

Primary theme addressed: Cost/benefit analysis. How can we measure the value and worth of creativity in health and well being contexts?

Title: The healthy museum: how and why should museums place health and well being at the heart of policy?

INTRODUCTION

My objective for this paper is to look at what I call the healthy museum, which places health and well being at the heart of policy. I want to share some ideas about the current debates around social value and measurement and to advocate the role that museums can play as an effective partner in these areas.

So, in this context social value includes health and well being. As a consultant, I've been commissioned to write a number of funding strategies over the past 18 months. This means that I have to investigate what drives non profit arts / heritage organisations. What are their values? What difference in terms of social value do they really want to make through their ongoing activities, and how far will they go to avoid 'mission creep.' By that I mean wrapping activities, language and rhetoric around a specific funder's policy in order to generate matched funding.

Why museums?

To me, at their best, 21st century museums are relevant to peoples lives on an on-going basis. They are in a constant process of transformation in response to social and economic issues from local to international levels. These museums are sustainable yet they value risk. They understand the need to operate effectively in their changing environment at all times. They listen to their existing and potential audiences.

Therefore these museums also understand the relevance and necessity of health and well being and the role that they can play in delivering these objectives, objectives shared by others such as hospitals, councils, national and local government and tax payers. They are aware of the contribution that their unique collections can make, be it inside or away from the museums four walls.

The Museums, Libraries and Archives Council (MLA) suggest that this is an important time to articulate and communicate the power and unique contribution that museums have in response to health agendas and social value.

Of course, I know the difference between a museum and the National Health service. Many museum professionals have what they describe as a healthy dose of scepticism in terms of what museums can actually deliver.

Obviously they are not hospitals. If I need to take my daughter to the hospital for a hearing test, I do not make the mistake of stopping at my local museum for that service. However, I might call by if they have music workshop for toddlers, which encourages listening and responding to a variety of sounds, based on their collection of musical instruments. Then perhaps these services can become aligned.

I also know that another strength of museums is that two are rarely alike. Not all are best placed to respond to all of the issues all of the time.

However, if we work on the assumption that at least some of the best museums are actively responding to their communities and environment, they will be contributing to health and well being agendas.

The economic and social value of museums

So how do we define these contributions through social and economic value and why should we bother?

I start by asking, what is your bottom line and who owns it? By this I mean, who are you accountable to?

The purpose on a Director of an organisation is to create value. This is the same for a *non profit* and a *for profit* organisation. But with non profits you have to actively create more than one type of value.

Non profit organisations are increasingly concerned with how best to demonstrate the value they are creating through 'triple bottom line accounting', whereby social, financial and environmental value is measured and demonstrated.

Demands for accountability, justification for funding and evidence of value for money requires managers to show that their organisations can create real value that goes beyond cash flow. We therefore need to look further than financial measures and adopt a broader notion of economics. The principle problem faced by many non profit organisations is that they create value beyond that which the market recognises. We therefore need be able to demonstrate this additional, often intangible value.

Where funding is scarce, managers need to be concerned with creating an organisation where such funding is seen to create the most value. This is why it is not a choice between social value *or* economic value because organisations

such as museums can create social *and* economic value and organisations can demonstrate this.

Therefore, the adoption of health policy that cuts across all aspects of an organisation creates real, sustainable value that can be measured widely in economic terms.

We also need to make sure that we know and are talking to our stake-holders, since the value created by an organisation is determined by its stake-holders. Something can have high value for one stake-holder, and at the same time have little value for another, and this changes over time. So we have to make sure that we know our stake-holders, and the aspects of our organisation that add value for them. Therefore a good performance measurement system will always start with figuring out who are the organisation's stake-holders together with the value the organisation creates for them.

Indicators used to measure this value

Last year I did some shadowing at HM Treasury. Whilst there I was reminded that to have the best chance of success from the Government's perspective, we might chose to reframe our work as part of a wider social good. This is partly why museums can align themselves with the 'third sector'.

From a Treasury perspective, it seems to be about demonstrating impact with areas that include: employment for disadvantaged groups, benefit savings, NHS savings and contributing to personal wealth. For example volunteering can be seen as part of active citizenship which builds social capital with real outcomes.

They also recommended the use of measures for local economic impact to show

how wealth is returned to a local area and how people view their neighbourhood.

However, it is too simplistic to simply measure against these suggested targets in traditional economic terms. Today, non profit organisations also need to effectively balance fund raising, entrepreneurialism and social value if they are to succeed over the long term.

In terms of indicators used to measure our value, we know that there are many that already exist. According to the current secretary of state for the Department of Culture, Media and Sport (DCMS), James Purnell, there are already over 7000 studies just to demonstrate the link between, architecture the built environment and well being. Furthermore, he says that:

There is a need for top class skills across the sector to manage the historic environment in partnership with other agencies - working in particular with local authorities...I want to work across Government to continue to make clear the important connections [with] the wider Government agenda – be that housing, education or place making. And to do so I want to work with you to build that case.

I think this can be transferred across to the broader DCMS remit, which obviously includes museums and well being, or a number of other similar combinations. I also think that this strengthens the need for organisations such as museums to be seen to work closely with local authorities, to show that they are relevant. So again, it comes back to how can we demonstrate this value?

I am not going to attempt to break down the whole area of national indicators (f/t) and Local Area Agreements but I know that they are significant. They are a useful measure for a range of activities and a good place to start and I will come

back to them when I talk about my case study.

Generic Social Outcomes

The Museum Libraries and Archives Council (MLA) has designed the Generic Social Outcomes (GSO) framework as a tool to enable museums (and libraries and archives) to demonstrate effective delivery against key agendas and to maximise contribution to communities.

This framework has been developed through a re-working of relevant outcomes areas taken from sources that include:

- local area agreements
- the Department of Health's standards and planning framework
- the cross departmental Every Child Matters framework
- local and central government shared priorities
- the Audit commission's quality of life indicators

So the framework is designed to show how activities fit into a wider policy context. They cover three broad themes:

- stronger and safer communities
- strengthening public life
- health and well being.

You can find the framework at www.mla.gov.uk (and search 'generic social outcomes').

The method of measurement is left up to the individual and the framework can be

adapted to suit your own circumstances. I will give you an example of this in a moment as part of my case study, which I'm now going to introduce.

Case study: Thackray Museum, Leeds

The Thackray Museum is situated in Leeds, next to St James's hospital, Jimmy's, part of Leeds Teaching hospitals trust. Originally the building was a Victorian work house. The museum has existed there for the past ten years and it receives around 75,000 visitors a year. It is one of around 100 museums in the UK that hold medical collections and it is the largest medical museum outside London. As an independent museum, with no direct, year on year local authority funding, the museum tends to run its community work on a project by project basis.

The Museum has recently applied the the Heritage Lottery Fund's collecting cultures strand, for a project called 'Preventive Collections', which would enable the museum to actively collect objects relating to contraception, since no other museum is actively collecting in this area in the UK.

As some of you will know, Yorkshire has one of highest teenage pregnancy rates in the UK. It is been acknowledged that - whilst issues such as sexual health and teenage pregnancy are an ongoing governmental concern, schools are not doing enough in this area. Indeed, the museum's public consultation work revealed that there is still a lot of insecurity about this topic, particularly in terms of opening discussing the subject on a day to day basis amongst adults, let along young people.

So this project has been about fitting in to government agendas whilst also identifying and responding to direct community need.

Assuming the funding application is successful, this project can be evaluated using the frameworks mentioned earlier. Once an evidence base is created, this can be used to better advocate the role of the museum and its place in its local environment and may also attract more sustainable funding.

The Leeds Local Area Agreement's theme of Health and Wellbeing has a framework for action as part of its health and wellbeing plan. This includes a priority on sexual health, teenage pregnancy, women's health within local communities and training for young people and sexual health.

An obvious partner for the Thackray Museum, is its direct neighbour, Jimmy's. Perhaps unsurprisingly, the National Health Service does not always have a good public image, particularly in terms of talking to its neighbourhood communities within the city. Therefore, the museum can provide a great gateway for the hospital Trust and local people to start to talk. The Museum might also offer opportunities for staff development, capture medical history through oral history projects with key hospital staff and perhaps most obviously continue to provide high level educational services to children and adults either within or outside the museum and hospital.

One of the key problems in terms of articulating economic and social value using the frameworks that I've talked about for an independently owned museum such as the Thackray, is that trustees and individual donors need to want to be able to understand and have easy access to the systems that centre around Local Area Agreements and other government targets. The relatively small size of an organisation compared to something like a hospital trust can be seen as an unintentional barrier to participation of these agendas at a local level.

Conclusion

So to conclude, I want to summarise by highlighting four elements that appear to be necessary in terms of delivering effective cost/benefit analysis to a number of stake-holders.

Firstly, building relationships.

Much of our work depends on strong partnerships, both internally and externally, in order to develop and provide excellence services.

Secondly, direct economic measurements. There are various ways to demonstrate these and they can help to build a case for a variety of organisations.

Thirdly, creating an evidence base. Again, there are a number of measurement tools available. However, according to a social Impact programme assessment for Tyne and Wear and Bristol museums, it may not always be either possible or desirable to find neat 'relationships between activity x and outcome y...the idea of 'proof' is idealistic since the grounds for doubting a statement are infinite. The case for a mixture of evaluative methods, including personal stories and narrative will always be valued.

And finally, **a need for a focus on the long term**, by which I mean longitudinal evaluation that covers at least 10 years in three year cycles.

I hope that this paper has demonstrated the benefit to museums and others willing to align with government policy and the third sector in order to create a measurable difference to local community well being. I also hope that organisations chose to do this because they want to and because they see the

value of it because it aligns with their values and mission for their communities, rather than responding because government tells them to.

I believe healthcare is universal and local; both personal and collective. Since it concerns us all at least at some point, well being is inclusive by its nature and will therefore always be an issue for local and national government. It makes sense that it should also be of concern to at least some museums, arts and heritage organisations.

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*Lynda Kelly's blog contains a wealth of useful information:

<http://amarclk.blogspot.com/>

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Notes

National Indicators: Handbook of definitions - draft for consultation is available at www.communities.gov.uk/publications/localgovernment/indicatorsdefinitions

Tools that can demonstrate social return on investment include 'local multiplier 3' and 'plugging the leaks'. Available online at www.pluggingtheleaks.org (part of the New Economics Foundation).

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