Questions and Answers

Question: How can someone successfully bring an artist or poet into a GP practice?

Answer: Professor Louise Younie described how charitable funding enabled a GP practice to host an artist and a poet who delivered a series of 12-week creative programmes for patients. Rather than focusing on medical conditions, participants engaged in creative activities that encouraged connection, reflection, and self-expression. The groups helped foster a sense of community, build confidence, develop friendships, and provide new ways for people to express themselves and make sense of their experiences. Although some GPs were initially sceptical about the value of the programme, they gradually became convinced by the positive outcomes and feedback from patients. A key factor in the programme's success was the trust patients placed in recommendations from their GPs, alongside the strong relationships that developed within the groups.

Question: How can creative health become embedded in healthcare and medical education?

Answer: The panel highlighted the importance of influencing change at a local level, particularly by protecting and strengthening social prescribing roles, which are seen as a key gateway into creative health. The panel emphasised that creative health should be embedded as a standard component of medical education and ongoing professional development, ensuring that future clinicians understand its value from the outset of their careers. There was also recognition that more healthcare professionals need opportunities to experience creative health approaches firsthand, as direct exposure can help turn sceptics into advocates. Alongside educational change, speakers stressed the need to engage professional bodies, policymakers, and local healthcare systems simultaneously to ensure that creative health becomes more widely recognised, supported, and integrated across health services.

Question: What data would persuade health economists, commissioners, and policymakers to invest in creative health?

Answer: Reflecting on the evidence needed to support creative health, Professor Louise Younie and Dr Simon Opher MP acknowledged that quantitative measures, such as reductions in GP appointments, healthcare utilisation, and associated costs, can be useful in making the case to

commissioners and policymakers. However, Louise noted that existing economic models often struggle to capture the value of high-quality consultations, attentive listening, and preventative approaches that may reduce future demand on services. Simon argued that there is already a substantial body of evidence supporting creative health interventions, including research highlighted in the work of Daisy Fancourt and studies demonstrating positive outcomes from initiatives such as singing groups for women experiencing postnatal depression. While recognising the importance of data, Simon expressed frustration that creative health projects are repeatedly required to prove their effectiveness when strong evidence already exists. Instead, Simon suggested that the focus should shift towards implementing and scaling approaches that have already been shown to work, rather than continually re-testing established interventions.

Question: How can healthcare measure and value outcomes like storytelling, listening, dignity, and creating legacies for people with dementia or terminal illness?

Answer: Professor Martin Marshall, Dr Kathleen Wenaden, and Dr Simon Opher MP acknowledged that these outcomes are deeply meaningful but often difficult to quantify using traditional healthcare metrics. They suggested that storytelling, creative expression, and opportunities for people to share their experiences may be most effective when rooted in communities rather than delivered solely through healthcare services. Community spaces, local assets, and neighbourhood-based initiatives were highlighted as important environments where people can connect, express themselves, and develop a sense of belonging. The speakers emphasised the need to balance the collection of quantitative data with the sharing of powerful personal stories that demonstrate impact in ways that numbers alone cannot capture. They also argued that creative health initiatives should be closely linked to wider community development and neighbourhood health approaches, helping to strengthen local networks and address wellbeing more holistically.

Question: Given that healthcare services influence only a portion of overall health, should efforts focus more on schools, employers, and communities?

Answer: Several speakers agreed that community settings are essential to improving health and wellbeing, recognising that health outcomes are shaped not only by healthcare services but also by social, cultural, educational, and environmental factors. The discussion highlighted the influential role that GPs can play in connecting individuals with community assets, supporting local initiatives, and helping to foster healthier, more connected neighbourhoods. Participants emphasised that creative health should not be confined to healthcare settings alone but should operate across both health services and wider community environments, where opportunities for creativity, connection, and participation can have a significant impact on people's lives and wellbeing.

Question: Could creative health contribute to solving large-scale NHS problems?

Answer: Dr Simon Opher MP highlighted the potential of creative health to address several pressing challenges facing the NHS, including mental health waiting lists, support for young people awaiting Child and Adolescent Mental Health Services (CAMHS) appointments, chronic pain, polypharmacy, social isolation, and the needs of neurodivergent young people who may benefit from support rather than diagnosis alone. He suggested that creative interventions, such as music, arts, and community-based activities, could provide meaningful support for individuals while they wait for formal services, offering opportunities for connection, self-expression, and wellbeing. In particular, he proposed that creative programmes could play a valuable role for young people on long mental health waiting lists, not as a replacement for clinical care but as a complementary approach that helps address unmet needs and improves quality of life. More broadly, Simon argued that creativity could help the NHS respond in innovative ways to complex and growing health challenges, while also reducing reliance on purely medical solutions.

Closing reflections question: What should the GP SIG focus on moving forward?

Dr Simon Opher

- Continue sharing ideas and inspiration through networks such as the SIG.
- Focus on arts as a tool to disrupt and improve difficult clinical problems.
- Expand creative health in medical education and policy discussions.

Dr Kathleen Wenaden

- Re-engage with neighbourhood healthcare and community assets.
- Start small, practical arts-based initiatives locally.
- Attend face-to-face SIG events to build collaboration.

Professor Martin Marshall

- Move beyond discussion and create a specific national project.
- Use the group's collective influence to deliver practical solutions.
- Suggested supporting young people on mental health waiting lists through creative health interventions.

Professor Louise Younie

- Creative health starts with practitioners themselves.
- The movement should identify who else needs to be involved and build broader partnerships.
- Collaboration and leadership across sectors will be essential.

Additional links from chat

Dr Amal Lad's podcast - https://www.creativemedicine.co.uk/

Jane Myat and Simon Lewis - The Cards: Being Human - https://www.thecards.org/

Dr Nicola Davis, Co-Director of the Voluntarily run Creative Clinic, which aims to encourage doctors + medical students to utilise all the benefits of creativity. https://www.creativeclinic.org/

Dr Mark Rickenbach Creative Writing and Healthcare Articles https://www.docrick.co.uk/creative-writing-and-publications/

Beyond the Bleep, a community supporting clinician wellbeing through events, conversations and creative exploration - https://www.beyondthebleep.co.uk/

Podcast series called *The Creative Clinician* by Dr Feyisara Mendes. – sharing the stories of doctors daring to redefine their path - https://www.youtube.com/playlist?list=PLCHnuvlpaXnM

Patient quotes and experience from arts in GP practice – Med Ed Flourishing/Creative Enquiry https://sites.google.com/view/humanflourishingmeded/creative-enquiry-projects/artist-poet-in-the-gp-surgery-2006-10?pli=1&authuser=0

Art cure: The science of how the arts transform our health | Royal Institution

As we move to horizon three (Three Horizons | International Futures Forum) I think we need to frame creative health, and true bodymind medicine differently and use qualitative models, other ways to demonstrate this. We are embodied storied beings and need to speak to this boldly and with pride!