As an artist and creative producer with Change & Adaptation, in the context of a health conference, I also consider myself a sales person! What I mean is I’d like to emphasise that we’re focused on ‘New ways of delivering your business’.

From an arts funding and development perspective we know that the arts/health relationship needs to be recognised and valued enough to have health dollars attached to it on an ongoing basis. In Change and Adaptation we have 7 partners collaborating to develop these ‘new ways of delivering business’.

As artists working with health we can see that some of the generalised packaging of health messages has (in many cases) a limited impact, and that projects that challenge and extend people to make real (and more sustainable) personal change through the arts is extremely valuable and effective.

It’s my belief that individual truths and personal stories are worth more than slogans, and do have a general community health benefit especially where people can be directly involved and not just be passive consumers. I am not entirely negating the value of the pamphlet as a tool for betterment, however, when I walk into a health service and encounter the corporatised pamphlet wall, I find it impenetrable and de-humanised. In some cases (I did a small audit) the information is outdated.

If individual truths can be told in creative ways, (in a safe communal setting), with the guidance of skilled professional artists, the results can be profound. How often do we hear on the radio or TV that people, in hearing others truths recognise that they are not alone in their experience. They feel connected to a community of shared experience. This has been particularly obvious to me around the recent apology to mothers of forced adoptions.

Change and Adaptation is a 3 year partnership program. It was established with the awareness that change is the biggest and fastest driver in the contemporary world.

At the Murray River Mouth in South Australia’s Lower Lakes region, climate change had a devastating impact through the drought years. (river and lakes dried up, environmental flows gone, soil acidification, fish dying, turtles dying, birds gone, native species of plants dead—through salty and acid environments). At the start of putting together a partnership proposal, the drought was in its 10th terrible year. By the time it got close to submission stage, the drought had broken for the time being (we will see droughts again). We had to change emphasis, and that very act gave us the direction we needed to go in. Things had changed and we had to adapt. We placed an emphasis on local farmers and environmentalists who had taken the lead by changing and adapting their practices during the drought years.

I can’t begin to list the things that have changed since first preparing the submission and now, at almost a year into delivery. Most notably the restructure of Country Health in SA with staff losses and position shuffles, and the imminent capital upgrade of one of the services we are working with. The changes are political, environmental, developmental and personal. I started the project with a uterus!!

So, that’s the background—what are we doing?

The program is ambitious but adaptive. We are working with Health providers as well as their clients. Too often, the staff are left out—mainly because they are busy and all too glad to hand over a group or clients to an arts program so they can catch up on admin work.

The demands on health agencies are enormous. And, yet they need to have their truths expressed as well. This has been a challenge for us. We started with the idea of working with doorways in a health service as a metaphor for the notion of the ‘threshold’. The word threshold has many interpretations.
As a client, when I enter a medical doorway, I am always fearful of what I might find out on the other side or have to be prodded and poked and stuck often in quite personal places!

We framed one project around the notion of self medication. (Often used in a negative sense to refer to improper use of drugs and alcohol), we saw that it could be a tool for positive self-promises around awareness of personal difficulties in choosing a healthy path. Things like being time poor, family demands, financial poverty have enormous impact in preventing consistent personal change.

The idea is for people to fill out personal prescriptions for small things they can change, then add to these, or describe influences that prevent them “taking their own medicine!!” This will become an installation of mirrored prescriptions etched in people’s handwriting onto mirrored prescription pads. It is a tool for understanding and dealing with common stumbling blocks. We hope that staff will participate in this as well as clients. This project will offer real information about common stumbling blocks to prevention or maintenance of healthy lives.

We’re also working across projects with the mediums of puppetry, cartoon, and digital animation to give character to human things as well as inanimate things. Eg, a cigarette can speak, a condom can speak, individuals can become their fear, temptation or desire, and act out scenarios to help recognise trigger points and weaknesses in order to make positive change.

We have a significant focus on Aboriginal health and wellbeing through our partnership with 'Tackling Smoking' that recently ‘adapted’ to become ‘Keep it Corka’. We’re using the range of arts tools I mentioned, but centring on the use of comedy and music to explore what it means for individuals to be branded in a particular health campaign like smoking, sexual health family violence etc. We’re employing Aboriginal professional artists to deliver workshops with communities, in a prison, with youth, women, elders, and in schools.

With our partner SAFKIML, we are developing a public artwork in Victor Harbour that references the cultural symbols of the local Ngarindjeri and Ramindjeri cultures. The community are very proud of their living culture and keen to express their connection as a part of their move towards wellbeing. This work will be attached to the heritage listed old Court House on the main thoroughfare through the town.

At the conference we have an example of a men’s health project in which we worked with a regional health service and local men’s groups. ‘Tough Guise’ uses the metaphor of the common hero ‘superman’ to explain the difficult labels and expectations society has of men that influences their (lack of) health choices sometimes. The installation is in the foyer and today you can also meet project artist Mike Tye and have a chat. Please feel free to visit it and also listen to the positive personal stories of participants at the ‘Clark Kent’ listening post.

We discovered that, in the last year of the drought music had played apart in community survival. It was both a tool for political action, and community cohesion. A community member in Milang on Lake Alexandrina had started to write a musical but it hit the bottom drawer when drought broke. So, we’re working with the community to resurrect and adapt it, and it’s currently being developed for performance. A professional composer and writer are currently collaborating with the community.

We also have a writer leading the collection of personal stories about people’s lives that are being graphically reproduced and distributed to socially isolated people such as recipients of home based services like Meals on Wheels, district nursing, cleaning, gardening etc. Our writer is also working with the local ‘Sandwriters’ group to present short scripts at this conference. Look out for them at the conference.

Our fantastic artists are collaborating across all the projects and artforms and that’s becoming a wonderful extension to the program and making it even richer experience for participants (because they...
can enter the project within their area of interest or skill). Our artists are also sharing skills and experience that has been a delightful development for them.

I wonder what might happen if there was an artist in residence at every health service. Or a roving team with experience in different artforms. It would be an interesting experiment. In a way, it is the experiment we are immersed in at the moment.

Our program is being independently, professionally evaluated by Dr Christine Putland, (also speaking at this conference) It’s important to say that the arts often viewed as having creative and social value, but it’s also true that the evidence base for the benefits to health and well being continue to grow within Australia (and around the world). It’s great that our principal arts funding body—the Australia Council recognises the importance of programs that include independent research and evaluation of this kind.

We’re very grateful for our health and environment partners willingness to work closely with us as we, and they change and adapt core business and practices to open new, creative windows of opportunity in our work.