

# Mental Health and Wellbeing Services for Performing Artists

## Guidance for the Performing Arts Sector

### A Consultation Paper

#### Introduction

BAPAM is pleased to have brought together a group of clinicians and performing arts organisations interested in addressing challenges to the mental health and wellbeing of those who work in the sector. The group has produced guidance to support the development and delivery of services specifically 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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**We are publishing this paper for consultation and welcome all comments which will be considered prior to the final launch.**

**Comments can be posted via the online survey at the following link. Deadline 15 September**  
**<https://www.surveymonkey.co.uk/r/NKRFVGD>**

## BACKGROUND

The prevalence of mental health problems is considerably higher in the performing arts 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 performers 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%). 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.

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

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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.

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 Institute's 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.

While freelance work in general is associated with poor mental health,<sup>5</sup> 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 perform 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 interlinked<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 all have the potential to cause a deterioration in mental health. Touring schedules often mean that healthcare is not available when most needed, and long waiting times are reported for NHS services.

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 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 should have access to practitioners who understand the needs of performing artists and have experience of working with them. Practitioners, regardless of

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

<sup>5</sup> Ertel, M., Pech, E., Ullsperger, P., Von dem Knesebeck, O., & Siegrist, J. (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>

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.

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 connected – performers should find time to nurture **friendships** and develop quality relationships outside their working environment
- **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>10</sup>
- Taking notice<sup>11</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>12</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, and insurance could help alleviate this anxiety
- **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**.

Problems can develop or worsen for performers particularly when touring.<sup>13</sup>

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

<sup>10</sup> <https://www.mind.org.uk/workplace/mental-health-at-work/taking-care-of-yourself/five-ways-to-wellbeing/>

<sup>11</sup> <https://www.nhs.uk/conditions/stress-anxiety-depression/mindfulness/>

<sup>12</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>

<sup>13</sup> <http://bapam.org.uk/news/wp-content/uploads/2019/07/Healthy-Touring-Checklist-and-Rider-Working-Document-1.pdf>

**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** can 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>14</sup> Education providers should have mental health strategies that recognise the level of mental health problems in their student and staff population and provide opportunities to develop skills and techniques in emotional resilience as well as enabling them to access appropriate assessment and care if required.

**The sector** can help by creating an environment that helps performers to be proactive about their mental health and prevent or mitigate problems. A whole-system approach benefits everyone, not just the performer, and applies equally to employers, education providers, and other agents such as promoters, managers, venues, agents, labels and contractors. Being aware of the factors that help performing artists keep healthy and supporting them to keep to that lifestyle helps to reinforce those behaviours.

Mental health first aid training helps people recognise when they or their colleagues need help and what to do. Mind has practical resources for mental health first aiders and individuals such as Wellness Action Plans, a tool which helps people manage their mental health and wellbeing at work.

Health riders can encourage performers to explain what is going to help keep them feeling well so that they can perform as well as possible. These can include ensuring that they have a space where they can recover after a long journey before a performance, get access to hot drinks such as tea, and help 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 performing artists can access them if needed.

Mind is developing 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 above, performing artists do not typically access health services, when they need them, sufficiently early.<sup>15</sup>

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.

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<sup>14</sup> [https://www.healthyuniversities.ac.uk/.../05/louise\\_atkins\\_\\_\\_healthy\\_conservatoires.pdf](https://www.healthyuniversities.ac.uk/.../05/louise_atkins___healthy_conservatoires.pdf)

<sup>15</sup> Pain among professional orchestral musicians, a case study, in MPPA 28 (3):124-30 Sept 2013

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 typically consist of 6-12 sessions. NHS England provides Psychological Therapies (IAPT services)<sup>16</sup> and in most cases local services will accept self-referral. 75% of patients should get treated in 6 weeks and 95% in 18 weeks.<sup>17</sup>

Performers will want to engage with a practitioner who understands the context they are working in and for this reason may decide to look for an independent clinician rather than relying on the NHS. Performance anxiety is often a specific issue to be addressed and specialist practitioners will understand this need. BAPAM holds a list of approved practitioners.<sup>18</sup>

Funding may be available for suitable qualified and regulated clinicians through various performing arts charities, usually on the recommendation of a clinician who has done the initial assessment.<sup>19</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. This is often best managed in the NHS with support in some instances from the performing arts medicine sector and funders. 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. Support groups can be helpful. Music Support offers safe tents at festivals and runs peer-led support using the 12-step model of recovery.

### **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. While performers' availability (particularly when they are on tour) and the importance of seeing a context-aware practitioner, means that they often need to access private treatment, NHS clinicians are likely to be dealing with broader health issues and also managing crises. For performers who need

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<sup>16</sup> [https://www.nhs.uk/service-search/Psychological-therapies-\(IAPT\)/LocationSearch/10008](https://www.nhs.uk/service-search/Psychological-therapies-(IAPT)/LocationSearch/10008)

<sup>17</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/>

<sup>18</sup> <http://www.bapam.org.uk/practitionerdb/search.php>

<sup>19</sup> [http://www.bapam.org.uk/documents/FinancialandPracticalSupport\\_BAPAMInformationSheet.pdf](http://www.bapam.org.uk/documents/FinancialandPracticalSupport_BAPAMInformationSheet.pdf)

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 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 their condition and care, including medication, should be reviewed regularly. 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 the patient’s care should be aware that he or she 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 while some have peer supervision groups that focus specifically on mental health in the performing arts, it is recommended that all private practitioners should have an agreement with a clinical/counselling psychologist and psychiatrist enabling them to seek specialist advice, medication management or further assessment of the patient as necessary.

Music Support can provide access to addiction services including residential treatment in exceptional circumstances.

Patients should check that independent practitioners have experience of working with performing artists and are fully qualified and registered as shown 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 patients are advised 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>20,21,22</sup>

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

<a href="#">Accident and Emergency (A&amp;E)</a> (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.
<a href="#">Emergency GP appointments</a> (emergency support)	You need urgent support for your mental health, but there's no immediate danger to your safety or the safety of others.
<a href="#">Listening services</a> (telephone support)	You need to talk to someone right away about how you're feeling.
<a href="#">Crisis teams</a> (Crisis resolution and home treatment team)	When you need urgent support, and you are already in contact with your local mental health services.
<a href="#">Crisis houses</a>	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.
<a href="#">Hospital admission</a>	<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 place in case a crisis occurs, such as a support network of people 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.

<sup>20</sup> <https://www.nhs.uk/conditions/Suicide/>

<sup>21</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>22</sup> <https://www.mind.org.uk/need-urgent-help/?ctaId=/need-urgent-help/using-this-tool/slices/using-this-tool>

Training is available for people who are likely to need to support a patient who has thoughts of suicide.<sup>23, 24</sup>

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Finally, as the sector develops resources and services for the performing arts workforce, a systematic review of patient experience and outcomes should be in place to better understand the extent to which 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.

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<sup>23</sup> [https://www.prevent-suicide.org.uk/assist\\_suicide\\_intervention\\_skills\\_training\\_course.html](https://www.prevent-suicide.org.uk/assist_suicide_intervention_skills_training_course.html)

<sup>24</sup> [https://www.prevent-suicide.org.uk/assist\\_suicide\\_intervention\\_skills\\_training\\_course.html](https://www.prevent-suicide.org.uk/assist_suicide_intervention_skills_training_course.html).

## 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

**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

**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) For a listening ear or just someone to talk to the Samaritans are open 24 hours a day, 7 days a week.

**Mind helpline:** Call 0300 123 3393 - lines are open 9am to 6pm, Monday to Friday (except for bank holidays). Email: [info@mind.org.uk](mailto:info@mind.org.uk). Text: 86463. For mental health information and advice and where to get support in your area.

**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

### 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/>

### Health practitioners with experience in the performing arts

**BAPAM Directory of Performing Arts Practitioners:** over 170 practitioners across the UK.

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

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

## 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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Dr. Helen Brice	Independent practitioner	Psychotherapist
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Samantha Parker	Music Support	Founder and Counsellor
Addam Merali-Younger	Equity	Member Support – bullying, harassment and mental health
Eric Mtungwazi	Music Support	Managing Director
Joanne Croxford	Music Support	Services Officer
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
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