piece of research that I began disseminating in 2007; I was struck by one thing. Regardless of all the measurement tools and surveys we used to understand the impact of the arts, the one overriding message driven home to me, was that participation in the arts enable this synergy and focus to happen and contributes beyond doubt, to improved wellbeing.

I hope that what I’m talking about resonates with you and doesn’t seem too utopian. I believe that through meeting, discussing and critiquing this practice, we can nurture a sustained sense of direction through our aspirations, vision and practice.

In their wonderful book that I cited earlier, The Spirit Level; Richard Wilkinson and Kate Pickett offer one of the most concise overviews of where consumerism and inequalities across societies have left us; but they do it with such a punch.

Their global sifting of the facts paint a picture of dominant unequal societies, typically the USA and the UK where dissatisfaction is rife, mental illness endemic, obesity, teenage pregnancy and substance abuse have taken hold; life expectancy is affected and there is no sense of communal civic society.
But this is tempered by lessons learnt from more equal societies and concludes with a not unrealistic vision of what a more equal society might look like. It’s not uncomfortable to imagine how our arts practice sits within the social enterprise model.

In his Reith Lectures for the BBC in 2009 Michael Sandel, Harvard Professor of Government, echoes this theme and invites us to think of ourselves, less as consumers and more as citizens, and argues for politics of the common good where commodities of community, solidarity and trust are not commodities that deplete with use, like our finite environmental or economic resources, but are more like muscles, that grow stronger with exercise.24

The late Brazilian cultural activist Augusto Boal might teach us a thing or two about this through his revolutionary approach to the arts, and not explicitly focused on health, but passionate about equity.

In his seminal book, Theatre of the Oppressed25 Boal argued that mainstream theatre was an instrument of ruling-class control, aimed at sedating the audience, but which also showed how the dramatic arts could be used as a weapon, turning the spectator into an actor, the oppressed into revolutionaries. Tortured, imprisoned and exiled for his work by a military dictatorship, when he returned to Brazil after their downfall, he was elected to Rio’s city council and turned some of the techniques he’d devised to encourage audiences participation, into a way of making popular laws. He called this legislative theatre. Unlike the dogmatic political theatre of the 1960s, which told people what to do, this new approach asked people what they wanted and encouraged them to exercise their communal and civic muscles.
Politics in the UK seem to have lost any sense of vision for a better society; everyone seems to be bettering their own material positions, as individuals. And this is best typified by the recent MP’s expenses scandal in the UK where feathering their nests, takes on a whole new meaning with expenses claimed for cleaning out the moat and the construction of a £1,675 floating duck house.

Over the past 3 decades, market forces have been the governing philosophy of how we live our lives, and over the last 12 months we’ve seen how monetarism and imposing market values on all elements of human life has terrible consequences. The impact of mental illness in dominant, unequal societies offer some stark financial facts, with doctors in England in 2005 writing 29 million prescriptions for anti-depressant drugs, costing over £400 million to the NHS 26 and in 2003, the USA spent more than $100 billion on mental health treatments. 27

It’s refreshing to see that Barack Obama has capped the earnings of some fat-cats in the USA to $150,000 per year, which for some has been a drop of 90% of their salaries, whilst at the same time in the UK, English artist Tracey Emin has started bleating about moving to France because of the 50% tax rate for people exceeding £150,000 income per year. Perhaps those doyens of the Brit Art movement like Damian Hirst and Tracey Emin, really reflect an ‘art market’ that doesn’t have anything to do with day-to-day-life and in fact reflects wider consumerism and inequalities within the art world itself. I’d like to encourage them to get out of their gated celebrity-communities and think about their work in relationship to civic society.

At the start of this paper I questioned who it was the art critic Brian Sewell was attacking: the artist and his lack of talent, or the public and its lack of
Regardless of how progressive we feel as societies, matters of taste and class still pervade and keep us all in our places. With highbrow equating to being cultured and lowbrow to whatever is popular. French sociologist Pierre Bourdieu in the 1960’s found that whilst the ‘upper classes’ preferred abstract art and experimental novels, the ‘lower classes’ liked representational pictures and a good plot, but if everyone starts to enjoy Bach, Picasso and James Joyce, the ‘upper class’ taste will shift to something new – elitism is maintained by shifting the boundaries.  

I’d like to close, by thinking again about the reach of the ‘low-brow’ popularist art of Banksy, and focus less on the economic impact of his work and more on his intention as a cultural activist and perhaps how his work may contribute to levelling this high brow/low brow stereotype. In preparing for this paper, I came across two interesting websites. The first was an argument I stumbled upon between a design critic Nathan Edelson and web designer and co-founder of the website Electric Intifada, Nigel Parry.  

Edelson had contacted Parry about the then proposed building of a security fence (segregation wall) around much of the occupied Palestinian territories in the west bank.  

I’m sure you’re all familiar with this wall, which stands at three times the height of the Berlin wall, will eventually run for 700 kilometres and which the ‘International Court of Justice in 2004 has ruled as illegal. It essentially turns Palestine into the world’s largest open-air prison.'
Edelson, Parry alleged, was suggesting that if the authorities were going to build this wall, that it should at least be aesthetic, after all, why build a monstrosity?

Parry responded that this was ‘like arguing for nice a faux painting on gas chamber walls’ and questioned Edelson’s ethics, who replied that thinking about the design of the wall, might just make a bad thing better. Parry and Edelman sparred, with Parry branding Edelman ‘the man who came up with the wonderful solution to a century of conflict: simply paint the cage a new color and watch the prisoners dance.’

I think you can get the gist of this argument. How on earth can you do anything aesthetically to the wall, how can you make it benign? How can you even think about segregation in aesthetic terms?

The second website I’d discovered, was Banksy’s own, which until January 2008, only included his manifesto, which was in fact an extract from the diary of Lieutenant Colonel Mervin Willett Gonin who was amongst the first British soldiers to arrive at the Nazi death camp Bergen-Belsen, liberated in April 1945.

This diary account is graphic and heartbreaking and tells of the soldiers’ horror of witnessing the disease and protracted deaths of people remaining at the camp. He tells the story of the arrival on the camp of large consignment of lipstick, when what was really needed was the basics, of medicine and food. However, his views on this soon changed, and I quote;
'I wish so much that I could discover who did it, it was the action of genius, sheer unadulterated brilliance. I believe nothing did more for those internees than the lipstick. Women lay in bed with no sheets and no nightie but with scarlet red lips, you saw them wandering about with nothing but a blanket over their shoulders, but with scarlet red lips... At last someone had done something to make them individuals again; they were someone; no longer merely the number tattooed on the arm. At last they could take an interest in their appearance. That lipstick started to give them back their humanity.'

What on earth is the connection between these two stories you may well ask? Well, Banksy in fact paid a visit to the West Bank and without permission of the powers that be, began to cover sections of the 'security fence' with his graffiti.

As Nigel Parry points out, "Much of the art Banksy produced on the wall visually subverts and draws attention to its nature as a barrier by incorporating images of escape ... Other pieces invoke a virtual reality that underlines the negation of humanity that the barrier represents ... reclaiming public spaces as a space for imagination and enlightenment where they have become propagandistic barriers to thought and awareness... Banksy's summer project on Israel's wall stands out as one of the most pertinent artistic and political commentaries in recent memory." 

Perhaps then, Banksy’s work may offer a little more than the ‘random decoration’ that Brian Sewell suggests and continues in the line of artistic provocation and subversion as an expression of democracy.
I suggest that the arts offer both a way of making sense of this world and our experience of being human, but more than that, through the passions of each and every one of us, we have the resources and imagination to refocus on what really matters.

I feel that we are at a turning point in this arts and health journey and should be mindful to see that our work isn't ghettoized into a narrow sickness silo, but critically engages with democracy and wider civic society.

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Notes

1 This is Bristol website accessed October 2009
   http://www.thisisbristol.co.uk/homepage/Banksy-exhibition-puts-163-10m-Bristol-s-
   economy/article-1300048-detail/article.html

2 Davies, Caroline in the Guardian, 31st August 2009

3 Cecil, Nick; The Sun, October 26th 2005

4 A Prospectus for Arts and Health

5 Aston, Josie; Arts in Hospital: Handling the Media, August 2006
   www.publicartonline.org.uk/bibliography/healthcare/ArtsInHospitalMediaGuideFINAL.pdf

6 Lea, Michael, The Sun 4th December 2006

7 www.timesonline.co.uk/tol/news/uk/article767702.ece

8 www.breathrough.tv/

9 Chapman, Simon et al in Medicine and the Media, MJA, Volume 183, Number 5, 5 September 2005

10 Mohan, Dominic; The Sun, 3rd July 2002
    www.thesun.co.uk/sol/homepage/showbiz/bizarre/article185055.ece

11 Burns, Mark; Sex and Drugs and Rock and Health, January 2008; cites,
    Literacy In The Information Age - Final Report Of The International Adult
    Literacy Survey


13 www.timesonline.co.uk/tol/life_and_style/health/article6885658.ece

14 Burns, Mark: Sex and Drugs and Rock and Health, January 2008
    www.sexanddrugsandrockandhealth.com/userimages/newPCsection1Summaryetc.pdf

15 www.rwanational.org/galleries/default-file/05MarketResearch.pdf

16 Burns op cit

17 Burns op cit

18 Robert Kennedy RFK, speaking at the University of Kansas, Lawrence


23 Invest to Save: Arts in Health Evaluation, Manchester Metropolitan University, 2007; ISBN 1 900756 48 X

24 Sandel, Michael, The BBC Reith Lectures 2009  
   www.bbc.co.uk/programmes/b00lb6bt

25 Boal, Augusto, Urizen, 1979

26 Hansard. Written answers to questions, (2005) 439:22 Nov. 2005: Column 1798w


28 Wilkinson, op cit

29 Parry, Nigel at Electric Intefada 2nd September, 2005  
   http://electronicintifada.net/v2/article4153.shtml

30 Parry, op cit

31 Parry, op cit

32 www.banksy.co.uk

33 Parry, op cit