

Museums. Health and Wellbeing: Building on Tradition to Increase Museums' Impact

- In order to elaborate the connection between museums and public health and wellbeing, the author builds a case around two arguments: first that the emergence of public museums in the 19th century was part of a broad movement to improve public health and wellbeing; and second, that there is significant evidence from public health statistics that museum visiting does make a real difference to people's health.

Key words: increase in the museums effect, museums and health, museology

All over Europe, and indeed across the world, museums are engaging with issues related to human wellbeing, through projects and programmes ranging from art therapy and mindfulness classes to special tours for people suffering from dementia (Chatterjee and Noble 2013; Clift and Camic 2016; Ward 2013). Some may regard this as a simple extension of museums' educational role; others may see it as a fad or yet another area where museums are trying too hard to demonstrate their value to society by taking on activities outside their 'core business' of preserving and interpreting their collections. This article will present evidence for two main argument; first that the emergence of public museums in the 19th century was part of a broad movement to improve public health and wellbeing; and second, that there is significant evidence from public health statistics that museum visiting does make a real difference to people's health.

In 1900 Glasgow was a city of over one million people, the fifth largest city in Europe and known as the Workshop of the World and the Second City of the

British Empire because of the scale of its industrial production. It also had some of the worst slums in Europe – and a city Corporation with a reputation for attempting to solve these problems. In 1898 Glasgow Corporation opened The People’s Palace in the heart of the industrial East End of the City. This building, comprising a museum, a library and a Winter Garden was designed to function as a cultural centre for the area’s working classes. In 1901 they opened Kelvin-grove Museum and Art Gallery, the largest civic museum in the UK. In a lecture in 1891 to the Ruskin Society in Glasgow, a City Councillor Crawford set out the rationale for these institutions. He explained that he was Chairman of the Health Committee and of the Committee on the Gallery and Museum of Art. “Is it possible”, he asked, “for any public body to deal effectively with institutions and conditions of life apparently so widely removed as PUBLIC HEALTH AND MUNICIPAL ART [original emphasis]? Can any popularly elected administrative body – sensitive to all the constantly changing breezes and currents of public opinion – fight and struggle with grow material conditions, crime, disease, and death, and at the same time keep heart enough, and faith enough, and strength enough, to encourage amount the people the love of Art, the cultivation of taste and refinement, and appreciation of the purest pleasure?” He was confident of his audience’s response – “You, I am sure, will give no hesitating answer to this question. It is of the very essence of that common bond which links together of this Society, that these two extremes not only do, but must meet and blend together to their mutual advantage. Those men who have the truest feeling of the nobility of Art are those who have, or should have, the keenest perception of the nobility of man. The heart that vibrates to the truly beautiful in Art will vibrate also to human suffering. The soul that is dead to Art (if such exists – I doubt it), cannot hear fully the wail of human sorrow in the world.” He goes on to explain the importance of access to nature as a relief from the grim conditions of urban life – both museums are located in parks - and to literature, through the provision of libraries. For Victorian Glasgow, as for many cities across Europe, the creation of public museums was part of a holistic programme to improve the wellbeing of citizens, that included care for the body, through the provision of sewers and clean water and care for the spirit, through the provision of cultural facilities including museums. Translated into contemporary language, Councillor Crawford presents museums as fostering community cohesion, empathy, wellbeing and fulfilment.

DOES VISITING MUSEUMS IMPROVE YOUR HEALTH?

This gives rise to an immediate question; is this just wishful thinking? Was it that the educated bourgeoisie enjoyed art and justified spending public money on it by saying that it was good for everyone? There is increasing recent public health evidence from large scale population studies carried out by medical statisticians and epidemiologists that the Victorians' intuition was right. - visiting museums does improve your health. Since 1996 more than 15 studies, published in peer reviewed journals including the *British Medical Journal*, have found evidence that cultural attendance improves health to such an extent that regular attenders live longer. These studies are controlled for income, education, gender, age and chronic illness, implying that cultural attendance is a separate variable. This is not art therapy or participating in creative activities (for which there is also good evidence of health benefits), but simple attendance. Going to concerts, museums, art galleries or the cinema can help you live longer. One study by Professor Bygren and colleagues found that death from cancer was 3.23 times more likely among rare attendees and 2.92 times more likely among moderate attendees (these estimates have a 95% accuracy). They concluded that the "results, if replicated, imply that promoting attendance at cultural events could lead to improved urban population health" (Bygren et al. 2009a: 229). The original studies took place in Scandinavia, but the same association has been found in places as far afield as America, Japan and Scotland (See O'Neill 2011 for a summary of this literature¹).

Sceptics will ask whether these results simply meant that healthy people are more culturally active, not that being culturally active makes people healthier. A 2001 study (Johansson et al.) aimed to assess "how changes in habit of attending cultural events in the community might predict self-reported health". They studied just under 3,800 adults over a 12-year period and found that "those who became culturally less active between the first and second occasion, or those who were culturally inactive on both occasions ran a 65% excess risk of impaired perceived health compared to those who were culturally active on both occasions". The study also found that "those who changed from being culturally less active to being more active had about the same level of perceived risk as those active on both occasions". They concluded that "[t]hese results could be in agreement with a causal influence of stimulation."

A subsequent randomised controlled trial found that 50 people who engaged in an arts experience of their choice once a week for eight weeks had improved perceived and physical health compared to a control group, leading to the conclusion that "fine arts stimulations improved perceived physical health, social functioning, and vitality" (Bygren et al. 2009b).

1 See O'Neill 2011.

But, isn't it possible that the health benefit of attendance may be caused by something else? Other studies found that:

- physical movement and social interactions involved in cultural attendance were not likely to be the cause of these health improvements.
- cultural stimulation is a 'perishable commodity'. Like physical fitness, for cultural participation to help maintain well-being, regular engagement is required to realise the benefits. And, like physical activity, the benefits can be achieved by starting participation at any age, and recovered after a period of inactivity. One study concluded that "while recruiting new consumers would ... promote health, continued frequent replenishment of the cultural stimulation may be just as important" (Johansson et al. 2001:229).

If museum visiting – without engaging in any activities, classes or workshops – really does improve people's health, what are the implications for museums?

At a population level, the groups who suffer the worst health – the poor, the less educated, Black, Asian and Minority Ethnic Groups, migrants, refugees and asylum seekers, people with disabilities – are also those who visit museums least. The core strategy for museums who are committed to contributing to their local people's health and wellbeing is therefore to ensure that these groups attend the museum regularly in sufficient numbers to make a difference to their entire community. This involves a whole range of activity, with the fundamental aim of building trust with communities who may find it difficult to identify with the museum for a whole range of reasons.

Many museums have experience of building trust with groups through small-scale projects led by outreach or education staff. There is little evidence that traditional outreach projects, even when combined with a number of facilitated visits, transforms non-traditional visitors into regular attenders, or that they change attitudes in the group's wider community. In order to have a population level impact, museums need to move beyond projects and build long term pathways to create a truly accessible museum. The follow summarises twenty-five years of Glasgow Museums' experience in attracting people from these audiences, an experience which is borne out in the literature on best practice in creating visitor centred museums (e.g. Black 2010; Samis 2017; Simon 2011).

STEPS IN CREATING PATHWAYS

For non-visitors to receive health benefits from museums, they have to become regular visitors, ideally more than three times a year.

STEP 1: CONDITIONS IN THE MUSEUM

The basic conditions within the museum have to be right to make nurturing repeat visits possible. The conditions include:

Welcome

One of the things humans are most sensitive to is whether or not they are welcome in a new space. Welcoming front of house staff who are alert to novice visitors and can intuit when to offer assistance are perhaps the single most important factor in breaking down barriers for non-traditional audiences.

Approachable Displays

This involves displays which offer points of entry for people with no background knowledge of the subjects involved and which answer the questions which novices would have. The most frequent point of access is the human story – what the object meant to the people who owned it, who made it and why. Answering these basic questions can be combined with catering for more knowledgeable visitors through a layered labelling system. Displays should also be constructed to facilitate conversation among visiting groups. The ‘voice’ of the museum should be that of a participant in these conversations, not that of a textbook or lecturer.

Representation in the Museum

While potential visitors from all backgrounds are interested in a wide range of cultures and in science, the absence of people’s own cultures from the museum displays can reinforce the feeling of not belonging the feeling that the museum is ‘not for them’. Incorporating elements from the cultures of the target communities into the permanent displays may require some creativity, but it is almost always possible, and will help people feel at home.

Affordability

Even museums which need to charge for entry can do a lot to make museum visiting more affordable, with systems of discounts and partnerships with community organisations. Beyond the entrance fee, many families on low incomes, especially those experiencing in-work poverty find the ‘incidental’ expenses of museum visits – refreshments, the gift shop and transport – a significant barrier. The museum communication strategy (particularly using word of mouth and social media) can make it clear that there are welcoming picnic spaces both outside and within the museum, so that people can bring their own food. The gift shop can ensure that affordable mementoes are available. Partnerships with transport providers may enable reduced fares.

STEP 2: OPPORTUNITIES TO APPROACH ON PEOPLE’S OWN TERMS

Museum Activities

Most museums carry out a wide range of activities inspired by their collections which are designed to build on people’s existing interests, needs and networks. These include outreach and educational activities, co-production of displays and opportunities to volunteer. What is often missing from these activities is a strategic intent to nurture long term museum visiting. Developing such an approach involves

Whatever the specific purpose of any activity (e.g. to take part in a workshop), its strategic aim is to equip people to visit the museum on their own. This will shape how the activity is constructed.

All activities will include Next Steps for participants who wish to take their interest to the next stage.

Clear signposting to follow up activities which are part of the museum’s general programme and opportunities to join mailing lists.

Communication channels which enable participants to feel part of the museum community and welcome to return at any time.

Large scale events

Large scale events which take place immediately outside and partially within the museum can be a way of attracting larger numbers. If however they are organised as part of a pathway strategy, they play a much wider role. Through targeted marketing, families and groups who don’t usually visit will be aware that there will be a large, informal gathering taking place, where they spectate

or join in as they wish, and where they can test the waters in the museum alongside many others novices. Research suggests that the ‘festival effect’ of large events inspires people to be more open to new experiences and to try things for the first time. A regular cycle of these events will enable the museum to invite people who have taken part in smaller projects or who have been engaged through our partnership network. A carefully structured events programme (planned with support from the community partners) can help people incorporate museum visiting into their regular activities.

Non-Museum Related Activities

A range of spaces in the museum can be made available to local groups and activities which may seem tangential to the museum – e.g. language classes for immigrants or Mindfulness sessions. These increase the range of people who are familiar with the museum and ‘normalise’ some areas of the venue. However, as with the other activities, these need to be organised in such a way as to promote experiencing the collection and taking part in activities more directly related to the museum.

STEP 3: VISITOR FEEDBACK AND RESEARCH

A strategic programme to nurture regular attendance by non-traditional visitors will only work in the long term if it is supported by robust visitor research and strong feedback mechanisms (now much easier because of social media) – and staff committed to responding to the research findings and the feedback. The essential first step is to establish a baseline of the demographics of existing visitors and to compare that with the characteristics of the wider population. Once groups that are under-represented in the museum have been identified, partnerships with relevant community organisations can be built and activity programmes developed. This is inevitably an experimental process, requiring patience with much trial and error and a long term commitment to building trust.

CONCLUSION

The Victorians were focused on basic provision of amenities like clean water, to eradicate the spread of contagious diseases. The twentieth century was an era of scientific progress in medicine, eradicating infection, improving diagnosis and surgery. The health problems of the 21st century are very different – problems associated with sedentary lifestyles, an ageing population, depression, anxiety and social isolation are our equivalent of cholera and tuberculosis (Hanlon and Carlisle 2016). Given the evidence that museum visiting has an impact on health, promoting regular visiting to large populations who experience worse than average health is a fundamental obligation. The practical implication of this is that we need to take everything we have learned from visitor studies and our professional experience about education, outreach, display interpretation and visitor services to a new level. We need to move beyond small projects and embed pathways to access in the core of the museum, and take a long term strategic approach to attracting non-traditional visitors. In many ways museums have only begun to tap the rich potential of their collections. Taking this approach to museums and wellbeing could be a key to unlocking that potential.

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2 For a summary of this literature and full references see O'Neill 2011.