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# Creative Health and Wellbeing Zones

Final Report: 1 April 2022

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# Executive Summary

# Executive Summary

"Social prescribing enables GPs, nurses and other primary care professionals to refer people to a range of local, non-clinical services" (King's Fund). Cultural social prescribing is when these services involve cultural activities.

The Greater London Authority (GLA) commissioned this research to explore a pilot of Creative Health and Wellbeing Zones:

- Hyperlocal centres of activity that are places where Londoners can connect with quality cultural social prescribing
- With lived experience at the heart of the programme, the zones unite different parts of the health, social care, community and cultural sectors to ensure that there is no wrong door for Londoners attempting to access and participate in cultural social prescribing.

Creative Health and Wellbeing Zones hold immense potential for London:

- Cultural: More cultural participation; enhanced opportunities for creative sector employment; and new cultural assets and social infrastructure
- Health: More personalised care; improved mental health and care for Long Covid; reduced health inequalities.

# Broadening access to cultural social prescribing by...



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**Building on  
existing  
successes**

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**Providing  
community  
leadership**

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**Creating hybrid  
spaces and  
roles in the  
cultural and  
public health  
sectors**

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**GREATER  
LONDON  
AUTHORITY**

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**Aligning with  
GLA priorities  
and policies**

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**Benefitting  
from the GLA's  
strategic  
leadership**

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# Executive Summary

Creative Health and Wellbeing Zones will grow out of London's cultural social prescribing successes. The Health Tree, for example:

- Social prescribing network connecting the Tower Hamlet's GP Care Group and arts providers
- Community led programme of arts and wellbeing activities
- Services located at St Margaret's House – as well as Tower Hamlets Carers Centre, Brady Arts Centre and local green spaces
- Working with a range of partners: Social Action for Health, Outside Edge, Fevered Sleep, London Arts in Health and Spare Tyre
- As well as another cultural social prescribing project (Thriving Communities) that is funded by Arts Council England, the National Centre for Social Prescribing Historic England, Natural England, NHA England, NHS Improvement, Sport England, the Money and Pensions Service and NHS Charities Together.

Creative Health and Wellbeing Zones will deepen and extend such successes:

- Deepen: Maintaining successful provision – becoming more embedded within communities
- Extend: Filling London's cold spots – absorbing best practice developed elsewhere.

Long-term funding is needed for this deepening and extension.

# Executive Summary

Creative Health and Wellbeing Zones support a range of GLA priorities, including:

- The Mayor's Health and Inequality Strategy and Implementation Plan
- The Mayor's Cultural Strategy
- The London Plan

The GLA should support these priorities by working towards a long-term plan that:

- Builds on:
  - Mapping of London's existing provision, strengths and weaknesses – to come
  - The GLA's existing relationship with London Arts and Health – in place
- Utilises the GLA's cohering capacity to align strategic partners:
  - Arts Council England
  - Healthy London Partnership
  - Local Authorities
  - National Centre for Creative Health
  - NHS

# Development of Creative Health & Wellbeing Zones

Phased Approach – This is unpacked in our Recommendations





# Our brief

# Our brief – from the Greater London Authority (GLA)

Research and report on 4 questions:

- 1. What does a Creative Health & Wellbeing Zone in a city look like and what are the characteristics of one, including common language, how relationships are developed successfully and what different stakeholders are needed so this can be scaled across London?*
- 2. How can a Creative Health Zone be led by the community it sits within?*
- 3. How will a Creative Health Zone influence the future of creative industries- what kind of skill and people do we need to lead this work, where are they coming from and what training would be needed. What new employment will it bring?*
- 4. How could a creative health and Wellbeing Zone be embedded into the London Plan and support the delivery of London's recovery through the Mayor's Health and Inequality Strategy (HIS)?*

# Our response

The research team responded to our brief by drawing on insights from two kinds of interviews:

1. With cultural social prescribing participants and providers:
  - Health Tree participants and partners
  - Thriving Communities participants and partners – both for the project at St Margaret's House and others across London
  - Tower Hamlets GP Care Group
2. With experts and national/London-wide agencies:
  - Arts Council England
  - National Centre for Social Prescribing
  - London Plus
  - Academic experts (e.g. Helen Chatterjee and Thomas Kador at UCL)

We synthesised findings from these interviews and refined them in review sessions across the research team and with the GLA.

**Looking back: What has been achieved**

# What is the Health Tree?

- One of 36 Thriving Communities Projects across England
- Year-long project delivering in Tower Hamlets improving health and wellbeing outcomes for our community.
- Partnership: St Margaret's House, Social Action for Health, Spare Tyre Theatre, Outside Edge Theatre, London Arts in Health, Fevered Sleep and Tower Hamlets GP Cares.
- Delivery of activities linking with social prescribers and other referral pathways
- A network to increase awareness of social prescribing and referrals in our community



# What has been delivered by the Health Tree?

- St Margaret's House - 200+ benefitted from low cost weekly sessions in Pilates, Fitness, Tai Chi, Art Therapy, dance. 200+ benefited from massage and acupuncture. 15 regular attendees benefit from weekly Woodwork and 22 benefit from monthly free legal advice
- Outside Edge: 19 carers from Tower Hamlets benefit from 5 Ways to Wellbeing Sessions creative writing
- My Moves - Social Action for Health: 18 Bangladeshi women aged 50+ with at least one long-term health condition benefited from weekly sessions in dance, poetry and IT Skills
- Fevered Sleep- 9 people benefitted from wellbeing walks
- Spare Tyre: Will deliver 13 Covid Café's by March 31st for those suffering with issues from Long Covid.





# How have we engaged our Tower Hamlets GP Cares Social Prescribing Team?



## Key Actions

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Attended and spoken at two Tower Hamlets GP Cares team meetings

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Hosted a social prescribers team meeting at St Margaret's House

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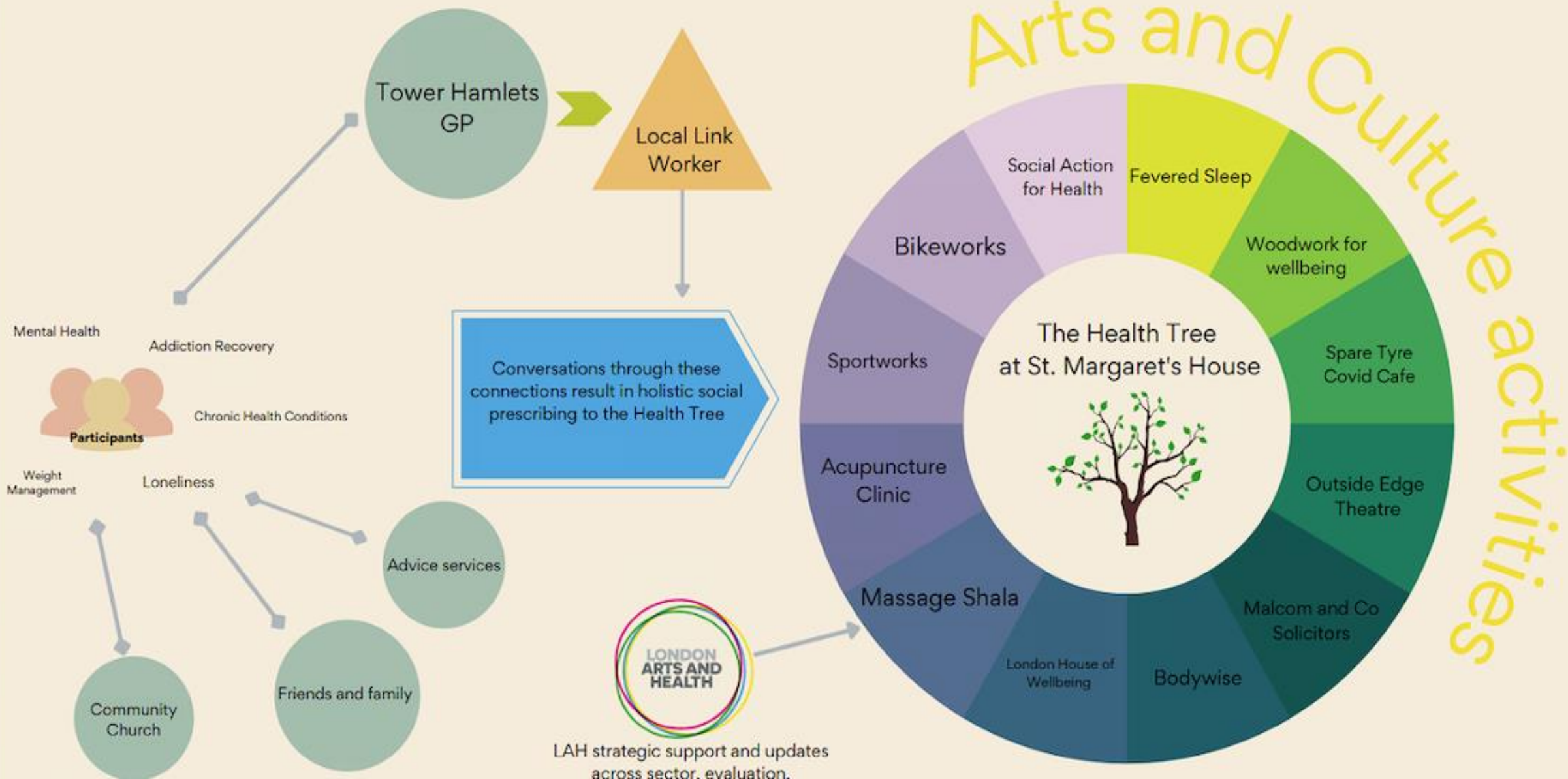
Worked with the team to ensure that all activities are on their CLARITY System

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We now have a relationship with 16 social prescribers across the whole borough

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# The Health Tree Mapping





# What impact has the Health Tree had?

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## On referrals

- Only 6 referred participants to St Margaret's House at the start of the project. Risen to 11 social prescribing referrals for Woodwork and an average of 36 places from a social prescribing route per month for The Health Tree projects

## On engagement

- Services like acupuncture and massage had never had social prescribed participants before The Health Tree and the project has opened up a new way of people benefitting from their service who would not normally have engaged

## On links

- Link with and celebrate other ways of referring including a local church project, community leaders such as Tony from the Carers Centre and created links with Community Connectors project in Hackney and Bromley By Bow Centre

## On participants

- “I am very active now because of the dance and I look forward to the classes. Even if it is raining, I make sure I am there.”

# Impact in the words of participants



“ I found it through Esther. She works at the GPs. She told me about carpentry here. When I am here I am happy – *Woodwork* ”

“ I am very active now because of the dance and I look forward to the classes. Even if it is raining, I make sure I am there – *My Moves Dance* ”

“ Instrumental in bringing unpaid family carers together with local older Stepney residents, enabling ways to reduce isolation, loneliness, develop camaraderie and most of all have fun – *Ways to Wellbeing* ”

“ Feeling so utterly grateful, calm, open. This is so needed right now – *Massage* ”

# Wide range of activities – generating more positive impact



“ I was really engaged with the world, and felt much calmer – *Fevered Sleep Walk* ”

“ Feel 100% better & confidence in my body – *Massage* ”

“ I feel relief from pain and will keep coming as it is the only thing that has helped me – *Acupuncture* ”

“ Thank you for holding this space so well, I’ve been looking for something like this for more than a year – *Covid café* ”

**Answering the research questions in our brief**

# Question 1: The future is already here – it is just unevenly distributed

Creative Health and Wellbeing Zones can grow out of a deepening and spreading of existing initiatives (e.g., the Heath Tree)

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## Think of a tree...

- Physical and digital hubs
- Co-location of services
- Clear, consistent offer aligned to local needs
- Shared values – including accessibility, respect and compassion



## Deepening its roots...

- Long-term funding
- Alignment with voluntary sector, public sector and private sector – with public sector silos collapsed
- Vision, evidence and communications that unlock these alignments

## Spreading seeds...

- Stakeholder mapping
- Social infrastructure mapping
- Skills mapping
- Common standards and shared services

## London as a forest

- Adequate social infrastructure across the city – woven into local communities
  - Effective and agile horizontal and vertical relationships – driven by community needs
  - A new model of public service delivery – powered by communities
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# Question 1: Some considerations on common language

Effective language and communication is important to the development of Creative Health and Wellbeing Zones – but different terminology may be appropriate for different people and contexts

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## Local communities...

- ... can be attracted or discouraged by language

## Arts and health...

- ... have struggled to find common language

## Other policy stakeholders...

- ... also need to be united around a common language

## Creative Health and Wellbeing Zone

- Is this the right language to bring that unity?
  - Like Business Improvement Districts (BIDs), they might have a public facing name (which emphasises their geographic location) and a technical/policy name (which denotes their status as a zone)
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## Question 2: Community Leadership

The community leadership sought for Creative Health and Wellbeing Zones can grow out of existing initiatives

- Requires:
  - The right people around the table – including people working at a strategic level and a diverse mix of those from local communities
  - Shared goals and values
  - Transparent collaboration
  - Residents must understand finances and decision-making

“

The project gave participants a sense of belonging

“

A space to share their difficulties and achievements

“

A safe, free space with no judgement, appearing warm and inviting

“

An open space for everyone - relationships are built successfully by actively listening

## Question 2: Community Leadership

The Health Tree Network is indicative of the capacity of existing initiatives to bring community leadership

The Health Tree created a network of local groups, practitioners, health workers, artists and charities to come together to increase knowledge on how social prescribing in our area works. It delivered 5 meetings across the year engaging over 20 organisations including:

- Tower Hamlets GP Cares Group
- Woodwork for Wellbeing
- East London Cares
- Shaw Trust
- Globe Community Project
- GoodGym Tower Hamlets
- Trapped in Zone One
- Spear Project
- Bromley By Bow Centre
- Tower Hamlets CVS
- Bangladeshi Parents and Carers Association
- Engage Here
- Children's Society
- Chisenhale Gallery





# Question 3: Creative Industries

Creative Health and Wellbeing Zones can grow London's creative industries through new jobs (combining creative and health skills) and new spaces (that can be used to provide health services and to help address the shortage of rehearsal spaces confronting London's creative industries). Hybrid roles and hybrid spaces.



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New demand...  
for creatives

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New skills and hybrid  
roles...  
To grow trees and  
forests

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New spaces...  
for social prescribing  
and other uses

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New jobs...  
In existing and new  
roles, both directly and  
indirectly created

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## Question 4: Healthy Communities

Creative Health and Wellbeing Zones contribute towards fulfilling the ambitions for Healthy Communities contained in the Mayor's Health and Inequality Strategy

1. There are more opportunities for all Londoners to take part in community life
2. Londoners are empowered to improve their own and their communities' health and wellbeing
3. Social prescribing becomes a routine part of community support across London
4. People and communities are supported to tackle HIV, TB and other infectious diseases and address the stigma around them
5. London's communities feel safe, and are united against all forms of hatred



## Question 4: Developing London's Social Infrastructure

The London Plan contains commitments to social infrastructure and Creative Health and Wellbeing Zones should be part of the social infrastructure that London plans for

1. When preparing Development Plans, boroughs should ensure the social infrastructure needs of London's diverse communities are met, informed by a needs assessment of social infrastructure.
2. Development proposals that provide high quality, inclusive social infrastructure that addresses a local or strategic need and supports service delivery strategies should be supported.
3. Development proposals that seek to make best use of land, including the public-sector estate, should be encouraged and supported. This includes the co-location of different forms of social infrastructure and the rationalisation or sharing of facilities.
4. New facilities should be easily accessible by public transport, cycling and walking and should be encouraged in high streets and town centres.

# Looking ahead: Recommendations

# Phased approach for development of Creative Health and Wellbeing Zones

## Mapping and consolidating... (Year 1)

### Map:

- Where London's cultural social prescribing services are located physically and digitally
- Who delivers these services and with which partners.

### Consolidate these services:

- Avoid funding cliff-edges – by making funding as long-term as possible
- Maintaining consistency of services to communities

## ...with the GLA's strategic capacity (Year 2)...

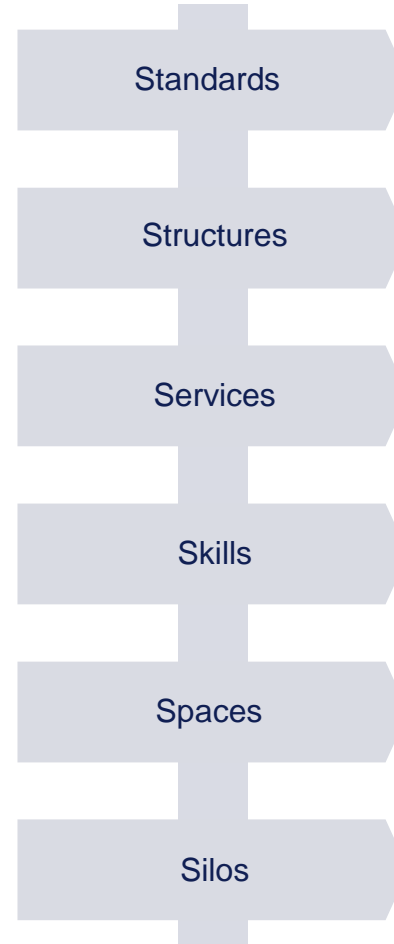
### GLA to:

- Build on mapping
- With long-term plan – including clear actions
- And commitments from partners

### Strategic partners to include:

- NHS
- Local Authorities
- Arts Council England
- Healthy London Partnership
- National Centre for Creative Health
- Voluntary sector

## Actions



## ... to establish and grow Zones (Year 3)...

These actions will formalise Creative Health and Wellbeing Zones:

- Creating a network of delivery partners with shared values and standards
- Supported by a set of structures recognised and supported by strategic partners
- Enabling delivery partners to sustain effective horizontal (communities) and vertical (strategic partner) relationships

## ... that accelerate community-led provision (Year 4 onwards)

Securing cultural outcomes:

- More participation
- Enhanced creative industries employment
- Increased cultural spaces

And health outcomes:

- More personalised care
- Improved mental health
- Reduced health inequalities

Across London.

# Recommendations

Actions – develop the 6Ss:

- Standards: What standards will build confidence with Link Workers and should be common to all delivery partners and embody the inclusive values of CEZ?
- Structures: What structures will enable strategic partners to best support delivery partners?
- Services: What shared services will allow delivery partners to be more effective?
- Skills: Where do delivery partners need to upskill and how can strategic partners support this?
- Spaces: What spaces are now available and how can the London Plan provide more of them?
- Silos: How can policy silos be most effectively overcome to support delivery partners, including effective cross sector working between health and arts?

GLA should lead the development of an Action Plan – alongside strategic partners, building on a mapping of cultural social prescribing in London.

This mapping to help overcome a ‘postcode lottery’ in terms of access to these services, alongside services that are tailored to the specific requirements of London’s diverse communities.

This will leverage GLA’s strategic influence and direct delivery capacity – including in relation to skills (Mayor’s Academies Programme) and extend to firm commitments from the health service.

# Recommendations

Diverse skills and attributes are needed for successful cultural social prescribing:

- Community-leadership:
  - Reaching vulnerable and marginalised people and areas of the community
  - Advancing a wider goal of a whole community that recognises why and how they can utilise arts to improve their wellbeing
- Health: Mental first aid skills
- Arts: Engaging creative and cultural programmes
- Ability to sustain effective cross sector working and communication between health and arts – utilising the voluntary and community sector as bridge between health and arts and the potential for mentoring to facilitate cross sector working
- Space: Management of versatile spaces in imaginative and welcoming ways that meet a range of needs

Hybrid skills in hybrid spaces, overcoming traditional policy silos.

Delivery of these skills should be built into the Mayor's Academies Programme (MAP).

## Annex 1: Background on researchers



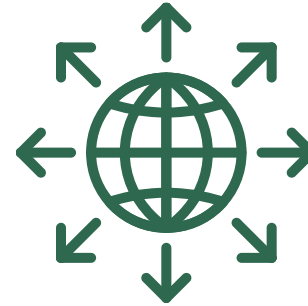
# BOP Consulting is an international consultancy specialising in culture and the creative economy



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## St Margaret's House

St Margaret's House (SMH) is a creative hub providing arts and health programmes reaching over 3000 annually to its community since 1889. 25 arts and wellbeing charities are based at SMH. We collaborate and create projects and provide links to other local organisations and support in funding. Our project Ghyama Arts brings theatre, film and contemporary circus workshops to disabled Bangladeshi adults across Tower Hamlets and Newham, our Hilarity Academy offers young people in Bethnal Green weekly free comedy workshops. Recently we worked with our local LGBTQ community using arts, theatre, costume making, walks, research talks, life drawing and performance to explore the culture of 18th century Molly Houses. SMH leads the Thriving Communities "Health Tree" project with 5 arts and wellbeing organisations and provide opportunities across Tower Hamlets for communities to engage in health programmes.

## **Social Action for Health (SAfH)**

SAfH works across east London and collaborates with community partners including Poplar HARCA, ToyHouse Centre, the We Connect Communities Partnership, and the E1 Network, alongside GP networks, link workers and social prescribers. Current projects include self-management programme for those living with chronic health conditions, accessible weight management classes and 1:1 support, tackling loneliness and isolation through peer support, appropriate physical activities, befriending, structured volunteering, and coordinating delivery of welfare advice in GP surgeries.

# Performing Medicine

Performing Medicine, a Clod Ensemble initiative, exists to support health professionals to support health professionals to provide high-quality, compassionate care through the provision of arts based training and courses, research, advocacy and public events.

## London Arts in Health

London Arts in Health: Aims to develop the role of culture in wellbeing and to promote and support arts in health activity across London and nationally. They are a strategic partner in The Health Tree and will support in collating the data and evidence gained from partners and support the interviews with Tower Hamlets and Health Tree NHS and Health workers

## **Annex 2: Further notes from interviews and workshops**

# Notes relevant to research question 1

*Question 1: What does a Creative Health & Wellbeing Zone in a city look like and what are the characteristics of one, including common language, how relationships are developed successfully and what different stakeholders are needed so this can be scaled across London?*

- Questions over what is meant by a zone.
- It should be tangible and fundable. Can't be blue sky, ethereal and unrealistic. Funding for core activities to exist.
- Could be a place of delivery, borough hub or network. Need to be able to easily explain it to people. Recognisable, visible, high-quality facilities. Consider regeneration of existing spaces - this would illustrate further the ability of culture and arts to improve physical spaces and health/quality of life.
- Some like the words 'Creative Health' (to portray alternative routes to wellbeing) but questions over other connotations/ambiguities of 'Zone' e.g., confusions over use of the term 'zone' relating to Transport for London.
- Physical space for each CHZ very important – reducing barriers to access.
- Ability of activities to reconfigure neural pathways in the brain. Need to communicate this scientific fact. Promote quality of life improvement.
- Word of mouth v important. Could the CHZ encourage start-ups?
- Barriers - people think they are not creative. The term CHZ could be off putting. How could we use language to shift this perception? Need to get people through the door before you can convince them they fit there. Need to be aware the CHZ exists in the first place, need good messaging. Collaboration and networking, clear communication vital.
- Participants seemed to benefit from sharing a space with other groups and considering others' needs.
- They wanted activities to be more accessible to more people, e.g., not to have to travel for an hour to attend.
- Making and sharing food could be an important part of a CHZ. Most participants lived alone, or in hotels, and were not very motivated to cook for themselves. However, they enjoyed local cultural food offers. The tea/biscuits element of the woodwork sessions was important to them.

# Notes relevant to research question 1

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- Suggestion of CHZ as a programme of free, accessible community activities.
- A shared multipurpose space within a CHZ would work well, but pop-up outreach services could reach more people.
- Mental health awareness training important - as is support/supervision for practitioners working with these vulnerable communities.
- Cross-sector working could require hybridisation of roles (e.g., admin/arts, carer/practitioner).
- Suggested the need for a 'Neighbourhood Producer' role – someone already embedded within the community and with a skill for the dialogue, rapport, brokering and cultural connection essential for this type of work.
- CHZ should be vibrant, exciting, multipurpose, a safe space where people can express themselves and be creative, taking you out of your 'everyday'.
- In communicating about SP offers, providers need to 'bring to life a PDF'.
- Practitioners and professionals need opportunities to experience the activities themselves such as a regular taster day - this will also serve as a networking/feedback opportunity and promote clinical buy-in.
- Trainers/leaders need to be personable, well trained, trauma informed, with passion, energy, and warmth. Shared values.
- Workforce could be filled through a 'grow your own' recruitment approach – people like to see others from their community who have been trained, up-skilled, and nurtured to deliver activities. Also helps with sustainability.
- CHZ should include physical and virtual spaces to capitalise on learning gained from delivery during the pandemic/maintain this level of accessibility.



# Notes relevant to research question 1

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- CHZ should be (or include) a physical space - e.g., regenerated buildings such as Haggerston baths in Hackney. Town planning should be involved.
- CHZ should be welcoming to the whole community - affordable and accessible, become part of their lives to care for their bodies and minds. Should include food.
- Are pockets where CHZ-type activity is already going on.
- CHZ could be a geographical area. But needs to include a physical space where people can access a range of activities to enhance their wellbeing, feel connected to others, learn something new, be around creativity.
- Buy-in of key services from the outset.
- Health can be improved without clinical intervention, but formal health element needs to be represented.
- Challenge of getting services to people – establishing a hub people voluntarily come to where they can access the services they need.
- Bottom-up co-produced design with genuine buy-in from existing services.
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- Bottom-up co-produced design with genuine buy-in from existing services.

CEZ can build on existing strengths – for example, the Health Tree. The interviews and focus groups provided many perspectives on what has worked well about the Health Tree:

- Experiences of the Health Tree are overly positive. Tree a great analogy, slow build but fruitful, organic growth, sense of nurture. The project/concept as a growing entity, a different way of thinking and approaching health. Building in reach and impact all the time.
- One of the most positive aspects has been excellent communication - networks are growing, there is a welcoming & open attitude, information is freely flowing. Problems are aired, addressed, and ironed out.
- Each organisation/practitioner is conscious that they are at capacity or working outside of working hours through goodwill. Could do/offer much more and increased/focused funding would provide opportunities to expand on this work. Needs to be long term to allow for slow/organic growth.
- NHS/Health seems an impenetrable and complex entity due to myriad of organisational structures and inconsistencies of systems and processes - need clear ways in to establish efficient and focused creative health commissioning.
- There is still a lack of awareness of the project and work like it. There are issues and inconsistencies around the language we use to describe this work. Need to agree on clearer definitions and use these to raise more awareness of the benefits of (cultural) social prescribing and how to access it.

# Notes relevant to research question 1

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- Social prescribers have found it useful to signpost to activities that are happening in one place – need for activities catering for different cultures and communities.
- Households seeing lots of diminishing income, so free activities greatly needed.
- Cultural awareness/appropriacy is very important - MyMoves dance project was a huge success because of this aspect “*[The project] gave participants a sense of belonging, a space to share their difficulties and achievements.*”
- Live social prescribing event was very impactful - raised awareness, gave a platform for their work, and provided face to face connection.
- Digital divide prevalent in some cultural groups - need to overcome this to empower people to engage.
- Social prescribing team have benefited greatly from being part of HT project. Has expanded their horizons around health and wellbeing and increased referrals to arts & culture. Have also seen advantages of using arts & culture to engage very vulnerable communities such as disabled adults. Initial team visit to St Margaret’s House was key to understanding the potential of the project.
- Frustrated by short-term nature of funding. Should be longer term, and in line with NHS commissioning cycles. Difficult to sustain whilst NHS in flux.
- Inclusivity and strong cultural awareness (including catering for specific community groups) contributed to HT success.

# Notes relevant to research question 2

*Question 2: How can a Creative Health Zone be led by the community it sits within?*

- Community led approach would still require people to be trained and equipped appropriately
- For community leadership to work you need the right people around the table. Needs to include people working at a strategic level and a diverse mix of those from the communities you are working with.
- CHZ should be led by organisations that already have a track record of supporting community-led projects - that are trusted by the communities they work within
- Biggest challenge to community leadership is apathy, feeling of powerlessness, but there are instances where this has worked well.
- Skills in community leadership and meditation will be vital to make a CHZ work.
- Participants saw a physical space as being an important part of a CHZ and suggested that the community should be involved in the physical building and fitting out.
- The participants had a good relationship with workshop leaders - trust and consistency seemed important factors in this.
- One workshop leader had lived experience of mental health challenges
- Getting the community involved is difficult to do genuinely
- Need to change the power dynamics – for communities to take power, someone else (GLA / NHS) has to give power up. This is a risk as it reduces the control and potentially the voices listened to

# Notes relevant to research question 2

*Question 2: How can a Creative Health Zone be led by the community it sits within?*

- Work with rather than providing for
- Difficult to define the community – this is where the GLA evidence base comes in to help with definitions. However, can only make choices about the representation when we know about the data
- Islington venues – Lift and another on Hornsey Road – took over swimming pool, music spaces, dance spaces. Approach was supposed to be for local young people. Because of cost, it excluded loads of people.
- Borough has programme around community hubs for everyone to use – but because it needs to generate income. Need to learn from examples. If money is involved, co-production with residents is needed.
- Initially those residents who wish to be involved. Need time to be involved and understanding. Younger and Older people mostly. Working population often misses out daytime. Parents miss out in evening. Timetable not to exclude. – Need a steering group of organisations and select residents. Residents must understand finances, decision-making, reporting back.
- Support for the GLA aspiration of supported “network referrals” where someone comes through any organisation and has the door opened to other economies. The collaborative interoperability of the services is something that’s useful.
- Challenges for social prescribing – overwhelming burden on the role of the link worker. Creating a broad and high-quality social prescribing offer that is visible and allows for soft referral and self-referral alleviates pressure and allows them to focus on the cohort of people with heightened, perhaps multiple health care needs / comorbidities/ health inequalities, whereas now they’re spread incredibly thin.

## Notes relevant to research question 3

*Question 3: How will a Creative Health Zone influence the future of creative industries- what kind of skill and people do we need to lead this work, where are they coming from and what training would be needed. What new employment will it bring?*

- Most important skill regardless of specialist is active listening.
- A need for some physical skills e.g., dressing wounds, understanding the health system.
- “Wheel of change” concept – different stages needed before behaviour change can take place.
- Important that the individual identifies the solution, even if something that has been played back to them.
- Importance of groups of communal experience.
- Link creative jobs to unemployment services. Creative industries need to provide more opportunities. Don't outsource creative jobs to those outside of local resident communities.