

The Value of Museum Object Handling in Healthcare

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Many regard museum objects as special, being seen as symbols of history, nature, society, identity and relationship. Connecting with museum objects triggers memories and emotions; people discover something new, feel inspired, deal with stress and generally make sense of their lives¹. Researchers at University College London (UCL) have been studying the value of museum object handling in healthcare with hospital patients and nursing home residents; people normally excluded from museum visits by virtue of their health status or age. The project called 'Heritage in Hospitals', funded by the Arts & Humanities Research Council (AHRC), aimed to enhance wellbeing and happiness through a therapeutic intervention consisting of touching and discussing museum objects². Objects selected from UCL Museum collections, varying in their tactile, visual and kinaesthetic properties included archaeological artefacts, etchings and printing plates, fossils, minerals and natural history specimens.

In sessions lasting 30 to 40 minutes, participants were encouraged to explore the sensory and factual aspects of up to six objects prompted by questions such as 'What does it feel like?'; 'What do you find interesting about it?'; 'Does it remind you of anything?'; 'How does it make you feel?' Around 300 people from UCL Hospitals (acute and elderly care, neurological rehabilitation in-patients, oncology and surgical wards), Oxford Centre for Enablement (neurological rehabilitation out-patients), Prospect Park Hospital, (psychiatric wards) and residential homes in Islington took part in the programme. Clinically validated scales^{3,4} were used to compare measures of psychological wellbeing and subjective happiness from before and after the handling sessions. Participants showed significant improvements in wellbeing and happiness⁵ and were able to use museum objects as a channel to explore feelings and convey emotions about their health that might otherwise have been difficult to express⁶.

¹ H.J. Chatterjee & G. Noble, *Museums, Health and Wellbeing*. Farnham: Ashgate. 2013.

² <http://www.ucl.ac.uk/museums/research/touch/>

³ D. Watson, L.A. Clark, & A. Tellegen, Development and validation of brief measures of positive and negative affect: The PANAS scales. *Journal of Personality and Social Psychology*, 54(6), 1988, pp.1063–1070.

⁴ EuroQol Group, EuroQol: A new facility for the measurement of health-related quality of life. *Health Policy*, 16(3), 1990, pp.199–208.

⁵ L.J. Thomson, E.E. Ander, U. Menon, A. Lanceley & H.J. Chatterjee, Enhancing cancer patient wellbeing with a non-pharmacological heritage-focused intervention. *Journal of Pain and Symptom Management*. 44(5), 2012, pp.731–740. <http://dx.doi.org/10.1016/j.jpainsymman>.

⁶ A. Lanceley, G. Noble, M. Johnson, N. Balogun, H.J. Chatterjee & U. Menon, U, Investigating the therapeutic potential of a heritage-object focused intervention: A qualitative study. *Journal of Health Psychology*. 17(6), 2012, pp. 809–820.

Follow-on projects from 'Heritage in Hospitals' included a series of workshops, a museum-focused measure and a volunteer training programme. Three AHRC-funded 'Museums: Health and Wellbeing' workshops were held in London, Manchester and Newcastle-upon-Tyne that revealed the need for generic measures of wellbeing for museums activities and appropriate volunteer training programmes. The AHRC funded the development of the UCL Museum Wellbeing Measures Toolkit² that was trialled and validated with older adults and people with moderate to severe dementia taking part in museum activities and where existing evaluation scales might have been challenging. Over thirty museums and healthcare institutions from across the UK took part in the measures project. A 'Your Heritage' grant from the Heritage Lottery Fund has been used to train over 60 museum and hospital volunteers in best practices with museum object handling sessions in teenage cancer wards (Fig. 1), day centres and care homes (Fig. 2). An exhibition and volunteer training manual² were two of the outputs from this programme.



Figure 1. Participant in teenage cancer ward



Figure 2. Participant in residential care home