

## **Museum Learning and Wellbeing**

Morse, N, Lackoi, K, and Chatterjee, H. J (2016) 'Museums learning and wellbeing' *Journal of Education in Museums*, 37, p.3-13

In recent years there has been a considerable increase in programmes targeting the health and wellbeing of museum audiences, through outreach or public engagement programmes. Museum learning however is an area of museum practice that has tended not to be explicitly considered in terms of health and wellbeing outcomes. Yet learning is often highlighted in education research as an important aspect of wellbeing. In this paper we present the evidence of the wellbeing impacts of learning programmes and consider how this relates to learning in the museum. Our focus is restricted to adult learning as the health and wellbeing work of museums has focused primarily on this audience. We draw on findings from the National Alliance for Museums, Health & Wellbeing's recent research report, *Museums for Health and Wellbeing*<sup>1</sup> (Lackoi, Patsou and Chatterjee, 2016) to present a series of case studies of learning programmes with a health and wellbeing focus. In a final part, recommendations drawn from the Alliance's report are presented for developing work in this particular area of museum practice.

### **Mapping the evidence-base: health, wellbeing and museum learning**

There is a growing body of research evidence that has examined the health and wellbeing benefits of taking part in museum-based activities, such as object handling, creative cultural activities and museum visits. Chatterjee and Noble (2013:115) provide a summary of various studies and evaluations that have described the benefits of museum activities in healthcare contexts. They found that engaging in museum-led projects including object handling and creative activities can lead to: positive social experiences, leading to reduced social isolation; calming experiences, leading to decreased anxiety; increased positive emotions; increased sense of identity and self-esteem; opportunities for meaning-making and inspiration; and opportunities for *learning* and acquiring new skills.

The evidence-base is growing as more research is continuously being published in this area. The field of research looks in particular to assess the health and wellbeing impact of museum encounters through robust methodological approaches using validated outcome measures and questionnaires from psychology and clinical practice, such as the Warwick-Edinburgh Mental Well-being Scale WEMWBS (Tennant et al., 2007). Studies have focused in particular on the wellbeing and health benefits of museum experiences for hospital patients (Ander et al. 2013; Lanceley et al., 2012; Thomson et al. 2012), people with mental health issues and in addiction recovery (Morse et al., 2015), and socially isolated older adults and people with dementia (Camic, Baker, and Tischler, 2015; Eekelaar, Camic, and Springham, 2012).

From a wider review of the evidence around what supports mental wellbeing through life, the New Economics Foundations developed the 'Five Ways to Wellbeing' framework (2008). They describe five 'actions' or sets of daily activity to promote and maintain personal wellbeing: 'connect', 'be active', 'take notice', 'keep learning' and 'give'. Under the 'keep learning' actions, the report highlights key evidence around the contribution of learning to wellbeing. It states: "learning encourages social interaction and increases self-esteem and feelings of competency. Behaviour directed by personal goals to achieve something new has been shown to increase reported life satisfaction" (NEF, 2008: 49). The Five Ways to Wellbeing have been adopted in many museums as an evaluation framework (e.g. The Happy Museum project). This echoes the previous Generic Social Outcomes (GSOs) framework for evaluation in museums (MLA, 2012) that identified health and wellbeing as an outcome area, although focusing on community wellbeing rather than individual wellbeing.

A key aspect of the NEF framework was to draw on psychological research to emphatically highlight that learning is a critical aspect of everyday life across the life course. Researchers

at University College London have explored the unique wellbeing potential of museum object-based activities through a number of research projects, including *Heritage in Hospitals*, *Museums on Prescription* and *Not So Grim Up North*<sup>2</sup>. As part of this work, Thomson and Chatterjee developed the Museum Wellbeing Measure and Toolkit to assess the impact of museum activities on psychological wellbeing (Thomson and Chatterjee, 2013; 2014). This bespoke measure is freely available for museums to use to assess the impact that museum activities can have on individuals within the timeframe of a session, and to measure this impact over the course of a longer-term programme of activities.

Learning emerges as a central part of the wellbeing impact of museum activities identified across this research. This work and the 5 Ways framework dovetail with two core facets of learning in museums: informal, social and lifelong learning, and object-based learning. These are described in turn.

#### *Museum learning: informal, social and lifelong*

Learning in museums is often referred to as informal learning in the sense of Falk and Dierking's (2002) pedagogy of 'free-choice learning': as non-sequential, self-paced and voluntary, and as taking place outside of formal school environments. There is evidence within the wider psychology and education research fields that participation in adult education including informal adult learning can lead to improvements in aspects of psychological wellbeing, with a general agreement amongst researchers that learning produces greater confidence and self-efficacy (see Field, 2009 for a full review)<sup>3</sup>. 'Self-efficacy' is defined as the personal belief in our ability to succeed in a given situation or task (Bandura, 1977). Longitudinal studies have also shown that adults derive cognitive gains from participating in adult learning, regardless of whether or not the learning is towards a qualification (Hatch et al., 2007). Qualitative research has suggested that general adult education can help counter depression (Schuller et al., 2004), as well as positively impact life satisfaction and self-rated wellbeing (Feinstein and Hammond, 2004; McGivney, 1999). In his review, Field (2009: 25) concludes that there are "remarkably consistent findings from research that suggests an overall positive influence of adult learning on the way people feel about themselves and their lives". A further key message of the review is that adult learning is likely to be particularly effective in enhancing the wellbeing of vulnerable adults, including older adults, marginalised ethnic groups, people with learning disabilities, stigmatised communities, such as people experiencing addiction or debt, and institutionalised groups, including prisoners and young people in care.

While much of the literature is positive, it should also be noted that scholars have highlighted that in some circumstances learning can be deeply unsatisfactory and in some instances, it can lead to negative consequences that are damaging to wellbeing, such as stress and anxiety (Aldridge and Lavender, 2000). These negative impacts have been linked to teaching styles, assessments and course structures (the Aldridge and Lavender study was connected to participants undertaking the UK national vocational qualifications, NVQs). This study also found that adult education could sometimes evoke stressful experiences from people's earlier lives, in particular painful school experiences. The study also highlights the complexity of social networks, whereby extending social networks through relationships built in learning spaces can also disrupt existing social networks.

Overall, the literature around wellbeing and 'informal' learning is still very small, and the specific features of informal learning that are associated with positive wellbeing have not yet been clearly identified. This opens up a significant area for future research in museums. The informal settings of museums can provide opportunities for creativity, inspiration and 'free-choice' forms of learning that are not driven by assessment or results. The 'teaching style' of museum learning is distinct from the classroom through a focus on free-choice learning and through the use of objects (see section below). Additionally, museums provide spaces that are

non-stigmatising (Camic and Chatterjee, 2013) and even ‘caring’ (Morse and Munro, 2015) which may counter some of these potentially harmful effects.

A second feature of museum learning is its embrace of lifelong learning, with museum activities on offer from toddlers and family events to older adults, reflecting opportunities for supporting wellbeing across the life course, which was highlighted in the NEF report. In his review paper *Demography and Lifelong Learning*, McNair (2009) proposed that people can benefit greatly from participation in learning during periods of change or crisis that can otherwise threaten wellbeing and health, including transitional periods such as relationship breakdown and divorce, bereavement, the onset of dependency, and moving location. The work of the museums presented in the Alliance report highlights how museums have engaged with groups in the latter two transitional periods.

A third feature of museum learning is that it is ‘social learning’, in the sense that museum learning programmes overwhelmingly take place in a small group. The importance of social learning is well established from early work by Vygotsky (1986) that identified the importance of social learning (learning with and from others) leading to deeper cognitive engagement. McGivney (1999), in a review of community learning, reported that participation in group learning had positive benefits for mental health. Participation in learning programmes has furthermore been associated with the concept of social capital, through helping develop social competences and extend social networks (Schuller et al, 2004).

#### *Object-based learning*

A second and central facet of museum learning is that museums offer rich opportunities for multisensory engagement and learning with and through material objects. Learning theory from Kolb (1984) and Gardner (1993) has described the value of concrete experience for deeper learning, and the importance of learning through all the senses, including tactile learning. Hein (1998) has directly applied some of this theory to museums, highlighting the importance of tactile learning for problem-solving and experimentation. Learners experience greater gains from types of learning that engage them in activities that create what has been described as moments of ‘flow’ (Csikszentmihalyi 1992), moments of complete and utter absorption, and object-based activities have been shown enable this (Chatterjee and Hannan, 2015). A recent edited volume, *Engaging with the Senses: Object-based learning in Higher Education* (Chatterjee and Hannan, 2015), outlines an object-based pedagogy focused around active and experiential learning. Though many of the chapters are case studies based in a university context, it presents a strong argument for the value of object-based learning with contributions from numerous museum practitioners.

Through the emerging field of research in museums, we are starting to understand the distinct ways in which handling museum objects can enhance wellbeing. Chatterjee, Vreeland and Noble (2009) identified two main responses to object handling: people opened up about themselves and shared ideas, or they wanted to learn more about the object. These interactions were seen to improve feelings of wellbeing. The museum literature has long discussed the relationships between objects and meaning-making. Notably, Hooper-Greenhill (2007) has theorised learning within a cultural theory lens to examine how learning in museums leads to the production of self-identities. This unique role of museums has recently been presented as the distinctive contribution that museums can make to wellbeing: engaging with collections and creating personal connections with objects offer opportunities for people to express themselves in powerful ways and make sense of their place in the world (Dodd and Jones, 2014; Froggett, Farrier, and Poursanidou, 2011). Furthermore, authors have suggested that objects can trigger ideas, emotional responses and promote cross-cultural understanding in ways that other sources of information cannot (Chatterjee and Noble, 2013). There is a growing body of work that has looked at the impact of museum reminiscence programmes on

wellbeing and quality of life (Camic, Baker, and Tischler, 2015; Eekelaar, Camic, and Springham, 2012).

The wellbeing dimension of object handling has further been thought the notion of ‘touch’ and its therapeutic value (Chatterjee, 2008; Pye, 2008), including the neurological impact of touch and how this affects emotions (see selected chapters in the edited book by Chatterjee, 2008). In a healthcare context, museum objects have been shown to act as vehicles for expressing emotions such as distress, working through these emotions in a ‘therapeutic manner’ (Ander et al., 2013; Dodd and Jones, 2014; Chatterjee and Noble 2013; Chatterjee, Vreeland and Noble, 2009).

It seems clear then that learning is linked to wellbeing, though some of the mechanisms through which museum learning in particular supports positive wellbeing have yet to be fully described. It would seem that activities that enable both cognitive, emotional *and* physical engagement – such as museum object handling – can lead to greater positive health and wellbeing benefits.

### **Case studies**

*Museums for Health and Wellbeing* (Lackoi, Patsou and Chatterjee, 2016) maps out health and wellbeing activity across the museum UK sector over the period of July-November 2015. A survey of existing health and wellbeing projects in museums was carried out to gather information on projects, audiences, partnerships, impact and areas of training need. This was followed up by a series of in-depth telephone and face-to-face interviews with museum professionals. The mapping research uncovered 603 activities from 261 museums including one-off events, short-term and long-term projects and ongoing, well-established programmes. A fully searchable database of these museum projects is available from the Alliance website. These numbers are likely to represent the tip of the iceberg, as much good work goes unreported, and given that health and wellbeing is a dynamically growing area of activity for museums a number of new programmes were at the planning stage at the time of data gathering.

The Alliance’s findings indicate that two thirds of all museum health and wellbeing activities are aimed at older adults, people diagnosed with dementia and people with mental health issues. The report found that creative workshops are the most popular activity offered by museums, followed by object handling sessions and structured museum visits, often in combination. As we have stated, learning programmes haven tended not to be thought of or evaluated in terms of wellbeing impacts. However a very small number of projects and programmes identified in the Alliance report are being delivered by learning teams in museums, while others are working in partnership with learning providers. This selection of case studies highlights some examples of museum learning programmes that have been thought of in terms of wellbeing.

A number of museum projects developed for asylum seekers and refugees have an educational angle, particularly in relation to offering ESOL classes through museum activities. The Wallace Collection for instance offers ESOL classes at Entry 1 and 2 levels and has trained groups of Refugee Tour Guides to devise and deliver highly personal tours through the collections<sup>4</sup>. While this may not immediately seem like health and wellbeing provision, it nevertheless has great impact on people’s lives as it gives participants an opportunity to socialise and extend their social networks, as well as engage in their surroundings in meaningful ways by removing the language barrier.

A growing area of innovative work for museums is focused on delivering educational training for medical and social care staff. One example is the *ArtMED* training programme at the Whitworth Art Gallery, which aims to refine the diagnostic skills of medical students through different art forms (Lackoi et al., 2016: 37). Life drawing and art appreciation classes offer a

non-medical and creative approach to studying anatomy and honing observational skills. During the classes participants are encouraged to pay close attention to specific elements of the body through drawing to sharpen visual observational skills, which in turn they can apply to the clinic environment to aid diagnosis.

[Figure 1: ArtMED workshop at the Whitworth Art Gallery, copyright Andy Ford]

Other museums have developed learning programmes in partnership with other service providers. The Royal Albert Memorial Museum (RAMM) has co-produced a six week course with Devon Recovery Learning Community aimed at people with mental health issues. The *Collections and Identity* course encourages creative responses to museum objects as a way to support people ‘who felt their identity had been compromised in some way’<sup>5</sup>. The course culminates in participants producing a portfolio of drawn, written, photographic and digital work to take away. Evaluation of this programme has shown a 20% overall group improvement in psychological wellbeing. For museums looking to evaluate their health and wellbeing activities, RAMM’s approach is of interest. The Museum produces briefing paper-style reports for each of their programmes with simple headings such as *What changed? What did people say? What next?* to give a compelling project overview including lessons learned and outcomes. The *if:Volunteering for Wellbeing* programme is also a model of good practice for evaluation. Detailed annual evaluation reports charting the impact of the programme are freely available on the project website, and use a mixed approach based on a Social Return on Investment model. While not every museum will be in a position to commission longitudinal evaluations of this kind, the findings may provide a useful evidence base for other museums looking to set up similar programmes. Furthermore, the *if* website contains a series of resources including templates, supporting documents and a best practice guide to support other museums in developing their own wellbeing volunteering offer<sup>6</sup>. Other resources for evaluation are also available through the Alliance website.

## Conclusion

As evidenced by the scale and scope of practice taking place across the UK (and elsewhere), museums provide a distinctive space for wellbeing through their social settings, the informal and social nature of museum learning programmes, and their unique collections, which encourage multisensory and bodily-kinaesthetic forms of engagement. Learning in museums is part of a rich set of cognitive and emotional engagement with objects, collections and ideas. Learning in museums differs from formal education and therefore should be understood in more expansive ways, in terms of creativity, flourishing and wellbeing. Further research however is required to fully understand the mechanisms at play that link museum learning and wellbeing.

As a conclusion to this paper, we present in the table below a number of ‘Action Points’ as a starting place for museums looking to practically develop their health and wellbeing offer with a learning focus.

RECOMMENDATION	PLANNING	GETTING STARTED
<b>Adopt a strategic approach</b>	Before developing a new project, be clear why you want to undertake the work and how it will fit with your organisation’s strategic aims?	Evaluate project plans in relation to the current learning and health priorities of your local authority and local Health & Wellbeing boards.
<b>Map and use existing assets</b>	Make the most of your	Produce an asset map

	spaces, especially outdoor areas and draw on existing assets in your community.	template <sup>7</sup> .
<b>Reframe and develop your offer</b>	Consider how your existing activities could be reframed explicitly in health and learning terms. For instance, your learning programme could support active ageing, combat social isolation and enhance wellbeing.	Make use of existing frameworks such as 5 Ways to Wellbeing to develop your offer. Align your 5 Ways offer with local health and learning priorities. Consult and position your existing resource with community networks.
<b>Be proactive and get the right training</b>	Bring in the experts to gain a good understanding of what the needs of a particular audience are and to equip staff at your organisation with the skills you will need to work responsibly around a particular health need.	Ask National Alliance for Museums, Health & Wellbeing consortium partners to access their training. Many charities also offer free training in their area of expertise.
<b>Shout about your work</b>	Celebrate your achievements, share your learning and consider that decision makers will be looking for the evidence base that something works for their local communities.	Remember to add things on your website and blog and request your current users to validate your work online. Also, identify key stakeholders in your area and start building links with commissioners and others by inviting them to your events.

### **Acknowledgments:**

The authors would like to thank all the museums that contributed case studies to the Alliance report and to Maria Patsou for her work on the report. The Alliance research was supported by funding from the Arts Council England (Grant Ref: 28252988 and 32127929)

### **Endnotes**

<sup>1</sup> The National Alliance for Museums, Health & Wellbeing is a consortium of project partners with expertise in this emerging field, led by UCL Culture (part of University College London) and funded through the Arts Council Museum Resilience Fund. The consortium includes National Museums Liverpool, the British Museum/Age Friendly Museums Network, the UK Medical Collections Group represented by the Thackray Medical Museum, Tyne & Wear Archives & Museums, Manchester Museums and Galleries Partnership, the Research Centre for Museums and Galleries at the University of Leicester's School of Museum Studies, the Museums Association, the National Alliance for Arts, Health & Wellbeing and the Cultural Commissioning Programme/NCVO. The Alliance aims to provide leadership and advocacy for the sector's contribution to health and wellbeing by identifying areas of best practice, and gaps in knowledge and training. The Alliance report is available to download from the Alliance website at:

<https://museumsandwellbeingalliance.wordpress.com/>

<sup>2</sup> More information on getting involved is available on the Alliance website, <https://museumsandwellbeingalliance.wordpress.com/>

<sup>3</sup> The All Party Parliamentary Working Group for Arts, Health and Wellbeing was launched in January 2014, bringing together Peers and MPs to discuss developments in this area in relation to current policy priorities.

<sup>4</sup> More information about each project can be found online at <https://www.ucl.ac.uk/museums/research/touch>

<sup>5</sup> The Inquiry into the Future of Lifelong Learning took place between 2007-2009 to assess the evidence across a series of themes, including 'Well-Being and Happiness', in order to produce policy recommendations. The review (Field, 2008) in this theme focused in particular on the economic benefits of formal education where the research-based has tended to be more developed. This research has linked formal education to wellbeing as it raises employability and earnings. Indeed the association between unemployment and mental ill-health is now well established, with the additional consequences of worklessness including the breakdown of social networks and negative impacts of self-worth and self-esteem (Field, 2008). In this paper however we focus on research that has focused or included informal learning in order to draw parallels with museum learning.

<sup>6</sup> <http://www.wallacecollection.org/ms/learn/community-access/>

<sup>7</sup> <http://rammuseum.org.uk/getting-involved/participation/collections-and-identity/>

<sup>8</sup> <http://volunteeringforwellbeing.org.uk/about/>

<sup>9</sup> For asset map templates see:

<http://www.communityscience.com/knowledge4equity/AssetMappingToolkit.pdf>

<http://www.brighterfuturestogether.co.uk/brighter-futures-together-toolkit/map-assets-in-your-community/>

[http://www.cbr-aimhigh.com/Resources%20and%20Links/resources\\_and\\_links.html](http://www.cbr-aimhigh.com/Resources%20and%20Links/resources_and_links.html)

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