

Evaluation Report

Arts and Health: The Gypsy and Traveller Project

Report Produced on 10/02/2025 Prepared by Dr Matthew Lawrence



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Bwrdd Iechyd Prifysgol Hywel Dda University Health Board







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1.0 Introduction – The Challenge

1.1 Background and context

Romany Gypsy, Roma and Irish Traveller communities are known to face some of the starkest inequalities in healthcare access and outcomes amongst the UK population, including when compared with other minority ethnic groups, despite being one of the longest established minority ethnic groups in the UK.1 They are also one of the most excluded communities in the UK and experience many barriers to health care. The umbrella term 'Gypsies, Roma and Travellers' Whilst often pooled together as one, however, they include many different and distinct groups each with their own needs and challenges.

According to Welsh Gov Gypsies and Travellers live shorter lives and suffer from chronic ill health such as cardio-vascular disease, cancers, diabetes asthma and other respiratory conditions. The social determinants of health are considered to be the principal drivers of health, estimated by the World Health Organisation to account for up to 50% of health outcomes. The reasons for these poor health outcomes are complex, but include the impact of discrimination and stigmatisation, the complicated nature of health systems and the effects of wider social determinants of health.

1.1.2 Key Facts around health inequalities in Gypsy and Travellers Communities

- Romany and Traveller people face life expectancies between ten and 25 years shorter than the general population.2
- Romany and Traveller people experience significantly higher prevalence of long-term illness, health problems or disabilities, which limit daily activities or work.3
- The health of a Romany or Traveller person in their 60s is comparable to an average White British person in their 80s.4
- An All-Ireland study found that suicide prevalence is six times higher for Irish Traveller women than women in the general population, and seven times higher for Traveller men.5
- 60% of Roma Support Group's migrant Roma beneficiaries are reported to have poor physical health, with 43% of Roma beneficiaries of the above reported to suffer from poor mental health.6

1.2 Key Causes for the health Inequalities

Gypsy and Traveller communities are widely recognised to be more likely than the general population to be facing a variety of social risk factors, or wider determinants, of poor mental health, including, poverty, unemployment, lower educational attainment, insecure or lack of culturally-pertinent accommodation, and extreme stress (Tackling Suicide Inequalities in Gypsy and Traveller Communities 2022). Healthcare staff find it difficult to share health messages with this community who are often unsure/distrusting of authorities and have low literacy levels. Data collection is generally poor for ethnic minority groups, and more so for Gypsies and Travellers who are not included in the NHS data set throughout the UK. The key issues include:

1.2.1 Barriers to accessing healthcare

Participants described barriers to accessing health services, particularly primary care services. This could undermine access to routine immunisations and preventative care, and result in delayed diagnoses and treatment, including regular or repeat treatment. Almost all community member participants described difficulties accessing a GP surgery without a fixed address, as part of their own experience or that of others around them. This appeared particularly challenging for those living roadside or on Gypsy and Traveller sites.

1.2.2 Trust in health services

Police presence when accessing emergency health services could be particularly challenging given the wider context of difficult relationships with the police (see Gypsies' and Travellers' lived experiences, justice, England and Wales: 2022 bulletin). Fear of police presence appeared to undermine trust, feelings of safety and engagement with health services.

Participants also described concerns around the potential for negative social judgements and the involvement of social services when accessing healthcare, with fears of children being taken into care as a result. Challenges with accessing health services because of perceived derogatory attitudes were described relating to interactions with a range of health practitioners and particularly mentioned in relation to GP surgery reception staff, who were perceived as gatekeepers to GP access.

1.2.3 Experiences of relationships with healthcare workers

Participants described experiencing some positive relationships with healthcare workers, which appeared to make a difference in supporting their access and engagement with health services. However, participants also described having experienced perceived discrimination and derogatory attitudes from healthcare providers, as well as anticipating discrimination based on others' experiences. Fear of discrimination and doubts about whether help would be offered from healthcare providers appeared to undermine access to healthcare.

1.3 Current situation in Hywel Dda University Health Board (UHB)

The Gypsy and Traveller community in the region of Wales covered by Hywel Dda UHB approximates to 0.5% of the Population in Pembrokeshire (approximately 600 people), 0.2% of the Population in Carmarthenshire (approximately 400 people) & 0.1% of the Population in Ceredigion (approximately 80 people). As part of its Strategic Objectives Hywel Dda UHB is committed to the best health and wellbeing for our individuals, families and communities & Transform our communities through collaboration with people, communities and partners. The key objectives to improving the health and wellbeing of Gypsy and Traveller communities in west Wales include:

- Health Professionals and community groups Engaging with Gypsy and Travellers
- Keep community up to date with emerging health messages through different dissemination activities
- Immunisation campaigns within the different gypsy and traveller communities
- Engagement events across Hywel Dda UHB
- Arts and health projects to build relationships and trust

1.3.1 Hywel Dda UHB Arts and Health Programme in Gypsy and Travellers communities

Hywel Dda University Health Board will bring together a cross-sector partnership to build on the evidence that the arts can help to promote health and wellbeing, improve health behaviours and address health inequalities and inequities.

Throughout Autumn 2024, Hywel Dda Arts and Health and Community Development Outreach Teams worked together with Carmarthenshire County Council and 2 commissioned arts partners People Speak Up and Arts4Wellbeing to use the arts to improve relations, build trust and understanding, tackle misinformation and share health messages with the Gypsy and Traveller Communities living in Pembrokeshire and Carmarthenshire.

The project is built on the growing evidence base that the arts have a role to play in tackling health inequalities. A scoping review by the World Health Organisation – What is the evidence on the role of the arts in improving health and wellbeing? (published 2019) highlights

"The arts are powerful tools for health communication: they can be used to engage specific populations through culturally resonant activities; transcend language barriers, appeal to people emotionally and humanise issues around health; embody concepts and demonstrate what individuals can do proactively themselves; and empower individuals and communities through collaborative engagement."

The proposed programme is designed around using the arts to tackle health inequality and is designed around the bespoke needs of the Gypsy and Traveller community in line with our Arts and Health Principle to be Inclusive - Develop creative opportunities that prioritise the most vulnerable and marginalised people in our society, meeting the needs of a diverse population at all stages of life.

The proposed programme will try to:

- Enable the health board to test the potential for arts and health to help tackle health inequality
- Use the arts to build connections and engage in health living conversations and sharing of health messages with the Gypsy and Traveller communities
- Test the potential of using the arts in helping to improve healthy behaviours

2.0 The Service

2.1 Aims of Gypsy, Roma and Traveller Arts – Tackling health inequality through the arts programme

The arts and health team at Hywel Dda UHB plan to run a feasibility project to explore the experience of arts interventions in gypsy and traveller communities to gain evidence and understanding to develop further projects. The arts in health team are committed to developing an ongoing strategy for arts in health and aligning with Hywel Dda health board's strategy in involving the Gypsy and Traveller communities in the Hywel Dda UHB region. The key aims and objectives of the programme include:

- To work together across Health and Arts Sectors to find new ways to tackle intransigent challenges.
- Use the arts to build trust and understanding by tackling misinformation and sharing health messages in a non-intrusive way.
- To test the potential of using the arts to help improve healthy behaviours in isolated communities.
- To use the arts and local arts partners to build connections and engage in healthy living conversations and the sharing of health messages with the Gypsy Roma Traveller community who suffer from a socio-economic disadvantage.

2.2 Programme Outline

This is the first time that a project like this is being tested by the arts and health team at Hywel Dda UHB with the gypsy and Travellers communities. For this first year of the programme the arts and health team in Hywel Dda UHB will organise 2 artist led workshop programmes for the 2 large Gypsy and Traveller sites in Hywel Dda area to build positive relations with Hywel Dda's Community Outreach Team and use the arts to provide a gentle, meaningful and creative model for engagement. The content and design of the workshops for the programme was designed in partnership with the community outreach team alongside the experienced local arts partners with feedback from families within the communities.

The programme has been designed to bring artists and musicians into a community setting working alongside community and healthcare professionals to design activities that suit the needs of the target audience. To deliver a programme of workshops with both Carmarthenshire/Llanelli and Pembrokeshire Gypsy Roma Traveller Communities with two Arts Partners were commissioned to help deliver the programme. These two partners were:

- 1) **People Speak Up:** An organisation based in Llanelli, PeopleSpeakUp is a social, mentalhealth, arts, health and wellbeing charity. They connect communities through storytelling, spoken word, creative writing and participatory arts. They offer workshops, training, events, volunteering and conversations.
- 2) Arts4Wellbeing: is based in Ceredigion. They are an innovative training organisation harnessing creativity to support good mental health, wellbeing, hope and happiness, improving lives and supporting communities.





Both workshop programmes will provide communities to try something new, be creative and explore ideas of self-expression and identity and heritage/belonging. They are designed to be accessible, engaging and meaningful to community members and sympathetic to Gypsy and Traveller traditions and cultures. Hywel Dda healthcare staff take part alongside community members, to share in a creative experience over which trust, and understanding can be built and health messages gently shared.

It is based on the understanding and intelligence that shows that the Gypsy and Traveller community often need bespoke provision, as they do not like to mix with each other, are fearful of settled communities due to discrimination and need lots of support and understanding to attend.

The partnership provides a unique opportunity to further test the power of the arts to help tackle health inequality by providing a safe, inclusive, accessible and meaningful environment for community members and healthcare staff to come together.

2.2.1 Important tasks within the programme

- Work with our partners to ensure that all activities are designed to meet the needs of the Gypsy and Traveller communities ensuring that location, timings, activities, language, cultural considerations, artist recruitment and access needs are built into the planning of the project.
- We will monitor diversity and inclusion within the project by capturing data using Hywel Dda Equality Monitoring Forms.
- We will work closely with the Hywel Dda Community outreach team and the local authority Gypsy and Traveller liaison officers and site managers to build on existing trust and understanding with the community.

2.3 Programme Design

People Speak Up will start building a relationship with the Irish Traveller community at Pen Y Bryn, Llanelli, Carmarthenshire whilst Arts4Wellbeing will build on their existing introduction to the Gypsy community in Monkton, Pembrokeshire following our successful pilot workshop in Summer 2023. Both arts partners will work with Hywel Dda's Community Outreach Team to deliver 6 creative sessions with each community.

Members of each community will be invited to take by the Community Outreach and Council Gypsy and Traveller link workers, building on existing trust and relations already developed.

2.3.1 Pen Y Bryn Site (People Speak Up)

Activities in the Pen Y Bryn site in Llanelli will be led by a traditional storyteller and visual artists and supported by the people speak up creative team. The activities would be based around 6 interactive sessions. Initially, activities will be shaped around sharing and gathering traditional gypsy and traveller stories to create a visual mural on the internal walls of the cabin on the Traveller Site through the exploration of themes of identity and community. Activities will take place on the Gypsy and Traveller sites with support from the Community Outreach Team and Carmarthenshire County Council who manage the Pen Y Bryn site and relations.

The Arts Programme at the Pen-Y-Bryn Gypsy site was designed to facilitate creative engagement with the Gypsy, Roma, and Traveller (GRT) community, fostering trust between the community and healthcare professionals while promoting discussions around well-being. One of the key elements of this programme was the creation of a mural project with children, led by professional artists and supported by health professionals.

The initiative aimed to provide a safe, inclusive space where young participants could engage in structured, creative activities while enabling health professionals to connect with the wider community in a non-intrusive manner. The mural project focused on:

- Encouraging creative self-expression among young participants.
- Fostering a sense of ownership and pride in their environment.
- Providing an informal setting for health professionals to engage with parents and caregivers.

2.3.2 Monkton Site (Arts4Wellbeing)

Activities in Pembrokeshire will be led by Arts4Wellbeing and will build on the success of their pilot arts and health day in Monkton. Arts4Wellbeing will offer jewellery making, enamelling, silk painting and pyrography, culminating in a shared creative project in which the community and staff can create together to a wide variety of people within the community. A loose framework of six welcoming, creative, social, intergenerational, inclusive, participant centred sessions fusing storytelling, group dynamics and creativity. Each session had four primary components:

- A cumulative learning creative process.
- The group dynamics.
- An integration of health professionals and positive health messaging.
- An artist's journal capturing the artists response to the project.

2.3.3 Schedule for the Arts projects for both sites

Arts Partner	Art form	Community?	Site/venue?	Dates of the sessions
People Speak Up	Graffiti and visual art	Irish Traveller community in Llanelli	Pen y Bryn Caravan Park, Bynea, Llanelli SA14 9SQ	Monday 7 th October Monday 14 th October Monday 21 st October Monday 27 th October Friday 1 st November Extra day for photo mural
Arts4Well being	Jewellery, silk painting and glasswork	Gypsy community in Monkton	Dezzas Cabin Monkton Pembroke, Pembroke SA71 4LU	Wednesday 2nd October Wednesday 9th October Wednesday 16th October Wednesday 30th October Wednesday 6th November Wednesday 13th November

2.3.4 Programme Duration

This initial feasibility project for the larger programme of work will took approximately 3-4 months.

3.0 Evaluation

The arts and health team at Hywel Dda UHB are committed to ensuring all the programmes and projects they carry out are evaluated to ensure value and impact. For this purpose, they have commissioned the TriTech Institute and Innovation division (of the Research and Innovation Department, Hywel Dda UHB) were commissioned to deliver an independent evaluation of the arts outreach programme with Gypsy and Traveller communities.

3.1 Evaluation aims and objectives.

The purpose of the evaluation is to build a strong body of evidence and Evaluation Report which will be used to:

- Help to better understand the value and impact of arts and health in these communities
- Explore the barriers and enablers to delivering the provision

3.2 Methodology

Due to the nature of the project initial conversations with the community outreach team involved in delivering and helping to organise this Gypsy and Traveller project, it was mentioned that as this was a first-time project (particularly with one community) that a proportionate approach to the evaluation was required. It was reiterated that it was important to build trust at this stage of the project and that questionnaires or asking too many questions of the community could lead to distrust or refusal to participate. As a response to this a purely qualitative approach was decided upon to perform an initial assessment of the feasibility projects at both sites.

3.2.1 Limitations of the evaluation

Due to the nature of this project and the sensitivities around engaging and building trust within these communities a 'lighter touch' was agreed between the arts and health team, community outreach team and the evaluation team. This does introduce some limitations to the evaluation. No outcome or direct survey work around wellbeing and health would be carried out with the communities. Data would be collected in an informal way for the most part. This would limit any information collected to be based around qualitative feedback from the professionals organising/managing the activities and the communities. This was expected to be the case particularly at the Pen Y Bryn site were it was decided that direct feedback from the community should not be part of the activities, as it was more important to build relationships and trust within this community. Some feedback would be sought from the community at the Monkton site as a level of trust had already been built between them and the community outreach team in Hywel Dda UHB.

3.3 Data collection

A qualitative approach was utilised to meet the aim of the evaluation, with data gathered from a range of sources and based on the delivery of activities, together with observation and reflection. The data collected would vary depending on the project site.

3.3.1 Data collection at the Pen Y Bryn Site

The main form of feedback and data collection from the Pen Y Bryn site project would be through reflections from the staff who took part. This would be delivered through a

combined Staff and artists Focus Group (see appendix 1 for the focus group themes and questions).

3.3.2 Data collection at the Monkton Site

At the Monkton site several data collection and feedback capture activities were planned, these included:

- Combined Staff and artists Focus Group (see appendix 1 for the focus group themes and questions)
- Joint community event where members of the community who took part in the activities could provide feedback (see appendix 2 for the community event themes and questions)
- Staff and Artists would complete a feedback form after each session (see appendix 3: sample of the session feedback form)

3.3.3 Data analysis

Content analysis was conducted on the qualitative data to identify key themes from the focus groups.

4.0 Findings & Discussion

4.1 Pen Y Bryn Site

4.1.1 Overview

The 6 sessions were delivered, the sessions primarily involved the children on the site with approximately 10 (same) children of various ages at each session. At each session the artists worked with the children to explore important themes and challenges in their life and community. The artists also worked with the children in designing and creating a mural on the outside of a cabin to represent what they believed to be a representation of their lives (see Figure 1). This access with the children also enables the outreach team from Hywel Dda to interact with parents and members of the community to share health advice.



Figure 1: Mural created as part of this project

4.1.2 Key findings and impact

4.1.2.1 Community Engagement and Participation

- The high level of engagement from children demonstrated the success of the project in capturing interest and sustaining focus.
- Boys, in particular, showed a noticeable improvement in concentration and behaviour, engaging more deeply in activities over time.
- The presence of a graffiti artist provided an exciting and relevant medium for the children, which enhanced participation.
- The completion of the mural was met with positive feedback from the community, with no reported vandalism or defacement, indicating a strong sense of respect and ownership.

4.1.2.2 Health and Well-being Outcomes

- While parents and caregivers were not directly involved in the creative activities, their children's participation provided a crucial opportunity for health professionals to engage with them in a non-clinical setting.
- Informal discussions took place around key health issues, including:
 - Smoking cessation and its long-term benefits.
 - o Diabetes awareness, including routine health checks.
 - Healthy eating habits and the importance of balanced nutrition.
- One notable success was the community's willingness to engage with healthcare professionals on-site, marking an improvement in accessibility and trust-building efforts.

4.1.2.3 Relationship Building Between the NHS and the GRT Community

- The project helped break down barriers between the health board and the GRT community, fostering mutual understanding and trust.
- Community members demonstrated an increased willingness to discuss health concerns, an essential step toward improving long-term health engagement.
- The initiative has laid the groundwork for future collaborative projects that integrate creative engagement with healthcare messaging.

4.2 Monkton Site

4.2.1 Overview

The 7 sessions were delivered (6 arts sessions and one final evaluation session at the end), the sessions primarily involved adults from the site. The numbers at the session varied between approximately 9 to 16 people (primarily the same number of people) (see figure 2 for graph of attendance). At each session the artists worked with the people to explore important themes and challenges in their life and community. The artists also worked with the people on a wide range of different creative activities (a different one for each session). These different activities included:

- Session 1: Enamelling and Story Jewellery
- Session 2: Story Jewellery, Pyrography and Stone Etching
- Session 3: Pyrography and Needle Felting
- Session 4: Pyrography
- Session 5: Silk Painting
- Session 6: Exhibition, Sharing Artist Journal and Montage of photographs.
- Session 7: Story Jewellery, Pyrography, Needle felting, Silk Painting, Bag making. Artist notebook, Welsh Ladies, Fairies,

Each session was carried out in the same manner. Initially each session began with an open circle to start off on an informal basis, creating a relaxed and comfortable atmosphere. People were made welcomed with tea and biscuits upon arrival to each session. Before an explanation would be given about the different art activities that would be taking place. At each session discussion would take place around health and wellbeing. On the final session an exhibition took place to showcase all the work carried out over the session and to provide the evaluation team a chance to converse with the participants.

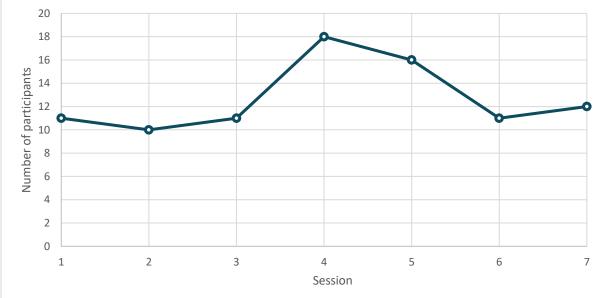


Figure 2: Graph of attendance at the Monkton site at each session

4.2.2 Key findings and impact

At the end of each session the artists and healthcare professionals involved completed a proforma on the activities and peoples responses at each of the sessions (see Appendix 3). On the whole the response was very positive. From these proformas the following themes and feedback were provided:

4.2.2.1 What Worked:

- Each participant in the group had ownership over the group and the activities.
- Positive reflections from participants around having the opportunity to share all their positive experiences of the project with the evaluator. This created an atmosphere of openness, playfulness, camaraderie, confidence, friendship and creative exploration. The format of the sessions has now been embedded and owned by the participants. The atmosphere in the room is incredibly friendly, open and honest. Newcomers are welcomed in instantly and put at ease.

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- Positive reflections from participants around new and different creative activities to try as well as the opportunity to develop their skills even more with familiar and favourite activities.
- Reflections on the open, friendly, genuine welcome and acceptance of all within the group, the format of the day and the activities both new ones and previously experienced.
- The ease and inclusion of a new professional (the evaluator) and the groups openness and enthusiasm to share their experiences of the whole project.
- Positive experiences of the Creative Process leading to the creation of gifts and artefacts that individuals were very proud of.
- Provided healthcare workers the opportunity to spread information and introduce a full and frank conversations about Cancer, GP appointments and Hospital visits. This approach was very well received, such openness and honesty demonstrates the level of trust that has been built up in the group and the familiarity that is being developed with the health care professionals. The shoulder to shoulder conversations, between health professionals and participants whilst engaged in creative activities seems to have really been beneficial in several ways:
 - People said I get an opportunity to put a face to a name.
 - o Individuals have an opportunity to have personal, one on one, conversations.
 - o Professionals roles become part of a more generalised group conversations.
 - There are significantly reduced professional masks / power relationship interactions, it's a human to human interaction.
 - Everyone learns something about the community alongside the opportunity to learn more about healthcare.

4.2.2.2 What Didn't Work:

- It was identified that it was difficult to initially hold together the group with people popping in.
- Competing issues were often raised with the general GRT community frustration of local authority meetings regarding housing sometimes being a point of frustration raised in the sessions.

4.2.2.3 Reflections of the Programme

After the last session (session 7) an email was sent to the team expressing the general positive impact of the programme:

Email feedback from Arts4Wellbeing Artist on Evaluation Workshop (session 7)

It was a super day. (support worker 1) was really surprised that when (they) arrived there was just us and the Gypsy families along with the evaluator all chatting together. (support worker 2) wasn't well, and didn't come until later in the day. (facilitator 2) arrived and couldn't believe it, everyone was so happy, very open and relaxed, a great dynamic. (they) were taken aback because the community don't usually take to new people without the

support of either (support worker 1) or (support worker 2) in the room. This in itself is a testament to how well the project has worked in terms of enabling the development of trusting relationships and open dialogue with new people.

We received a great welcome. The participants arrived early, we had hugs and were welcomed like old friends. They welcomed (Evaluator 1) and everyone gave effusive feedback to her in terms of the project. (Evaluator 1) was only able to interview three (one couple and two others) as up until the afternoon (they) were busy chatting with people around the table and getting creative with everyone.

Having the artists journal to hand was a great opportunity to share the work that we've done with (Evaluator 1). Everyone in the group went through the journal in detail, they loved it, and were happy with the texts and photos. (one participant) asked if they could have a copy of it. Having the journal meant that the Gypsy families could share it with the (Evaluator 1) and (they) loved the way it showed the journey of creativity and story telling. (Evaluator 1) loved the way it showed the journey of creativity and story sharing, how it demonstrated the health conversations happening, with the opportunity to share health messages with the community in a human to human way around the table. Absolutely relaxed shoulder to shoulder involved creative activities.

The evaluator said that it was so valuable for (them) to be able to see the journey of the artists journal, giving (them) the opportunity to experience the journey that everyone, including health workers, Gypsy Community and us artists, have been on. The photos and the notes combined with the narrative around building bridges, social model, value of Arts and Health in project supporting everyone to relax and have meaningful conversations.

Some examples of the artists journal presented at Session 7 (see Figure 3 & 4). Figure 3: Images of work carried out at the Monkton workshops and sessions.





Figure 4: Images of work carried out at the Monkton workshops and sessions.

4.2.3 Workshop Qualitative Analysis of the Monkton site

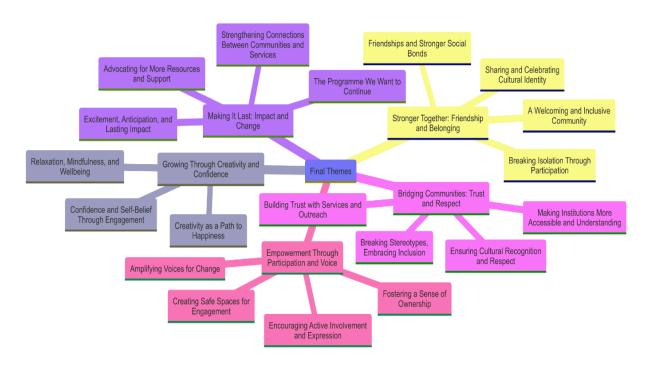
In addition to the A Reflexive Thematic Analysis was carried out on interview recording transcripts, conducted with six individuals from the Gypsy & Traveller Community who attended the follow up Arts & Health Workshop In Monkton, Pembrokeshire.

The transcripts were analysed according to Braun & Clarke's (2022) the six steps of reflexive thematic analysis involve: familiarizing yourself with the data, generating initial codes, constructing themes, reviewing potential themes, defining and naming themes, and finally producing a report. Following these steps precisely allows identification of key aspects to evaluate the effectiveness of this Arts & Health Programme in reducing health inequalities. These findings can subsequently contribute to wider learning across the Arts and Health sector in Wales and contribute to the growing evidence base that shows that the arts have the potential to tackle some of the biggest intransigent problems that the NHS face. We identified five final themes:

- 1) Growing Through Creativity and Confidence
- 2) Stronger Together: Friendship and Belonging
- 3) Making It Last: Impact and Change
- 4) Bridging Communities: Trust and Respect

5) Empowerment Through Participation and Voice.

(Figure 1. *Mind Map highlighting the identified five final themes and associated sub-themes from the Arts & Health Workshop*)



These five final themes are discussed in detail, below.

1. Growing Through Creativity and Confidence

Creativity is a powerful tool for self-expression, personal development, and emotional wellbeing. This theme highlights how engaging in creative activities, such as art and hands-on crafts, can lead to increased happiness, relaxation, and confidence.

("I never realised how much I enjoyed art until this programme. It helped me relax and feel proud of what I created.")

Many participants found that creative expression provided a safe and enjoyable way to explore their emotions, reduce stress, and cultivate mindfulness. Artistic activities fostered a sense of accomplishment, allowing individuals to develop new skills and gain pride in their work. Beyond creativity itself, the programme encouraged personal growth by boosting self-esteem and self-belief. Participants who initially lacked confidence in their abilities became more open to experimenting and trying new things. Through this process, they experienced a shift in self-perception, recognising their potential and capabilities.

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("Engaging in creative activities gave me a sense of purpose. I felt happier and more confident in myself each
week.")
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The programme also provided a platform for self-reflection, allowing individuals to see their progress over time and acknowledge their achievements. By engaging in creativity regularly, participants not only found joy but also developed resilience, problem-solving skills, and a

greater appreciation for their own talents. Ultimately, this theme illustrates how creativity fosters both emotional and psychological growth, empowering individuals to embrace new challenges, celebrate personal successes, and develop a stronger sense of self-confidence that extends beyond the programme.

2. Stronger Together: Friendship and Belonging

Human connection and social belonging are essential for overall wellbeing. This theme emphasises how the programme provided a welcoming and inclusive environment where individuals could form meaningful friendships, strengthen social bonds, and overcome feelings of isolation. Many participants expressed that the programme helped them connect with others in a way they had not experienced before, particularly those who had previously felt socially excluded.

(Meeting new people and making friends was the best part. It felt like a safe space where I truly belonged.")

Engaging in shared activities created a sense of community, where people from different backgrounds could come together in a safe and supportive space. The programme fostered trust, mutual respect, and a genuine sense of belonging, allowing participants to open up, share personal experiences, and build relationships that extended beyond the sessions. The inclusive atmosphere encouraged individuals to interact with new people, break out of their comfort zones, and challenge social anxieties. Many participants felt that they were part of something larger than themselves, which reinforced their sense of identity and belonging.

("I used to feel isolated, but coming here each week helped me connect with others and feel part of something bigger.")

Additionally, cultural sharing played a significant role, as individuals were able to express and celebrate their cultural identities without fear of judgement. By creating a space where people felt valued, respected, and supported, the programme significantly contributed to strengthening social ties and fostering lasting friendships.

3. Making It Last: Impact and Change

One of the most critical aspects of any community-based programme is its sustainability and long-term impact. This theme explores how participants valued the programme and expressed a strong desire for it to continue. Many individuals found that their engagement in the sessions provided a consistent source of positivity, something they looked forward to each week. The programme was not just about participation in the moment—it had a lasting effect, shaping individuals' routines, social interactions, and emotional wellbeing. Participants noted that the absence of the programme left a noticeable gap, reinforcing its importance in their lives.

("This programme became a part of my routine. I looked forward to it every week and felt a real loss when it ended.)

The excitement and anticipation for each session contributed to long-term retention, demonstrating the programme's success in meeting participants' needs. Many individuals

also expressed a strong desire for more resources and funding to support the programme's continuation, recognising its potential to benefit even more people. Beyond the individual level, the programme's impact extended to the wider community, as participants shared their experiences and encouraged others to join.

("I wish there were more sessions. It made such a difference in my life, and I know it could help so many others too.")

By advocating for ongoing support and sustainability, this theme highlights the importance of ensuring that community-driven initiatives are not just temporary but have the funding and structure needed to create meaningful, long-lasting change.

4. Bridging Communities: Trust and Respect

Trust and respect are fundamental to positive relationships between communities and institutions. This theme focuses on how the programme played a crucial role in strengthening trust between participants and service providers, particularly health and outreach teams. Many individuals who previously had scepticism or negative experiences with institutions found that the programme changed their perceptions. The respectful, inclusive, and non-judgemental environment created a space where participants felt valued and heard, rather than being treated as mere numbers in a system.

("I used to be sceptical about services, but the people here really listened and treated us with respect.")

Through meaningful engagement, the programme allowed service providers to interact with communities in a more personal and approachable way, fostering mutual understanding. By actively listening to participants and respecting their cultural identities, the outreach teamsbuilt rapport and demonstrated genuine interest in the wellbeing of those involved. Participants felt that their voices were being acknowledged, and many reported an increased willingness to engage with services outside of the programme.

("For the first time, I felt that professionals genuinely cared about our experiences and wanted to understand our needs.")

Additionally, the initiative helped to challenge stereotypes and misconceptions, promoting a more inclusive and culturally aware approach to service provision. Ultimately, this theme highlights the importance of building trust between communities and institutions through respectful, authentic, and culturally sensitive engagement, ensuring that services are more accessible, supportive, and effective.

5. Empowerment Through Participation and Voice

Empowerment is a key factor in fostering self-agency, confidence, and a sense of ownership over one's experiences. This theme explores how the programme encouraged individuals to take an active role in their own development, giving them a platform to express themselves and be heard. Many participants felt that their opinions and contributions were genuinely valued, leading to increased self-confidence and motivation to engage in future opportunities. The sessions provided a safe space for open discussion, where individuals could share their experiences, learn from one another, and support each other's growth.

("This was the first time I felt like my voice mattered. Being part of this group gave me the confidence to speak up.")

By fostering an environment of inclusivity and respect, the programme helped individuals feel more in control of their own narratives. Additionally, participation in creative and social activities allowed individuals to develop problem-solving skills, resilience, and a sense of personal responsibility. Many participants expressed that their involvement in the programme made them feel more empowered to make decisions about their health, wellbeing, and social interactions.

("I learned to express myself in ways I never had before. It made me realise I have something valuable to contribute")

The programme also encouraged individuals to take initiative, explore new possibilities, and use their voices to advocate for themselves and their communities. By providing a supportive environment where people felt heard and respected, this theme highlights how active participation fosters confidence, self-expression, and long-term empowerment.

4.3 Artists and Healthcare workers feedback: Focus Group Qualitative Analysis

A further Reflexive Thematic Analysis was carried out on a single interview recording transcript, conducted with Community Outreach Officers, and Art Group Facilitators from the Monkton, Pembrokeshire, and Pen-y-Bryn, Llanelli sites who attended the follow up Arts & Health Staff Focus Group Meeting. The transcripts were analysed according to Braun & Clarke's (2022) the six steps of reflexive thematic analysis previously described. We identified five final themes:

- 1) Arts as a Catalyst for Building Trust and Relationships
- 2) Empowerment and Confidence through Creative Participation
- 3) Arts as a Tool for Mental Well-being and Social Connection
- 4) Arts as a Medium for Health Communication and Behavioural Change
- 5) Sustaining Artistic Engagement and Overcoming Challenges



Figure 2) Mind Map highlighting the identified five final themes and associated sub-themes from the Arts & Health Staff Focus Group)

interventions, which may feel formal or intimidating, arts-based initiatives encourage natural conversations and mutual understanding.

("The conversations then were starting to happen. I know one of the nurses had a mum come and have a chat with her. I'm not sure if that would have happened if the health board were just there.")

In the case of Gypsy and Traveller communities, long-standing mistrust of health services can be a barrier to engagement. However, participation in arts activities helps break down these barriers, offering a collaborative environment where health professionals and community members build relationships based on shared experiences rather than hierarchical roles. This approach challenges stereotypes, allowing professionals to see the community's rich cultural heritage and lived realities, while also enabling community members to see healthcare workers as approachable individuals rather than distant authorities.

("One of the women said to me, 'See, look, they can see we're not so bad.' And I think that was very telling that a lot of people have a barrier, and they think in practice, they've got experience of not being treated particularly well in the past.")

Over time, creative engagement fosters long-term relationships that extend beyond the project itself, improving accessibility and trust in healthcare services. The arts offer an effective way to bridge the gap between public health and communities that have historically been excluded or underserved, creating a foundation for meaningful engagement that can lead to better health outcomes and more inclusive service delivery.

2. Empowerment and Confidence through Creative Participation

Engaging in artistic expression has a profound impact on personal empowerment and self-confidence. Creativity allows individuals to take control of their learning, develop new skills, and gain a sense of accomplishment. For many Gypsy and Traveller participants, this project provided a rare opportunity to engage in structured creative activities, often uncovering hidden talents or rediscovering artistic interests from childhood.

("They just grew and grew in confidence. They were encouraged by what they were achieving in the process, and they were relaxing more. They just grew as human beings and grew this creative side to them that some of them didn't think they had.")

Encouraging self-expression through the arts gives individuals the freedom to share personal thoughts, emotions, and experiences in a way that feels safe and validating. Additionally, by participating in collaborative creative projects, individuals develop decision-making skills, autonomy, and a greater sense of agency over their own lives. The inclusive nature of arts-based activities ensures that all participants, regardless of ability or prior experience, feel valued and capable. This is particularly important for communities that may face social exclusion or systemic discrimination, as it provides a space where their voices are heard, and their contributions recognised.

("We had one of the elder participants who found her creativity for the first time. And I think that was true for all of them. Some of them, the younger ones in particular, had an idea that they might have talent, but they got a chance to explore that further and demonstrate it.")

By building confidence through artistic engagement, participants are more likely to seek out further opportunities for learning, self-development, and social connection, creating a lasting positive impact on their personal growth and well-being.

3. Arts as a Tool for Mental Well-being and Social Connection

Creative participation provides significant benefits for mental well-being, offering a sense of calm, emotional relief, and connection with others. Artistic activities allow individuals to express emotions that may be difficult to articulate through words, providing a therapeutic outlet for stress and anxiety. This is particularly valuable for Gypsy and Traveller communities, where mental health discussions may not always be openly addressed due to cultural stigmas. By creating a safe and inclusive space for artistic engagement, participants can experience emotional release, improved mood, and a sense of inner peace.

("One lady had a brain tumour and was waiting for her operation. Just to be able to come along, relax, take her mind off things, and speak to professionals—OK, not doctors or surgeons, but people who could support her was amazing.")

In addition to individual well-being, the arts also foster social bonds and strengthen relationships within families and communities. Parents and children engaging in creative activities together experience enhanced connection, while group-based projects build a sense of belonging and collective achievement. For marginalised communities, where social isolation is a common issue, participation in arts-based initiatives can be transformative, offering a meaningful way to connect with others and combat loneliness.

("It was lovely to see just the fact that he was able to sit, relax, and unwind. Every week when we asked him how he felt by the end, it was always a 10. He loved it.")

Through creative engagement, participants not only enhance their mental well-being but also develop a sense of community, leading to stronger social networks and increased resilience in facing life's challenges.

4. Arts as a Medium for Health Communication and Behavioural Change

The arts offer an innovative and accessible way to share health information, making conversations about well-being more natural and less intimidating. Traditional public health messaging often relies on formal settings, which can be unappealing or even alienating for marginalised communities. By embedding health discussions within creative activities, individuals can engage with important health topics in an informal and interactive way.

("All of the health-specific conversations were done in a relaxed, shoulder-to-shoulder setting while doing creative work, which took away the formal feeling of professionals 'doing to' others.")

In this project, smoking cessation, healthy eating, and mental well-being were discussed naturally as part of artistic sessions, allowing participants to absorb information in a relaxed setting. This method reduces stigma, as conversations are not framed as lectures but rather as shared discussions that empower individuals to make informed choices. Many participants found that the arts provided a safe space to ask health-related questions they might otherwise avoid, leading to increased awareness and confidence in seeking healthcare support.

("A woman with a brain tumour said, 'I don't want to give up smoking, but I know I've got to.' The project gave her access to the support she needed, and by the time she went into hospital, she was smoke-free because of the nicotine replacement she got through the project.")

Additionally, the positive emotional impact of creative engagement itself contributes to better health behaviours, as participants feel more motivated to take care of their well-being. The arts act as a bridge between healthcare services and communities that may otherwise disengage, helping to shift behaviours in a supportive and culturally sensitive manner.

5. Sustaining Artistic Engagement and Overcoming Challenges

For arts-based health initiatives to have a lasting impact, sustainability and accessibility must be prioritised. One of the key challenges faced in this project was ensuring continued engagement beyond the structured sessions. Many participants expressed a desire for ongoing creative opportunities, yet logistical barriers such as transport, scheduling, and funding present significant obstacles.

("The arts programme was fantastic, but they didn't want it to end. There was a real hunger for more, but the challenge is how to sustain it and integrate it into their everyday lives.")

Without sustained investment, the benefits of creative engagement risk being short-lived, making it essential to develop long-term strategies for community involvement. One effective approach is to integrate arts into local services, allowing creative health initiatives to be embedded within everyday community spaces. Another consideration is ensuring that projects are culturally appropriate and led by trusted facilitators who understand the needs of the community.

("One of the biggest challenges was that certain community members don't necessarily get on with others. It was clear that some people wouldn't attend because of who else was in the room, which affected participation.")

Additionally, participants must be supported in taking ownership of their creative learning, enabling them to continue artistic practices independently. Celebrating cultural identity through art also plays a crucial role in maintaining engagement, as it ensures that creative expression remains meaningful and relevant. Overcoming challenges requires collaboration between health boards, community leaders, and funding bodies to ensure that the arts remain a sustainable and impactful tool for health and well-being in marginalised communities.

5 Conclusions

The Arts Programme at the Pen-Y-Bryn site and Monkton site has proven to be an effective tool for engaging the GRT community in a way that is culturally sensitive and accessible. The work carried out at both sites has successfully fostered creativity, encouraged youth participation, and facilitated meaningful conversations between community members and healthcare professionals. This project demonstrates the potential of arts-based programmes as an effective engagement strategy within marginalised communities, supporting NHS objectives in health promotion, preventative care, and community integration. Most importantly this project has provided a way of building trust and relationships within these communities.

It is important to consider each of the sites differently as they faced sometimes different challenges.

5.1 Pen Y Bryn

At the Pen-Y-Bryn site the project highlighted the ongoing difficulty in engaging adult community members in structured arts-based activities, with many parents using the sessions as an opportunity to complete household tasks rather than participate. Despite this whilst direct involvement from parents was limited, the secondary impact of facilitating health discussions through their children's participation was a positive outcome. In future it would be worthwhile considering running dual sessions to get parent and children more engaged together. That being said there were many positives.

A key positive was the high level of engagement and positivity from the community. The end result being that a relationship has now been built between all the partners involved (GRT community at Pen-Y-Bryn, Art providers and Health and social care providers). This project has helped to breakdown barriers and has built trust which in turn has meant that healthcare professionals have been provided an opportunity to talk to people in the GRT community and provide information and support were needed, albeit in an informal unstructured manner. Furthermore, a noticeable change has been seen in the community with people demonstrating and increased willingness to discuss health concerns, an essential step toward improving long-term health engagement.

5.1 Monkton

At the Monkton site the project has proven to be very successful has benefitted from excellent attendance and engagement at each of the sessions. The key successes being that participants felt they had ownership of the sessions and that they could be open and honest. Fundamentally the sessions were a great vehicle to build trust between the GRT community at Monkton and the artists/healthcare professionals. The different and variety of arts presented at the sessions was seen as a positive, with people being able to try new things and be challenged. The discussions with the participants from the Monkton site identified several key themes.

Participants identified that the sessions empowered them, **Grow Through Creativity**, where they had a safe and enjoyable way to explore their emotions, reduce stress, and cultivate mindfulness. The programme encouraged personal growth by boosting self-esteem and self-belief, allowing individuals to see their progress over time and acknowledge their achievements. By engaging in creativity regularly, participants not only found joy but also developed resilience, problem-solving skills, and a greater appreciation for their own talents. In addition, the programme helped to **Empower** people and give them a **Voice**. The programme encouraged individuals to take an active role in their own development, giving them a platform to express themselves and be heard. Many participants felt that their opinions and contributions were genuinely valued, leading to increased self-confidence and motivation to engage in future opportunities. The sessions provided a safe space for open discussion, where individuals could share their experiences, learn from one another, and support each other's growth.

Participants also found that due to the open and supportive nature of the sessions they were able to grow Stronger **Together** building **Friendship and Belonging.** Many participants expressed that the programme helped them connect with others in a way they had not experienced before, particularly those who had previously felt socially excluded. The programme fostered trust, mutual respect, and a genuine sense of belonging. Additionally, cultural sharing played a significant role, as individuals were able to express and celebrate their cultural identities without fear of judgement. By creating a space where people felt valued, respected, and supported, the programme significantly contributed to strengthening social ties and fostering lasting friendships.

One important theme and major concern for all participants was **Making It Last** and showing an **Impact and Change.** Many individuals found that their engagement in the sessions provided a consistent source of positivity, something they looked forward to each week. The programme was not just about participation in the moment—it had a lasting effect, shaping individuals' routines, social interactions, and emotional wellbeing. Participants noted that the absence of the programme left a noticeable gap, reinforcing its importance in their lives. Participants reiterated that the provision should not just be temporary but have the funding and structure needed to create meaningful, long-lasting change.

In addition, the participants agreed that the programme had helped to **Bridge Gaps** and build **Trust and Respect.** The members of the GRT community that took part agreed that the programme has helped strengthen trust between them and service providers, particularly health and outreach teams. Many individuals who previously had scepticism or negative experiences with institutions found that the programme changed their perceptions. The respectful, inclusive, and non-judgemental environment created a space where participants felt valued and heard, rather than being treated as mere numbers in a system. Additionally, the initiative helped to challenge stereotypes and misconceptions, promoting a more inclusive and culturally aware approach to service provision.

5.3 Artists, Healthcare professionals and Support teams

In addition to the feedback from the participants of the GRT communities in Pen-Y-Bryn and Monkton the evaluation has also explored the reflections of the artists, support teams and healthcare professionals involved. A key feature of this pilot programme has been its ability to act as a **Catalyst for Building Trust and Relationships.** It is well described that there is a long-standing mistrust of health services by the GRT communities across the UK which can be a barrier to engagement. The success of this programme has been to challenge that preconception, and it has helped to break down these barriers, offering a collaborative environment where health professionals and community members build relationships based on shared experiences rather than hierarchical roles. It is hoped that following this successful pilot future programmes like these can be embedded to further develop these relationships, building towards a more inclusive environment and an improvement in health outcomes for these populations.

One of the key positives identified by the arts and health professionals is that the programme has helped to **Empower** people and build **Confidence through Creative Participation.** The programme has provided people in the GRT community at Monkton an opportunity to engage in structured creative activities, often uncovering hidden talents or rediscovering artistic interests from childhood. The activities and environment at the sessions encouraged people to share personal thoughts, emotions, and experiences in a way that feels safe and validating. The inclusive nature of arts-based activities ensured that all participants, regardless of ability or prior experience, felt valued and capable. In addition, the team facilitating the programme felt the sessions and the art activities were a useful tool for helping with **Mental Well-being and Social Connection.**

The key goal of the this programme was to help engage with GRT communities and provide an opportunity to engage and discuss health with them. The teams delivering the programme have agreed that at both sites **Art** has proven to be an effective **Medium for Health Communication and Behavioural Change**. By embedding health discussions within the creative activities, it was proved easier to engage with important health topics in an informal and interactive way. In this project, smoking cessation, healthy eating, and mental well-being were discussed naturally as part of artistic sessions, allowing participants to absorb information in a relaxed setting. Health professional found that people were able to ask and health-related questions they might otherwise avoid, leading to increased awareness and confidence in seeking healthcare support.

major concerns raised by all the artists, support staff and healthcare professionals involved in the programme were around the ability to **sustain engagement** and to **continue the provision**. One of the key challenges faced by this project is ensuring continued engagement beyond the structured sessions. Many participants expressed a desire for ongoing creative opportunities, yet logistical barriers such as transport, scheduling, and funding present significant obstacles. Without sustained investment, the benefits of creative engagement risk being short-lived, making it essential to develop long-term strategies for community involvement. One effective approach is to integrate arts into local services, allowing creative health initiatives to be embedded within everyday community spaces. Another consideration is ensuring that projects are culturally appropriate and led by trusted facilitators who understand the needs of the community.

6 Recommendations

Recommendation 1: Increased awareness, training and focus on data collection.

A focus on ensuring complete datasets for evaluation data are collected e.g. For future seasons it could be beneficial if all participants are encouraged to complete a feedback form. This is also the case for staff feedback forms from all sites to get a complete picture of the effectiveness of the programme and a way to standardise and quantify the impact of the sessions.

Recommendation 2: Expansion of the provision being offered

Expansion of Arts-Based Initiatives: Given the project's success, additional arts-led engagement should be explored for both children and adults expanding to other groups and wider engagement within the communities. Future projects should continue to consider the dynamics and the needs of each community separately. For some sites (Pen Y Bryn) a dual approach, providing parallel creative activities for children and structured engagement opportunities for adults to enhance overall impact.

Recommendation 3: Increased frequency of sessions

One final recommendation provided from staff was a request to increase the frequency of the interventions, as some staff and patients felt there was a long wait between sessions.

Recommendation 4: Structured Health Messaging

Whilst the ability of healthcare professionals and teams to broach and integrate health messaging in the sessions was seen as a positive, this was generally done on an ad hoc basis. In future more integrated health education components should be embedded within creative sessions to reinforce key public health messages. It is key that this is properly designed and considered in advance of the sessions beginning.

Recommendation 5: Long-Term Community Engagement:

To build on the success of this pilot work it is important to act quickly, and a continued effort is maintained to build trust with the GRT community through regular drop-in sessions and culturally relevant engagement strategies should be prioritised.

Appendix 1

Focus Group Questions for Health, support and art providers

1. How do you think the programme was received within the GRT communities? What do you think worked well/was received well? What didn't work well/wasn't received well?

2. How would you describe your overall experience of the programme? Were there specific elements that felt particularly valuable or impactful? If so, what were they and why?

3. What did participation in the programme mean to you personally? What did you like most about it, and why?

4. Were you able to engage the GRT communities around health-related issues? If so what was discussed? Do you have any examples you could share?

4. Did you experience any challenges or barriers while delivering the programme? If so, can you share more about them?

5.Is there anything you would change? And what are the biggest challenges moving forward?

Appendix 2

Focus Group Questions for Participants

- 1. What activities or moments during the programme made you feel most engaged or absorbed in what you were doing?
- 2. Did any part of the programme make you feel a sense of accomplishment or pride in yourself? If so, what was it?
- 3. Were there moments in the programme that brought you feelings of enjoyment, satisfaction, or inspiration? Can you share an example?
- 4. Did participating in the programme help you feel calmer or more at ease? If so, can you describe how?
- 5. How would you describe your overall experience of taking part in the programme? Were there specific elements or activities that felt particularly valuable or impactful to you? If so, what were they and why?
- 6. What did participation in the programme mean to you personally? What did you like most about it, and why?
- 7. Did you experience any challenges while taking part in the programme? If so, can you share more about them?
- 8. Is there anything you would change?

Appendix 3

Hywel Dda Gypsy Roma Traveller Project Feedback Template.

Date			Session		
Venue	Dezza's Cabin Monkton Pembr	okeshire		Time	
Project	 For the preparation and provision of 6 creative workshop days for the Gypsy community in Monkton, Pembroke to help the health board to improve relations, build trust and understanding, tackle misinformation and share health messages with the Gypsy and Traveller Communities living in Pembrokeshire as outlined in our agreed application for funding and artist proposal. In 2023 A4W facilitated a creative taster day providing an array of creative activities to suit a range of ages and interests. For this project, we worked for six weeks, one day a week, engaging with families from the gypsy community and Health professionals. We had an initial concern that five hours concentrating might be too much for people, so we introduced a framework of creativity and storytelling which would lay the ground work for subsequent conversations about health and wellbeing. 				
Arts in health sessions					

A4W Staff				
Hywel Dda Staff				
Attendance:				
Opening Circle				

Conversation

Creative Activity am

SHARED LUNCH

Creative Activity pm

Closing Circle					
Name	How has it been?	Because	Best Bit?		

Staff Feedback

What worked?

Didn't work?

Session Summation



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