

# Lincolnshire Culture and Nature for Health & Wellbeing Project

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# 01

## **Introduction**

The National and Local  
Landscape of Unpaid Care



# The National and Local Landscape of Unpaid Care

Across the United Kingdom, unpaid carers provide an estimated £162 billion worth of care annually, forming the indispensable, yet often overlooked, foundation of the health and social care system.

It is also often a role that the carers themselves don't realise they've taken on, with 36% of people in that position taking over three years recognise that they are a carer. This delayed recognition means that many struggle for years without support, their own needs rendered invisible even to themselves. In Lincolnshire, this reality is acutely felt.

With a significant elderly population and vast rural geography, the challenges of isolation and access to services are magnified. Unpaid carers in the county, whether supporting an ageing parent, a partner with a long-term illness, or a child with disabilities, find themselves in a role that is as emotionally and physically demanding as it is vital.

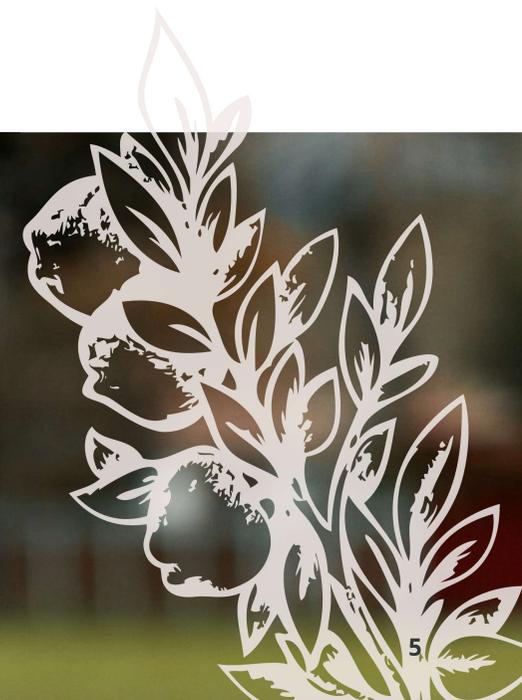
The relentless nature of the caring journey also impacts the carer's themselves, who will often experience a perpetual state of stress, anxiety, isolation, while completing the many tasks that make up their daily routines, and navigating the unexpected crises that regularly occur.

## Taking on this role often comes at a severe personal cost but remains largely hidden from public view.

Evidence shows that the role of unpaid carers leads to a high prevalence of health issues among carers. As detailed in the House of Commons Health and Social Care Committee's report, *Adult Social Care Reform: the cost of inaction* (May 2025), carers experience disproportionately worse health outcomes compared to the general population. The report shows that unpaid

carers are twice as likely to suffer from poor health, a disparity driven by a lack of information and support, financial concerns, stress, and social isolation. Furthermore, the evidence highlights that almost half (48.6%) of all unpaid carers report at least one adverse health effect directly as a result of providing care. The Carers Trust contribution to the Commons' report repeatedly emphasises that carer burnout is a direct consequence of an unreformed adult social care system, which creates an unsustainable reliance on unpaid carers to fill the gaps in provision. This burnout has a far-reaching impact. It leads to a significant

deterioration in carers' physical and mental health, with evidence citing it as the leading cause of carer breakdown and pointing to alarming outcomes such as suicidal ideation. Furthermore, burnout creates a double cost for the state, as the system must then provide expensive, unplanned support for both the carer and the person they care for. Ultimately, this cycle of burnout directly threatens the sustainability of the entire care system by undermining the informal workforce that supports it, thereby exacerbating the crisis and escalating costs for the NHS and local authorities.



Historically, support for carers has been reactive, meaning that it has typically been initiated only after a carer reaches a point of crisis, burnout, or health issues.

However, it has long been recognised that this approach is both unsustainable for the system and detrimental to the individual. This also highlights the urgent need to shift towards a proactive, preventative model. The challenge then is to move beyond simply signposting traditional, overstretched, services and instead design interventions that improve local support for unpaid carers, helping them to connect with others and contribute to their wellbeing and resilience.

The intervention developed to in response to this challenge and evaluated in this report aligned with the national drive towards three interconnected movements:



### **Social Prescribing**

Which enables GPs, link workers and other health professionals to refer people to a range of local, non-clinical services to improve their health and wellbeing.



### **Creative Health**

Which utilises arts and creative activities in promoting health and preventing illness.



### **Community-centred Public Health**

A whole-system approach that mobilises community assets and fosters social connections to address the underlying, non-medical causes of poor health.

Together, these approaches seek to build health and wellbeing into the fabric of communities, moving the focus from treating sickness to actively fostering long-term wellness and resilience.

## In response, a holistic model was developed for the project built on 5 core principles:

### 1 Co-production

This was not a project designed for carers, but one created with them, ensuring every element was responsive, relevant and informed by their lived experience.

A collaborative process was employed from the outset, with four co-production workshops held to co-design the logistical framework of the workshops. This was key to dismantling barriers to participation, with carers identifying the logistical pillars. For instance, they determined the optimal time for scheduling sessions. This was 10:30 to 14:30, as it allowed for morning duties to be completed and ensured a return home in time to meet evening responsibilities.

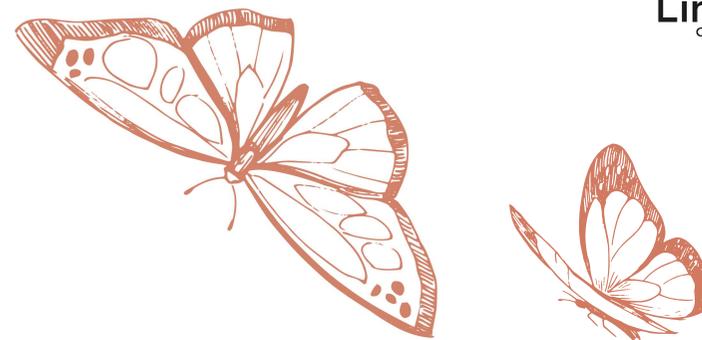
The focus group also identified the ideal session length and repetition. They expressed a clear preference for 8 x 4-hour sessions rather than more frequent shorter ones.

It was also recommended that there was one workshop per month over a long period (running from September 2024 to May 2025, excluding January), as this schedule made it easier to plan and secure respite, thereby embedding the project as a reliable and sustained source of support in their lives, rather than a fleeting intervention.

Alongside this, Every-One worked closely with the artist and carers to co-design the creative content of the sessions themselves. Rather than prescribing activities, the artist offered a range of possible approaches, which carers responded to by sharing ideas, preferences, and creative interests. This ensured that session content emerged through dialogue and collaboration, remaining flexible and responsive to carers' needs and capacities over time. In parallel, Every-One and Age UK Lincolnshire worked

with carers to identify the most appropriate timings and processes for arranging at-home support that would release carers to attend sessions. It became clear that participation could only be made possible through a wrap-around model of support, rather than treating workshop attendance as an isolated activity.

As part of this process, carers produced a one-page personal profile of the person they care for, which was shared in advance with Age UK Lincolnshire support workers. This enabled support to be matched appropriately, ensuring that workers with the right skills and experience were allocated. Approximately one third of carers participating in the project required this additional support, highlighting the importance of embedding practical care arrangements within the project's co-produced design.

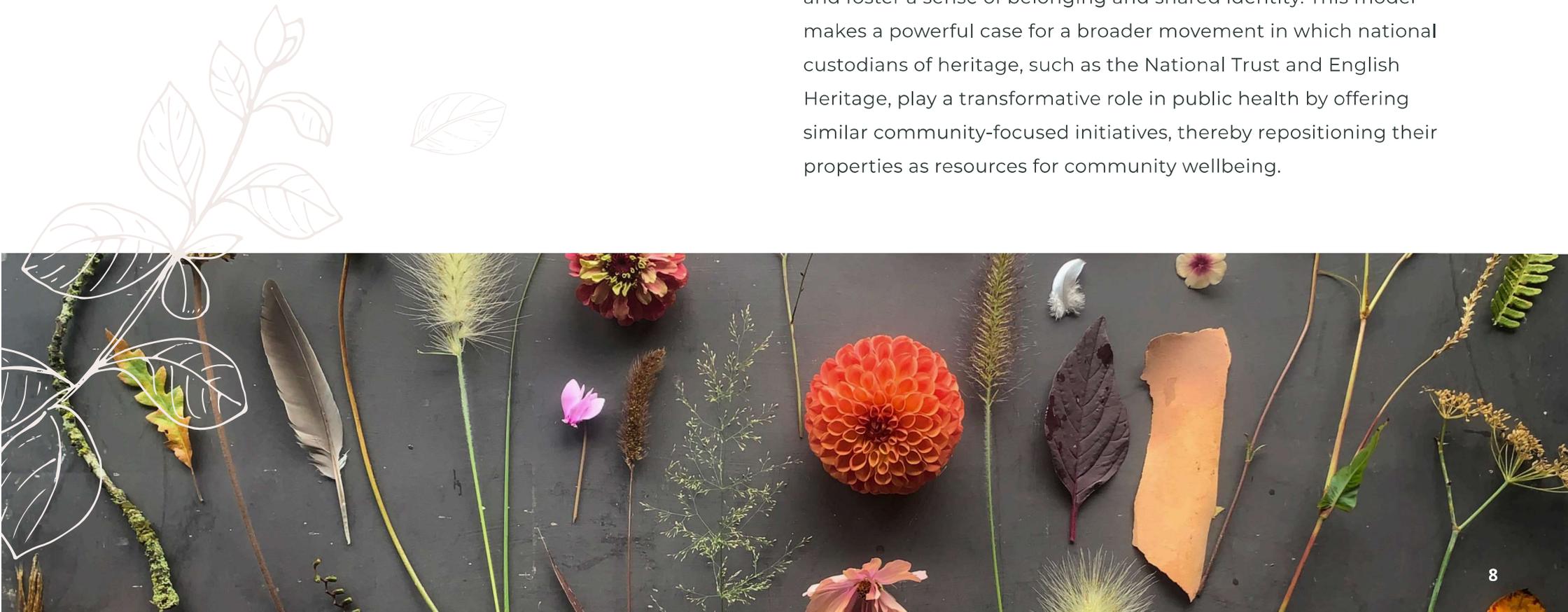


## 2 Integrating Support

The project embedded respite care and transport solutions. By providing reliable, trusted care for the person they cared for and ensuring all transport was either provided or paid for, the project made participation psychologically and logistically feasible. This removed the twin primary barriers of complex care arrangements and travel costs that can exclude carers, thereby ensuring the intervention was truly accessible.

## 3 Harnessing Heritage Assets for Wellbeing

The project utilised local heritage assets not merely as venues, but as active, therapeutic environments in a community's health infrastructure. This approach challenged the conventional view of historic estates as being primarily for tourism and revenue generation, or as exclusive spaces closed off to those unable to pay an entrance fee. By embedding wellbeing programmes within these settings, the project demonstrated their potential as accessible, restorative environments that can combat isolation and foster a sense of belonging and shared identity. This model makes a powerful case for a broader movement in which national custodians of heritage, such as the National Trust and English Heritage, play a transformative role in public health by offering similar community-focused initiatives, thereby repositioning their properties as resources for community wellbeing.



## 4 Nature as a Creative Catalyst

Each session was rooted in the immersive environment of the gardens, where nature served not just as a backdrop, but as the primary material and muse for the workshops. Participants engaged directly with the seasonal landscape using a variety of crafts and artistic techniques. Crucially, the focus of these workshops was on the creative process and the connection to nature itself, not on talking about their roles as carers.

## 5 Measuring What Matters

To capture the complex, human outcomes of this intervention, the project developed and implemented a bespoke evaluation methodology, that moved beyond simplistic metrics in order to understand the nuanced shifts in wellbeing, connection, and identity. This approach sought to evidence the invisible impacts that standard evaluation methods and wellbeing scales often miss.



**This report details the design, delivery, and outcomes of this project, presenting a robust case for the integration of such models into mainstream health and social care strategies.**

**It serves as a comprehensive evaluation, offering in-depth qualitative findings to demonstrate the transformative potential of this project and the approach.**



# 02

## Project Genesis and Strategic Framework



# Project Genesis and Strategic Framework

The Project, formally titled the Culture and Nature for Health and Wellbeing project, was initiated as a direct response to the national Accelerating Reform Fund (ARF).

In October 2023, the Minister of State for Care tasked local authorities with forming consortia to adopt innovative projects, with a specific focus on unpaid carers (<https://www.gov.uk/government/publications/accelerating-reform-in-adult-social-care-in-england>). Lincolnshire County Council, in collaboration with its Integrated Care System partners, put forward this project as one of three successful bids, securing £100,000 in funding to deliver a programme founded on the evidence-based benefits of arts, heritage, and nature for health and wellbeing.

**The project was designed with several core strategic work strands to ensure both immediate and long-term impact.**

**These were as follows:**

- A co-produced programme of high-quality activities for unpaid carers.
- A dedicated training programme for support workers to enable continuation of activities.
- The creation of online, downloadable resources for public use.
- A full evaluation to assess efficacy and impact.
- Exploration of how to embed culture and nature activities into existing care systems.

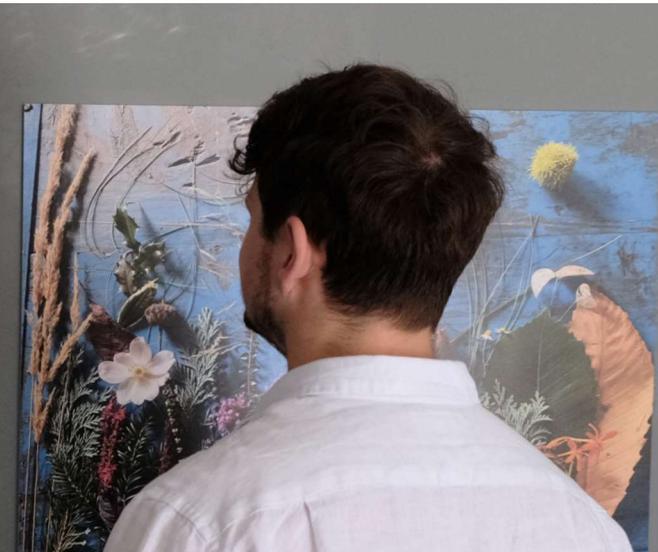
## A multi-agency Steering Group was established to provide oversight and strategic guidance for the project.

The group met every 4–6 weeks and included a carer representative, the commissioned artist, and partners from Public Health, Adult Care, Doddington Hall, Every-One, and the University of Lincoln. Project delivery was structured as a close partnership between specialist organisations. Artist Rachel Petheram was competitively commissioned to co-produce and lead the creative activities. Every-One managed project logistics and

direct carer support, facilitated formative co-production sessions, and provided a dedicated support worker to work alongside the artist throughout the duration of the project. This additional layer of support was critical in enabling carers to participate fully, engage meaningfully in sessions, and build confidence over time. The University of Lincoln led the independent evaluation and undertook research exploring the scalability and wider applicability of the model.

An open call for participants was issued across the county in collaboration with the Day Opportunities Service, Carers First, and the Carers Lead at Lincolnshire

County Council. To build capacity for the future, a parallel training programme was delivered to two cohorts of support workers between December 2024 and May 2025. This immersive training mirrored the carers' workshops, enabling support workers to experience the benefits firsthand and equipping them to facilitate similar activities. Furthermore, a suite of professional online resources, including five illustrated guides to mindfulness in nature and two recorded meditations, was created for public use, ensuring the project's reach extends beyond its direct participants. They are all available here: [Culture and Nature for Wellbeing - Lincolnshire Heritage Explorer](#)



The project's unique focus within the national ARF programme has generated significant interest from national bodies, positioning it as a leading case study in creative, community-centred health intervention. The flexibility of the ARF funding was cited as crucial for this innovation, allowing the partnership to effectively break down barriers to participation. The budget was as follows:

Activities		Partner	Cost
<ul style="list-style-type: none"> <li>• Fees to deliver co-production</li> <li>• Support for carer workshops</li> <li>• Logistics of supporting carers</li> </ul>	<ul style="list-style-type: none"> <li>• Respite care for cared for</li> <li>• Travel costs for carers</li> </ul>	 every one <small>making wellbeing personal</small>	<b>£35,000</b>
<ul style="list-style-type: none"> <li>• Evaluation</li> </ul>	<ul style="list-style-type: none"> <li>• Research</li> </ul>	 UNIVERSITY OF LINCOLN	<b>£20,000</b>
<ul style="list-style-type: none"> <li>• Artist fees for carers' workshops</li> <li>• Training for support workers</li> </ul>	<ul style="list-style-type: none"> <li>• Creation of online resources</li> </ul>	 CATKIN	<b>£41,000</b>
Marketing, printing, venue costs etc.		Various	<b>£4,000</b>

# 03

## Workshop Design & Content



# Workshop Design & Content



The aim of these workshops was to use the gardens and the changing seasons at Doddington Hall to facilitate nature connectedness.

Nature connectedness captures the relationship between people and the rest of nature. It moves beyond contact with nature to encompass an individual's sense of their relationship with the natural world. Many studies have shown that the strength of a person's sense of connection to nature has been demonstrated to be hugely important in feeling that life is worthwhile..

#### The routes to increased nature connectedness include:

- Exploring our personal and cultural stories about what nature means to us. Plants have a deep cultural significance and an ingrained resonance that connects us with an idea or memory.
- Contact with nature and natural materials. Practising mindfulness in nature. Engaging the senses when in nature – listening to birds, noticing textures, noticing seasonal changes.
- Seeking opportunity to appreciate the beauty of nature. Creating art with natural materials.

Our workshops aimed to increase our sense of nature connectedness and to form a sense of connection and kinship with the gardens at Doddington Hall. What they also did was provide a sense of kinship with each other.

## Schedule of Workshop Activities



### September Workshop

The aim was to introduce our participants to the garden with a mindfulness walk and forage. We used foraged materials to create a flat lay that represented time, place and season. They were given concertina sketch books and the idea was that they could use these books to sketch, press material in them, whatever they wanted to do, to create a seasonal diary. We had a go at tataki zome (flower pounding) in the books to make marks on paper with natural materials.



### October Workshop

We took advantage of the autumnal colour in the gardens to run a session on trees. We used stories and folklore to illustrate our close relationship and heritage with trees, and we created bark rubbings using mulberry paper and charcoal from the different trees in the garden. The resulting rubbings were unique to each person, representing the specific, individual interaction between the tree and us.





## November Workshop

We used the shape and texture of leaves and plants to create botanical prints using gelli print techniques. This technique encourages us to look at the beauty in all stages of nature's cycles and to find beauty in impermanence, capturing fleeting moments in nature. It is another beautiful way of capturing time, place and season.



## December Workshop

We used materials gathered from the gardens to create seasonal wreaths focussing on the cultural meaning of evergreens and weaving wreaths and garlands.





## February Workshop

Green sketching. This is a practice that is rooted in slowing down and reconnecting with the living world through pen and paper. It is about noticing, being present and grounding, rather than creating perfect sketches. As the garden came back into life after winter it was an invitation to notice buds, snowdrops and spring slowly coming back.



## March Workshop

This session revisited botanical printing but this time using earth pigments as a background. Our participants were invited to mindfully create a background on paper using earth pigments. We then printed with plant material directly on top of these backgrounds using gelli printing techniques.





## April Workshop

The spring gardens were used as inspiration to create a floral arrangement in an urn using flowers and materials collected from the gardens. The participants did a mindfulness walk and collected materials for a flat lay which formed a mood board which inspired the creation of their floral urns.



## May Workshop

The final session was a collective floral installation under the ancient chestnut trees in the gardens. These trees were an anchor and focal point for the workshops. They are an important part of the natural heritage of the gardens and the participants had built up a relationship with them over the months. Each person worked on their own individual piece, which collectively created a floral installation using flowers gathered from the garden in which the trees stand. This was our final piece and remained under the trees for visitors to enjoy for a few days.





## June Celebration Event

There was a Celebration Event held on 19th June 2025 in the Stableyard Gallery at Doddington Hall and Gardens. Rachel Petheram worked with the team at Doddington Hall to create an exhibition of the exceptional work that carers had created during the workshops. There were images, films, installations and hands-on activities. Refreshments were provided by Doddington Hall. The main purpose of the event was to celebrate the achievements of carers and give them a chance to showcase the high quality of their work and their individual journeys through the project for family and friends as well as project partners and policy makers

from across the health, community, heritage, nature and arts sectors, with local, regional and national representatives.

The Director of Lincolnshire County Council's Adult Care and Community Wellbeing services, Martin Samuels, was there and made an opening introductory speech highlighting the immense importance of what carers do and that they do it with love. Other speakers were Sarah Grundy (ARF project lead), Colin Hopkirk from Every-One, Penny Wood from SCIE, who spoke about the national perspective and Rachel, who spoke about the philosophy behind the workshops.

In advance of the event carers were invited to speak if they wanted to, but it was made very clear that they didn't have to if they didn't feel comfortable. They all declined prior to the event. However, on the day two carers did decide to talk about the impact of the project on their lives, and one read a poem she had written. They spoke very movingly, and it was a very emotional event, with the benefits that carers had experienced being very clearly expressed.



# Evaluation Methodology



This project employed a bespoke, multi-faceted qualitative evaluation that was as person-centred and co-produced as the project itself.

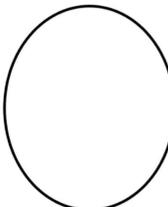
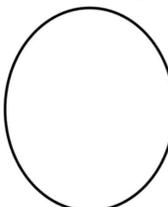
The methodology was designed to capture the emotional and experiential journey of participants in a deep and nuanced way, evolving over four key stages.

## 1 Embedded Ethnography

The evaluator (Dr. Robert Dean) attended the majority of the sessions. This was essential not only for real-time observation of group dynamics, engagement levels, and non-verbal cues but also for building the trust and rapport necessary for the more personal, reflective stages of the evaluation that followed.

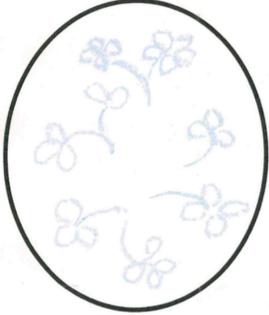
## 2 Mandala & Feelings-Based Feedback

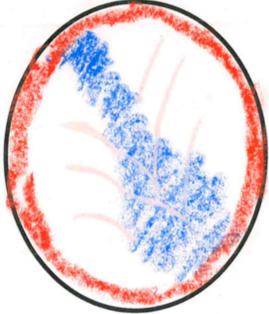
At the start of the first four sessions (September – December), participants were given an A3 sheet featuring a mandala for drawing and an extensive list of feeling words.

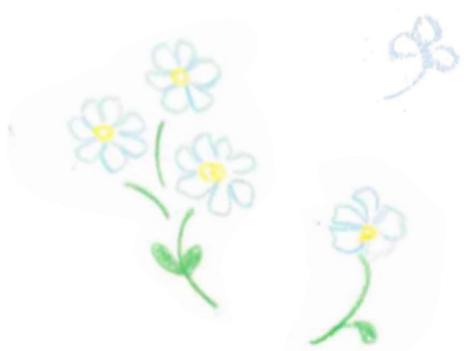
<p>What are you feeling?</p> <p>Fill this in using the pastels. It can be anything (colours, symbols, images, etc.)</p>  <p>In this drawing I have tried to capture...</p>	<table border="0"> <tr> <td>Accepting</td> <td>Joyful</td> </tr> <tr> <td>Anxious</td> <td>Lethargic</td> </tr> <tr> <td>Apprehensive</td> <td>Lucky</td> </tr> <tr> <td>Appreciative</td> <td>Moved</td> </tr> <tr> <td>Bored</td> <td>Nervous</td> </tr> <tr> <td>Caring</td> <td>Open</td> </tr> <tr> <td>Compassionate</td> <td>Optimistic</td> </tr> <tr> <td>Concerned</td> <td>Peaceful</td> </tr> <tr> <td>Confused</td> <td>Present</td> </tr> <tr> <td>Curious</td> <td>Proud</td> </tr> <tr> <td>Delighted</td> <td>Reflective</td> </tr> <tr> <td>Despondent</td> <td>Reluctant</td> </tr> <tr> <td>Disappointed</td> <td>Resistant</td> </tr> <tr> <td>Discouraged</td> <td>Restless</td> </tr> <tr> <td>Distant</td> <td>Safe</td> </tr> <tr> <td>Doubtful</td> <td>Sceptical</td> </tr> <tr> <td>Edgy</td> <td>Self-conscious</td> </tr> <tr> <td>Engaged</td> <td>Sensitive</td> </tr> <tr> <td>Energised</td> <td>Shut down</td> </tr> <tr> <td>Encouraged</td> <td>Stimulated</td> </tr> <tr> <td>Exhausted</td> <td>Tense</td> </tr> <tr> <td>Fascinated</td> <td>Thankful</td> </tr> <tr> <td>Focused</td> <td>Uplifted</td> </tr> <tr> <td>Fulfilled</td> <td>Uneasy</td> </tr> <tr> <td>Grateful</td> <td>Understood</td> </tr> <tr> <td>Indifferent</td> <td>Unhappy</td> </tr> <tr> <td>Inhibited</td> <td>Upset</td> </tr> <tr> <td>Inspired</td> <td>Weary</td> </tr> <tr> <td>Interested</td> <td>Withdrawn</td> </tr> <tr> <td>Involved</td> <td>Worried</td> </tr> <tr> <td>Isolated</td> <td>Worn out</td> </tr> </table>	Accepting	Joyful	Anxious	Lethargic	Apprehensive	Lucky	Appreciative	Moved	Bored	Nervous	Caring	Open	Compassionate	Optimistic	Concerned	Peaceful	Confused	Present	Curious	Proud	Delighted	Reflective	Despondent	Reluctant	Disappointed	Resistant	Discouraged	Restless	Distant	Safe	Doubtful	Sceptical	Edgy	Self-conscious	Engaged	Sensitive	Energised	Shut down	Encouraged	Stimulated	Exhausted	Tense	Fascinated	Thankful	Focused	Uplifted	Fulfilled	Uneasy	Grateful	Understood	Indifferent	Unhappy	Inhibited	Upset	Inspired	Weary	Interested	Withdrawn	Involved	Worried	Isolated	Worn out	<p>What are you feeling?</p> <p>Fill this in using the pastels. It can be anything (colours, symbols, images, etc.)</p>  <p>In this drawing I have tried to capture...</p>
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On the left of the sheet, they were asked to select words and create a drawing that symbolised how they felt at the start of the workshop.

Then at the end of the session, they had the option to immediately complete the right side and capture their closing feelings, or to do this at home and return it later. The method served two key purposes. Firstly, it captured a visual snapshot of their emotional transition through the workshop. Secondly, it expanded the participants emotional vocabulary beyond generalisations such as 'happy', 'sad', 'ok', and 'fine'. This nuanced palette encouraged and allowed carers to more precisely identify and articulate their emotional states. Four examples of what they produced are provided on the next two pages.

<p>Start   What are you feeling?</p> <p><u>Worried, Anxious, Tense + Tired, Not motivated</u> <u>Thought</u> <u>Looking forward to the course very much</u></p> <hr/> <p>Fill this in using the pastels. It can be anything (colours, symbols, images, etc.)</p>  <p>In this drawing I have tried to capture...</p> <p><u>We are doing ok, but life can</u> <u>be complex at times.</u></p>	<p>Accepting Anxious Apprehensive Appreciative Bored Caring Compassionate Concerned Confused Curious Delighted Despondent Disappointed Discouraged Distant Doubtful Edgy Engaged Energised Encouraged Exhausted Fascinated Focused Fulfilled Grateful Indifferent Inhibited Inspired Interested Involved Isolated</p>	<p>Joyful Lethargic Lucky Moved Nervous Open Optimistic Peaceful Present Proud Reflective Reluctant Resistant Restless Safe Sceptical Self-conscious Sensitive Shut down Stimulated Tense Thankful Uplifted Uneasy Understood Unhappy Upset Weary Withdrawn Worried Worn out</p>	<p>End   What are you feeling?</p> <p><u>Thankful and lucky</u> <u>Want a mental cure</u></p> <hr/> <p>Fill this in using the pastels. It can be anything (colours, symbols, images, etc.)</p>  <p>In this drawing I have tried to capture...</p> <p><u>Feeling calmer and better</u> <u>Thankyou</u></p>
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<p>Start   What are you feeling?</p> <p><u>Anxious, excited, positive, hopeful</u> <u>nervous</u></p> <hr/> <p>Fill this in using the pastels. It can be anything (colours, symbols, images, etc.)</p>  <p>In this drawing I have tried to capture...</p> <p><u>The red symbolises calm and relief</u> <u>but the blue symbolises chaos but the pink is shots of hope.</u></p>	<p>Accepting <u>Anxious</u> <u>Apprehensive</u> <u>Appreciative</u> Bored Caring Compassionate Concerned Confused <u>Curious</u> Delighted Despondent Disappointed Discouraged Distant Doubtful <u>Edgy</u> <u>Engaged</u> Energised Encouraged Exhausted Fascinated Focused Fulfilled <u>Grateful</u> Indifferent Inhibited Inspired <u>Interested</u> <u>Involved</u> Isolated</p>	<p>Joyful <u>Lethargic</u> <u>Lucky</u> <u>Moved</u> <u>Nervous</u> <u>Open</u> <u>Optimistic</u> <u>Peaceful</u> <u>Proud</u> Reflective Reluctant Resistant Restless <u>Safe</u> <u>Sceptical</u> <u>Self-conscious</u> <u>Sensitive</u> Shut down Stimulated <u>Tense</u> <u>Thankful</u> Uplifted Uneasy Understood Unhappy Upset <u>Weary</u> <u>Withdrawn</u> <u>Worried</u> Worn out</p>	<p>End   What are you feeling?</p> <p><u>Cared for, listened to, reflective</u> <u>So so grateful, understood, uplifted</u> <u>Peaceful, calm</u></p> <hr/> <p>Fill this in using the pastels. It can be anything (colours, symbols, images, etc.)</p>  <p>In this drawing I have tried to capture...</p> <p><u>The love + peace I felt on the way</u> <u>back to the car. I cried when I got to</u> <u>the car as I couldn't remember the last time</u> <u>I felt cared for, loved + valued - Thankyou so</u></p>
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<p>Start   What are you feeling?</p> <p><i>Anxious, Apprehensive, scared, uneasy, self conscious, quiet, excited</i></p> <hr/> <p>Fill this in using the pastels. It can be anything (colours, symbols, images, etc.)</p>  <p>In this drawing I have tried to capture... <i>the chaos of my life + mind but with skylight of hope in the backyard.</i></p>	<p>Accepting Anxious Apprehensive Appreciative Bored Caring Compassionate Concerned Confused Curious Delighted Despondent Disappointed Discouraged Distant Doubtful Edgy Engaged Energised Encouraged Exhausted Fascinated Focused Fulfilled Grateful Indifferent Inhibited Inspired Interested Involved Isolated</p>	<p>Joyful Lethargic Lucky Moved Nervous Open Optimistic Peaceful Present Proud Reflective Reluctant Resistant Restless Safe Sceptical Self-conscious Sensitive Shut down Stimulated Tense Thankful Uplifted Uneasy Understood Unhappy Upset Weary Withdrawn Worried Worn out</p>	<p>What are you feeling?   End</p> <p><i>Peaceful, Thankful, Understood, content, still</i></p> <hr/> <p>Fill this in using the pastels. It can be anything (colours, symbols, images, etc.)</p>  <p>In this drawing I have tried to capture... <i>the chaos has retreated to reveal a glimpse of the calm that actually exists in my life.</i></p>
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### 3 Reflective Letters

At the end of each session, participants were given a pre-addressed, stamped envelope containing writing paper and invited to write a letter reflecting on their experience. This method proved to be very powerful. It provided a private, unstructured space for deep personal reflection without the pressure of a formal interview. The fact that 34 letters were received over the course of the project, typically arriving 4-7 days after the session, demonstrated a high level of engagement. This delay also indicated that the process of reflection was ongoing, with the benefits and insights from the sessions permeating their lives at home.

### 4 One-to-One Interviews

Approximately five months after the project concluded, participants were invited to a one-hour reflection interview. In these sessions, they revisited their complete set of personal data (letters and mandala/feelings sheets) with the evaluator. These discussions allowed carers to trace their entire journey, interpret their own reflections, and articulate the project's cumulative impact with the benefit of hindsight. The interviews were recorded and form the basis of the quotes throughout this report,

<p>Start   What are you feeling?</p> <p><i>All these</i></p> <hr/> <p>Fill this in using the pastels. It can be anything (colours, symbols, images, etc.)</p>  <p>In this drawing I have tried to capture... <i>The dark cloud I am under with an umbrella which has broken + no idea about the future.</i></p>	<p>Accepting Anxious Apprehensive Appreciative Bored Caring Compassionate Concerned Confused Curious Delighted Despondent Disappointed Discouraged Distant Doubtful Edgy Engaged Energised Encouraged Exhausted Fascinated Focused Fulfilled Grateful Indifferent Inhibited Inspired Interested Involved Isolated</p>	<p>Joyful Lethargic Lucky Moved Nervous Open Optimistic Peaceful Present Proud Reflective Reluctant Resistant Restless Safe Sceptical Self-conscious Sensitive Shut down Stimulated Tense Thankful Uplifted Uneasy Understood Unhappy Upset Weary Withdrawn Worried Worn out</p>	<p>What are you feeling?   End</p> <p><i>All these plus a bit more positive.</i></p> <hr/> <p>Fill this in using the pastels. It can be anything (colours, symbols, images, etc.)</p>  <p>In this drawing I have tried to capture... <i>I feel I can begin to see a path through the trees - that there will support me as my friends + family are and that eventually, among that noise</i></p>
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**This multi-stage, evaluation framework was essential to capturing the project's transformative outcomes, which are detailed in the following sections.**

However, before introducing these findings, it is important to understand the context from which the participating carers came. They were not simply individuals in need of a break; they were people navigating some of life's most difficult passages, their own identities and lives permanently reshaped by the responsibility of caring for a loved one. Beneath the label of 'carer' lies a sustained struggle, a journey marked by sudden crises, stress, exhaustion, and the gradual erosion of self. Their collective experiences are detailed here to provide context, paint a stark picture of the landscape into which this project sought to intervene.



# 05

## The Realities of Being an Unpaid Carer



# The Realities of Being an Unpaid Carer



For many, the caring role began in a moment of crisis that irrevocably changed their previous life.

A sudden accident, a devastating diagnosis, or a catastrophic health event acted as a dividing line, forcing them to leave their careers and become full-time carers. These were not gradual transitions but seismic shifts, where a partner, a parent, or a son or daughter is suddenly transformed into a patient, and a loved one is thrust into the role of a clinician, advocate, and constant guardian. Carers described a world defined by constant worry; the fear of a fall, the hyper-vigilance required, the slow, consuming dread of a dementia diagnosis. This is not a 9-to-5 job but a 24/7 state of being.

One participant captured this by stating that caring for a family member “can consume your life until there’s little left of your own personality to express anymore”. This consumption is both physical and emotional with carers reporting that they felt “exhausted”, “worn out”, “tense”, and “edgy”.

**The psychological toll is multifaceted. Such constant pressure leads to what one carer identified (and experienced) as “carer burnout”, a state of exhaustion that necessitated medical intervention and counselling.**

In these cases, the emotional strain manifests as acute anxiety, sadness, and a deep-seated loneliness, with one carer feeling so isolated they described it as being “in prison by myself”. Many grappled with loss of identity, feeling that their sense of self had been subsumed by the caring role, leaving them feeling invisible. Furthermore, their journeys were often made more difficult by obstacles put in the way by a faltering and dismissive healthcare system. One carer spoke of the frustration of knowing a loved one had dementia two years before professionals would listen, a delay that shattered their faith in the very services designed to help. The moment of diagnosis was described not as the beginning of support,

but as an abrupt end, a feeling of “dropping off the edge of a cliff”, left alone with the immense practical and emotional burden. This is often compounded by financial strain, with many carers forced to leave their careers, leading to financial insecurity and the loss of another key part of their identity.

This collective portrait reveals that an unpaid carer is often a person living with complex layers of trauma, grief, and stress. They are managing complex medical needs, battling systemic inadequacies, and suppressing their own emotional and physical needs. It is from this place of isolation, exhaustion, and fractured identity that the participants arrived at this project’s eight workshops. Understanding this starting point is essential to fully appreciating the significance of their reported transformations, from anxiety to calm, from isolation to connection, and from a loss of self to a journey back to their own identity.



# 06

## Findings



# Findings



## Immediate & Sustained Relief

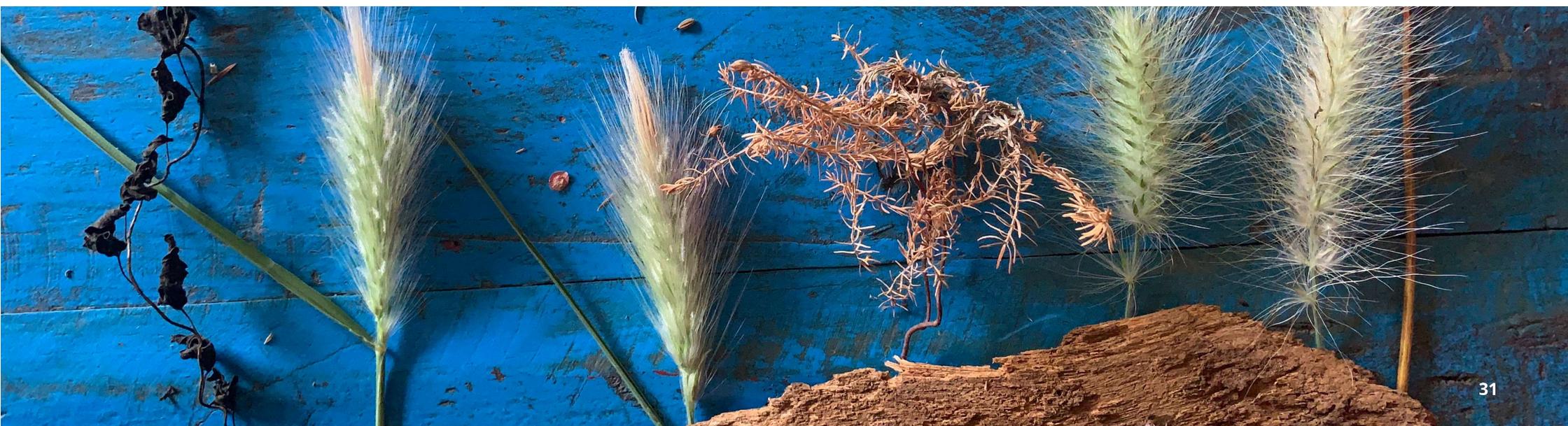
Participant reports provide direct evidence of a significant positive shift in psychological state. One carer's testimony that "every time I go feeling a little down and every time, I come away invigorated and ready to face the world", underscores an effect that extends beyond temporary relief, signifying a restoration of perceived self-efficacy and functional capacity. One carer approximated the benefit as lasting for a "good three or four days". This was corroborated by another who stated that the "well-being effect [...] lasted for days". Taken together, these participant experiences reveal a two-stage benefit. Firstly, the intervention provided immediate relief from the stress and anxiety that characterises the caring role. Secondly, it actively built-up participants' long-term resilience and capacity to cope. As such, the project delivered more than a temporary escape. Instead, it helped carers replenish their inner resources (described by one participant as "wellbeing afterglow") thereby enabling them to better sustain their demanding roles, providing a proactive buffer against cumulative pressure and building psychological resilience. This combination of immediate effects and sustained afterglow created a self-reinforcing cycle. Carers came to anticipate that participation would not only offer a few hours of respite but would reliably replenish their emotional resources for the days ahead.

This transformed the intervention from a passive activity into an active and dependable self-regulation strategy. Therefore, the project's impact lies not merely in offering temporary escape, but as a form of mental health maintenance, that directly supports the sustainability of their caregiving roles.

For a carer, the luxury of an uninterrupted thought or task is exceptionally rare. The ability to engage from start to finish without interruption enabled a range of positive

outcomes, including deep focus, mindful stillness, and sensory re-engagement. From this perspective the workshops created a protected environment where carers were free to fully immerse themselves (many for the first time in years) in an experience just for themselves. The significance of this is captured in the simple, powerful statement: "I have completed something uninterrupted for a change". Freed from a perceived need for continuous hyper-vigilance, participants could be fully absorbed and able to "live in the moment". As one participant noted,

the workshops "became a meditation, so absorbing and life affirming", indicating that the uninterrupted creative practices induced a calm, focused, and restorative state of mind. Within the four-hour workshops participants could also experience stillness and sensory immersion by finding moments to "just stand still and listen". One participant directly attributed their shift from being "extremely worried and stressed" to leaving "so much calmer", to the "garden walk and contemplation as well as the craft work".





## Cared for Carers

A fundamental outcome of the project was the participants' experience of being actively cared for. This was an uncommon experience for carers whose lives are defined by caring for others. Participants stated that they felt "valued, respected and cared for", with one expressing, "I felt so valued and loved". The conditions that created this were embedded into the project's fabric. Firstly, it was noted that participants valued the length of the workshops ("four and a half, five hours sometimes") as they felt like a substantial investment in them rather than a token hour. This extended timeframe stood in stark contrast to the brief, often rushed respite typically available, moving beyond a tokenistic gesture to an unhurried, restorative experience. Secondly, there was the impact and beauty of the setting itself (Doddington Hall and Gardens). Thirdly, was the manner in which they were treated. Upon arrival, they were individually catered for. Each had a dedicated workstation, pre-prepared with all the necessary materials. Refreshments

of tea/coffee and were provided throughout the session, with a lunch halfway through. Such attention to detail (including the project team handling all cleaning and washing-up) removed any need to plan or complete domestic tasks, thereby allowing carers to relinquish their usual role. The sentiment, "For these few hours I feel so valued and appreciated", captures how this felt.

This was reinforced by an approach to facilitation that ensured participants were supported in their creative tasks without being rushed so that the process, not the output, was the focus. Indeed, the facilitators' approach went far beyond technical instruction and was as intrinsic part of the workshops therapeutic culture. Participants directly linked the emotional shift they experienced during the sessions to the facilitators' empathetic approach. One felt that the lead facilitator's "emotional warmth and empathy [...] was essential".

This quality, described simply as "gentle empathy", made carers feel their personal journey was the sole focus. This is captured in the reflection that, "They make me feel like I'm the most important person", and in the critical distinction of feeling "seen, not observed". The culture of care extended beyond the facilitator-participant dynamic and evolved into a mutually reinforcing system of peer support within the group. The shared understanding of the caring role fostered immediate empathy. This transformed the group from a collection of individuals doing arts and craft into a nascent community. The importance of this peer-to-peer dynamic is clearly evidenced in participant feedback. One carer observed, "It felt like we were building each other up", indicating a collaborative environment that actively enhanced individual self-worth.

The nurturing quality of the group was also a defining feature, with one participant describing fellow attendees as “**very complimentary and very, very nurturing**”. This mutual support served to solidify the feelings of being valued and created a safe space where individuals could be creative without fear of judgment.

The project also dismantled one of the most significant barriers to carer wellbeing, best described as the pervasive sense of guilt associated with self-care. As one participant stated, “**just being able to relax and do something for myself with no guilt**” was an uncommon experience for the carers. This sentiment was consistently echoed by others, with statements such as “**I don’t have guilt anymore**”, and another affirming, “**I didn’t feel guilty, not at all**”. Such testimonies highlight that the intervention provided a positive activity while simultaneously removing the emotional burden that can negate its benefit. By providing the carers with the practical support they needed to attend the sessions and establishing a safe, shared space for playful creativity, the project moved the carers experience of self-care away from being a potential source of anxiety. This guilt-free engagement provided a form of respite that was both effective and restorative.



## Busy Hands

A defining finding of this project was the discovery of a uniquely effective mechanism for fostering meaningful social connection. The project moved beyond traditional, talk-based support models by creating an environment where communication was organically facilitated through making. The seemingly simple observation from one participant “**how easy it is to talk with busy hands**” encapsulates this principle. This “busy hands” model, where conversation is anchored in a joint creative task, proved to be the key to creating a comfortable social environment and unlocking gentle, genuine, peer support. The workshops creative activities acted as a conversational scaffold, providing a shared focus that eliminated the pressure of a formal discussion. The hands being occupied with activity meant that silences were comfortable, and talk arose organically, often sparked by the task itself. This dismantled barriers to interaction, making social engagement feel easy.

Within this activity-based framework, a genuine sense of companionship flourished. Participants knew that “**there’s always somebody to talk with**”, but this talking was integrated into the creative process, not the sole purpose of it. This evolved into “**camaraderie**” paired with “**laughter**”, the latter flowing easily in an environment focused on experimentation and playful creation. The continuous focus on a creative task kept conversations from circling around problems. As one participant noted, “**I love that the sessions haven’t been moan fests**”. In place of a “**moan fest**” there was the mutual appreciation of each other’s work, actively “**building each other up**”, and “**giving [...] positive feedback**”. The creative activities prompted natural conversations about what each other were making, with participants reporting enthusiastic, unprompted responses to each other’s work. This culture of affirmation spilled over into practical caring advice, which became solution-oriented: “**Go and speak to this person. Go and do this, try and do that**”. As such, providing a shared, absorbing, non-verbal focus facilitated a verbal connection, mutual understanding, and positive reinforcement built on shared creation rather than problem sharing.



## Rediscovering Personal Identity

A particularly transformative outcome of the project was its role in facilitating a process of self-(re)discovery. For many participants, the all-consuming nature of their caring responsibilities had gradually eclipsed their personal identity, subsuming them into the singular role of being “a carer”. However, the workshops began to dismantle this by providing a dedicated space for an exploration of self that transcended their responsibilities. As such, participating in the workshops was not just a welcome break, it nurtured a forgotten sense of personal agency. As one participant explained, “It took me away from the caring role, and it was something for me [...] I came away really refreshed and invigorated and, you know, just, I can conquer the world now”. The combination of a dedicated space outside the participants caring responsibilities, and the immersion in accessible nature-based arts and craft activities, acted as a catalyst for carers to reconnect with and explore forgotten parts of themselves and reclaim their individual identity. This is powerfully evidenced by one participant’s declaration: “I’m [name]. I’m not defined by being a carer. I’m now defined as being [name] who makes wacky wreaths”. This statement signifies a cognitive and emotional shift, demonstrating a conscious re-authoring of identity from a passive state of being “defined by” a circumstance, to an active state of self-definition and personal agency.

This theme of rediscovery was repeatedly referenced by the participants, and consistently framed as a return to a core, authentic self that had been lost or suppressed. One participant’s reflection that, “It has been a journey back to myself, to my creative nature which has lain dormant for many years”, encapsulates this process. The specific reference to a “creative nature” highlights how the project tapped into their pre-existing but neglected aptitudes. Another participant recognised that the journey of self-discovery instigated by the workshops would be ongoing: “Who am I now? I don’t know yet, but I feel this has been a very powerful and positive part of my journey to freedom”.

Statements such as these demonstrate that the nature-based arts and craft activities were more than pleasant distractions. Instead, they should be understood as keys with the capacity to unlock personal history and agency, foster a renewed sense of wholeness, and reconnect participants with aspects of their identity that are not based upon their role as a carer.

## The Mantelpiece Effect

Just as carers rediscovered facets of their identity, they simultaneously experienced a renewal of confidence and a sense of purpose that extended beyond the workshops. This shift was characterised by the translation of new-found interests into sustained personal practice. This renewal of self-efficacy is powerfully captured in one participant's reflection: "I came away from this session feeling that there is still purpose and how lovely nature makes me feel. Who would have thought I could create such lovely things?". In that closing question, the participant highlights how the act of creating something tangible provided concrete evidence of their capabilities beyond care.

The therapeutic benefits of the project were not confined to the sessions themselves. A key finding was the role that the participants' creations (prints, wreaths, sketchbooks) played in extending the project's positive effects. These tangible outputs acted as durable, physical anchors for memory and feeling, transforming the workshop

experience into a sustained, accessible resource for wellbeing long after the activities concluded. The most direct way this happened was by the participants integrating their creations into their personal domestic spaces. Statements such as "I have got it up on my mantelpiece at home" show how this participant claimed space for their creative identity within an environment otherwise dominated by the demands of care. This act of curation was common, with others putting photos of their work "up on the wall". One participant explained that these framed prints were a visual prompt for happier times, acting as a potent antidote to low moods: "They're just a reminder [...] when it's grey and dull". For some, the outputs were active resources that could be revisited when needed. One participant described returning to the "beautiful sketchbooks" to look back through the work they had created. This act of revisiting allowed them to engage with the memory of the experience, and re-immense themselves in the feelings of focus, accomplishment, and peace that they felt during the workshops.





The work created during the project also served as inspiration and proof of capability, motivating participants to integrate these activities into their daily lives outside the workshops and begin in their own creative practice at home. This is evidenced by carers purchasing their own materials, and reigniting dormant hobbies, with one stating they had “started a sketchbook”. Another carer reported, “I’ve even bought myself a desk now... I joined an art group. Can’t draw for toffee, but I’m having a go. And I would never have done any of that if it hadn’t have been for this”. The decision to purchase a desk represents a commitment to making time for self-care, while joining an art group demonstrates that they are engaging with new social communities. The work participants created also became vehicles for social connection in other ways. Participants shared their creations with their wider community, finding that “half the time, the fun is showing people what you’ve done”. In one instance, the wreath made in the December session prompted positive feedback from neighbours and even a passer-by knocking on their door to compliment it, all of which reinforced the carer’s sense of pride and confidence. Another participant gave their wreath to their GP, prompting a thank-you phone call. Furthermore, the exhibition of work at a local venue gave the carers’ efforts public value and recognition, validating their creativity and solidifying their artistic and creative identities.

## Barriers and Limitations

While the project was positively received by all participants, the evaluation also revealed structural and practical challenges. Firstly, the benefits of the project existed in tension with the real-world pressures of geography, cost, and the inherent unpredictability of caring. This is the terrain that must be navigated to make such support truly accessible and sustainable for the wider carer population. The primary barrier was the physical distance and the rigid “time budget” of care, perfectly encapsulated by one participant’s statement: “you can’t be away from home for longer than you can be away from home”. This is the non-negotiable equation that defines a carer’s capacity. For carers without flexible transport, the location of activities was a major hurdle. The issue is not just the miles on a map, but the fact that every minute spent travelling is a minute deducted from the finite window of respite. This rigid time budget also exists within the context of unpredictability. Advanced, clear scheduling to allow carers to arrange complex cover is imperative, but so is the understanding that these plans can be undone by a sudden crisis. This underscores that flexibility and understanding from service providers are essential, as a carer’s availability is always provisional.

Another issue to be considered is how fragile the project’s benefits can be in the face of a carer’s reality. Participants were starkly realistic that their hard-won resilience was vulnerable and likely to only last “until there was some crisis”. This was expanded upon by one carer who explained that it isn’t just major crises, but the relentless “drudgery” of the role that “pretty quickly knocks the stuffing out of you”. This is an important insight as it highlights that short-term interventions, no matter how powerful, operate in a context of stress that can swiftly undo positive psychological gains. Therefore, while the project’s success is undeniable, it is also a call to action for future provision that minimises travel time, provides direct transport support and offers flexible scheduling. But, most importantly, it is imperative that such inventions are sustained and repeated as they have the capacity provide a reliable method of respite.



# 07

## Conclusion & Recommendations

# Conclusion & Recommendations



**Looking back across the life of this project, what stands out most clearly is that it offered far more than temporary respite.**

In some ways, its strength lay in what it chose not to do. It did not try to fix carers. It did not centre sessions around recounting difficult experiences. Instead, it created a space in which carers could step outside their role for a few hours and reconnect with who they are beyond it. It was this subtle but powerful shift that runs through the different parts of this evaluation. Participants described not only immediate relief, but also emotional shifts that lasted well beyond the day itself. The “afterglow” of a steadier mood, renewed confidence, and a stronger sense of self. In this way the workshops were more than events they attended, they became a resource carers could draw on.

On reflection, the seeds of this success can be traced back to the principles underpinning the project. First, genuine co-production. Carers shaped the practical details from the outset; when sessions ran, how often they met, and what would ensure accessibility, also co-producing sessions content with the artist. The setting mattered too. The gardens at Doddington Hall were not simply attractive surroundings. They offered a contrast to hospital corridors, to living rooms arranged around medical equipment, and to the relentlessness of routine. Over the months that the project ran, the beauty, scale, and seasonal change in the gardens worked quietly in the background.

They slowed things down, they introduced a different rhythm, and reminded participants of a world operating outside urgency. In doing so the heritage site where the workshops to place was reframed and became more than cultural backdrop. Instead, it became an active environment that the participants could move through, respond to, and be part of. Through the art they created with the natural materials it provided, participants also carried a part of that environment home with them, not just physically, but emotionally.

The creative process itself was also important. By focusing on process rather than outcome, and by keeping hands busy, conversation flowed naturally. There was no pressure to disclose or discuss day to day difficulties. Instead, conversations emerged indirectly, through shared making, through humour and through the affirmations and encouragement participants offered one another. In that environment, guilt softened, confidence blossomed, and identities grew beyond the label of “carer”. In essence, the project worked because it created a whole system of care around carers.

## Recommendations

Based on the evaluation, several practical recommendations emerge for future commissioning and development.



### **Embed culture and nature within mainstream carer support**

Interventions of this kind should not sit on the margins as “enhancements”. The evidence here suggests they play a preventative role, supporting resilience and reducing the likelihood of carer burnout.



### **Keep co-production central, especially around logistics**

Timing, frequency, location, and travel arrangements must reflect the realities of caring. Standardised models risk excluding those with the least flexibility and the greatest need.



### **Budget for practical support from the outset**

Transport and respite are not add-ons. They are foundational. Without them, participation becomes stressful or impossible, and the benefits are diluted by guilt and logistical strain.



## Support heritage and green spaces to become part of local health infrastructure

Heritage sites can play an integral role in community wellbeing when they are recognised as assets within local health systems, not simply visitor attractions. This requires practical partnerships between councils, heritage organisations, and community groups, supported by commissioning models that enable inclusive access and ongoing delivery.



## Prioritise continuity over one-off provision

While short projects can be impactful, caring pressures are ongoing. Sustained or repeat opportunities allow benefits to deepen and become embedded rather than remaining fragile.



## Value qualitative evaluation

The most meaningful outcomes in this project would not have been captured through the usual attendance figures, satisfaction scores, or short pre- and post-wellbeing scales alone. Shifts in identity, confidence, belonging, and emotional resilience rarely translate cleanly into numbers, yet they are central to carers' lived experience. Person-centred, reflective approaches are essential if we are to understand what truly changes for carers and why it matters.

## Final Reflections

This project shows what can happen when unpaid carers are given time, attention, and thoughtful space designed with them rather than for them. It did not remove the weight of caring. But it helped participants carry that weight differently, with greater calm, connection, and a clearer sense of themselves. In a system under strain, that matters. Supporting carers in this way is not indulgent. It is practical, preventative, and perhaps most importantly, it recognises the humanity of the people who quietly hold so much of our health and social care system together.



# Thank you

