



Expressions—promoting wellbeing and social inclusion within a rural community through the arts

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The 'Expressions' program, provided an opportunity for rural consumers of mental health services to participate in an 'arts in mental health' program which resulted in an exhibition of their work at a local gallery during South Australian Living Artists (SALA) festival at a local. The community arts project focused on artistic expression with participants demonstrating varying levels of prior arts knowledge and ability. Art plays a valuable role in engaging people who may be marginalised as a result of mental illness. It allows participants to switch off from issues that may be distressing, promoting wellbeing and social inclusion.

Method

A mix methods approach was used for the study which included: Pre and post social inclusion scale (adapted from Secker), program evaluation, public opinion/awareness survey from exhibition attendees, as well as follow up participant interviews (2 months post program).

Findings

Social Inclusion Scale

Derived from Jenny Secker's work on *Development of a measure of social inclusion for arts and mental health project participants*, (Journal of Mental Health 2009). Participants completed a set of questions at the first session and then again at the end of the program. Statistical Package for the Social Sciences (SPSS) was used to provide pre and post mean scores for each question within the scale. The social inclusion scale demonstrated a positive shift in 11 out of 20 domains.

Questions were placed into three sub scales; social acceptance, isolation and social relations. Within the social isolation subscale, participants felt less isolated from their family, increased seeing or talking to friends, although going out with friends and feelings of playing a useful part in society decreased slightly.

The group mean measurement within the social acceptance scale identified that the project made a difference, it showed a **greater acceptance** from neighbours and a **decrease in feeling** that some people look down on participants because of their mental health needs and **an increase in feeling** valued by others. However within the social acceptance sub scale, the project did not impact on participants feeling more accepted by family and or friends.

Program evaluation

Participants completed a program evaluation questionnaire which demonstrated the majority of participants (6/8) are now motivated to join other programs, have developed their painting skills and are motivated to paint more. All but one indicated they had made new friends in the program and 50% now eat more fruit in general, as a result of having fresh fruit provided for morning teas. Participants indicated that it provided a chance to get involved in a group of people doing things they love, provided a set time and place to be creative, was relaxing and provided a social activity.

Community perspective

Over 60 people attended the opening night of the "Expressions" exhibition. 34/60 completed a survey, of these 76% indicated that their **awareness of mental health increased** as a result of attending the exhibition. 41% indicated the main reason for attending the exhibition was to support mental health and arts events, with 32% indicating that it was to support either a friend or family member.

Post program follow up

100% (5/5) of participants indicated that since the Expressions program they have increased their interest in the arts, with all of them continuing to paint and feeling confident to join other groups/programs. While 80%, (4/5) have engaged in another art group.

Most participants had not purchased art books, or accessed the local library for such, viewed art magazines or watched instructional videos since participating, an interesting outcome, given the level of enthusiasm shown during the program, however awareness of the availability of such and funding to purchase were barriers for this group of people.

Conclusion

In this study we aimed to identify the wellbeing and social experiences of mental health consumers participating in an arts program within a rural community and explore the impact of art in raising awareness of mental health.

Participants felt less isolated from their family, increased seeing or talking to friends, felt accepted by neighbours and community and valued by others. Participants believed that it provided a chance to get involved in a group of people doing things they love, within a set time and place to be creative and was relaxing. The majority of participants became motivated to join other programs and have developed their painting skills.

OUTCOMES

Five participants became financial members of the local art group

Three participants meet regularly at a drop in centre to paint

One participant has created a Face Book group for local artists

Another NGO has inquired as to how they can duplicate the program for their consumers

An outside organisation requested permission to use artworks within their Annual Report

Exhibited works again during Mental Health week

Enhanced relationship between partners involved

NGO provides sustainability through continuing to support individuals to attend the local art group painting sessions on a weekly basis

Through the provision of an eight week arts in mental health program the following are demonstrated:

- Art plays a meaningful role in social connections for consumers of mental health services.
- 'Bringing it all together ' - Guidelines for Arts and Mental Health Projects can assist in the best practice in engagement process.
- Local community partnerships is a key factor.
- Communities can increase their mental health awareness through arts projects being exhibited and consumers journey being shared.

Recommendation

Build on the principle that art is an experiential experience and provides a vehicle for consumers to express their story and explore their feelings in a safe and supportive space by including a framework of "come and try" hands on art experiences in the form of art hubs for consumers and people with mental illness to:

- increase the opportunities for people to work alongside artists skilled in working with people with mental illness
- provide a pathway for personal development and learning life skills
- connecting people back to the community

- increasing employment opportunities for rural mental health consumers

Acknowledgment

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Presenter

Lee Martinez lives and works in rural South Australia and has done so for most of her life, providing a lifelong experience and understanding of those residing in rural and remote areas. Lee currently works as the Mental Health Academic at UniSA Department of Rural Health. She enjoys working with people who have a lived experience of mental health and exploring innovative ways of providing services that are engaging and meaningful to the consumer. My focus is on rural mental health practice, partnerships between academia and industry, workforce development and consumer engagement in service design and delivery. Lee's three decades in community health have allowed her to pursue her passion of ensuring rural communities have access to services to achieve health outcomes equal to those that live in the city.