



Responding to COVID-19 in the Liverpool City Region

The Mental Health Impact of Restricted Access to Arts and Culture

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Map of Liverpool City Region Combined Authority (LCRCA) boundary (in red) and constituent local authorities



Data sources: Westminster parliamentary constituencies (December 2018 - ONS), local authority districts (December 2018 - ONS), and combined authorities (December 2018 - ONS)

The Mental Health Impact of Restricted Access to Arts and Culture

Key takeaways

1. Arts and cultural organisations responded rapidly and creatively to the pandemic, offering new, online programmes as a lifeline for vulnerable and isolated people and adding an innovative dimension to their own services for the future.
2. There is an urgent need to evaluate **which** online arts and cultural services are working, **why** they are working and **for whom** they are working, and to provide expert advice to organisations on appropriate platforms, products and safeguarding measures.
3. [The COVID-19 CARE project](#) highlights the need for adequate training in digital literacy - for both staff and beneficiaries. This is just as essential as the provision of equipment and internet access.
4. Arts and cultural organisations have been most effective in reaching vulnerable, isolated and disadvantaged populations at risk of mental health issues when they have worked in close collaboration with social and mental health care providers. Sustaining and building on these partnerships is imperative to ensure that arts and culture are effectively mobilised to address the unprecedented mental health and wellbeing challenges the region faces in the aftermath of the pandemic.
5. The work of arts and cultural organisations operating in Liverpool City Region is hugely valuable in reaching vulnerable people, especially those experiencing or at risk of mental ill health. As one of LCR's most important economic and social assets, the arts and culture sector can play a major role in improving mental health outcomes across the city region, if properly integrated into public health strategy.

1. Introduction

Liverpool City Region (LCR) has one of the richest concentrations of culture in the UK and cultural capital is critical to the city region's economy. LCR also has a pioneering history of harnessing arts for mental health care through partnerships between culture and health providers.

When salaried arts staff were put on furlough in late March 2020, the impact was felt, therefore, not only on performers, practitioners and their audiences.

Lockdown also led to the pausing or suspension of many services (choirs, reading groups, museums and gallery workshops) upon which isolated and vulnerable populations relied for regular (often weekly) contact.

Our UK Research Innovation-funded study of the impact on mental health of

restricted access to arts and culture in LCR, and on the value of innovation in arts provision in mitigating associated harms, has found that the challenges and opportunities offered by this process are finely balanced. The sudden closure of arts and cultural venues and the ceasing of community and health provision of the arts, stimulated novel practices and solutions, as well as new partnerships and collaborations with strong potential for future sustainability. Yet these innovations also highlighted how existing disparities and inequalities in mental health and social wellbeing can be exacerbated by reliance on online provision.

This policy brief urges that, with Culture Liverpool about to embark on its 30-year strategy for the region, there has never been a more timely opportunity to rebuild and revitalise a vibrant arts culture in the Liverpool City Region which is better

oriented towards the mental health needs of the region's population. Fostering and supporting partnerships across the arts and health sector is key to the achievement of this ambition.

2. Moving arts provision online: challenges and opportunities

The COVID-19 research study, Culture and the Arts from Restriction to Enhancement: Protecting Mental Health in the Liverpool City Region ([COVID-19 CARE](#)), comprises two surveys. Survey 1 consisted of online interviews with civic and community arts organisations to understand the impact of COVID-19 on public access to arts activities, as well as the successes and challenges of the alternative modes of provision. Survey 2 consisted of an online questionnaire and interviews with arts' audiences and beneficiaries to gather views on the mental health impacts of restricted access to arts services and the perceived value and accessibility of alternative provision. Follow-up surveys are now underway to ascertain the impact of lockdown easing.

Our findings show that the response of the arts and culture sectors in Liverpool City Region to the COVID-19 lockdown has been highly creative and collaborative. Arts and cultural organisations rapidly created new, or adapted existing, programmes to reach their usual as well as new audiences. Online provision has been essential in addressing social isolation and enhancing psychological wellbeing during lockdown, and many beneficiaries have referred to this alternative provision as 'a lifeline'.

The flexibility of online provision has meant that arts providers are reaching people who have been unable to attend activities in person (for reasons of health, mobility, location or caring responsibilities), and are bringing people together across the city, the country and even globally. They are also reaching

people more frequently than face-to-face provision allows, holding activities fortnightly rather than monthly, twice weekly rather than weekly. Carers have benefitted particularly from extended networks and new peer support.

New and existing partnerships with health and social care services have been especially important in ensuring that non-digital provision is reaching people who need it. The arts organisations interviewed in our study report that they have been most effective in reaching vulnerable, isolated and disadvantaged populations at risk of or experiencing mental distress when they have worked in close collaboration with social and mental health care providers. These providers have frequently offered an online platform, while their networks have facilitated referral to online modes of provision or to telephone contact as an alternative.

For all these astonishing achievements, however, arts organisations have also encountered immense challenges. Existing technologies have limited both the quality and the availability of the arts experiences provided. Contact time is shorter and excludes the ancillary social and relational qualities which enrich in-person provision – sharing conversations or food, for example. Loss of the 'tactile nature' of meeting makes picking up clues informally around mental health needs less possible.

Above all, our research shows that arts and cultural providers are all too aware that certain populations have remained relatively out of reach (for example, the elderly, asylum seekers, street-based sex workers) due to lack of access to internet facilities or unfamiliarity with devices. The impact of digital exclusion is two-way: potential beneficiaries do not know what is available; arts organisations cannot be sure how many usual beneficiaries are accessing online services. Re-connecting

with usual beneficiaries, our interviewees told us, will be the biggest challenge of all.

Our study shows that those who reported engaging in arts and culture 'often' before lockdown – including theatre-going, museum and exhibition visits, musical performances and gigs – also reported 'never' engaging with arts and culture during lockdown and engaging 'rarely' at periods where restrictions were temporarily relaxed.

As well as negative impacts of COVID-19, such as increased anxiety, feelings of isolation, and difficulty of motivation or 'getting on with things', people have found that aspects of engagement with arts and culture were difficult to recreate online. They miss the social component and informal interaction of engagement, as well as thorough immersion in arts and cultural activity, which can be hindered online by distractions and frustrating barriers. These include the demand placed on energy levels, the visual strain from screen time, issues with cameras, poor internet connection and the expense of accessing content and technology.

The COVID-19 pandemic has clearly been a difficult, but at times rewarding, journey for LCR arts and cultural providers. The rapid pivot to online working has galvanised imaginative solutions and skilled up the workforce and beneficiaries, and organisations view digital provision not merely as a stop-gap but as a valuable addition to service as usual.

However, online provision was set up with little time or thought given to evaluative frameworks or to the adequacy of staff training. Organisations are acutely conscious of an urgent need to review 'what is working' for beneficiaries, and how efficacious their online exertions are, at a time when (material and staff) resources are stretched to capacity and organisational infrastructures are severely disrupted.

3. Addressing Mental Health needs

Even before the current crisis, Liverpool City Region had some of the poorest mental health outcomes in the country. The number of adults seeking mental health services in England has increased since the beginning of the first lockdown in 2020, with the North West region seeing the highest concentrations nationally.

In May 2020, the LCR Mayor's 'Case for the Liverpool City Region' (LCRCA 2020) cited 'a high prevalence of mental health disorders' as one of the complex health and wellbeing challenges the region faces as a result of coronavirus. Almost twelve months on, as predicted by the report, the risks to the population's mental health - especially from anxiety and stress (currently as high as 42% and 64% nationally according to research by the Mental Health Foundation, March 2021) – have been exacerbated by the economic inactivity and high infection rates experienced in the region during the pandemic.

With as many as 75% of people with diagnosable mental illness receiving no treatment, the burden of mental health threatens to be both large and long-lasting. There has never been a more important time to consider the full range of options available for meeting the needs of people in the region experiencing mental distress.

4. Culture, the Arts and Mental Health

A growing body of research has shown that participation in arts and cultural activity can support mental health and wellbeing (World Health Organisation, 2019). Our study supports these findings not only by showing the cost to public mental health of the loss of arts and cultural goods but by finding a renewed appreciation of the humanising influence and connective power of arts and culture

in taking people ‘out of the negative’, making them ‘feel more alive’, and creating a ‘sense of belonging’.

The proven association of accessible arts and culture to mental health and wellbeing is a key part of the case for post-pandemic re-investment in the region’s cultural infrastructure. Re-igniting the cultural life of Liverpool City Region is not an economic priority only: it is a vital component of equipping and resourcing the LCR to address the task of repairing the damage to people’s mental health wrought by the pandemic.

As the region emerges from the latest lockdown, and confronts the social and economic costs of COVID-19, it is essential that the transformative power of arts and culture for individual and community is harnessed to the regenerative effort through cooperative partnerships, co-ordinated programmes and targeted support.

5. Lessons and recommendations

The issues presented in this briefing directly connect with policy goals detailed in the Combined Authority’s (LCRCA) Building Back Better economic recovery plan (2020) – especially its people-focused recovery plan and its commitment to working in cross-sectoral partnership ‘to co-design and co-fund an integrated recovery programme across the domains of employment, skills, health and inequality’ (LCRCA, 2020: 37). The priorities outlined here also strongly align with the LCR’s Culture and Creative 30 Year Strategy goal of investing in culture as a ‘catalyst’ to achieve positive outcomes in wellbeing, health, and inclusivity (LCRCA, 2021).

To maximise the benefits of arts and cultural activity for mental health and wellbeing in the region, policy-makers should consider the following:

Train all stakeholders in digital know-how

Arts and cultural organisations need expert advice and support to retain the advantages of digital services for the future. This should include help with: the platforms and products which best suit their needs and those of beneficiaries; online safeguarding procedures (including issues of copyright and GDPR); efficient and effective training to skill-up both workforce and beneficiaries in technical knowledge and digital skills. (Simply giving people the right equipment or access – though valuable - is not sufficient.)

This could be led by the Combined Authority and delivered via a joint effort drawing on the private sector, universities and the arts and cultural organisations in LCR.

Co-ordinate local initiatives

Organisations spoke of the need for a ‘backbone organisation’ or ‘register’ of providers to co-ordinate services and share best practice. The admirable achievements of local initiatives and efforts in meeting essential needs could be scaled-up and targeted more efficiently if the talents, experience and good will of those organisations involved were ‘pulled’ or ‘held’ together through central co-ordination.

As a first step in this direction, our study is producing a database of best practice and innovation in arts and mental health in the Liverpool City Region, for use by regional stakeholders in the first instance and as a model for national scale-up in the future.

Support sustainable partnerships between health and arts providers

Collaboration between arts and cultural organisations and regional health and social care providers has facilitated wider provision as well as producing new opportunities for training care staff to deliver interventions. Building on and formalising these successes by creating a

space for continued cross-sectoral co-operation will enable a more cohesive approach which maximises the value and reach of these services.

The COVID-19 CARE study together with its partners will look to support continued collaboration as part of its legacy to build on achievements and maintain momentum.

These three recommendations are designed to encourage the joined-up thinking and practice that is all the more necessary given the constraints on local and national budgets under the dual impact of pre-Covid-19 austerity and the economic costs of the pandemic. LCRCA, for example, has committed to spending 1% of its budget on supporting culture but this still equates to only £300k per year for the entire city region. The upcoming LCR mayoral election presents an opportunity to debate the role of arts and culture not only in promoting the region as a tourism hub, but also in facilitating improved mental health within its population.

In January 2020, Arts Council England pledged to develop deeper partnerships with the Department of Health and Social Care and NHS England for the prescription of creative and cultural activities for mental health ('Let's Create'). As a result of COVID-19, health care services are under increasing, unsustainable pressure and struggling to meet the demand for mental health treatments. Gifted arts practitioners and professionals are out of work (and, our study shows, experiencing their own mental health difficulties as a result). There is a pressing need for local bodies, such as local authority public health teams and Culture Liverpool, to bring these historically distinctive regional strengths – culture and public health – into close strategic partnership: both for the rich mutual benefit and wellbeing of the regional population and to provide an

example of the vital role of arts and culture in mental health nationwide.

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