

Music, social health and cohesion

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Introduction

The instrumental benefits of Community Cultural Development (CCD) practice as facilitators of social change are generally well expounded throughout a significant proportion of the literature, but are often criticised and misunderstood due to a lack of an empirical, evidence-based discussion of its accomplishments. Evidence that is largely associational and anecdotal is often reflected in the literature as doing little to support the theories that underpin the field, with reliance upon a collection of individual case studies to illustrate CCD meta-narratives seemingly standard practice. This paper posits that there is a significant body of evidence in existence, but not one that satisfies all standards of evidence for different funding, granting or research organisations.

This paper will discuss trends in national and international policy and practice in the use of the arts generally and music specifically as CCD practice. It will examine the ways in which data is being collected to support the field and underpin significant policy areas including, *inter alia*, policies of social inclusion and engagement of the UK, and the arts-health strategy of the Australia Council (whole-of-government approaches). The paper will also illustrate the intersection of this praxis with education and other initiatives supported by the Australia Council.

Concluding with the discussion of a methodology used in current and upcoming research in this area, the paper will argue for the validity and vitality of music-CCD practice as a catalyst for social health and cohesion.

What is social health and cohesion?

The World Health Organisation (WHO) definition of health is as follows:

Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity (WHO, 1948).

This, according to WHO, is 'basic to the happiness, harmonious relations and security of all peoples' (WHO, 1948). Whether the definition is considered aspirational, or naïve, or 'dangerously utopianist' (Bok, 2004) depends specifically on one's perspective: the definition will certainly mean something different for those working in the research laboratories of the biological and human sciences than someone working in the Australian health system, and certainly from someone working in the arts. That it was framed after the devastation of World War Two possibly speaks to its all-encompassing notion and the codicil that nations should promote 'solutions of international, economic, social health and other problems'. It is an historical document against which tensions around health can be readily examined - including the allocations for prevention, therapy, research and care (Bok, 2004).

Perhaps the issue becomes one of fulfilling potential, through addressing inequities and imbalances so individual and communal potentials can be realised. This has to do with identifying risk factors that prevent potential being realised in the areas of emotional climate (with its attendant manifestations), security, place within the community, identity, interaction and shared purpose and belief (de Rivera & Páez, 2007). Alongside the physical and mental dimensions of health, these social considerations of opportunity and access can be addressed through arts participation and arts education through the inculcation of creativity (Matarasso, 1997). How this manifests in the society of the 21st century is something of an issue of concern – many theorists concur that the workplace in 25 years time will be unrecognisable (Robinson, 2001). How can the arts be used to address this issue of security and place within such a fundamental place as the future workforce so as to promote, maintain or remediate issues around social cohesion and well-being?

The concept of the knowledge economy was perhaps initially connected with the innovations resulting from ICT and other digital technologies, and was the subject of much re-imagining following the bust of some dot com industry. Recent knowledge economy discourse has moved from being predominantly concerned with technology, and in its stead inculcates 'higher order' notions, including creativity. The *Imagine Australia* report articulates the importance of this position by advocating for a move towards 'innovation on the basis of creative ideas' (PMSEIC, 2005).

Contemporary thinking on innovation suggests that creativity may be more akin to a cultural activity than a science (Lester & Piore, 2004), with some economists estimating that a significant amount of economic growth (between 60 and 80%) comes from innovation and creativity. Economic policy makers tend to conclude that creativity is driven by three interlinked factors:

- The growth of the creative and cultural sectors
- Creative inputs as a part of wider innovation policy
- Skills, aptitudes, and ways of working (Oakley, 2007).

Whilst these factors are derived from socio-economic argument, they can be attended to through education practices. Presenting the case of arts education within the framework of social resilience to future changes in the workplace is predictive - what is better known, however, is the increasing importance for workplace participants to have developed a suite of skills that promote community and social cohesion. These traits include stability, dependability, innovation (itself dependant upon the processes of analysis and interpretation [Lester and Piore, 1994]), risk and project management, communication skills, teamwork, decision making and problem solving skills, and cultural understanding. These extrinsic skills are engendered by the arts, and are themselves brought about by a prolonged interaction with the arts (Oakley, 2007).

If education is one plank of the social cohesion and well-being scaffold, then the others resonate around opportunity, access and emotional sharing. These are perhaps less in need of such an explication as they are definitionally more obvious. Consequently, they will be discussed as aspects of research and practice in the field.

Are the arts any good at promoting social health and cohesion?

In his article *Use or ornament? The social impact of participation in the arts*, François Matarasso (1997) concludes that

- participation in the arts brings social benefits
- that the benefits are integral to the act of participation
- the social benefits are complex but understandable, and
- that social impacts can be assessed and planned for.

Matarasso then lists 50 social impacts of participation in the arts that can be produced through participatory arts projects. These include highly obvious impacts, such as 'extend involvement in social activity' and 'provide a unique and deep source of enjoyment' through to highly specific outcomes such as 'provide a forum to explore personal rights and responsibilities', 'provide a forum for intercultural working and friendship' and 'provide a route to rehabilitation and integration for offenders'.

Matarasso's study concludes by stating, amongst other things, that participatory arts projects can contribute to social cohesion in many ways – not the least reason being that neutral spaces are provided for the facilitation of discourse, the building of friendships and project based cooperation. These 'comings together' transcend age (as intergenerational projects), culture (interaction of communities of different ethnicities), and contribute to community empowerment and the building of local and organisational capacity (in the study, Matarasso refers to the growth and success of cultural festivals). It is not surprising that the flow-on effect is economic and political.

The regeneration of community through the arts is not limited to the artistic domain. Embracing economic, social, environmental and cultural aspects traversing the areas of community identity (and the identity of the individual within it), the quality of life for a population within a community, and the quality of life enabled through the interaction of community segments, Kay (2000) found that the arts could have a pivotal role in the regeneration of communities. For Kay, research showed that arts projects:

- are versatile, flexible and wide ranging
- can be used in training and employment
- are attractive to young people
- are non-threatening to the most marginalised and excluded in society
- are good at encouraging economic investment and
- can be used in the development of communities through active citizenship and increased involvement in other community based projects.

By inculcating the experiences of participation, representation and communication at the community level through arts programs, a 'design for living' (Worsely 1984) is facilitated. This design has a role to play in encouraging training and development, supporting volunteers and participants, improving the image (internal and external) of an area, promoting active citizenship, the recognition of a distinctive cultural identity, and the improving of people's lives through collective creativity. Essentially, it provides an opportunity to explore in cooperation with other members of the community. It bonds and bridges social capital (Putnam, 2007).

This can lead to a fulfilling of potential and a reduction of at-risk behaviours and consequences as, as Brayden and Mayo (1999) point out, 'culture tells us not only who we are and what is what, but what is to be done'.

The arts, and music in particular, is expert in eliciting emotional responses. Active participation in musical activity results in the sharing of emotion amongst the participants – the creation of a significant and strong bond. This micro-social process of the social sharing of emotion, according to Rime (2007), gives rise to the construction of an 'emotional climate' in the concerned community. Rime presents evidence that emotion sharing impacts upon the emotional climate in general, on group cohesion and solidarity (with positive consequences for emotional climate) and on collective memory. In *The social sharing of emotion as an interface between individual and collective processes in the construction of emotional climates*, Rime delimits the type of emotion being shared. He claims that emotion impregnates the life of a person following an event for some time - sometimes a very long time - and that the emotion is not constrained to the individual. The sharing gives rise to the foundations mentioned above: as social consequences facilitated through communication and interpersonal propagation are central to emotional episodes and sharing. It is the act of sharing emotion that binds individuals together in a functional society, whatever that emotion may be. It is amplified considerably when groups rather than individuals experience the emotion.

This discussion has focussed on the participation in arts activities as facilitators of social health and cohesion and not its consumption. Can the listening to of music give the same social health benefits as participation?

Generally, there seems to be little evidence to support this contention, though it is generally agreed that active listening and engagement with music tends to increase the likelihood of music participation. Having said that, it is clear that active listening to music can give rise to a community, or neotribe (Maffesoli 1996), that has its own support networks and solidarity (Bennett 2006). What is unclear is how this is invigilated: does the music give rise to the community, or is the music no more privileged than other aspects of the resultant community such as fashion? Does the collective sharing of emotion through music listening have the same social capacity building as participation, or is the capacity building an adjunct to the group listening experience? When the listening experience is personal, the closed loop of a filmic, mimetic response (as occasioned by, say, walking down the street listening to music on an iPod) gives rise to an associational identity where music is the device for the reflexive process of construction (DeNora 2006). While the act of listening, both in-group and individually, is important, it is not as potent a facilitator of social health and cohesion as participation.

What needs to be in place?

According to Matarasso (1997), the openness and elasticity of the arts are the reasons that it is so successful as a facilitator of social change. Matarasso points out that it is a process of partnership, with the ultimate goal not always a presentation of the output in exhibition, concert or recorded form. The focus on the process within which skills are learned, and where interaction amongst members of the community is facilitated, is paramount to the success of the approach. Furthermore, Matarasso articulates seven core principles around

which a creative environment can be facilitated with the aim of creating a positive social impact. These are:

- Clear objectives
- Equitable partnership
- Good planning
- Shared ethical principles
- Excellence
- Proportional expectations
- Joint evaluation

Collaborative planning and partnership development is an important step for creating trust between artists and the community. This includes establishing procedures for risk mitigation and identifying threats and weaknesses openly and in consultation with program partners.

A fairly high profile case where these fundamentals were not secured was the *Social Tapestries: Conversations and Connections* project run by Proboscis in 2005-6. This project sought to explore how knowledge mapping and sharing (public authoring) tools can be harnessed by a local community to stimulate connections between residents of the Havelok Housing estate in West London. A range of activities (both online and offline, all centred upon arts and creativity) were designed and implemented. In identifying why the project failed in the Evaluation Report for the Ministry of Justice (who funded the project) it was determined that there was:

- a lack of consistent community development support on the estate
- weak connections between the residents' organisation committee and the residents
- failure to assert the connection between housing issues and social development issues
- failure to develop lasting connections with individual with key skills (computing skills)
- failure to develop meaningful connections with taste makers in the estate
- other competing issues and events that frustrated the momentum of the project (Harris & Lane, 2007).

Perhaps the project was too 'top down' and did not involve consultation in the project design, or perhaps the medium used was too far removed from the participant's experience – nonetheless, the project did not work due to repeated absences of participants. The promise of engagement became outweighed by the drudgery of forced participation. As a model of how things go awry, the evaluation is clear in describing the areas where the project implementation went astray. In the context of deprivation and disorder, the central group of the estate were unwilling to rescind any controls making meaningful or fluid participation difficult, thereby reinforcing the very issues that the program was designed to address.

Thus, the processes to be in place for a program around social health and cohesion require consultation, collaboration, consistency, communication and commitment.

How does this relate to policy areas?

Arts-in-health components can be often found sublimated within other broad policy and strategy areas. England's Department of Health (DoH) seeks to 'help improve the health and wellbeing of everyone in England'. Amongst many other things, the DoH contributes to arts-health initiatives, often in partnership with the Arts Council of England. This includes

- Promoting and improving health and wellbeing through public health strategies, health education and health promotion
- Tackling major health issues
- Community cohesion, regeneration and improving public health
- Arts participation

amongst other areas (Arts Council England, 2007).

The Irish policy around social inclusion likewise concentrates on participation – opportunity and access – and education as ways of facilitating social cohesion and wellbeing. The arts are addressed in section 6.4.5 of the *National Action Plan for Social Inclusion 2007 – 2016* through the overarching statement that '[p]articipation in arts and culture brings many benefits to individuals and communities' (Government of Ireland, 2007). Similarly, these key areas are addressed in the Australian *National Education and the Arts Statement*, co-published by the Cultural Ministers Council (CMC) and the Ministerial Council on Education, Employment, Training and Youth Affairs (MCEETYA), with the three underpinning principles being:

- All children and young people should have a high quality arts education in every phase of learning
- Creating partnerships strengthens community identity and local cultures
- Connecting schools with the arts and cultural sector enriches learning outcomes (CMC/MCEETYA, 2007).

The Australia Council for the Arts allocated funds to develop a strategy in the area of arts and health and partner with other organisations in the delivery of an arts-health demonstration project. The resultant strategy document sought to define the role of the Australia Council in arts and health and to recommend ways it might contribute to the community by developing a model of arts and health.

The Australia Council envisions an intersection where the arts function as an important contributor to, and driver of, the improved health and wellbeing of individuals and communities. This vision echoes the shared commitment of the Australia Council and the health sector to the improved health and wellbeing of individuals and communities. Additionally, it captures the Australia Council's goals and strategic objectives to support the excellence, diversity and distinctiveness of Australia's arts and artists, and increase community engagement and individual participation in the arts (Australia Council, 2007).

One of the important aspects of the research undertaken by the writers of the strategy options paper, and strongly reflected elsewhere in the literature, is the lack of a strong 'hard' evidence base supporting the mostly anecdotal and associational claims underpinning the arts as facilitators of social change, and as indicators of health benefits through habitual participation

in the arts. It is clear that this is changing, with more robust studies being undertaken, both here and overseas. In the words of *A Prospectus for Arts and Health* (UK):

Although some pieces of evidence are less rigorous than others, the reality is that there is a considerable evidence base, both from the UK and internationally, with hundreds of research studies and evaluated projects that clearly demonstrate the benefits of using the arts in health.

It is worth reconceptualising the question of evidence in this regard. Evidence exists around the arts as facilitators of social cohesion and well-being through the multitude of case studies and evaluations. The majority of this evidence is sufficient to formulate a position of the worthiness of the activity and/or the credentials of the program, method and facilitators. What is lacking are the broad types of evidence and data that may be used to influence certain sectors of the granting, funding or research community. The application of 'hard' evidence into advocacy is required only in certain cases: the real question around data gathering and evidence, for me, is around the following intersection:

- To whom is this advocacy directed?
- What sort of data/evidence is required by this person/body/organisation in order for them to make an informed decision?

Evidentiary requirements will differ according to the specialisation of the funding authority. It is observable that evidence types required to substantiate clinical trial findings, or as part of applications to the National Health and Medical Research Council (NHMRC) and/or the Australian Research Council (ARC), will differ from that required by the Australia Council, or the Ian Potter Cultural Trust, or by local government authorities and agencies. Arguments with existing evidence bases can be made to certain organisations, perhaps with the aim of developing harder data, or developing influential fields of praxis. It is my observation that this is occurring.

Art and health demonstration project

As a way of addressing this issue around robustness of research, the Australia Council's *Expression of Interest for an Arts-Health Demonstration Project* included a statement about regarding the nature and method of the research to be undertaken.

Amongst other things, the EOI stated that a specially comprised or existing consortium of health, allied health and arts organisations would make the expression of interest, and propose a methodology for the planning, implementation and evaluation of a demonstration project. The demonstration project as described in the EOI seeks to enable praxis in the field of art and health culminating in an arts-health project model that could be considered amongst 'best practice' in the field, develop support services, and report in a manner likely to be persuasive as advocacy to the arts, health and government sectors (Australia Council, 2007).

The successful tenderer brought together a consortium of health, allied health and arts organisations that includes the Brain Mind Research Institute (University of Sydney), Alfred Psychiatry Research Centre (Monash University), Arts Access Australia, ArtsHealth:

Research and Practice Centre (University of Newcastle), Alexandria Park Community School and a Darlinghurst based Homeless Persons Support Service run by Fr Brian Stoney. The project designers proposed a methodology for the planning, implementation and evaluation of an arts and mental health demonstration project working with Indigenous people, with two sub-groups of young people and ex-prisoners, in inner city Sydney. This project will commence in early 2008, with periodic reporting throughout the life of the project.

Some Music Examples

A number of key examples as to music as facilitator of social health and cohesion include:

Barkly Regional Arts: Winanjikari Music Centre.

When a group of men at Barkly Regional Arts discussed developing musical opportunities and infrastructure, they identified the role that music played in the social life of their community, and how this related to the telling of their own stories. They discussed the economics of music, its production, the equipment required, and the tangential skills that music participation could invigilate. The resultant music centre has been instrumental in providing opportunity and access to and for music making with resultant significant improvements in social resilience and positive community and individual esteem (www.barklyarts.com.au/index.htm, accessed 22 September 2007).

Information and Cultural Exchange

The Urban Music Project, coordinated by 2007 ARIA nominee hip-hop Artist MC Trey, delivers music workshops for diverse and socially excluded young people. The program encourages participants to develop songwriting and music production skills including text composition, music sequencing, and recording using the facilities of ICE's Switch Multimedia and Digital Arts Access Centre. The program outputs a compact disk compilation, with opportunities for live performance organised as part of the launch of the CD. The program allows participants to express themselves in their own words through a medium they enjoy in a safe, directed and educational environment. This project has led to significant improvements in cultural cohesion and cross-cultural dialogue and engagement, and improvements in individual esteem (www.ice.org.au/projects/urban-music-project, accessed 22 September 2007).

Music. Play for Life.

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