

ARTS, HEALTH AND SENIORS

Healthy Aging through the Arts



Executive Summary *May 2012*

From 2006-2009, an initiative was developed in Vancouver and North Vancouver to provide vulnerable and marginalized seniors with community-engaged arts programming and to demonstrate the role that professionally led arts programs can play in the health and well-being of seniors.



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Documentation and evaluation were established as core processes of the Arts, Health and Seniors: Healthy Aging Through Arts project (AHS) so that knowledge translation would be readily accessible to those interested in further study and program related development.

The AHS project established a partnership with researchers at the University of British Columbia Schools of Nursing, Audiology and Speech Sciences to develop a research process to assess the health impacts on seniors participating in the program. This report provides a succinct overview of the initiative, its evaluation and an expanded description of positive impacts expressed by participating seniors related to their health and well being.

The inspiration for the research component of the AHS project came largely from Gene Cohen's Creativity and Aging (CA) study, which was the first peer-reviewed study examining the influence of professionally conducted, participatory art programs on the general health, mental health and social well-being of elderly persons. As an extension of Cohen's work, the AHS research process explored health impacts on seniors using a selection of quantitative tools with pre and post questionnaires to measure aspects of physical well-being, emotional well-being, and social inclusion.

In addition to the quantitative research, the AHS project engaged in qualitative research and documentation that included focus groups and feedback. The focus groups included general discussions about people's experiences in the project as well as addressing how they perceived the impact of the group on their health and well-being. Another purpose for engaging in the focus groups was to discuss the participants' experiences in regards to the quantitative health questionnaires themselves.



The AHS project took place in four community centres located in four different neighbourhoods. Seniors at three of the sites faced some form of barrier or marginalization beyond age, including language barriers, stigma related to sexual orientation and/or economic challenges. Participant numbers fluctuated through the course of the project, however 51 seniors remained involved for the full 3 year duration. The majority of participants were women, and participants ranged in age from 55-90 years.

The project involved weekly participatory workshops led by professional artists, and yearly exhibitions and performances of the works created at community and professional venues. Participants also had opportunities to experience related arts exhibitions/performances at professional galleries and theatres from time to time. Art forms experienced at the four sites included writing and digital photography, digital video, puppetry and dance, and mixed-media visual arts. Expanded information about each site is available in an appendix to the full report.

Research Findings

Quantitative results confirm some of the findings of earlier research, while showing the benefits of a community-engaged arts intervention in a real life setting.

Involvement in the AHS project is associated with improved physical well-being and higher degrees of social inclusion. Statistically significant improvements are particularly demonstrated in three areas: perceived health status, chronic pain, and sense of community.

One important insight emerged related to the quantitative evaluation. Many participants had strong reactions to some of the survey questions, finding them either insulting or otherwise hurtful. They believed that the program had offered them numerous important benefits that were not reflected in the questionnaires.

A number of participants also felt that many of the questions did not make sense. It is possible that this was a particular issue for those who did not “fit the mold”; whether because of the language they spoke, their sexual orientation, or their socio-economic status. The perception of quantitative evaluations being too rigid may have affected how some participants responded to the questionnaires or contributed to feelings of further marginalization.

The analysis of the focus group data indicates that there are several important ways in which the AHS project played a role in the participants’ lives. These narratives provide additional evidence to support the results gathered by quantitative measurements.

First / The project provided opportunities to develop social connections and fostered a sense of belonging for the participants within the AHS project and also within the larger community. Increased social connections and belonging were recurring themes in focus group discussions and within quantitative measurements. These findings provide good evidence to suggest that involvement in community-engaged arts can support social health and well-being.

Second / Seniors in all groups said that being involved in a project that required dedication and hard work led to a sense that they could still learn new things. The increased discipline and focus enabled them to engage in other health promotion activities. This qualitative result also underscores similar results gathered by the quantitative measurements, suggesting a possible mechanism by which involvement in the AHS project resulted in improved perceived health and reduced chronic pain.

Third / The AHS project provided seniors with an opportunity to engage in a challenging and valuable experience that led to a sense of confidence and stronger sense of identity. This focus group finding is significant in that it clearly reveals increased self-esteem and self-identity as a result of being part of the AHS project, whereas the quantitative evaluation was only able to identify minor improvement in self-esteem over time.

Fourth / The seniors involved in the program gained a sense of accomplishment as artists and were able to find new ways to be engaged creatively. While we did not initially conceptualize health and well-being in terms of creative accomplishment, it appears from these focus group results that this is an important aspect of well-being that should not be overlooked in future evaluations.



In summary

The seniors in this project experienced improved physical well-being, higher degrees of social inclusion, increased confidence and an enhanced sense of accomplishment.

The connections to Dr. Cohen's findings are clear and "...point to powerful positive intervention effects of these community-based art programs run by professional artists. They point to true health promotion and disease prevention effects."

For more information on the AHS project, and/or to download the full report, please go to:

<http://vancouver.ca/parks/arts/artshealthseniors.htm>



Epilogue

Following the completion of the 3-year tenure of the AHS project seniors, artists and seniors workers all expressed a strong desire their sites' programming continue. The organizational partners and the project's Executive Committee understood the benefits for the participants and their communities and extended the programming. In 2009 three additional sites were initiated as part of the Vancouver Coastal Health's Integrated Health Network program. Subsequently two of these sites were amalgamated and the project has continued with six sites into the current programming year. The project is now in its sixth year of program delivery.

Interest in developing more independence for the existing sites has been recognized. Sustainability and transition strategies are currently being designed with the existing project sites. This move will also create opportunities for new sites to develop and be 'incubated' as part of the larger project. This restructuring will allow for a future in which the project benefits will stretch across a broader geography and to include a larger population of vulnerable seniors.

The formal health research conducted by the U.B.C. School of Nursing during the first 3 years of the project has been compiled and evaluated in this report; these findings have provided a strong foundation for the development of the project. The documentation and research revealed much information, produced many associated learnings and exposed multiple underlying questions. Ongoing analysis — potentially including secondary analyses — is felt to be an exciting opportunity and will inform future research activities.

