Applied and Social Anthropology, Arts and Health

Introduction: Cross-border Interventions

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I am pleased to present five articles in this special issue of *Anthropology in Action*. They show a lively, challenging and engaged set of interventions that cross social and applied anthropology boundaries, doing so through combined arts health practices. That many of them take place in Northern Ireland and are propelled by anthropology graduates is an additional boon to a challenging and economically deprived part of the U.K. Three – Raw, McCaffery, Zeindlinger – were originally presented at the Arts Care 21st anniversary conference held in Belfast, ‘Sustainable Creativity in Healthcare’, May 2012. They represent work by publicly engaged anthropologists, a number living, working and practising in Northern Ireland. Other presenters from the conference could not join us but were also anthropologists practising anthropologically informed community-relations work in Northern Ireland on deprived and segregated estates (Emma Graham) and in creative dance choreography with special needs and third-age performers (Lauren Guyer). Not so ‘half-baked’ applied anthropology, to challenge Lucy Mair’s (1969: 8) original castigation of such intervention work.

Arts Care is Northern Ireland’s leading arts in health organisation, a national charity bringing the arts to health environments by placing visual, performance and musician artists in hospital settings, applying the artists-in-residence model but on a permanent basis. They also have a team of clown doctors attending across the province. This is a participatory approach where professional artists teach and engage the arts in patients to develop their skills and mount shows, exhibitions and produce professional-quality artwork for the community. Several patients have gone on to become professional artists once they left hospital. The conference in 2012 celebrated their twenty-first birthday of delivering high-quality, challenging, stimulating and sustainable arts across all of Northern Ireland. It was a celebration of their work and practice, an evaluation of the impor-

tance of creativity in healthcare settings and a call for the expansion of their practices to internationalise a highly successful structure. In their respective ways, each of these articles touches upon issues and topics that featured in the conference: therapeutic interventions, creativity and its sustainability, art and affirmation, dealing with disability, and what unites such disparate practices and diverse practitioners.

In the first article in this collection, Amelia Seifert reviews the role of eco-therapy as a public health intervention for alcohol problems in Northern Ireland. There, the drinking culture has been under the influence of the Troubles, hitting Catholics more than Protestants and giving rise to a host of associated mental and physical problems. Seifert et al. (2011) assessed the efficacy of forty-seven eco-therapy interventions in Northern Ireland and in this article Seifert goes on to show us the lack of integrity between nature, culture and mental health distinctions in farm, community garden and animal-assisted therapy venues. These places avoid the stigma of the ‘overt mental health intervention’. They provide calm space – non-human environments – in which to recoup or rehabilitate away from negative influences or peer-pressure: a Good Life environment for better public health care, ‘Green Care’ is the prescription. The intentions behind this review are to call for a more formal exploration and evaluation of these interventions, and to place anthropological practice firmly at the heart of such worthy endeavours.

In the second article in this special issue, arts health anthropologist Anni Raw analyses community-based participatory arts in two ethnographic locations (Northern England and Mexico City) to look for commensurability between practitioners. She suggests that they work a practice of liminality within an overall frame of secular ritual. It is possible, then, to build a generalisable participatory arts methodology out of her different ethnographic examples: visual artists; drama, story and performance specialists; mu-

sicians; dancers; writers all pull together their work to blend a 'practice assemblage' – akin to an anthropological *bricolage* – an ecologically balanced formula that builds a sense of specialness in the target population. Raw analyses this practice and shows an assemblage of six interacting elements: commitment, intuition, relational and spatial awareness (in the sense of establishing a safe space in which to practice), ethical practice and the transformative figuring of creativity. These elements are all also evident in the Arts Care practice, and were sincere buzzwords of the conference. They constitute the kinetics of the transforming nature of the work. Building and retaining the momentum of this 'movement' for the future is of central importance.

Elizabeth Zeindlinger, social anthropologist and former Arts Care dancer-in-residence, continues in the third article by reflecting on the importance of dance improvisation in engaging and working with people with dementia. She found that her creative movement sessions are an excellent way of enhancing healthcare in complex situations. Nonverbal communication is able to access directly the often withdrawn or 'lost' patient, to promote body awareness, unlock self-esteem, provide validation, activate memory and stave off identity loss. The dance is not just about comforting, soothing and relaxing patients. Her technique of contact improvisation, DanceAbility, aims to foster a kinaesthetic empathy with her client group. With certain members she found herself able to reflect back identity to help dementia sufferers to ret(r)ain themselves. In sum, dance is a powerful and under-used cross-cultural medium for communication with dementia sufferers.

Communication is developed as a theme in the following penultimate article on applied social circus projects by anthropologist Nick McCaffery. McCaffery evaluates how circus arts from juggling and acrobatics to clowning can be harnessed as a method of social intervention aimed at specific population groups from at-risk youth to adults with learning disabilities. In the latter group, he is surprised to find his anthropological skills of working in the grey areas of life, with liminality, complexity and an ethnographic eye for the holistic and particularistic help him to see the value of their work. Social circus arts, to take but one case, are of benefit to young adults on the Autism Spectrum Disorder scale: increasing eye contact, teaching clowning to raise levels of not just confidence but also trust, timing, emotional awareness of and with others, and even speech patterns and sleep rhythms. Like Seifert, McCaffery's article shows a need to develop such successful intervention work in

the community, to raise public awareness of these successful interventions, and to keep an eye on the evaluation of their work to justify the public investment in these practices.

In the last and fifth article in this special issue, Andrea Stöckl challenges sociocultural, medical and even affirmative models of disability. She presses an applied phenomenological approach, one that makes use of anthropologist Alfred Gell's theories on art, agency and mobilisation – of art as a trap, ensnaring the viewer as the artwork communicates and causes sensations. Here, the disability arts movement is shown to be not just a therapeutic activity for people who suffer, but a powerful tool of communication for describing the human condition, and a way of forcing a re-conceptualisation of disability and impairment. An example of this is the full body portrait painted by Raabe-Webber with the sitters sitting in an open and public space so that they can hold conversations with the public. The work – the process and the product – is awe inspiring, going beyond self-affirmation and any jaded vision of disability as tragedy to call for an 'equal but different' (Swain and French 2000: 578) consideration.

As a collection, these papers highlight successful intervention work in the community. They show how anthropology as a discipline and anthropologists as practitioners are embedded in excellent arts health practice. Recognition and appreciation of these novel interventions and such a creative discipline with all that it can offer society remain the perennial problems to overcome.

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