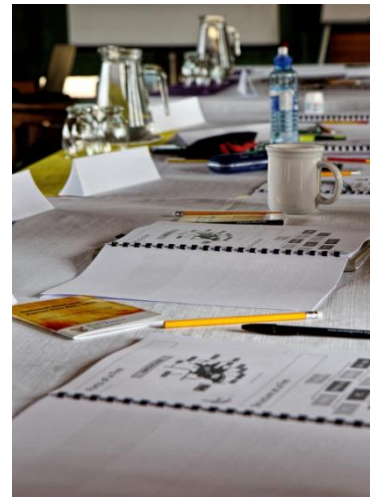# Train the Trainer

Workshop for Culture and Art Facilitators

This PDF is intended for project managers and/or link workers who deliver training for cultural and arts facilitators interested in working within an Arts on Prescription (AoP) context. It provides a suggested workshop structure along with facilitation prompts to support the training of culture and arts facilitators in AoP contexts. The resource is designed as a source of inspiration and can be freely adapted to suit different training needs and settings.

The aim of the workshop is for culture and art facilitators to:

- Reflect on their attitudes toward people with mental health issues and address any existing uncertainties or prejudices

- Gain basic knowledge about mental health issues and mental health promotion

- Understand the differences between an AoP programme and art therapy work

- Exchange on how to create a safe and supportive framework for AoP courses.

Part 1 – The AoP Concept

Please find the information you need to **present the AoP concept** here

Part 2 – Mental Health

2.1 Present and Rreview Key Facts and Assumptions on Mental Health to establish a shared understanding:

Mental health issues can affect us all:

- According to WHO, globally nearly 1 in 7 people live with a mental health disorder – more than one billion individuals – are estimated to be living with a mental disorder.

- We assume that everyone attending the workshop has already had experience with mental health issues, either personally or in their environment.

- Psychological stress and crises are a normal part of life.

- Talking about mental health helps reduce stigma.

Read more about mental health in Europe here.

2.2 Culture and Art Facilitators Personal Experience

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Facilitator questions:

- Do you have experience with participants who have mental health issues attending your programmes? If so, what kind of experience?

- How might your past *or* non-experience working with participants with mental health issues influence your future work with participants (positively and/or in challenging ways)

Instructions: Let the facilitators write their answers on facilitation cards. Collect and display the answers, but do not discuss them yet—this will be done later.
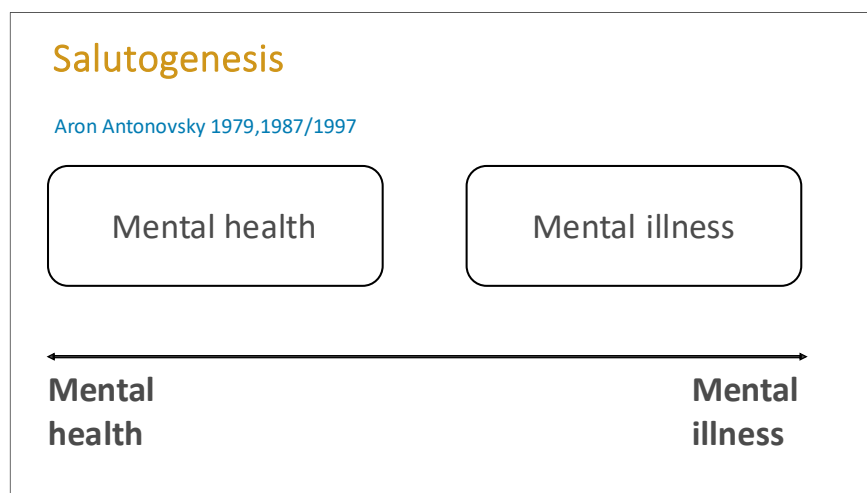
2.3 How mental Health issues Develop

2.3.1 Present the Vulnerability-Stress Model (originally developed by Nuechterlein & Dawson, 1984 for Schizophrenia)[1]

This model explains that mental disorders arise from the interaction of biological vulnerability (e.g., genetic or neurobiological factors), conditions of psychosocial development, environmental stressors (e.g., life events or psychosocial factors) and coping skills/resources. The model emphasis that individuals with higher vulnerability require less stress to trigger symptoms, while those with lower vulnerability need more stress. The development of mental disorders also depends on effective coping skills and resources. The model highlights the dynamic interplay of internal and external factors in mental health development.

2.3.2 Present the Concept of Salutogenesis (Antonovsky, 1979 to 1994)[2]

Salutogenesis changes the perspective: Rather than asking how disease develops, it focuses on factors that promote health and well-being. Antonovsky also developed the idea of a *health*

Salutogenesis

Aron Antonovsky 1979,1987/1997

Mental health

Mental illness

Mental health ← → **Mental illness**

[1] Nuechterlein KH, Dawson ME. A heuristic vulnerability/stress model of schizophrenic episodes. Schizophr Bull. 1984;10(2):300-12. doi: 10.1093/schbul/10.2.300. PMID: 6729414

[2] Vinje HF, Langeland E, Bull T. Aaron Antonovsky's Development of Salutogenesis, 1979 to 1994. 2016 Sep 3. In: Mittelmark MB, Sagy S, Eriksson M, et al., editors. The Handbook of Salutogenesis [Internet]. Cham (CH): Springer; 2017. Chapter 4. Available from: https://www.ncbi.nlm.nih.gov/books/NBK435860/ doi: 10.1007/978-3-319-04600-6_4

ease-dis/ease continuum instead of viewing health and disease as separate categories: Either we are not well or we are ill, he proposes we are all on a continuum with different degrees of health. Based on this, he proposed *asking 'What moves people toward the health end?'.*

2.4 Creative Activities and Mental Health

Facilitator question:

- Thinking about mental health as a continuum from well-being to mental ill-health, why do you think creative activities are beneficial for mental health and well-being?

Instructions: Let participants work in small groups and write answers on facilitation cards. Collect and display the answers.

Part 3: Culture, Arts, Creativity, and Mental Health

3.1 Creative confidence and the Role of the Arts in Mental Health Promotion

Creative confidence refers to a person's belief in their ability to generate ideas, try new things, and engage in creative activities.

Research shows that engaging in cultural and artistic activities can promote mental health and well-being by:

- Reducing stress and anxiety
- Increasing self-expression and self-esteem
- Strengthening social connections
- Supporting resilience and coping skills

You can read WHO evidence report here and the qualitative evaluation of the 24 AoP pilot programmes implemented during the AoP in the Baltic Sea Region project here.

3.2 Distinguishing between AoP and Art Therapy

Arts on Prescription (AoP): Creative, participatory arts activities designed to support mental health and well-being in the community. Non-clinical, typically delivered in community settings.

Art therapy: Clinical intervention led by trained therapists, aimed at diagnosing or treating mental health conditions.

While both approaches strengthen mental health and well-being, support creative confidence and contribute to the development of personal and social skills, AoP focuses on artistic activities as a personal resource for mental health and well-being, whereas Art therapy can also address stressful or traumatic issues.

Instructions: Present the differences clearly. Discuss with the attendees how they feel in providing non-clinical mental health support to participants in their AoP program.

Part 4: The Role of the Culture and Art Facilitator

4.1 Obstacles and Challenges

Facilitator question:

- What could be the obstacles and challenges for people with mental health issues in participating in an art course?

Instructions: Quick brainstorming using the popcorn method. Write answers on a flipchart.

4.2 Self-reflection

Let participants work individually and creatively (provide paper and colourful pens).

Get them to answer the following questions:

- What is my role as a Culture and Art Facilitator? (Draw a symbol)

- What is my superpower as a Culture and Art Facilitator?

- What is my kryptonite as a Culture and Art Facilitator?

Instructions: A flash round for participants who want to share their thoughts and ideas.

4.3 Exchange and Discussion: Facilitating Artistic Activities for People with Mental Health Issues

Opinion barometer – discuss the interplay of different approaches:

- *Fixed structure vs. openness/flexibility:* "It is important that AoP activities have a fixed structure" vs. "AoP activities should be as open and flexible as possible."

- *Results vs. process orientation:* "It is important for participants that the artistic process also has a result" vs. "The process, not the result, should be the focus."

- *Individual vs. group:* "I try to keep in mind individual needs and support participants individually" vs. "I try to see the group as a whole and promote good group dynamics."

- *Facilitators' responsibility vs. others' responsibility:* "As the Culture and Art Facilitator, I am responsible for ensuring that everything runs smoothly and that the participants feel comfortable." vs. "The participants themselves / the link workers are responsible for the participants' well-being in the activities."

4.4 Input: Role of Culture and Art Facilitators and Link Workers

You will find a description of culture and arts facilitators and link workers key responsibilities and collaboration [here](#).

4.5 Handling difficult situations

Establish groups of 3–4. Each group selects 1–2 challenging situations from the negative expectations collected in 2.2.

Facilitator question:

- What would be a god way to deal with this situation?

Instructions: Develop at least two solutions for each situation and write them down. Present the solutions to the whole group.

Part 5: Feedback and Take-Home Messages

Collect feedback and flash round with take home messages from the workshop.