



SPECIAL ISSUE

Music, drama, dance movement and art therapy: Interdisciplinary dialogues

Interview

Creativity, discipline and the arts at the end of life: An interview with Nigel Hartley

Nigel Hartley
interviewed by Andy Ridley

ABSTRACT

In this interview Nigel Hartley discusses the importance of the arts and arts therapy in end of life care and the therapeutic benefits of a shared, public experience of music and art making, performance and exhibition. He contests that arts therapies work best in this setting when the artists and arts therapists are disciplined, flexible and responsive to the both social and private experience of the patients.

KEYWORDS

creativity, arts, end of life care

Nigel Hartley currently holds the post of Director of Supportive Care at the St Christopher's Group, London. He has worked in end of life care for 25 years, the last 11 years at the St Christopher's Group, where he has been responsible for transforming day and outpatient services, developing volunteers and also leading on Community Engagement. He has an international reputation as a teacher and lecturer and is also an experienced published writer. In April 2015 Nigel will take up a new position of Chief Executive Officer at Earl Mountbatten Hospice on the Isle of Wight in the South of England.

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Andy: Today, we're going to talk around how the arts and arts therapy become an integrated practice with different models, different ways of working and different kinds of therapy. That's something you practise and encourage here at St Christopher's Hospice. Why?

Nigel: I suppose for me it's probably important to understand that where we are now has been part of a process – both a process here at St Christopher's over the last 12 years or so but also a personal process over the past 25 years in terms of how I've developed and rearticulated my own understanding and knowledge of what the arts can bring to organisations.

One of the things I've found confusing, I suppose, about arts therapies particularly, is that the therapist always has a tendency to think of their work as being very private. I understand that people have complex and very challenging issues they need to work through, but certainly working in end of life care the focus has always been for me to strive for a normality, to say that actually dying is okay and that people's reactions, responses, fears and anxieties around it are quite normal. If that is the case, therefore, I think the expression of all those things for the individuals living with death, dying and bereavement could be held a lot more publicly and a lot more openly in order to affect and challenge the environments, the communities if you like, that the people are dying in. So the drive here for myself at St Christopher's over the years, has been to challenge the very nature of the unfounded fact that dying should be private and therefore hidden. And really try to enable people, us, me, to reclaim some kind of public, open, community type expression of it.

Andy: And does that come from your experience as a therapist and now your experience as a manager of the arts and the arts therapies and other things? Or is it something that you've come to through your understanding of communities and how communities work?

Nigel: It's a mixture of both, of course, and I think as life goes on and I mature and hopefully get a more established view of things, it's been more about an integration of all the different aspects of my own experience. So, for instance, now being able to understand the impact and importance of the fact that I was brought up in a Welsh village in a pub where being together and coming together with others was the natural way that people worked through their problems and issues. When mines closed down, when people were out of work, people gravitated towards the pub and the church and actually did it together. So that is a very strong influence, I think, on where I've come to. You know, I also think the fact that my grandfather was very much involved and influenced by the socialist movement in Wales was a strong influence and that's what I was brought up with. Rather than being victims, people need to be celebrated and respected, whoever they are and however they have lived their lives and that needs to be done as openly and publicly as possible. So that has been very influential and I think probably it is only in the last four to five years that I realise the impact of that as being an important factor in how I've come to manage people and systems creatively.

I think also having begun my own work as a therapist at the time of HIV and AIDS pandemic, when there was a big public drive to make sure that people were accepting this and forcing them, rather brutally in many ways, to accept that there was nothing to be afraid of and that it was okay. How releasing and refreshing for communities to work together and realise that all of the physical destruction didn't have to always be terrifying and no-one was to blame. That sort of real movement and drive towards pushing people to their limit in terms of what was acceptable and what was possible I found really inspiring and engaging. So having begun as a therapist in the midst of all of that attention, although incredibly challenging, both personally and professionally, it gave me a glimpse of what is possible – the importance of always working towards potential. We all found it challenging and devastating, but the fact that we were in it together was the important thing that gave it meaning and drive.

Andy: Do you think that has got easier or harder? I'm thinking particularly now in the age of austerity and closing ranks, which often lead to people defending their specialism. Has that influenced you or have you to some extent railed against this?

Nigel: I think what the arts in health or whatever we call it and however we format it (and there are many different formations of it, different ways of practising it), really must be careful not to become defensive and stuck and narrow as many healthcare professions have become. We need to watch and learn from the main healthcare professions such as nursing and medicine who are being governed by the assessment of risk, by the fear of getting things wrong, and please let's do something different together. I think the success of healthcare professions in the future will be about how flexible and real we can be, and of course, how cost effective. We also have to prove that what we bring to the table really works and really helps people live and die within the current culture and climate – all of that. I always pushed myself to find a language to talk about the work of the arts. People need to understand what the arts are, what they do, how they work, and of course, their limitations. When I hear many artists or arts therapists talk about their work, it makes no sense to me. There is no excuse for lazy language as it plays right into the hands of the critics. I think it has got easier for myself because I think now, after all of these years, I begin to trust the language I have honed to talk about the arts. I have always been really conscious of artists finding a way of talking

about what they believe and realising that *talking* about what we do is not the same as *doing* it. I think many arts therapists use really lazy language to talk about what they do, and that gives the impression that their work is also lazy. Using the arts with people who are vulnerable is a discipline which has to be practised and perfected and we also need to practise and perfect the language we use to talk about it. We need to understand our craft, the stuff which we work with in the most detailed way.

Andy: Lazy in the sense of formulaic?

Nigel: I think formulaic, yes, but I also see that people just think those that they talk to about what they do should just understand what they are talking about as if by magic. So I do not think people really try, really work on the discipline of how to articulate it and work through finding words and phrases and language where people can really understand the benefit and potential of what it is that can be offered. You know for me the tension that exists within the arts in therapy not being witnessed, not being seen or heard, not being public as opposed to the normal process of music and art being exhibited and performed is really very important. So this tension in the arts therapies which has gone on for years now, and I am actually so bored with it by the way, of people saying that this work has to be private because it is about expression and pain which must remain confidential, is very low level and it goes right to the heart of being afraid, of taking risks, of what we were talking about earlier. In terms of the real impact and power that the arts can really have, it is much bigger than allowing a person to let off steam behind closed doors. There's something about the structures and discipline that the arts have and the fact that they offer people different ways of being together. They offer a place to question and to formulate concrete solutions, if you like, to come to terms with problems; and the part of exhibiting and performing what has been created and other people seeing it and hearing it to me is part of the process. That is what artists do. You know, it's very rare that artists, musicians create work which they never want to be witnessed. There are examples of this, of course, but on the whole the intention is for their work to be public, and for most artists and musicians it's a vital part of the process that things must be witnessed. After all, most creativity is about wanting to change the world and to bring order out of chaos.

Andy: There has always been a link, a tension between a private space or private place and a public space - perhaps exaggerated now because the age of the internet and what it means to have both simultaneously. With the internet we have both a shared social space but also a space which might be exposing and threatening. So by bringing these two experiences together through the arts and arts therapy at St. Christopher's, what does it offer to the patient?

Nigel: I think what it does, it pulls the 'patient', if that's what you want to call them because this is about many different kinds of people, isn't it? It pulls the person out of isolation, sometimes actually quite brutally, quite surprisingly, quite shockingly. It pulls them out of themselves into a world where they have to relate, or can't help but relate, to other people around them, and life must be better for all of us when that happens. I mean that's what we all believe we're here for isn't it? The social death, if you like, of people dying and this way that people are isolated from their family and friends when they don't have a language to talk about what is happening, suddenly their world shrinks and what the arts do is give people the possibility of actually 'bigging up' their world again and creating relationships with other people – how absolutely vital – what an amazing thing to be able to offer each other – helping us realise that even when our world is falling apart, we really do still matter. That's the kind of realisation that takes my breath away and helps me to understand that even in the depths of despair and destruction, there is the potential for beauty, for truth and for love.

Andy: So, in fact, is this really based on the socialist principle, that we are primarily social beings and it's in isolation that we can become ill?

Nigel: Yes that's it! Even when dying, people can be healthy and I think there is something so right about that - if that makes sense. And actually just engaging with people, being pulled back into a social world through the play and creativity of the arts maybe gives us the health that we need in order to die, to die well, if that's the phrase we want to use.

Andy: You have introduced things at St Christopher's which offer connections to other traditions from other parts of the world. I am thinking of Mexico; Mexican death festivals, the kind of Irish spaces for a wake, celebration - different things come to mind. How has that come to play?

Nigel: I think all of the stuff that's happened here, the arts included, but broader stuff in terms of real community engagement, there was never a real plan, but it has evolved naturally through listening and responding. We have really watched and learned together and then we have responded by doing the next thing. The hospice building being open to the public, for instance, was never part of the plan, but it was just the right thing to do at a certain moment in time – to create a community arts venue, a community café, a place where people really want to come to. How challenging - a hospice being a place where people actually want to come to! That is an example of thinking and acting creatively – doing the next thing, but doing it seriously, with discipline, with real thought.

Andy: You have spoken in different parts of the world, haven't you, particularly Europe?

Nigel: Yes. It goes back to striving to find a language to talk about this work, and being driven to talk to a broad range of people with different experiences and from different cultures helps that, of course. And you know, on the whole, people get it. I think that's the thing about it: people understand the benefits of how the arts can be used as containers, as buckets, as structures, as places where people can come together and actually articulate, experience, create, if you like, a world that they can live in on their terms. I think people understand that. People understand that moving from being isolated, into a community and probably engaging with it in a way that most people have never done even before they were dying, is a good thing and can be life changing. Artists working in health must really strive to not make their work mystical and secretive. It does no-one any good – either themselves, or more importantly those they are offering support to. I do sometimes wonder if most people use the dubious need for things to be confidential in order to hide the inefficiency of their own work. It might be that what they are doing is creating bad music or bad art and that is really not okay. You need to be at the height of your skills, both as a human being, emotionally and psychologically, of course, but also as an artist or musician. I have learned that we have to be the best artist, the best musician we can possibly be in order to do this work.

Andy: You're moving on from St Christopher's in a couple of months...

Nigel: Yes indeed – but it's the right time. I mentioned earlier about 'doing the next thing'. I

always trust my instinct, but also realise that with all decisions we have a 50% chance of getting it right. I have always loved a challenge – fingers crossed!

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