

The Arts and Health Project:

supporting healthy aging through the arts



‘Community-engaged’ arts programs promote health, well-being and social inclusion for vulnerable older adults

by Jenifer Milner

In the year 2000, as the world contemplated the potential of a new century, Gene D. Cohen, MD, PhD, contemplated the potential of aging. To this potential, as well as damaging myths of aging, Cohen drew the public’s attention in his then-new book *The Creative Age: Awakening Human Potential in the Second Half of Life*.¹ He heralded “a new juncture” in the field of aging—“one in which we move beyond studies of *what aging is* to *what is possible with aging*.”

“Finally, we are ready to talk about what is possible, not despite aging, but *because* of it,” Cohen observed. “There is no denying the problems that accompany aging. But, what has been universally denied is the potential. The ultimate expression of that potential,” he wrote, “is creativity.”

A geriatric psychiatrist who established the world’s first federal research program on mental health and aging and a former acting director of the US National Institute on Aging, Cohen was director of George Washington University’s Center on Aging, Health and Humanities when *The Creative Age* was released. He also held positions at GWU as a professor of psychiatry and a professor of health care

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*In the Strathcona Puppet
Performance Group,
Cantonese-speaking elders
use puppets to tell life-
inspired stories*

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The Express Your Voice Choir performs at the Roundhouse Community Arts and Recreation Centre in downtown Vancouver. This group now sings with other choirs in the city and feels part of the broader creative community

sciences. Through his research projects and life's work in the field, the eminent doctor had seen a capacity for creativity in older adults that he felt went unrecognized in society due to negative attitudes toward later life.¹

To Cohen, creativity was more than simply artistic activity: It was the spark that illuminates the human spirit and ignites the desire to grow.¹ This quality is innate, he believed, adding that "... we can use our creativity to shape our lives and, especially as we age, unleash new potential for personal growth and expression."

'Arts and health' opens up new possibilities

In 2001, an opportunity arose to study the effects of creativity in older adults. As principal investigator for a multi-site research project sponsored by the National Endowment for the Arts and others,² Cohen evaluated the impact of community-based, professionally led arts programs on health, well-being and social functioning in older adults. The groundbreaking controlled research, unofficially called the Creativity and Aging Study, revealed a link between creativity and healthier aging.^{2,3}

Compared to those in the study's control groups, arts program participants enjoyed better health (both physical and mental) plus increased overall activity when assessed over a two-year period. "These results point to powerful positive intervention effects of these community-based arts programs run by professional artists," Cohen and colleagues stated. They also concluded that the programs had "true health promotion and disease prevention effects."²

For organizations that support health and wellness in older adults, the Creativity and Aging Study suggested another way to make a difference. "The possibilities that opened up were exciting," says Claire Gram, a population health policy consultant at Vancouver Coastal Health (VCH), headquartered in Vancouver, British Columbia.

Since 2006, VCH has partnered with the City of Vancouver Board of Parks and Recreation, as well as community groups and artists, to provide "community-engaged" arts programs to vulnerable and marginalized older adults. A three-year pilot project—"Arts, Health and Seniors: Healthy Aging through the

Arts" (AHS)—launched in 2006. Recognizing the project's merits, the partners expanded and extended the project a further three years in 2009, renaming it the "Arts and Health Project: Healthy Aging through the Arts."

According to Gram, VCH has an interest in finding and encouraging programs that support the older population's more vulnerable or marginalized members, which is one reason it initially became involved in the AHS project. As the regional health authority for a geographic area that includes the metropolis of Vancouver and neighboring cities, as well as a good number of Aboriginal and coastal mountain communities, VCH is responsible for delivering health services to more than one million Canadians. Most of these services are community or hospital based, Gram explains, "but we also have a role in public health." Part of this role includes addressing determinants of health—for example, income, racism, education, and sense of identity.

While VCH itself doesn't have a large capacity for older-adult health promotion, "we have a strong tradition of partnering with community health organizations to address things that affect public health and keep people well," Gram continues. "Care at the end of life is a very high percent of our healthcare budget, so the more we can keep people well, the better it is for the individual, for the community, and for the health-care system."

What the health authority has discovered with its community partners, Gram adds, "is a fairly big gap between services offered for well older adults and those for frail seniors who come into care. Services provided through recreation, for example, are primarily for well individuals." So in 2005, when Gram discovered the Creativity and Aging Study and other developments in arts and health, she began looking into opportunities that might exist at VCH to pursue these programs.

“Fortunately, it was good timing for our SMART Fund,” Gram says. As outlined in the Fund’s strategic plan, this granting program “invests in innovative, community-based” initiatives that promote and improve health for people who live in the VCH service region.⁴ Funded projects “respond to the health needs of vulnerable populations by supporting community capacity-building strategies that demonstrate results.” The AHS project fit perfectly with those objectives.

Addressing the needs of an aging population

At Vancouver Board of Parks and Recreation, as in many public sector offices in 2005, staff also were grappling with the needs of the fast-growing older-adult population. In Canada, not only is life expectancy at birth among the highest in the world, but the population is also aging more rapidly than in other developed nations due to the size of the post-war Baby Boom.⁵ By mid-century, statisticians expect that one in four Canadians will be 65 years of age or older.⁶

For the Park Board, demographics were “the single most significant consideration” in developing the AHS pilot project with VCH, says Margaret Naylor, who works in the Arts, Culture and Environmental Arts Department. Generally speaking, “programming is very limited for older adults,” explains Naylor, coordinator of the Arts and Health Project: Healthy Aging through the Arts. “We need to provide a wide variety of programs for older adults, and we need to explore their needs and look for ways to address them.”

Because health and well-being become increasingly important issues to people as they age, the initiative’s potential to address those things was a major factor, Naylor notes. Also significant, “our definition of recreation is changing,” she adds. “We now understand that recreation can be more expansive—for instance, we see the role of the arts in

relation to health, and of arts and health in relation to recreation.”

In March 2005, before Naylor was involved in the project, her colleague jil weaving encountered Claire Gram at the first Canadian Arts and Health Forum, held in Vancouver. Weaving, coordinator of arts, culture and environment for the Park Board, is a seasoned artist and cultural worker who has developed numerous community projects and partnerships involving the arts and artists. Unsurprisingly, she was enthusiastic when preliminary results from the Creativity and Aging Study were presented at the forum.

Recognizing this work’s promise, Gram and weaving agreed to explore the possibilities of a local project. “We knew people working in the field were supported by Cohen’s study, so we didn’t really see the need to do a pilot study just to see if the intervention would work,” mentions Gram. “Rather, we wanted to turn it into more of a demonstration of how this approach works in a Canadian setting and in this area, as well as to build capacity to do more such programs.”

Gram and Weaving decided that an initiative established by VCH and the Park Board would focus not only on measuring health outcomes, but also on implementing programs to offer older adults “real” hands-on workshop experiences with professional artists. Programs where older adults would engage with the artists as full creative participants in the work they created together—a practice known as community-engaged arts.

A practice that encourages meaningful participation

According to jil weaving, community-engaged arts programs “are hugely meaningful.” “Some community-based arts programs are about individual skill building,” she says, “while others are about participating in something that is really the creative work of the artist.”

While those are all useful projects, community-engaged arts offers a different kind of experience, weaving observes.

With a community-engaged arts practice, “you go into a project with the knowledge that everybody is creative, everybody has individual life knowledge, and these will be absolutely essential to what’s created,” explains weaving. “The work itself will have elements of this creativity and life knowledge integrated into its very fabric.” Respect is a cornerstone of this approach, she stresses—respect for everyone involved and for the knowledge they offer the project.

Because community-engaged arts is not a practice where artists simply bring ideas for participants to realize, it’s important that people understand from the start exactly what they’re embarking on, weaving continues. “The artist, or the person who fulfills that role, needs to bring together everyone’s creativity and life knowledge, so the collaborative work of the participants communicates beyond the group. That’s a complex thing to do,” she adds. “And that’s why you need an artist whose heart is engaged in this kind of process.”

Collaborative approach supports participants and programs

With the goal of establishing a community-engaged arts initiative in the Vancouver area, VCH and the Park Board consulted widely with local community associations, seniors groups and other stakeholders for about a year, relates Margaret Naylor. This input helped in developing a plan to get the initiative underway in fall 2006.

According to a 2012 report,⁷ partnerships were set up with several community organizations that serve older adults to deliver separate arts programs at four community centers in Vancouver and

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At Renfrew Collingwood Seniors Centre, the Fabric Art Group works on a collaborative 'history' book, a project involving students from Nootka Elementary School

North Vancouver. Programs provided through these partnerships have aimed to strengthen the health, wellness and social inclusion of vulnerable older adults. While participant numbers have ebbed and flowed, 51 people took part in the AHS programs consistently over the initial three-year term. These participants ranged in age from 55 to 90 years, with women making up a large majority (80%). At three pilot sites, individuals “faced some form of barrier or marginalization beyond age, including language barriers, stigma related to sexual orientation and/or economic challenges.”⁷⁷

Program participants are encouraged to work with each other and with professional artists on ideas that they consider important “and [represent] seniors in a fuller way to the community at large.”⁷⁷ At the six program sites that currently exist, individuals have collaborated on writing (also digital photography, video and theater); puppet theater, storytelling and dance; painting and drawing; mixed media arts; writing and digital video; and choral singing.

Each site’s project team consists of a professional artist, an associate artist (in some cases, a co-lead artist), and a seniors’/community worker. The artists are responsible for developing programming and working with participants in weekly two-hour workshops that run from approximately September to June each year. The seniors’ worker undertakes “organizational and administrative tasks,” plus provides “social and cultural support.”⁷⁷

For example, at Strathcona Community Centre, Seniors’ Worker Liza Tam was heavily involved at the program’s start in recruiting participants among the area’s Chinese-speaking elders. Previous attempts to offer arts programming in the area had largely failed due to insufficient interest from the community. When Tam approached people about the AHS arts program, they proved reluctant to participate, so she focused her pitch on health instead. In addition, she approached seniors programmers and other seniors programs to explain the benefits of participation. The health

angle reframed the program in people’s minds and a group of elders enrolled as participants. The program’s overall success—and its ongoing popularity—can be traced to that initial recruiting result and the enthusiastic word-of-mouth by participants that followed.

Critical components enrich overall impact

Among other activities supported by the AHS pilot, now the Arts and Health Project, participants enjoy occasional arts experiences that allow them to see the work of professional artists in disciplines related to their group’s work. In addition, the groups have public performances and exhibitions of their own work. An end-of-year showcase is the highlight. Members of all the groups gather together at the Park Board’s Roundhouse Community Arts and Recreation Centre, where they show their work to peers, family and friends, and members of the community.

“We think it’s essential that these works are performed or installed or exhibited,” states Jil Weaving. “They are intended to extend beyond participants in a way that any artwork ‘creates beyond its creator.’ Public performances and exhibitions provide opportunities for others who haven’t been involved in making these works to engage with them and the ideas they express. And that is why it’s important for these programs to support creative, meaningful and communicative work that benefits the community.”

Another critical project activity is the Arts and Health Community of Practice (CoP). Together with steering committee members, artists, seniors’ workers and other staff from project sites participate in monthly meetings, where they discuss a wide range of topics. They also offer each other emotional and professional support. The original goal when the CoP formed was “to share newly

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"Video letters," memoirs to departed loved ones, were created by the Silver Harbour Digital Storytellers and projected over a reflecting pool as part of the Digital Shrine installation at The Night for All Souls, held each year in late October at Vancouver's Mountain View Cemetery

acquired knowledge and to collectively and creatively address issues and situations that arose at the different project sites," the project report shows.

For VCH's Claire Gram, the CoP is at the heart of the arts and health initiative. "It builds knowledge and ability within the community—the competencies for successful implementation," she says. "From the start, we had this vision for a broader application."

Research reveals and reinforces benefits

In addition to a capacity-building component, VCH and the Park Board always intended the AHS project to include research. They turned to researchers from the University of British Columbia (UBC), also located in Vancouver, who agreed to partner with the project. "It was pretty clear that the group was inspired by Gene Cohen's study and envisioned a similar kind of evaluation," says Principal Investigator Alison Phinney,

PhD, associate professor in the UBC School of Nursing. But the two projects differed in some significant ways, which the research would need to reflect.

"Cohen's research study was multisite, had a lot of funding, and evaluated three arts programs that had been ongoing," explains Phinney. In contrast, the Vancouver program was new, "and the evaluation structure could be integrated from the start." Health outcomes would be only one part of the project's evaluation as well. Other planned components included process evaluation, reports from participants, and the CoP.

The project's six months lead time and lack of research funding presented challenges, according to Phinney, who scrambled to pull together a research study that would not only measure health outcomes, but would also work quickly and inexpensively. According to the project report, quantitative tools were selected "with pre- and post-ques-

tionnaires to measure aspects of physical well-being, emotional well-being, and social inclusion." To "enrich the quantitative data," qualitative research would include focus groups and feedback.

In the end, the researchers were able to replicate Cohen's study (although on a small scale, Phinney points out), and illuminate the benefits of a real-world community-engaged arts intervention. Study results showed that participants had "improved physical well-being, higher degrees of social inclusion, increased confidence and an enhanced sense of accomplishment."

Phinney calls the quantitative results "compelling," particularly in the area of social inclusion. "The participants' sense of community and belonging was powerfully impacted," she says, a finding that she believes dovetails with the whole premise of community-engaged arts. Qualitative research supported these results. What was unexpected, and in-

sightful, however, was how participants reacted to some of the questions on the survey. Many individuals objected to these questions, calling them “insulting,” “hurtful” or senseless, according to the report.⁷

VCH’s Claire Gram sheds some light: “The research we need to show for funding focuses on proving how vulnerable older adults are, but that undermines the nature of the programming itself. Participation is aimed at building people’s confidence, self-esteem and self-efficacy,” she says. “Quantitative research doesn’t begin to explain the experience for them.”

Participants had the chance to clarify what the AHS programs had brought into their lives in the focus group discussions. There, four common themes emerged, which the report summarizes as below:⁷

- “The program provided opportunities to develop social connections and foster a sense of belonging for the participants. This happened both within the AHS project and within the larger community.”
- “The art projects provided seniors with an opportunity to engage in a challenging and valuable experience that led to a sense of confidence and a stronger sense of identity for participants.”
- “The seniors experienced a level of discipline and focus that enabled them to engage in other activities that promote health.”
- “The seniors involved in the program expressed the ability to find new ways to engage creatively and to gain a sense of accomplishment as artists.”

The last finding seems to validate the personal promise of creativity and aging in community-engaged arts. Individuals in later life who don’t believe they’re creative, come to recognize this ability in themselves by participating in these

programs, and they learn new ways to express themselves.

Project focus moves to broader dissemination

The Arts and Health Project is moving into a new phase in 2013, with the long-term goal of broader program dissemination. The existing six project sites “will graduate from financial funding at the end of 2012,” notes the Park Board’s Margaret Naylor. To prepare the organizers, “we’ve been working with them on developing grant-writing skills and exploring ways in which they can implement their programming in a sustainable way.” While the financial relationship will end, sites will still participate in both the Arts and Health Community of Practice and the year-end showcase.

Moving forward, the plan is to choose two or more new sites every year (subject to funding) for a four-year mentorship. According to Naylor, “We’ll work closely with organizational partners to build their capacity for community-engaged arts practice, work with seniors’ workers and older adults, share lessons learned about programming, and finance these sites’ programs for three years.” As with the existing sites, the financial relationship will then end, but the professional relationship will continue.

In the past year, the British Columbia Recreation and Parks Association (BCRPA) has become the Arts and Health Project’s fiscal agent, Naylor continues. BCRPA’s broader geographical reach will allow project sites to be developed within the province, beyond the Vancouver area, she says. And with the association involved, the project’s professional development capabilities will expand. Naylor mentions online learning tools, capacity-building workshops and a dedicated project website, expected to go live later next year.

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Resources

Internet

City of Vancouver Board of Parks and Recreation: Arts and Health Project

<http://vancouver.ca/parks-recreation-culture/arts-and-health-project.aspx>

George Washington University’s Center on Aging, Health and Humanities

www.gwumc.edu/cahh

National Endowment for the Arts: Arts in Aging

www.arts.gov/resources/accessibility/artsnAging_top.html

Vancouver Coastal Health

www.vch.ca

Print

Arts, Health and Seniors: Healthy Aging through the Arts, May 2012 report (executive summary)

http://vancouver.ca/files/cov/artshealth_execSummary.pdf

Creativity and Aging Study: The Impact of Professionally Conducted Cultural Programs on Older Adults, April 2006 report (executive summary)

www.gwumc.edu/cahh/NEA_Study_Final_Report.pdf

The Impact of Professionally Conducted Cultural Programs on the Physical Health, Mental Health and Social Functioning of Older Adults (The Gerontologist, 2006)

www.gwumc.edu/cahh/TG-Creativity&Aging.pdf

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What truly supports the Arts and Health Project, though, is the passionate conviction of all the people taking part in the project. “We all recognize that these community-engaged arts programs provide such positive experiences,” states Naylor. “Older adults who take part have a new network of colleagues, which they value tremendously. Many feel healthier and better about themselves, and have become more active in their lives—something they usually attribute to the confidence they’ve gained from participating. People also feel like their relationships are stronger with their families and with the community at large.”

Most significantly, Naylor adds, “participants believe that they are not only contributing to their culture by telling their stories, but they are also changing the way their culture understands older people and aging. And they feel that that’s an important role for them to be playing in the community.”

Jenifer Milner is editor-in-chief of the Journal on Active Aging®. A former cultural worker, Milner has written numerous articles on the benefits of arts activities in various settings and for different populations.

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6. Human Resources and Skills Development Canada. *Canadians in Context—Aging Population*. Retrieved on October 15, 2012, from <http://www4.hrsdc.gc.ca/.3ndic.1t.4r@-eng.jsp?iid=33>.
7. Phinney, P., Pickersgill, M., Naylor, M., et al. (2012). *The Arts, Health and Seniors Project: A Three Year Exploration of the Relationship between Arts and Health*.

Images courtesy of the City of Vancouver Board of Parks and Recreation Arts and Health Project: Healthy Aging through the Arts

Practical advice

For organizations considering a community-engaged arts program, interviewees provide the following tips:

Artist selection is key to success.

Identify a professional artist who you feel is able and willing to run this kind of project. Ensure this person has experience working both in the community and in community-engaged arts.

Your target community of older adults will shape your program.

First determine who your program will serve and then how you will serve them. Different groups will have different needs and requirements.

Participant groups with a mix of ages and abilities tend to thrive more.

Older adults who are more frail

benefit from the support of younger or more vigorous peers.

Your program’s community/seniors’ worker must understand the social and/or cultural issues for your target group. This person will need to liaise with participants and provide support.

Consistency is important. Once a week may be a perfect, consistent pace for participants to work together, depending on the challenges they may have in their lives.

Participants need time to find their voices. Recognize that this kind of programming takes time. Older adults are less willing to take risks initially, but they blossom when they develop trust in the group and grow more confident in their creative abilities.

It’s a long-term commitment. Once older adults invest in a community-engaged arts program, they become passionately attached to it. They also come to depend on the group and the programmers. In 2009, with the Arts, Health and Seniors pilot drawing to a close, participants pleaded for their programs to continue.

This is real artwork. Arts projects must challenge your participants to do creative, meaningful, communicative work that benefits the larger community. These projects are opportunities for older adults to actively enhance the community—and for other age groups to recognize the value in what their elders contribute.