

Breathe: An Arts and Health Project.

**Commissioned by: Liverpool Primary Care
Trust**

**Delivered by: Merseyside Dance Initiative
and Sense of Sound**

From March 2012 – March 2013

**Evaluation by: Julie Hanna
changeintheweather**



courtesy of

sense of sound 

www.senseofsound.net



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Welcome

In February 2012 Merseyside Dance Initiative, Sense of Sound and First Take were jointly awarded the tender to deliver a 12 month Arts and Health project targeted at adults in Liverpool with asthma. The project was funded by Liverpool Primary Care Trust, with advice from the Liverpool Asthma UK office.

MDI acted as the lead arts organisation and we were very excited about taking on the project for a number of reasons. The project offered a great opportunity for working in new ways with new people. The tender awarded was one of the first positive results from a COoL¹ consortium bid. It would enable the main delivery partners, MDI and Sense of Sound, to work closely together, for the first time, to plan and deliver a programme of singing and dance/movement for health and wellbeing.

The PCT provided carefully analysed data from across Liverpool which, as well as demonstrating how serious the problem of Asthma was in Liverpool in comparison to the rest of the UK, also clearly highlighted the wards of the city with the highest rates of asthma. This provided MDI with a clear template of where to target the majority of the project delivery and offered obvious opportunities for the arts organisations to go out into communities and work with new groups of people. In addition the tender included specific targets in terms of numbers of beneficiaries to be signed up to the Liverpool Asthma UK support network, thereby providing MDI with it's first opportunity of working to deliver 'hard targets' within a medium term arts and health project.

In addition the project clearly offered the opportunity to develop a closer working relationship with Liverpool PCT and a clearer understanding of how arts and health organisations could work better together.

The success of being offered the tender to deliver Breathe coincided with MDI's launch of its Dance and Health strategy 'Move on Up'. This strategy and programme of work brought together the practical and theoretical learning MDI had gathered over many years of delivering health and wellbeing focused projects and its ambition to use this learning to deliver longer term and more creative projects in communities across the Liverpool City region.

Working on and delivering the Breathe project was an exciting prospect, helping MDI to move towards its ambitions and to allow us to widen our reach and engage with individuals in communities that we did not have previous relationships with, building a network of community partners in these areas.

Having come to the end of delivering the project, we are very aware that the project did not reach the hard targets set at the outset. We acknowledge that the project experienced difficulties and challenges resulting from the change over from PCTs to local Clinical Commissioning Groups (CCGs), partnership working and capacity issues. However, we believe that the many positive outcomes of the project, specifically the level of engagement of individuals, the benefits felt by participants and the learning we have gained as an organisation particularly in

¹ COoL: a collective of over 30 small to medium creative organisations in Liverpool.

terms of working with health partners and working with multiple delivery partners have significantly outweighed these difficulties.

Project Legacy:

The learning MDI has gained in terms of project planning has informed the organisation's method of planning and developing new projects and has led to MDI developing another larger scale multi-partner project focused on older people. Recognising and prioritising the importance of the artists relationship with individuals and communities has also led to developments in how other health projects are planned and delivered.

The Breathe project also has a practical legacy. During 2013/14 MDI will work with the North Liverpool Breathe Easy group and Sahir House, resource centre for people with HIV and AIDS, as well as delivering a 6 week course at the Bluecoat Arts Centre, in partnership with the Liverpool Improvisation Collective. These initiatives will focus on Dance for wellbeing for people with breathing conditions and other long-term health conditions.

The respiratory team and Arts Co-ordinator at Alder Hey Hospital have independently raised funds for MDI to deliver a 12-week research project working with young people with severe asthma.

The Breathe website serves as a record of the project and includes information and advice from clinicians, participants and dance and voice practitioners who worked on the project.

First Take are completing production of a short documentary film about the project which will also be available via the Breathe website.

This evaluation report also serves as documentation of the project and clearly shows both the benefits the project brought to participants and partners and the learning gained by all involved.

MDI would like to thank all participants, artists, partners and Julie Hanna who has undertaken the project evaluation.

For any additional information about the project, please contact:

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A few words: Sense of Sound

As a creative partner of Breathe, Sense of Sound had an opportunity to develop its work around singing and health. In 2010 we delivered a wide programme of participatory singing activities as part of Liverpool's Citywide Arts and Health Strategy. Partnering with MDI for the Breathe project in 2012/13 allowed us to concentrate on one aspect of health - singing and its impact on breath. We developed new partnerships with organisations in the North and South of the City as well as national partners at the forefront of singing and health projects.

Our legacy project is the Up for Arts Choir. A choir created from participants in the Breathe project and supported by BBC Radio Merseyside and Voluntary Arts England. The choir currently has 35 members and this will be increased to 50 in 2014. This choir is a brand new initiative for the city and will continue to have health and singing at its centre.

Our Voices Festival – A Celebration of A cappella singing, has now established a National Conference for Singing and Health in its programme. In 2012, as a direct result of Breathe we were able to talk to national partners about the festival in 2014 and the development of the conference as a platform to promote the benefits of singing and health work happening locally, nationally and internationally.

Saphena Aziz
Artistic Director and Head of Training
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BREATHE –

A Liverpool Wide Song and Dance / Movement Project for those with Asthma, COPD and other Respiratory Conditions

'Breathe' - an arts project working with people who experience asthma and other Respiratory conditions, in partnership with **Liverpool PCT** and collaboration with **Asthma UK**

Sense of Sound and **Merseyside Dance Initiative** used singing; dance and movement to help people better understand the signs and symptoms of asthma / Chronic Obstructive Pulmonary Disease (COPD) and worked with people to find new ways of managing their condition through breathing, relaxation exercises and gentle movement.

The project also aimed to signpost people to treatment and support networks. The project aimed to introduce people to singing and dance and to nurture and develop this interest beyond the project to improve wellbeing.

How?

- Singing - learning to sing strengthens the lungs and improves breath control.
- Movement and dance - enhances physiotherapeutic support for respiratory conditions

Practitioners worked with relaxation techniques, posture, energy flow and muscle groups to provide practical tools to help people control their breath. Merseyside Dance Initiative and Sense of Sound believed that this participatory 'song and dance' project would help create a sense of wellbeing and transform the quality of life for the individuals involved.

BREATHE ran from March 2012 – March 2013 and took place in community centres, public places, community health settings and hospitals. It is part of the Decade of Health and Well Being and promoted the Five Ways to Wellbeing.

First Take document elements of the project to create 'micro-films' and on line exercises. This footage is available on line, following the project, to raise awareness of the project, the existing support networks in Liverpool and continuing Breathe focused singing and movement classes / groups

The impact of the project has been, where possible measured by monitoring the physical health and mental wellbeing of participants and gathering and evaluating this 'hard' and 'soft' evidence.



Maxine Brown – dance artist with a participant at Aintree Hospital. Image by First Take

Executive Summary

BREATHE: An Arts and Health Project

– A Liverpool Wide Song and Dance Project around Asthma
March 2012 - March 2013

Breathe was an ambitious year long multi arts, city wide project that initially targeted people living with asthma in the community and in hospital and primary care settings. The project offered singing, movement and dance to help improve participants' capacity to manage their own breathing, learn relaxation techniques, develop a creative outlet through singing and dance, build confidence and enhance overall health and wellbeing.

The project was widened in autumn 2012 to include evaluation of the benefit to those experiencing other respiratory conditions, long-term illnesses and chronic pain. At this time, the project was also extended for 3 months from the original end date of December 2012 to March 2013.

The arts and health project was delivered by Merseyside Dance Initiative and Sense of Sound; two nationally and internationally respected medium sized Liverpool based arts organisations. The 12 month project was funded by Liverpool Primary Care Trust with some initial support from Asthma UK.

Subjective feedback from participants throughout the project suggests that they gained from participating in singing, movement and dance sessions both during the sessions and over time in the short term, during the length of the project.

This project didn't meet its targeted outcome to recruit 500 people to the Liverpool Asthma UK support network. However it has raised the awareness of the signs and symptoms of asthma and the benefits of psychosocial approaches such as singing and dancing to enhance health through its Facebook and Twitter presence and through the networks and links it has forged with a range of groups and organisations.

A film about the project has been distributed to continue to maintain a profile for the benefits of creative activities for health and wellbeing for those living with asthma and other health conditions that impact on breathing.

A website has also been developed as a result of the project. The website documents the project, provides resources such as information, advice and exercises to aid breathing and relaxation and offers links to other organisations who offer medical support and advice for the target group.

This evaluation of Breathe is largely based on qualitative data gathered through observation of sessions and film footage, focus groups and brief conversations and interviews. The report is intended to be an open and reflective account of delivering an arts and health project evaluating and reflecting upon the challenges that have been an inherent part of this project and the benefits and positive outcomes that have emerged.

The three main areas focused on in the report are:

- Impact on the Individual
- Artists' Learning
- Project Delivery: Learning and Recommendations

The Breathe project has provided a valuable opportunity for artists and the arts organisations to develop their practice in both health based public arts engagement and in cross discipline partnership working. They have grown in confidence about delivering complex arts and health programmes. Their skills and knowledge have increased to work with people with asthma and other health conditions that impact on breathing and they are actively seeking further funding opportunities. Merseyside Dance Initiative has ring fenced some funds to be spent in 2013 /14 to continue some of the project activity. In addition, in partnership with Alder Hey Hospital, funding has been successfully secured to enable a further 12 week dance project for young people living with asthma with more detailed accompanying clinical evaluation of the impact of the project led by the Respiratory Department at the hospital.

Recent research (Dogra et al., 2010, Eley et al., 2010, & Mancuso et al., 2006) into the benefits of exercise for people with asthma show that the adherence to exercise programmes can be poor. Reasons for this include a fear of exercising and triggering

uncomfortable and distressing symptoms of shortness of breath. Consequently many people avoid physical activity and develop other health conditions such as obesity, fatigue and musculoskeletal problems.

However with support from family and friends, their health care team and those facilitating activity programmes people can be encouraged to participate. Asthma UK also advise those with asthma at whatever level that increasing their fitness levels and exercising their lungs will help improve their condition.

The research reflects the experience of Breathe. The project could have benefited from longer term funding to build on the established networks, the growing engagement and the skills and confidence of the artists and arts organisations. In many ways Breathe has been a very informative pilot project about how arts organisations can work effectively in partnership with community and health partners to provide creative opportunities to benefit people's wellbeing with long-term health conditions.

It is hoped that this report has distilled some of the main elements of the project and learning. We hope by investing in this evaluation and disseminating it that we can share some of this learning more widely.

Introduction

On the 7th May 2013 it was World Asthma Day and one of Liverpool's local papers ran an article about the prevalence of asthma locally.

"Charity Asthma UK warned of the "alarming variation" as there was a 19-fold difference in the rates of children admitted to hospital as an emergency in Liverpool compared to parts of London.

In 2010/11, 732.6 out of every 100,000 children were admitted to hospital in Liverpool as an emergency asthma case, compared with just 38.7 of every 100,000 children in Tower Hamlets, east London." (Liverpool Daily Post, May 2013)

Asthma UK launched the *Compare Your Care* campaign to help people find out how their care compares in their local area to other areas in the UK. According to Asthma UK Liverpool has some of the highest asthma related admissions to Accident and Emergency in the country (Asthma UK, 2013).

- There is a person with asthma in 1-in-5 homes in the UK.
- Liverpool has one of the highest rates of hospital admission for children with asthma in the UK.
- In 2009–10 an average of 1 person every 7 minutes was admitted to hospital for asthma in the UK.
- As many as 90% of deaths from asthma are preventable.
(Liverpool PCT Artists Brief, 2012)

Early in 2012 Liverpool PCT, working collaboratively with Asthma UK, sought to commission the arts/cultural sector to deliver a programme to support the Asthma Activist project.

Merseyside Dance Initiative (MDI) and Sense of Sound (SOS), two local small/medium sized arts organisations, known nationally and internationally, developed a partnership and were successfully appointed to the commission.

This is an evaluation report of Breathe: A Liverpool wide song and dance project.

Breathe started as a targeted arts and health and wellbeing programme for people with asthma across Liverpool. However part way through the project some of the Breathe singing and dance sessions were opened up for others to join. This decision was taken because there continued to be capacity and an acknowledgement by the Liverpool Primary Care Trust that the programme had wider health benefits for other groups of people.

The Breathe arts and health programme was focused on three areas of Liverpool: Princes Park, Kirkdale and Norris Green. The Liverpool Primary Care Trust had carried out a scoping exercise and analysed data from hospital and emergency admissions and found that these areas scored highest correlated with asthma and other deprivation characteristics.

The evaluation is largely based on qualitative data gathered through observation of sessions and film footage, focus groups and brief conversations and interviews. The report is intended to be an open and reflective account of delivering an arts and health project evaluating and reflecting upon the challenges that have been an inherent part of this project and the benefits and positive outcomes that have emerged.

The evaluator facilitated reflective spaces for the artists, project leads and Liverpool PCT commissioner to share their insights and learning at different times during the delivery of Breathe.

Characteristics about the project and about how people living with asthma view themselves in relation to treatment and intervention contributed to poor engagement in Breathe.

However it is evident from the data gathered that individual participants have gained from attending dance and singing sessions. In addition there is already a tangible legacy from the project. The experience of delivering Breathe is influencing the strategic direction of MDI and SOS in their health and wellbeing work. There are also opportunities being explored to build on specific dance and singing interventions with people with breathing problems.

This evaluation report is presented in several short chapters, which reflect both the way the data came together as it was organised and themed, and perhaps also the essence of Breathe. Breathe was an ambitious multi arts, city wide project that targeted a specific population in community and hospital/primary care settings. As a result many groups and sessions took place for differing lengths of time.

The three main areas focused on in the report are:

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Literature

Three studies: Asthma and exercise

Three recent studies from the US and Australia have been published in the *Journal of Asthma* (Dogra et al., 2010, Eley et al., 2010, & Mancuso et al., 2006). The studies focus on the benefits of exercise for people with asthma. One study includes singing as an intervention (and playing musical instruments). This research focuses on more traditional forms of exercise with people with asthma and not creative interventions, yet the findings underpin and support the experience of delivering Breathe.

Some common themes

- Often people with asthma recognise the importance of exercise for their condition but their adherence to exercise programmes can be poor.
- Asthma is a deterrent to physical activity and predisposes to physical inactivity.
- Benefits of exercise for asthma include enhanced general health and wellbeing.
- Barriers to exercise include -
 - Fear associated with shortness of breath (a principal symptom of asthma),
 - Triggers – weather (humid, wind, pollutants),
 - Time, Laziness i.e. exercise not a habit (common to other population groups),
 - Asthma such as how well controlled the condition is, awareness of condition and understanding of how to manage symptoms,
 - Other medical conditions such as obesity, fatigue and musculoskeletal conditions (if person is not exercising they might develop other physical problems).
- Facilitators to exercise include –
 - Being with a motivated companion,
 - Support of social network,
 - Encouragement and confidence from Doctor,
 - Support from health staff (medics, nurses, asthma experts),
 - Exercise staff (dancers/singers/musicians) being liked by participants,
 - Focusing on the benefits of exercise.

In addition

Singing as a therapy for chronic respiratory disease.

A UK study (Lord, V.M., Cave, P., Hume, V.J., Flude, E.J., Evans, A., Kelly, J.L., Polkey, M.I. and Hopkinson, N.S, 2010) of the impact of participating in singing on breathing for people with chronic obstructive pulmonary disease (COPD) concluded that:

- There was an improvement in quality of life measures;
- Reduction in anxiety;
- Participants experienced singing positively.

This research suggests that singing might be particularly beneficial for those people who have anxiety or depression alongside their respiratory disease.

“Sometimes I have a tight chest and it helps to exercise my lungs by singing, this choir really helps me. . . I suffer from mild asthma. Singing helps to open up my lungs more and to get more breath. The exercises help keep my chest going.

Singing is a fun exercise. And you don't even notice that you are doing anything at the time. And it really does help your breathing. And at the same time you are having fun singing. I would recommend it. . .

My breathing has improved since joining the choir. I get less shortness of breath. And I can hold my notes on longer. And hold my breath longer.” (Choir participant, with asthma)

“I feel sometimes when I come here I feel really down feel really depressed you know if I have not been feeling too good and when I come and do this, you know, some days I can't do what I have done today. Some days I'll sit out the dancing. But today I feel great. It gives you a boost. And I think it does help my breathing. You know the exercises that the dance artist does. It does help your breathing and when she tells you to breathe and that. I always feel a bit better you know.” (Dance Participant, with COPD)



Wendy Thomas – dance artist with North Liverpool Breathe Easy group, Aintree. Image by First Take

Aim, Outcomes and Objectives

Liverpool Primary Care Trust set the following aim and objectives for the project.

Aim: To deliver a creative and participatory community engagement programme

Desired Outcomes:

1. Increase awareness of the asthma support network in Liverpool among the population groups most at risk, primarily families living in deprived areas as well as those providing services for asthma patients. (NB research regarding the location of population groups for inclusion will report in January 2012).
2. Help to facilitate recruitment of 500 members of the asthma support network and 50 peer support activists.
3. Support the wider programme of raising awareness of the signs, symptoms, treatment pathways and the management of asthma and reducing the stigma associated with the condition by creatively engaging with new audiences.
4. Improve understanding of the potential role and value of creative community engagement in empowering residents to manage health conditions and foster their own health and wellbeing.

In addition the project should include the creation of a mobile artwork to:

- Generate significant positive attention and interest in relevant communities and media
- Encourage and inspire interaction and/or participation by relevant communities
- Enable sharing of people's experiences of managing asthma
- Communicate appropriate messages regarding the condition
- Create a resource for the asthma support network in future

Once Merseyside Dance Initiative and Sense of Sound were successful in their application for Breathe they added some other desired outcomes, which were:

1. To increase the artists learning and confidence offering creative activities for people with asthma and breathing difficulties.
2. To increase learning for both arts organisations, Merseyside Dance Initiative and Sense of Sound about the delivery of arts and health and wellbeing projects which could influence and shape their future work.
3. To deliver a quality arts and health project that is perceived by funders to be value for money.

Summary of how Breathe has met the outcomes of the project.

Outcomes 1 and 2.

Increased Awareness of Asthma Support Network and recruitment of 500 members of the asthma support network and 50 peer support activists.

There were insufficient numbers attending the dance and singing sessions to meet the above targets.

There was a lack of engagement from Asthma UK to promote the benefits of joining the Asthma Support Network.

The project was reviewed in November 2012 and it was decided to:

- a. Stop trying to recruit to the Network
- b. Open up sessions, where appropriate, to participants with out asthma.
- c. Continue the programme for an additional two months, until the end of March 2013.

Outcome 3

Support the raising awareness of signs and symptoms of asthma and reduce stigma.

The success of this is unknown and the work is ongoing post Breathe. Awareness has been raised in the following ways:

- a. Individually and in groups with participants attending sessions
- b. Through the use of the Breathe Face Book Page and twitter account shared via MDI social media, on the MDI and SOS websites, and in MDI newsletters.
- c. Distribution of a film that has been created during the project to promote the benefit of dance and singing for breathing and health. The film combines footage of Breathe singing and dance sessions, participant stories and testimonials, advice and information, signposting and exercises to promote and enhance wellbeing with a focus on breathing led by singing and dance artists.

Outcome 4

Improve understanding of the potential role and value of community engagement to empower people to manage health conditions.

There is qualitative evidence that illustrates the impact participating in the Breathe programme has had for individuals.

The Breathe Project has perhaps been more like a pilot project. It has

- a. Gathered information about relevant networks and partners
- b. Delivered short term activities that appear to have health and wellbeing benefits

- c. Gained interest from organisations and groups who would like to continue to offer dance and/or singing for people with asthma and other health conditions
- d. Increased the arts organisations' knowledge, skills and confidence to offer creative sessions to people with asthma, breathing problems and other health conditions.
- e. Increased the arts organisations' experience in delivering health and wellbeing projects

Additional Objective – To create a mobile artwork

Although some initial research and development work went into the creation of a mobile "Booth" plans were "put on hold" at a time when resources and capacity were being used to target recruitment and increase engagement in the project.

This funding allocation was then reallocated to commission a film to help increase awareness of the Breathe initiative and share widely the health benefits for those with conditions affecting breathing of participating in singing and dancing.

Arts Organisations desired outcomes

1. To increase artists learning and confidence

The 3 artists (2 dance artists and 1 vocal artist) delivering the project all have shared their subjective experience of an increase in knowledge and skills in working with people with a range of conditions that impair breathing and with those with other health conditions.

2. To increase learning for both arts organisations to influence future work

As is clear in the recommendations and learning for the Breathe project both Merseyside Dance Initiative and Sense of Sound have gained in understanding and clarity about some of the elements needed for a successful arts and wellbeing project.

The experience of delivering Breathe is influencing both organisations' strategic direction for delivering future health and wellbeing activities.

E.g. MDI are developing a more localised and focused approach building on existing networks to deliver future health and wellbeing activities.

E.g. SOS is developing a health and wellbeing strategy to their work.

Future plans:

- To deliver a further programme of dance sessions at Alder Hey Children's Hospital with primary and secondary school age children and young people with asthma.
- To deliver future training, seminars and conferences by both MDI and SOS to share their learning and promote awareness of the benefit of creative activities for health and wellbeing.
- To continue to develop links made during the project between SOS and Sydney de Haan Research Centre for Arts and Health at the University of Canterbury to develop shared learning opportunities.
- A weekly health and wellbeing choir in partnership between SOS and Radio Merseyside
- A continued MDI programme of activities throughout 2013/2014 that replicate elements of the Breathe programme such as; the Monday evening dance, Florrie and Breath Easy sessions.

3. To deliver a project that is value for money

This is difficult to assess. The 35K project was delivered within budget and there is some funding to support short-term continued delivery of some of the groups established as part of Breathe.

In addition the Breathe arts and health project delivered the following:

- Attendance was consistent, although numbers were often relatively low
- Sessions offered singing and dancing
- Delivery took place in three targeted geographical locations across Liverpool and in the city centre.
- Sessions were delivered in a variety of different settings including community venues, hospital settings, primary care settings and in other locations such as BBC Radio Merseyside and MDI studios.
- Sessions were both group and one to one
- Participants ranged from children and young people, to adults and older adults.
- Programme activity included engagement, delivery, health promotion and awareness.
- A legacy of creative arts and health activities and continuing professional development activities.

“Especially at the. Beginning of the class we do lots of breathing, mm and I suffer from asthma so it really does help to know that the breath is circling around your body, and supplying oxygen.” (Dance Participant)

“I think dance is a lot of the time accentuated by breath . . . Every move has to have the right amount of breathe . . . African dance is quite intense sometimes so you do have to control your breathe and move around at the same time.” (Dance Participant)

“Before we start to sing we do exercises. Breathing exercises, breathe in for four and breathe out for eight. At first, I found that really, really difficult. But now I'm not quite there but I am nearly there. I have to give up at about 5 or 6. But I am getting there. Better than I was at the beginning. Ad I have started to do it at home. I continue to do it at home. When I am doing the dishes. All the time it's helping. And I would rather do this and that breathing than take inhalers. I don't like taking inhalers.

I have never found anything that I enjoy so much. If anyone had said to me last year that I would join a choir I would have said no way. Not even on my bucket list! But now I have found it, I really, honestly look forward to it so much. Love it. . . . I would just say to somebody, any one out there just come and do it for you. Come along try it . . You don't need to come back. But I guarantee if you come you'll stay.” (Choir Participant)

Evaluation Methodology

The evaluation draws upon the following principle research and evaluation methodologies:

- Ethnography
- Participatory Action Research
- Appreciative Inquiry

These are qualitative approaches and methods to research and evaluation concerned with participants' subjective experience. The report also includes monitoring and quantitative information gathered by the project leads for Breathe.

This approach means that the evaluation is concerned with making sense of people's behaviour and its relationship to their health and wellbeing. The participation of project participants, artists, health workers and partners has been valued as they collectively contribute to the research process. The emphasis of the data collection is on identifying what works and how to do more of this (Reed 2007).

Appreciative Inquiry is an approach that is inclusive, energises and generates new ideas and has impetus for change and development. Although it has a focus on what works it doesn't ignore difficulty. Appreciative questions are central to the AI approach that helps people to share and look at reality a little differently.

Questions asked in the Focus groups included:

- What is exciting and motivating about Breathe?
- What are the outcomes you would have liked to achieve by the end of the project?
- What has worked so far?
- What would you like to do differently?
- When the going gets tough what keeps you excited and motivated about Breathe?

Questions asked of the artists included:

- Describe an experience as an artist working with Breathe where you learnt something important or significant?
- How will this learning help you as an artist working with other health and wellbeing projects?
- What would you like to do more of to help your learning?

Data collection and analysis

All data will be analysed with reference to the five ways to wellbeing (where applicable) and objective outcomes.

The *five ways to wellbeing* were developed by the new economics foundation (nef, 2008). The *five ways to wellbeing: connect, be active, give, take notice and learn* are underpinned by an evidence base linking these behaviours with subjective wellbeing.

Building on previous evaluation work connect and be active have additional “sub themes” (Hanna, 2012). These are:

Connect; with others, with inner self/personal meaning and with art/creative process and imagination

Be active: physically active and actively relax.

The evaluation has gathered data relevant to the health and wellbeing impacts of the project. It has also aimed to shed some light on what the cultural organisations and the artists have learnt by delivering the project to help embed this practice and inform future delivery.



Maxine Brown – dance artist with Breathe group at the Florence Institute, L8. Image by First Take

Findings: Impact on the Individual

A. Participant Feedback Forms (see Appendix 2 for forms).

These forms were designed to try to capture some feedback from participants that was subjective but that could also be translated into a more standardised and quantitative format.

Very few forms were collected:

Issues –

- Engagement – the focus of the artists and project leads was on engaging with participants and not on evaluating the experience.
- Generally the artists were the only ones at a session to gather the feedback. This presented:
 - Practical difficulties of time
 - Difficulty of being both the artist facilitator and evaluator.
- From January 2013 – March 2013 the evaluation focused only on those people attending the sessions with asthma. After this date others attending presenting with other health conditions were included in the evaluation.

Often in Arts and Health projects it is challenging to gather and make sense of information using a validated tool or a tool that is more quantitative. The number of participants can be small and lack regular or consistent attendance at sessions. It takes time, familiarity with the evaluation tool and confidence to engage participants

in completing an evaluation. Then once the data has been gathered it can be difficult to interpret people's responses.

Below are 14 feedback forms completed by participants from three different dance groups:

- Breathe Easy Group
- Monday Evening dance sessions.
- Alder Hey

Summary of findings:

- Twelve out of fourteen participants subjective experience of their breathing at the end of the dance sessions was either improved or the same as at the start of the session.
- Ten out of the fourteen offered additional comments on their participation in the dance sessions. All these comments were appreciative of the dance experiences and the benefit to their sense of wellbeing.
- Comments included: the benefits of movement, feeling calm and relaxed, benefits to breathing and the social benefits of the sessions.

Findings: Impact on the Individual

B. Individual Feedback

Below are verbal and written quotes from Breathe participants. Sometimes the voice of the group organizer or supporter is heard. The Alder Hey, Children's' Hospital feedback is from respiratory nurses who supported the dance sessions.

Breathe Easy group North Liverpool

This is a weekly support group for people affected by lung conditions and their carers, ex carers, friends and family.

“A few weeks ago, Dr O'Reilly was our guest speaker and told us that even if we have a chronic illness we should still stay active and enjoy life to the maximum of our abilities. We learnt about one of his patients who have a serious lung condition – she took up line dancing and now runs her own dance group!

Inspired by Dr O'Reilly's up beat talk – this meant that dancing immediately became a must have for our Group!

We were delighted when (a dancer) from Merseyside Dance Initiative agreed to give us a series of sessions that will teach us to trip the light fantastic. In next to no time, she had us doing exercises to loosen up our joints and help our breathing, before teaching us a series of nifty steps.

We have a wonderful time, with plenty of laughter and lively music; the sessions spin over in next to no time. Once again we have hit the jackpot with another wonderful teacher. (The dancer) is a fabulous dancer and most importantly, has a great sense of humour!

She assessed which sort of dancing would be most suitable for our needs. To accommodate our less able friends she introduced chair-based exercises – so everyone can take part and enjoy the fun. It's amazing that everyone except me is in perfect time to the music and float around the floor like experts. . .

The group is well established and are open to new things and I think this really helps.” (Breathe Easy Member and Group Organiser)

Thank you to Dancer -

“ . . several of our members used to dance, have not been confident enough to do so since they developed lung conditions, but you have made it possible for them – even if they had to dance sitting down!! The laughter will have released plenty of endorphins to keep us all happy for our next session.

It is amazing that in such a short time, you have done such a wonderful job of raising the morale of our members. Many members suffer from panic attacks and depression during times when they are fighting for breath, or are ill, so I am always trying to find

activities which build their confidence and help them to realize that life is still worth living.” (Breathe Easy Member and Group Organiser)

Participant Feedback:

“I have always liked dancing because when I was a little girl of 4 years old taken to institute of dancing and learnt ballet, tap and toe dancing.
In my teens I went ballroom dancing, Latin American, Jive, and that sort of thing. In latter years - took up line dancing.
I like the music, keeping mobiles, and also the feeling of wellbeing it gives me.”

“You wouldn't think that half of them have got severe lung problems!!!”

“I enjoy it (dance).
I really love it.
When you go to the gym and you feel all rearing to go I feel like that.
I don't mind the walk home now
I have asthma” (

“I enjoy it (dance)
A bit puffed
But OK.”

“The dancer is very patient.
I hadn't spoken to that man before
The tai chi, dancing and singing
You can feel it's really good for you.”

The Florrie Dance group

This was a group established as part of the Breathe project to meet at the Florence Institute (Mill Lane, Liverpool 8) community centre in North Liverpool.

Participant Feedback:

"All exercise is helpful"

" I am a dancer, I like dancing and this helps my breathing"

"Dancing makes me more aware of my breathing and what my chest is doing - usually
I don't think about it"

"This is about health promotion isn't it?"

Monday Evening Dance group

This was a group that met at the studios of MDI and was established as part of Breathe and engaged with people with a range of health conditions.

Participant Feedback

“Neighbours told me about the class. I thought I would give it a try.
I was really pleased the first time I came, it is very enjoyable.
It suits me because I am just getting back into exercise.
So enjoy moving and music and can't do anything too strenuous.
I can go at my own pace.
Been physically unwell.
Only exercise that I do.
Wish there was more of it.”

“Relaxing,
Very relaxed.”

“Every class been coming for some time I can definitely assess that it is really helping my general well being. It is a space I can come in safety and move about and be very open. And that is a great gift.

And because of the safety and level of relaxation it is helping me to be more grounded and more connected.

I look forward to losing myself, connection, letting go, bliss . . .

Every week

And why can't I have this more in my life to step into this more space more often.

Somatics

Dance helps people to get more in their bodies - grounded, stability, clarity, more focused."

"I had a stroke 13 years ago. I can't talk properly. (This session) takes me somewhere else. I can walk backwards!"

"Quite terrifying. Love it. I was worried about closeness with other people but this was OK.

I could feel my muscles had done something. This was positive and a great surprise. I could feel muscles the next day. I could deal with it and I was proud of myself.

A Zumba class (isn't the same).

I am less scared.

It has helped me physically.

And (it has helped me) to be with people of different of abilities. To meet other, different people."

Alder Hey Children's Healthcare Hospital group

This was a group of primary school and secondary school age children and young people (8 – 16yrs old). They were on high levels of medication. Their asthma was difficult to control and they experienced daily or persistent symptoms. They had periods of acute illness with visits to the GP and A&E. Many would have hospital inpatient admissions.

The group was held in the hospital. Average attendance was 6-8.

"It helps me understand what asthma is and helps me breathe and stuff." (Dance Participant)

"This is the most exercise I have ever had because my day normally consists of sitting in a room on a computer." (Dance Participant)

Feedback from two Respiratory Nurses at Alder Hey:

There is a need for the dance group:

- There is a gap in provision and treatment which is very biased towards pharmacological interventions.
- Medication for asthma can have unwanted side effects and reduce feelings of health and wellbeing.
- Many children and young people with asthma don't do much physical exercise because they come to associate exercise with feeling unwell and as a result many are unfit and over weight.

Benefits observed:

- Nurses were able to observe children's and young people's behaviour participating in a physical activity.
- Group was perceived as "safe"
 - Support from nurses and health care staff available if needed.
 - All participants had asthma and a range of interventions and support
 - Family members, parents or siblings, could stay and join in/watch
- Opportunity to experience and value a non-pharmacological intervention and the benefits for health and wellbeing.
- Opportunity to change perceptions of the impact of asthma on their lives i.e. exercise is possible and enjoyable.
- Increase confidence and motivation to engage in exercise.
- Social connection and building relationships with others with a similar condition and presentation i.e. the participants did not know each other before the group as they usually attend for treatment individually.
- Developing a relationship with dance artist: "She made the young people feel everything was possible."
- The sessions were fun.

The future:

- To look for funding for further sessions
- To carry out more structured lung function tests pre and post sessions
- To engage with families and parents as well as children and young people to facilitate access to the group.

Granby

A dancer facilitated 5 sessions with mothers and young children.

Story of one participant:

"A woman with very little English attended all five sessions with her child. Communication was difficult but she was very committed. This same woman came to an international women's day event where I was leading some dancing. She met other women from the BME community and has started to make some links and increase her network."

Singing at The Florrie: A flavour

This was a group that met at the Florrie Community centre and was established as part of Breathe. The members of this group later joined the Radio Merseyside Choir.

Evaluator's Description, joining in the group

"It was very welcoming. Three people arrived to sing. The session was an hour long. We stood. The session was friendly and focused. Everyone worked hard. I experienced a sense of achievement and challenge. There was an expectation that everyone could do what was asked of them.

The session warm up was focused on breathing. The small group was familiar with the exercises. Counting in and out. Singing scales. Focusing on the control of the breath.

The main session: singing through a song. We sang together, words and no music. And then divided and sang in harmony. Some laughter. Some trepidation. But everyone participated.

The session ended with singing through the song a few times. We clapped. And there were lots of smiles."



Wendy Thomas – dance artist with North Liverpool Breathe Easy group, Aintree. Image by First Take

Findings: Impact on the individual

C. Individual wellbeing – five ways to wellbeing

Summary from participant quotes, evaluator observations, artist and project lead observations,

Connect –

a. With others

- Being with young people who share some similar experiences
E.g. One of the young people was admitted to A&E on arrival at the hospital. Other young people from the dance group visited her. Now when any of the group meets on the ward there is a shared experience and they talk together. Before the Breathe dance sessions the young people did not know each other. (Alder Hey Dance)
- Making new friends
E.g. Dance group participants talked about talking to members of the Breathe Easy group during and after dance sessions who they hadn't talked to before.

“ . . . I hadn't talked to that man before. . . ” (Breathe Easy Dance)

- Meeting new people and overcoming physical closeness:

“I was worried about closeness with other people but this was OK. . . . And (it has helped me) to be with people of different abilities. To meet other, different people.” (Monday Evening Dance)

- Meeting with others outside the family (Radio Merseyside Choir)

In addition -

Connect –

b. With the dance/singing/creative process

- Enjoying an activity that used to do, has enjoyable memories

“I have always liked dancing . . . “ (Breathe Easy Dance)

- Reconnecting with dance

“ . . . several of our members used to dance, have not been confident enough to do so since they developed lung conditions, but you have made it possible for them.” (Breathe Easy Dance)

Connect – c. With inner self/personal meaning

“And because of the safety and level of relaxation it is helping me to be more grounded and more connected.” (Monday Evening Dance)

“I had a stroke 13 years ago. I can’t talk properly. (This session) takes me somewhere else. . . .” (Monday Evening Dance)

“Introvert, precious, special connecting moments. . . not for an audience . . . new discovery . . .” (Monday Evening Dance)

Give

- Giving in paired work (Monday Evening Dance)
- Artist giving
E.g. The vocal artist gave to the group:

“. . . Giving people a quality experience. If you are working towards a performance. The performance has to be good. They worked very hard and deserved to be the best {they} could be.” (Radio Merseyside Choir)
- Willingness of people to participate and give – committed to dance and singing sessions
E.g. Willingness to try (Alder Hey)

Learn

- Learning Exercises:

“She said she was really pleased with herself and was obviously committed to the project and came to every session. A bit of a joker. She was confident to lead the final breathe session and took responsibility. . . .This exercise is now known to her and she could use it in the future. Clearly able to bring herself into a centred place and the giggling disappeared.” (Alder Hey Dance)

“Because of the breathing, the exercises you do because its fun and its not rigid, she explains about your vocal chords, and different ways, which means your passages open – you don’t think about it being medically or exercise as such. . . .And if I go out I get very breathless. Breathe in for 4 and out for 8. . . Am getting there. I do it at home when I am doing the dishes. I don’t like taking inhalers.” (Radio Merseyside Choir)
- Learning new skills – about breathing, relaxing (Monday Evening Dance)

- Learning an adapted dance routine from the Big Dance (Aintree Hospital Dance)
- Young people learnt breathing exercises linked to imagery and movement. They were encouraged to use these at home. (Alder Hey Dance)

Be active

“I enjoy it (dance) . . . a bit puffed.” (Breathe Easy Dance)

“ . . . In next to no time (the dancer) had us doing exercises to loosen up our joints and help our breathing, before teaching us a series of nifty steps.” (Breathe Easy Dance)

“(The dancer) assessed which sort of dancing would be most suitable for our needs. To accommodate our less able friends she introduced chair based exercises – so everyone can take part and enjoy the fun.” (Breathe Easy Dance)

“ . . (The dance sessions) suit me because I am just getting into exercise.” (Monday evening Dance)

“I could feel my muscles had done something. This was positive and a great surprise. I could feel muscles the next day. I could deal with it and I was proud of myself.” (Monday Evening Dance)

“I can come out without coughing, I can take a deep breath without coughing, . . . It stops me getting half way there and having a coughing fit, . . . I feel more alive because I can breathe more, . . . I was on drugs before and now I can take deep breaths and feel more alive. It's because of the singing. . . I can hold notes longer. . . When you are singing you breathe differently.” (Radio Merseyside Choir)

“Welcoming people back home to their bodies.” (Monday Evening Dance)

“ For almost everyone who has come to this class there is a physical history. It is a very inclusive class. So there is a challenge to be active and they are coming to be active.” (Monday Evening Dance)

- This group of young people were physically not very active and often didn't take part in P.E. at school because of their asthma. (Alder Hey Dance)

In addition -

Be actively relaxed

- “Relaxing, very relaxed.” (Monday evening Dance)

Take Notice

- Helping participants to notice what is happening in their bodies and to help each other notice in paired work (Monday Evening Dance)
- Dance artist is helping participants to take notice of what is happening in their bodies. To “pay attention” and to let go of “tension habits”. (Monday Evening Dance)
- Becoming aware of link between dance and health and wellbeing:
“This is about health promotion isn’t it?” (The Florrie Dance)
- Increased physical awareness:

“Dancing makes me more aware of my breathing and what my chest is doing – usually I don’t think about it.” (The Florrie Dance)

“This is about health promotion isn’t it?” (The Florrie Dance) i.e. participant reflecting on the link between dance and health and health and wellbeing.

‘Dance helps people to get more in their bodies – grounded, stability, clarity, more focused.’ (Monday Evening Dance)
- Helping participants to notice what is happening in their bodies and to help each other notice in paired work (Monday Evening Dance)
- Dance artist is helping participants to take notice of what is happening in their bodies. To “pay attention” and to let go of “tension habits”. (Monday Evening Dance)

Findings: Artists' Learning

A. Artists' reflections: practice and theory

The artists were given opportunities during the Breathe Project to evaluate and reflect on the project as a whole and more specifically on their artistic practice. These included:

- Participating in the Focus Groups
- Using a reflective Appreciative Question Tool
- Observing, evaluating and reflecting on sessions using film footage
- Engaging in conversations with the evaluator

Reflection and Evaluation can be confusing. In order to understand how these two things relate to each other there is a brief discussion that aims to define these terms and relate them to the artists' process of reflection in the context of the overall evaluation.

a. Reflection

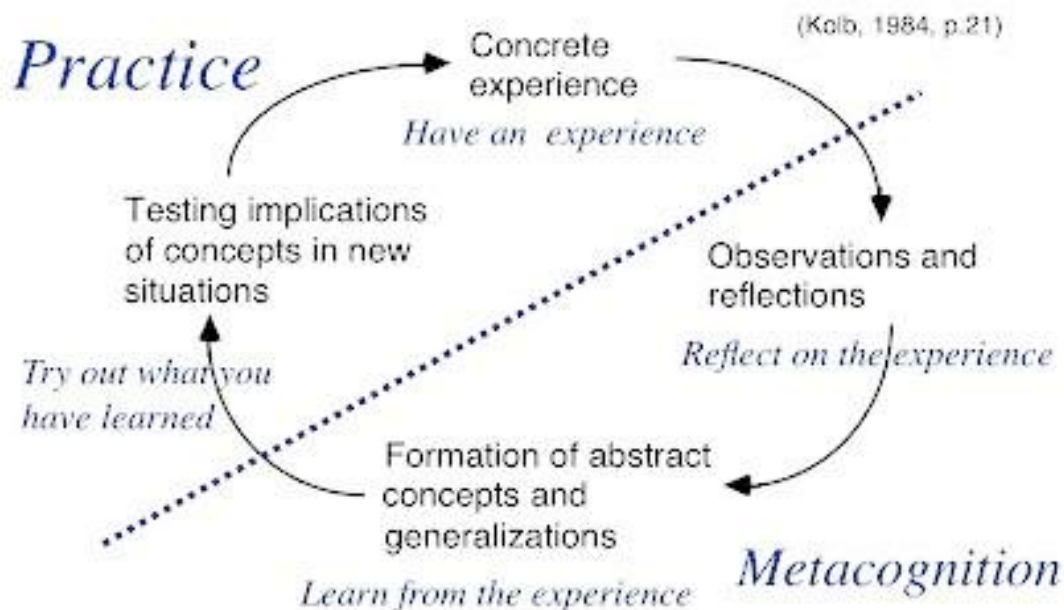
There are many wide and varied definitions of reflection but Boud's definition below is reasonably simple and comprehensive:

" A generic term for those intellectual and affective activities in which individuals engage to explore their experiences in order to lead to a new understanding and appreciation" (Boud, Keogh & Walker, 1985)

Much work on reflective learning styles has built on the work of John Dewey. The short quote below sums up the value and significance of reflection.

"We do not learn from experience...we learn from reflecting on experience." (Dewey, 1938)

The Learning Cycle, developed by David Kolb, is based on the belief that deep learning, that increases understanding and enables growth and development, comes from a sequence of experience, reflection, abstraction, and active testing.



Reflection is a form of mental processing – like a form of thinking. People reflect to fulfill a purpose or to achieve some anticipated outcome. Reflection is applied to relatively complicated or unstructured ideas for which there are not obvious solutions. (Moon 1999)

According to Moon the following conditions are required for reflection to take place:

- Time and Space
- A good facilitator
- Asking the “right” kind of questions: no right/wrong answers
- A Supportive environment, including emotionally supportive.

Activities that are ill structured and messy based in real life and that are challenging lead to reflection.

Therefore in the Breathe project artists were given the opportunity to reflect on their practice. Their reflections were facilitated by Appreciative Questions both as participants in the Focus groups and completing a reflective Appreciative Question tool.

These opportunities gave the artists the opportunity to tell stories, explore their meaning and answer questions that were explorative and did not have right or wrong answers. Appreciative Conversations

“ focus on . . . what worked and how it made you feel. They generally prompt a new insight as the speaker reflects.” (Slack and Bush, 2012)

The film footage offered a further opportunity to reflect. The film was unedited footage for the film that was being shot and compiled for the project.

Film/Video in the arts can be a useful reflective and evaluation tool. Watching film has some advantages over the real world in that it allows:

- To watch what is happening more than once
- To see images of oneself.
- To notice everybody

(Video as reflective learning tool, York, Theatre practitioners www.yorks.ac.uk/arts/faculty-of-arts/alchemists-at-work/teaching-and-learning-projects.aspx)

The evaluator watched the film footage alongside the artists and introduced the session with one question:

What do you notice?

In addition the artists were asked to specifically comment on examples of the *five ways to wellbeing: connect, give, learn, be active and take notice*.

b. Evaluation

“Good evaluation is not about some people judging others: it’s about people with shared goals and values working together, with trust and respect, to keep improving the quality of their work.”
(Liverpool Primary Care Trust, Evaluation Guidance)

Evaluation is a way of demonstrating the quality and impact of a project. In the field of arts and health it can be complicated as to how to decide what should be evaluated and how to evaluate. There are often different stakeholders from the arts and health sectors with different priorities. It is challenging as to how to show the true value of arts and health activities that encompasses all of the following:

- To account for the use of funds
- To help improve future work
- To provide evidence of the value of your project for health and wellbeing (Kilroy et al, 2007).

Reflection as part of Evaluation

Moon (1999) states activities that require an ordering of thoughts and evaluation promote reflection. Therefore in order to evaluate the effectiveness of something it is necessary to reflect.

Another well-known theorist about how we understand reflection in terms of learning is Schon. He discusses story telling as a mode of reflection:

“...for storytelling is the mode of description best suited to transformation in new situations of action.... Stories are products of reflection, but we do not usually hold onto them long enough to make them objects of reflection in their own right.... When we get into the habit of recording our stories, we can look at them again, attending to the meanings we have build into them and attending, as well, to our strategies of narrative description.” (Schon in Grimmet & Erickson, 1988)

In this way the artists reflected on their own learning and contributed to the overall Breathe evaluation. Below are the main themes that emerged from the artists' reflections on their own professional practice.

Findings: Artists' Learning

B. Themes

- Awareness of limitations resulting from short timescale of project.
 - E.g. identifying potential within individuals/groups for different and perhaps more beneficial/challenging work.
 - E.g. having built up trust with individuals/groups then the sessions finish.
- Developing skills and acquiring knowledge about working creatively with people with long term and severe health conditions and in particular, but not exclusively, conditions that impair breathing.
 - E.g. Inviting people with asthma to use inhalers at the start of sessions before being active.
 - E.g. Pacing activity to take into consideration people's different energy levels and physical awareness.
 - E.g. The importance of breathing out/exhalation to increase breathing capacity: start with out breath, continue to count on out breath as long as feel comfortable.
- Increased confidence in working with individuals/groups with different health conditions and abilities.
- Motivation to continue to practice and develop skills relevant to people with conditions that impair their breathing and with others living with a variety of health conditions.
 - E.g. continuing to contribute to health and wellbeing projects with in Merseyside Dance Initiative, Sense of Sound and other organisations.
- Identified future learning needs
 - E.g. psychology of the voice

Findings: Project Delivery

A. Focus Group Summary

Two Focus groups were held as part of the evaluation.

The Focus group schedule of questions were developed using an appreciative questions and conversations approach.

Much of the information gathered during the Focus Groups is included in the discussion about project outcomes and recommendations. However below are some additional comments about the Focus Groups.

Participation in Focus groups

Two Focus groups were held as part of the evaluation in August 2012, at the start of the Breathe Project, and in December 2012, about half way through the project.

Originally it had been intended to bring together representatives from all the partner organisations in the Focus groups including: MDI, SOS, Liverpool PCT and Asthma UK. However it was only possible to bring together Artists and Project Leads/coordinators from the two arts organisations delivering the project. The Liverpool PCT commissioning manager was interviewed individually as part of the evaluation. Asthma UK did not engage in the evaluation.

A third Focus group was planned to take place at the end of the project but it was not possible as the result of everyone's commitments to time table this.

Feedback was gathered from the Project Lead from MDI and SOS and from the Liverpool Primary Care Trust Commissioning Manager that contributed to a final perspective.

Appreciative Questions

The style of questioning facilitated open discussion and a focus on strengths, assets and what works. It was evident that the project was challenging however discussions were generally lively. Many difficult issues were explored energetically. The style of questioning may have contributed to this response to difficult circumstances in addition to the artists and project leads high levels of motivation to deliver the project.

The information below has been gathered and organized organised from the Focus group data.

Motivation

Those who were involved in delivering the project were motivated by:

- To increase learning about how voice work and dance impacts on people's lives.
- To gain experience leading and delivering a health and wellbeing project.
- To demonstrate impacts of the arts on health and wellbeing.
- To see improvements/impacts for peoples' health and wellbeing
- For the two arts organisations, who had not worked together before, to work in partnership.
- To work in partnership with health providers; statutory and charitable. To build on previous work and continue to learn about benefits of arts and health
- To engage with new people
- To build and grow arts and health interventions

Other emerging themes

- Communication
- Partnership working
- Engagement
- Managing different expectations of participants
- Publicity
- Managing expectations of different partners/stakeholders
- Capacity/project management



Maxine Brown – dance artist with Breathe group at Alder Hey Children’s Hospital. Image by First Take

Findings: Project Delivery

B. Recommendations and Learning

These recommendations have been collated from the joint perspective of the arts organisations, Merseyside Dance Initiative and Sense of Sound, in partnership with Liverpool PCT. Feedback during the evaluation has led to the development of these key areas of learning: engagement, clarity and partnership working.

The recommendations will inform future working for the arts organisations and by sharing them here it is hoped that they will benefit other arts organisations on their journey of designing and delivering successful arts and health and wellbeing programmes.

A. Engagement

Giving a priority to and time for engagement.

“We raced too quickly into the doing.”

“Rethinking the delivery of the project
Being Imaginative to engage with people
Pulling out all the stops
Digging deeper.”

“It takes time for artists to have an impact in a field of work and geographically where there isn’t something going on.”

The commissioning brief and Arts submission concentrated on delivery.

We learnt that:

- Ask questions during application process and at start of project delivery to build up a clear understanding about what already exists to support engagement of target population in project.
i.e. Avoid making assumptions.
- Engagement starts with asking the target population what motivates them and what they want.

i.e. the artist commission could have come at a later stage once Asthma UK and Liverpool PCT had completed some initial research
or
the artist brief could have been focused on exploring what people living with asthma want.
- Motivation:
Conversations with local health professionals revealed:
That many people with asthma tend to focus on managing their condition in the short term and are not motivated to change behaviour and learn new strategies for longer-term benefits.
- Making networking and relationships a priority from the start.
 - For Breathe this meant:
 - To plan how to make clinical/medical and non clinical/community links to support engagement
 - To develop strong and effective relationships with key health professionals, such as respiratory nurses, to increase their confidence in the benefits of participating in creative activities to enhance health and wellbeing and to facilitate “referrals” to arts activities.

B. Clarity

Of roles, responsibilities and project aims

- Invest time at the start of a project in getting clear as to:
 - What the project hopes to achieve
 - Whose responsibility is it to carry out different tasks
 - Establish what different partners can offer to the project to help meet its aims and deliver the expected outcomes.
- Ensure everyone who is involved in the project is involved in this initial planning, including all health, arts, community partners and evaluators.
NB: Include artists contributing to a project as soon as possible in conversations about design and delivery of a project.

- Regular reviews –
 - “Because of the focus on numbers we offered too much and spread too thinly – realise what is working and focus on these.”
- Be courageous – Be flexible – make changes and do things differently.

C. Partnerships

- Invest time in “getting to know” each other in order to build up trust.
 - What are the aims and values of different organisations?
 - Stronger relationships help partners to work together more effectively, to challenge each other appropriately and to manage/be realistic about expectations of each other.
- Develop spaces to share and learn from each other’s skills and knowledge in the project area to increase confidence in everyone’s contribution.
E.g. in the Breathe Project there was an initial session about asthma and it would have been helpful to have a similar session about singing and dancing and their role in health and wellbeing.
- Discuss capacity issues together to support effective delivery of project.

Discussion

The Health Development Agency (2000), the forerunner of the National Institute for Health and Care Excellence (NICE) produced a report on the Social Capital for Health drawing upon a report by the Health Education Authority: Art for Health (1999). This report reviewed good practice in community based arts projects and interventions that impact on health and wellbeing.

Although this report is now 13 years old it has some useful findings about what makes for successful community participatory arts and health projects. As a result of their findings the report makes several recommendations that are relevant to the experience of the Breathe project.

The report identifies that the following contribute to successful arts and health projects:

1. Best practice projects clearly identify and articulate local need: the type of art used should grow organically from local conditions.
2. Successful projects often depend on dynamic and catalytic individuals who should be supported.

3. The quality of artwork should be a primary focus of a project's aims: the quality of artwork and the benefits of the process are crucial for success.
4. Good quality space is needed for arts and health projects.
5. Individuals and projects should be supported by 3 year funding packages.
6. Recognition that interdisciplinary and cross-sectoral work is costly, time consuming and logistically difficult.
7. A mechanism to evaluate the health benefits of an arts and health project need to be established.

A more recent paper (Cameron, Crane, Ings and Taylor, 2013) supports many of the above principles and identifies several learning points with recommendations for effective arts and health community projects, based on the experience of delivering *Be Creative Be Well*, part of the wider *Well London* programme.

- Defining the community – where possible work with self defining communities and build on existing resources.
- Selecting the artist – Ensuring arts organisations and teams have community skills and as their specific practice skills.
- Collaborative Programming – Make every effort to build good conditions for joint working (Health and arts partners) and be clear about each others contributions.
- Preparing the ground/building levels of engagement – Build in time to develop trust, identify needs and engage participants.
- Using evaluation – take opportunities to make evaluation a creative learning activity that enhances artistic practice as well as the project.
- Leaving a legacy – Through out the project build in opportunities to pass on skills.

The dance and singing activities, delivered as part of Breathe, developed their own unique characteristics based on the needs of different individuals and groups, for example, the Monday evening dance group was an intimate space enabling self expression and improvisation where as the Breathe Easy dance sessions were more fun with people participating in dance routines. The artists were flexible, adapting and responding to different needs and circumstances.

The relationship between artists and participants was commented upon by participants.

“And also through the dance class the dance artist will tell you to breathe deeply, take a breath here or there, so it's really controlled, it's a really nice class.” (Dance Participant)

The artists were concerned about the quality of the “art” and this was reflected in their reflections and awareness of building on their skills and knowledge continually to deliver high quality experiences for the participants.

The Breathe project took place in many different venues. Space could usually be adapted for singing and dance to take place. However some venues offered in

community and primary care settings were not suitable. Others were challenging, such as, The Breathe Easy group's community venue which was, for some sessions, too cold for comfortable movement.

The project ran for about a year and it was only towards the end of the project that some groups and networks were being identified and engagement with people with asthma and conditions impairing breathing were beginning to grow. Breathe illustrates the complexity of arts and health projects and the need for longer term projects to allow them to give them time to develop.

Evaluation continues to be a challenge for these projects and often a combination of validated and measurable assessment tools and qualitative methods are used. This evaluation has been primarily qualitative with some statistical information. Evaluations also need to:

- Be unobtrusive and not distract from the creative activities;
- As far as possible add to the experience of those participating rather than be burdensome;
- Respect the routine and demands of care and community settings, and the creative activities.

Some of the data in the Breathe evaluation has been gathered by participant observation and at times this has meant participating fully in a singing or dancing session and at other times observing sensitively so that people's privacy and dignity are maintained. Using film footage, with informed consent, has been a less intrusive way of evaluating.

"This is the most exercise I have ever had because my day normally consists of sitting in a room on a computer." (Dance Participant)

'I benefit from dance and so anyone in the whole universe can benefit from dance!'" (Dance Participant)

The exercises are like fun, it's not rigid. She explains about your vocal chords going different ways . . . means passages are open . . . And you do it in a way that you don't even think about it medically. You don't event think about it being exercise as such. I really love it. I can take a deep breath in with our coughing . . . now I can deep breathe and I feel more alive." (Choir Participant)

Conclusion

Breathe was funded during the final year of Liverpool PCT's existence with the transfer of commissioning to the Liverpool Clinical Commissioning Group and Public Health to Liverpool City Council. It is partly our hope by taking the time to write down the story of the Breathe arts and health project that it will contribute to continuity and memory during a time of significant change. The project has benefited participants, arts organisations and artists. It is expected that through this evaluation report learning can be shared with health partners to help inform future arts and health commissioning, delivery and evaluation.

We have learned that It is essential to have clear aims and outcomes at the start of a project and equally important that these can be reviewed as circumstances evolve and change. There continues to be a need for developing models of evaluating complex arts and health projects and to effectively tell each individual story in the context of a growing evidence base. Arts organisations that embark on this hugely rewarding and challenging work must continue to develop and balance a range of skills. Health partners must be willing to share their knowledge and skills with arts organisations and be committed to supporting this work for the short, medium and long term.

Legacy

The following have been identified as a legacy of Breathe:

- **Website** – This will be maintained a by MDI as a record of the project and way of providing information and resources for people with asthma and other conditions that impact on breathing. Information is also available through the MDI Breathe Facebook² page and twitter;
- **Film** – A film based on the project sharing the benefits of dance/movement and singing for people with asthma and other conditions that impact on breathing is available from the MDI website;
- **Artists skills and knowledge** – increased confidence to engage creatively with people with asthma and other respiratory conditions;
- **Ongoing opportunities for dance** – There are continued opportunities for people with asthma and a range of health conditions to participate in dance during 2013/14;
- **Continued Research/Evaluation** – MDI is delivering a further programme for young people with asthma at Alder Hey Hospital. This has been funded by the NHS with research and evaluation led by the hospital's Respiratory Department. Early results are encouraging showing improved lung function in participants;

² Breathe Facebook page set up April 2012. Average reach 150 per month, maximum 2000 in September 2012, "Likers" in 9 different countries.

- **New Choir** – the establishment of the Up 4 Arts health and wellbeing choir by Sense of Sound;
- **Learning and Development** – planned ongoing learning opportunities with Sydney de Haan Research Centre for arts and health at Canterbury University and other training seminars and conferences organized by MDI and SoS;
- **Project Delivery** - embedding the learning in future arts and health project delivery including an investment in effective engagement and partnership working.



Participants from North Liverpool Breathe Easy Group, Aintree Image by First Take

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Appendix 1

Group Session	Dance or Singing	Number of sessions	Total number of attendees	Group Description (targeted health conditions)	Ages of participants	Gender
Monday Evening MDI Studios	Dance	27	106	Range of Health Conditions Including Asthma	Adult	Mixed women – 80%
Breathe Easy N. Liverpool	Dance	8	144	Asthma and COPD	Adult	Mixed 50/50
Radio Merseyside	Dance	1	7	Asthma	Adult	All women
Radio Merseyside	Singing	-	Av 20 per session	Open group and including people with respiratory conditions	Adult	-
The Florrie	Dance	24	110	Asthma	Adult	Mixed – women - 85%
The Florrie	Singing	7	35			
Rotunda	Dance	3	11	Open group	16 – 19 yrs	All women
Rotunda	Singing	7	42			
Alder hey Hospital	Dance	8	72	Asthma	5-19yrs	Mixed 50/50
Granby Sure Start	Dance	5	20	Open group	0 -64 yrs	Mixed Women 80%
Sahir House	Dance	2	14	People affected By HIV	Adult	Mixed Men 60%
Aintree Hospital	Dance	6	18	Range of Respiratory Conditions	Adult	-
Aintree Hospital	Singing	-	-	-	-	-
Primary Care Setting – Princes Park	Dance	7	42	Open group	Adult	-
Primary Care Setting – Vauxhall	Dance	3	9	Open group	Adult	Mixed Men 60%
Adelphi Hotel	Dance and Singing	1	70	Open group	Adult	Mixed Mostly women
PSS Charity	Singing	1	12	Open group	Adult	-
Fazamatazz Choir	Singing	3	75	Open group – 6 people asthma	Adult	-

Total: 807

NB: some data is incomplete and therefore total attendance will be greater than this recorded total.

Appendix 2

Participant Feedback Forms

A. Breathe Easy group: 1 participant completed feedback form, 30/11/12

Participant 1

At the start of the session

My asthma/breathing is:

I feel now

OK ---✓----- not OK

At the end of the session

I feel now

OK ----✓-----not OK

“Very good delivery. Exercise very good”

B. Breathe Easy Group: 5 participants completed feedback forms, 01/02/13

Participant 1

At the start of the session

My asthma/breathing is:

I feel now

OK --✓-----not OK

At the end of the session

I feel now

OK --✓----big improvement----- not OK

“I find the dance just great getting me to move. And feel the stretching an improvement to my health.”

Participant 2

My asthma/breathing is:

At the start of the session

I feel now

OK --✓---(8 out of 10)-----not OK

At the end of the session

I feel now

OK ---✓---(7 out of 10)-----not OK

Participant 3

My asthma/breathing is:

At the start of the session

I feel now

OK ----- ✓-(2 out of 10)-not OK

At the end of the session

I feel now

OK -----✓--(3 out of 10 -----not OK

Participant 4

My asthma/breathing is:

At the start of the session

I feel now

OK -----not good-----not OK

At the end of the session

I feel now

OK ----- the same -----not OK

Participant 5

My asthma/breathing is:

At the start of the session

I feel now

OK -----✓----- not OK

At the end of the session

I feel now

OK ----✓ Good----- not OK
'My first time very enjoyable.'

C. Monday Group: 4 participants completed form, 28/01/13

Participant 1

(Age late 50s, woman, had a stroke and been hospitalized for 8 months)

At the start of the session

My asthma/breathing is:

I feel now

OK -----✓ (2)-----not OK

At the end of the session

I feel now

OK -----✓ (9)-----not OK

“This class means more to me than anything else for a whole range of reasons – connection with people, dance artist’s communication and knowledge, chance to be touched in movement.”

Participant 2

(Age late 40's, woman)

At the start of the session

My asthma/breathing is:

I feel now

OK -----✓-----not OK

At the end of the session

I feel now

OK -----✓ (Good)-----not OK

“First problems last year and unable to walk and had problems breathing. Trouble with shallow breathing. Session greatly improved breathing. Really relaxed.”

Participant 3

(Age 62, man, had had a stroke and a knee injury)

At the start of the session

My asthma/breathing is:

I feel now

OK -----✓-----not OK

At the end of the session

I feel now

OK -----✓-----not OK

“{In session} I could feel arching and flexibility in back for first time ever. Enjoyed learning about vertebrae, spinal flexibility. Enjoyed session and will come back.”

Participant 4

(Age late 30s, woman)

At the start of the session

My asthma/breathing is:

I feel now

OK -----✓-----not OK

At the end of the session

I feel now

OK -----✓-----not OK
Fuller and calmer

“Loved the chance to move and touch, to breathe and move. Feel energized.
Muscles feel active.”

D. Alder Hey: 4 participants completed form, 20/03/2013.

Participant 1

At the start of the session

My asthma/breathing is: Good

I feel now

OK ✓.....not OK

At the end of the session

My asthma/breathing is: Good

I feel now

OK ✓not OK

“I met new people suitable for all ages, lots of fun, helped my breathing a lot. I would
come to more sessions if there were any.
“Dancer” is the best!!”

Participant 2

At the start of the session

My asthma/breathing is: OK

I feel now

OK✓not OK

At the end of the session

My asthma/breathing is" feeling very calm

OK✓not OK

"I found the session good and very calm."

Participant 3

At the start of the session

My asthma/breathing is: 6

OK.....6.....not OK

At the end of the session

My asthma/breathing is: 3

OK.....3.....not OK

"It was very social and it was very interesting. The dancer was brilliant, the best teacher ever."

Participant 4

At the start of the session

My asthma/breathing is:

OK..... ✓not OK

At the end of the session

My asthma/breathing is:

OK.....✓not OK

"It's very social."

Appendix 3

Focus group Questions

Asked in opening circle – everyone has the opportunity to answer individually:

1. Initial ‘best experience’ question

Describe what is most exciting/motivating for you about being part of the Breathe project?

General Discussion: (Focus group1)

2. If it was the end of the project and you were looking back – what will have happened? If you can - illustrate this by telling a story about an individual's experience.
3. What has worked so far?
4. What might you do differently if you knew at the beginning what you know now?
5. What have you learnt?
6. When the “going gets tough” what keeps you motivated and enthusiastic about Breathe?
7. So what next?

General Discussion: (Focus group 2)

2. What have you noticed about the Breathe Project so far?
3. What have you learnt? –
Embrace successes and difficulties
4. What advice would you offer others carrying out a similar project?
5. What next?