

Enhancing the Health and Wellbeing of Children and Young People through the Arts: A Feasibility Assessment for NHS Lambeth

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April 2012



Acknowledgements

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With thanks also to the three actors. David, Emma and Howie who facilitated the workshops, to the head teachers and teaching staff who enabled us to take the drama workshops into their schools, and finally special thanks go to all the children and young people who participated.

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Executive Summary

Background

There is a growing body of evidence that supports the notion that active involvement in creative activities can provide a wide range of benefits, including the promotion of well-being, quality of life and health. Lambeth has the largest population of all inner London boroughs, the population is ethnically diverse with over 150 languages spoken across the borough, it is also a relatively deprived area with 16 out of the 21 wards being amongst the most deprived wards in England. The pattern of declining health is linked with socio-economic status, and people living in disadvantaged areas are more likely to carry the burden of ill health. The population of Lambeth faces considerable health concerns including high levels of obesity, teenage pregnancy, HIV/AIDS, and mental ill health. Lambeth's Wellbeing and Happiness programme launched in November 2009 outlined Lambeth's commitment to improve mental wellbeing and resilience. One of the areas for action was to identify the opportunities for Lambeth people to be involved in artistic, creative and diverse cultural activities.

Aim and Objectives

This project aimed to assess the feasibility of an arts-based intervention(s) to improve health and wellbeing of children and young people (CYP) in Lambeth (aged 11-18).

Objectives:

- To carry out a literature review of the evidence behind the arts as an educational and behavioural tool with a health improvement approach (how

arts activity can deliver health and wellbeing outcomes)

- To conduct stakeholder consultation locally to determine the interest in arts-based approaches to health, the scope for delivery, and links to existing initiatives;
- To carry out a mapping exercise of current arts and health initiatives in Lambeth
- To identify potential interventions for the phase 2 bid;
- To develop an action plan with clear objectives and outcomes to form the basis for phase 2 in Lambeth.

Methods

The research team undertook a systematic search of current evidence surrounding the effect of creative activities on the health and wellbeing on children and young people. In total 14 databases were searched and following rigorous application of inclusion and exclusion criteria 20 papers were included in the review. Current Arts and Health initiatives in Lambeth were mapped and a consultation was undertaken with professional stakeholders, a survey was conducted using Survey Monkey and was followed up with interviews either face to face or via the telephone. To engage children and young people in the consultation process a series of drama workshops were organised. During these workshops the children and young people were able to express concerns about health and wellbeing issues and consider the potential role of arts and creative activities in addressing these issues.

Key Findings from the Literature Review

- There is evidence in the literature that creative activities can be effective in educating and informing children and young people about sexual health issues including HIV/AIDS, and teenage pregnancy
- Participating in creative activities can increase confidence, build self-esteem, provide a sense of achievement, and influence behaviour in a positive manner
- Participating in creative activities can help increase social engagement and build communities.

Key Findings from the Mapping Exercise

- A considerable variety of creative arts activities are available for young people in Lambeth through third sector arts organisations and world-class arts institutions
- A survey of providers of creative arts activity showed that many see the creative arts as a means of addressing health issues with children and young people
- The major areas of contribution relate to promoting life skills among young people which are important to their personal, social and educational wellbeing – this is likely to be endorsed universally
- Creative arts activities are highly accessible to children and young people and also provide a means through creative products and performances of engaging their families and the wider community
- The arts have a particularly central therapeutic role in addressing serious mental health issues and trauma among children and young people
- A range of issues related to physical wellbeing can be addressed through performing arts. Dance in particular has a potentially important role in promoting of physical fitness and body awareness

- Theatre and drama workshops and creative technologies have considerable capacity to raise awareness and educate young people on a wide range of health issues and risks
- Performing arts can also help young people to be self-reflective in terms of how they present themselves to others
- Better communication between arts organisations and the health service in Lambeth, would help the NHS appreciate the considerable resource that is offered by creative activities in promoting wellbeing and health among young people

Key Findings from the Drama Workshops

- The use of interactive drama workshops as a consultation method was highly successful with the large majority of children and young people (CYP) engaging fully throughout.
- Personal wellbeing concerns raised by CYP during the drama workshops almost exclusively centred on social and emotional health rather than physical health.
- The most commonly raised concerns highlighted by CYP were consistent across the age range (11-18), these were fear of gang/gun/knife crime, bullying in school and exclusion from peer groups.
- Age-related concerns included anxieties about: transition to secondary school (participants from Year 6 children); exams (participants aged 13-15); sexual health (participants aged 15 and above).
- Concerns relating to self-esteem were raised in all groups. These manifested as: exclusion from peer groups and academic non-achievement (participants aged 11 – 15); perceptions of social ineptness, for example, being excluded

from peer groups or not getting a girlfriend; low aspirations for the future (participants aged 13- 18).

- Passive engagement in creative activities to explore/address health and wellbeing issues was generally reported by the CYP as appealing (e.g. watching plays/films). This was followed by: non-performance art forms (e.g. technology/film/painting); language arts (poetry; story/play writing); performance arts (e.g. participatory drama).
- The CYP did not in general express knowledge of what constitutes an 'arts' or 'creative' activity. Very few immediately recognised having been involved in a wellbeing-related arts/creative project or activity. Two activities were mentioned following some probing by the facilitators (painting and healthy eating project and the film 'Kidulthood').

Recommendations

- Given the level of concern expressed by the CYP around factors that relate directly to their environment it is recommended that the importance of building resilience among young people is recognised as a central theme in all health promotion strategies.
- The willingness of the children and young people (CYP) to engage in the interactive drama workshops suggests that consultation-initiated and client-led activity models, which involve CYP in the conceptualisation, development and activation of wellbeing-related arts/creative activities, might be further developed based on this type of creative consultation.
- Even though wellbeing-related arts/creative activities are currently widespread in Lambeth, they were not generally recognised by participants in this consultation as being readily available. Therefore there is a need to promote existing opportunities to young people more effectively.

- Opportunities for CYP to work closely with local professional/experienced practitioners (as above) may alter the formers' perceptions about the availability of these types of projects in Lambeth.
- The contribution of arts/creative projects in promoting a sense of self-worth, and life skills in young people is very clear. As identified in the literature review this has potential to underpin support for CYP to self-regulate behaviour that may help to address some of the concerns highlighted in this consultation.
- Dance has the potential to increase levels of physical activity and self esteem, yet compared to other activities identified in the mapping exercise there are fewer organisations offering dance. It is therefore recommended that greater emphasis is placed on the provision and funding of dance activities in the Borough.
- Consideration could be given to developing arts/creative activities to nurture and/or develop family/intergenerational connections in Lambeth in partnership with leading intergenerational specialist organisations, such as the Centre for Intergenerational Practice at the Beth Johnson Foundation (www.centreforip.org.uk) and Tower Hamlets-based 'Magic Me' (www.magicme.co.uk). This may help to address the highlighted difficulties for CYP to express concerns to family members and/or adults in authority, and to seek their support.
- NHS Lambeth should consider a specific Wellbeing Lambeth workshop bringing together representatives from arts organisations with a series of 5 minute presentations to promote the exchange of ideas and good practice.
- NHS Lambeth should ensure that creative arts therapeutic services in the borough are aware of and appropriately networked with arts organisations providing arts activities which have a 'therapeutic' value

- NHS Lambeth should consider establishing a challenge fund which will allow arts organisations to submit short project ideas for applying the creative arts in addressing a number of key issues in health education and promotion with young people
- All projects which are funded to address health education and promotion in children and young people should be required to conduct standardised evaluations of the interventions. Evaluations should include factors such as numbers attending and attrition and also measures of resilience, self-esteem, and wellbeing of the participants using validated tools (e.g. Warwick Edinburgh Mental Wellbeing Scale)

1. Introduction

Lambeth has the largest population of all inner London boroughs, with approximately 274,000 residents, the inhabitants are younger than the national average with around 25% being aged under 19 years of age and 52% aged between 20 and 44 years old. The population is highly mobile with around 30,000 people moving in and out of the borough each year. The population is also ethnically diverse with over 150 languages spoken across the borough.

Lambeth is a relatively deprived area, the 19th most deprived area in the country, and 16 out of the 21 wards are amongst the most deprived wards in England. In the Marmot Review (2010) it was reported that the pattern of declining health is linked with socio-economic status and that people living in disadvantaged areas are more likely to carry the burden of ill health. The population of Lambeth faces considerable health concerns (Lambeth First 2010). Key issues in Lambeth include physical inactivity which costs the NHS £3.7 million per annum (Department of Health [DH] 2009a), 35% of residents smoke compared to the national average of 22%, there were 1724 alcohol related admissions to hospital in 2009, higher than the London average, and there are above average rates of stroke and heart disease. There are also a high number of people with mental health problems, and in 2007 Lambeth spent £276 per capita on mental health, the 4th highest amount in England (Lambeth First 2010). Children living in families with low income levels are three times more likely to develop mental health problems, and half of all mental illness starts by the age of 14, it is estimated that potentially a quarter to a half of mental health problems are preventable through interventions in the early years of life (DH 2010a). In addition there are also serious problems with sexual health and teenage pregnancy with the

highest rate of HIV infection in the UK and the highest teenage conception rate in England (Lambeth PCT 2008). Rising rates of sexually transmitted infection present a serious challenge to policy makers as there is a clear relationship between sexual ill health, poverty and social exclusion (Marmot Review 2010). Obesity and illicit drug use is also a problem in deprived areas, with obesity among women in disadvantaged groups being almost twice that of the most affluent groups. Childhood obesity is also linked to family income and is more common in lower socio-economic groups, as is the use of illicit drugs.

Marmot (2010) placed a high priority on the health and wellbeing of mothers, children and families and identified that early life experience has a crucial influence on physical and mental health. This was also recognised in *Our Health and Wellbeing Today* (DH 2010a) which reported that there is evidence that lifestyle behaviours and habits established during school-age years influence health throughout life. A recent government publication, the new public health strategy *Healthy Lives, healthy people: Our strategy for public health in England* (DH 2010b) identifies the potential of schools as active promoters of good health in childhood and adolescence, and as providers of age appropriate teaching on relationships and sexual health, substance misuse, diet, physical activity and some mental health issues.

Health promotion is 'the process of enabling people to increase control over and to improve their health' (World Health Organisation 1986). There are two main strategies to promote health and wellbeing, one is a 'top down' approach involving government legislation which is didactic and restrictive, for example the smoking ban in public places, such strategies are criticised as paternalistic and characteristic of the 'nanny state'. An alternative approach to legislation is to rely on educating the population to enable individuals to make informed choices regarding how they may maintain their own health and wellbeing. However, when developing health

promotion strategies it is necessary to take account of cultural considerations (Gilbert and Dunn 2009). Where culture is not just defined by ethnicity or race but also considers geography, the local community and factors such as age and gender.

The recent government policy which heralds the shift of power from central government to local communities should ensure health promoting strategies are more responsive to local needs, with the opportunity for local partnerships to develop better health outcomes for their populations. This policy is being implemented through the Communities for Health Programme which was established in 2006 and funded by the Department of Health with the aim of helping local government improve the health of local communities (Local Government Improvement and Development 2006). The Coalition Government has further developed this programme through placing responsibility on to local government for health improvement, and co-ordinating public health and social care, and promoting all aspects of promoting well-being, with an emphasis on addressing inequalities and the social determinants of health. As part of this strategy a Director of Public Health is to be appointed in each Local Authority, to act as strategic leaders for health and wellbeing in local authorities. The emphasis is on local responsibility, accountability and freedom, funding is to be ring-fenced with the aim of ensuring public health is responsive to the needs of different communities (DH 2011).

Lambeth's Wellbeing and Happiness programme launched in November 2009 outlined Lambeth's commitment to improve mental wellbeing and resilience of the local population. One of the areas for action was to identify the opportunities for Lambeth people to be involved in artistic, creative and diverse cultural activities. There is a growing body of evidence that supports the notion that active involvement in creative activities can provide a wide range of benefits, including the promotion of well-being, quality of life and health (Staricoff, 2004; Clift, Camic, Chapman, et al.,

2009; Bungay and Clift, 2010). Arts and health and well-being initiatives for children have already been established in a number of areas in London. *Planet Asthma* was an innovative project set up by the Bromley by Bow Centre with the purpose of addressing asthma knowledge and understanding through art. Dulwich Picture Gallery run a programme of youth outreach programmes offering creative activities to engage challenging teenagers as an alternative to hanging out on the streets and in gangs. There has also been research looking at the potential benefits for children and young people of arts participation. For example, Catterall et al (1999) studied 25,000 children to investigate whether participation in the arts outside of school could make a difference to academic attainment and social development. He found that not only did art participation have a positive impact with students involved becoming more creative, with lower dropout rates, improved social skills and higher educational achievement but also the greatest difference was noted in children from socially disadvantaged backgrounds.

Nearly 10 years later Daykin et al. (2008) conducted a systematic review of literature published between 1994-2004 on the effects of performing arts for health in young people aged 11-18. Following screening for relevance and applying the inclusion criteria; research on music, drama and dance in community settings and non-curricular education 14 papers were identified for the review. It was found that the evidence was diverse and that it was therefore inappropriate to attempt synthesis of the results. Despite the studies being heterogeneous a number of key themes were identified as positive outcomes following arts interventions particularly in relation to peer interaction and social skills, risk behaviours and knowledge of sexual health and drug use. The authors identified the need for more rigorous and robust research on the impact of performing arts interventions on health and well-being.

Every Child Matters (DfES 2004) aimed to provide all children, irrespective of their circumstances, with the support they need to be healthy; to be safe; to be able to enjoy and achieve; to make a positive contribution, and achieve economic well being. To achieve these goals health promoting educational programmes aimed at young people need to be tailored to the needs of young people, accessible and integrated into youth support services (DH 2009b), and they need to take account of cultural issues, that is be 'culturally competent' (Glenn & Wilson 2008). It also necessary to raise young people's awareness of how the choices they make with regard to their health and wellbeing will impact upon their future health. This may be difficult if they do not think their health is important; a survey by the Children's Society (2005) found that in response to questions about factors which are important for a good life out of the ten key topics identified health was the least frequently mentioned. A residents survey conducted in Lambeth also asked young people (11-18) about the things that worried them the most and 'being healthy' was in 7th place, behind exams, my future, school work, crime, and friendships (Ipsos Mori 2011). There is some evidence that interactive methods are more effective for health education and patient satisfaction than the more traditional didactic methods (Joronen et al 2008), and the literature review examines the effectiveness of participating in creative activities on health and well being.

1.1 Project aims and objectives

This project aims to assess the feasibility of an arts-based intervention(s) to improve health and wellbeing of children and young people in Lambeth (aged 11-18).

Objectives:

- To carry out a literature review of the evidence behind the arts as an educational and behavioural tool with a health improvement approach (how

arts activity can deliver health and wellbeing outcomes)

- To conduct stakeholder consultation locally to determine the interest in arts-based approaches to health, the scope for delivery, and links to existing initiatives;
- To carry out a mapping exercise of current arts and health initiatives in Lambeth
- To identify potential interventions for the phase 2 bid;
- To develop an action plan with clear objectives and outcomes that will form the basis for phase 2 in Lambeth. This plan will include specifics of the chosen intervention (s), delivery partners, time frames for delivery, an evaluation plan, costing and funding information, and a sustainability plan.
- To produce a final report incorporating the above action plan and use it to write the phase 2 application for further GSTC funding for a longer-term intervention in Lambeth.

2. Research Literature Review

2.1 Search strategy and analysis

This literature review is an overview of current published evidence on the effects of creative activities on the health and wellbeing on children and young people aged between the ages of 11-18. The literature search took place between May-June 2011 using the databases identified in Appendix 1 and was conducted systematically with the search strategy and key words presented in Appendices 2 and 3. The search was restricted to publications with English Language abstracts published since 2004 (in acknowledgement of Daykin et al.'s earlier work). Papers were included on creative activities undertaken with children and young people between the ages of 11-18, some studies emerged in which the age range of the sample extended below the age of 11 and/or above the age of 18, and these were included. The activities took place within mainstream schools (only extracurricular activities and not part of normal curriculum teaching) and in community settings. Research conducted in hospitals, young offender institutes and special schools were excluded. The creative activities included: music, drama, dancing, singing theatre, art, and visual arts, but therapies such as art therapy, music therapy and dance therapy were excluded. Studies using quantitative, qualitative, mixed methods and multi-method approaches were included in the review.

In addition to the search of published literature a search of the 'grey' literature was undertaken through personal contacts and by looking at websites of arts for health projects in the UK. However, although there are a number of organisations providing Arts for Health projects in the community throughout the country the majority of these are 'problem focused', that is they are providing activities for specific groups of

people, for example children with learning disabilities, children with chronic or long term conditions, and young offenders. Others deliver programmes within schools as part of Personal Health and Social Education classes dealing with issues such as bullying and drug misuse and knife crime. Therefore these were not included in the review as they did not meet the inclusion criteria. The inclusion and exclusion criteria that were applied to the search are presented in Appendix 3.

Phase one of the search produced 4528 initial hits, and following screening of the titles and abstracts 130 potentially relevant articles were identified. The abstracts were downloaded and were screened for duplication and relevance with full text articles being retrieved where appropriate, leaving 36. Following further screening of the full text articles and rigorous application of the inclusion and exclusion criteria 20 papers remained and are included in this review. Of the 20 papers, six used a purely quantitative methodology, eight used qualitative methodologies and six studies utilised a mixed methods approach. The majority of the studies took place in the UK but there were also international studies which were conducted in the USA, Canada, Australia and Tanzania.

Analytical Framework

1. The literature was characterised and tabulated using the following categories: author and date of publication, study design, sample size, age range, country where study took place, nature of the intervention, results, and limitations (See Appendix 4).
2. Because of the variety of outcome measures used in the quantitative studies, and the overall heterogeneous nature of the research methods and the creative activities used, synthesis of the research findings was not possible. Therefore the review has been organised under the following themes: sexual health, obesity, mental health and emotional well being.

2.2 Sexual Health

Teenage conception rates are at a 20 year low, but the rate in the UK is still high compared to the rest of Europe. The majority of teenage pregnancies are unplanned and half of them end in an abortion (DH 2011a). Teenage pregnancies have an emotional cost to the young person and their family, they also represent a significant cost to the NHS and society, as they can affect the young woman's health and may limit her education and future career prospects. Young people are also the group most at risk of being diagnosed with a sexually transmitted infection (STI) with the 15-24 age groups being the most affected (DH 2011). Despite young people representing just 12% of the population in 2007 they accounted for 50% of all STIs diagnosed in sexual health clinics. Adolescence is a special risk factor for HIV because during adolescence individuals may engage in unsafe sexual behaviours, resulting in STIs and or pregnancy both of which indicate an increased risk of HIV infection (Lemieux et al 2008).

The previous government prioritised a reduction in teenage conception rates and STIs, and in 2006 established National Support Teams (NST) for teenage pregnancy and sexual health (as well childhood obesity, alcohol harm reduction, young peoples' emotional wellbeing and mental health, and tobacco control). The purpose of these support teams was to tackle complex public health issues through providing guidance using the best available evidence and examples of good practice from around the country. However the NST project finished early in 2011 and it remains to be seen how recent developments in public health will approach the issues around teenage pregnancy and STIs.

Mainstream health promotion education is not always effective at getting the necessary information across to young people, Orme, Salmon and Mages (2007) suggest that this is because services are not accessible and fail to take account of youth culture. The database search identified a number of studies which reported using creative activities as a means of increasing knowledge and understanding of sexual health in children and young people. Four of the studies used drama as an intervention; one used music and the other a visual art activity. Three studies focussed specifically on the impact of creative activities on communicating knowledge and understanding of HIV/AIDS (Kamo et al 2008, Campbell et al 2009, Lemieux et al 2008). One used a creative activity to explore barriers to effective HIV prevention (Glenn and Wilson 2008) and two papers reported on the use of a drama based activity to help young people to consider the impact and consequences of their sexual behaviours (Orme et al 2007. Mages et al 2007).

A variety of research methodologies were utilised and the disparate nature of the interventions and the methods and measures used means that it is not possible to synthesize the findings.

Kamo et al (2008) conducted a cluster Randomised Controlled Trial (RCT) in Tanzania to assess the effectiveness of an intervention designed to increase local competence to control HIV and AIDS. The aim of the intervention was for adolescents to plan and implement health promotion activities to educate their communities to take action to prevent the transmission of HIV/AIDS. Twenty four children (aged 10-14 yrs) and their care givers were trained and educated over a period of weeks in the social realities and microbiology of HIV/AIDS. The children then used drama to present this knowledge to local communities, in the intervention the children were acting as health educators. The children delivered the performances to fifteen matched pairs of 'mitaa' (the equivalent of electoral wards)

for intervention groups and matched control groups. The effectiveness of the intervention was measured using a post-intervention questionnaire, the questionnaire included a community survey, and standardised health assessments although these were not named or described in the paper. It was administered to both the control and interventions groups, and was conducted to measure attitudes and knowledge about HIV/AIDS and the perceptions of young adolescents' role as community health promotion educators. The questionnaire was completed by 1114 people 490 in the control group and 624 in the intervention group; demographic factors such as gender were not presented but the age range of those attending was between 16 and 86. It was found that although people were positive about the role of the young people there was no difference in levels of knowledge between the control and intervention groups.

The authors identified limitations with the study as there were issues with the children being able to project their voices to large audiences; the study was also limited as no pre-intervention testing of the audience participants' knowledge was undertaken. Individual interviews with the young people and their caregivers regarding their health status, knowledge, behaviour and attitudes about sexuality, parental efficacy and HIV/AIDS were undertaken at base-line and three months post intervention but no data was presented in this paper so there is information as to the impact on the child educators who took part in the project. However the authors concluded that the drama activity encouraged the community to participate and ask questions and reported that drama could be used in Africa successfully to increase knowledge and understanding of AIDS and sexual health.

Lack of a pre-intervention assessment of base-line knowledge of HIV/AIDS was also a limitation of an evaluation conducted by Campbell et al (2009) in London. This study aimed to evaluate HIV knowledge, confidence and intention to use condoms in

two groups of 13-16 year olds who had participated in performance arts based events. Group 1 undertook a 6 week performance arts based HIV education and prevention workshops culminating in them presenting a theatre based performance which was watched by group 2. A questionnaire was used for the evaluation and contained quantitative and qualitative components. The questionnaire was designed by member of the local World Aids Day committee and used some measures from a validated tool. Seventy teenagers were in group 1 and of these 14 (20%) responded to the questionnaire, and group 2 consisted of audience members who attended the performance the exact number were not known but it was calculated to be between 200-250 and of these 65 responded (25-32%). The qualitative data suggested that participants learnt more about condoms and their efficacy in preventing the acquisition of HIV and other STIs, the quantitative data found that the participants had more information about HIV and condom use, and were more confident that they could insist on condom use and planned to use condoms in future relationships.

Overall the findings suggest that performance-based HIV prevention activities may be useful to deliver HIV prevention measures. However the survey asked about intention and it may be difficult to predict future behaviours on the basis of the responses. The study is limited as there was no pre-testing of either group of students' base-line knowledge of HIV and its transmission, furthermore it also had a relatively poor response rate (particularly in group 1), no explanations are provided by the authors for the low response rate, but the survey was designed by a committee and no mention was made of whether students were represented on the committee, or if the survey was piloted on young people beforehand. The response rate may be due the questions not being appropriate or of perceived relevance to the target audience or may be because of low literacy levels as was the case in Orme et al (2007) study discussed below. The authors also state that the average of the participants was only 14 and they may not yet be sexually experienced or

experienced in maintaining or managing relationships which may have influenced their responses.

As previously stated if health promotion educational programmes are to be successful they need to be relevant and appropriate for the target audience, and lack of awareness or cultural incompetence may result in information not being received or processed by those in greatest need. In the USA, Glenn and Wilson (2008) conducted a small qualitative study to explore adolescents' perceptions of the barriers to effective HIV prevention. The study participants created collages using pictures from African American magazines to create images of teenagers who they thought were resilient or vulnerable to HIV, these were then used by the research team to facilitate the focus group discussion around vulnerability and resilience to HIV. The participants were 8 African Americans aged between 13-18 years who attended a local church.

The researchers reported the participants perceived that confidence, safe social activities and innocence were associated with increased resilience to HIV, whereas image, music, drug culture and peer pressure increased adolescents' vulnerability to HIV. The participants were also asked about their knowledge of HIV, how serious they perceived it to be, and the education they had received about HIV prevention. With regard to the seriousness of the threat of HIV to their generation the students rated it eight on a scale of one to ten. They had received most of their information about HIV from their mothers and school and the main focus of HIV prevention was abstinence. The study was limited as the sample was very small, the participants were also all Sunday school attendees from well-educated backgrounds and it is therefore questionable whether the findings are representative of the wider population.

An alternative way to get health messages across to young people is to use people who they respect and they can identify with to deliver the information. Lemieux et al (2008) examined an HIV intervention for urban adolescents in the USA which used music and peer influence to promote safe sexual behaviours. The intervention took place in three urban high schools (one treatment school and two control schools) and in the treatment school the intervention was used in addition to usual health classes. The intervention consisted of presentations during health classes by six opinion leaders within the school (students nominated by peers and teachers). This approach was based on the Natural Opinion Leaders (NOL) model which adopts the view that popular peer leaders' advocacy of preventative behaviours can change the perception of social norms and motivate others to change their behaviours. The presentations were followed by the distribution of a CD of a Hip/Hop R&B style song 'Life is too short' written and created by the opinion leaders. A questionnaire measuring HIV prevention information, motivation, behavioural skills, behavioural intentions, and self reports of actual HIV risk and preventative behaviours, and music preferences was administered one month before the intervention and three months later. The measures were based on measure that had been used and validated in previous research but were not named or fully described. The mean age of the participants was 16, and 306 questionnaires for time 1 and time 2 were completed.

The results indicate that the intervention did influence several aspects of self reported HIV prevention motivation, and behavioural skills, condom use, and HIV testing behaviours. For example participants in the intervention group maintained a positive attitude to condom use whereas those in the control group became less positive. There was also higher support amongst females in the treatment group for abstinence compared with females in group 2 between times 1 and times 2. However the schools participating in the research experienced high levels of absenteeism and the attrition rate was 25%, a further limitation is that although the questionnaire used

validated measures there is no follow up to assess future infection rates and actual behaviours may not conform to stated intention. Reinforcing health promotion messages using music may be effective because music is a powerful source of social communication and social influence as messages can be repeated and as they become more familiar they may become more influential.

Whilst the previous three studies focus was on the prevention of HIV/AIDS and the transmission of sexually transmitted diseases, participating in risky behaviours such as unprotected sex may also result in unplanned teenage pregnancies. Project Jump was a UK based drama initiative that aimed to help young people to consider the impact and consequences of their sexual behaviour on themselves and other people, it was developed in recognition that sexual health information services are not always accessible or do not meet the needs of young people. The project was delivered to 13-18 yrs old in a range of settings, education, youth offending, youth services and local authority social services targeting 'hard to reach' young people. It offered an alternative to mainstream health promotion and used a creative drama followed by an inter-active workshop focusing on the development of decision-making around sexual health.

The project was evaluated using both quantitative and qualitative methods; a postcard survey (100 responses) and in-depth follow up interviews with 21 young people. It was reported in two papers; Orme, Salmon and Mages et al (2007) and Mages Salmon and Orme (2007) presenting similar data but Mages et, (2007) also reported on 34 semi-structured questionnaires and 15 interviews conducted with professionals. The majority of the young people reported that they found their involvement in the project positive and exciting and that they could identify with characters in the play, they acquired knowledge about a range of sexual health related issues in a format that provided a degree of emotional safety and gave them

confidence to speak out. The professionals on the whole agreed that the project raised awareness of sexual health issues but were divided as to whether the uptake of services would be affected. The two papers did present some similar data but it was confusing as they described different number of participants although the sample sizes for those that took part in the evaluation were the same. There was no detail provided as to the format of the post card survey or how it was administered although it was acknowledged that literacy levels may have had an influence on the response rate. The interviews were mainly conducted with white British young people and there was no mention of potential cultural differences that may exist. The young people thought drama was a good way of talking about sexual health because amongst other reasons it was visual; it showed what could happen and how to deal with situations, it is not personal and dealt with issues from a teenager's point of view. The authors concluded that using drama is an effective method of engaging young people and encouraging them to consider the consequences of their sexual health behaviour.

Comment

Only *Project Jump* addressed teenage pregnancy specifically, however there is evidently a link between transmission of HIV/AIDs, STIs and pregnancy in terms of risk behaviours. The findings from the studies suggest that participation in creative activities can have a positive impact on knowledge and behaviours in relation to sexual health however the research on the whole is weak, with small sample sizes, tools which are not validated (except Lemieux et al) and there is a lack of detail given in the qualitative studies. Differences between the studies including the fact that no standard outcome measures were used in the quantitative studies means that they cannot be directly compared; neither can they be replicated because of the lack of detail presented. However the main theme that does emerge from these studies is

the ability of the arts to engage young people; and if young people are interested in an activity they are more likely to take notice of the information provided.

2.3 Obesity

Obesity occurs when the input of energy (calories) from food and drink consumption is greater than the body uses for metabolism and physical activity. Currently two out of three adults, in the UK are overweight or obese, and more than one in five children are obese by the age of three. Obesity increases the risk of type II diabetes, some cancers heart and liver disease, the estimated cost to the NHS of obesity related conditions is around £4.2 billion per annum and this is predicted to double by 2050 (DH 2011a) .

The causes of obesity are complex and according to the National Obesity Observatory revolve around seven main themes: Biology (genetics and ill health), activity environment (e.g. road safety), Physical activity, societal influences (e.g. cultural factors and peer pressure) Individual psychology, food environment (availability and choice of food), and food consumption (quality and quantity). Reducing obesity is a priority for the current government (DH 2011a) and to achieve this it is aimed to provide people with clear and consistent messages as to how to improve their health, and promote increased physical activity and healthier diets.

The previous government established *Change4life* a social marketing campaign to promote healthy weight and to encourage people to eat healthily and to be more active, and this is currently supported on the Department of Health website. A further aspect of the *Change4life* programme was the provision of *Change4life* convenience stores to increase the availability of fresh fruit and vegetables in areas that might otherwise have limited access to them. The *Change4life* website is for the provision

of information about healthy eating and promotes physical exercise it is designed in such a way as to be visually appealing to children and young people with bright colours, pictures and a large font used to highlight key messages. Successive governments' agendas in relation to obesity therefore are centred on the individual and the lifestyle choices they make, and the research identified in the review focuses on information about nutrition and increasing physical activity in young people.

The search strategy identified five studies that used creative activities to communicate health promotion messages around obesity, healthy eating or physical activity (where the physical activity is a form of dance). Two of the studies reported on projects that used participatory theatre to inform young people about nutrition (Colby and Haldeman 2007, Jackson, Mullis and Hughes 2010) two projects used dance to increase levels of physical activity (Quin, Frazer and Redding 2007, Beaulac, Olavarria and Kristjansson 2010) and one asked people about their motivations for taking part in community recreational dance classes Gardner Komesaroff and Fensham (2008).

Theatre performance has been used to educate children about healthy eating. Colby and Haldeman (2007) reported on the use of peer-led theatre as a nutrition education strategy for Mexican American youth living in the USA. In the study 19 children aged 8-12 participated in a course of 5 daily sessions of theatre nutrition education for 4 weeks during a summer camp. During the sessions children discussed nutrition handouts and how they related to their own experiences and then wrote a script for a play which they then rehearsed and performed to family and friends. The effectiveness of the strategy was measured using a pre/post survey tool to assess knowledge, behaviours attitudes, beliefs and behaviours. The tool was also administered to a matched (by age and gender) non-theatre group who received no intervention. It was found that the groups did not differ at baseline but post-

intervention there was a 26% increase in knowledge in the theatre group and changes in attitudes, beliefs, and behaviours. This is one of the few studies in the review that used a control group to compare the effectiveness of an intervention. However it was limited in that the sample size was very small, furthermore, the presentation of the research is very limited the survey tool is not named or described, very little of the data is presented and no detail is given about the analysis of the data. It also states that post interviews were also conducted but no detail is provided although a few of the quotes from the children are given. However the authors conclude that peer-led theatre inventions appear to be an effective method of increasing knowledge and changing attitudes, beliefs and behaviours of youth and could be used in a variety of settings to promote healthy eating.

A similar programme of activity was evaluated by Jackson, Mullis and Hughes (2010). A theatre based nutrition and physical intervention activity was developed following an initial focus group with adolescents and discussions with community partners. The intervention took place in the USA and was delivered after school it consisted of six 75-minute sessions and included theatre, dance and music, and concluded with a performance to parents. The participants were African American adolescents aged 11-13 and attended an urban school in a low-income area; fifteen students were recruited to the programme. The parents were also involved through attending a one hour health information and recipe session, completing home based activities and attending the final performance which included a healthy dinner.

The evaluation of the programme involved a pre/post intervention survey tool which tested participants' knowledge, food and physical activity choice, and health behaviours questions. A focus group was also undertaken with 8 of the participants which provided input for the programme development. The authors felt that it was interesting that the answers to some questions on the survey did not change and

others changed in an unexpected direction. Recruiting students to the programme was challenging because of the competition from other out of school activities, and the sample size was small which make generalisations about the effectiveness of the intervention difficult. The students also found script writing difficult and required more time to synthesise the information they were given with the writing process, some of the students also became shy and less confident during the performance to parents. Despite the findings of the survey the authors conclude that a theatre intervention is a viable medium for health education in this group of adolescents, however a more rigorous evaluation with a control group would be necessary to confirm such conclusions.

Not all children and young people enjoy sport as exercise and levels of activity decrease with age. In addition not all children enjoy team sports but some forms of dance may be an acceptable and alternative form of exercise. A dance project in Hampshire in the UK was developed in response to concerns around rising levels of obesity and need to increase the levels of physical activity of young people (Quin, Frazer and Redding 2007). A ten week programme of dance was devised and 348 school children aged 11-14 took part in the project, physiological and psychological assessments were made pre and post intervention.

There were statistically significant increases in all areas of female physical fitness with a 44% increase in aerobic fitness, there were positive findings in the psychological wellbeing results but these were not statistically significant. In addition a qualitative questionnaire was administered and over two thirds of respondents answered positively when asked about their attitudes to dance perhaps not surprisingly the girls were more positive in their responses than the boys. The authors were very enthusiastic about the project and its findings and suggest that

dance is of particular benefit to female students and that the girls may be more likely to engage with dance rather than sport as a way of keeping active.

Beaulac, Olavarria and Kristjansson (2010) reported on a hip hop dance intervention that was implemented with the purpose of increasing access to physical activity for adolescence in a disadvantage community in Ottawa, Canada. Hip Hop was chosen as it is popular and does not require special equipment or particular ability to be able to participate. The programme was developed by a community-academic partnership in response to an identified need for accessible physical activity for adolescents living in a multicultural and lower- income community. The objectives of the programme were expansive; to improve self identity, to improve overall wellbeing, improve social relationships and to improve youth behaviours. All youths aged b 11-16 living in South East Ottawa were invited to take part and in total 95 young people joined one of four groups. The groups were held winter and spring and there were mixed sex groups and girl only groups.

The programme was evaluated using quantitative and qualitative methods; document review to assess attendance, observations to monitor consistency of delivery, questionnaire to record demographic details at the beginning of the programme and a satisfaction survey at the end, focus groups and interviews were undertaken with parents or guardians of the participants. Three focus groups were held, one with personnel and two with parent/guardians, and telephone interviews were conducted because of the low response rate to the focus groups, interviews were also conducted with 14 participants.

The evaluation concentrated on the organisation and delivery of the programme and found issues with implementation of the programme which were due to staffing and management of youth behaviours. There was also an issue with attendance as 49%

of students discontinued the winter sessions and 43% dropped out of the spring session, despite this of those who completed the final questionnaire reported satisfaction with the programme overall. There were no statistically significant findings but a number of positive elements were identified including the opportunity to learn something new, and the respondents liked the choreography. Parents and staff thought the programme should go on for a longer period of time, and its accessibility was viewed very positively and the fact that it was free was considered very important. The authors suggest that the evaluation provided valuable feedback and that future programmes need to consider how to reduce the barriers to participation and consequently attendance and attrition, the study did not report on findings relating to the health and wellbeing of participants

The attrition rate in Beaulac et al study was high with nearly half of the participants dropping out of sessions held in the winter months. To attend classes regularly requires motivation and in a small qualitative study Gardner, Komesaroff and Fensham (2008) explored the motivations, the nature of the class experience and implications for health and wellbeing of young people attending recreational dance classes. Ten people aged 14-25 who attended a variety of community-based recreational dance classes were interviewed about their motivations for attending the classes, their experiences of attending dance classes and the perceived impact of the classes on their body image, health and sense of wellbeing. Five themes were identified from the data: respect for physical activity and expertise, gains in self-confidence both in bodily experience and social relationships, respect between older and younger people, exploration and maintenance of social and community values, experiences beyond everyday life.

Of particular note is that all the participants felt that the dancing made them feel good about themselves as it 'lifted their spirits (p:704) and they felt dance was good for

their posture and self esteem, and that they got the feeling of a surfeit of energy. However they spoke about more than just the physical affects and with feeling a sense of achievement and connection as a result of taking part. These findings imply that dance classes may be a sustainable form of physical activity for young people because they combine exercise with social wellbeing also accessible to culturally diverse communities. The research is limited because it only studied a limited number dance genres, had a small sample size, and no comparisons were made with other forms of exercise such as sport or exercise classes.

Comment

The causes of obesity are complex and therefore to counteract obesity requires a 'multidisciplinary and ecological approach' and needs to include the cultural sector and the policies determining the social-cultural environment' (Brug 2007:11 cited in Gardner et al). The studies reviewed indicated that performance theatre may be an effective method of getting information about nutrition and healthy eating across to young people, there is also some evidence that dance may be an acceptable form of physical activity for young people. However once again the research in this area is relatively weak in terms of methodology and rigour and further work is required to confirm provisional findings.

2.4 Mental health and emotional wellbeing

Many mental health problems start in early life and one in ten children aged between 5-16 years have a mental health problem, and many of these will continue to have mental health problems into adulthood (DH 2011b). People with mental health problems are more likely to partake in behaviours which are potentially damaging to their health such as smoking, alcohol and substance misuse. Young people with mental health problems tend to have fewer qualifications, find it hard to find a job and

stay in work, have lower incomes, and are more likely to end up homeless. Not only do mental health problems have serious consequences for the individual they also have major cost implications for society, it has recently been estimated that mental ill health costs the country £105 billion per annum, through loss of productivity, incapacity benefits and the criminal justice system (Centre for Mental Health 2010).

There has been recognition that engagement with the arts has the potential to improve quality of life and to promote social and educational inclusion (DCMS 2004), and the current government also acknowledge the value of engaging in meaningful activities such as sport and the arts in promoting mental health and wellbeing (DH 2011b).

Seven studies were identified which reported on the impact of participating in art activities on 'mental health and emotional wellbeing'. Five of the studies are qualitative, one is purely quantitative and one uses a mixed methods approach. Different forms of creative activities were used in the studies, but most used theatre performance as an intervention (Bradley et al., 2004, James 2005, Kemp 2006, Wright 2006, and Rutten et al., 2010), one used a multimedia intervention (South 2005) and one did not specify the exact nature of the art project (Hadland and Stickley 2010).

Bradley et al's (2004) study was also included in Daykin et al's 2008 review and is a report on a participatory action research project the *Voices Project*, which took place in a rural Australian town. Young people living in rural Australia experience high levels of youth unemployment and youth poverty and are at high risk of suicide, substance misuse and mental ill health. In the town where the project was undertaken no funding was allocated from the Council's budget specifically for youth services despite there being recognition of a growing need. The project was

developed with the aim of community building, increasing the capacity of at risk young people and producing political changes to improve public health. A number of different research methods were used including: a 'public conversation' with key officials and professionals to discuss 'youth at risk', documentary analysis of Council meeting minutes and transcripts of meetings, a theatre group was established for young people and interviews were conducted pre, mid, and post theatre intervention.

The authors report that the main success of the project was that it brought together disparate marginalised youth into a cohesive group able to tackle their individual problems in an integrated fashion. The strength of the theatre intervention in forming the group was that it enabled the youngsters to express their feelings and empowered them to view their problems in a broader context. Furthermore they re-engaged with education and were able to start pursuing their individual goals.

Another major success was that the project contributed to a change in Council attitudes which resulted in the employment of a youth co-ordinator, the researchers attribute this change to the presentation by one of the theatre group voicing her story to the Council meeting. Overall the authors conclude that although it was not possible to determine how the project affected the long term wellbeing of its participants or the other at risk youth in the town, it did have immediate benefits for the theatre group and was instrumental in changing Council policy.

A theatre group for marginalised youth in risk of social exclusion was established in Leicester and was evaluated by James (2005). *Actup!* is a theatre group and educational resource for young people who are educationally and socially disadvantaged. The group provides an opportunity for learning and participating in community life to young people at risk of experiencing social exclusion. *Actup!* presents four productions a year in a local library and also one outdoor performance each summer.

The research took place during a week of rehearsals in the school holidays. The author used non-participant observation, unstructured interviews and analysis of digital images to examine the impact that informal learning has on young people aged 10-18. James reports that the young people's confidence developed and they also developed the ability to listen as well as command attention during their performance. It is suggested that youth theatre can lift the barriers to learning and minimise the disadvantages faced by low levels of educational attainment and social exclusion. The research is presented in a report and there does not appear to be a published peer-reviewed paper available, and the research is limited as there is no indication regarding the interview process although interview data is presented.

Increased confidence also emerged as a theme in a paper by Kemp (2006), who describes an evaluation of a drama-based health promotion project for young Black men, aged 14-25 living in London. In recognition of the links between sexual health, teenage pregnancy and the emotional and social development of young people the project *Brother to Brother (B2B)* used story-telling, theatre and performance to explore experiences of identity, relationships, sexuality and sexual health with the aim of promoting sexual and emotional health. *B2B* was part of a larger project to explore high levels of sexual ill health among young people in south east London.

Qualitative methods were used to evaluate the project including participant observation and interviews and focused group discussions, creative writing and Vox Pop. This was another small scale study and it was not clear how many people took part in the overall project, and although eight participants were interviewed not all these people had taken part in the whole project and it is implied that people dipped in and out of the project and that it was difficult to sustain engagement. Seven youth workers were also interviewed three times throughout the project.

The author suggests that young peoples' involvement in the project resulted in the following outcomes: a positive impact on confidence and self-esteem, and greater awareness around emotional experiences, raised awareness of self-understanding and social awareness, awareness of stereotypes and underlying attitudes. Although in the introduction the link was made between sexual health and emotional and social development in the data presented there was no reference to sexual health.

Furthermore in the conclusion it is stated that at the end of the project it was hoped that the young people who participated would have achieved a greater awareness of sexual health issues but no findings were presented to support this.

Wright et al (2006) reported on a multi-method evaluation of a national arts programme that took place for three years in five low income communities in Canada. The arts programme was primarily theatre based but also included the visual arts in the form of mask making, set design and painting, and media arts (digital filming and editing). The sites where the programme was delivered had to recruit youth to the programme and a total of 183 youths aged 9-15 participated. The programme consisted of art sessions held after school twice a week and was developed to provide new skills and set social goals, which increased in complexity with time.

To evaluate the programme a mixed method approach was adopted and utilised observations, questionnaires and interviews. Observational data was collected 6 times over the course of the project by research assistants using a tool to measure participants' behaviour, art and social skills development and completion of the task. Youth and their parents completed questionnaires 3 monthly to measure conduct and emotional problems, and at the end of the program a total of 30 interviews were conducted with a sub-sample of 15 youth and 15 parents, the sampling strategy was

based on the attendance rate in the programme. The average attendance rate for the programme was estimated to be 80% and was well sustained throughout, the youth and parents identified a number of reasons for this; the excellence of the staff running each programme, transportation and snacks were greatly appreciated, the children enjoyed making new friends and learning about theatre and having the opportunity to try the different activities. From the interviews it was identified that engagement with the programme was enhanced by active recruitment, high parental involvement and the removal of barriers to participation, it was perceived to increase confidence, enhance art skills, improve pro-social and conflict resolution skills.

A study which is significantly different from others in this review is by Rutten et al (2010). This research was conducted on groups of boys who were members of football teams and so were used to playing and working together to achieve a common goal. The research explored the effects of a forum theatre intervention on behaviours, specifically moral team atmosphere, moral reasoning, and fair play attitude, and on and off field antisocial and pro-social behaviours in teenage-aged football players. Youth sports are competitive and this can lead to anti-social behaviour, but the authors argue that improving moral reasoning and attitudes of around fair play and the moral environment of a club can have a positive effect on pro-social behaviour.

The intervention consisted of a performance using forum theatre at four youth football clubs, and involved 99 boys aged 10-18. Forum theatre was developed by Augustus Boal and consists of physical exercises, aesthetic games, and improvisations which are used to transform a theatre performance into a teaching and learning tool to aid understanding of issues and how problems may be resolved. There was no control group in the study and all the boys completed a number of questionnaires immediately before the intervention and then one month after the intervention. The

following items were measured: moral team atmosphere, moral reasoning about sport dilemmas, and fair play attitude of the athlete, on and off field antisocial and pro-social behaviour, verbal intelligence, and social desirability.

It was found at post-test that there was a small reduction in antisocial behaviour on the football field and a positive but small change in the moral atmosphere in the team; no change was found in moral reasoning or fair play attitudes of the players. However the intervention did not impact on off-field behaviour or on-field pro-social behaviour. The study was described as a pilot and the authors acknowledge its limitations as the boys only experienced one performance; the study was also based on self-reported behaviours with the boys describing their own behaviours. There was also an issue regarding the length of time between the intervention and the post-test measures and whether one month was long enough to detect changes. The authors conclude that the forum theatre intervention had a positive effect on antisocial behaviour on the football pitch and on the team atmosphere and suggest further more rigorous research is required with more consideration of the content of the performance and also more than one performance to reinforce the learning opportunity.

South (2005) evaluated a community arts for health programme which consisted of three separate projects and took place in a disadvantaged area in the north of England. Only one of the projects is relevant to this review as one consisted of music and movement sessions for preschool children, another took place in a secondary school and consisted of drama workshops for young Asian women aged between 14 and 17, the third project was held in a community building on a large housing estate and worked with children aged 8-13 years during the summer holidays. This last project delivered workshops on graffiti art, DJ skills, urban dance and mosaics/artwork.

Qualitative methods were used to evaluate the project including feedback boards, learning diaries and photographic documentation, interviews were conducted with 16 individuals from a range of organisations involved in the delivery and organisation of the programme. The data for all the projects is presented and a number of short term health and social outcomes were demonstrated, for the Community Centre project these included: increased self-esteem and confidence observed in the young people. The young people were engaged and included as stakeholders in the new community centre, new youth activities were planned, and overall the project was perceived as successful by all those involved. A number of points were highlighted as good practice when establishing similar programmes i.e. projects should be relevant to local needs and priorities and have support from the host organisation, it is important to involve local staff and volunteers before project is delivered, and give information on the project aims and activities, participants need to be given an opportunity to plan and develop activities.

Another study which looked at excluded young people taking part in a community arts project was reported by Hadland and Stickley (2010). This was a small qualitative study which looked at the experiences of four participants who were permanently excluded from school who were taking part in a community arts project with eight other excluded young people. No detail was provided about the community arts project itself. Unstructured interviews were undertaken asking the participants to talk about their experiences of taking part in the art project; the authors described the methodology used as descriptive phenomenology.

Through analysis of the data two core themes emerged: personal experience and involvement, perhaps unsurprising as the participants were asked about their experience of taking part in the project. However a number of sub-themes also

emerged, including: enjoyment, sense of achievement, new experiences, connection with local community and supporting the community. Although increased confidence or self-esteem were not themes identified by the authors, having a sense of achievement and enjoyment in taking part may well contribute to a sense of wellbeing. Engaging with the local community is also an important finding as, according to the authors, exclusion from school may result in a lack of a sense of belonging. The study is limited by the small sample size and although the authors claim this was to allow in-depth analysis of the participants' experiences the discussion focuses on relevant literature rather than the findings of this study. The influence of the researcher in the process is also acknowledged as a potential source of bias.

Comment

Again all the research is diverse and of variable quality and the interventions used are all varied and generally little information is given about the nature of the interventions. A common theme that emerges in these papers is the use of arts activities with young people who are excluded or at risk of being excluded from society, and a key finding across the research is increased confidence and the general sense of improved well-being.

2.5 Substance misuse

The numbers of teenagers receiving help for drug and alcohol problems has levelled off after gradually rising for a number of years (NTA 2011). Most teenagers receive help for problems associated with cannabis and/or alcohol, these account for nine out of ten cases. Young people most at risk of misusing substances include: young offenders, children excluded from school, children of drug misusing children, teenage mothers, young people with mental health problems and abused children. Only two

studies were identified that evaluate creative activities and substance misuse in children and young people. Both evaluate the *Rock Challenge* however one was undertaken in the UK and one in Australia.

The *Be Your Best Foundation* (BYBF) aims to encourage young people to lead healthy lifestyles without drugs, smoking or alcohol, and supports the Rock Challenge and international anti-drugs and crime initiative which takes the form of a performance arts based competition for secondary schools. BYBF advise schools as part of the *Rock Challenge* to emphasise a positive drug free message throughout the programme and suggest that the schools encourage young people to abstain from drugs, smoking and alcohol during the programme. The aim of *Rock Challenge* is to promote healthy lifestyles amongst secondary school students by developing and building resilience amongst participants. The programme takes place in schools but is not part of the curriculum or the normal school day. Schools enter a team of young people into regional BYBF dance competitions held across the UK, the competitions take place in high profile venues to large audiences. Each team performs a series of choreographed routines which do not have to be specifically drug related but must reflect the aspirations, personalities and concerns of those who create it.

Salmon et al (2005) undertook a qualitative evaluation of *Rock Challenge* to capture the experiences and perceptions of young people involved in the programme in the South West of England. Small focus groups were held with a total of 50 participants, and a post-performance survey was administered to all the participants; 220 students responded an 88% response rate. The participants were aged 11-19 with a strong gender bias as 91% of participants were female. The study found that the young people were very positive about their involvement in the programme and the best aspects of the programme were identified as: developing team building skills and

friendships, a sense of individual and collective achievement, and increased confidence.

The authors acknowledged that collecting data in focus groups may have limited the willingness of participants to share personal experiences and the challenges of taking part; a further issue was the gender bias and the difficulty of engaging boys in similar programme. However it was concluded that arts-based initiatives to communicate substance misuse messages to young people was enriching and gave the participants the opportunity to learn about drugs and also to engage in dance activities which promote fitness and aid their personal development.

The *Rock Challenge* originated in the 1980s in Australia where it is known as the *Rock Eisteddford Challenge* (REC). Grunstein and Nutbeam (2007) conducted a quantitative study to investigate the impact of participation in the REC on adolescent resiliency and health behaviours. The rationale for investigating resiliency as a measure of adolescents resisting misuse of substances was grounded in research that indicates that socially competent people with problem solving skills, autonomy and a sense of purpose are defined as resilient and have capacity to maintain health enhancing behaviours (Garmezy 1991, Resnick et al 1997 cited in Grunstein and Nutbeam 2007).

The authors developed a questionnaire to measure resiliency and health behaviours, and the questionnaire was piloted and validated as phase one of the study. It was then administered pre-intervention to schools participating in the REC and to match control schools who were not involved. Initially 1,458 students completed the questionnaire, 226 of these were excluded from the study leaving 1232 of these 74% completed the follow up post-intervention survey. Students were grouped into three groups: REC participating, students in REC school who were not participating, and

students from the control schools. In common with Salmon et al (2005) the majority of participants were girls, although the actual gender split was not provided. The study found that there were indications that there were positive associations between participating in the REC and a range of positive personal, social and behavioural outcomes. For example in the REC school participants there were lower rates of 'ever using illicit drugs' 'recent binge drinking' and 'ever being drunk'. However, the authors identified a number of methodological problems with conducting this study, firstly, the difficulty in identify appropriate measures, secondly, obtaining a true pre-intervention point to start the study and thirdly, identifying a large balanced sample of students, and suggest that any causal associations should be treated as preliminary and with caution.

Comment

Both these studies evaluated participation in dance classes that lead to a performance in a competition. However different methodologies were used as one (Salmon) was investigating the experiences of the young people of taking part in the project whereas the other was trying to measure health behaviours and resiliency as a result of taking part in the project. Despite the different aims of the studies each found that taking part had a positive effect on the participants, including increased confidence, team building skills and sense of achievement, and also that adolescents who took part had lower rates of substance misuse compared to others in the control group. The research took place in different countries and this demonstrates it is transferable across cultures. The findings suggests that similar projects could be a useful intervention for other young people, not only in promoting mental well-being and discouraging substance misuse but also as a form of physical activity, for physical wellbeing.

2.6 Discussion and conclusions

This review has found positive outcomes in the use of creative activities for the promotion of health and wellbeing in children and young people specifically in relation to sexual health obesity, mental health and emotional wellbeing. The majority of the studies (12) reported in the review used drama, performance art or forum theatre as the main creative activity, the other activities used were dance (3), visual arts (4) and music (1).

Each of the projects reported had an overarching objective which fits within one of four main themes: to increase knowledge and inform, to increase access to physical activity, to increase social engagement and community building, to promote behaviour change and healthy lifestyles.

A number of the projects were designed to evaluate interventions introduced to increase knowledge and educate young people about prevention of HIV/AIDS, teenage pregnancy and obesity (Orme et al 2007, Mages et al 2007, Colby and Haldeman 2007, Kamo et al 2008, Lemieux et al 2008, Campbell et al 2009, Jackson et al 2010), and each of these used drama, or forum theatre as the intervention, except for Lemieux et al (2008) who used music. These studies all contained a quantitative element but all used different outcome measures and only two (Colby and Haldeman, and Jackson et al) conducted a pre-intervention assessment of the participants knowledge. Lemieux et al did test self-reported behaviours and motivations at two points in the study (before distribution of a CD and at 3 months post distribution) although not prior to the start of the intervention and the talks by the natural opinion leaders. Furthermore, only Colby and Haldeman, Kamo et al, and Lemieux et al, used control groups to assess the effectiveness of the interventions.

Despite the limitations of the studies which makes drawing firm conclusions difficult, overall the review has found some evidence that the interventions were effective methods of getting health promotion messages across to children and young people, and that the strength of such interventions is the ability to engage and interest young people because they can identify with the characters and are culturally appropriate.

In recognition of the falling levels of physical activity in children and young people dance was used as an alternative to sport, to increase access to physical activity and physical exercise (Quin et al 2007, Beaulac et al 2010,). Beaulac reported high levels of satisfaction with the dance programme, however there were also high levels of attrition from the programme, this is an issue, because if people do not attend then it suggests that it is failing to meet expectations and/or needs, as the participants vote with their feet. The Hip Hop Dance programme (Beaulac et al) was not just developed to provide physical activity for adolescents but also had the objectives of improving wellbeing and to improving social relationships. Unfortunately the paper focuses on the process rather than the outcomes which make its contribution to the evidence on the effectiveness of dance in achieving the programme's objectives limited. However there is some useful data regarding the organisation and delivery of such programmes, specifically the accessibility and length of time the programme runs for and also in low income communities the cost of attending.

Community arts projects have been shown to increase self esteem, promote civic engagement and build social capital (Johnson and Stanley 2007). The studies by Bradley et al (2004), James (2005), Kemp (2006), South (2006), and Hadland and Stickley (2010), report on projects that were introduced with the purpose of helping to build communities and increasing social engagement. In relation to each of these projects there is some evidence that the projects achieved their objectives and that

taking part in the different creative activities was empowering and re-engaged excluded young people, helping to build self-esteem and confidence.

Creative activities have also been used to promote behaviour change and healthy lifestyle and from the review it emerged that by participating in such programmes (Grunstein and Nutbeam 2007, Salmon et al 2005, Wright et al 2006, Rutten et al 2010), children and young people were less likely to misuse substances, their behaviour improved, and there was development of a range of interpersonal skills.

The most commonly reported outcome is that of increased confidence (Campbell et al, Gardener et al, James, Kemp, Wright et al, Salmon et al). It is also noteworthy that increased self-esteem, sense of achievement, empowerment, social skills, and positive behavioural changes are consistently reported outcomes throughout the review (Colby and Haldeman, Quin et al, Gardner et al, Bradley et al, Kemp, Wright et al, South, Salmon et al, Grunstein and Nutbeam). These factors along with the increased level of knowledge reported all contribute to an individual's sense of self and wellbeing.

From the review, therefore, there is evidence that participating in creative activities can have a positive effect on emotional wellbeing. The review was conducted systematically but there are similar limitations to that of Daykin et al (2008) review in terms of the strength of the conclusions that can be drawn. Dakin et al (2008) in their systematic review of literature on the impact of participation in performing arts on adolescent health and behaviour published 1994-2004 found that in the studies they identified that the methodologies used were diverse, meaning that synthesis of the findings was not possible. There were a number of issues around methodological rigor relating to sample size, the use of control groups, the adequacy of reporting procedures of data collection and analysis. This review has found similar problems

with studies published since 2004, in the quantitative studies identified most of the surveys used are not validated tools and there is a lack of validated outcome measures except in Lemieux 2008, and Rutten et al 2010. There are also issues around response rates, attrition and lack of statistical power. In the qualitative studies there is little detail provided about the process of data collection or data analysis.

3. Arts and Health Activity in Lambeth

3.1 Introduction

Arts and health as a field of activity has shown a remarkable growth across the UK over the last two decades (Clift, Camic, Chapman et al. 2009). A highpoint of interest in England was represented by the launch in 2007 of the Prospectus for Arts and Health, jointly by the Department of Health and Arts Council England. Since that time central support for this area of work has markedly declined, but nevertheless, on a local level across the country, practical arts and health projects continue to thrive. National governments in Scotland and Wales and the Scottish and Welsh Arts Councils, by comparison, continue to support work on the value of creative activity for wellbeing and health. The English Prospectus sought to provide an overview of on-going work in the arts and health field, highlighting the number and range of arts and health initiatives running at that time. This is a matter of on-going interest, to map and keep up-to-date the place of the creative arts – both in healthcare settings and within the community – and to document the diversity of connections between the multiplicity of creative art forms and a wide spectrum of health concerns – covering the whole lifespan from birth to death, and the multiplicity of health challenges we face – from prevention, to promotion, to acute care, helping people manage long-term conditions and providing support at the end of life in residential and palliative care. Mapping helps to keep those interested in this field informed of new developments, as well as demonstrating both the geographic scope and limitations of arts and health activities, and vitality of the field and the challenges it faces.

A number of recent initiatives have helped to raise awareness of practical developments across the country. These include the 'Culture and Wellbeing' website established by the 'National Forum for Arts and Health' project lead by the London Arts and Health Forum; the Royal Society for Public Health Arts and Health Awards now in its fourth year; the recent mapping of Music and Health initiatives undertaken by Nordoff-Robbins and the work of a number of national and regional arts and health networks (e.g. Breakthrough and Arts and Health South West). Alongside the concern to document the growth and diversity of arts and health initiatives has been a growing concern with evaluation and research. Here too, important and substantial developments have occurred over the last few years. These are marked by the appearance of new journals specifically devoted to arts and health research, and the growing number of systematic reviews of specific topics in arts and health reflecting the increased number of empirical studies on specific topics which allow for review and synthesis.

The value of participation in creative arts for children and young people is an area which has gained renewed recognition over the last ten years. This has been motivated in large part by a growing concern with marginalisation of the arts in the context of the National Curriculum, important national initiatives such as *Creative Partnerships* and *Sing Up* have been established in England to promote greater engagement in creative activities for young people. The motivations have been both with respect to the intrinsic value of the arts, and the importance of stimulating creativity, but also in a recognition of the wider personal and social value of creative activity for the development of personal and social skills and thus personal and social wellbeing among children and young people. Increasingly too, there is an understanding that the creative arts can contribute to wider concerns with the health and wellbeing of children and young people – particularly through the role of the arts as a vehicle for health education and health promotion.

This then provides the context for the mapping exercise undertaken within this broader 'feasibility study' on young people, arts and health for NHS Lambeth. The key concern was to gain a sense of the range and character of creative arts opportunities open to young people in the Borough, and the 'cultural capital' this represents in the context of addressing pressing concerns regarding the wellbeing and health of young people in the Borough. This mapping exercise was constrained by time and resources and is not presented as a fully comprehensive report. The objectives were to highlight the range of arts organisations working with young people with Lambeth; to identify the nature of the creative art forms used and how young people have been engaged, and to indicate the principal health and wellbeing issues that have been addressed. It is hoped that the main outcome will be a better appreciation of the wealth of experience and expertise that exists across the Borough in the creative arts and the considerable resource this represents for NHS Lambeth to plan and deliver future initiatives aimed at improving the health and wellbeing of young people.

3.2 Method

Three sources of information were drawn upon in conducting the mapping exercise.

Firstly, the project Steering Group contributed specific suggestions of arts organisations it would be worth contacting, given their previous work with young people within Lambeth on issues relevant to aspects of wellbeing and health. Specific individuals to contact were also given, where these were already known. On the basis of this list, websites of these organisations (where they existed) were visited and details of aims and objectives, locations, telephone number and key contacts were compiled in a database. Secondly, a simple, easily and quickly completed on-

line survey was created as a first point of contact with these organisations. Thirdly, this survey also provided a basis for further contact to arrange either a telephone conversation or visit to gather more detailed information.

Procedures

The Questionnaire

The questionnaire asked whether during 2010 and 2011 they had undertaken health-related projects with young people aged 11-18 years, and if so to give details of the wellbeing and health issues addressed and the forms of creative activity employed.

The questions asked were as follows:

1. During 2010 and so far this year, has your organisation run arts projects or activities with young people (11-18) which have addressed health and wellbeing issues in some way?
2. If yes, what wellbeing and health issues have been addressed through arts and creative activities or projects? (Followed by a list of issues to be ticked and 'other' for details of health issues not listed)
3. What are the main forms of arts and creative activity offered by your organisation? Please tick all that apply. (Followed by a list to be ticked and 'other' for details of arts forms not listed)

The survey was created within Survey Monkey and a link sent by email with an invitation to take part (appendix 4). Following the initial request for information on the 2nd of August, with a return deadline of the 26th, two further reminder emails were sent to non-responders.

Participants in the survey were asked whether they were willing to be interviewed to provide further information. A sample of respondents was contacted to represent a range of different kinds of organisations and art forms. A set of questions (appendix 6) was used in an informal and flexible way to guide the discussion. During the interviews notes were taken these were then written up and sent to the interviewee to check for accuracy. In a few cases, respondents offered to prepare notes in response to the questions above, but this was not formally part of the procedure, as it was assumed this would be too demanding of peoples' time.

3.3 Results

Findings from the On-line Survey

A total of 48 organisations and contacts were identified by members of the project Steering Group. Most of these were arts organisations within Lambeth, but also included major arts organisations on the South Bank or the borders of Lambeth and Southwark, which had worked with schools and young people's services in Lambeth. Information on these was compiled initially in a database drawing on organisation websites where available. Some duplication existing within this database and email contacts could not be obtained for some organisations, resulting in a final set of 37 organisations contacted for the on-line survey.

After the initial request on the 2nd of August, two further follow-up reminders were sent. In total 24 organisations replied (a fairly respectable response rate of 62%). Of these 24, 21 organisations reported having worked with young people during 2010-2011 on health related projects, but in fact 22 gave information about health issues addressed and creative arts activities employed in working with young people. Of the two organisations not providing details of work, one reported working only with

children below the age of eleven (*The Bridge Project*), and one reported no work on health issues with young people (*The National Theatre*).

Table 3.1 reports details of the wellbeing and health issues that arts organisations had addressed through arts and creative activities, given in rank order.

| Table 3.1: What wellbeing and health issues have been addressed through arts and creative activities or projects with young people? | | |
|--|-------------------------|-----------------------|
| Answers | Response Percent | Response Count |
| Personal wellbeing (self-esteem, self-confidence) | 100.0% | 22 |
| Social wellbeing (social skills, positive relationships) | 90.9% | 20 |
| Educational wellbeing (achievement, developing learning skills, transferable skills) | 81.8% | 18 |
| Mental health issues | 45.5% | 10 |
| Stress management and emotional wellbeing (coping skills, resilience, anger management) | 31.8% | 7 |
| Physical fitness and exercise | 31.8% | 7 |
| Bullying and violence | 31.8% | 7 |
| Sexual health (sexually transmitted infections, contraception, positive sexual relationships) | 27.3% | 6 |
| Alcohol and other substances | 22.7% | 5 |
| Caring for family members | 9.1% | 2 |
| Weight management | 0.0% | 0 |
| Other (please specify) | | 4 |
| <i>answered question</i> | | 22 |
| <i>skipped question</i> | | 2 |

Other health and wellbeing issues identified:

Environmental and social well-being through organising our creative workshop on environmental issues called the Whale of a Time Workshop.

We provide the workshop for all age groups supporting participants to connect with nature and our environment, identifying a close relationship between nature and social wellbeing and catering for the individual; throughout the workshop we are raising awareness of endangered species by making clay models of our favourite animal and plant species, clay is tactile and helps people to explore their creativity, find confidence and build self-esteem, find solutions how we can positively contribute towards our community and change our behaviour towards society, our planet and ourselves by getting actively involved and encouraging a positive attitude (Whale of a Time)

An appreciation of issues relating to disability, volunteerism and working inclusively with disabled people (Joy of Sound)

Development of imagination and creativity (London Music Masters)

Violence prevention, identifying abuse, domestic and sexual violence education (Tender Education and Arts)

As an initial caveat, it is important to acknowledge that the results in Table 3.1 are not based upon a random or representative sample of arts organisations working in Lambeth. The organisations contacted were identified through a brain storming process undertaken by the project Steering Group, and reflected their knowledge of organisations working with young people where health issues were known to be a focus. In addition, while the response rate was good, not all organisations completed the survey, despite three attempts. We cannot generalise these data beyond this sample, but nevertheless the replies provide some interesting insights.

What is immediately obvious from Table 3.1, and is perhaps self-evident to anyone familiar with arts-based and creative work with young people, is that virtually everyone responding to the survey sees such activities as helping to develop personal, social and educational wellbeing. This was an important theme which emerged strongly in many of the interviews conducted and will be explored further below. The second largest area mentioned, which is indeed linked with the broad sense of wellbeing, is a concern with 'mental health'. As will become clear below, this reflects also the personal and social circumstances of the young people some organisations work with, where mental health issues are significant. Importantly, the issue of 'stress management' is mentioned by a third of respondents and indicates a concern to develop strategies for helping to manage sources of stress in the lives of young people. In this respect, it is of interest that a third of respondents agree that 'bullying and violence' is an issue they deal with through their work, and two organisations have specifically addressed 'caring for family members' which for young people is likely to represent a significant burden of responsibility. The issues of bullying and violence and associated factors of gangs and community safety emerged clearly in the consultations with young people, and together this suggested that this area could be a priority for NHS Lambeth to focus on in future. The recent outbreaks of community disorder across London (including Brixton in the borough of Lambeth) further underlines the need to consider the role of the NHS in responding to the underlying issues of young people's disaffection and involvement in gang-related activities which pose risks to health and wellbeing.

Physical fitness and exercise is a concrete health issue of particular relevance given the pressing national concern with increasing levels of obesity among children and young people, but interestingly, no respondent mentioned 'weight management' as an issue. Unfortunately, healthy diet and food preparation was not included in the list of options, but neither was this flagged up by respondents under the 'other' option.

Although it appears that arts organisations are not concerned with the obesity issue, more detailed consultation did reveal that the Old Vic Theatre through its community programme is currently working on a project called 'Epidemic' in which both mental health and obesity have been identified through community consultation processes as key concerns. This project will be discussed further below. Finally, 4-5 respondents identified 'sexual health' and 'alcohol and other substances' as issues they had worked on with young people, and comments given under the 'other' category add concerns with 'environmental wellbeing', 'disabilities' and specific forms of violence and abuse arising within domestic settings and in sexual relationships. The evidence from the recent work of Christine Barter and her team at Bristol University on violence in teenage relationships reinforces the need for sex education to address these issues beyond the usual concerns of teenage pregnancy and sexually transmitted infections (Barter 2010; new report).

Table 3.2 report reports the main forms of arts and creative activity organisations have drawn upon in their work with young people, given in rank order.

Table 3.2: What are the main forms of arts and creative activity offered by your organisation in working with young people?

| Answers | Response Percent | Response Count |
|---------------------------------|-------------------------|-----------------------|
| Visual arts | 63.6% | 14 |
| Drama/theatre | 63.6% | 13 |
| Film making | 45.5% | 10 |
| Singing | 31.8% | 7 |
| Digital arts | 27.3% | 6 |
| Instrumental music making | 22.7% | 5 |
| Dance | 18.2% | 4 |
| Sculpture | 18.2% | 4 |
| Ceramics | 18.2% | 4 |
| Horticulture | 4.4% | 1 |
| Other (please specify) | | 5 |
| <i>answered question</i> | | 22 |
| <i>skipped question</i> | | 2 |

Other creative activities identified:

We mainly work with clay but also offer people to use different mediums including music, poetry, painting, filmmaking, animation as well as get involved through other ways of cultural, social and environmental projects, showcasing these in the Whale of a Time Community at our website and during events (Whale of a Time)

Inclusive music and arts experience and practical training through project volunteering, and JOS themed training events (Joy of Sound)

Putting a magazine (and related digital channels) together - this could include idea generation, interviewing, writing, design, illustration, photography, and filming for example (Livity)

Fashion – dress-making and hat-making with pattern-cutting and machining skills mosaic signage for community projects such as dance studios, Drs' surgeries (Creative Sparkworks)

Music composition and recording and creative writing (Kids Company)

Six respondents indicated that their organisations worked through one art form which reflected in an obvious way the focus of the company. Thus *Pegasus Opera* offers opportunities for young people to sing through their *Singing Academy*, the *Young Vic* is concerned centrally with drama/theatre and visual arts are the focus of *London Print Works*. The remaining organisations draw on a wide-range of different and often complementary art forms. *Latimer Creative Media*, for example, produce films on topical issues affecting young people – and so draw on drama/theatre and digital and visual arts as essential parts of this process. *Kids Company* has a diverse team of artists working creatively with young people through every form of artistic medium, and also further activities not listed on the questionnaire.

Visual arts and drama/theatre emerge as the most commonly mentioned arts forms followed interestingly by film-making, singing and digital arts. An important feature of creative activity is the extent to which it involves group activity or is pursued individually (while perhaps in a group context). Singing in a choir, or performing in a play is both creative and inherently social – while making pottery and creative writing involves a greater degree of individual

focus. This distinction is also of importance where the arts are being used therapeutically, and whether the concern is with helping a young person to explore some personal issue in a protected creative space, or whether the concern is more at the level of fostering constructive social relationships. An important theme which emerged from the interviews and visits is the importance of group work in creative activity with young people and also working towards performance or dissemination events.

Themes from Interviews and Visits

So far some of the broad parameters of arts and health work with young people in Lambeth have been outlined, but this does not give any sense of the character of the projects – the creative energy, the specific issues explored and the outcomes for young people. The websites of organisations are invaluable in this respect – not only for the descriptions of projects, but for their inclusion of photographs and film clips. A number of organisations have also been careful to fully monitor their work producing internal evaluations, and in some cases, external evaluators have been employed and reports produced. Interviews and site visits also helped further to understand how organisations are working with young people through the arts; what their experiences are of the circumstances and characteristics of the young people they are working with; the challenges they are facing in their lives, and most especially the impacts they observe socially, emotionally and behaviourally in the young people they are working with.

Two distinctions are helpful in presenting more detailed information about the organisations surveyed, and the focus of their work in providing arts activities with young people in Lambeth and their relevance for wellbeing and health. The first

concerns whether organisations or projects are primarily concerned with artistic processes and products, with health and wellbeing outcomes achieved through outreach or educational initiatives an additional bonus; whether their concern is centrally with promoting the health and wellbeing of young people through engagement with creative processes, or whether there is a dual concern with creative processes and products and health outcomes. The second is the extent to which organisations are working with young people experiencing significant challenges to their health and wellbeing or with special needs of some kind. Some projects engaging directly with young people with such needs, to provide training, support or therapeutic intervention, whereas others are working with young people who are not affected currently by such challenges. These distinctions together create a useful conceptual model (see Figure 3.1). It is important to stress that an individual organisation or project may also straddle some of these distinctions and categories.

A further dimension of importance relates to the wider impacts of a given project through dissemination or some form of performance event, creative product, exhibition or publication. Here a small group of young people may be directly involved in the project, but a wider group of young people and indeed their families, teachers and the wider community, may benefit from the work they produce. This point is important from a public health and health promotion perspective, as some young people may gain direct benefit from participation, a considerably larger number of young people and adults may be touched in a positive way by their creative involvement.

| Figure 3.1: Young people’s health and wellbeing and the focus of arts projects | | |
|---|---|--|
| | Health or care needs among participants | |
| Outputs and Outcomes | Working directly to support people experiencing challenges to wellbeing | Working with young people in the community to promote skills and awareness |
| Arts-focus without a specific health or wellbeing content | Arts with a skills and performance focus for young people with serious health and wellbeing needs Examples: <i>Young Vic, Joy of Sound</i> | Arts with a skills and performance focus for young people Example: <i>Pegasus Singing Academy</i> |
| Arts-focus with health and wellbeing content | Arts with a skills and resourcing focus created by young people with experience of wellbeing issues or who are ‘at risk’ Examples: <i>Coral Dance Company, Tender Education and Arts, Latimer Creative Media</i> | Arts with a skills and performance focus with a wellbeing and health content for young people Example: <i>Old Vic Epidemic Project, Futures Theatre Company</i> |
| Health and wellbeing outcomes sought through creative activity | Arts with a therapeutic focus for young people with serious health and wellbeing needs Example: <i>Kids Company</i> | Arts with a health promotion/ education / advocacy focus created by young people Examples: <i>Whale of a Time, Latimer Creative Media</i> |

Arts Engagement for Young People with Health or Care Needs

The idea that creative arts activities can be used for therapeutic purposes with young people experiencing specific health, care or learning needs is well established.

Indeed, the range and variety of creative activities and their flexibility as a resource are ideally suited for this purpose, especially where children and young people would find it difficult if not impossible to talk about their experiences or health needs. A

number of the organisations surveyed and visited worked with young people with a range of health and wellbeing challenges, including severe cases of family neglect and abuse; young people with diagnosed mental ill-health issues, and young people with social care and learning disabilities. However, the philosophy under-pinning involvement in creative arts projects could vary considerably from one organisation to another. In what follows, case studies are presented based on the interviews which serve to illustrate these differences.

The work of the *Taking Part* programme at the *Young Vic* provides an example of an arts organisation working with young people with mental health needs through a partnership arrangement with an NHS Trust, where the children's difficulties can be 'quite extreme'. However, the focus of the activities engaged in by young people is not as a form of therapy, but is on the development of 'theatre related skills.' It is accepted that such work has 'secondary' outcomes, but the primary goals are artistic. The fact that this programme has the support of clinicians, however, and that it has run for several years, indicates that NHS personnel value what is offered to children and young people for its therapeutic benefits.

Other arts organisations may also be working with young people with health, social care or learning disabilities, or who are considered as being 'at risk', where the primary focus is not therapeutic in a creative arts therapy sense, but addresses their needs for support, training, inclusion, awareness-raising and 'empowerment' through arts activities. Examples here include *Tender*, *Cool Tan Arts*, *Joy of Sound* and *Coral Dance Company* – all arts and special issues companies that necessarily work with and advocate for the welfare of young people facing particular challenges.

Coral Dance Company, for example, 'creates and tours original performance work' with individuals (performers dancers and artists) who have learning disabilities

together with those who have not (from *Coralis*'s website). The emphasis is on working children and young people 'hard' to achieve worthwhile outcomes in performance, and where possible some certification to recognise their efforts and skill development. An important aspect of *Coralis*'s work with more profoundly disabled young people is the respite they offer parents from the stressful demands of care.

Tender is a second example of an issues-led organisation which draws heavily on the creative arts to raise awareness of domestic and sexual violence issues and empower young people in preventive work and early interventions. A growing body of evidence on the degree of violence and abuse young people experience in their relationships and peer groups demonstrates the need for such work (e.g. Barter, McCarry, Berridge and Evans, 2009). The work of *Tender* is impressive for its commitment to partnership working; the number of young people it has engaged with; the quality of its creative initiatives through 'drama-based, enquiry-led methods' and the commissioning of robust independent evaluations of its programmes.

We have seen that the *Young Vic* through its *Taking Part* programme is working with young people with serious mental health needs, but it does not regard the programmes it offers as 'therapeutic'. Rather the focus is on developing skills and insights in the field of theatre and drama. The gains young people in their recovery and improved wellbeing are welcome but secondary outcomes. Other organisations such as *Coralis Dance* and *Tender* are working with children and young people with health or care needs and emphasise the importance of artistic quality in the products produced, but focus more centrally on the resource that the creative processes of dance and drama offer in improving well-being and empowerment in addressing the issues they are centrally concerned with. *Kids Company*, in contrast, is an organisation with a clear commitment to the significance of arts-based activity as a form of therapy for children and young people damaged by neglect and abuse.

Where this abuse has been severe, Camila Batmanghelidjh explained, one-to-one work is essential, with careful attention to the potential risks involved. Where attention spans are restricted and children are experiencing the effects of trauma on their levels of stress-related levels of vigilance and reduced capacity for reflection and self-control – creative work needs to be immediate, and time to plan and discuss is potentially threatening. More often, however, creative work in groups is possible, and *Kids Company* has a considerable reputation for the originality of its creative projects with young people, and its success in work with major arts institutions and performance venues. These include the *Shrinking Childhoods* installation exhibited in 2006 in the grounds of *Tate Modern*; the *My Life Illuminated* exhibition of young people's art work at the *Southbank Centre* this year; the *Shoe Box Project*, and the *Kids Company* Choir, which performed at the special Family Prom as part for the 2011 BBC Proms season at the Albert Hall.

Kids Company has also been at the forefront in promoting research on the psycho-neurological consequence of early childhood neglect and abuse, and in assessments of the power of creative activity in rehabilitation.

Arts Involvement with Young People in the Local Community

Most of the arts organisations surveyed provided opportunities for creative engagement with young people in general, rather than those with identified health or care needs. As with the examples described above, organisations varied in terms of their principal focus. *Pegasus Opera*, for example is 'the UK's leading professional, multiracial touring company' (from the company website) with education or outreach

programmes providing opportunities for the local community to engage with the arts (in their case specifically singing); whereas *Latimer Creative Media*, equally concerned with quality artistic products, are more directly committed to addressing issues directly affecting the welfare of young people. They work collaboratively with young people, to create films as resources for awareness-raising and empowerment, and actively involve them in dissemination and education activities. Between these two, a current project in process at the *Old Vic* provides an interesting example of a mainstream prestigious arts organisation focusing on the theme of 'public health' for its next major community performance project – and identifying through creative consultation processes the issues of 'mental health' and 'obesity' as principal themes for this production.

In the course of interviewing key individuals leading the community-based work of these organisations, a wide range of issues were raised which are significant in thinking about future health promotion work that NHS Lambeth might seek to promote drawing on the creative arts.

With the education and community work of *Pegasus Opera*, we see clear illustrations of the power of engagement in creative arts activities to promote personal and social skills in young people – including encouraging focused concentration on a task, working together in groups, and developing greater awareness of self-presentation. In addition to singing, young people were also engaged in creative writing and composing songs, and working towards productions which were filmed. Such activities clearly serve to promote a sense of pride and achievement, enhance confidence and self-esteem, and challenge the assumptions of teachers and parents regarding the creative capabilities of young people.

The *Old Vic Education Programme* is varied with work undertaken on a regular basis with primary and secondary schools. The principal funders for education and outreach work have been Barclay's Capital and a private charitable foundation established by a couple who are passionate about the *Old Vic*. Barclay's Capital are keen to support involvement of children from boroughs around the Canary Wharf area where they are based such as Greenwich, Hackney, and Tower Hamlets, but work has also involved schools in Lambeth. One the most innovative ventures currently in development is project entitled *Epidemic*, which aims to explore two major public health issues – mental health and obesity. This production, if the *Old Vic* succeeds in gaining further funding, will involve mainly adults, but they have plans to create a smaller production and educational resources for schools in Lambeth focused on obesity. There is considerable scope for NHS Lambeth to be engaged with the spin-off from this project in a productive way.

An important aspect of the work of the *Old Vic* out-reach programme is that their productions with young people and with the wider community are based on extensive consultations and the material generated is then used by professional writers to create dramatic scripts. In addition, the productions are performed and open to the public or in the case of work with young people, are toured widely, so large numbers of young people have the opportunity to experience a theatrical production with a topical theme.

Two further contrasting organisations illustrate the way in which creative arts activities are used to raise awareness and understanding of issues affecting the health and wellbeing of young people. *Whale of a Time* and *Latimer Creative Media* are at two ends of a spectrum of technological sophistication, but both promote the value of actively engaging young people in a wider network to campaign on issues affecting their wellbeing. *Whale of a Time* offers opportunities for people of all ages to

engage in clay modelling in the context of discussions of environmental issues and global threats to biodiversity. The central concern is to raise awareness of the profound importance of protecting the natural environment for the health and wellbeing of humanity as a whole. Young people through engagement with *Whale of a Time* can be part of a wider network campaigning on 'green' issues. *Latimer Creative Media* in contrast engages young people in creative activity through filming and digital and social media to explore serious wellbeing-related issues. Young people work in teams not only to produce films, but also receive training in disseminating the material and educating other young people.

3.4 Summary of Issues emerging from the mapping exercise and case studies

- A considerable variety of creative arts activities are available for young people in Lambeth through third sector arts organisations and world-class arts institutions
- A survey of providers of creative arts activity showed that many see the creative arts as a means of addressing health issues with children and young people
- The major areas of contribution relate to promoting life skills among young people which are important to their personal, social and educational wellbeing – this is likely to be endorsed universally
- Creative arts activities are highly accessible to children and young people and also provide a means through creative products and performances of engaging their families and the wider community
- The arts have a particularly central therapeutic role in addressing serious mental health issues and trauma among children and young people

- A range of issues related to physical wellbeing can be addressed through performing arts. Dance in particular has a potentially important role in promoting of physical fitness and body awareness
- Theatre and drama workshops and creative technologies have considerable capacity to raise awareness and educate young people on a wide range of health issues and risks
- Performing arts can also help young people to be self-reflective in terms of how they present themselves to others
- Better communication between arts organisations and the health service in Lambeth, would help the NHS appreciate the considerable resource that is offered by creative activities in promoting wellbeing and health among young people

4. The Drama Workshops

4.1 Introduction

This section of the report describes the processes and outcomes of consultations with children and young people (CYP) on their views of health and well-being and the role that creative activities may play in exploring and addressing problems in the future. Seven participatory drama workshops were used as a tool for gaining the CYP's views. The workshops involved 111 CYP and were led by three experienced actor-facilitators from Box Clever Theatre, a community theatre company that specialises in CYP's issues. The workshops were delivered in a range of settings including schools and a community youth centre. Two members of the Sidney De Haan Research Centre, Trish Vella-Burrows (TVB) and Hilary Bungay (HB), were in attendance at the workshops to record the outcomes through written notes and audio recordings.

4.2 Using drama with children and young people

Christensen and James (2000) observed that using drama activities for social enquiry can encourage young people to take part; this applies equally to consultation with CYP, as in the current project, and to more formal research. In a report on the use of Forum Theatre, a specific participatory drama model, which explored refugee and homelessness issues in schools, Day (2002) observed the participants frequently referred to the experience as enabling them to put 'yourself in their shoes' (p.27). The phrase suitably encapsulates the cognitive and emotional phenomenon that participatory drama activities aim to engender.

Referring specifically to drama-related research, a number of authors offer conjecture as to the underlying reasons for its potential success. Firstly, individual participants are likely to feel empowered to voice their opinions through fictional characters because their sense of personal status amongst peers is not threatened (Day 2002). Secondly, each participant can make themselves heard within groups. This is enabled because the process is democratic, in other words, *all* stake-holders can be actively involved in the same or in a similar manner (Kemmis and McTaggart, 2000; Bradley and Morss, 2002; Bradley, Deighton and Selby 2004). Thirdly, the process differs from other methods of group enquiry, such as focus group discussions, because it tends to neutralise social hierarchies and status. Fourthly, the process places an emphasis on the present. It accepts that experiential knowledge is a shifting phenomenon, which centres importantly on the relationship that individuals have with one another and their environment at any one time (Beck 1997 p. 123). Fifthly, in addition to young people feeling empowered by having their voices heard, there are important social benefits. For example, Beck (1997) observed that cohesion amongst participants often emanated from their discoveries of contemporaries living with and through the same or similar problems.

Daykin et al. (2008), amongst others, assert that appropriately facilitated participatory drama activities have the potential to inspire critical thought and reflection, which in turn can help young people to understand human interactions, to empathise with others, to express points of view and to internalise alternative points of view (Wagner, 1998; Day 2002; Rossiter et al., 2008). The potential support that these activities offer CYP individually indicates their inherent capacity to maximise a true representation of participants. Ideas, thoughts and feelings can be presented and re-presented in a process in which each participant has shared ownership from the outset (Conrad, 2004).

An integral part of the workshops were small, facilitator-led, peer-group discussions which aimed to elicit a deeper understanding of issues that arose as themes through the development of the drama. Such discussions may be fruitful in established social groups because the individuals are used to drawing on these networks to deal with matters that arise from day to day (Kahn & Manderson 1992). Further reiteration and/or refutation can occur because of the likelihood of stories being swapped and challenged (Barbour and Kitzinger 1999; Green 2007). Moreover, facilitators can seek confirmation, clarification and/or elaboration on the views of participants in order to understand what underpins their expressed views.

4.3 Method

Participatory drama workshops were used for gathering the views of a sample of CYP from Lambeth. During the workshops, participants were invited to take part in small facilitator-led peer-group discussions in the context of their familiar school/social groups. Both the drama element of the workshops and the discussions aimed to give participants shared ownership of the consultation process throughout. In this way, the outcomes were the result of information being presented by the CYP, explored and reflected upon, examined, re-examined and re-presented in various ways. The methods were selected to reflect the interpretive philosophy that underpins formal qualitative research. This aims to gauge reality by taking into account the social constructs in which people live and the sense that each individual makes of them at any given time (Saks and Allsop, 2007).

4.4 Organising the drama workshops

The process of organising the drama workshops began in consultation with Polly Wright, Director of *The Hearth Centre* (Health Education and the Humanities with Art at the Heart), who has specialist knowledge in using the arts to animate key issues in health and social care (<http://www.thehearthcentre.org.uk>). This led to the engagement of *Box Clever Theatre*, a theatre company dedicated to young people (<http://www.boxclevertheatre.co.uk>). A sharing of experiences and professional development between Polly Wright and *Box Clever's* Artistic Director, Michael Wicherek, aimed to ensure the most effective workshop delivery. Decisions about where, when and with whom the workshops should be undertaken were made in consultation with a wide-ranging team of advisors. This included: the project's steering group; five practitioners/personnel working with CYP in Lambeth, and/or in the field of arts and health, and/or in drama and research; nine young people aged between 14 and 17 from the Hub Youth Club, Lambeth.

Six workshops were proposed with the available funding. Priority was given to identifying the widest representation of young people. Advice and sign-posting from the advisors and a number of other local practitioners/personnel from public health directorates, and private and third-sector arts and health agencies for CYP in Lambeth proved vital in this procedure. The resultant framework for target groups for the workshops was as follows:

1. A group of Yr 6 children from a primary school in Lambeth
2. A group of young people from a secondary school in Lambeth
3. A group of 'children looked after (CLA) young people
4. A group of young people attending a community youth club, aged 15 – 18
5. A group of excluded young people aged 11 – 14
6. A group of young people with special needs aged 15 - 18

Details of the practical elements of the workshops, a description of their proposed content, methods of recording information and the policy for anonymity was sent via email together with an invitation to the gate-keepers of potential participants (e.g. head teachers, family liaison officers; community engagement personnel; youth workers). These were identified and initially contacted with particular help from Hannah Quigley, Lambeth Children's Learning Centre, and Olufemi Saki, Youth Lead for Lambeth Primary Care Trust.

4.5 The workshops

The workshops were run by three actor-facilitators from *Box Clever Theatre*. All of the workshops were highly interactive but they varied in format according to the age of the participants and the setting. The two workshops with the younger age group (2 x Year 6 classes) started with whole-class warm up exercises, which were designed to be fun, to promote listening, and to engage the participants in the activity. The class was then divided into three groups with one facilitator working with each. In these small groups the facilitators introduced the idea of a fictitious young character. They asked the children to think about the issues that a young person coming to live in Lambeth may face and be concerned about. The children were encouraged to create a living picture or tableau to represent a concern that they felt was important to show the rest of the class. This was followed by one of the facilitators acting out a short dramatic monologue about a road traffic accident. Using a Forum Theatre-style approach, the children were invited to discuss alternative actions that may have prevented the accident. Although the content of the theatre piece did not reflect issues raised by the children themselves, it did elicit some critical thinking leading to a motivated discussion about the practical and emotional elements of road safety. This process may have encouraged the children to speak more openly about their views and attitudes in general. The class was divided once again into small groups

and the facilitators led discussions with the groups about the arts or creative activities that the children enjoyed. They were asked how they thought these activities could be used to get across messages about health and wellbeing to people of their age.

In the older age groups (13 – 18 yrs) the format of the workshops was similar with some adjustments relating to age and group sizes. All of the workshops started with energetic warm up activities with the whole group. As with the workshops for younger age groups, the young people worked in large and/or small groups to: identify concerns that affect their everyday life, and to present living pictures or tableaux representing those that they regarded the most important to show the rest of the group; to engage in a Forum Theatre-style discussion following a dramatic monologue performance by one of facilitators of a section of the 'Hate Play', which centred on bullying; to discuss how creative means might be effective in helping YP with their everyday concerns; discuss how such activities might be most effectively delivered. Another activity used to elicit information in the older age group workshops was one where participants plotted their individual levels of anxiety for each of the previously identified concerns. In this, one participant stood still in the centre of the room. He/she represented one of the concerns, for example, knife crime. Starting from a distance of about 4 metres, another participant walked slowly towards to the first stopping only when a third shouted 'stop'. The distance between the first two participants gave a visual representation of the third participant's level of anxiety about that particular issue: the closer the two participants, the higher the anxiety.

Divided into three groups, the young people from Year 8 were encouraged to create a short creative piece that focused on 'wellbeing' to show to the rest of the class. One group wrote a rap song about eating too much sugar. Another wrote a short story-board for a play about a footballer who lost his place in the team because of injury

leading to over eating, obesity and eventual loss of friends due to depression. This activity was followed by one of the facilitators giving a personal account of his own involvement in a gang earlier in his life, the difficulties that he encountered as a result and how he resolved them.

Attitudes and levels of engagement with the workshops

The levels of engagement in the workshops were generally high. Interestingly, some of the warm-up activities, which were used in the children's workshops and may have been regarded by the older age groups as childish, were received with equal enthusiasm by all participants. In all cases, within a few minutes these activities appeared to breakdown any initial reticence amongst participants to take part. This took slightly longer in the youth group, perhaps because the culture of the club was far more informal than in the school groups. Participants arrived in relay over 45 minutes or so and spent time talking to each other before seeming comfortable to come together for the workshop. However, in this, and most of the other workshops, participants appeared attentive and engaged throughout. The dynamics between participants was generally positive, with much friendly banter and teasing amongst the older participants. The exception to this was the workshop with the young people in Year 8, in which peer tension was apparent with some individuals refusing to work with others in small groups. Around a quarter of the participants in this workshops appeared to disengage either from the outset, or during the workshop at some point. The facilitators varied their approach towards, and the duration of activities to maximise interest. Although a small number of individuals did not contribute to the workshop, it nevertheless yielded a good deal of important information.

Monitoring outcomes

TVB and HB attended each of the workshops. Using a standard form, factual details about workshop's venue/date/times, number and age(s) of participants, and others present, were recorded. Written notes were made of topics as they emerged in the workshops. A post-workshop consultation took place between the adults present, including the workshop facilitators and teachers or youth worker(s). This aimed to ascertain the individuals' views on participants' level of engagement and the outcomes of the activities.

With verbal permission from the person in charge and the CYP themselves, elements of the workshops were audio recorded. In addition, TVB and HB made written notes on topics as they arose. No names were recorded and no individuals are identified in this report.

4.6 Findings from the workshops

Six workshops took place over the course of a week in July 2011 and a week in November 2011. Table 4.1 shows when the workshops took place, the age and number of the CYP who took part, and the other people present.

The outcomes

The outcomes of the workshops were analysed under three main themes:

- The range and prevalence of concerns that affected the everyday life of participants;
- the level at which the CYP reported having taken part in health-related creative activities in the past;
- the CYPs' opinions on which activities might be most effective in supporting their identified concerns and how they should best be delivered.

| Table 4.1 Workshop Timetable | | | | | |
|-------------------------------------|-----------------|--|------------|---------------|---|
| Workshop date | Time | Venue | Age of CYP | Number of CYP | Others present |
| Tuesday 12 July | 10 -11 am | Primary School 1 | 11/12 | 26 | Teacher & Assistant Reintegration Officer (with SEN child) |
| Tuesday 12 July | 11.30- 12.30 pm | Primary School 2 | 11/12 | 24 | Teacher & Assistant |
| Tuesday 12 July | 6 - 7.30 pm | Youth Club | 14 - 18 | 10 | Youth Leader |
| Wed 13 July | 11 – 12.30 noon | Secondary School 1 | 12/13 | 30 | Teacher & Assistant |
| Wed 13 July | 2 - 3.30 pm | Secondary School 2 | 15/16 | 9 | Teacher & Assistant |
| Wed 9 Nov | 7 – 8 pm | Community group of YP with learning disabilities | 16 + | 12 | Youth worker & volunteer |
| | | | TOTAL | 111 | |

Identified concerns affecting everyday life

The main concerns that affected the everyday lives of workshop participants were overwhelmingly issues that would be described as social rather than related to physical health and wellbeing. Table 4.2 gives an indication of the apparent level of concern within the different workshop groups.

Table 4.2: Children and young people’s concerns in everyday life and the level of concern expressed

| Themes | Yr 6 (11) | Yr 8 (12 - 13) | Yr 10 (15 - 16) | Youth Club Group (14 - 17) | Excluded YP (14- 16) | YP with Learning Disabilities |
|----------------------|-----------|----------------|-----------------|----------------------------|----------------------|-------------------------------|
| PERSONAL SAFETY | Major | Major | Major | Major | Major | Major |
| DISCRIMINATION | Major | Major | Major | Major | Major | Major |
| ACADEMIC ISSUES | Major | Moderate | Major | Major | Major | Major |
| SEXUAL HEALTH | Moderate | Moderate | Major | Major | Major | Major |
| SELF WORTH | Moderate | Moderate | Major | Major | Major | Major |
| DRUG ISSUES | Major | Moderate | Moderate | Major | Major | Major |
| FAMILY COHESION | ** | Moderate | Moderate | Major | Major | Major |
| HAVING A VOICE | Major | Moderate | Moderate | Major | Major | Major |
| PHYSICAL HEALTH | Moderate | Moderate | Moderate | Major | Major | Major |
| ENVIRONMENTAL ISSUES | Moderate | Major | Major | Major | Major | Major |

** Mixed views: a personal concern and of positive value

Table key:

| A major concern | A moderate Concern | A slight concern | A personal concern | Not raised |
|--|---|---|--|------------|
| Raised by one or more participants and expressed as a big problem by most others | Raised by one or more participants and expressed as a problem for around half the group concern | Raised by one or more participants and expressed as a problem for around a quarter of the group | Raised as important by one participant | |

The overarching themes relate to a range of more detailed concerns, some of which were consistent across the age-range of participants and some differed between the age groups.

Personal safety

Issues of personal safety were raised as one of the first and most major concerns in all of the workshops. This was consistently centred on fear of gang/knife/gun crime and aggressive or violent bullying in the streets.

Boys from the Year 10 group were worried about inadvertently wandering into gang territory. Participants from Year 8 expressed concern about being bullied into gang activity. Participants from Year 6 and 8 also raised 'mugging', such as having an 'i-pod' or 'i-phone' stolen, as a personal safety concern.

Discrimination

Elements of discrimination were raised as a major concern in all of the workshops. Exclusion from peer groups and bullying in and out of school were the primary concerns. Being accepted by, and maintaining a position within a peer group was raised as important by participants of all ages. Participants from both Year 8 and Year 10 referred to the term 'neek', meaning an individual lacking in street credibility, which they observed often led to exclusion from the strongest peer groups. The status of 'neek' was highly undesirable because such individuals were thought to be vulnerable to 'hench' people, (bullying clique leaders). Illustrative comments about the effects of discrimination from participants from Year 6 included, '*Having no friends means you're picked on*' and '*Being picked on; then you feel like an outsider*'.

Academic issues

Academic issues were a major concern for participants in Year 6 and 10; a moderate concern for participants in Year 8, but was not raised by the youth club group. Participants in Year 10 felt pressurised by the weight of school work and anxious about exams. The focus of this anxiety related to future prospects, expressly, '*You won't get a good job*' and '*Money problems: [you] won't have enough money to live on*'. Participants from Year 8 and Year 6 also felt anxious about the weight of school

work and the latter expressed marked concerns about transition from primary to secondary school. These concerns centred on getting into a good secondary school and separation from established friendship groups.

Sexual health

Issues about sexual health were a major concern for participants in the youth club group and in Year 10, a moderate concern for participants in Year 8 and a personal concern for one participant in Year 6.

Participants from the youth club group and Year 10 were concerned about catching sexually transmitted diseases and unwanted pregnancies. Participants from the youth club group suggested that some young people have a cavalier attitude towards contraception.

Participants from Year 10 said that in their experience too much emphasis was placed on the mechanics of sex in sex education and not enough on the emotional aspects. They also felt that routine support was less available in the upper school years and where this was available it targeted '*problem kids*', rather than the majority. Participants in this group also suggested that the less-than-discreet location of the local sexual health clinic inhibited young people from engaging with it. A few participants expressed concerns about pregnancy leading to parental/family abandonment, expulsion from school and/or the baby being taken into care.

Participants from Year 8 focused on unwanted pregnancy as a concern about sex and one participant in Year 6 raised '*puberty issues at school*', which related to problems associated with menstruating at primary school.

Self worth and validation

Issues relating to self worth and/or validation were a major concern for participants in the youth club group and Year 10, a moderate concern for participants in Year 6 and a slight concern for participants in Year 8. These issues appeared to manifest as concerns about finding a partner and aspirations for the future, which encompassed academic achievement. In the youth group and in Year 10, male participants said that the ability to get a girlfriend was a major concern. Male participants in year 8 also expressed this as a slight concern but it was not dwelt upon.

Participants from Year 10 and Year 6 expressed issues of self worth in relation to academic achievement and allocation of secondary school. One participant in Year 8 raised the potential for fatal consequences of a demolished self worth associated with being bullied, which can lead to suicide.

Participants from the youth club expressed concerns about getting a job and the ability to support a family in the future. Five of the nine participants aspired to bring up future children away from Lambeth but they worried that without a job, or with the poorly paid jobs that might be available to them, this would be unlikely. This issue was also raised by participants from Year 10 but it related to concerns about reaching academic targets (see above).

Drug issues

Concerns around drug-taking were raised as a major concern for participants in the youth club group, a moderate concern for participants in Year 10, a slight concern for participants in Year 8 and not raised by participants in Years 6. In the older age groups, participants worried about being bullied into drug dealing. Participants in Year 8 were concerned about being drawn into drug-taking. It was interesting to note that no references were made to the physical health issues associated with drugs.

Family cohesion

Issues relating to family cohesion were raised as a moderate concern for participants in the youth club group and in Year 10 and a slight concern for participants in Year 8. One participant in Year 6 raised a concern about family cohesion relating to money problems. In contrast to expressions of concern about family cohesion in the other groups, four or five participants from Year 6 referred to positive family cohesion in which talking to parents provided support for their everyday concerns.

A small number of participants in the youth club group and in Year 10 were concerned about being bullied by siblings or other family members. Participants in Year 10 also raised concerns about parental disapproval and/or disinterest resulting from their not understanding young people's issues.

Having a voice

Issues relating to young people being misunderstood and not having their voices heard were raised as a moderate concern for participants in Year 8 and a slight concern for participants in Year 10. These problems were believed to relate to an apparent disrespect amongst adults in charge of young people, which resulted in the latter's views and needs being ignored. Issues of having a voice were not raised by participants in Year 6, or, interestingly, by the youth club group.

Physical health

Issues of physical health were not raised by any of the workshop participants without some prompting from the workshop facilitators. When asked, *'What about your physical health; now and as you get older. What sort of things might worry you?'*, most responding participants appeared to normalise some level of physical ill-health in older age. Comments such as *'When you're old you don't care'*, and *'No one thinks about it, like when you get old'*, indicated that participants did not personally relate to

getting older, neither did they appear to consider the effects that their current lifestyle might have on longer-term health management.

On further questioning, however, issues of physical health were briefly discussed and identified as a slight concern for participants in the youth club group and Year 10 and a personal concern for one participant in each of the Year 8 and 6 groups. In all cases, obesity was referred to. For youth club participants, this centred on obesity limiting sports activities. For participants in Year 10, 8, and 6 the likelihood of being bullied as a result of obesity was highlighted. Body-weight issues were elaborated on amongst participants in Year 10, who highlighted a focus on '*skinny people in the media*', resulting in anxiety about body weight leading to anorexia.

The effects of smoking were highlighted by one participant in the youth club group, who related it to potential limitations in playing football.

Environmental issues

Concerns about the effects of global warming, pollution and people not using recycling services, was raised by one participant in Year 6. No other references were made about this issue.

Taking part in health-related creative activities

No participant could immediately identify an example of a health and wellbeing related creative/arts project in which they had taken part in the past. Those that were mentioned, as the discussion developed, were sketchy in detail. They included accounts of a painting and healthy-eating project and a talk by an ex-gang member with advice on how to avoid being drawn into gang activity (Year 6 participant). One participant mentioned Kids Company in the context of "*someone to tell, if you've got a problem*" (Year 8 participant). Most of the young people from the youth club had

either seen, or knew about a film called 'Kidulthood', which highlights a whole range of youth issues. One young person said of the film:

"It had everything about it; gun crime, pregnancy, relationships. So if you didn't know about it after that, you'd have to be stupid".

Using the creative/art activities to support health and wellbeing

Participants in each workshop were asked to give their opinions about creative or arts activities that might be effective in exploring and addressing their identified health worries and how these activities might best be delivered. The process started with participants being asked to identify creative arts. It was difficult to generalise about the order of activities in which participants might prefer to engage for this purpose. One of the first suggestions across all of the groups was drama. This may have been an uppermost thought because the groups were currently engaging in drama activities for the purpose of this consultation. Table 4.3 illustrates the apparent preference for creative art forms.

The preference for film-related activities was because of the technology involved. Painting, as a visual art form, was arguably raised because of the common synonymy between 'art' and painting.

The non-performance element of language arts appeared to appeal to participants, in addition to the potential for special interest topics to be addressed, for example *"Something funny", "Something scary", "Something about sports: football"*.

| Table 4.3: Preferences for creative art forms | |
|---|--|
| Creative Art Form | Type of Activity |
| Visual Arts | Animation film Films/videos Painting |
| Language arts | Play-writing Story writing/reading Diary Letter-writing |
| Performing arts | Forum theatre Musical Theatre Acting/plays |
| Music | Music (lyrics/rapping) |
| Multi-media | Themed painting/textiles/poetry/play-writing Healthy eating project - visiting farms; harvesting produce; cooking; photography Body awareness project – visiting Science Museum; painting; sculpture |

A Forum theatre-style activity was used as part of each workshop. This may have encouraged participants to include it in the list of options, either because it appealed to them, or because it had so recently been brought to their notice in the current consultation exercise.

Interestingly, music was raised rarely as an arts media that has potential to address health and wellbeing, although a four or five participants from Year 8 composed their own short rap-song during their workshop.

A small group of participants in the Year 10 group highlighted the potential value of multi-media activities. This was based on the certainty that *“Everyone can do something”*.

Using television and, to a lesser extent, radio, to put out health messages to a wide number of young people was thought to be effective, because of the media’s

omnipresence and popularity amongst young people. It was suggested that this should be linked to personalities who are admired by young people.

Reality arts

A significant number of participants advocated the use of reality arts in which real-life scenarios that relate to them personally are used as a focus for arts projects. Suggestions of the most effective media included plays, films and talks.

Confidence in creative abilities

In all of the age groups, participants tended to express a preference for interactive, rather than passive activities overall. However there were some age-related differences. In the younger age groups (Year 6), participants appeared more willing to engage in performance-based activities whilst in the older age groups on the whole participants preferred non-performance activities. The following comments are illustrative of some older participants' lack of self belief in their creative ability. The first comment also illustrates some level of inertia.

*“Do a play – **watch** a play. You don't have to think about it if you watch it”*

“Yeah but if you want ideas for a play – that'd be OK”

*“I'll **watch** a musical – no, I wouldn't do it”*

(Youth club participants)

YP 1- *“Show a film - a play”*

YP 2- *“We don't want to write it – we wouldn't do it right”*

YP 3- *“You should do it. Do role play. You don't get bored then”*

YP 4- *“Yeah but you need to do it. You need to write a poem or story”*

YP 3- *“What about something like a musical? Not a film. You need to do it – everyone could do something”*

YP 2- *“You can't act out what you wrote unless you're an actor”*

(Year 10 participants)

*“Writing the words [song lyrics]. **We can't do it though** [song-writing], we're not musicians”*

(Year 8 participant)

Parental involvement

The issue of parental involvement in health-related activities was raised in two workshops (Yr 6 and Yr 10). In the younger age group there was an apparent confidence amongst the commenting children in their parents' abilities to help with health worries.

"You got to ask your mum and dad to talk to you as well"

"Yeah. Make it not too personal. Tell her about it, but make it not about them"

(Year 6 participant)

The following exchange about the value of a multi-media, intergenerational project highlighted relationship tensions between parents and Year 10 participants.

YP1 - *"You need to do it [intergenerational arts project] a project for a long time – weeks. Do a whole thing. Do paintings and a poem, then make something, like textiles or something, then write like a poem on it and do a play".*

YP2 - *"What! I don't want my Mum at school, no way"*

YP1 - *"But you need to get parents involved. You can't tell your parents things that worry you but they need to know. If not doing something together, then a DVD or something. But it's better to do something together"*

(Year 10 participants)

4.7 Discussion

The consultations with children and young people on their views of health and well-being and the role that arts/creative activities may play in exploring and addressing problems in the future revealed a number of key findings. The validity of these findings centres on the rigour of the method used providing a naturalistic representation of the children and young people's views. This representation centred on the investigators gaining: a true understanding of the children and young people's personal perceptions of health and wellbeing; their opinions and attitudes towards the arts and creative activities; their beliefs about the role that arts and creative activities may play in supporting health and wellbeing for young people in Lambeth in the future.

The use of drama workshops to elicit the views and opinions of the participants was grounded in theory and practice that supports the method as a sound tool in social enquiry. The limitations, which relate to problems of generalising and transferring outcomes to a wider population, have been acknowledged. Every effort has been made to ensure that children and young people from a broad range of social and educational circumstances were represented, and that their views and opinions have been reported truthfully.

Children and young people's health concerns

The outcomes of the consultation show that the CYP's concerns of everyday living centred almost exclusively on social and emotional wellbeing rather than elements of physical health. These concerns most strikingly reflect Abraham Maslow's long-established, higher levels of human needs for wellbeing, relating to the need for a sense of safety, love and affection and belonging, self-worth and self-actualisation (Maslow, 1943).

It would appear that the concerns raised by the CYP have complex co-relationships. The two top concerns that affected most of the participants, regardless of age, related to a sense of personal safety and sense of belonging. The timing of the first group of workshops (July 2011) was set against a backdrop of the fatal drive-by shooting of Sadiq Adebisi in Stockwell the week before and, two months earlier, the shooting of a five-year-old girl and a 35-year-old man in a nearby shop. Fear of gang/knife/gun crime, which was identified by workshops participants as an overarching concern, may have been exacerbated by these recent incidents. Nevertheless, the concern may underpin a raft of others which in this consultation, appear to be interwoven.

A sense of peril, as expressed by the participants, may generate behaviours that are driven by the need to establish a social identity in order to belong to a constant social network which is seen as protective in some way. These networks can take different forms across a spectrum of healthy support groups to discriminatory cliques and gang networks. Fear of being ostracised from a peer network, or separated from a network, as identified by the younger age groups as a major concern in transition from primary to secondary school, may be more acute when CYP feel their personal safety is in jeopardy. An uncompromising desire to belong to a network can lead to hierarchical behaviours and the exploitation of weaker members by stronger members. This can result in some CYP engaging in inappropriate behaviour which is designed to elicit approval from others, whether healthy or not. Such actions might include premature and/or unprotected sexual activity, with the potential result of sexually transmitted infections and/or unwanted pregnancies; and/or drug related behaviours, such as irresponsible consumption of drugs and/or dealing in drugs. Each of these issues was highlighted by the older age workshop participants as a major or moderate concern for young people in Lambeth. Whilst the human drive for social positioning is undisputed, the urgency with which the young people seek a

place within a peer network may indicate that they do not perceive adequate support from elsewhere, such as from the adults closest to them. These collective issues also relate to CYP developing the confidence to self-direct their actions, which in turn relates to the level self-worth that an individual feels.

Concerns relating to self-worth and feeling validated were highlighted in all of the workshops in one way or another. In the younger age groups, this centred on concerns about school work and exams, secondary school allocation and future academic achievement. In the older age group workshops, self-worth issues related to not getting/having a girlfriend (male participants), not being respected by adults and having low aspirations for future employment. The absence of discussion about academic achievement in the youth club group may have been due to the relatively short duration of the workshop, rather than a general disinterest in education.

The topics and levels of concern expressed by the CYP may have been influenced by their perceptions of support from adults to whom they are closest. Where raised in the workshops there appeared to be age-related differences. Participants from the youngest aged groups indicated a reliance on teachers'/parents' support for personal and academic concerns. The opposite was expressed by participants in Year 8 and Year 10, the latter of whom felt that adults/parents did not listen to, or understand their concerns. In the youth club group the issue of adult/parental support was not raised specifically but two participants suggested that sibling bullying can impact on young people's sense of wellbeing and achievement.

Attitudes and opinions towards the arts and creative activities

The consultation revealed that whilst the participants from the youth group had enjoyed film-watching, (i.e. 'Kidulthood'), and participants from Year 6 had enjoyed painting activities that focused on healthy eating, they did not associate them with the

term 'arts and health', nor did they appear to recognise them as wellbeing interventions.

The CYP expressed their knowledge of creative arts in very limited terms and only formulated the list of possible creative activities to address CYP's issues with a good deal of prompting from the workshop facilitators. This may be due to the CYP not having been exposed to creative arts to any great degree or it may simply suggest that the terms of 'creative arts' or 'creative activities' are not familiar to them.

The CYP's expressed preferences for engaging with creative activities differed across the ages. For example, the younger age groups appeared more willing to engage actively in performance-based activities, such as acting in a play, whilst the older participants largely favoured non-performance activities such as play-writing, and/or passive activities such as watching a play or film. These differences may correspond to the changing social and emotional factors and the physical phenomena that young people experience as they reach puberty and beyond.

Social and emotional factors may also relate to the differing opinions about inviting parents to take part jointly in young people's creative activity projects. Joint projects were viewed by some participants in the older age groups as potentially useful for engendering an understanding of young people's issues amongst parents but they were not generally favoured amongst the older participants.

Limitations of the findings

Whilst there appears to be a sound argument for using participatory drama as a consultation tool with CYP there are limitations. The challenges of engaging participant groups in drama workshops were both foreseen and unforeseen. Those that were foreseen related to:

- Difficulties in identifying/accessing the appropriate member of staff in schools.
- Difficulties in timetabling workshops into a busy school schedules.
- Topic not regarded as central to the educational priorities of the school pupils/students at the time of the invitation.
- Engendering interest amongst the older age bracket of participants.

Challenges that were not anticipated related to:

- Difficulties for the researchers to express succinctly the purpose, nature and proposed process of the workshops to young people without meeting face-to-face.
- Prospective out-of-school participants being unable/unwilling to give advanced confirmation of their participation (the potential for 'no show' situations).
- Difficulties in co-ordinating mutually suitable workshop dates between schools/youth club and the delivering practitioners.

These challenges were variably addressed. Two workshops, one at a primary school and one at a school for excluded young people, were arranged within a week follow-up contact. Three further workshops were arranged after various correspondences. In one case, members of the Sidney De Haan research team personally visited prospective participants in a youth club to seek their advice on the best way to engage their peers. The promise of hot food following a workshop was thought to be a key motivator to attendance. The proposed workshops with excluded young people and young people with special needs were delayed and the workshop with Children

Looked After did not take place due to difficulties of bringing the individuals together for initial consultations.

Whilst it is accepted that the outcomes of this consultation represent the views of only small number of children and young people in Lambeth every endeavour was made to ensure that they collectively represent a broad range of social and educational circumstances and that their views and opinions have been truthfully reported. This has been enhanced by the extensive research experiences of the two main analysts of information gathered in the drama workshops.

5. Discussion and Recommendations

The literature review identified research that reported projects which delivered interventions for children and young people using participatory activities including drama, performance arts, dance, visual arts, and music. The projects aimed to use the creative activities to increase knowledge and inform, increase access to physical activity, increase social engagement and community building, and to promote behaviour change and healthy lifestyles. Although the research was of variable quality and heterogeneous precluding the synthesis of the findings it was clear that creative activities have the potential to impact positively on the health and well-being of children and young people. It is particularly noteworthy that the strength of such interventions lies in the ability to engage and interest young people; making them an effective tool for educating and informing children and young people about sexual health issues including HIV/AIDS, and teenage pregnancy. The most frequently reported outcomes were related to social and emotional well-being, specifically increased confidence and self-esteem, the provision of a sense of achievement, and the development of a range of interpersonal skills. Furthermore, participating in creative activities can help to increase social engagement and build communities.

In the Borough there are number of third sector arts organisations and world class arts institutions providing creative arts activities for children and young people. The survey of organisations showed that many of these organisations acknowledge the potential of creative arts to address many of the health and well-being issues facing young people. It was of particular note that the promotion of life skills is seen as being important to personal, social, and educational wellbeing, however of equal importance is the potential for dance to have a role in physical fitness and body

awareness. Many of the organisations include a performance element in the projects they provide, and through these engage families and the wider community. Whilst the findings of the mapping exercise are based on the opinions of people who are committed to the services they provide and are based anecdote and experience, the findings of the mapping exercise are supported by the evidence found in the literature review. It also demonstrates that there is an extensive body of expertise available in Lambeth with people not only committed to their art but with the vision to recognise the long term benefits for all of engaging with creativity.

The drama workshops proved to be a very successful way of eliciting information from the children and young people with the majority of the participants actively engaging with the process. The issues raised by the CYP were almost exclusively focused on emotional and social wellbeing. Their physical health did not appear to be of any concern even when the facilitators probed further and asked direct questions about physical health and whether there were any worries concerning future health. Lifestyle choices relating to physical health were not seen as important at their age and when they older it 'wouldn't matter.' this could be seen as either a normalising of the ageing process or as being unable to relate their current behaviours with their health in the future. This does have serious implications for those working in health promotion and public health as to how such messages may be effectively transmitted to the younger population. The children and young people raised concerns around personal safety and self- esteem and these are areas that have been successfully addressed in projects using creative activities to promote health and well-being, Interventions using the arts have also been judged to be successful in educating children and young people about a range of sexual health issues. Therefore the evidence indicates that using creative activities does indeed have the potential to reduce incidence of teenage pregnancies, HIV/AIDS, obesity, through educating and informing young people in a manner that is culturally appropriate and engaging.

Participating in creative activities also has been demonstrated to build confidence and self-esteem both of which have been linked to increased resilience and thus the potential to have the strength to avoid engaging in risky behaviours.

Recommendations

- Given the level of concern expressed by the CYP around factors that relate directly to their environment it is recommended that the importance of building resilience among young people is recognised as a central theme in all health promotion strategies.
- Most participating CYP engaged in this consultation were openly willing to express their concerns of everyday life during the interactive drama workshops. Existing consultation-initiated and client-led activity models, which involve CYP in the conceptualisation, development and activation of wellbeing-related arts/creative activities, might be further developed based on this type of creative consultation.
- Opportunities for CYP to work closely with local professional/experienced arts/creative practitioners is likely to better inform CYP about arts/creativity in general, the definition of which amongst participants in this consultation was uncertain. This may be established at primary level education in partnership with local schools in order to normalise a whole range of interactive, creative processes as a form of expression through the adolescent years.
- Even though wellbeing-related arts/creative activities are currently widespread in Lambeth, they were not generally recognised by participants in this consultation as being readily available. Therefore there is a need to promote existing opportunities to young people more effectively.

- Opportunities for CYP to work closely with local professional/experienced practitioners (as above) may alter the formers' perceptions about the availability of these types of projects in Lambeth.
- Dance has the potential to increase levels of physical activity and self esteem, yet compared to other activities identified in the mapping exercise there are fewer organisations offering dance. It is therefore recommended that greater emphasis is placed on the provision and funding of dance activities in the Borough
- The broader focus of arts/creative projects to address CYP's sense of self-worth and life skills should continue. This has potential to underpin support for CYP to self-regulate behaviour that might help to address some of the concerns highlighted in this consultation.
- Consideration might be given to developing arts/creative activities to nurture and/or develop family/intergenerational connections in Lambeth in partnership with leading IG specialist organisations, such as the Centre for Intergenerational Practice at the Beth Johnson Foundation (www.centreforip.org.uk) and Tower Hamlets-based 'Magic Me' (www.magicme.co.uk). This may help to address the highlighted difficulties for CYP to express concerns to family members and/or adults in authority, and to seek their support.
- NHS Lambeth should consider a specific Wellbeing Lambeth workshop bringing together representatives from arts organisations with a series of 5 minute presentations to promote the exchange of ideas and practice.
- NHS Lambeth should ensure that creative arts therapeutic services in the borough are aware of and appropriately networked with arts organisations providing arts activities which have a 'therapeutic' value
- NHS Lambeth should consider establishing a challenge fund which will allow arts organisations to submit short project ideas for applying the creative arts

in addressing a number of key issues in health education and promotion with young people

- All projects which are funded to address health education and promotion in children and young people should be required to seek health promotion specialist support and to conduct standardised evaluations of the interventions. Evaluations should include factors such as numbers attending and attrition and also measures of resilience, self-esteem, and wellbeing of the participants using validated tools (e.g. Warwick Edinburgh Mental Wellbeing Scale)
- Projects which are delivered to inform CYP about health promotion and health prevention measure should include pre-and post intervention test to assess the effectiveness of the method of communication.

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Appendices

Appendix 1: Databases searched for the literature review

| Database | Initial Hits | Results after relevance screening |
|--|--------------|-----------------------------------|
| BNI (British Nursing Index) | 93 | 26 |
| British Education Index | 103 | 7 |
| CINAHL (Cumulative Index to Nursing and Allied Health Literature) | 65 | 6 |
| ASSIA (Applied Social Sciences Index and Abstracts) IBSS (International Bibliography of the Social Sciences) PILOTS | 891 | 17 |
| BHI (British Humanities Index) | 17 | 2 |
| EMBASE | 16 | 0 |
| HMIC (Health Management Information Consortium) | 0 | 0 |
| PsycInfo | 832 | 23 |
| MEDLINE | 775 | 17 |
| SPORTDiscus | 505 | 6 |
| Social Policy and Practice | 208 | 21 |
| Web of Knowledge (includes Science Citation Index; Social Sciences Citation Index; Arts and Humanities Citation Index) | 65 | 2 |
| Index to Theses | 372 | 1 |
| Cochrane Library | 559 | 2 |
| TOTAL | 4528 | 130 |
| Total following removal of duplicates and application of inclusion/exclusion criteria | | 20 |

Appendix 2 Key words employed in the literature search

| Word group 1 | Word group 2 | Word group 3 |
|--|-----------------------------|---------------|
| Young* | Music* | Evaluat* |
| Youth | Drama | Research |
| Adolescen* | Danc* | Intervention* |
| Teenage* | Singing | Results |
| Juvenile* | Song* | Outcome* |
| Pupil* | Theat* | Impact |
| Student* | Art | |
| School* | + | |
| Curricul* | <i>Not Operating theat*</i> | |
| Extracurricular | (if necessary) | |
| | Visual art*" | |
| Word group 4 (added for Sociological Abstracts and Humanities Abstracts only) | | |
| Self esteem | | |
| Safety | | |
| Risk* | | |
| Prevent* | | |
| Sex* | | |
| Drug* | | |
| Diet* | | |
| Alcohol* | | |
| Smok* | | |
| Tobacco | | |
| Eat* | | |
| Self harm | | |
| <p>Notes: * truncation.</p> <p>“phrase searching”</p> <p>Words withing groups combined with OR.</p> <p>Groups combined with AND.</p> | | |
| <p>Limits:</p> <p>2004 to current day</p> <p>English language abstracts</p> <p>11-18 years old</p> <p>'education' OR 'community' settings</p> | | |

Appendix 3 Inclusion and exclusion criteria for selecting research reports for review

| Inclusion | Exclusion |
|---|---|
| <p>Interventions with children and young people aged 11-18</p> <p>Interventions in the community setting including mainstream schools (extracurricular not part of normal curriculum teaching)</p> <p>Creative activities (music, singing, drama, visual arts, theatre, and arts)</p> <p>Interventions outside the normal curriculum</p> <p>Papers reporting outcomes, evaluations and impacts</p> <p>English language</p> <p>2004-2011</p> <p>Qualitative or quantitative, mixed and/or multi methods research</p> | <p>Children aged under 11, adults aged over 18</p> <p>Interventions in hospitals or acute settings, special schools and young offenders' institutes</p> <p>No results or outcomes, or impacts presented</p> <p>Papers published before 2004</p> <p>Non- English language</p> <p>Review articles with no recognised procedure for data collection.</p> |

Appendix 4: Characteristics of studies included in the literature review

| Author & Date | Study Design | Sample size, age range and country | Intervention | Results | Limitations/Comment |
|-------------------------|--|---|--|---|---|
| Komo et al (2008) | Quantitative questionnaire Cluster RCT | 24 children aged 10-14 Questionnaire n=1114 Tanzania | Children trained and educated about HIV/AIDS used drama to present their knowledge to local communities | No difference in levels of knowledge between control and intervention groups, but positive response to children as health educators. | No pre-intervention test of levels of knowledge. |
| Campbell et al (2009) | Questionnaire with qualitative and quantitative components | Group 1: 70 teenagers Group 2: 200-250 Aged 13-16 UK | Group 1 participated in 6 week performance arts based HIV education and prevention workshops Group 2 watched the theatre based performance by group 1 | Overall findings suggest that performance based HIV prevention activities may be useful to deliver HIV prevention measures | Poor response rates and no pre-intervention test of knowledge was undertaken |
| Glenn and Wilson (2008) | Qualitative Focus group | 8 African Americans aged 13-18 USA | Students created collages to facilitate discussion around vulnerability and resilience to HIV | Confidence, safe social activities and innocence associated with increased resilience to HIV, image, music and drug culture and peer pressure – | Small sample, questionable as to whether participants would be representative of wider population |

| | | | | | |
|----------------------|---|--|--|---|--|
| | | | | increased vulnerability to HIV. | |
| Lemieux et al (2008) | Quantitative Pre and post intervention questionnaire | 306 completed questionnaires adolescents mean age 16 USA | Students in intervention school were given talks about safe sexual behaviours and were given a CD of a song written by some students which reinforced health promotion message | Findings indicate that intervention did influence several aspects of self reported HIV prevention and motivation, condom use and HIV prevention motivation | High levels of absenteeism and attrition rate (25%) no follow up to assess whether behaviours matched intended behaviours |
| Orme et al (2007) | Qualitative interviews Quantitative survey | Age range 13-18 100 surveys returned 21 interviews with young people UK | Drama initiative (forum theatre?) | The majority of the young people found the project exciting, and that they acquired knowledge about a range of sexual health related issues. | No detail provided as to how postcard survey carried out. Interviews mainly conducted with white British young people and no mention was made of potential cultural differences. |
| Mages et al (2007). | Qualitative interviews Quantitative survey | Age range 13-18 100 surveys returned 21 interviews with young people 34 questionnaires and 15 interviews conducted with professionals UK | Drama initiative (forum theatre?) | As above The professionals mainly agreed that the project raised awareness of sexual health issues but were divided as to whether it would increase access to services | As above |

| | | | | | |
|---|--|---|--|--|---|
| Colby and Haldeman (2007) | Quantitative pre and post intervention survey with matched control group | 19 Mexican American youth living in the USA Aged 8-12 | 5 daily sessions x4 weeks Discussed nutrition handouts, wrote and performed a play | 26% increase in knowledge of intervention group and changes in attitudes, beliefs and behaviours compared to control group | Small sample size, presentation of data is limited, and the survey tool is not named or described |
| Jackson, Mullis and Hughes (2010) | Quantitative, pre/post intervention survey | 15 African American children aged 11-13 USA | Six 75 minute sessions including theatre, dance and music. Final performance to parents. | There was no difference between some of the answers in the pre/post survey and others changed in an unexpected direction. | Small sample size |
| (Quin, Frazer and Redding 2007). | Quantitative physiological measurements Qualitative questionnaire | 348 children aged 11-14 UK | Ten week programme of dance classes | Statistically significant difference in the level of female physical and aerobic fitness. The girls in the group were very positive in their attitudes to dance, the boys less so. | Presentation of data is limited |
| Beulac, Olavarria and Kristjansson (2010) | Quantitative and qualitative methods. Document analysis Survey Observations Focus groups and | 95 young people aged 11-16 Canada | Hip Hop dance classes | Evaluation of organisation and delivery of programme. No statistically significant findings | The programme had the objectives of providing physical activity for adolescents, to improve self-identity, and overall well being, and behaviours. However none of the data |

| | | | | | |
|---------------------------------------|-------------------------------------|---------------------------|---|---|---|
| | Interviews | | | but young people liked the opportunity to learn something new and the choreography. Parents thought programme should go on for longer valued accessibility and that it was free. | presented referred to whether these objectives were met. |
| Gardner Komesaroff and Fensham (2008) | Qualitative Unstructured interviews | 10 people aged 14-25 | Community based recreational dance projects | Findings imply that dance classes may be a sustainable form of physical activity for young people as they combine physical activity with social wellbeing and are accessible to culturally diverse communities. | Small sample no comparisons made with other form of exercise |
| Hadland and Stickley (2010) | Qualitative Unstructured interviews | 4 teenagers Aged 14-16 UK | Community arts project | Personal and social benefits identified including: enjoyment, engaging with others, being part of the community, sense of achievement | Small sample, influence of researcher as a potential source of bias, analysis and presentation of the data superficial. |
| James N (2005) | Qualitative | 22 young people | "Actup!" a theatre | Potential for theatre | No detail is provided of |

| | | | | | |
|----------------------|---|---|--|---|---|
| | Non-participant observation Un-structured interviews Analysis of digital images | Aged 10-18 Workshop leaders UK | group for young people experiencing social exclusion | to positively contribute to transmission of skills development, influence and support intellectual development, empowering. | interview method or analysis |
| Rutten et al (2010) | Quantitative Pilot study pre/post test design | 99 adolescent soccer players Aged 10-18 Netherlands | Forum theatre performance | Small changes were found in moral atmosphere but not in moral reasoning or fair play attitude. There were also changes in 'on-field' anti-social behaviour | Changes in behaviour may be due to other factors can't be ruled out because of non-experimental design. |
| Bradley et al (2004) | Qualitative Participatory action research | 10 adolescents Aged 12-19 Australia | The 'Voices' project a youth theatre group | Participating in the theatre group enabled the youngsters to express their feelings and empowered them to view their problems in a broader context. Furthermore they re-engaged with education and were able to start pursuing their individual goals | Small sample size No long term follow up |

| | | | | | |
|----------------------|--|--|--|--|--|
| Kemp (2006) | Qualitative Observations Interviews | Young Black Men aged 14-25 8 participants 7 youth workers UK | Drama-based health promotion project | A positive impact on confidence self- esteem, and greater awareness around emotional experiences, raised awareness of self- understanding and social awareness, awareness of stereotypes and underlying attitudes. | Small scale study, data didn't appear to answer main research question |
| South (2006) | Qualitative Feedback boards learning diaries, photographic documentation, observation Interviews | Children aged 8-13 Numbers involved not stated UK | Art workshops including: graffiti art, DJ skills, urban dance and mosaics/art work | Increased self- esteem and confidence observed in the young people. The young people were engaged and included as stakeholders in the new community centre, new youth activities were planned, and overall the project was perceived as successful by all those involved | Project evaluation minimal detail provided about individual project |
| Salmon et al 2005 | Qualitative Focus groups Survey | 249 young people Aged 11-19 UK | Performing arts programme 'Rock Challenge' | Development of a number of interpersonal skills: | Strong female bias (91%) Focus group discussion may have inhibited some participants |

| | | | | | |
|----------------------------|--|------------------------------------|--|--|--|
| | | | | team working, friendship, sense of personal and collective achievement, and increased confidence | |
| Grunstein and Nutbeam 2007 | Quantitative survey | 1458 students Aged 13-17 Australia | Performing arts programme 'Rock Challenge' | It was found that there were indications that there were positive associations between participating in the REC and a range of positive personal, social and behavioural outcomes. | The difficulty in identify appropriate measures, and obtaining a true pre-intervention point to start the study and also identifying a large balanced sample of students. |
| Wright et al 2006 | Multi-method evaluation Including: observations, questionnaires and interviews | 183 youths aged 9-15 Canada | A national arts program of theatre, visual arts, and media arts for youth in five low income communities | High attendance rates, significant effect on children's behaviour at the program. Increased confidence, enhanced art skills, improved pro-social skills and conflict resolution skills | Observations by different research assistance may produce inter-rater variability and potential for bias. Interview were conducted with high attending youth therefore potential for bias as motivated group |

Appendix 5: Letter of invitation to take part in the Survey Monkey survey

Dear [named contacted]

NHS Lambeth has commissioned me to undertake a mapping of recent arts and health activities for young people (aged 11-18) in Lambeth – particularly in addressing some of the major health issues facing young people: sexual health and teenage pregnancy, obesity, mental ill health, substance misuse and bullying/violence.

The purpose of the mapping is to help NHS Lambeth develop a funding application for further arts and health activities in the Borough from the Guy's and Thomas' Charity.

Members of the Project Steering Group have suggested that I contact you/your organisation to request information on any arts and health activities you may have undertaken with young people during 2010-2011. If you are not the best person to provide this information about the work of your organisation, I should be grateful if you could forward this email on to someone who can respond to the questionnaire.

To help with gathering information I have produced a very simple on-line questionnaire, which will take only a few minutes to complete. If possible please complete the questionnaire by [date given].

http://www.surveymonkey.com/s/arts_and_health_activities_in_Lambeth

If your organisation has undertaken creative arts projects focused on health, I would like to follow up with a telephone conversation or a visit to meet you during August/September if possible.

With best wishes

Stephen Clift

Appendix 6: Interview schedule

- What is the history of your organisation and how does it operate currently?
- Do you work in partnership with other organisations?
- Have you had links with the health service?
- What work do you do with young people 11-18? - Could you describe recent projects and activities, and the work produced from them?
- What numbers of young people have you worked with?
- What are the backgrounds and characteristics of the young people involved (e.g. sex, social class, ethnicity)?
- How do young people access your activities?
- How have projects and activities engaged young people in thinking about their health and wellbeing?
- What evaluation have you undertaken and what kinds of results have you found?
- What future plans do you have to work with young people?
- What do you see as the main challenges facing young people today in terms of their health and wellbeing?
- What further ideas do you have for future projects using the creative arts in promoting young people's health and wellbeing?
- Are you interested in closer contacts with NHS Lambeth?

Appendix 7: Case studies from the mapping exercise

Case Study 1: *Young Vic Taking Part* Programme

Marcella Hughes, the Head of the *Taking Part* programme, explained that the *Young Vic* does not undertake 'issues-based' work. Its guiding philosophy for outreach and education work is to offer opportunities for young people (who might have limited opportunities otherwise) to access theatre – and develop theatre related skills. The emphasis is on intrinsic artistic values rather than the personal and social utility of participation (although this is recognised – it is not something directly monitored or evaluated in existing programmes).

The youth programme *Taking Part* offers opportunities for young people to engage. Marcella was clear that 'we know there are secondary outcomes such as 'resilience', 'team working', 'patience' and 'confidence', but we don't track these, as this is not our primary purpose...' *Young Vic's* work is about offering high quality theatrical experiences.

There are two main projects involving partnership work with South London and Maudsley Trust – offering engagement with children and young people with mental health needs.

'Theatre Workshops with Young People using Mental Health Services' are focused on drama work – but are not regarded as 'drama therapy'. There are two programmes: one for 7-11 year-olds, and one for 13-18 year olds. Transport is provided for the younger children. The boroughs refer children/young people to the project and they come with a clinician who also participates. Parents may accompany their children but do not directly engage in the workshops. The difficulties experienced by the children/young people can be 'quite extreme'. Groups are small (up to 10 for the 7-11 year olds, and 5-10 for the older young people). The groups for younger children meet in half-terms and involve morning workshops over five days, leading to some kind of performance. For the older groups, meetings take place once a week over 9-10 weeks, and a performance event concludes the workshops – family members and health professionals are invited. To date 8-9 projects have run and they take place twice a year.

Work has also been undertaken in acute settings (e.g. wards at King's College and Bethem). A significant challenge with such work is that staff from the theatre need CRB clearance, occupational health checks etc. and the process can be very lengthy. Work in the wards is complex for directors as they have to liaise with health professionals, and there have been issues relating to lack of communication, particularly around change-over of staff between shifts. MH suggested that some staff engage very well, but others can be less involved. As with the workshops in the theatre, the emphasis is on theatre skills and production, and there is no relationship with on-going therapeutic interventions. Work culminates in some kind of event and MH suggested that the 'vibe on the ward can be electric' when it goes well. She also felt that health staff can be convinced of the value of this work when they see it in action – it is not something that they can be told about or read about and necessarily be persuaded of its value.

No formal evaluation has been undertaken to date of these projects, but there has been some very powerful feedback from clinicians, who have reported that drama workshops create a 'level playing field' between 'patients' and 'staff' – and some

have suggested that the workshops have then helped with the process of communication in therapy sessions.

MH reflected that working in partnership with NHS professionals is challenging and needs to be approached with sensitivity – with a clear understanding of roles and responsibilities. Important learning from the projects has been the importance of having groups of an optimum size (not too large), and also ensuring that the referral process takes into account the degree of distress and disturbance of individual children and young people. Where young people are very unwell, they may not be able to engage and difficulties within the group may arise.



Young people participating in a Young Vic workshop

Case Study 2: *Coral Dance Company*

Sarah Archdeacon, Coral's Artistic Director, explained that the company's artistic vision is to create unique performances which draw on the creativity, personalities and skills of its performers with learning disabilities, and to develop an aesthetic style which best expresses their ideas, imaginations, rhythms and idiosyncrasies. The company often create work for a chosen site, such as a disused warehouse, a lift lobby, an underground station or the spaces in and around art galleries. The company's work can be described as 'performance interventions' or 'hybrid arts' and they have a direct relationship to the public spaces they take place in. Coral has been commissioned by The Royal Festival Hall, Tate Modern, Whitechapel Art Gallery, Cafe Gallery Projects and Sadler's Wells Theatre to create such performances. The company also tour work in London and across the UK. Sarah described two projects which Coral has undertaken with young people in Lambeth this year.

'Kick Up'

This project worked with 9 young people aged 14-16yrs with moderate learning difficulties with funding from Lambeth Council Children's and Young People Services. The project was undertaken in partnership with special schools and took place during a half-term break for one week. The programme involving visual arts and dance was structured to lead to an 'Arts Award' and all participants received a certificate (Arts Award aspires to support any young person to enjoy the arts and develop creative leadership skills. Awards are offered at levels 1, 2 and 3 on the Qualifications and Credit Framework. Arts Award can be achieved at three levels: Bronze, Silver and Gold). The project resulted in a performance event at the end of the week and there was some follow-up in the schools following the programme as the young people were expected to deliver an activity to share the skills they had learned with their peers. During the programme evaluation took place on a number of different levels – self and peer evaluations and there was also feedback from the audience for the performance and from teachers in the schools. This project was the first time Coral has worked with young people specifically from within Lambeth.

'Demonstrate'

This project undertaken in partnership with Oval House Theatre was also supported by Lambeth Council Children and Young People's Service through 'Aiming High for Disabled Children' funding.

The project was aimed at involving more profoundly disabled children aged 8-13 yrs. Funding was agreed in March 2011 and the project started in June and will run to early November. The project runs on Saturday mornings and in holiday periods and involves a range of arts activities. The project also offers some respite to parents from their caring responsibilities.

Sarah identified a number of outcomes which she felt children and young people gained from these projects:

- * Raised expectations among young people, parents and teachers of what the young people could do and achieve. Although the projects are 'out of school' the children are expected to work hard! The projects are process-led but lead to a performance event

- * Children work in small groups and benefit from this. This appears to be unusual as generally the young people work one-to-one rather than with others. Positive feedback had been received on this aspect of the way in which Coral work

*More generally the children gain from the opportunity to socialise with other children
*Young people are challenged to work in different ways physically and creatively
*The activities also help to 'level out' behaviour – some children's difficulties are challenging but the practical focus helps them to settle in – other children are helped to 'come out of themselves' by the activities more than in other teaching situations

Case Study 3: *Tender, Education and Arts*

Nikki Rummer, Evaluation and Development Manager explained the work of Tender in a written response to the mapping exercise.

‘Tender works with schools, youth services and health settings to deliver healthy relationship education and professional training. We provide innovative, integrated programmes using drama, film, new social media, photography and creative writing to engage young people and practitioners, and to embed practical solutions to the problems of violence and abuse. Tender ‘has had commissions directly from the Department of Health ‘to improve health outcomes of pregnant women who are experiencing domestic violence’ and the General Medical Council ‘to deliver a national drama-based initiative to identify best practice guidelines for addressing identified forms of discrimination with health services.’ Local NHS Primary Care Trusts have also commissioned Tender ‘to deliver one-off performance workshops for young people.

‘We deliver on-site activities within schools, youth centres, pupil referral units, hospital schools and hostels. Young people are recruited with support from teachers and youth workers. We also have rolling volunteer programmes and a Youth Board to maintain young people’s involvement – young people are recruited via our online campaigns and our projects. Tender has worked with 27,000 young people aged 13 to 18. Of these: 6,000 were trained as peer-educators and violence-prevention advocates through Tender’s Youth Ambassador programme and drama-based courses; and 21,000 participated in arts-based workshops developed with and for young people. Tender has also trained over 2,000 teachers, youth workers and health professionals in the issues of domestic and sexual violence.’

Nikki emphasised the value that drama-based, enquiry-led methods have over more traditional forms of learning:

- *Creating high levels of participation with vulnerable young people who have disengaged from mainstream education and/or their peer-groups
- *Experiential learning that increases practical skills and emotional intelligence in areas such as empathy, communication, negotiation, understanding difference
- *Building respectful working relationships between young people, providing safe environments in which young people can express their beliefs and opinions
- *Encouraging critical thinking using factual information about issues of inequality and social justice
- *Exploring causes and choices through role-play, enabling young people to ask ‘what happens next?’ and ‘what would you do?’

Careful evaluation is a considerable strength of Tender’s work: ‘Tender has gathered feedback from over 3,000 at-risk young people through the ongoing monitoring and evaluation of our projects, 15 independent meetings of the Young Persons Liaison Groups, and 5 youth-led surveys on the streets of London. Through these consultations, young people have emphasised the need for long-term youth-led support within their schools, youth centres and other places where they spend their time, including social networking sites, broadcast sites and other online areas.’

Case Study 4: *Kids Company*

Jane Caldwell, Creative Director and Laurence Guinness, Head of Research, gave an overview of the significance of the creative arts in the work of Kids Company.

Kids Company has a substantial arts programme with projects and activities in schools, centres and the community. The arts are considered to have a strong impact, and play an 'unrivalled' role in work with children and with young adults who are vulnerable and find it difficult to use language to explore their experiences. Arts described as the central tool used for i) assessment of trauma, ii) helping young people process trauma and manage their own behaviour, and iii) educational and vocational development. Arts activities help to identify needs; transforms the child's experience; assists in the attachment process between child and worker; offers a sense of cultural belonging and wider participation, and helps to widen horizons in terms of further activities and education. The principal focus of arts work within Kids Company is therapeutic. Two different and major challenges can be addressed through creative arts work – trauma and isolation. The arts can work through 'unlocking and healing' the trauma and by bringing children together to collaborate. Visual arts can be very powerful in understanding the traumas children have experienced. In the Arches centre for example, a boy under 11 witnessed a stabbing, and painted in response to this, when it was something he couldn't talk about. Art work can provide 'a massive indication of a child's wellbeing'. A child's non-verbal reaction to their own work is also significant – especially where they create something and then destroy it.

My Life Illuminated project gave children the opportunity to create light sculptures, projections and soundscapes based on their lives. An exhibition was held at the South Bank Centre in February 2011 based on this work. This was part of Imagine, the Southbank Centre's fortnight-long children's festival of art, design, literature and music. This year was the 10th year of this event.

The *Shoe Box Project* is a recent example which illustrates well the role of the arts in the work of Kids Company. Children were asked to make a model of a room in their home in a shoe box and also to write about it. Boxes have been combined to create an installation which has been exhibited in a variety of public spaces. The rooms created and the written accounts also provided insights into difficulties children were facing, and guided appropriate interventions. Out of the 125 children who participated in the project, 46 talked about things which indicated a need for further support. Some children were offered bereavement counselling and one child was living with domestic violence and support was offered to the whole family. One child refused to speak about their home and they presented the hardest challenge because of their silence. This highlighted a situation that can arise in schools where a quiet child in a large class can be over-looked.

In addition to arts activities in centres, there is also roving arts provision for the schools supported by KC. There are over 40 schools linked with KC across London, with seven primary schools supported by them in Lambeth. All of the schools are in disadvantaged localities and are working with children living in difficult circumstances. Many of the schools are lacking in material resources – e.g. having no materials for art work. If a school is facing a particular challenge e.g. bullying, then KC can provide a specially planned programme of activities for the whole school. An example was given of a school in which the Muslim girls were not connecting with

other children in the school, and activities were planned to help the children relate to one another.

Music is important across all of the KC centres, with some variation in activities from centre to centre. For example, the street level service *Arches II* based in Lambeth, provides a therapeutic space where children can experiment with their voices and sounds. One young woman was able to work through her depression through song writing. She now writes her own material and performs without support. A recent exciting music project was undertaken in collaboration with the BBC Proms, and a choir of children from Kids Company performed in the Royal Albert Hall. Approximately 150 children from across London were involved and a choir was created over a period of three months. Kids Company staff and teachers worked with small groups in schools initially, groups were then combined to make larger singing groups and then all of the children were brought together for two full rehearsals before the performance. The theme of the Prom for families was 'Horrible Histories'.

The Poverty Project is one of the newest initiatives under development currently, which has particular relevance to the wider public health agenda of understanding the impact of poverty on children's health development and tackling persistent social and health inequalities. The idea is to explore ways in which the arts could be used to assess and address poverty in its widest sense in primary school populations. Currently most poverty indices are based on the amount of money coming into households, but where a child has drug/alcohol using parents or parents with mental health issues, this can lead to both material and emotional poverty. For children key issues are the availability of adults to take an interest in them, regular meals, talking, structure during the day, getting up in the morning, opportunities for activities, availability of toys, etc. The aim of the project is to explore the possibility of an arts-based tool to describe such poverty in a 'participative and non-authoritarian' way. Schools across London will be asked to participate, and a good response is anticipated.



Kids Company *My Life Illuminated* exhibition at the Southbank Centre

Case 5: *Pegasus Opera Singing Academy POSA*

Talita Moffatt joined Pegasus Opera as Projects Manager in October 2010, and so talked about projects which have taken place since. One important innovation she has introduced is the Pegasus Opera Singing Academy (POSA) as an umbrella brand for future outreach initiatives.

On her arrival funding was already in place for a project called Olympic Heroes, which she then took forward. Contacts had been made with local primary schools that were interested to collaborate in a project with Pegasus. Twelve Lambeth schools in two clusters participated over the period January-March 2011 to create mini-operas. Children nominated by the schools involved, with funding from 'able and talented' sources. Eight to nine workshops were run over the three months of the project with each school, and tasks were also set between the workshops. Brainstorming between the teachers and Pegasus Opera Project Manager came up with the Olympics theme. Children were asked to research a previous Olympic hero from a given list of countries e.g. UK, US, Kenya/Ghana. Their task was also to link the life story of the athlete to time/place and relevant music. A link was also made to the forthcoming London Olympics next year. In each school, children wrote poems and songs for the production and a common anthem was composed – 'I believe' by Omar Shahryar.

Talita described the young people's song writing skills as 'phenomenal' – she 'never would have thought' they could produce such high quality writing in such a short time considering that most of them had not written songs or had any vocal training before work. This she felt demonstrates how important it is to 'give them the opportunity' to be creative. In the course of the workshops and writing a great deal of material emerged on the themes of health, fitness, having goals, hard work and success. Tutors were good at drawing ideas out of the groups. Full length DVDs of the both products are available, with short clips on the Pegasus website (<http://www.pegasus-opera.net/>).

During the project the tutors needed to work hard on skills development and encouraging young people to work productively in groups. Even a simple request to 'get into groups of four' could be difficult for some young people. However, Talita felt that 'massive shifts' were apparent during the course of the project, with the children becoming 'a lot more relaxed, respectful and trusting' and a growth of understanding that the project was there 'to help them'. The focus was on 'doing creative stuff', but 'teaching of social skills was essential so that could use their creative skills'. A further issue Talita mentioned is that the project encouraged 'physical engagement' from the children and also gave them direction and guidance on how to project a sense of involvement and performance. She felt that many of the children did not have a sense of 'how they are perceived' by others. The use of video is very helpful in this respect in helping children to 'look the part' in a production.

Another challenge was that children were nominated from schools over the 8-11 age range and the children were not used to working in mixed age groups. Also the teachers decided who should be involved on the basis of their judgements of ability/talent and this process could have had short-comings (i.e. selecting children who were less interested and engaged and not choosing children who could have a flair for creative work and could benefit from it. Children are also drawn from a wide range of ethnic/cultural/linguistic backgrounds. One quarter of participants were 'White British', and three quarters from different backgrounds with a list of 'cultural groups' running to two pages. Some of the funding for the project came from the

Walcott Foundation, which supports projects for young people from socially disadvantaged backgrounds. Being in receipt of a free school meal an important criterion for the Foundation and in the Olympic Heroes project, two-thirds were receiving free meals.

In addition to working with the children to create two new operas, the tutors/musicians also performed for the children to show their own musical interests and expertise. Talita felt that the children's reactions were 'amazing' as it was 'just so blatantly obvious how amazed they were'.

Pegasus Opera Singing Academy (POSA) 'Get into Singing'
POSA has recently organised singing groups for pre-teens, teens and adults. The focus is on hard to reach young people who are not involved in other activities. The pre-teens group has been running for a term starting in February this year, and the teens and adult groups are just getting started. With the pre-teens group, a 'H-factor' competition has been held – with a stress on which groups could create and hold the strongest harmony. The focus therefore on process and participation and the product produced by the whole group. The children have also worked on song writing, with a focus on the theme of 'machines'. In the Singing Academy workshops taking place on Saturdays the backgrounds and circumstances of the children have presented challenges, with some children having 'real difficulties with communication, listening, negotiating, compromise and teamwork. Talita felt it was less common in primary schools to find activities which developed these skills. Also, children and young people are spending more time in solitary digital activities, including video games, and these provide few opportunities for developing social skills. Talita also felt there were issues related to difficulties over concentration and being patient.



Pegasus Opera Singing Academy publicity

Case Study 6: *Old Vic Education and Outreach Programme*

Alexander Ferris and Bryony Roberts provided an overview of the schools and wider community work undertaken by the Old Vic.

Currently the theatre is involved in bespoke productions for primary age children. In the latest project 'Think Tank' - nine schools have been involved in workshops over six weeks on the theme of leadership. A professional writer was commissioned to write a play 'Danny's Deal' based on the material arising from the workshops. This play was then toured to 19 schools. For further details see: <http://www.ideastap.com/Partners/ovnv/education/thinktank>

There are currently two secondary age projects – 'Schools Club' and 'Staging Success'. OV has funding to run activities until the end of the 2012 school year. In the Schools' Club work is undertaken with 30 schools a year across London, running workshops linked with each production in their schools and offering free tickets. Funding for the 'Staging Success' programme comes from Barclay's Capital based in Canary Wharf – and they want to support work with adjacent boroughs. Young people have a day at the theatre gaining experience of performance, direction and production – linked to a current production. They also are given free tickets to the production.

AF suggested that schools in Lambeth and Southwark are possibly 'inundated' with project opportunities. One of the guiding principles of OVNV is to work with schools in disadvantaged areas – and everything is without charge. For 'Schools Club' and 'Staging Success' approximately 3-5 schools out of the 70 involved over the last year have been from Lambeth.

Every 18 months OV tries to put on a large-scale community production around a specific theme. The last three have been focused on 'Platform - being a Londoner in 2010', 'Branded – exploring consumerism' and 'the Battle of the Somme'. Preparatory work is undertaken with people interested to take part in community centres through workshops. Alexander then works with a writer to develop the play, and he checks that it is suitable for purpose. Then a company is set up and approximately 50 people are recruited to perform and 50 to assist with the production/backstage work. The productions are thus rooted in the workshops and consultations and the guiding principles are: fun, creativity, topical content, punchy delivery, working together and breaking down barriers... The age range of people involved in the projects has been 16 upwards.

For each of the productions a different company has been formed, although there has been some continuity in membership as some very enthusiastic people have wanted to continue to be involved. Open auditions are conducted for fairness, and over 700 people attended for auditions for the last production. During the workshops before the setting up of the company, the team can identify people who could be involved and help to encourage and build confidence for involvement in the auditioning process. Auditions are not individual, but are based on activities and workshops. Once the company is formed, there are six weeks of rehearsals (evenings and weekends) leading to one week of technical rehearsals, and then approximately 10-11 performances (9 days - weekend to weekend). Performances have taken place in various venues e.g. the Somme performance took place in the Atrium of the Imperial War Museum, and 'Platform' was performed in the Old Vic

Tunnels. The community programme operates in the two adjacent boroughs primarily. In the case of Platform for example, approximately 40% of participants were from Lambeth and Southwark.

The latest community event under development is focused on public health issues and is called *Epidemic*: <http://www.ideastap.com/Partners/ovnv/community/epidemic> This project is supported by the Wellcome Trust. A small R&D process has been completed as a basis for creating this production. The project started with the broad idea of 'public health' which was explored with groups of people in series of consultation events. The consultation workshops took place mainly in Lambeth. Two main issues came to the fore – obesity and mental health – these topics highlighted because of the strength of feeling in discussions or competing views of the factors leading to the issue and who is responsible for tackling it – or the range of questions raised. The webpage above includes a short video giving a flavour of the consultations events. Old Vic has applied to the Wellcome Trust for further funding to support the production. Auditions should begin early December. Planned date for the production March 2012. Following on from the production the Old Vic would also like to develop an adaptation to take into schools and community centres. The plan is to start taking the production into schools in September 2012 – probably with more of an emphasis on the obesity issue than mental health.



Young people involved in an Old Vic workshop

Case Study 7: *Latimer Creative Media*

Latimer Creative is a social enterprise which delivers educational innovation direct to young people. A central part of their philosophy is that creative technologies are a salient vehicle for inspiring young people to engage with issues of concern to them. Their website claims that 'Latimer Creative has pioneered a new approach in educational digital media combining industry standard products (for example film, social networking or multi-platform websites) with a commitment to working with young people on both the content and production of creative media learning resources.' Latimer is placed in two boxes in the model as it works with young people through creative technologies to explore significant social and health issues – but also directly engages with young people affected by these issues in providing testimonies of the challenges they face. In this respect engagement in education and health activism may help the recovery process for young people facing difficulties.

Jack Woodcraft, Company Director, highlighted a number of recent projects Latimer has worked on with young people: *U Choose* on sexual health; *Kim* on domestic violence; *The Road to Recovery*, an animated film on eating disorders; *Big Man* a film on young fathers and a new project on gangs/crime in Lambeth. Details of the completed projects are given on the Latimer website. In addition to developing the films, Latimer also develops resource packs for use in schools to build upon the material in the films. Young people appearing in the films also have an important role in dissemination and visit schools to talk about the issues and answer questions about the contributions they made in producing the film and the supporting materials.

The *U Choose* project is of interest in terms of coverage as the young people were clear that the campaign should work through social media. A core feature of the project was a competition which asked young people to make suggestions about 'good' and 'bad' sex advice. Entries were made through the campaign website and there were prizes. Over a thousand entries were received. Campaign planning started before Christmas 2010, and the campaign ran from February to end of May 2011. Two hundred people attended the launch event at the Ritzy in Brixton, and 100 people attended the prize giving event.

Creative projects have also been undertaken in partnership with specialist agencies and charities to ensure that factual details are correct (e.g. for the film on domestic violence Latimer worked with Tender (see above) and Respect, both charities concerned with this issue).

In all projects, Latimer consults and works with young people to explore issues and develop ideas of films and projects. Generally 10-15 young people 16-21 are directly involved in taking the projects forward. In addition to the directly creative work, involvement on the projects is also important in helping young people develop life skills – good communication, telephone manner, preparing for interviews, writing CVs etc. These skills are developed in the context of work which young people find engaging and relevant to their lives, and so they are motivated to learn. Latimer is also in a position to help set up work experience for young people over the age of 15 in creative/media companies. They have managed to do this with Talkback Thames BBC and Double Negative. One young person is currently on a placement with the production team for the new Sherlock Holmes film.

Jack also stressed that a central issue for any project addressing issues of concern to young people is to give considerable attention to the processes of delivery. There is no point producing an excellent creative product if it is not going to be seen and

discussed by lots of young people. With intelligent planning projects can reach thousands of people.

An important aspect of Latimer's work is the fact that once young people have been engaged in a project, they can join their Youth Network. Currently over 2000 young people are part of this network and they continue to receive information about Latimer's work, and support is offered to them in developing their skills and careers.

“ Latimer's work is a fine example of the standard that must be reached with education and film. ”

Andy Duncan, Ex-Chief Executive of Channel 4



+THE JOURNEY | 2010

The Journey

Short animation that helps raise awareness of eating disorders

Latimer's animated film on eating disorders

<http://www.latimercreativemedia.com/projects/road-to-recovery/>

Case Study 8: *Futures Theatre Company*

Caroline Bryant, Artistic Director at Futures Theatre Company explained that the company has considerable experience exploring social issues through theatre and contributing to the training of social work and health professionals.

Future Theatre has also worked closely with Brook Advisory Clinics over many years in developing work around themes of sex, relationships and 'sexual bullying.' A production entitled 'Sweet Love' was developed in 2009 and has had two tours with a third planned for 2012.

From the Company website:

Sweet Love



Sweet Love is a forum theatre production which explores the issue of Sexual Bullying. It was developed by Futures in March 2009 as part of a wider programme coordinated by Brook London to raise awareness and understanding around this issue in schools. Futures delivered a series of consultation workshops at a secondary school in Southwark with Year 8 students to develop their skills in using drama to create a story and gather their ideas and perspectives on sexual bullying. The outcomes from these workshops were used to inform the development of *Sweet Love*. *Sweet Love* toured across London in 2010 and 2011 to great success and as a result Futures plan to tour again with the production in spring 2012 to schools and UK venues.

"In my 12 years at the school this performance was the best we have ever received, totally brilliant! Pitched at the right level, our students loved it." Teacher 2011

"... fantastically thought provoking piece" Teacher, 2010

"I have rarely seen my year 8 students so engaged and focused, and they obviously could relate to what they were seeing" Teacher, 2010

The company has also undertaken work related to mental health issues, homelessness and prostitution, and substance misuse issues. Another area of work relates to helping children explore issues and anxieties associated with transition – for example from primary to secondary school.

Caroline stressed that a great deal of research and preparation goes into their productions to ensure that the products are 'authentic' and based on working with 'people with experience of problems.' The emphasis however is on producing a creative theatrical experience and not on 'drama therapy.'

Currently the company is in the process of responding to a tender from NHS Lambeth for a drama-based project to promote healthy, non-violent relationships among young people. Future has consulted with Brook on this, but they will take the lead in putting in the bid.

With respect to evaluation, Future Theatre always gathers feedback from participants in their projects and from teachers. They also regularly debrief with actors and reflect on the process of production. Focus groups with 5-6 young people are regularly conducted. Feedback is gathered from teachers, and information can be gathered in the context of INSET training too. Caroline mentioned that they follow the guidelines for evaluation provided by the Charities Evaluation Service (CES), which she described as 'very detailed.' However, one challenge is to undertake 'substantive research' long-term, which assesses the extent to which the work they do make a difference over time.

Caroline commented in conclusion that there is a real challenge currently related to providing young people with a positive experience of theatre. She noted that the National Theatre have stopped taking productions into schools because they regard the environment as problematic in creating a good artistic product. Taking children to a theatre also raises problems of management, and cost, and many schools find the challenge too great – and consequently children have little or no experience of live theatre. But, young people are interested in the things that affect them, and theatre is a very meaningful and powerful way of engaging their involvement in discussion and reflection on such issues.

Videos of Future Theatre productions can be seen on: <http://vimeo.com/channels/ftc>