

Institution: University College London

Unit of Assessment: 17A – Geography, Environmental Studies & Archaeology: Archaeology

Title of case study: Healing Heritage: Facilitating and evaluating the impact of museums and museum encounters on health and wellbeing

1. Summary of the impact (indicative maximum 100 words)

Healing Heritage is a research programme led by Helen Chatterjee and focused on exploring the unique role of museums in improving mental and physical health, reducing social isolation and building social capital. It has had impacts on: 1) patients in healthcare settings, residents of care homes and disability/mental health service users who have demonstrated improved wellbeing; 2) museum practitioners and volunteers in museum settings whose skills have been enhanced; and 3) museums and healthcare professionals whose understanding of the benefits of this partnership has been expanded.

2. Underpinning research (indicative maximum 500 words)

The Healing Heritage research programme led by Helen Chatterjee (Lecturer since 2004 and Senior Lecturer since 2009) emerged from earlier work by Chatterjee at UCL on museum object handling, the importance of touch for museum audiences, and public access to collections. This included a series of research council-funded workshops in 2006–7, which brought together academics, museum professionals, volunteering organisations and members of the public to examine the role of touch in museums as a social intervention tool. The resulting volume, *Touch in Museums* (2008), edited by Chatterjee, explored different contexts for object handling, not only within museums but importantly extended to the wider community, including hospitals and schools.

A significant insight arising from this work was the therapeutic potential of museums, and the potential health and wellbeing benefits of encounters with museums and their collections. Despite the existence of a significant body of work relating to the role of arts in health, this novel area of research had been largely unexplored. A key aspect of UCL research in this field was to integrate rigorous, evidence-based techniques derived from standardised quality of life and wellbeing measures developed for health research. These have been used alongside qualitative techniques in a mixed methods approach to evaluating the benefits of museum encounters in healthcare.

To this end, Chatterjee led an investigation of the role of museums, and museum object handling, in promoting health and wellbeing, including a three year study focused on the role of object handling as a therapeutic intervention in hospitals and residential care homes (Heritage in Hospitals (HinH); AH/G000506/1). Using a robust mixed methods quantitative [c] and qualitative [b] framework, the research also involved collaboration with a wide range of partners (academics, museums/galleries, healthcare providers, Arts Council England, New Economics Foundation, etc), as well as the patients, care home residents and healthcare staff who participated. This approach afforded a detailed and nuanced view of the discrete ways in which museums are able to impact upon health and wellbeing and contribute to building social resilience and capital [a-e]. The work provided evidence showing museums' potential to improve health and wellbeing through positive, interactive, social experiences [a-d]. Between 2008 and 2011 data were amassed from 300 patients and residents from oncology, gynaecology, acute and elderly care, neurological rehabilitation, A&E admission inpatients, psychiatric in- and outpatients, and care homes. From this, the research identified a series of positive therapeutic outcomes: these included highly significant improvements in positive emotion, wellbeing and happiness; improvements in patients' perceptions of their own health; and optimism about the role of handling sessions as a distraction from ward life that impacted positively on relationships among staff, patients and their carers [b, c].

Subsequent funding (AH/J500700/1) was used to undertake a scoping survey of health and wellbeing-orientated programmes across UK and international museums (2011), which showed the sector's increasing cognisance of the importance of integrating health and wellbeing outcomes in museum programming [e]. This confirmed Chatterjee's belief in the importance of obtaining robust evidence to better understand the impact of museum activities on health and wellbeing. To that end she collaborated in 2012–2013 with c. 20 museums and other organisations to develop a new museum-wellbeing measure to assess impact on visitors' health and wellbeing (AH/J008524/1) [f].



Key research collaborators included G. Noble (UCL Hospital Arts), L. Lanceley and U. Menon (UCL Elizabeth Garrett Anderson Institute for Women's Health), R. Mason (Newcastle University) and J. Dodd (Leicester University).

3. References to the research (indicative maximum of six references)

[a] Chatterjee, H. J., Vreeland, S. and Noble, G. (2009). Museopathy: Exploring the healing potential of handling museum objects. *Museum and Society*. 7(3), 164–177. http://www.le.ac.uk/ms/m&s/Issue%2021/chattergee-vreeland-noble.pdf.

[b] Ander, E., Thomson, L., Lanceley, A., Menon, U., Noble, G. and Chatterjee, H. J. (2012) Heritage, health and wellbeing: Assessing the impact of a heritage focused intervention on health and wellbeing. *International Journal of Heritage Studies*. DOI: <u>10.1080/13527258.2011.651740</u>.

[c] Thomson, L., Ander, E., Lanceley, A., Menon, U., Noble, G. and Chatterjee, H. J. (2012) Quantitative evidence for wellbeing benefits from a heritage-in-health intervention with hospital patients. *International Journal of Art Therapy*. 17(2): 63–79. DOI: <u>10.1080/17454832.2012.687750</u>.

[d] Ander, E., Thomson, L., Lanceley, A., Menon, U., Noble, G. and Chatterjee, H. J. (2011) Generic Wellbeing Outcomes: Towards a conceptual framework for wellbeing outcomes in museums. *Museum Management and Curatorship*. 26(3), 237–259. DOI: 10.1080/09647775.2011.585798.

[e] Chatterjee, H. J. and Noble, G. (2013) *Museums, Health and Well-Being*. Ashgate Publishing. Farnham, UK; Burlington, VT. Available on request.

[f] Thomson, L. and Chatterjee, H. J. (2013) *UCL Museum Wellbeing Measures Toolkit*. http://www.ucl.ac.uk/museums/research/touch/ucl-museum-wellbeing-measures-toolkit.pdf.

Key peer-reviewed research grants:

AH/G000506/1. Heritage in Hospitals. Grant holder: Dr Helen Chatterjee. Duration: 1 Dec 2008 – 31 Dec 2011. Amount: £293,142. Outputs: [a, b, c, d, e]

AH/J500700/1. Heritage, Health and Wellbeing – Mapping Future Priorities and Potential. Grant holder: Dr Helen Chatterjee. Duration: 1 June 2011–31 Dec 2011. Amount: £31,177. Outputs: [e]

AH/J008524/1. Developing a heritage focused wellbeing measure: from Generic Social Outcomes to Generic Wellbeing Outcomes. Grant holder: Dr Helen Chatterjee. Duration: May 2012–April 2013. Amount: £86,782. Outputs: [d, e, f]

YH-09-05360. Touching Heritage. Grant holder: Dr Helen Chatterjee. Duration: 1 May 2012–31 Aug 2013. Amount: £50,000. Outputs: [e]

4. Details of the impact (indicative maximum 750 words)

In a ground-breaking collaboration between health and cultural organisations, the Healing Heritage research programme has provided new tools for improved service delivery. By developing rigorous, evidence-based measures of patient wellbeing, it has further ensured that object handling is now recognised by both the public health and the arts and heritage sectors as an important channel for collaboration to improve service delivery and quality of life.

Improving patient health and wellbeing: The Heritage in Hospitals (HinH) project, 2008– 11,examined the effects of museum object handling on psychological and subjective wellbeing and happiness. The underpinning research for this project included work with various hospitals (University College Hospital, the National Hospital for Neurology and Neurosurgery in London, Prospect Park Psychiatric Hospital in Reading and Oxford's John Radcliffe Hospital) and residential care homes in London, Oxford and Reading, as well as with four partner museums (UCL Museums, The British Museum, Oxford University Museums, Reading Museums Service) and the Museums, Libraries and Archives Council (now part of Arts Council England). Its most direct benefits were the enhanced health and wellbeing experienced by the 300 or so hospital patients and care home residents who participated in it. The significance of the health and wellbeing impacts on the hospital patients and care home residents who took part in object handling sessions is indicated by the highly significant (p<.001) increase in positive emotions among the participants who demonstrated a 22% increase in positive emotions between pre- and post- object handling session scores [c]. Many of those who participated in the sessions were

Impact case study (REF3b)



suffering from mental or physical conditions with detrimental effects on their wellbeing. The object handling protocol designed by the research proved to have tangible effects on how they perceived their own health. During these 45 minute sessions, researchers encouraged participants to discuss and handle objects such as Egyptian amulets, geological minerals, potsherds and printed artworks. Conversations recorded during the sessions demonstrated the impacts of object handling on individual patients' perceptions of their health. One mental health service user, for example, said: '*I can't listen to pop music at the moment because it reminds me of certain situations that I'm in and having to deal with, whereas this sort of stuff gets you thinking, but because it's 5000 years old... you can't be depressed by looking at a piece of Egyptian pottery, doesn't work that way.*' [1, p. 211]

Enhancing health service provision – benefits to healthcare staff: As well as contributing to improvements in the health and wellbeing of patient participants, the Healing Heritage research (including projects following HinH) also delivered important benefits to about fifty healthcare practitioners and various healthcare organisations who have been involved in it over the course of the past five years, particularly in terms of enhancing the service delivery they offered. The professionals interviewed as part of the research reported positive impacts both on their clients and service users and, subsequently, on the quality of the service they felt able to provide. As a mental health occupational therapist at the Prospect Park Psychiatric Hospital, Reading, explained: '*These sessions... encouraged social interaction and engagement in meaningful occupation, supporting recovery from illness. Feedback from patients indicated an improvement in mood and a reduction in the symptoms of depression or anxiety following participation in these sessions' [2]. When questioned about the impact on their working relationships, all healthcare practitioners surveyed reported benefits: 'seeing people [service users] interact, discuss and have interests in new things is just amazing. [The staff] are more motivated and interested in the work they do.' (Disability Centre staff member) [3].*

Partnerships developed through the project resulted in collaborations with around 50 institutions across the museum and health sectors, both in the UK and overseas; these have significantly extended the reach of the initial project's impacts to many more staff and patients at participating institutions. Thus, the improvements in service delivery and in the quality of participants' lives may be extrapolated to individuals in contact with these other programmes based on the research outcomes, some of which are described below.

<u>Changing museums practice</u>: The success of the HinH museum object handling protocol led to its adoption by several other museums looking to expand their programmes to cover health and wellbeing. For example, since 2010, South Australia Museum has been working with the 580-bed Flinders Medical Centre (FMC) to run its own museum object handling sessions as part of medical student training, inspired by the UCL research [4]. Closer to home, Tunbridge Wells Museum cited Chatterjee's work as providing a framework for and practical guidance on developing its own sessions for those suffering from dementia from 2013 [4].

In 2012–13 more than 20 UK museums working, in total, with over 200 museum visitors adopted the museum-wellbeing measure and toolkit developed by Chatterjee's team. Museum staff used the measure to evaluate the impact of their work on various audiences, including general visitors, older adult groups from care homes, and young people with learning difficulties. Feedback from museum staff [3] gives some indication of the value of the research to them. Staff at the British Museum wrote: 'Something is happening in sessions that's important to capture, e.g. with the early stages of dementia', and the Worcester Infirmary Museum added: '...it is great for us (a small, provincial museum with limited budget and limited reach) to be linked to a UCL project'.

The contribution made by the research was recognised by the award to Chatterjee in 2012 of a Heritage Lottery Fund (HLF) grant to train museum volunteers to deliver museum object handling sessions in health and social care settings, using the tools developed at UCL. Fifteen volunteers were recruited to work with twelve different London organisations, including disability centres, residential care homes, sheltered housing schemes, hospitals and Age UK Camden to provide object handling activities for over 500 service users. As well as benefitting service users, this project increased volunteers' object handling and facilitation skills, improved their communication skills and developed confidence in working with people in healthcare settings. Of 9 volunteers interviewed, all answered 'agree/strongly agree' when questioned about their skills acquisition [3].



Contribution to debate in policy on arts and health: The research has stimulated debate on, and provided a robust evidence base for, object handling as a therapeutic tool. As a result, it has been widely cited as an example of best practice across the heritage and the public health sectors, in policy documents and reports, and in policy debate. Since 2008, Chatterjee has been invited to speak at over 25 conferences and workshops, and to write for numerous sector-wide publications [5]. In June 2013, for example, she gave an invited keynote speech at an International Wellbeing conference in Birmingham, attended by over 100 international delegates including practitioners and scholars in public health, hospitals and arts-in-health. Citations in policy documents demonstrate the interest across sectors. Thus, in a report that repeatedly acknowledges Chatterjee's contribution to the development of evidence-based tools, the Royal Society for Public Health's (RSPH) Arts, Health and Wellbeing Policy Paper describes it as 'a foundation for new health and wellbeing practice opportunities for museums and health care sectors to work in partnership' [6, p. 50]. The research is also cited in the AHRC/RCUK's 2013 document 'Health and wellbeing: The contribution of the arts and humanities' [7, p.16] and at an RCUK parliamentary event in June 2013 on wellbeing and health. This demonstrates the impact of the research in raising awareness of the role of culture, and specifically museums, across UK funding councils, which has in turn led to increase funding for this aspect of the arts and humanities. In 2013 Ashgate Publishing, which produces books for museum professionals and scholars, published [e], showing the interest in the research by the wider sector, which is supported by the praise received from cultural (e.g. Glasgow Life, which delivers cultural services in that city) and public health organisations (e.g. the RSPH).

In some instances, there is evidence of the ways in which these contributions to policy discussion and debate are translated into impacts on museum practice. The UK Medical Collections Group, a subject specialist museums group, recommended in its History to Health Report that museums follow 'UCL's best practice and take objects into hospitals and other healthcare settings for therapeutic purposes' [8, p.14]. This suggests the role of the research as a tool for encouraging museums to work in healthcare settings and in providing them with new best practice examples to guide their activities. The significance in this context is suggested by the fact that, in 2011, HinH received an RSPH 'Arts and Health Award', with a special commendation for innovative and outstanding contribution to arts and health research [9]. The RSPH has since worked with Chatterjee to expand the reach of these beneficial impacts by disseminating research findings through its journals, and to target practitioners through its New Horizons series [9].

5. Sources to corroborate the impact (indicative maximum of 10 references)

[1] For patient participant quotation: Ander, E., Thomson, L., Lanceley, A., Menon, U., Blair, K. and Chatterjee, H. J. (2013) Using museum objects to improve wellbeing in psychiatric and rehabilitation patients. *British Journal of Occupational Therapy*. 76(5): 208–216, p. 211. DOI: <u>10.4276/030802213X13679275042645</u>.

[2] Benefits to patients described by Mental Health Occupational Therapist, Prospect Park Psychiatric Hospital, available on request.

[3] A compilation of staff and volunteer feedback forms is available on request.

[4] Impacts on museum practice can be corroborated by the Coordinator, Arts in Health at Flinders Medical Centre, and the Audience Development Manager, Tunbridge Wells Museum.

[5] Examples of invited contributions to sector journals include: Chatterjee, H. J., Can museums heal the nation? *Museums Journal*, April 2013, p. 18, available on request; and Chatterjee, H.J. 'Museums, Health & Wellbeing: Exploring the therapeutic potential of museums and their collections', *Irish Heritage Council eZine* 8 Nov 2012. Available at: <u>http://bit.ly/18KPmRQ</u>.

[6] The RSPH report on Arts, Health and Wellbeing is available at: http://bit.ly/17clYAT.

[7] The AHRC/RCUK document 'Health and wellbeing is available at: http://bit.ly/1e4BpAf.

[8] Bodley, A. (2012) History to Health: Research into changing health agendas for the UK Medical Collections Group. UKMCG. Available at: <u>http://bit.ly/1b4DvhK</u>.

[9] The expansion of the research impacts through the RSPH's New Horizons series and other pathways can be corroborated by the Development Director, Royal Society for Public Health, who also corroborates the Arts in Health Award.