Built within a framework of science, the art of healing is essential to health and medicine. How does one define a positive healing space? What provides a balanced healing relationship between patient and healer? How can healing forces be identified, or healing outcomes be measured? Every element of healing is rooted firmly in the artistic dimension of human experience.

While there is no medicine without scientific evidence, there is no healing without the creative arts.
Greetings from Linda Mills,
Vice Chancellor for Global Programs, NYU

NYU's Office of Global Programs is proud to sponsor the Healing Environment and the Creative Arts symposium

I can think of no better way to mark the tenth anniversary of NYU Accra than a conference that brings together faculty from the NYU School of Medicine, NYU Accra, and the University of Ghana, Legon, to collaborate in creating knowledge on a topic as important—and interesting—as healing and the creative arts.

This conference also symbolizes what is possible when you bring together the incredible depth and talent of NYU's faculty both in New York and at its global sites, and combine that with the remarkable faculty at the top universities in our host nations. I know that in addition to strengthening the bond between NYU Accra and NYU New York, this symposium will also strengthen the relationship between NYU and the University of Ghana, Legon.

In closing, on behalf of my NYU New York colleagues, I would like to take this opportunity to congratulate the faculty and staff of NYU Accra for their untiring effort in providing a conducive environment for our students both to study and to experience the rich culture of Ghana. Thank you for an inspiring ten years, and I am looking forward to seeing what the next ten years shall bring.

I wish the participants and organizers of today's symposium much success in this worthy endeavor.

Healing Environment and the Creative Arts Symposium
September 25, 2013
Institute of African Studies, University of Ghana, Legon
Accra, Ghana

“Welcome”
Akosua Anyidoho, Ph.D., Professor and Director,
NYU Accra, Ghana

“Introduction to the Healing Environment”
Nathan Bertelsen, M.D., Assistant Professor of Medicine and Population Health, New York University School of Medicine, New York, USA

“Determining the Space Between Healing and the Arts: The Role of the Performing Arts”
F. Nii-Yartey, M.A., Professor, School of Performing Arts, University of Ghana, Legon, Accra, Ghana

“The Healing Environment Within Global Public Health: The Case of Tobacco Abuse, Media, and the truth® Campaign”
Cheryl Healton, Dr.P.H., M.P.A., Professor and Dean, Global Institute of Public Health, New York University, New York, USA

“Combining Traditional and Modern Participatory Arts—Music, Theatre, Storytelling, and Fine Arts in Healing”
Charlie Haffner, Director General, Freetong Players International, Sierra Leone

“Empowering the Patient: An Artistic Balance”
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“Tangible and Intangible Dimensions of the Healing Environment: The Case of the Akrofo-Kyirikasa Sanctuary”
Rev. Dr. Elias Kwaku Asiama, Professor, School of Performing Arts, University of Ghana, Legon, Accra, Ghana

“Balancing Traditional and Modern Healing in the Doctor-Patient Relationship”
Sammy Ohene, M.D., Professor and Chair, Department of Psychiatry, Korle Bu Teaching Hospital, University of Ghana, Legon, Accra, Ghana

“Eat the City, Civic Architecture, and Well-Being: An Example of Therapeutic Gardens”
Richard Ingersoll, Ph.D., Professor, NYU in Florence, Italy

“Out of Your Mind? Creative Arts and Mental Health Promotion in Ghana”
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I would like to welcome all of you to the Healing Environment and the Creative Arts Symposium organized by NYU Accra, NYU School of Medicine, and the School of Performing Arts of the University of Ghana, Legon. This event brought together experts in both medicine and the creative arts to raise awareness for the healing environment. It was hosted at the Institute of African Studies, University of Ghana, Legon, in Accra, Ghana, on 25 September 2013.

Since NYU Accra was established nine and a half years ago, most of the public events we have shared with the Ghanaian academic community have focused on the arts—film festivals, musical concerts, photographic and art exhibitions. In addition, NYU Accra has hosted a number of researchers from NYU School of Medicine and from other health-related schools and departments. The center has served as a bridge for such faculty to connect with their colleagues in local institutions, especially the University of Ghana, Legon. We recall the visit of Dr. Robert Berne, Senior Vice President for Health, New York University, New York, and his team in 2008, which set the stage for a number of faculty members and their interns to visit Ghana for research and training purposes. These visits culminated in the establishment of several unique and innovative health partnerships with the University of Ghana Medical School, Dental School, and School of Public Health and the Korle Bu Teaching Hospital in Accra.

Given this ongoing engagement of NYU with the local medical community, we thought a health-liberal art intercampus symposium would highlight the diversity of NYU’s academic partnerships in the country and common ground among so many different faculty and areas of expertise.

To end, I wish to take this opportunity to thank the Global Research Initiatives, Office of the Provost, NYU, for supporting this symposium. To follow, I am happy to share with you a compilation of abstracts and photos from the Symposium on the Healing Environment and the Creative Arts.
It is a fact that one cannot avoid the daily pressures that modern life imposes on us. What we can perhaps do, is to offer ourselves the best available tools to help us overcome some of life’s challenges that confront us on a daily basis. There is ample evidence that we can explore to support the view that the arts help in no small measure in creating the necessary congenial setting and stimulus for the well-being of the individual and the community as a whole.

According to the [African] traditional view, a human being is made up of body, mind, and soul.... [Therefore] a person is healthy if his body, mind, and the soul are closely connected (Klaus & Ritz-Müller, 206: 1999). The approach to healing is usually holistic when dealing with any unexplained signs of disruption of the well-being of the individual or a calamity in the community.

Many communities in Africa usually, therefore, seek therapeutic intervention for physical, mental, and emotional challenges that confront them through artistic and supernatural processes. Any enigmatic occurrences that affect the physical, emotional, and even the environmental safety and general well-being of the individual or the community are usually resolved through divine and creative intervention in the form of rituals and ceremonies—including musical, dance, and other artistic and cultural manifestations.

This presentation interrogated the important role traditional arts play in the maintenance of a healthy body, mind, emotional, spiritual, social, and environmental security of the individual and the community—within the context of healing and well-being. The paper further suggested ways in which the potential spawning, stimulating, and palliative effects of the performing arts could be extrapolated to help address the processes of healing.

Citation
The global tobacco epidemic is predicted to cost a billion lives during this century, a tenfold increase over the previous one. While tobacco use rates have been declining steadily in most high-income nations, rates continue to rise in most low- and low-middle-income countries. The WHO has predicted that tobacco use will likely become the leading cause of preventable death worldwide by 2030. Deaths from noncommunicable diseases are rising worldwide, especially in low- and low-middle-income countries, and tobacco use is a main contributor.

Ghana is a case in point. It has just emerged from being a low-income nation, to a low-middle-income nation; during this transition, smoking rates have risen. For example, while only 0.4 percent of adult females report being current smokers, 2.9 percent of female youths (aged 13-15) are current cigarette users, and 10.6 percent currently use tobacco products. The differential between male youths and adult males is much narrower. The general theory is that with increased personal resources and an increased presence of the tobacco industry as a local force marketing its products, smoking rates go up among youth. These rates are sustained over time, resulting in cohorts who smoke at higher rates over time. This trend continues until strong tobacco control measures such as higher product taxes, clean indoor air laws, and public education campaigns are instituted to counteract it.

The truth® Campaign, created through funding from the historic Master Settlement Agreement between the tobacco industry and the U.S. attorneys general, was initiated in 2000 to combat youth smoking initiation through mass media public education. In a country undergoing a significant youth smoking epidemic, smoking rates can rise as high as 40 percent and above. Among those who continue to smoke, half eventually die from smoking in high-income countries. Adolescence is a time of behavioral experimentation among youth in general, and they are highly susceptible to smoking initiation during the period of time when they begin to assert control over their own lives. The tobacco industry skillfully exploits this opportunity to attract lifelong customers. The truth® Campaign offers an “art-full” way to counteract the influence of big tobacco by offering an appealing counterbrand that can capture the hearts and minds of youth.

The brand invites youth to think for themselves and to rebel against the agenda of big tobacco, bent as it is on addicting them. Data show that the campaign implemented in the U.S. was highly effective in leading youth to reject smoking. In its first four years alone, the hard-hitting ad campaign was responsible for 350,000 youth not starting to smoke and as a result significantly reduced future health care costs.

To the maximum extent possible, countries should implement the provisions of the Framework Convention for Tobacco Control, in particular higher prices for tobacco products, clean indoor air laws, cessation efforts, and public education, especially hard-hitting campaigns that emphasize the predatory nature of the tobacco industry. Such campaigns resonate with youth and help curb the growth of the smoking epidemic.
Combining Traditional and Modern Participatory Arts—
Music, Theatre, Storytelling, and Fine Arts—in Healing

Charlie Haffner, Director General, Freetong Players International, Sierra Leone

In Sierra Leone, I have always been engaged in community education through the use of dramatic arts and traditional methods of communication (combining education and entertainment) to sensitizing our wider, rural, poor, illiterate communities on any issue “under the sun”—ranging from conflict and peace, health education, safe motherhood, child survival, protection from domestic violence, youth entrepreneurship, anticorruption, football, childhood rights, gender equity, and Pan Africanism—you name it: the Freetong Players “have been there, done it, and put on the T-shirts.” Hundreds of teachers, adult educators, health workers, traditional entertainers, dramatists, musicians, and community animators are benefiting from our programs.

In most areas of Africa, the ancient system of healing continues to thrive, and attempts to control the sale of traditional herbal medicines have failed. Traditional and religious medicine involves diviners, traditional midwives, and herbalists. Diviners are responsible for determining the cause of illness, which in some cases is believed to stem from ancestral spirits, witchcraft, and other influences. More than 90 percent of people living in Sierra Leone are affiliated with some form of religion, be it Christian, Muslim, or traditional. And many believe that after participating in certain traditional rituals, individuals can acquire supernatural immunity from gunshots even though they may not be wearing any visible forms of protection or cure.

Traditional and religious leaders claim to be able to cure a wide range of conditions, including cancers, AIDS, psychiatric disorders, high blood pressure, cholera, infertility, and most venereal diseases. Other applications include epilepsy, asthma, eczema, hay fever, anxiety, depression, urinary tract infections, gout, and healing of wounds and burns. The World Health Organization (WHO) estimates that 80 percent of people in Africa regularly seek the services of traditional healers who have huge influence on the attitudes and behavior of their followers. In Sierra Leone, the Traditional Healers Association is now fully legally recognized and gradually working together with Western-trained doctors in the treatment of culturally based illnesses.

Health care must be viewed as a comprehensive approach to combat all factors contributing to the disease process. The integration of all therapies—peaceful and comforting surroundings, stress reducers, caring health care providers, together with evidence-based medicine—creates a healing environment. Therapies for treating the body, mind, and spirit in the context of the patient’s culture and natural surroundings have been found to include the following: manipulation, massage, acupuncture therapy, biofeedback, guided imagery, naturopathy, healing energy, aromatherapy, pet therapy, traditional and religious healing, and arts therapy. Arts therapy is an established mental health profession that uses the creative process of art making to improve and enhance the physical, mental, and emotional well-being of individuals of all ages. It is based on the belief that the creative process involved in artistic self-expression helps people to resolve conflicts and problems, develop interpersonal skills, manage behavior, reduce stress, increase self-esteem and self-awareness, and achieve insight.

The history of performing arts is as old as the history of human beings. It is simply because performing arts activities—singing, dancing, painting, playing musical instruments, and composing—are an integral part of human life. Performing arts can be healing and nurturing to human life. The healing power of music has long been recognized throughout history. People can feel its effects. Research shows that listening to good music lowers blood pressure, stabilizes heart rate, relieves depression, reduces pretreatment anxiety, enhances concentration and creativity, lessens the need for sedatives and painkillers (during and after surgery), reduces nausea after chemotherapy, and also improves stability of people with such diseases as Parkinson’s.

The Freetong Players group was born out of the need to revolutionize the Sierra Leonean theatre by expanding its traditional role of entertainment and rituals to an effective tool to inform, communicate, educate, and mobilize communities. Our mission: using traditional folksongs and theatre in developing motivation, perseverance, character, and patriotism. Motto: “Drama for all—for the people, with the people.” We are specialists in a cappella music. Our repertoire is firmly rooted in the African traditional style, using music, dance, drama, storytelling, and other artistic forms of expression to present traditional African culture.

The group emerged during an era in Sierra Leone when the national illiteracy rate had hit 85 percent and when 75 percent of the country’s children had to be immunized. Information needed to reach the massively illiterate mothers whose children were dying of tuberculosis, measles, whooping cough, and polio before reaching their first birthday. The same illiterate breastfeeding mothers needed information and messages on neonatal tetanus, STDs,
HIV/AIDS, teenage pregnancy, safe motherhood, and family planning.

It was also at the time when the national radio and TV of Sierra Leone were completely nonfunctional, when newspapers could not even reach the minority 15 percent literates based in Freetown. So the Freetong Players became the radio, TV, newspaper, and “Yeliba” town crier, or griot, and the energizer of community theatre in Sierra Leone.

Freetong Players have indeed been combining traditional and modern healing with traditional and modern participatory arts—music, theatre, storytelling, on live stage, television, and radio across Sierra Leone. Without realizing it, Freetong Players have been using creative arts therapy with children, adolescents, adults, older adults, groups, and families, assessing and treating conditions like anxiety, depression, and other mental and emotional problems and disorders, including family and relationship issues, abuse and domestic violence, social and emotional difficulties related to medical illness, and helping both children and adult patients with depression gain self-esteem and improved moods.

Without realizing it, our music, theatre, and stories are being used in enhancing healing processes, enriching communities, and encouraging wellness, thus underlining the Freetong Players’ mission of service to all and confirming our position as a cultural innovator committed to weaving the thread of the arts into the fabric of all human development endeavors.

As the symposium promised, I have come to the realization that “every element of healing is rooted firmly in the artistic dimension of human experience; while there is no medicine without scientific evidence, there is no healing without the creative arts.”

Our country’s national healing, health agendas, and policies are motionless when it comes to the role of arts, culture, and holistic healing, blended medicine, and therapeutic arts. I want to recommend, on behalf of the Freetong Players, that such awareness-raising programs like this symposium are replicated in Sierra Leone, ones that will lead to the setting up of art therapy programs still absent in our hospitals, clinics, public and community agencies, wellness centers, educational institutions, businesses, and private practices. I and the Freetong Players will be in the lead.

As the Freetong Players have just begun the publication of the first newspaper of arts, culture, education, and entertainment, I can assure this house that a column on environmental healing and creative arts has already found a place in subsequent editions. Finally, with the acquisition of three acres of land at a seaside resort outside Freetown for the construction of an academy of arts in memory of my late wife, Fatie Haffner, who passed a year ago next month, 10th October, thanks to H.E President Ernest Koroma and his government, I can assure this house that, with your support, healing environment and creative arts could well secure a place in its curriculum. Mark my words. I thank you all for listening to me.
Empowering the Patient: An Artistic Balance

Hawthorne E. Smith, Ph.D., Clinical Director, Bellevue/NYU Program for Survivors of Torture
Clinical Assistant Professor of Psychiatry, New York University School of Medicine, New York, USA

“...the effort lies the art.” Healing and the creative arts should be viewed as a “both-and” proposition, as opposed to an “either-or” dichotomy. The role of art in the healing process should not be considered as an adjunctive or peripheral pursuit. Art is central to the healing process, as it is essential to one’s engagement and connection to others, as well as one’s connection to self.

“Powerful medicine is useless, unless it is taken...” Artistic expression enables people to access and utilize the services and interventions they merit. Examples are cited from the experiences of NGOs operating in Africa, who needed to adapt their interventions and incorporate art for community outreach—in order to successfully engage potential clients in their services.

“Environmental safety is essential.” Art plays a key role in creating a physical environment that is conducive to diminishing fear and mistrust of medical and clinical settings. Physical space, light, color, sound, and culturally meaningful artistic expressions are all aspects that must be considered in order to create effective entry points to healing relationships.

“Needed, not just needy...” Clients may also be empowered through the arts. Here, we emphasize the importance of the client's narrative and their unique oral history. The healing and cultural expression of “the story” can help people to find their voices in situations where they have been marginalized. They may also be crucial in the healing process of others and internalize that they are valued and valuable members of a healing community. It is important for the healing practitioner to utilize cultural idioms that are comfortable and appropriate to facilitate sharing and mutual understanding.

“Laughin’ to keep from cryin’...” Humor is an area that is frequently neglected when healing arts are discussed—especially in the context of trauma. Examples are shared of survivors sharing humor in situations that were otherwise dire and frightening. The question, “How could they laugh at this?” soon becomes, “How could they not laugh at this?” in the context of overcoming and healing from trauma and hardship.

“A little bit of wisdom can be found everywhere...” The tales of Anansi from Ghana have spread far and wide and are an integral part of the folklore of black people in the U.S. and Caribbean. One tale is shared that speaks to the notion that wisdom and common sense are spread far and wide. We are encouraged to keep our eyes open to the wisdom that exists among our clients, among the various artistic and healing disciplines, among our colleagues, and among ourselves. This wisdom will help guide us in creating effective healing environments.
Creativity is a primary ingredient indispensable for invention, innovation, and ingenuity. In healing, the creative abilities of an individual (healer) are sourced, tapped, and converted into various “products” through imagination and observation. By some intuitive, imaginative engineering, one is able to produce a new “product” in any field of study; therefore, healing, which is the inexhaustible and insatiable human need and requirement, becomes the number one concern of humanity to overcome infirmities, disease, and sickness. The human person over the years has had to be most creative in order to improve upon living standards and therefore health conditions. The healer masters the art and skill of dealing with diseases and ailments. As much as the human individual will want to remain consistently healthy and physically fit, the years and a sum total of their observations, their belief systems, and their repeated acts of intervention in their search for good health form the basis of the art of healing, which is also the basis for the evolution of modern medical and biological sciences. Healing requires an environment that is conducive and inductive in promoting good health. The human person is complexly crafted. Disease or sickness can set in at any time, and this could be physiological, mental (psychological), pneumatological, emotional, or spiritual. The environment, no doubt, among other factors is paramount in keeping individuals healthy.

The healing environment could be categorized into tangible environment as well as intangible environment. Under the tangible environment, space for both the healer and patient are indispensable. They both need some form of accommodation (space) that can house them. It could be a natural environment, i.e., in the forest, along the seashore, in a cave, etc.; it could also be in a building created by man, like a hospital, a guesthouse, or a recreational spot. All of these are tailored and consciously appropriated for healing purposes. Solid, liquid, and gaseous materials as intervention in the process of healing, i.e., water, oils, plants, fruits and seed/nuts, saps from tree barks, leaves, tree barks and roots, clay, and some animal parts, may be used in healing under the tangible environment category.

The intangible environment aspects of healing range from the use of words, songs (music), dance (movements), rhythm (i.e., performing arts), thought power, breathing exercises, fasting, meditation and prayer, sacrifices, and other religious practices; not directly applying any tangible products to the body, emphasis is laid on relationships, confession of sins, expressing deep faith, and living in harmony with oneself, others, and nature in general. In this presentation, I referred to the ancient healing site in Buem in the Volta-Region of Ghana known as Akrofo-Kyirikasa Sanctuary.
Traditional healing practices for disease conditions have existed in all human communities for ages. They are rooted within cultural and belief systems of the particular society. In Ghana, as in many other African countries, Western medicine was introduced with the advent of colonialism and has over time assumed the status of “modern” medicine. Whilst modern medicine has thrived, traditional healing remains the first or preferred choice for many people. Both are utilized liberally by many people. The duality of options and use, with their different approaches to therapy, poses a challenge to any modern medicine practitioner. This is particularly so in people with psychological or psychiatric disorders in which the symptoms and their interpretation may be influenced by the individual’s beliefs.

This presentation described traditional healing, including faith-based systems, as well as modern approaches to therapy of mental disorders. The differences in environment and approach to healing were discussed. It focused on how and why the doctor should recognize and manage the patient’s expectations in the therapeutic relationship and how the doctor practicing modern medicine can successfully and ethically treat patients with a traditional mindset to their illness.

During most of recorded history, the majority of human beings have cultivated the earth, growing vegetables and tending animals. Most cities witnessed a strong presence of vegetable gardens, farmers markets, and manure collection. Even a completely urbanized context like that of Venice, with its notable shortage of land, reserved the island of Sant’ Erasmo for growing food. By the late 20th century, however, many industrialized nations retained as few as 1 percent of the population as farmers. Recently, an increasing concern for personal health and the health of the planet have led many people from the same industrialized contexts to tend small urban allotment gardens. In this presentation, I will consider the allotment phenomenon and its repercussions for urbanism. The garden as therapy, the garden as a place to recuperate wasted urban fabric, and the garden as a means of soothing troubled urban lives retains a deep interest from an aesthetic, political, nutritional, and medical point of view. The author has worked with numerous civic groups and during the last decades has attempted to convert the allotment into a component of public parks.
Community garden, East New York, USA

Community garden, Florence, Italy

Sack gardens, Kenya

Monza garden, Italy
Out of Your Mind? Creative Arts and Mental Health Promotion in Ghana

Ama de-Graft Aikins, Director, Centre for Social Policy Studies, University of Ghana, Legon, Accra, Ghana, and Bernard Akoi-Jackson, M.F.A., Kwame Nkrumah University of Science and Technology

Ghana has a significant mental health burden, with 10 percent of the population living with moderate to mild mental disorders such as depression and 3 percent of the people with severe mental disorders such as schizophrenia. The country’s health system is weak, and mental health care is not integrated into primary health care and public health. Less than 5 percent of health care funds are allocated to mental health care, and there is a severe shortfall in mental health professionals. There are high levels of institutionalization and a revolving door problem whereby discharged patients repeatedly return to the psychiatric hospitals or to other healing centers such as prayer camps and traditional religious shrines. Representations of mental illness are negative, and stigmatization of persons with mental illnesses, of family members, and caregivers of the mentally ill, and of mental health professionals is high. There has been increasing attention and emphasis placed on the need for community-centered approaches to mental health promotion and care. Mental health NGOs offer mental health education in schools, counter-acting negative media on mental health, and offer social and economic support to poor families affected by mental illness. A mental health bill has been developed with an emphasis on rights-based community mental health care. These important advances in practice and policy provide an important context to develop locally relevant mental health promotion models that operate outside institutional contexts.

At NYU’s Healing Environment and the Creative Arts Symposium held in Accra in September 2013, we reported a pilot study that aimed to explore the role of creative arts in mental health promotion in Ghana. The study adopted a “community arts and health” approach in the development and evaluation of an educational mental health exhibition. The exhibition aimed to promote dialogue on mental health among diverse groups, including arts enthusiasts, mental health professionals, workers and researchers, psychiatric patients, and the media. Art in the community is “oriented towards the broader social determinants of health...practice typically takes place in community (including health care) settings; involves the active participation of individuals or groups (rather than “audiences”); and is aimed at improving health and well-being in its evidentiary sense (that is, not treatment or therapy)” (Putland, 2008: 266).

Within the African context, the arts—in particular visual and dramatic arts—have been used for mental health promotion and rehabilitation in postconflict countries such as Sierra Leone, Liberia, and Uganda. Emerging research in East and Southern Africa focuses on the role of visual art—drawing, painting, and photography—on the expression of well-being or psychological distress among children who provide HIV/AIDS care in the home. Our study had three components:

An arts program with inpatients at Pantang Psychiatric Hospital facilitated by an artist (the second author), which led to the production of paintings and crafts.

An exhibition of artwork produced by the patients and the artist, photographs from an anthropological study of rural experiences of severe mental illness, and commissioned works on mental health from visual artists.

Evaluation of the impact of the exhibition was done on visitors’ knowledge and attitudes to mental illness through analysis of participant observation, media outputs, and written and recorded comments.

The exhibition was titled Out of Your Mind: Promoting Dialogues on Mental Health in Ghana. It ran for one week at the Nubuke Foundation in Accra during February 2009. About 200 individuals visited the exhibition over the period. Data analysis suggested that most visitors to the exhibition had little knowledge of the scale and impact of mental health problems in Ghana, and especially of rural experiences. This reflected the state of mental health care in which resources are focused on institutionalized patients in urban areas, with severe neglect of community mental health care and mental health promotion. Visitors also reported a strong cognitive and emotional response to the anthropological photographs and the artwork produced by patients and the artist. These works, which facilitated entry into the experiential worlds of those living with mental illness, appeared to provoke a reappraisal of attitudes toward this stigmatized group (see “Female Patient Chained and Fasting at a Prayer Camp,” “A View of Danso’s Junk Treasure Trove,” and “Rainbow”).

The exhibition was featured by Ghana Television (GTV), the British Broadcasting Corporation’s (BBC) Focus on Africa, and local journalists and bloggers. There was strong support for the exhibition approach to mental health promotion in the media accounts as well as in visitors’ accounts. The impact of ethnographic photographs and patients’ artistic work suggested that future exhibitions were more likely to be effective if they included visual life stories of mental illness experience. It is acknowledged in the health promotion literature that health education has a greater impact when prevention messages are presented by people affected by the target condition. Art exhibitions are curated in Accra, the country’s capital, and other cities like Kumasi and Takoradi. While they tend to receive considerable attention and patronage from middle and educated classes, media coverage extends and amplifies the message of exhibitions to wider audiences. The proceeds of our exhibition supported a structured art therapy program at Pantang Psychiatric Hospital for patients with affective disorders and substance abuse problems. In the future, we aim to test the feasibility of the “community arts and health” approach to mental health promotion in community spaces in Accra and to secure funding to scale up the project through a traveling exhibition to other parts of the country.

“Rainbow” by Yaganona Baatoulkuu and Art Therapy Group, 2006

“Female Patient Chained and Fasting at a Prayer Camp.” Photo by Ursula Read, 2008

“A View of Danso’s Junk Treasure Trove.” Photo by Bernard Akoi-Jackson, 2006
Clinical and Research Training at the NYU Wagner Graduate School of Public Service, Professor of Social Psychology and Director of the Health Sciences where among other roles she oversaw hospital affiliation affairs. She directed multiple service and research grants and has published over 100 peer-reviewed papers and special reports on a variety of public health related topics. Dr. Healtón's career in the field of public health has earned her national recognition and praise. She is the recipient of numerous prestigious awards.

Mr. Charlie Haffner, one of the living “Legends” of the West African Theater Scene is a playwright and song-writer and an oral historian. With his late wife Fatie Haffner (Maman G), they founded in 1985 at a time when newspapers could not even reach the minority communities. Mrs and Mr. Haffner (oral historian and storyteller, town crier and/or griot) when over 90% of the country’s drama groups got shut down as a result of the government’s ban on theater performances in Freetown City Hall, the only perfect venue available and at a time when our country’s national radio and TV were completely non-functional, when newspapers could not even reach the minority 15% literates mainly based in Freetown and the provincial towns. So the Freetown Players (PPF) served as the Radio, TV, Newspaper and Yelba (traditional oral historian and storyteller, town crier and/or griot) throughout the whole country. Mrs and Mr. Haffner then continuously developed since the foundation of the PPF traditional and modern folksongs, dance and storytelling for the stage.

Featured Speakers

Professor Ama de-Graft Aikins is an Associate Professor of Social Psychology and Director of the Centre for Social Policy Studies (CSPS), University of Ghana, Legon. Her research interests include representations and experiences of chronic physical and mental illnesses among African communities. She has published research on diabetes, cardiovascular diseases and mental health in Ghanaian and African communities. Her current research focuses on diabetes and obesity among Ghanaians in Ghana and Europe, food beliefs and dietary behavior among Ghanaians and obesity among Ghanaians in Ghana and Europe, communities. Her current research focuses on diabetes and hypertension care in Ghana to community health workers and faith-based organizations. She is a visiting Senior Research Fellow at LSE Health, London School of Economics and Political Science.

Rev. Dr. Elias Kwaku Asiam, PhD holds a Diploma in Drama and Religion and M.Phil/Ph.D in Theatre for Development from Southampton University (King Alfred’s College) in the United Kingdom. He is currently a faculty of the School of Performing Arts, University of Ghana, Legon and lectures in Theatre for Development also known as Theatre in Extension Communication. He has served on several international research organizations in capacities including being one of the principal investigators on Climate Change for Penn State University and others.

Professor Richard Ingersoll (b.1949) Ph.D. from UC Berkeley, Associate professor at Rice University, 1986-97; currently teaches in art, architecture and sustainable urbanism at NYU in Florence, and Syracuse University in Florence (Italy), and the Politecnico di Milano. His recent publications include World Architecture: A Cross-Cultural History (2013), Speerstown, Looking for the City on its Edge (2006); World Architecture, 1900-2000. A Critical Mosaic, Volume I. North America, USA and Canada (2000).

Professor F. Nii-Yartey is an Associate Professor and the Chairman of the Department of Dance in the University of Ghana, Legon, the artistic director of the Ghana Dance Ensemble, and the National Dance Company of Ghana. He has been in the forefront of the development of Dance-Theatre and Contemporary African Dance in Ghana for many years. Nii was recently a Visiting Cornell Professor at Swarthmore College, Pennsylvania. He has just completed a Visiting Professorship at Keene State College, New Hampshire. He has also served as a consultant and is a member of numerous local and international boards and committees.

In 1998, Nii-Yartey began to set up a private dance institution in Ghana, Yenom African Dance Institute, the first of its kind in the country to further explore his choreographic vision. Both in his written work, scholarship and choreographic works, Nii-Yartey seeks to investigate ways in which dance can both reflect and shape social change. He was awarded the Grand Medal (Civil Division) by the Head of State of Ghana in the year 2000, for his contribution to Choreography and Dance Development in Ghana.

Dr. Ebenga Ogedege is a Professor of Medicine and Director of the NYU Center for Healthful Behavior Change at New York University School of Medicine. After his internal medicine residency at Montefiore Medical Center, New York, he completed his fellowship training in Health Services Research and Clinical Epide- miology at Weill Medical College of Cornell University and has received his MPH from Theology, B.A. (Hons) in Drama and Religion and M.Phil/Ph.D in Theatre for Development from Southampton University (King Alfred’s College) in the United Kingdom.

Dr. Hawthorne Smith is a licensed psychologist and Clinical Director of the Bellevue/NYU Program for Survivors of Torture. He is also an Assistant Clinical Professor at the NYU School of Medicine in the Department of Psychiatry. Dr. Smith received his doctorate in Counseling Psychology (with distinction) from Teachers College, Columbia University. Dr. Smith has previously earned a Bachelor of Science in Foreign Service from the Georgetown University School of Foreign Service, an advanced certificate in African Studies from Cheikh Anta Diop University in Dakar, Senegal, as well as a Masters in International Affairs from the Columbia University School of International and Public Affairs.

Organizers

Dr. Arossah Anyidoho, PhD, is the inaugural Director of NYU Accra study abroad program which has been in operation since 2004. Staring with 25 students at the inception of the program, Dr. Anyidoho has seen its growth to an average of 600 students per semester. She oversees curriculum development as well as the recruitment of faculty, staff and guest lecturers. Prior to NYU Accra, Dr. Anyidoho was a faculty of the Department of Linguistics at the University of Benin, teaching both undergraduate and graduate courses in phonology, morphology, phonetics and language teaching and learning. She received her undergraduate education at the University of Ghana, Legon and later obtained a doctoral degree from the University of Texas, Austin. Her research interests include language and gender and the teaching of indigenous languages in multilingual Africa.

Dr. Nathan Bertelsen, M.D., is a clinician educator in internal medicine at Bellevue Hospital Center, Assistant Professor of Medicine and Population Health at New York University School of Medicine, and Director of Primary Care at Bellevue/NYU Program for Survivors of Torture. He studied government/international relations at Georgetown University, graduated from University of Minnesota Medical School, and completed residency in internal medicine at Cornell University/New York Presbyterian Hospital. At NYU, he currently organizes overseas medical electives for medical students and residents, and serves as Director of the Global Health Selective. He believes primary health care is a right for all, and necessary for any successful effort in sustainable development.
School of Performing Arts, University of Ghana, Legon

The School of Performing Arts of the University of Ghana, Legon, was established in October, 1962 as a section in the Institute of African Studies, but became autonomous in 1978. It offers undergraduate and graduate degree in Dance, Music and Theatre Arts. It also offers non-degree diploma programs in Music and Dance. Through its faculty and student productions and outreach programs, the School continues with the enrichment of the cultural life of the university and its surrounding communities. Abbigromma, the resident theater group of the School is well-known in all of West Africa for its high quality performances.

New York University/Global

New York University, the largest independent research university in the United States, is primarily located in the heart of downtown Manhattan. Beyond our campus in New York City lies a world opportunity within NYU’s global network. With NYU Abu Dhabi and NYU Shanghai, our new degree-granting campuses, as well as 11 international academic centers in Africa, Asia, Europe, North America, and South America, NYU offers global experiences to all members of its community.

NYU has embarked on the project of becoming a Global Network University; a university that challenges the idea that a university can only deliver education at a single home campus. Instead, we have created a structure that allows students and faculty to gather in a set of key locales around the globe to forge new ideas, advance the questions we ask about the world, and create solutions for the problems that beset us all.

Art Exhibition by Foundation for Contemporary Art, Ghana

The FCA is an active network of artists created to offer an alternative platform for the presentation, development and promotion of contemporary art in Ghana. FCA encourages dialogue, experimentation and explorations. Through these avenues, its members aspire to develop and expand as they network and collaborate with artists and art organizations on local, regional and international levels. FCA organizes exhibitions, seminars, workshops and issue publications to raise awareness of and develop critical thinking about contemporary art and artists in Ghana.