



Aesop Institute

Continuing Professional Development
for Arts and Health Professionals

Evaluation of the first Aesop Institute course

Tim Joss & Stephen Clift
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About Aesop

Aesop's vision is of a future when arts solutions for society's problems are valued and available for all who need them. Its current focus is on health and social care.

Aesop's portfolio is:

- + Aesop Institute professional development programme.
- + Dance to Health older people's falls prevention dance programme which aims to be the first arts programme which goes to scale in the care system.
- + Biennial conferences for health-decision makers to show what the arts can do for them.
- + Research: annual surveys of health sector attitudes to the arts and the Active Ingredients Project which deepens our understanding of how arts interventions in health and social contexts actually work.

Underpinning all of this is the key concept of an 'aesop' – arts enterprise with a social purpose. An aesop has these characteristics:

It works

- + A financially sustainable model
- + Evidence-based
- + Effective and cost-effective

It meets a need

- + Addresses a major social challenge
- + Citizen demand (including 'patient pull' in health)
- + Can fit into a service provided by the other sector (e.g. patient pathway in health – see: pathways.nice.org.uk)

It can become a universal service

- + 'Available in my area'/scalable
- + Of consistent quality
- + Place-based/culturally sensitive/locally co-designed

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About Sidney De Haan Research Centre for Arts and Health

For over a decade the Sidney De Haan Research Centre for Arts and Health at Canterbury Christ Church University has explored the potential benefits of the arts to the quality of life and wellbeing of individuals and communities.

Working with NHS Trusts, NHS Clinical Commissioning Groups, and major charities, the Centre has undertaken research showing the positive benefits of singing, drama and dance to both physical, neurological and mental health conditions and has played a leading role in advocating arts on prescription as a cost-effective approach to improving public health.

bit.ly/2PeAR3Q | [@sidneydehaan](https://twitter.com/sidneydehaan)

The genesis of the Aesop Institute course

In October 2016 Aesop and the Sidney De Haan Research Centre organised a consultation workshop, entitled “Building the Bridge”, held at Canterbury Christ Church University [CCCU]. Over 100 participants attended and explored the training needs of health and arts professionals to plan and deliver successful arts and health programmes. This provided the foundation for planning what became the Aesop Institute.

Pauline Tambling, Chief Executive of Creative & Cultural Skills and a previous Arts Council England Executive Director, gave the keynote speech at the Building the Bridge conference. It included this: “In 2007 I was involved in commissioning the joint Arts Council England/Department of Health Prospectus. I am sure many of the organisations in the 30 or so case studies still run arts and health projects today. Until Aesop came along, there was no way of taking the benefit and spreading arts and health beyond small project groups. Aesop has initiated new thinking on how we can make this work available to a much wider group of participants.”

The workshop tackled many questions. What kind of course would meet the needs of busy health and arts professionals? How important was university accreditation? What level should it be pitched at? How long should it last? How might the course dovetail with existing health and arts sector health training policies? How to find the resources to pilot the course? What should the student fee be? How best to market the course to achieve a good mix of health and arts professionals?

Over the following two years, market research continued, the Aesop Institute team was formed, with regular Management meetings between Aesop, Sidney De Haan Research Centre and other members of CCCU. The questions were answered, a marketing strategy developed, and the course took shape. It would be a CCCU Negotiated Learning Module and would award academic credits from Levels 4 (undergraduate) to 7 (MSc) with Professor Stephen Clift as Course Leader. It would begin with a three-day residential in May 2019, followed by a negotiated learning programme of four months’ workplace activity, a two-day residential in September 2019, culminating in the submission and assessment of a portfolio.



Course objectives

The target groups would be:

- + Health professionals for whom arts activities could be a solution to current challenges (e.g. GPs, commissioners, HR leads, Occupational Therapists).
- + Arts professionals (artists and managers) interested in developing their activities with the health sector.

The course would be suitable for facilitators, practitioners, producers, programmers and key decision-makers working in the arts, health, care or charity sectors. Applicants would need to have either an existing arts and health project, or one in development that would run between May and September 2019 and form the basis of work-based learning.

The course would enable students to develop the values and beliefs, knowledge, skills and competencies relevant to the provision and growth of successful arts in health programmes. It would respond to demand from both health and arts professionals for accredited, quality-assured arts in health training that can fit around busy work schedules.

There would be opportunities for health professionals and arts professionals to learn from each other and to co-design and co-produce course improvements.

Graduates of the course would:

- + Demonstrate a systematic understanding of the development of arts in health in the UK both in healthcare and community settings.
- + Evidence an understanding for the arts sector by health professionals, and for the health sector by arts professionals.
- + Communicate effectively and efficiently with the other sector.
- + Plan effective arts in health programmes.
- + Evaluate arts in health programmes.
- + Demonstrate a systematic understanding of types of arts and health activity, business models, and models for spreading and scaling.





Delivering the objectives - communications

The Aesop Institute was launched in November 2018. The initial deadline for applications was extended to 30 April 2019 to allow students time to apply and source funding for the programme.

Marketing Campaign

- + Small print run of branded A6 postcards for handing out at conferences.
- + Press releases in November 2018, February 2019 and October 2019, co-ordinated between Aesop's and CCCU's Marketing & Communications teams.
- + E flyers for mailing lists and the Aesop Institute team to forward.
- + An advert placed in Arts Professional.
- + Social media advertising (LinkedIn and Facebook).
- + A paid email feature in One Dance UK's magazine.
- + National Health Executive – online advertorial aimed at the health sector.
- + Emails to media contacts to request features in their publications.
- + Emails to culture, health and wellbeing networks.
- + Social media, mainly Twitter, before, during and after – #AesopInstitute.

Video

Two promotional films were commissioned for promoting future courses. They included vox pops from Stephen Clift and Tim Joss and feedback interviews with the students. A full 4-minute version and a short 1-minute version for social media were produced.



Websites

The Sidney De Haan Research Centre's Aesop Institute webpage was set up to mirror the general information included on Aesop's website, which acted as the main hub of information. Both websites included:

- + Background information about Aesop Institute, who it's for and other essential information.
- + Information about the formal assessment and accreditation.
- + Aesop email address for any questions.

Visitors to the Sidney De Haan Research Centre's webpage were directed to Aesop's main page for further information and downloads:

- + The draft programme for the May Residential.
- + List of speakers and facilitators, linking to bios.
- + Download to the application form.

Materials for the residential

- + Loose-leaf handbooks with branded, printed inserts including introduction letter, programme, speaker bios and useful resources.
- + 2 pull-up banners for display in Folkestone and Canterbury venues.
- + Word document with information for participants.

Expressions of interest

A list was created of people who expressed an interest in receiving information about the Aesop Institute.

Delivering the objectives - the course programme

The May residential course took place in Folkestone, with the Quarterhouse, the home of 'Creative Folkestone', as the base for teaching and presentations. All students were registered at Level 6 or 7.

The programme covered:

- + The Aesop Institute course aims and structure.
- + Creative arts activities involving participants and tutors.
- + Reflection on the arts experience through the Aesop Active Ingredients framework.
- + Aesop's work and its relevance for participants.
- + Sharing in small groups of current roles and interests, and the learning from the reading undertaken in preparation of the residential.
- + The two sectors: health and the arts.
- + Arts and health history, concepts and theory in arts and health.
- + Planning arts and health programmes.
- + Evaluation and research in arts, health and wellbeing.
- + Funding and scaling of innovations, including arts for health interventions.
- + The role of Arts Council England.
- + Workshop on communication, presentation skills and media relations.
- + Inter-professional working.
- + Module requirements, registration and tutorial support.
- + Reflection and feedback on the residential.

The September residential took place in Canterbury, with the University providing accommodation and teaching rooms. This focused on student presentations and discussion and portfolio submission arrangements, assessment and evaluation.

Students appreciated both locations, and tailored social events were organized for each residential. In Folkestone, this included a tour of Folkestone's Creative Quarter and Public Artworks and a special dinner in the regenerated harbour area. In Canterbury, this included Evensong in Canterbury Cathedral, a World Heritage Site, followed by a tour of the city's Roman wall.

Students were encouraged to engage with the course tutors regarding their assignments and with CCCU's Negotiated Learning module leader throughout the course and during the interim summer months.



Delivering the objectives - course contributors

Course Co-Directors:

- + **Professor Stephen Clift**, Director, Sidney De Haan Research Centre for Arts & Health, (Faculty of Health and Wellbeing) CCCU (Course Leader).
- + **Tim Joss**, Chief Executive & Founder, Aesop.

Guest speakers:

- + **Laura Boyd**, Deputy Director, NHS Innovation Accelerator.
- + **Josephine Burns**, Founder and Senior Associate, BOP Consulting.
- + **Claire Greszczuk**, Public Health Speciality Registrar, the Health Foundation.
- + **John McMahon**, Senior Manager, Policy and Research, Arts Council England.
- + **Vivienne Parry OBE**, Broadcaster, conference chair, journalist and board member of UK Research and Innovation.

Speakers from the Sidney De Haan Research Centre for Arts and Health:

- + **Esther Coren**, Assistant Director of Research.
- + **Vivien Ellis**, Associate, Singing Leader, The Dragon Café.
- + **Angus McLewin**, Associate, Consultant on Arts and Social Policy, Coordinator of the Repository for Arts and Health Resources.
- + **Trish Vella-Burrows**, Principal Research Fellow, Director of Research, Nick Ewbank Associates.
- + **Lian Wilson**, Research Assistant, Creative Director, Tamalpa UK

Speakers from Canterbury Christ Church University

- + **Eleni Hatzidimitriadou**, Professor of Community Psychology and Public Mental Health and Head of Research and Enterprise, Research and Knowledge Exchange Activity.
- + **Sue Holmes**, Lecturer – Work-Based Facilitator, School of Nursing, Midwifery and Social Work.
- + **Carolyn Jackson**, Director, England Centre for Practice Development

Delivering the objectives - course students

14 students signed up for the course. The breakdown of the professional role given below shows that only one of these worked within an NHS trust:

- + 2 freelance artists (1 visual artist, 1 musician).
- + 5 education officers in museums/galleries.
- + 2 senior managers of arts/culture and health charities.
- + 2 programme managers in charities.
- + 1 local authority arts officer.
- + 1 NHS public engagement support worker.
- + 1 health activist.

Only one student dropped out, and one had to leave the course due to illness.

The geographical breakdown of where participants came from shows that a majority were based in the South East:

- + 9 South East (Kent, Sussex, London).
- + 3 Midlands (Stratford, Oxford, Leicester).
- + 1 Wales.
- + 1 Republic of Ireland.

All 12 students who completed the course submitted portfolios, three at Level 6 (BSc), and nine at Level 7 (MSc). A wide range of issues were explored, all related to the students' ongoing professional work:

- + An evaluation of a hospital mural project involving long-term patients and staff.
- + An exploration of the skills and qualities required of music-for-health practitioners, and their training needs.
- + An evaluation of an intergenerational poetry writing project for adults in sheltered housing/residential care and primary school children.
- + The role of creative arts in supporting women in the Irish Republic seeking an abortion.
- + An evaluation of young theatre workshops in a museum setting.
- + An evaluation of music and dance workshops for preschool children in a museum setting (see next page).
- + An exploration of the value of festival participation for the wellbeing of young people.
- + Strategic planning in developing singing provision for people with Parkinson's.
- + An evaluation of a photography and creative writing course for mothers affected by mental health challenges in a cultural venue (see next page).
- + An evaluation of the role of creative arts in PPI programmes in an NHS mental health trust.
- + An exploration of evaluation strategies required in supporting the work of a culture and heritage charity.
- + An evaluation of culture for wellbeing programme in a museum/gallery setting.

Two examples of work undertaken for assessment

The Mother Lode Project at the De La Ware Pavilion Ashley McCormick

The Mother Lode Project (MLP) was a creative and peer support programme exploring the therapeutic potential of photography, creative writing, conversation, and listening for a group of mothers experiencing mental health challenges. A small-scale evaluation indicated an overwhelmingly positive impact on the wellbeing of participants. It was evident that MLP provided a relaxed, safe, supportive space. The creative outputs were personal and individual, but the experience was shared, and the collective pursuit is what many of the participants valued most about the project. They derived some relief and increased confidence from knowing others in the group have experienced similar struggles.

Arts workshops for pre-school children at The Beaney House of Art and Knowledge – Frances Chiverton

Two Health and Wellbeing projects aimed at small groups of two to four year olds and their parents and carers ran for four weeks during the months of March, April, June and July 2019. The first was a dance project led by dance artists and participants were encouraged to respond creatively through dance to objects in the museum. The Children's confidence improved and all the parents and carers were involved in the movement sessions. The second project, Music in Museums, was led by a professional musician and music facilitator and was aimed at the same audience. Children got to try out a range of different instruments and improvised music in response to objects found in the museum. Both projects were very successful judged by feedback from parents and children, and many valuable lessons were learned about the practicalities of running creative arts activities for children in a gallery and museum setting.

Student results and feedback

Marks received by students for their portfolios were 1 pass, 1 credit and 10 distinctions, indicating a very high standard in submitted work.

Participants on the course were asked to write responses to five open questions during the final plenary session of the September residential:

- + Was this course useful to you professionally?
- + What do you think about the format and delivery?
- + Do you have any comments on the cost?
- + Is there a wider market for this course?
- + Are there any aspects of the course that could have been improved?

Feedback was highly positive, and very much in line with comments made by participants in the promotional films. A selection of comments on the usefulness of the course are especially relevant in demonstrating the value participants placed on the course:

'The qualification will be helpful to me in future employment applications. The content inspired and challenged me and gave me a valuable opportunity to critically reflect on my practice. It also gave me practical skills and knowledge to develop my work further.'

'It's been a great opportunity to reflect on the civic role of my organisation and my role in arts in health. Useful to build a relationship with the Director of Public Health (as he funded my place), and other partners and potential partners. Peer-to-peer knowledge exchange. A greater understanding of the sector and potential research areas.'

'This course was very useful to me professionally. It has helped me to reflect on the way I work and plan my work differently. It has helped me to understand and identify my development needs and to do my work in a more focused and sustainable way.'

'The museum, my workplace, is in a period of transformation which I would like to influence. The chance to engage with my research – both academically and practically, has given me extensive leverage which can impact on future decisions. It's not just me 'going on' about young people – there's evidence now!'

They were also asked more practical questions about the module, such as what worked well, what worked less well and recommended changes. Valued elements and suggested improvements are in the 'Lessons' section on the next page.

	Strongly Disagree	Disagree	Agree	Strongly Agree
Overall, I was satisfied with this module	0	0	6	6
I understood the aims of this module	0	1	4	7
I was given useful feedback on how to improve, throughout the module	1	1	3	7
I felt involved and engaged in my learning	0	0	3	9

Lessons from the first course and for the future

Demand for the course

1. This was the first course of its kind. Based on student numbers and feedback, demand was demonstrated.
2. Given that 75% of students were from the South East region, there seems to be potential for running it in other regions.
3. More engagement and market research with the health sector is needed to test and meet demand from health professionals.

Planning

4. A long lead-in time between launch and application deadline is needed for applicants to get sign off from line managers and source funding.
5. A maximum of 20 will ensure enough tailored support for each student.
6. Better timing would be an autumn first residential and the second in spring.
7. There should be more time between the second residential and portfolio submission deadline.

The course

8. Use of the Negotiated Learning Module to accredit learning worked well.
9. The Course Leader and Negotiated Learning Module Lead are valued essential roles. Particularly valuable were individual mentoring, practical help, feedback on drafts and support understanding the Module formalities.
10. A supportive atmosphere, peer support and time for reflection were important ingredients.
11. More information and help with assignments could be provided at various stage of the module.

Student support between the residentials

13. Most students had not studied for some time and would benefit from more support and information.
14. Information and support on the assignment structure and university submission processes should be provided earlier within the course.
15. A session on the library and how to access online resources would be of benefit. Access to the Library was helpful.
16. Online taught sessions could usefully be added.
17. The CCCU portal provided all necessary information in a clear format.
18. Blackboard could be more user-friendly.

Communications

19. Facebook advertising proved an effective way to reach the health sector.

The future

20. Students were keen to keep in touch with each other.
21. Aesop will revive its 'Arts Enterprises' action learning set for arts and health programmes funded by the NHS or local government public health. Invitations will be extended to graduates of the Aesop Institute.
22. Continued contact with the students will help evaluate wider impact i.e. improved service delivery and patient and client wellbeing and care.
23. There is interest in running the course in other parts of the country. This will be followed up.



Aesop



Aesop Institute is a collaboration between Aesop and Canterbury Christ Church University Faculty of Health and Wellbeing