Collaboration in museums and health research

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Museums in Health

This growing area of research investigates the health and wellbeing benefits of taking part in museum-based and art gallery-based activities for diverse audiences (Chatterjee and Noble, 2013).

Common features of museum in health projects include creative activities based on the collections such as arts and crafts and creative writing; gallery and behind-the-scenes tours; and museum object handling.

An overview of project evaluation reports and research has shown that such activities can lead to:
- positive social experiences, leading to reduced social isolation
- opportunities for learning and acquiring news skills
- calming experiences, leading to decreased anxiety
- increased positive emotions, such as optimism, hope and enjoyment
- increased self-esteem and sense of identity
- increased inspiration and opportunities for meaning making
- positive distraction from clinical environments, including hospitals and care homes
- increased communication between families, carers and health professionals (Chatterjee and Noble, 2013, p. 115).

Research in this field has developed a range of methodologies to gain deep insights into the impact of museum activities for a range of health conditions – for example hospital patients, including cancer patients, psychiatric and rehabilitation patients (Ander et al., 2013; Paddon et al., 2013; Thomson et al., 2012; Thomson & Chatterjee, 2016); mental health and addiction recovery service-users (Morse et al., 2015); people living with dementia (Johnson et al., 2015; Camic et al., 2015).

Mixed-Methods for Museums in Health Research: Two example studies

Museums on Prescription (2014-2017) is an AHRC-funded project led by UCL and Canterbury Christ Church University. The research explores the health and wellbeing value of museum encounters for socially isolated older People (aged 65-94) and how social prescribing can be used within this context.

This has involved running 12 10-week programmes within 7 museums across London and Kent with a total of 120 participants recruited in close collaboration with referring organisations in the health and social care sectors.

Employing a mixed-methods approach, quantitative measures of participant wellbeing (including the UCL Museum Wellbeing Measure) and social inclusion were taken at programme beginning, middle and end and at three- and six-month follow-ups. Qualitative data included end of programme interviews with participants and museum facilitators, and participant and facilitator diaries.

Museums on Prescription
• Production of a toolkit co-written by our museum partners for museum practitioners. It draws on their experience of running Museums on Prescription programmes to create an accessible best practice guide for facilitating wellbeing sessions with these types of groups.
• At a local level, development and strengthening of relationships between health and social care referring organisations and museum partners, opening up pathways for further partnerships and the sharing of information.

Not So Grim Up North (2016-2018) is a partnership between UCL, Tyne & Wear Archives & Museums, and the Whitworth Art Gallery and Manchester Museum, University of Manchester.

The research investigates the contribution of weekly museums and galleries activities lasting between 6-10 weeks to health and wellbeing for a range of audiences, including older adults with dementia in a hospital context; stroke rehabilitation patients; stroke survivors in a community setting; adults in addiction recovery, and adults with mental health issues (n<75).

The research takes a mixed-methods approach to develop appropriate methodologies to assess the impact of a range of different museum project with specific health audiences, and includes qualitative data (diaries, semi-structured interviews, video) and quantitative data (wellbeing measures including the UCL Museum Wellbeing Measure, stroke-specific scales, and coded observations).

Collaborative Approaches and Outputs

Both projects have included an advisory board of service-users, health care professionals, culture professionals and external academics to provide feedback on the research direction and to shape practical, focused dissemination strategy. Both projects have also co-authored empirical research findings published in journals and conference presentations.

Museums on Prescription
• Collaboration in museums and health research
  • Understanding aims of museum and healthcare partners to develop a collaborative approach to research methods based on identifying impact of museum project in relation to patient outcomes.
  • Development of a framework for evaluating museums in health programmes and provide recommendations for evaluating programmes in a range of different settings, including clinical and community settings, and with a range of diverse audiences.
  • Shared practice and knowledge exchange between the museum partners and health and social care partners.

Not So Grim Up North
• Contact potential partner organisations
• Develop relationships, discuss priorities, objectives and expectations
• Develop methods in partnership through advisory boards
• Pilot methods in health and social care/museum settings
• Work with partner organisations to recruit participants
• Feedback data collection and analysis progress to partner organisations through advisory boards
• Reflect on progress and challenges together, make changes if required
• Partner organisations involved in developing outputs and dissemination through writing workshops and feedback events
• Partner organisations co-author best practice guides, toolkits, methods models, conference and journal papers

References


