

All Party Parliamentary Group on Arts, Health and Wellbeing
Museums and Health Round Table
Laura Phillips, the British Museum – responses to preliminary questions

What are the benefits of museums and heritage for health and wellbeing?

The evidence library of the National Alliance for Museums Health and Wellbeing indicates that museums can have an impact across health and wellbeing both in their role as centres for object-based learning and through programmes targeting local health priorities.

Collections can be used in many different ways on and off site – an ancient Egyptian book of the dead could be used creatively to explore how gods were represented in ancient Egypt, or for a discussion around death, dying and end of life care – as at the British Museum in 2010: <http://blog.britishmuseum.org/2010/09/22/what-is-a-book-of-the-dead/>
http://www.britishmuseum.org/about_us/community_collaborations/partnerships/exhibition_consultations/our_hearts_in_the_balance.aspx

The New Economics Foundation's Five Ways to Wellbeing can be covered in a single museum interaction – Connect/Be active/Take notice/Keep learning/Give. Individuals can engage in activities that strengthen their health and wellbeing without that being the motivation. Often these activities involve a strong social element and could be part of social prescribing/personal budget models.

Museums are trusted places of learning, where people of all ages and cultures can make connections with the world, and better understand their place within it. Museums support people to construct their identities and can be forums for debate. This person-centred approach mirrors the shift in health and social care towards a holistic, less medical model.

There are around 2,500 museums across the UK, so most people have a local museum. There is a huge potential for museums to have an impact across the UK – mirroring the decentralisation of health and social care in the UK. The sector is well networked and organised, with inspiring leaders in national and regional museums.

What are the challenges in making more good work happen?

Pressure on resources – particularly in locally funded museums. Many independent museums are run solely by volunteers. Many activities with health and wellbeing impacts are dependent on short term external funding opportunities (making longitudinal studies difficult).

Currently, inequalities in cultural access reflect health inequalities. Museums need to do more to involve the community, embed themselves into their localities, be good neighbours and build relationships with diverse, underrepresented communities. They need to better understand local health and wellbeing priorities. This work doesn't always sit at the core of a museum and often relies on the will of a few staff (often in educational teams). Organisational change is needed and more support from management and government level.

Museums need to think more about demographic ageing and turn this into an opportunity – See the forthcoming Oxford Institute of Ageing/British Museum research publication: *The UK's Ageing Population: Challenges and opportunities for museums and galleries* (lkphillips@britishmuseum.org/kate.hamblin@ageing.ox.ac.uk). This publication indicates there could be a double dividend, with museums supporting older people's health and wellbeing (and therefore that of their local communities) whilst older people are more active stakeholders in their local cultural institutions. See also the work of the Age Friendly Museums Network supported by the Baring Foundation.

There is more to be done in terms of research into health and wellbeing impacts especially in the potential of museums in prevention - helping people live longer and more healthily. Museums are research institutions – there is so much potential and Museums understand and are open to research partnerships and studies. We need a language that Museums and Health and Social care can both understand.

Lack of understanding between museums and health and social care professionals either in the form of a lack of recognition that partnership work is possible/beneficial or in the form of preconceptions – for example making an assumption that a museum working with older people would automatically involve reminiscence.