

# Mental Health and Wellbeing Services for Performing Artists

## Guidance for the Performing Arts Sector

### Introduction

BAPAM is pleased to have brought together a group of clinicians and performing arts organisations interested in addressing the challenges of mental health and wellbeing of those who work in the sector. This group has been working to produce guidance to support the development and delivery of services for performing artists. The guidance is designed to be used by:

- organisations **commissioning** or wishing to commission mental health services for performing artists
- organisations and practitioners **providing** mental health and wellbeing services for performing artists
- **education providers** offering mental health and wellbeing support to students
- individuals and agencies wishing to **support best practice** for performing artists
- performers wishing to **understand the standard of practice** they can expect from services

There are four sections to this document:

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## Background

The prevalence of mental health problems is considerably higher in the performing artist community than in the general population,<sup>1</sup> and suicide rates are well above the national average.<sup>2</sup> As the performing arts industry increasingly recognises the need to support artists with mental health problems, questions about the types of services required are being posed.

One of the most comprehensive pieces of research in this field, undertaken by academics at Victoria University, Melbourne in collaboration with a charity seeking to improve mental health in the Australian entertainment industry, paints a worrying picture. While the authors' recommendations recognise the passion that performing artists and those who work alongside them, from directors to crew, have for their creative work, the industry emerges as a very unsupportive environment. Survey respondents reported sleep disturbance, lack of services, high levels of drug and alcohol use, anxiety and depression. Suicidal ideation was six times greater, suicide planning four times greater and suicide attempts more than double those of the general population. The Office of National Statistics records for suicide in England, and the recent survey carried out by Help Musicians UK for Music Minds Matter, indicate that the performing arts industry in the UK, too, could be described as a high risk environment.

A survey of over 5000 people working in film and TV, including actors, was conducted by BAPAM and Equity in 2015 on behalf of a wider group including Spotlight and the Stage. The survey found that, for 40% of those who responded, poor mental health had had an impact on their career. Mental health problems were most commonly attributed to financial issues (56%), lack of work in the performing arts (52%), and uncertainty/lack of control over career (52%). 85% of respondents who had reported a mental health problem had worked in the previous six months. There are many people working in the industry who have a mental health problem. These findings resulted in the ArtsMinds web resource.

The British Association for Performing Arts Medicine (BAPAM) offers clinical services and telephone advice to performing artists and has recently reviewed calls to its helpline requesting psychosocial support in 2017 and 2018. Analysis of these calls shows that 35% of patients presented with performance anxiety ("stage fright") and a further 35% with underlying anxiety and depression. A total of 12% reported a history of psychiatric care. Many of the performing artists who called the helpline revealed that they also needed advice and/or treatment for physical problems, from which it can be inferred that psychosocial and physical difficulties are associated if not mutually causative. It is clear, therefore, that a wide spectrum of support is required to meet performing artists' needs, which are extensive and can be complex.

It is known that many classical musicians use beta blockers to help with performance anxiety; a recent study in Australia found that they were used by 31% of orchestral musicians.<sup>3</sup> The same study revealed high levels of broader anxiety issues and depression among these musicians. The authors suggest that the link between music performance anxiety and depression needs to be investigated further.

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<sup>1</sup> Van den Eynde J, 2016, Working in the Australian Entertainment Industry, Victoria University, Melbourne

<sup>2</sup> Suicide by occupation in England: number of suicides and the standardised mortality ratio (SMR) for minor group occupations, males and females aged between 20 to 64 years, deaths registered in England, 2011 to 2015, Office of National Statistics

<sup>3</sup> Kenny, D., Driscoll, T. & Ackermann, B. (2014). Psychological well-being in professional orchestral musicians in Australia: A descriptive population study. *Psychology of Music*, 42 (2), 210-232.

Van den Eynde's research showed that prevalence of mental ill health is higher for younger people, with the 18-24, and 25-29 age categories significantly higher in anxiety symptoms than the older groups. She highlights the uncertainty and potential vulnerability of the younger adult members of the profession who are trying to establish themselves but do not have the depth of experience to manage this uncertainty. A recent analysis of the Higher Education Statistics Agency student statistics for 2018<sup>4</sup> showed that there are 55,000 students undertaking some form of performing arts programme of study. Practitioners working in the field commonly report that performing artists often start struggling with their mental health whilst in a performing arts higher education programme

Freelance work in general is associated with poor mental health.<sup>5</sup> Respondents to our consultation on this guidance also cited the external political environment as a cause of stress. Performing artists and professionals have different stresses on them which are linked to their level and the cyclical nature of their careers. Performing artists also face other challenges relating to their profession. Like many athletes who use their bodies intensively, over 70% of performers suffer physical problems that need specialist treatment and which are often not picked up by GPs. Freelance performers often have no choice other than to attempt to maintain their careers, continuing to play or sing while suffering from and managing physical symptoms. These are exacerbated by and contribute to psychosocial issues. There is evidence to suggest that physical and psychological problems are inter-linked<sup>6</sup>. GPs also report a rise in medically unexplained physical symptoms<sup>7</sup> that could be triggered by trauma or stress, or have more complex underlying factors. In addition, the environment (e.g. travelling, working late, isolation, experiencing lack of sleep and a poor diet) and the high demands performers make on themselves can all lead, potentially, to deteriorating mental health. Touring schedules often mean that healthcare is not available when most needed, and long waiting times are reported for NHS services. In many of the surveys conducted in this area, and in the accounts of performers, stigma is often mentioned as a reason not to tell colleagues about health problems or to seek help when needed.

Mental health and psychological wellbeing are best represented as a continuum. Poor health and wellbeing include very severe and complex conditions such as psychosis and schizophrenia as well as common albeit no less important mental health problems including depression and performance anxiety. These may result, for performers, from a combination of work-related stressors and psychological vulnerability. It may be sufficient for some performers to learn skills to help them recognise and alleviate work-related stress and foster resilience. For performers with more complex needs, a combination of skills building, psycho-education and therapy will help mitigate both underlying difficulties and current stressors. Medication can also play an important role. Performers have a wide variety of needs. Not everyone needs long term therapy, but an initial clinical assessment is vital to ensure that performers are referred to the appropriate service, and many will benefit from receiving support from a range of clinicians with different kinds of expertise.

Some people will experience just one episode of mental ill-health in their lives. Of those who receive a brief intervention, half will recover and never have another one. Others, however, experience recurrent episodes and will continue to do so through their lives even though they may be well for significant periods of time. It is important that performing artists who experience challenges to their

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<sup>4</sup> <https://www.hesa.ac.uk/data-and-analysis/students/what-study>

<sup>5</sup> Ertel, Michael & Pech, Eberhard & Ullsperger, P & Von Dem Knesebeck, Olaf & Siegrist, Johannes. (2005). Adverse psychosocial working conditions and subjective health in freelance media workers. *Work and Stress - WORK STRESS*. 19. 293-299

<sup>6</sup> Sykes, 2014: <https://mhe-sme.org/position-paper-physical-mental-health-problems-interlinked-policies-must-acknowledge/> King's Fund – no health without mental health (2011)

<sup>7</sup> <https://www.sciencedirect.com/science/article/pii/S0301051107001421>

mental health are clinically assessed by an appropriately qualified professional to ensure they access the right care, as soon as possible, without having to be placed on a long waiting list. Where brief interventions are indicated, performers may need access to practitioners who understand the needs of performing artists and have experience of working with them. Practitioners, regardless of their professional discipline, should be able to access support and expert advice from mental health specialists when more complex issues arise, and refer clients on to them if necessary.

Clinical governance protocols should be agreed between providers to ensure quality of services. Commissioners and providers should be looking for feedback from patients and be confident that incidents, when they arise, are handled effectively and learned from; that patients' complaints are managed; and that patients' data is protected and transmitted safely when appropriate with the individual patient's consent. The BAPAM clinic governance toolkit provides more information.<sup>8</sup>

## **The Guidance**

This guidance has been developed by BAPAM's Psychosocial Working Group, which brings together clinicians, including doctors, psychologists, psychotherapists and counsellors, with charities working with performing artists to support mental health and well-being, and academics undertaking research in this area. Together, these individuals and organisations aim to make a real difference to the quality of services available. The purpose of the group is to provide a forum in which approaches to prevention, care and support can be discussed, and clinical leadership can be provided for developing and maintaining an evidence-based service designed to support performing artists with issues related to performance-related mental health issues. The group has drawn on the clinical evidence base, including National Institute for Clinical Excellence (NICE) guidelines, which contain reviews of published evidence for healthcare interventions from clinical and cost-effectiveness perspectives, to produce this guidance for the performing arts sector.

There are seven recommendations which have been resulted from the work. Some apply to the performance environment, some to performers and performance professionals and some to clinical practice. Combined, they give a picture of what good practice looks like and we hope that this will be helpful to patients and their families and carers looking for support, to those commissioning mental health services for the sector, to those teaching performers and to practitioners providing services.

1. Preventing Mental Health Problems
2. Early Clinical Assessment
3. Brief Intervention
4. Peer Support
5. Ensure Links with the NHS
6. Multi-disciplinary Team Approach
7. Managing a Crisis

These are outlined in more detail below.

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<sup>8</sup> <http://bapam.org.uk/news/wp-content/uploads/2019/02/BAPAM-Clinical-Governance-Toolkit.pdf>

## RECOMMENDATIONS

### Recommendation 1: Preventing mental health problems

Mental ill health is a reality to be acknowledged in the performing arts industry. However, there are ways of reducing its incidence in the performing arts. It is not a necessary part of the job description.

**Performers** need to understand the risks and how following a suitable healthy life style and developing self-care techniques will help support their mental health.

Techniques for keeping mentally well include:

- **Physical activity – exercising** outside is proven to be especially beneficial<sup>9</sup> to mental health
- **Keeping socially connected** – artists should find time to nurture friendships and develop relationships outside their working environment. The quality of our relationships affects how we feel about ourselves. Artists frequently talk about feelings of isolation and support networks are important to maintain.<sup>10</sup>
- **Giving to others** – small things such as a smile or a kind word, or larger ones (such as volunteering), can improve mental wellbeing and help build new social networks<sup>11</sup>
- Taking notice<sup>12</sup> – becoming more aware of and **paying more attention** to the present moment. This can help performers enjoy the world around them more and understand themselves better
- **Learning** and developing new skills.<sup>13</sup>

Further techniques include:

- **Financial planning** – financial anxiety and career uncertainty is a huge stressor for performers and accessing financial planning guidance including planning for quiet periods, pension, insurance could help alleviate this anxiety
- **Transferable skills-recognition** - recognising the skills that performers have that are applicable to other roles if they are considering transitioning within or away from the industry, or needing an extra revenue stream.
- Ensuring a **healthy work-life balance**, and fostering a sense of self that is separate from performance success
- Getting sufficient **sleep and eating well**

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<sup>9</sup> <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3710158/>

<sup>10</sup> [http://www.bapam.org.uk/documents/PsychologicalSelfCare\\_BAPAMFactsheet.pdf](http://www.bapam.org.uk/documents/PsychologicalSelfCare_BAPAMFactsheet.pdf)

<sup>11</sup> <https://www.mind.org.uk/workplace/mental-health-at-work/taking-care-of-yourself/five-ways-to-wellbeing/>

<sup>12</sup> <https://www.nhs.uk/conditions/stress-anxiety-depression/mindfulness/>

<sup>13</sup> <https://www.nhs.uk/conditions/stress-anxiety-depression/improve-mental-wellbeing/>; <https://neweconomics.org/2011/07/five-ways-well-new-applications-new-ways-thinking>

Touring is a particularly intensive time for artists when problems can develop or worsen.<sup>14</sup> Managers and crew as just as susceptible to problems and should be taken into account when planning a tour.

**It is helpful if the performer can develop an understanding of what keeps them well, identify their own triggers for becoming unwell and make appropriate plans to manage their wellbeing. Recognising the need to seek help and doing so at an early stage, if required, is recommended.**

**Education Providers** encourage, practise and promote best practice in psychological self-care by supporting the development of healthy behaviours and techniques to build physical fitness, emotional resilience and the management of performance anxiety. The Healthy Conservatoires Network have produced the “Fit to Perform” framework which draws on research to support both institutions and individuals in building literacy in the wide-ranging areas of health and wellbeing.<sup>15</sup> Education providers should have mental health and wellbeing strategies in place that recognise what they can do to support students and staff in order to prevent and proactively manage emotional wellbeing and mental health issues, including promoting resilience. They should also enable access to appropriate and timely counselling and mental health services if required.

Teachers have a responsibility to educate their students on the importance of self-care but whilst the institution might sign up to promoting best practice, an organisation-wide process will need to be set up to monitor that this is being carried out. This is harder in situations where teachers are self-employed as they may be less connected to the organisation. There is work for institutions to do therefore to bring all their staff together to create a culture of health and wellbeing.

**The sector** can help by creating an environment which helps artists to be proactive about their mental health and prevent or mitigate problems. A whole-system approach benefits everyone, not just the artist, and applies equally to employers, education providers, and other agents such as promoters, managers, venues, agents, labels, crew and backstage and contractors. The industry is made up of many different types of people in different roles and some find it more difficult to speak about their mental health. Being aware of the factors that help artists keep healthy and supporting them to keep to that lifestyle helps to reinforce those behaviours. Successful artists and performance professionals can play a powerful role in modelling good practice.

Employers have a legal duty to protect employees from stress at work by doing a risk assessment and acting on it. The Health and Safety Executive provide management standards, and the Department of Work and Pensions “Thriving at Work” report can both help with this<sup>16 17</sup>

Membership bodies and Unions (Equity, Musician’s Union and ISM) are proactive in supporting health and wellbeing initiatives and can support freelancers who do not necessarily have managers or agents around them. There is a challenge in reaching people who have no wider networks in the industry to draw on.

Mental Health First Aid Training is helping people to recognise when they or their colleagues need help and what to do and their availability in performing arts environments (theatres, concert venues, festivals etc.) can provide support to a wide range of performing artists, including many freelancers

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<sup>14</sup> <http://bapam.org.uk/news/wp-content/uploads/2019/07/Healthy-Touring-Checklist-and-Rider-Working-Document-1.pdf>

<sup>15</sup> [https://www.healthyuniversities.ac.uk/.../05/louise\\_atkins\\_\\_\\_healthy\\_conservatoires.pdf](https://www.healthyuniversities.ac.uk/.../05/louise_atkins___healthy_conservatoires.pdf)

<sup>16</sup> <http://www.hse.gov.uk/stress/standards/>

<sup>17</sup> <https://www.gov.uk/government/publications/thriving-at-work-a-review-of-mental-health-and-employers>

who pass through those environments who would not otherwise have access to support. MIND has practical resources such as Wellness Action Plans.

Health Riders can encourage artists to explain what is going to help keep them feeling well so that they can perform as well as possible. Examples include ensuring a space where they can recover after a long journey before a performance, getting access to hot drinks, and helping them to keep to the healthy lifestyle that they are trying to adopt. Tour managers can help by planning touring schedules to support these goals. Helpline numbers and information about local resources should be readily available so artists can access them if needed.

Mind has a set of tools to support the development of a healthy environment including techniques for good self-management, recommendations for venues, managers, organisations and freelancers.

### **Recommendation 2: Early clinical assessment**

According to evidence from the research cited below, performing artists do not typically access health services, when they need them, sufficiently early<sup>18</sup>. This may be caused in part by the competitive nature of the industry and the fear that performers will lose out on work if they take time off, or if word gets out that they are in any kind of difficulty.

If a problem is identified, accessible help should be sought as soon as possible. Early assessment by a clinically-trained professional is important so that a diagnosis can be made and a plan put into place; long waiting times are unhelpful. We hope this guidance will encourage performers to seek help when they need it and the broader sector to support them to do so.

There are 24-hour helplines available if performers need someone to talk to.

Clinical assessment is available via NHS GPs, and assessments by clinicians specialising in performing arts medicine are available from BAPAM. Specialist advice on mental health issues relating to addictions is available from Music Support.

When there is an urgent need for support, performers should go straight to an NHS emergency department if an NHS GP is not available or call 999 for an ambulance. Crisis intervention services can often help, and NHS 111 can also give advice on what to do (see also Recommendation 7).

### **Recommendation 3: Brief intervention**

For patients assessed as having mild-to-moderate needs, brief interventions can be very effective and are ideally delivered by practitioners who understand performing artists and the context in which they work. Brief interventions would typically be 6-12 sessions. In NHS England, Psychological Therapies (IAPT services) can also help<sup>19</sup> and in most cases local services will accept self-referral.<sup>20</sup>

Where their mental health issue relates to their work, performers may want to engage with a practitioner who understands the context they are working in and for this reason will decide to look for an independent clinician rather than relying on the NHS. Performance anxiety is often a specific issue

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<sup>18</sup> Pain among professional orchestral musicians, a case study, in MPPA 28 (3):124-30 Sept 2013

<sup>19</sup> [https://www.nhs.uk/service-search/Psychological-therapies-\(IAPT\)/LocationSearch/10008](https://www.nhs.uk/service-search/Psychological-therapies-(IAPT)/LocationSearch/10008)

<sup>20</sup> <https://www.england.nhs.uk/wp-content/uploads/2019/02/improving-access-to-psychological-therapies-manual.pdf>;  
<https://www.england.nhs.uk/mental-health/adults/iapt/service-standards/>

to be addressed and specialist practitioners will understand this need. BAPAM holds a list of approved practitioners.<sup>21</sup>

Funding may be available for suitably regulated clinicians through various performing arts charities, usually on the recommendation of a clinician who has done the initial assessment.<sup>22</sup>

50% of patients who have an initial brief intervention will not need further intervention.

For clients with complex emotional needs, personality disorders, PTSD and other moderate-to-severe conditions, longer term therapy may be needed as well as access to a multi-disciplinary team of practitioners including psychiatric expertise. Multi-disciplinary teams are often best accessed via the NHS and may be enhanced with supplementary specialist input by the performing arts medicine sector. Early clinical assessment is essential to identify the right level of care. See Recommendation 6.

#### **Recommendation 4: Peer support**

Practising healthy behaviours to support mental health takes discipline and commitment, and these can be tested at intense periods in a performer's life. It is well recognised that the performing arts environment is competitive, and peers may not wish to share their wellness concerns with others they are working closely with, however there is very good evidence that peer support work in mental health generally<sup>23</sup>. A number of initiatives have peer support offerings available such as those listed below, and there are many more:

- Music Support offers safe tents at festivals and runs peer-led support using the 12-step model of recovery.
- Talk to Muso is an online forum where musicians can talk to each other about mental health issues, anonymously if they prefer.<sup>24</sup>
- Arts Minds is a web resource put together by Equity, Spotlight, the Stage and BAPAM<sup>25</sup>

#### **Recommendation 5: Ensure links with NHS**

All independent clinicians should make and maintain contact with the patient's NHS GP and any mental health specialists consulted by the patient, provided the patient gives consent. Whilst performers find that context-aware practitioners are often more helpful and performance schedules (especially when they are on tour) mean that they often need to access private treatment, the NHS will be dealing with broader health issues and managing crises. For performers who need medication in addition to talking therapies, it will often be the GP who prescribes it. It is important that NHS clinicians have a full picture of the patient's pathway. Good quality referral and discharge letters should be sent to other clinicians working with the patient.

#### **Recommendation 6: Multi-disciplinary team approach**

In the NHS, multi-disciplinary teams are the norm for patients assessed as having complex, enduring and severe needs. Patients' needs may change over time, sometimes suddenly, and practitioners

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<sup>21</sup> <http://www.bapam.org.uk/practitionerdb/search.php>

<sup>22</sup> [http://www.bapam.org.uk/documents/FinancialandPracticalSupport\\_BAPAMInformationSheet.pdf](http://www.bapam.org.uk/documents/FinancialandPracticalSupport_BAPAMInformationSheet.pdf)

<sup>23</sup> <https://www.iriss.org.uk/sites/default/files/2016-06/insights-31.pdf>

<sup>24</sup> <https://www.talktomuso.com/>

<sup>25</sup> <http://www.artsminds.co.uk/>

need easy access to a variety of professionals, (psychiatrist, psychologist, occupational therapist, GP or other medical professional) with agreed referral pathways. Patients in this group may need long term support and should be regularly reviewed including medication reviews. The situation becomes more fragmented in the private sector and practitioners working with a patient assessed with this level of need should see themselves as part of a multi-disciplinary team and ensure that there is a clearly identified “lead professional” who is able to develop and hold the narrative of the client and any overview of their situation. Independent providers and funders of performer’s care should be aware that the patient may be accessing a range of services and endeavour to ensure that their contributions complement current care.

All providers should themselves be receiving clinical supervision as part of their registration and some have peer supervision groups that focus specifically on mental health in the performing arts. It is recommended that private practitioners should have an agreement with a clinical/counselling psychologist and psychiatrist should specialist advice, medication management or further assessment be required.

Music Support can provide access to addiction services and has some access to residential treatment.

Patients should check that independent practitioners have experience of working with performing artists fully qualified and registered as below. Accreditation with BACP is further evidence of quality. Many of the bodies listed have an online register that can be searched and will handle any patient complaints. They also provide codes of conduct that outline expected professional behaviours.

	<b>Qualification/Accreditation</b>	<b>Registering Body</b>
Chartered Clinical Psychologist / Chartered Counselling Psychologist	Fully qualified and Chartered with the British Psychological Society	HCPC
Counselling/psychotherapy	Registered with one of the following: BABCP BACP UKCP BPC COSRT COSCA IACP	N/A

## Recommendation 7: Managing a crisis

In a crisis, action must be taken quickly, and the advice is for a patient to go to the nearest NHS Emergency Department if their own GP is not available. At this stage it is not necessary to see a clinician who has an understanding of the performing arts.<sup>26,27,28</sup>

The following table has been reproduced by kind permission of MIND.

<u>Accident and Emergency (A&amp;E)</u> (emergency support)	You need immediate medical help – especially if you think you might act on suicidal thoughts, or you've harmed yourself and need urgent medical attention.
<u>Emergency GP appointments</u> (emergency support)	You need urgent support for your mental health, but there's no immediate danger to your safety or the safety of others.
<u>Listening services</u> (telephone support)	You need to talk to someone right away about how you're feeling.
<u>Crisis teams</u> (Crisis resolution and home treatment team)	When you need urgent support, and you are already in contact with your local mental health services.
<u>Crisis houses</u>	When you need more intensive support than can be offered to you at home, but it's not appropriate for you to be admitted to hospital.
<u>Hospital admission</u>	<ul style="list-style-type: none"><li>• If not going to hospital would mean you or others would be at risk of harm.</li><li>• If you need intensive support which cannot be given to you at home</li><li>• You need to have an assessment which cannot be done outside of hospital</li></ul>

Having a strategy in advance of crisis, for example a support network who can help and a list of crisis numbers so people and organisations can support the patient in that moment, is very helpful.

It is good practice for the clinician who has referred the patient to a crisis service to follow up to check how they are.

Training is available for people who are likely to need to support a patient who has thoughts of suicide.<sup>29,30</sup>

<sup>26</sup> <https://www.nhs.uk/conditions/Suicide/>

<sup>27</sup> [https://www.mind.org.uk/information-support/guides-to-support-and-services/crisis-services/helplines-listening-services/#.XNQBb\\_ZFzIV](https://www.mind.org.uk/information-support/guides-to-support-and-services/crisis-services/helplines-listening-services/#.XNQBb_ZFzIV)

<sup>28</sup> <https://www.mind.org.uk/need-urgent-help/?ctaId=/need-urgent-help/using-this-tool/slices/using-this-tool>

<sup>29</sup> [https://www.prevent-suicide.org.uk/asist\\_suicide\\_intervention\\_skills\\_training\\_course.html](https://www.prevent-suicide.org.uk/asist_suicide_intervention_skills_training_course.html)

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Finally, as the sector develops resources and service for the performing arts workforce, a systematic review of patient experience and outcomes should be in place to better understand whether interventions are effective and to ensure continuous improvement. The BAPAM Psychosocial Working Group comprises a range of clinical experts and can act as a first port of call for organisations in the industry wanting guidance in this area.

## Resources

### Helplines:

#### Specific to Performing Arts

**Music Minds Matter:** Call 0808 802 8008 or email [MMM@helpmusicians.org.uk](mailto:MMM@helpmusicians.org.uk). <https://www.musicmindsmatter.org.uk/> 24 hours, counselling can also be accessed via this helpline for those meeting Help Musicians UK eligibility criteria

**Music Support:** mental, emotional and behavioural health disorders (including but not limited to alcohol and drug addiction). Call 0800 030 6789

**Film and TV Charity Support Line:** Call 0800 054 0000 24 hours

**Theatre UK:** Call 0800 915 4617 or email [advice@theatrehelpline.org](mailto:advice@theatrehelpline.org) <https://theatrehelpline.org/> 24 hours

**ISM members** can access a 24hr personal support and advice line, telephone counselling and face-to-face counselling free of charge. 020 7221 3499

**Industry Minds.** Telephone and counselling service <https://industrymindsuk.wixsite.com/industryminds>

**BAPAM:** free healthcare advice and clinical assessments Call 0207 404 8444 9-5pm Monday to Friday

#### General

**Samaritans:** Call 116 123 Email [jo@samaritans.org](mailto:jo@samaritans.org)

**Mind helpline:** Call 0300 304 7000 4.30pm–10.30pm every day.

**Campaign Against Living Miserably (CALM):** for men Call 0800 58 58 58 – 5pm to midnight every day

**Papyrus:** for people under 35. Call 0800 068 41 41 Monday to Friday 10am to 10pm, weekends 2pm to 10pm, bank holidays 2pm to 5pm. Text 07786 209697. Email [pat@papyrus-uk.org](mailto:pat@papyrus-uk.org)

**Childline:** for children and young people under 19. Call 0800 1111.

**Silverline:** for older people. Call 0800 4708090

**SANEline** (mental health, emotional support, suicide) 0300 304 7000 (6pm - 11pm every evening)

**Alcoholics Anonymous** 0845 769 7555 (24hrs)

**Anxiety Alliance** 0845 2967877 (10am-10pm everyday)

**Anxiety UK** 08444 775 774 (Mon-Fri, 9.30am-5.30pm)

**Arts and Minds** [www.artsminds.co.uk](http://www.artsminds.co.uk)

**B-eat Eating Disorder Association** 08456 341 414 (3pm - 10pm everyday)

**Bipolar UK Support Line** (Bipolar Disorder/Manic Depression): 0333 323 3880 (Monday to Friday, 9am - 5pm)

**Narcotics Anonymous** 0300 999 1212 (10am - midnight)

**National Bullying Helpline:** 0845 22 55 787, [admin@nationalbullyinghelpline.co.uk](mailto:admin@nationalbullyinghelpline.co.uk) (Monday to Friday, 9am to 5pm)

**No Panic** (Panic Attacks, Phobias, Obsessive Compulsive Disorders and other related anxiety disorders including those people who are trying to give up Tranquillizers) 0844 967 4848 (10am-10pm everyday)

**OCD Action** 0845 390 6232 or 020 7253 2664 [support@ocdaction.org.uk](mailto:support@ocdaction.org.uk) Monday – Friday 9.30am – 5pm)

**SupportLine** (emotional support): 01708 765200

**Age UK national advice line:** 0800 678 1174. (8am to 7pm 365 days a year)

**Cruse Bereavement Care** 0844 477 9400 (Mon-Fri, 9am-5pm)

**National Bullying Helpline** (workplace bullying): 0845 22 55 787

**Nightline** (support for students): <https://www.nightline.ac.uk>

**Rape Crisis** 0808 802 9999 (daily, 12-2.30pm, 7-9.30pm)

**Switchboard** (LGBT+ helpline) 0300 330 0630 or email [chris@switchboard.lgbt](mailto:chris@switchboard.lgbt)

**Victim Support** 08 08 16 89 111 (weekdays: 8am-8pm, weekends: 24hrs)

**Written and web resources**

**Health and wellbeing factsheets:** [http://www.bapam.org.uk/perf\\_advice.html](http://www.bapam.org.uk/perf_advice.html)

**Arts Minds website for entertainments industry:** <http://www.artsminds.co.uk/>

**Bullet Proof Musician** <https://bulletproofmusician.com/blog/>

**Staying Safe** <https://www.stayingsafe.net/>

**Mental Health Foundation** (<https://www.mentalhealth.org.uk>)

**Peer Talk** <http://www.peertalk.org.uk/>

**Rethink Mental Illness**, particularly the downloadable factsheets (<https://www.rethink.org/>)

**Playing Sane** (<https://www.playingsane.org>)

**Self Help Services** (<https://www.selfhelpservices.org.uk/>)

**Heads Together** (<https://www.headstogether.org.uk>)

**Zero Suicide Alliance** (<https://zerosuicidealliance.com>)

**Health practitioners with experience in the performing arts**

**BAPAM Directory of Performing Arts Practitioners:** over 190 practitioners across the UK.  
<http://www.bapam.org.uk/practitionerdb/search.php>

**Music Industry Therapist Collective:** <http://musicindustrytherapists.com/who-we-are/>

**Training/Workshops/Coaching**

**Music for Mental Wealth** <https://www.musicformentalwealth.com>

**BAPAM Healthy Performance Training** <https://www.eventbrite.co.uk/o/british-association-for-performing-arts-medicine-6787908061>

**Music and You.** Workshops for artists and musicians on mental agility and emotional resilience.  
[www.musicandyou.co.uk](http://www.musicandyou.co.uk)

## Psychosocial Working Group Members

We are extremely grateful to all the individuals below who have contributed to the development of this guidance.

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Molly Marsh	Royal Northern College of Music/professional musician	PhD student	Performer
Dr. Carol Chapman	Independent and BAPAM practitioner	Counselling Psychologist	
Dr. Melanie Grundy	NHS and BAPAM practitioner	GP with special interest in mental health	Performer
Dr. Frances Carter	BAPAM practitioner	GP with special interest in mental health	
Dr. Tamara Karni Cohen	Independent and BAPAM practitioner	GP with special interest in mental health	Performer
Dr. Anita Nathan	NHS and BAPAM practitioner	GP with special interest in mental health	
Dr. Monia Brizzi	Independent practitioner	Counselling Psychologist	
Dr. Calum Hendrie	NHS and BAPAM practitioner	Counselling Psychologist	Performer
Dr. Helen Brice	Independent BAPAM practitioner	Psychotherapist	
Lucy Marks MBE	Independent practitioner and consultant	Clinical Psychologist	
Dr. Peter Glenister	PRS for Music Fund, musician	Trustee, trained as medical doctor	Performer
Tamsin Embleton	Independent practitioner, MITC	Psychotherapist	Ex Music Manager
Denise Devenish	Independent practitioner/BAPAM Practitioner	Counsellor	Performer
Emma Mamo	MIND	Head of Workplace Well-being	
Samantha Parker	Music Support	Founder and Counsellor	Music Manager
Addam Merali-Younger	Equity	Member Support – bullying, harassment and mental health	
Eric Mtungwazi	Music Support	Managing Director	
Joanne Croxford	Music Support	Services Officer	Music Manager
Nicole Smith	Music Support	Services and Operations	
Kezia Racher	Help Musicians UK	Service Development Manager	
Joe Hastings	Help Musicians UK	Head of Health and Welfare	Performer
Jack Williamson	Music & You	Chief Executive	Music Manager
Brian Weir	Royal Welsh College of Music and Drama	Director of Student Experience	Performer
Claire Cordeaux	BAPAM	Director	