UCL
ARTS AND SCIENCES

Creative Health: When theory meets practice

From cultural heritage of care to community assets for human wellbeing



Thomas Kador

t.kador@ucl.ac.uk

@objects_lessons
@MascUcl

…but first



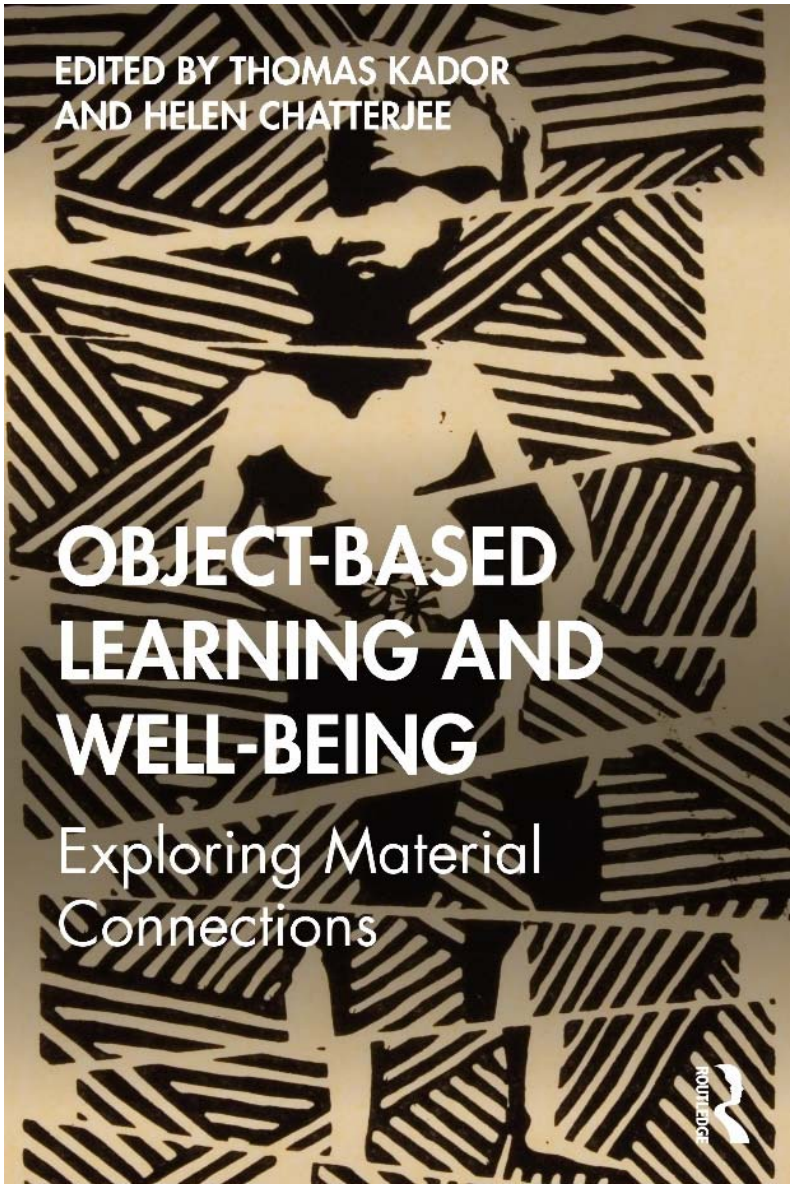

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Object-based learning and wellbeing

Why I might be here today…

- International collaboration on the health and wellbeing benefits of working with material culture
- With chapters focusing on:
  - Young people and university students
  - Older people
  - Indigenous communities
  - People experiencing racism and exclusion
  - Educators
  - Patients (in psychiatric care)
  - Clinicians
- Expanding what we mean by ‘object’ to objects and places of the natural world, rather confined to traditional cultural heritage



…but also this:

The UCL MASc in Creative Health

- First Graduate Taught programme globally (as far as we are aware) focusing explicitly on Creative Health
- Happy to answer any questions about this programme

https://www.ucl.ac.uk/arts-sciences/study/postgraduate-study/creative-health-masc





Who can name the painting and/or the painter?

What is Creative Health?

‘*creating the conditions and opportunities for arts, creativity and culture to be embedded in the health of the public*’

- Non-clinical…
- Asset-based…
- Culture/nature/arts-based
  …interventions in health

- Key focus on community assets & health (in)equity
- cf. Marmot reviews / Institute of Health Equity





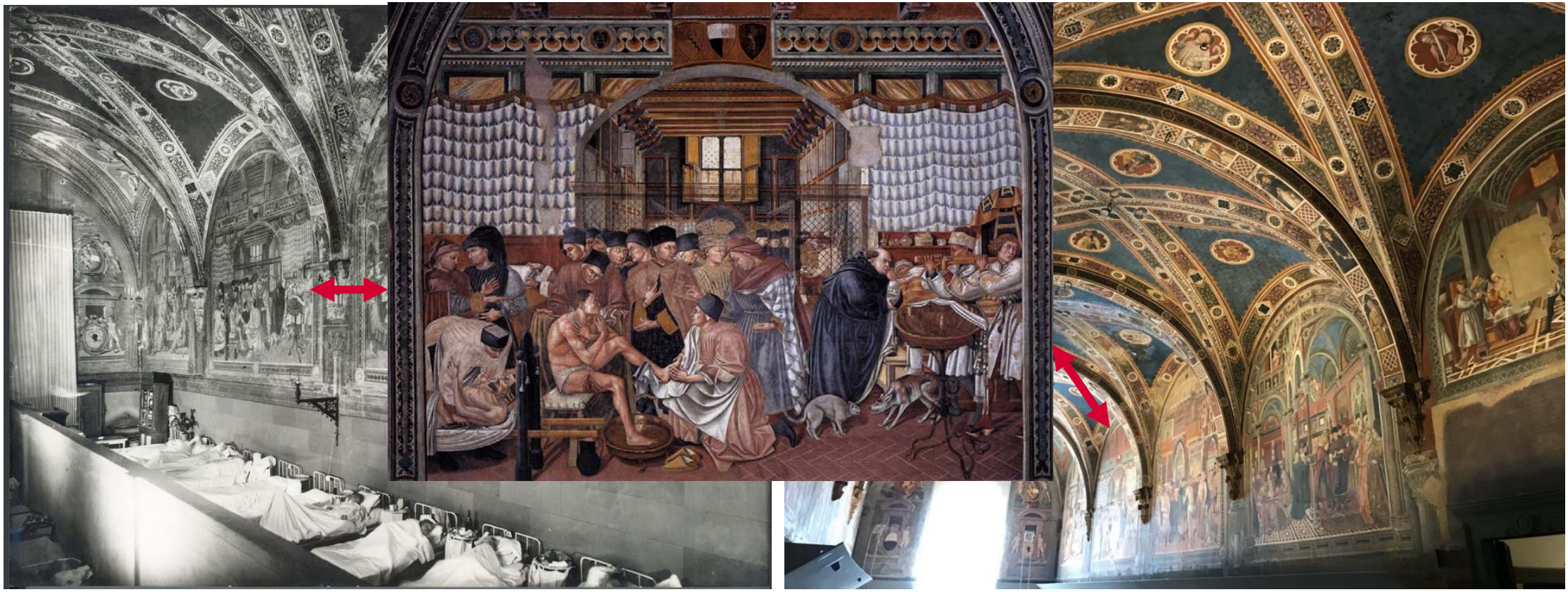
http://www.instituteofhealthequity.org/resources-reports

https://www.culturehealthandw

Cultural Heritage of Care



Domenico di Bartolo, caring for the sick, 1440-1444
Pilgrims' Hall, Santa Maria Della Scala, Siena, Italy (c.1440)



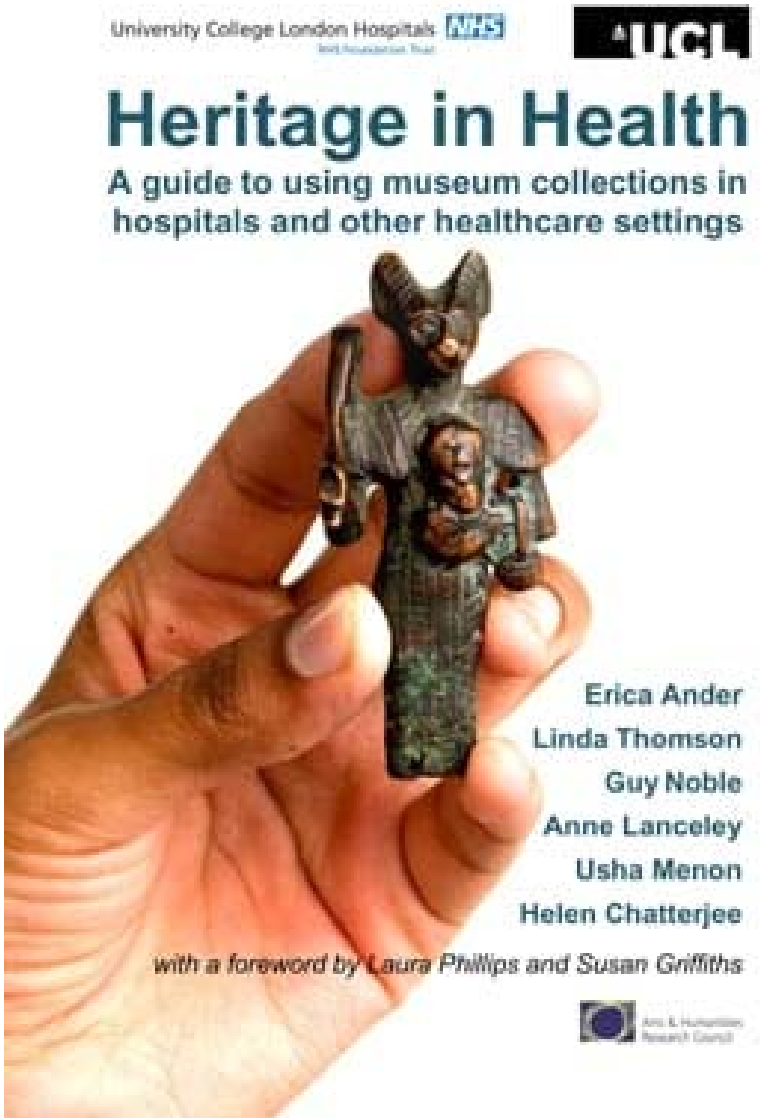
Pilgrims' Hall, Santa Maria Della Scala, Siena, Italy (c.1440)

"People say the effect is only on the mind. It is no such thing. The effect is on the body, too. Little as we know about the way in which we are affected by form, by colour, and light, we do know this, that they have an actual physical effect. Variety of form and brilliancy of colour in the objects presented to patients, are actual means of recovery. (Florence Nightingale, 1860)

Potential and implications

- Supported by evidence
- Faster recovery periods
- Fewer confrontations
- Benefits for staff
- e.g. art in hospitals





https://culturehealthresearch.files.wordpress.com/2017/08/ucl_heritage_in_health_guide_2012.pdf

…but

- Not all cultural heritage of care is ‘beautiful’ and ‘pleasing’ to look at…
- So how do we deal with more ‘difficult’ objects and collections?
- Pathological and anatomical collections
  - e.g. the work of Manon Parry
- More difficult aspects of the history of medicine and psychiatry
  - Museum Dr. Guislain, Ghent
  - Museum of the Mind, London



Wax model of the symptoms of smallpox (*variola vera*) on the arm of a woman
Gordon Museum, King’s College London
Out of ethical considerations I have not included images of ‘real’ human remains

Collection of Anatomical Pathology in the ‘Madhouse Tower’, Vienna, Austria





‘housed in the so-called Fool's Tower […] erected in 1784 during the reign of the enlightened monarch Emperor Josef II’

https://www.nhm-wien.ac.at/narrenturm

The value of ‘difficult’ or ‘risky’ histories



Eye-colour chart, UCL Eugenics Collection



‘Fotonotities’ by Hans Eijkelboom, Museum Dr Guislain

- A rich history of maltreatment, abuse (of power) and scientific racism
- We mustn’t shy away from this heritage but allow its subversion by those it sought to render powerless in the first place

Manon Parry (2019) Science Museum Group Journal http://journal.sciencemuseum.ac.uk/browse/issue-14/risky-histories/