

# Art in Nature on PrescriptionFinal Report

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## **Executive Summary**

The Art in Nature on Prescription in Swansea project, funded by Arts Council Wales and delivered by Coed Lleol /Small Woods (CLSW) between March to December 2024. This was an existing project that had been successfully piloted and had received budget support as a development project. The project, led by CLSW in partnership with 'Arts in Health' (Swansea Bay University Health Board), targeted individuals in Swansea who were receiving or awaiting mental health support, as well as those from culturally marginalized communities.

The project aimed to provide these groups with opportunities to engage in creative workshops held in local woodlands, facilitated by professional artists and outdoor activity leaders. By combining nature with various art forms, the initiative sought to offer participants alternative methods for improving their mental and physical well-being.

The project's key objectives were:

- 1. Promote access to Art in Nature as a therapeutic activity for individuals with mental health needs, both alongside or while awaiting treatment.
- 2. Build partnerships with professional artists to enhance our network of leaders and support Outdoor Leaders in identifying as artists.
- 3. Develop a variety of short programs, including activities like weaving with natural materials and nature-based printing.

The project hosted two artist development sessions, two 6-week programmes for adults and two for young people and families. The project also hosted a celebration event, exhibiting work from all programmes, as well as creating a film. The project has several positive impacts participants' overall wellbeing and health. Many reported increased confidences, and a stronger connection to nature, leading to positive changes in their mental and physical wellbeing. While the impact on health was varied, all participants expressed a renewed appreciation for green spaces and woodlands. They indicated plans to continue using these environments to enhance their health and wellbeing.

This project demonstrated the potential of combining creative art forms with nature-based activities to support mental health and wellbeing, with many participants wishing to continue, and for the project to be available on a larger scale.



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## 1. Introduction

## 1.1. Art in Nature on prescription

The Art in Nature on Prescription project, delivered by Coed Lleol / Small Woods in partnership with Swansea Bay University Health Board's Arts in Health, invited individuals in Swansea, particularly those receiving or awaiting mental health support, as well as individuals from culturally marginalized communities, to participate in creative workshops based in local woodlands. This initiative combined nature with art forms such as willow weaving, painting, and nature-based printing to help alleviate mental and physical health issues. The program's core aim was to offer therapeutic activities that supported mental and physical wellbeing while addressing health inequalities.

The project ran four 6-week *Arts in Nature on Prescription* programs, led by professional artists and outdoor activity leaders, with wellbeing support from project officers. These sessions were delivered in woodlands located in areas of high deprivation and racial diversity in Swansea. The program targeted individuals in areas ranked within the 10% most deprived regions in Wales, offering access to nature-based art activities designed to promote mental health recovery and resilience. Through partnerships with artists and outdoor leaders, the project also fostered professional development, enhancing their skills and knowledge. Participants were recruited through referrals from social prescribing networks, including GP surgeries, health charities, and local social prescribers.

## 1.2. About Coed Lleol/Small Woods

Coed Lleol/Small Woods (CLSW) was established as Coed Lleol (Small Woods Wales) in 2002, the Welsh branch of the Small Woods Association, an organisation supporting woodland practitioners in sustainable woodland management since 1988 (originally as National Small Woods Association). In 2010, CLSW launched a successful woodland health and wellbeing programme, known as Actif Woods Wales. The programme ran for a decade and established the charity's expertise in social forestry, connecting people with their local woodlands and natural spaces, whilst promoting healthy and sustainably managed woodlands. Since that time, CLSW has expanded to deliver woodland wellbeing sessions in most counties of Wales. At time of writing, CLSW is working on the Isle of Anglesey, and in Conwy, Pembrokeshire, Powys, Swansea, Carmarthenshire, Neath Port Talbot, Blaenau Gwent and Rhondda Cynon Taff. Small Woods also delivers social forestry work over the border, in Shropshire.

The woodland wellbeing programmes predominantly engage adults and children who live in areas with high health needs, low employment rates and poor access to services. Additionally, it encourages and supports social prescribing by working in partnership with health services and general practice surgeries, which refer people to programmes. CLSW has actively professionalised and promoted social prescribing to outdoor health activities through the development of outdoor health clusters in four areas in Wales: The Dyfi Valley; Pembrokeshire; Gwynedd; and Rhondda Cynon Taff. CLSW also has an established and well-



respected training programme for staff, leaders, providers and health professionals to up-skill and embed wellbeing in nature into their everyday practice.

Coed Lleol/Small Woods aims to protect and develop woodlands for current and future generations by encouraging the use of woodland resources for the long-term health and wellbeing of people and the environment – creating healthy woodlands and healthy people.

### 1.3. Wellbeing in nature and social prescribing

Evidence demonstrates that outdoor, nature-based activity can improve mental health, increase lifespan, and reduce the incidence of chronic disease  $^{1;2;3;4}$ . Even a view or suggestion of nature via another sense (e.g. hearing birdsong or other natural soundscapes, smelling natural oils secreted by plants) can have potent effects in indoor environments, reducing stress and anxiety and boosting immune function  $^{5;6;7;8}$ . The health and wellbeing benefits of time spent in — and connection with — nature is an area of research that has gained momentum in recent decades, reinforced by many studies in response to the COVID-19 pandemic.

People who live in greener neighbourhoods, or those close to the sea, report higher positive wellbeing, but only in response to recreational visits<sup>9</sup>. Frequency of visits to green spaces, inland waters and coastal areas has been shown to be associated with higher wellbeing and lower mental distress. During the COVID-19 pandemic, greater greenness within a 250m radius of a person's post code was a good predictor of higher levels of mental wellbeing<sup>10</sup>, suggesting that proximity to nature is an important factor in accessing it.

A longitudinal study of 2.3 million adults in Wales showed that greater exposure to green spaces was associated with reduced risk of future common mental health disorders, especially

<sup>&</sup>lt;sup>1</sup> Lovell, R., Depledge, M. and Maxwell, S., 2018, Health and the natural environment: A review of evidence, policy, practice and opportunities for the future, Defra Project Code BE0109.

<sup>&</sup>lt;sup>2</sup> Cervinka, R., Höltge, J., Pirgie, L., Schwab, M., Sudkamp, J., Haluza, D., Arnberger, A., Eder, R. and Ebenberger, M., 2014. Green public Health – Benefits of Woodlands on Human Health and Well-being. [Zur Gesundheitswirkung von Waldlandschaften]. Vienna, Austria: Bundesforschungszentrum für Wald (BFW).

<sup>&</sup>lt;sup>3</sup> Pretty, J., Peacock, J., Sellens, M. and Griffin, M., 2005. The mental and physical health outcomes of green exercise, International Journal of Environmental Health Research, 15 (5) 319-337.

<sup>&</sup>lt;sup>4</sup> Park, B., Tsunetsugu, Y., Kasetani, T., Kagawa, T and Miyazaki, Y., 2010. The physiological effects of Shinrinyoku (taking in the forest atmosphere or forest bathing): evidence from field experiments in 24 forests across Japan, Environmental Health and Preventative Medicine, 15 (1) 18-26.

<sup>&</sup>lt;sup>5</sup> Ulrich, R. S., 1984. View through a window may influence recovery from surgery, Science, 224, 420-421.

<sup>&</sup>lt;sup>6</sup> Ratcliffe, E., Gatersleben, B. and Sowden, P. T., 2013. Bird sounds and their contributions to perceived attention restoration and stress recovery, Journal of Experimental Psychology, 36, 221-228.

<sup>&</sup>lt;sup>7</sup> Gould van Praag, C., Garfinkel, S., Sparasci, O., Mees, A., Philippides, A., Ware, M., Ottaviani, C., and Critchley, H., 2017. Mind-wandering and alterations to default mode network connectivity when listening to naturalistic versus artificial sounds, Scientific Reports, 7.

<sup>&</sup>lt;sup>8</sup> Li, Q., Kobayashi, M., Wakayama, Y., Inagaki, H., Katsumata, M., Hirata, Y., and Miyazaki, Y., 2009. Effect of phytoncide from trees on human natural killer cell function, International Journal of Immunopathology and Pharmacology, 951–959.

<sup>&</sup>lt;sup>9</sup> White et al., 2021, Associations between green/blue spaces and mental health across 18 countries, available at: https://www.nature.com/articles/s41598-021-87675-0

<sup>&</sup>lt;sup>10</sup> Robinson et al., 2021, Nature's role in supporting health during the COVID-19 pandemic: a geospatial and socioecological study, available at: <a href="https://www.mdpi.com/1660-4601/18/5/2227">https://www.mdpi.com/1660-4601/18/5/2227</a>



for those living in deprived communities<sup>11</sup>. While further research is needed into the causative pathways for the links between nature and wellbeing<sup>3</sup>, additional health benefits associated with undertaking nature-based activities include statistically significant reductions in diastolic blood pressure, salivary cortisol and heart rate, and statistically significant reductions in the incidence of diabetes and cardiovascular mortality<sup>12</sup>.

Following a consultation period, where over 1,000 stakeholders were engaged, a National Framework for Social Prescribing was released by Welsh Government in December 2023<sup>13</sup>. In it, social prescribing is defined as being 'an umbrella term that describes a person-centred approach to connecting people to local community assets. Community assets include community groups, interventions and services which could be delivered online or in person, as well as buildings, land or even a person within a community'. The intention of social prescribing is to connect people with their community to improve their health and wellbeing.

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<sup>&</sup>lt;sup>11</sup> Geary et al., 2023, Ambient greenness, access to local green spaces, and subsequent mental health: a 10-year longitudinal dynamic panel study of 2.3 million adults in Wales, The Lancet – Planetary Health, available at: <a href="https://www.thelancet.com/journals/lanplh/article/PIIS2542-5196(23)00212-7/fulltext">https://www.thelancet.com/journals/lanplh/article/PIIS2542-5196(23)00212-7/fulltext</a>

<sup>&</sup>lt;sup>12</sup> Twohig-Bennett & Jones, 2018, The health benefits of the great outdoors: a systematic review and meta-analysis of greenspace exposure and health outcomes, available at:

https://www.sciencedirect.com/science/article/pii/S0013935118303323

<sup>&</sup>lt;sup>13</sup> Welsh Government, 2023, National framework for social prescribing, available at: https://www.gov.wales/sites/default/files/publications/2024-02/national-framework-for-social-prescribing.pdf



## 2. Approach

Between March and December 2024, the Art in Nature on Prescription project funded by Arts Council Wales and delivered by Coed Lleol/ Small woods delivered a variety of programs aimed at fostering a connection with art and nature and promoting health and wellbeing in Swansea County (see Figure 1 and Table 1). These included in-person drop-in sessions, multisession programs for both adults and family groups as well as artist development sessions.



Figure 1 The Art in Nature on Prescription project ran programmes in Swansea, between March and December 2024

The Adult Mental Health Programme ran from 9th September 2024 to 14th October 2024 at Kilvey Hill, Swansea. This 6-week arts in nature programme, led by Swansea Print Workshop, allowed adults to explore printmaking techniques in the woods, providing a creative and therapeutic space for mental well-being. Similarly, the Race Council Cymru (RCC) Adult Programme took place from 13th May 2024 to 1st July 2024 also at Kilvey Hill. Led by Swansea Print Centre, it focused on printmaking techniques in the woods, helping adults connect with nature while fostering creativity and community.

The RCC Family Programme ran from 22nd July 2024 to 26th August 2024 during the school holidays. Held at Kilvey Hill, Swansea, this programme offered family-friendly printmaking activities, providing an opportunity for families to explore printmaking techniques together in a fun outdoor setting. Additionally, the Pupil Referral Unit programme focused on mono, lino, and screen printing at Maes Derw, offering young people a chance to develop their printmaking skills and express themselves creatively through art.



The Dementia Event took place on 18th November 2024 at Penllergare Woodland Centre, Penllergare Woods. This event offered nature connection and printmaking activities for individuals living with dementia and their carers, providing a creative and supportive environment. As part of this Project, two free Artist Development Sessions were offered to leaders. Session One, focused on printmaking skills, took place at Swansea Print Workshop on 21st October 2024. Session Two, which focused on willow weaving, was held at the Crymlyn Bog NRW Centre on 7th November 2024.

Additionally, a celebration event occurred on 5th December 2024 at Penllergare Woodland Centre, celebrating the Arts Council Wales project. The event featured printmaking activities from Swansea Print Workshop and willow weaving sessions led by Anna Stickland, a master weaver.

Table 1 Dates of all programmes as part of the Art in Nature on Prescription project

Session type	Session focus	Delivery dates
One off event	Dementia	18.11.24
	Celebration event	05.12.24
6-week programme	Young people (Pupil referral unit)	11.04.24-16.05.24
	Adult (Race Council Cymru)	20.05.24- 18.07.24
	Family (Race Council Cymru)	22.07.24- 26.08.24
	Adult mental health	09.09.24- 14.10.24
Artist development sessions	Print workshops	21.10.24
	Willow workshops	07.11.24



## 3. Evaluation Methodology

The demographic question forms part of the registration and available through Microsoft forms, however a paper version was also available for those that requested it. Informed consent was collected, as well as a GDPR statement. Where respondents did not want, or could not complete the questionnaire, a member of staff or carer was able to read and gain assent.

#### 3.1. Demographics

The adult registration process included the collection of demographic data to ensure a clear understanding of participants' backgrounds. This data captured key details such as gender, age, and ethnicity, alongside information about employment status and socioeconomic circumstances. Additionally, health-related information was gathered to help tailor the program's delivery to meet the specific needs and challenges of participants. This approach ensured that the project could effectively support a diverse range of individuals while enabling accurate monitoring and evaluation of its impact. Only the health questions were required to be completed, other elements such as gender and ethnicity were optional to respond to.

#### 3.2. Standardised tools for measuring health and wellbeing

A pre-and post-survey method was utilised to measure changes in adult participants' physical health and mental wellbeing. Surveys were completed with an online link, on paper or over the phone, during the registration process and upon completion of courses.

The three validated measures that were used in the pre-and post-surveys were:

- 1. the Short Warwick Edinburgh Mental Wellbeing Scale (SWEMWBS<sup>14</sup>), to measure the impact on wellbeing.
- 2. the International Physical Activity Questionnaire Short Form (IPAQ-SF<sup>15</sup>), to measure changes in physical activity; and
- 3. the EQ-5D-5L health thermometer<sup>16</sup>, to measure self-perceived changes in overall health.

#### 3.3. Other measurement tools

A non-validated short measure on nature connection was used to collect pre- and post-course scores, as well as an evaluative questionnaire relating to the Five Ways to Wellbeing. A post-activity survey established the participants' views about the programme and gathered participant ideas on what improvements could be made. An additional healthcare barriers and access questionnaire was collected anonymously.

<sup>&</sup>lt;sup>14</sup> https://warwick.ac.uk/fac/sci/med/research/platform/wemwbs

<sup>15</sup> https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3214824/

<sup>16</sup> https://euroqol.org/



## 4. Results

In this section we present results from participants that registered on the courses, in addition, further sections use qualitive measures to evaluate impact.

#### 4.1. Attendees

In total, 27 adults registered for one or more sessions as part of the 6 week programmes. Referral pathways included Race Council Cymru (n=19) the health board (n=1) and Adferiad (n=2). Total adult attendance is show in Table 3. There were a total of 28 child registrants as part of the project shown in Table 3

Table 2 Adult programme attendees

Programme	Length	Adult Attendees
Young people (Pupil referral unit)	6 Weeks	2 (staff)
Adult (Race Council Cymru)	6 Weeks	9
Family (Race Council Cymru)	6 Weeks	12
Adult mental health	6 Weeks	6

Table 3 Child programme attendees

Programme	Length Child Attendees	
Young people (Pupil referral unit)	6 Weeks	8
Family (Race Council Cymru)	6 Weeks	20

## 4.2. Adult demographics

#### 4.2.1. Gender, age, ethnicity

The statistics below are given for those who attended at least one session of any adult course (n=27); those who registered but did not attend are not included. The majority of participants were female 70% (n= 19) and 8 % identified as male (Figure 2). Age of participants ranged from the under 19 category to the 60-69 category. The largest age category was 30-39 (37%, n=10), see **Error! Reference source not found.**b. There were 10 different ethnicities r egistered with (29%) identified as White British/Welsh and 18% as Asian or British/Welsh Asian (SeeTable 4).



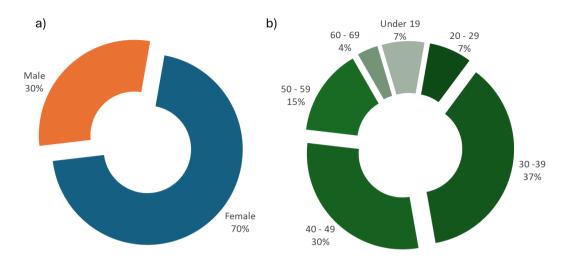


Figure 2 Pie charts showing the a) gender and b) age groups of registered adults participants

Table 4 Ethnicity of registered adult participants

Ethnicity	Number of registered participants
Arab	3
Asian or British/Welsh Asian	5
Black/African/Caribbean/Black British/Welsh	3
East Asian or British/Welsh East Asian	1
Hispanic	1
Indian	1
Latina	1
Mixed ethnic origin	1
White British/Welsh	8
White European	3

#### 4.2.2. Socio-economics

The largest group among participants stated that they were in paid employment or self-employment (33%, n= 9, See Figure 3). The attendees that provided postcodes (n=24), lived in both urban and rural areas, with the majority of post codes falling into urban classifications (96%, n=23), according to the UK Government Rural Urban Classification system<sup>17</sup>. Attendees' post codes were situated within areas between the first and the tenth deciles of the Welsh Index of Multiple Deprivation<sup>18</sup>. Lower numbers score higher in terms of deprivation; thus, the first five deciles represent the most deprived areas in Wales. In total, 48% of attendees were in the sixth to tenth deciles, least deprived, while 52% (n=14) of participants lived in the most deprived areas (See Figure 4).

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<sup>&</sup>lt;sup>17</sup> https://www.gov.uk/government/statistics/2011-rural-urban-classification

<sup>&</sup>lt;sup>18</sup> https://www.gov.wales/welsh-index-multiple-deprivation



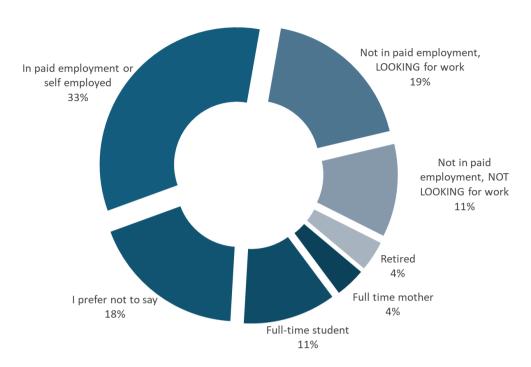


Figure 3 Employment status of registered adult participants as part of the Art in Nature on Prescription project.

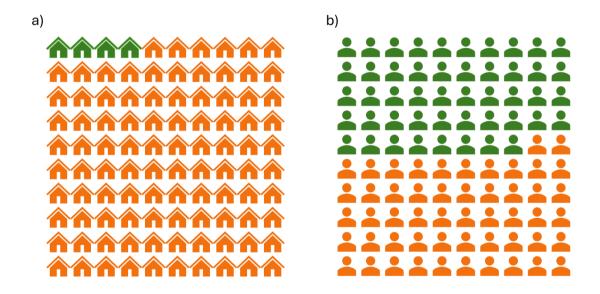


Figure 4 Showing a) Proportion of adult participants from majority urban (red) and rural areas (green), according to the UK Government Rural Urban Classification system and b) Showing proportion of participants living in the most deprived areas of the UK (red) based on the Welsh Index of Multiple Deprivation.

#### 4.2.3. Health and wellbeing

Of the 27 participants who responded, over 50% did not feel limited by health and wellbeing issues, 15% felt highly limited, and 26% felt somewhat limited (See Figure 5a). Many adult attendees listed multiple health concerns during registration (See Figure 5b). The main issues were: mental health conditions (40%), mobility and joint problems (25%), airway or fatigue-



related conditions (10%), and long-term or chronic conditions (10%). Additionally, 15% of participants reported no health or wellbeing concerns.

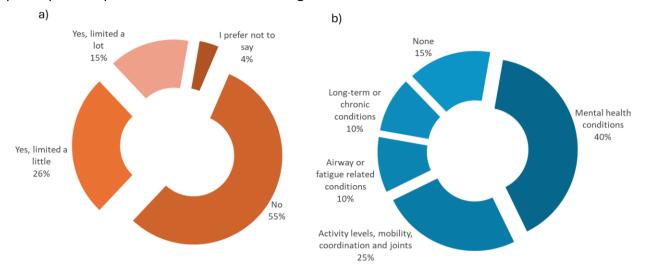


Figure 5 Showing a) How much adult participants felt their lives were limited because of health concerns, and b) What conditions were their key health concerns.

#### 4.3. Child demographics

Children participating in the project were referred either through RCC or PRU, with 60% identifying as male. The age distribution of the children was as follows: 42.86% were between 5-9 years old, 29% were between 10-14 years old, 25% were between 1-4 years old, and 4% were between 15-18 years old. Additionally, two children noted experiencing anxiety or stress, which limited their day-to-day activities.

## 4.4. Evaluation responses

Of the 27 adult participants, 7 completed the evaluation survey, with an additional five children completing the survey. The pre and post questionnaires included non-compulsory questions, which resulted in fewer scores that could be compared across the time frames.

#### 4.4.1. Short Warwick Edinburgh Mental Wellbeing Scale (SWEBWMS)

At the individual level, 7 participants, 6 completed all 14 questions (7 before and 7 after). All questions are required to be answered to give a SWEBWMS score at the individual level. Therefore 1 participant was removed from the analysis. We found an average increase of 3.33 points on the SWEMWEBS score for those individuals the completed both pre and post surveys. See Figure 6 for an illustration of the change in wellbeing scores across the participants. Not enough children responded to both parts of the questionnaire to summarise here.



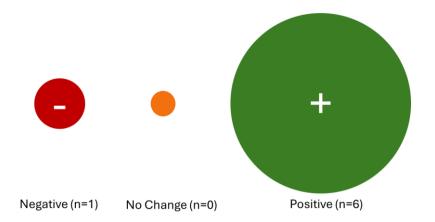


Figure 6. At the individual level, the Short Warwick Edinburgh Mental Wellbeing Scale (SWEMWEBS) was used to calculate the percentage reduction or increase in personal wellbeing, based on a sample size of 6 respondents that reported both before and after scores.

#### 4.4.2. EQ-5D-5L Health Thermometer

The Health Thermometer responses were gathered from 27 participants in the pre-course questionnaire and 7 in the post-course questionnaire. This allowed for a direct comparison of health perceptions before and after participation in the programme for those individuals. The analysis of these scores is essential to evaluate the impact of the course on participants' health and well-being. Overall, three respondents showed negative perceptions in overall health, two with no change, and two showing positive change. This mixed response underscores the variability in how individuals respond to the course and suggests that while the programme had a generally positive impact on health for some, others may have faced challenges that affected their overall health perception during this time.

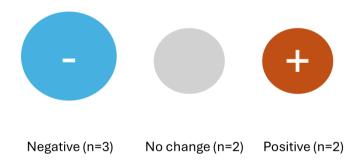


Figure 7 Showing percentage improvements in the Health Thermometer Scores across participants.

#### 4.4.3. Nature Connection

In total 6 responses were collected to the nature connection questionnaire with both a pre and post response from the same participant (See Figure 8 and Table 5 Frequency of registrants visiting woodlands both before the project and after attending a programme. Participants were asked how much contact they had with woodlands before the course, and how much contact afterwards. This shows a decrease in participants that rarely visit woodlands, and an increase



in those who feel they visit moderately or frequently. This highlights a notable improvement in participants' engagement with woodlands following the programmes with adults.

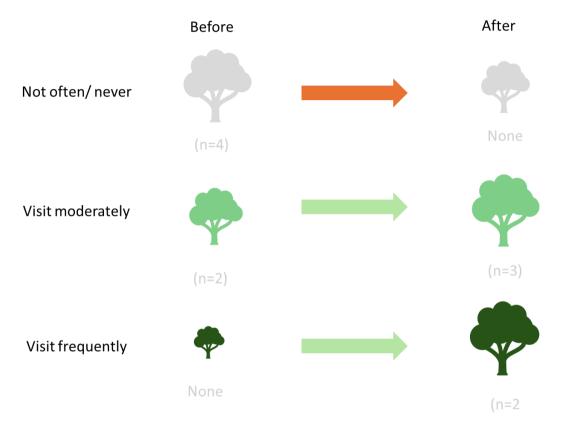


Figure 8 Showing percentage of participants within the group that visited woodlands at different frequencies both before and after the project.

Table 5 Frequency of registrants visiting woodlands both before the project and after attending a programme

Frequency of visiting woodlands	Before Project	After Project
Never/ Don't go very often (2-3 times a year or	4	0
less)		
Go often (every two weeks to every month)	2	3
Go all the time (weekly visits or more)	0	2

Additionally, the post evaluation questionnaire included three further questions about their connection to woodlands

- 1. Do you think that you will continue to use woodlands or green spaces to improve your health and well-being in the future?
- 2. Do you feel that green spaces and woodlands are more accessible to you than they were before you started this programme?



3. Please tell us how the green spaces or woodlands are more accessible to you than they were before?

All participants (100%) indicated that they plan to continue using woodlands and green spaces to improve their health and well-being in the future (See Figure 9). Additionally, all respondents reported that green spaces and woodlands are more accessible to them than before they started the programme. Four participants provided open-text responses, detailing how these spaces have become more accessible, offering insights into their personal experiences and increased engagement with nature (See figure X).

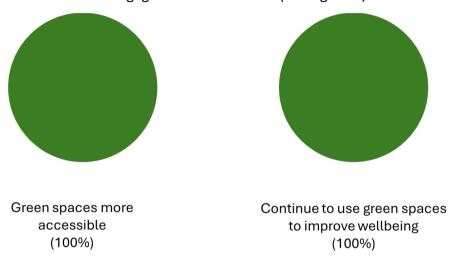


Figure 9 Percentage of respondents that felt green spaces were more accessible after the course, and percentage of those continuing to use green spaces to improve wellbeing.



Figure 10 Showing quotes from participants in response to Do you think that you will continue to use woodlands or green spaces to improve your health and well-being in the future?

#### 4.4.4. Five Ways to Wellbeing



In total, 7 responses were collected to the post course evaluation questionnaire, which included 8 questions related to the five ways to wellbeing. These questions asked respondents to agree or disagree about how much the course has; been enjoyable; improved my confidence; helped me make new friends; taught me new skills and knowledge; connected me to local nature; helped me to feel part of the local community; helped me to do more exercise than I did before; motivated me to get involved in volunteering (See Figure 11 and Error! Reference source not found.). Overall, the responses suggest that the course had a s trong positive effect on participants, particularly in terms of enjoyment, connection to nature, and the development of new skills.



Figure 11 Percentage of responses to the five ways to wellbeing, showing participants that either "Agreed" or "strongly Agreed" to the series of statements about the course.

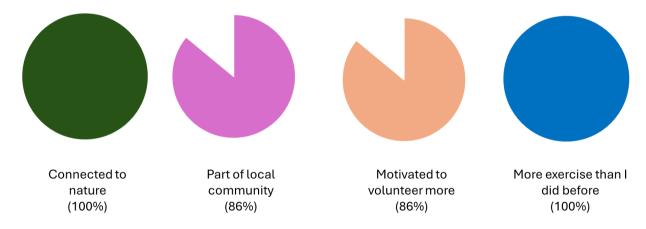


Figure 12 Percentage of responses to the five ways to wellbeing, showing participants that either "Agreed" or "strongly Agreed" to the series of statements about how the course made them feel.

## 4.5. Post-activity survey

As part of the evaluation form, participants were asked to feedback in five ways:

1. If the project has helped you to gain new life skills or practical skills, how have these skills improved or been used in your everyday life? (think about both practical and life skills)



- 2. How are you going to use the skills and knowledge you learnt to progress to further learning, courses, volunteering or employment?
- 3. Overall, please tell us if, or how, being part of this programme has inspired any changes in yourself (for your physical or your mental well-being, or anything else!
- 4. Tell us what we could improve on
- 5. Overall, how would you rate your Coed Lleol experience? (1 star = poor, 5 stars = excellent)

#### 4.5.1. Life skills

Out of 7 responses, participants shared a variety of practical and life skills gained through the project, many of which they have integrated into their daily lives (See Figure 13). Skills like print making as well as socialising and patience were mentioned.



Figure 13 Quotes from participants on the course responding to the open-ended question: "If the project has helped you to gain new life skills or practical skills, how have these skills improved or been used in your everyday life?"

#### 4.5.2. Further development

Respondents mentioned how it has inspired them to take their skills further in print making, as well as a confidence in being outdoors in the woods.





Figure 14 Quotes from participants in response to the question: "How are you going to use the skills and knowledge you learnt to progress to further learning, courses, volunteering or employment?"

#### 4.5.3. Inspired changes

Participants expressed changes in their mental health and attitude to the outdoors.



Figure 15 Quotes from participants in response to "Overall, please tell us if, or how, being part of this programme has inspired any changes in yourself (for your physical or your mental well-being, or anything else)

#### 4.5.4. Delivery improvements

Feedback was overwhelmingly positive, with respondents praising the tutors' enthusiasm, the overall organisation, and the quality of the sessions. Many expressed satisfaction with the courses as they are, describing them as enjoyable, enriching, and beneficial. These responses



highlight the value of maintaining the programme while considering small refinements to enhance accessibility, communication, and alignment. In total, out of five stars, respondents all gave the courses 5 stars.



Figure 16.All participants that responded gave the programmes five stars



Figure 17 Showing quotes from respondents when prompted to reflect on the course.



## 4.6. Access to healthcare questionnaire

In addition to the standardised measures, an additional questionnaire collected anonymous responses to an access to healthcare questionnaire as part of this study. In total, 7 responses were collected.

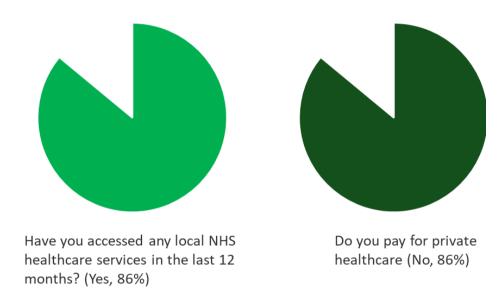


Figure 18 participant responses to health care questions.

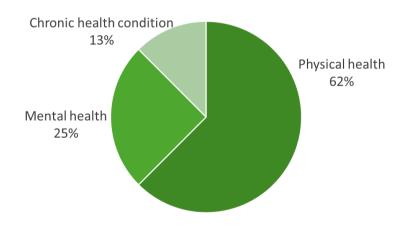


Figure 19 Responses to categorising the reason participants had accessed healthcare recently



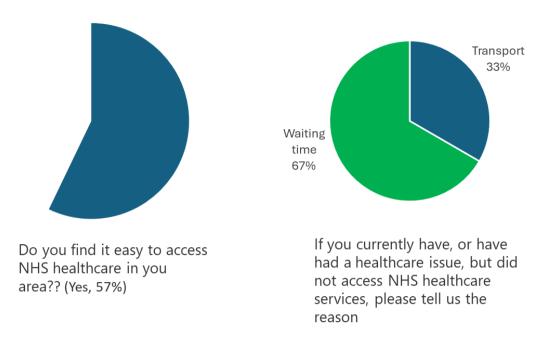


Figure 20 Participants perceptions of barriers to healthcare in their area

Further insight into the barriers facing access to healthcare highlighted several challenges. One person noted that appointments fill up quickly in the morning, making it hard to secure a slot. Another shared difficulty finding a dentist for their children, with a 7-month search. A third respondent expressed frustration with long waiting lists for mental health services and delayed stomach test results. Lastly, one person mentioned struggling with anxiety disorder and a lack of transport.

When asked if the NHS were to offer alternatives, in combination with, not instead of medication, what kind of things would you like access to? The responses indicate that the most popular NHS alternatives alongside medication are wellbeing activities (yoga, mindfulness, nature groups), followed by creative activities (art, music, dance) and outdoor activities (walking, climbing, surfing). Fitness classes and counselling/psychotherapy were also requested, with no one selecting "Other." This highlights a preference for holistic approaches such as mindfulness, creativity, and physical activity.



# 5. Event photos and handwritten feedback

Photos were taken during the print workshops. A film was also produced by CLSW which is available on their Facebook page.



Figure 21 Adult leaders and participants as part of the Arts in Nature on Prescription programmes



Figure 22 Some of the final art pieces in display in Swansea, 2024



Participants from both projects wrote the following on tags and hung them from the tree, which was very positive and provided additional, see Figure 23.



Figure 23 Participants were invited to handwrite on tags during the celebration event in Swansea



## 6. Case study

#### James – Arts Council Wales Project

I've got a background in art and design, so I did BA degree in Illustration when I was 18, then I did a master's degree in fine arts. I couldn't really make heads or tails of the business end of things, so I just ended up putting it on the back burner and working jobs that I really disliked just to get the money in really. After COVID 2022 I went on long term sick from my job because I wasn't coping very well mentally, I wasn't really looking after myself. I was drinking a lot. Just using really unhealthy coping mechanisms to deal with all the negative feelings I was feeling at the time.

That led to me moving back to the Ammanford area from Cardiff and just sort of trying to get myself back into a place where I can get back in the community and stuff like that and it took quite a long time. So, it took about 2 1/2 years of persevering with my mental health and trying all these different organisations and stuff like that. Hafal was a good one, at the start of this year around April. So started just going there, for drop-in sessions and chat with the other people that came. And they made me aware the workshops that you were putting on around about the time and they asked me if I was interested and I was in a pretty good place at the time, so I agreed to come to come along.

It was really good experience, to be honest. The whole just being outside in the woods, like with a fire, it felt like camping trips or something from when you're younger. And then the other people that were coming as well, you didn't feel like you're the odd one out or anything, it was quite inclusive. There's quite a lot of like-minded people there as well. People that were creative in one way or another, or just really wanted to try something new.

Even with my experience in art, there was things there that I never even thought of trying, so, like using the relief printing, building up of the cardboard and stuff to make printing plates and printing from them. I thought they were really good fun and just an interesting way to create work. And then the weaving, that was a lot of fun too. I never would have picked that up or even thought about going to a class where they were doing weaving.

You don't really know what you're going to enjoy until you just give it a go, really. It's just really interesting as well to like to learn all the different processes and stuff like that and have a cup of tea and a chat with everyone. Everyone was just so nice and welcoming. I had some interesting conversations with a lot of the people there. And learnt a lot as well. Enjoying the creative process again was really nice.

What do you think being part of the group has changed for you? If anything, like anything to do with your physical health or social connections, mental health, nature connection.

I think it's definitely helped boost my own creativity and ignited that spark again. I'm not spending so much of my time moping around and, doing what I was doing a couple of months ago, just stuck in a cycle of being down and not knowing how to get out of it. I'm actually trying new things like I've been doing it this morning - I've been doing some creative work and I've been volunteering as well at a gallery. That started just before I came to the workshops, and then it's just got progressively better. I'm finding talking to people is a lot easier and



having the thought to pop on shoes and go outside. There's plenty of places around by me in the Ammanford area that are woodland the areas and to go out for a walk in nature and feeling a bit more connected.

Have you been going outside more; do you think since coming to the sessions?

Oh yeah, definitely. Some of it's through necessity like travelling, because due to other health complications, I'm not allowed to drive at the moment. So, walking to and from train stations, bus stops. I know it's not like outdoors, woodsy type of thing, but like I'm more inclined to actually to go out and do that rather than not.

And certainly, with going out with family members and friends. I had quite a lot of social anxiety, thinking what if I don't have anything to say? I haven't been doing anything, so I don't have anything to say. Am I going to bore them with what I'm saying? Now, because I'm so busy and I've done so many different things comparatively to a couple of months ago, I do have a lot to say to people and there are things I can show them like photographs of the workshops we've been doing. Being outside with family and friends, it's definitely had an impact on that, I think.

What do you think you most valued about coming to the sessions?

A bit of sense of purpose, I think. Knowing that you've got something that other people have kindly planned for you, and you know after the first session and getting to know the people, you know it's a very calm and inclusive environment.

The social connection and the creativity as well. Seeing how, even though we're all doing a similar task, how everyone's thought process was so different and what they created was so different from each other as well. That was really interesting.

Is there anything you think that we could have improved on any or just any comments really about anything you know to do with your experience?

It would have been nice if the sessions went on a bit longer. I felt like with some of the printing things especially, a lot of time was spent making it and but once you get the creative flow going, it would be nice to have kept that going for maybe like an hour or two longer. But I know that for some people that might not like that.

Do you think the six weeks was a good length or would you have liked it to have gone on for more weeks?

I think 6 weeks was good. I'd always be open to it going on a bit longer like. I don't see any problems with that really. To get to know the people a bit better, make connections and continue that social interaction.

Do you think has there been any longer-term positive outcomes for you from coming to those sessions?

I think so. Yeah, I'm a lot more outgoing now. I'm feeling a bit more motivated with my own routine. And trying to get my own creative process back up and flowing. Being a bit more



socially confident, like it doesn't bother me as much going out and meeting new people or meeting people that I already know. So, I think that's a really positive thing.

#### *Is there anything else you want to share?*

I only found out about the sessions because of Hafal. Had it not been for them, telling me about it, and giving me a lift from around Ammanford to Swansea to where it was taking place as well, I wouldn't have been able to get there. And also, I wouldn't have known about it. So maybe a bit more advertisement, making it more accessible, not just for people that are like accessing mental health services. Or maybe that's just me not being on social media that much and not knowing where to look really...



## 7. Summary

This was a small project, running several six-week programmes with adults, young people and families over six months in the Swansea area. Running from April to December 2024, the project reached 28 adults and 28 children, providing wellbeing and art in nature programmes. The impact was overwhelmingly positive, with all respondents giving the courses five stars. The majority of respondents came from urban areas, with over half coming from areas classed as deprived as classified by the Welsh index of multiple deprivation index. In addition to this, leaders were also given the change to develop their skills, with specific workshops targeting leaders.

The evaluation highlighted significant improvements in participants' overall wellbeing and health following their involvement in the program. Many reported increased enjoyment, confidence, and a stronger connection to nature, which positively impacted their mental and physical wellbeing. While the program had a generally positive effect, the responses were mixed, with some participants experiencing improvements in their health perceptions, while others reported no change or a decline. The case study showed it positively increased the sociability and creativity of participants, beyond the end of the project. All participants noted a renewed appreciation for green spaces and woodlands, expressing plans to continue using these environments to enhance their health.

The feedback was overwhelmingly positive, with some suggestions to increase advertising, and diversify advertising beyond social media and to continue programmes in Swansea and other areas.



# 8. Acknowledgements

This project was possible through the Arts Council of Wales grant 2023005661 under the title Arts in Nature on Prescription Swansea. We would like to acknowledge the participants who gave their time to respond to questionnaires so we could evaluate the impact this project has had on their lives.





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