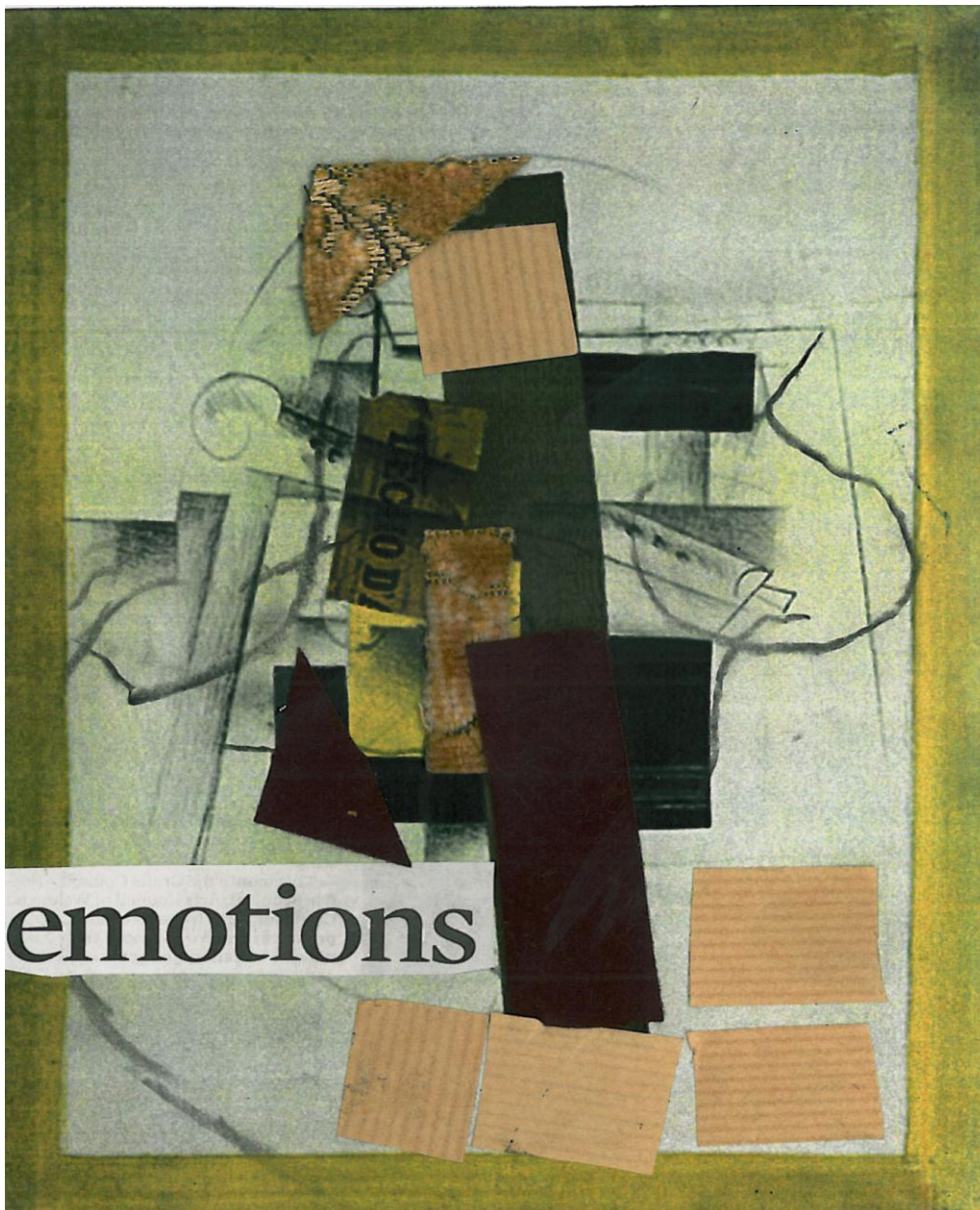


Memories in the Making

The impact of arts & reminiscence activities
on people with dementia



A report for

WAVE

THE MUSEUMS, GALLERIES &
ARCHIVES OF WOLVERHAMPTON

by JENNI WAUGH
CONSULTING

January 2013

WAVE



Supported using public funding by
**ARTS COUNCIL
ENGLAND**



Cover image created as part of the Memories in the Making project by a resident of New Cross Care Home.

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WAVE: Memories in the Making

The impact of arts & reminiscence activities on people with dementia

SUMMARY



BACKGROUND

WAVE, the Museums, Galleries and Archives of Wolverhampton, is renowned for the breadth of its community and health engagement work.

In April 2011 WAVE (then known as WAHS, Wolverhampton Arts & Heritage Service) was commissioned by the Wolverhampton City Council's Putting People First Team from Adults Social Care to pilot the ArtsinMind programme of work.

ArtsinMind is a programme of activities for older people and those living with dementia who find it difficult to continue accessing arts due to their age or disability. The project was developed by WAVE with support from Creative Health CiC and funded through MLA Renaissance, Transforming Adult Social Care and Arts Council England.

The project promotes the use of arts and heritage activities to improve the quality of life of older people who are living with dementia or cognitive difficulties. The aim is to enhance the mental and emotional wellbeing of older people and to improve their engagement with the arts.

The ArtsinMind project came into being from the learning of previous pilots across the West Midlands created with regional partnerships. As part of this commission WAVE, working in partnership with PraXis (the research branch of Creative Health CiC), set out to demonstrate how arts and museum services can be commissioned to deliver Health and Wellbeing and related services, particularly with regard to dementia support, in line with the *National Dementia Strategy: Living Well with Dementia 2009-2014*¹, and the Wolverhampton Dementia Forward Plan.

One of the 4 key strategy drivers of the *National Dementia Strategy* is 'Living well with dementia in care homes'.

The overarching commissioning outcome of the Wolverhampton Dementia Forward Plan is 'to improve the lives of people with dementia'

This evaluation is based on the outcomes of four series of arts & reminiscence workshops delivered in four different residential care homes in Wolverhampton between March and July 2012.

Delivery of the workshops continues.



SESSION DELIVERY

The creative facilitator employed by Wolverhampton Arts & Heritage Service to undertake the Arts & Social Care workshops in the care homes is a qualified social worker and artist with enhanced CRB approval. She has extensive experience of delivering both reminiscence and creative activity in care settings.

The initial session introduced the participants to each other and to the activity ahead. The facilitator then introduced the group to a range of arts and reminiscence activity using artefacts from Wolverhampton Art Gallery's handling collections and diverse creative techniques.

¹ Dept of Health, 2009

Two groups also spent a session each at Wolverhampton Art Gallery, exploring the collections and visiting the Sensory Gallery.

NUMBER OF OTHER PEOPLE PRESENT...

	TOTAL	Aldergrove	Coton Road	Inspirations	New Cross
...family carers	4	1	0	0	3
... paid care givers	14	2	1	7	4
... WAVE volunteers or staff (exc facilitator)	17	1	1	11	4

OUTCOMES

The following were identified as the intended outcomes of this activity, in line with the National Dementia Strategy, 2009:

1. Older people, family carers and people living with dementia enjoy participating in reminiscence and creative activity
2. Family carers/care staff feel that reminiscence and creative activity improves the well-being and quality of life of people living with dementia
3. Family carers/care staff of people living with dementia perceive WAVE galleries and museums as safe spaces where they can enjoy, learn and socialise
4. Family carers/care staff of people living with dementia perceive that the activities offered by WAVE provide valuable opportunity for carer and their cared-for to enjoy, learn and socialise

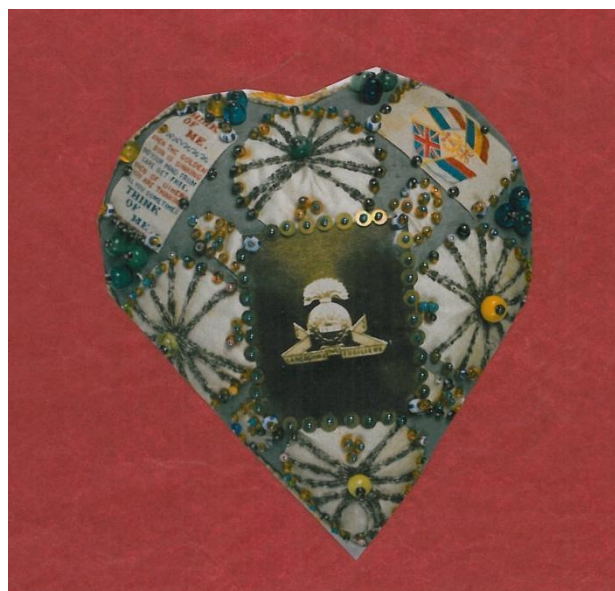


Image created as part of the Memories in the Making project by a resident of Inspirations Care Home

QUANTITATIVE OUTCOMES: SUMMARY

	TOTAL	Aldergrove	Coton Road	Inspirations	New Cross
Average session duration	-	60 mins	60 mins	60 mins	60 mins
TOTAL number of...					
...sessions held	30	9	8	7	6
...female participants	21	7	4	5	5
...male participants	4	2	1	0	1
...participants attending at least once	25	9	5	5	6
...attendances by participants overall	141	47	37	33	24
Percentage of PARTICIPANTS... (actual total set against possible total)					
... making repeat attendances	87%	85%	91%	93%	76%
... actively engaging with some or all of the activity during sessions	77%	Unknown	75%	83%	73%

QUALITATIVE OUTCOMES: SUMMARY

Individuals: comparative observations by care-givers

The professional care-givers and family carers providing support at each of the sessions were asked to provide comparative observations of the participants state of mind and engagement both during and outside the sessions.

In almost every case, care-givers observed that the participants overall well-being improved noticeably during the sessions.

On average, the participants were more happy and contented and were able to remain engaged and focussed for at least 10 mins longer during the hour than they usually would.

Participants were in general perceived to be less depressed and expressed less feelings of loneliness than they would outside the session.

After the ball-throwing exercise and given a clear task to accomplish, the participants were physically more dextrous and less likely to find activity an effort than they would outside the sessions.

As a result, the majority of those participants surveyed in this comparison exhibited signs of thinking more clearly, engaging more confidently and being more relaxed during the sessions than outside them.

Care Staff/Carer desires for well-being of the participants

All care staff and family carers responding to the survey felt that the WAVE activity contributed VERY MUCH to the participants' overall well-being.

Carers, care-staff and volunteers very much valued the activity for granting them the opportunity to get to know the participants better in a safe and creative environment. They also learned new skills, enabling them to work more effectively in future.

CONCLUSIONS

It is clear that the programme of Arts & Reminiscence activity carried out by WAVE's creative facilitator and volunteers in residential care homes has a noticeable impact on the general well-being of its participants.

Many participants came to remember the activities or personalities from week to week, and despite having to overcome the physical and mental disabilities caused by dementia and infirmity, it is clear from comparative observation that during the activity, participants engage more fully and for longer periods of time than they would without it.

By creating a familiar combination of gentle exercise, memory games, reminiscence sessions and creative activity, participants are encouraged to rediscover their proper selves within a safe setting.

The emphasis on including the same participants, care-staff, family carers and volunteers for each series of sessions enables the facilitator to build a bond of trust, encouraging the participants to feel increasingly relaxed and able to engage confidently with each other.

In encouraging the participants to make their own choices about the activities undertaken and being responsive to their histories, the facilitator has created a series of activities that are perceived to be of great value.

During the progress of the 10-week programme, as a result of the repeated activities, observation shows that session by session, within the course of the 60 minute workshop, participants' concentration and lucidity levels improve, their ability to engage confidently with each other increases and their levels of depression decrease.

Professional care staff, family carers and volunteers greatly valued the activity for granting them the opportunity to watch the creative practitioner at work and learn new skills and therapeutic approaches, enabling them to work more effectively in future.

They also found it hugely enjoyable to have the dedicated time and opportunity to get to know their residents better and to see them having a good time in a safe and creative environment.

It is clear that varied activity - exercise, reminiscence, play, art, music or performance - have a demonstrable value in increasing the well-being of care-home residents with dementia and enabling older people to rediscover their memories in the act of making.



Memories in the Making participants enjoy a guided visit to Wolverhampton Art Gallery (top) and simple memory games in their care home (below).

WAVE Memories in the Making: The impact of arts & reminiscence activities on people with dementia

Full report

1. Background

WAVE, the Museums, Galleries and Archives of Wolverhampton, is renowned for the breadth of its community and health engagement work.

In April 2011 WAVE (then known as WAHS, Wolverhampton Arts & Heritage Service) was commissioned by the Wolverhampton City Council's Putting People First Team from Adults Social Care to pilot the ArtsinMind programme of work.

ArtsinMind is a programme of activities for older people and those living with dementia who find it difficult to continue accessing arts due to their age or disability. The project was developed by WAVE with support from Creative Health CiC and funded through MLA Renaissance, Transforming Adult Social Care and Arts Council England.

The project promotes the use of arts and heritage activities to improve the quality of life of older people who are living with dementia or cognitive difficulties. The aim is to enhance the mental and emotional wellbeing of older people and to improve their engagement with the arts.

The ArtsinMind project came into being from the learning of previous pilots across the West Midlands created with regional partnerships. As part of this commission WAVE, working in partnership with PraXis (the research branch of Creative Health CiC), set out to demonstrate how arts and museum services can be commissioned to deliver Health and Wellbeing and related services, particularly with regard to dementia support, in line with the *National Dementia Strategy: Living Well with Dementia 2009-2014*², and the Wolverhampton Dementia Forward Plan.

One of the 4 key strategy drivers of The National Dementia Strategy is 'Living well with dementia in care homes'.

The overarching commissioning outcome of the Wolverhampton Dementia Forward Plan is 'to improve the lives of people with dementia'

The Forward Plan seeks to achieve the following key outcomes:

- 'To improve public and professional awareness'
- 'Improve access to universal services'
- 'To increase the choice of services'

² Dept of Health, 2009

- 'To improve the quality of services'
- 'To develop an informed and effective workforce'
- 'To improve the experience of living in a care home'

This evaluation is based on the outcomes of four series of arts & reminiscence workshops delivered in four different residential care homes in Wolverhampton between March and July 2012.

Delivery of the workshops continues.

2. Session delivery

Creative facilitator

The creative facilitator employed by Wolverhampton Arts & Heritage Service to undertake the Arts & Social Care workshops in the care homes is a qualified social worker and artist with enhanced CRB approval. She has extensive experience of delivering both reminiscence and creative activity in care settings.

Delivery

Initially, the intention was to deliver 2 series of 10 workshops, in 2 care homes with Wolverhampton. Extensions to the funding means that, to date, 30 sessions have been delivered in 4 care homes.

Although sessions were originally planned to be held weekly, a range of factors have endured that delivery of a series of 8-9 sessions can take longer than 9 weeks. These factors have included:

- holidays - the Jubilee holidays, Bank holidays and school holidays affected staffing levels in the homes, making it harder to arrange support for the sessions
- illness - on at least 2 occasions, illness of residents in the care home caused postponement of sessions as a quarantine was imposed

Each of the 4 series of workshops were attended by a core group of 5 residents who continued to attend throughout the course (barring illness, or in one unfortunate instance, death).

Support staff

Where possible, the Creative Facilitator was supported by at least one member of the residential home's Care Assistants or other members of support staff.

Participants were reassured by the regular involvement of familiar staff members or family carers. In cases where the residents became confused or distressed as a result of their illness, these staff were invaluable in employing calming measures to restore a calm atmosphere.

Few of the homes could spare more than one care assistant to support the group sessions. Therefore, the Creative Facilitator also arranged for an average of 2 WAVE volunteers to attend each session as well, to provide practical support to the participants.

In 3 care homes, the same care staff and volunteers were involved throughout the whole cycle. At Aldergrove, more volunteers and care staff were involved, a factor owed in part to the work rota.

NUMBER OF OTHER SUPPORT STAFF ENGAGEMENTS fulfilled to facilitate 4 series of workshops...

	TOTAL	Aldergrove	Coton Road	Inspirations	New Cross
...family carers	4	1	0	0	3
... paid care givers	14	2	1	7	4
... WAVE volunteers or staff (excluding facilitator)	17	1	1	11	4
OVERALL TOTAL	35				

Delivery model

The Arts & Social Care workshops were designed around the Five Ways to Well-Being³ drawn up by nef (New Economics Foundation) in 2008:

- **Connect:** with people around you
- **Be active:** take exercise and stay energetic
- **Take notice:** be curious and take note of the world
- **Keep learning:** try something new
- **Give:** do something for a friend or a stranger

Opening Meeting

The creative facilitator worked with Care Home staff to determine which residents might most benefit from involvement in the workshops. Once identified, a group of c.5-6 residents are invited to participate.

During the first iteration of the workshops, there were 9 residents present at the first meeting. The number was reduced to 5 at the next session as this was felt to be the optimum number of participants that could be adequately supported by the facilitator and available care home staff and WAVE volunteers.



³ <http://www.neweconomics.org/projects/five-ways-well-being>. Accessed Oct 2012

Session 1: 'getting to know you'



During this session, the creative facilitator meets the participant, introduces them to each other and describes the activity to come. Throughout the session, she encourages the participants to recall and share memories with her and each other by means of direct questions and the sensory stimuli provided by familiar objects and music.

Use of popular music from 1940s-1960s to lighten mood and create a connection between group members at the outset of the session. On some occasions, the music plays throughout; at other sessions, the music is employed at the beginning of the session and during the art activity alone.

Introduces 'beach ball' activity: participants are seated and must gently throw a beach ball to each other whilst saying either their own name or the name of the person to whom they are tossing/passing the ball. The exercise encourages participants to exercise their powers of recall, to undertake gentle exercise in their seats, and to focus their hand/eye coordination. This activity is repeated at the start of each subsequent session.

Reminiscence activity: Creative facilitator introduces a range of historic objects reflecting everyday life in the first half of the 20th century. The objects have been selected to provide a range of sensory stimuli including touch, scent, sight and sound.

Items include laundry tongs, Robin starch or washing blue, Fairy soap, baby clothing, old-fashioned chocolate packaging, dolls, toys or children's games (marbles, jacks etc).

As the items are handled and passed around, the creative facilitator encourages the participants to describe the memories that occur.

Arts Activity: if there is time after their tea break, participants go on to carry out some form of arts activity, usually drawing.

Subsequent sessions: Art & Reminiscence



Each session begins with music and the 'beach ball activity', before the arts or reminiscence activity for the day is revealed. The creative facilitator chooses activities to suit the group, based on how they have responded during previous sessions and what they have revealed about their own interests and abilities.

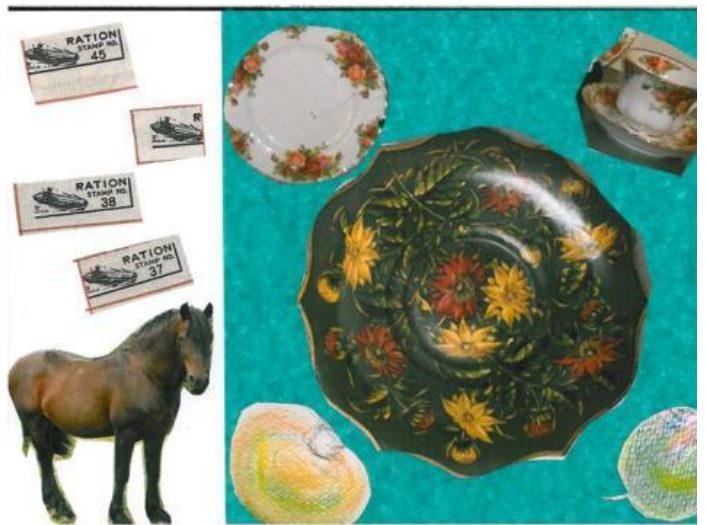
For example, a male participant revealed at an early session that he had been a photographer in his earlier life. Consequently, for one session with this group, the facilitator brought in a range of mechanical and digital cameras and encouraged the group both to reminisce whilst handling the old cameras and to take new pictures with the digital equipment.

Arts activities included:

- Poetry (recitation and composition)
- iPad art (using iPads to create images)
- Photography (using digital cameras)
- Art appreciation: looking at postcards or illustrations showing images on a certain theme including the local area; circuses; vehicles or animals; the works of particular artists etc
- Using different art techniques: exploring colour; using pastels, pencil or crayon; painting with water colours, poster paints or acrylics; creating collages with newspapers, brown paper and glue; using pre-printed colouring sheets

Reminiscence activities involved the use of a range of artefacts including domestic items, children's toys and cameras. The range of items prompted participants' memories of their earlier lives, and they were encouraged by the facilitator to share these stories with the group. During the following art activity, participants were encouraged to continue to express their memories creatively.

The facilitator also encouraged participants to talk with each other about their memoirs, prompting increased levels of social interaction as the sessions developed. In each group, there were one or two members who would regularly provide the 'social glue' that bound participants together, encouraging others by commenting on their art work or reinforcing their reminiscences through direct acknowledgment.



Session outside the care home: Gallery visit

When possible, the creative facilitator arranged for groups to visit Wolverhampton Art Gallery for a visit and short tour. Participants were encouraged to visit all of the galleries, particularly the sensory gallery on the ground floor.

Such a visit was not possible for all groups owing to a range of factors including ill-health and lack of suitable transport.



3. Intended outcomes

The intended outcomes of this programme of activity were:

1. Older people, family carers and people living with dementia enjoy participating in reminiscence and creative activity
2. Professional care givers and family carers feel that reminiscence and creative activity improves the well-being and quality of life of people living with dementia
3. Family carers/care staff of people living with dementia perceive WAVE galleries and museums as safe spaces where they can enjoy, learn and socialise
4. Family carers/care staff of people living with dementia perceive that the activities offered by WAVE provide valuable opportunity for carer and their cared-for to enjoy, learn and socialise

4. Evaluation methodology

Evaluating participants with dementia

Evaluating outcomes and changes in attitudes, behaviour and condition of people with dementia is complicated by the unpredictable nature of their condition. It is difficult to use conventional first-person evaluation methodology such as self-assessment questionnaires, one-to-one interview, post activity analysis or transitional analysis with participants whose memory of very recent activity is impaired by their condition.

It was initially proposed to work closely with Dementia UK to implement PIECE-Dem⁴ Dementia Care Mapping techniques to observe the levels of engagement, enjoyment and increased well-being in participants with dementia, throughout the course of a sample number of events. In the event, Dementia UK were unable to provide this service.

PIECE-Dem is an observational process designed to enhance the dignity of older people in institutional settings. It was developed by Association for Dementia Studies, University of Worcester, as part of PANICOA (Prevention of Abuse and Neglect in the Institutional Care of Older Adults), a research initiative funded by the Department of Health and Comic Relief. It involves intensive observation of small groups of care-home residents over a 2-day period, combined with comparison of 3rd party observations by care-staff and family members.

Without the in-depth technical observations which would have been provided by Dementia UK practitioners, the evaluator relied on the qualitative evaluation responses from professional care givers, WAVE volunteer and family carers.

Elements of the PIECE-Dem technique of close observation were adopted by the evaluator and applied during the workshop sessions only. Care staff, who were familiar with the general behaviour of residents outside the workshop setting, were invited to provide comparative observations. A sample number from this group were interviewed either face to face during sessions or completed self-assessment questionnaires.

The creative facilitator provided detailed reports of her observations of each session. One session at each care home was also observed by the evaluator and a social science graduate.

Levels of engagement have also been evaluated using quantitative monitoring of the duration of sessions with particular attention paid to the number of repeat engagements by individual participants, the levels of participation during activities; and the number of overall participant engagements throughout the series of sessions at each venue.

Evaluating well-being

In preparing a qualitative evaluation of the effect of participating in WAVE's Arts & Social Care activity, great emphasis was placed upon measuring its impact upon general well-being of the care home residents.

⁴ *How can I tell you what's going on here? PIECE-dem: an observational framework focussing on the perspective of residents with advanced dementia*, Association for Dementia Studies, University of Worcester, 2011. Full report available here: <http://www.worcester.ac.uk/discover/dementia-piece-dem.html> (accessed 25 Oct 2012).

What is well-being?

Achieving well-being has been the concern of philosophers since Aristotle, and is, in many respects the essence of human existence. In recent years, well-being has moved from the realm of philosophy to that of science...

The science of 'subjective well-being' suggests that as well as experiencing good feelings, people need:

- a sense of individual vitality
- to undertake activities which are meaningful, engaging, and which make them feel competent and autonomous
- a stock of inner resources to help them cope when things go wrong and be resilient to changes beyond their immediate control.

It is also crucial that people feel a sense of relatedness to other people, so that in addition to the personal, internally focused elements, people's social experiences ... form a vital aspect of well-being.'

Extract from the nef (New Economics Foundation) website, accessed April 2012
<http://www.nationalaccountsofwell-being.org/learn/what-is-well-being.html>

As part of their research into the measurement of well-being, nef identified Five Ways to Well-Being⁵

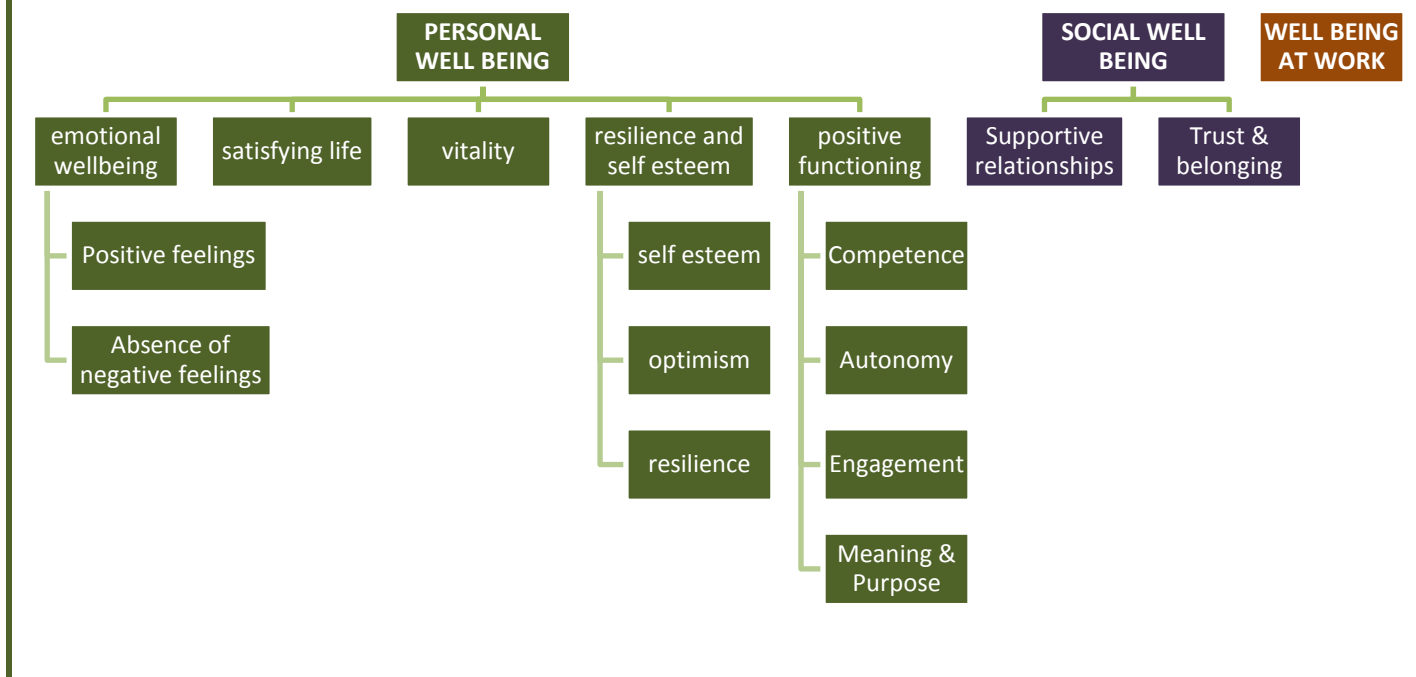
1. **Connect:** with people around you
2. **Be active:** take exercise and stay energetic
3. **Take notice:** be curious and take note of the world
4. **Keep learning:** try something new
5. **Give:** do something for a friend or a stranger

These guidelines were integrated into the planning of the Arts & Social Care activity and its evaluation.

Nef's accompanying framework of Well-Being Indicators was used as the basis of the Arts & Social Care evaluation model.

⁵ <http://www.neweconomics.org/projects/five-ways-well-being>. Accessed Oct 2012

Overview of the nef well-being indicators⁶



The headline well-being indicators are defined as follows:

- **Personal well-being** measures people's sense of how they are feeling within themselves and experiencing their lives
- **Emotional well-being** measures the overall balance between how frequently people experience positive and negative emotions. Higher scores indicate that positive emotions are felt more often than negative ones.
- **Social well-being** measures how people experience their connections with others and the strength of those relationships.
- Measurement of **work-based well-being** was not considered relevant to this evaluation.

Observers were required to grade participants levels of engagement in a range of emotions and activities against the amount of time such engagement was sustained.

The observations were mapped against the nef outcomes as follows:

⁶ <http://www.nationalaccountsofwell-being.org/learn/measuring/indicators-overview.html>. Accessed April 2012

WAVE Evaluation framework 1: participant engagement		
NEF well-being indicator	NEF well-being indicator: sub-category	DID THE PARTICIPANT SEEM...?
Personal well-being	Emotional well-being	To be enjoying themselves
		Happy or contented
		Relaxed
	Vitality	Engaged or focussed
		Energised or lively
	Positive functioning: autonomy & competence	Physically coordinated
		Able to make up their own mind
		Thinking clearly / Lucid
Emotional well-being	Optimism	Depressed
		Lonely
	Resilience & optimism	Finding everything an effort
Social well-being	Relatedness	Engaging confidently with people

When observing the periods of time spent engaging, the following time values applied:

- Throughout course of whole session
- Most of the session (45 mins +)
- Some of the session (20-45 mins)
- Briefly (20 mins or less)
- Not at all
- Not present/not observed

In addition, care staff and family carers were asked to grade whether they felt the WAVE staff and activity actively contributed to the well-being of the participants. The observations were also mapped against the nef indicators:

WAVE Evaluation framework 2: care staff/carer desires for well-being of the participants		
NEF well-being indicator	NEF well-being indicator: sub-category	DO YOU FEEL THAT THE WORKSHOPS AND STAFF LEADING THEM ...?
Personal well-being	Positive functioning	Promote the interests of the person you care for
		Encourage the person you care for to be involved
	Satisfying life	Give the person you care for pleasure
		Give the person you care for something to look forward to
Social well-being	Supportive relationships	Are friendly and engaging
	Trust & belonging	Are trustworthy
		Treat every participant fairly

The observation guidelines and evaluation indicator framework utilised by the evaluator and project staff and volunteers can be found in Appendix 1.

5. RESULTS

Quantitative evaluation

Table 1: Summary participation

	TOTAL	Aldergrove	Coton Road	Inspirations	New Cross
Average session duration	-	60 mins	60 mins	60 mins	60 mins
TOTAL number of...					
...sessions held	30	9	8	7	6
...female participants	21	7	4	5	5
...male participants	4	2	1	0	1
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NUMBER OF OTHER PEOPLE PRESENT...					
...family carers	4	1	0	0	3
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... WAVE volunteers or staff (exc facilitator)	17	1	1	11	4

Quantitative and qualitative findings regarding well-being of the participants:

When observing the periods of time spent engaging, the following time values applied:	Score
Throughout course of whole session	5
Most of the session (45 mins +)	4
Some of the session (20-45 mins)	3
Briefly (20 mins or less)	2
Not at all	1
Not present/not observed	0

PERSONAL WELL-BEING: Emotional well-being

The participants exhibited high-levels of enjoyment, happiness and contentment throughout the course of the workshops.

It was noticeable how much more relaxed participants became week by week: in week 1 only 25% were appeared relaxed, and by the final session, 75% were perceived to be relaxed throughout the entire session.

Volunteer S noticed how infectious the participants' enjoyment could be:

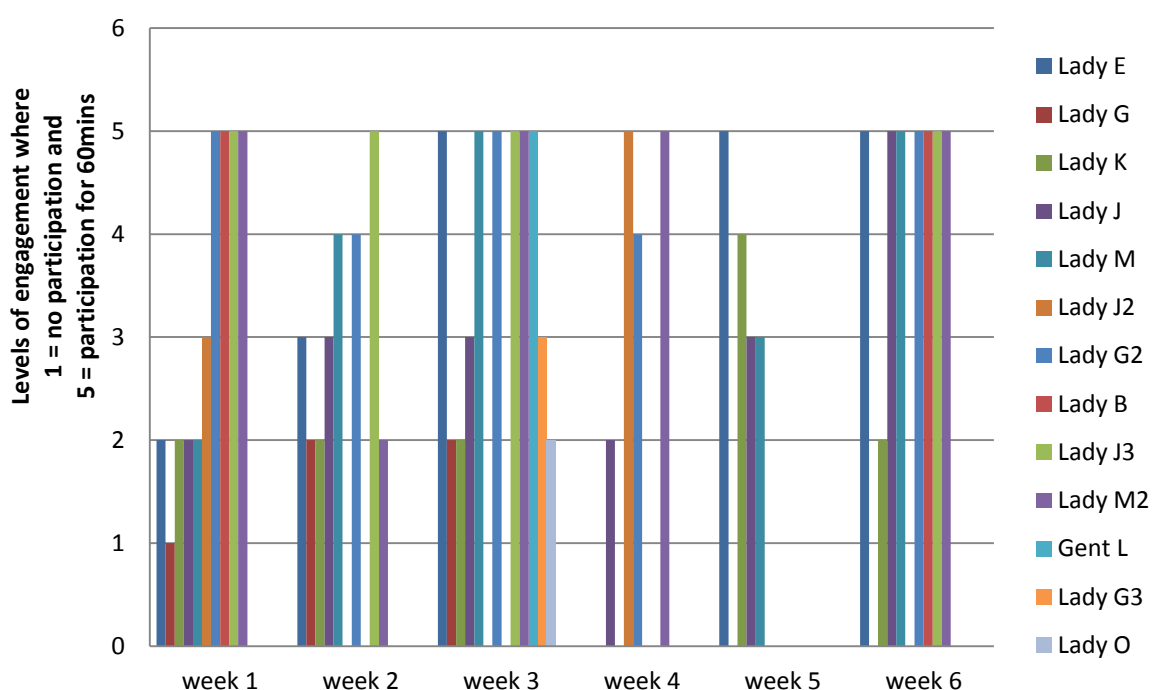
'Lady K appeared to be enjoying the session; her confidence is growing week by week. Today she completed a drawing on canvas which she started in the previous session.'

'I felt the session went well particularly because Lady K appeared to be enjoying herself so much.'

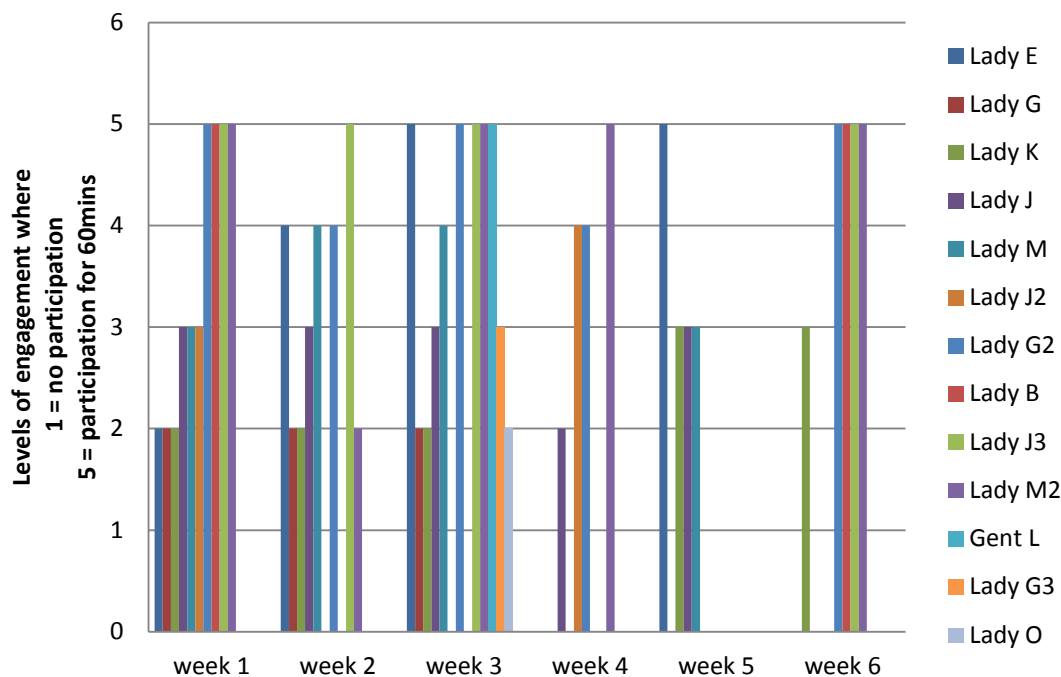
As did a care-giver at Inspirations:

'I really enjoy sitting in on the group. It's nice to see everyone taking part and having a laugh'

Participants perceived to be enjoying themselves

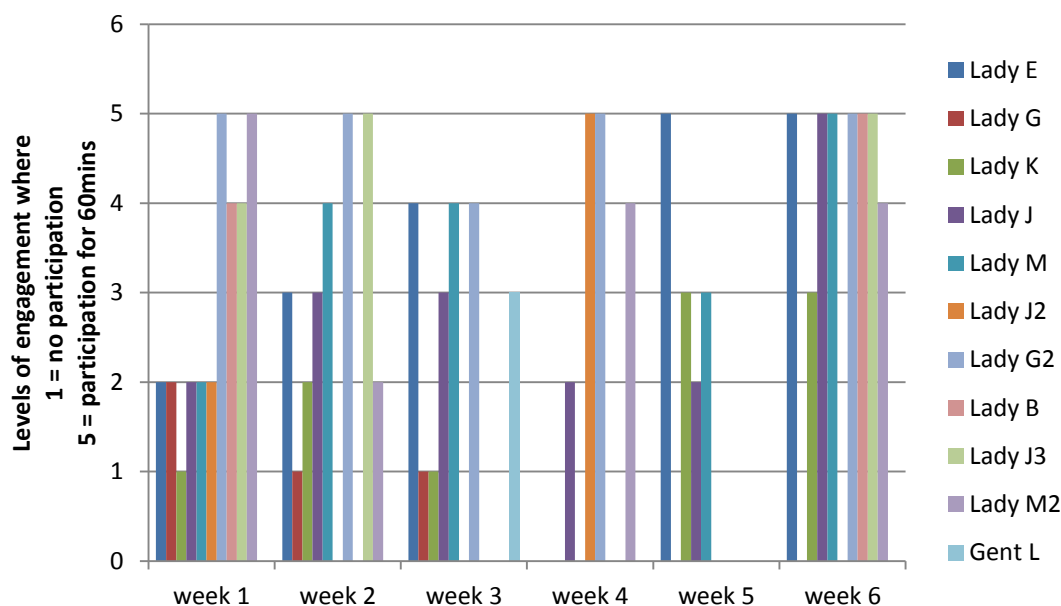


Participants perceived to be happy or contented



It was noticeable how much more relaxed participants became week by week: in week 1 only 25% were appeared relaxed, and by the final session, 75% were perceived to be relaxed throughout.

Participants perceived to be relaxed



PERSONAL WELL-BEING: Vitality

Quantitative assessment of participant levels of engagement and focus remained constant throughout. However, in care-givers' comparative observations, facilitator reports and direct observation of sessions there was a strong perception of increased levels of engagement during sessions.

From the facilitator's report of session 1 at Aldergrove:

'Despite initial reluctance, once we began playing the game everyone became engaged and it woke everybody up. Gent G had initially fallen asleep in the chair, but woke up when we began to play the game. He sat forward to catch the ball.'

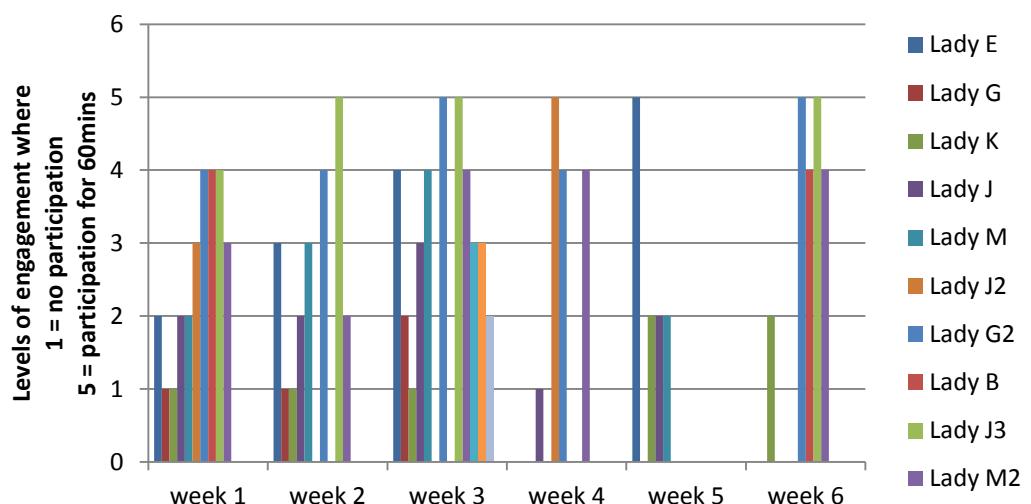
Gent G's engagement and focus levels began steadily to improve each week so that by session 6, the facilitator was able to report:

'Gent G said hello and that he was alright. He was happy to participate in the warm up exercise. He could catch the ball with support (needed because of his arthritis) and also knew to throw the ball to another participant in the group. He was demonstrating, through holding out his hands, that he would like another turn with the ball. He was able to concentrate and participate for the duration of the warm up activity, approximately 20 minutes.'

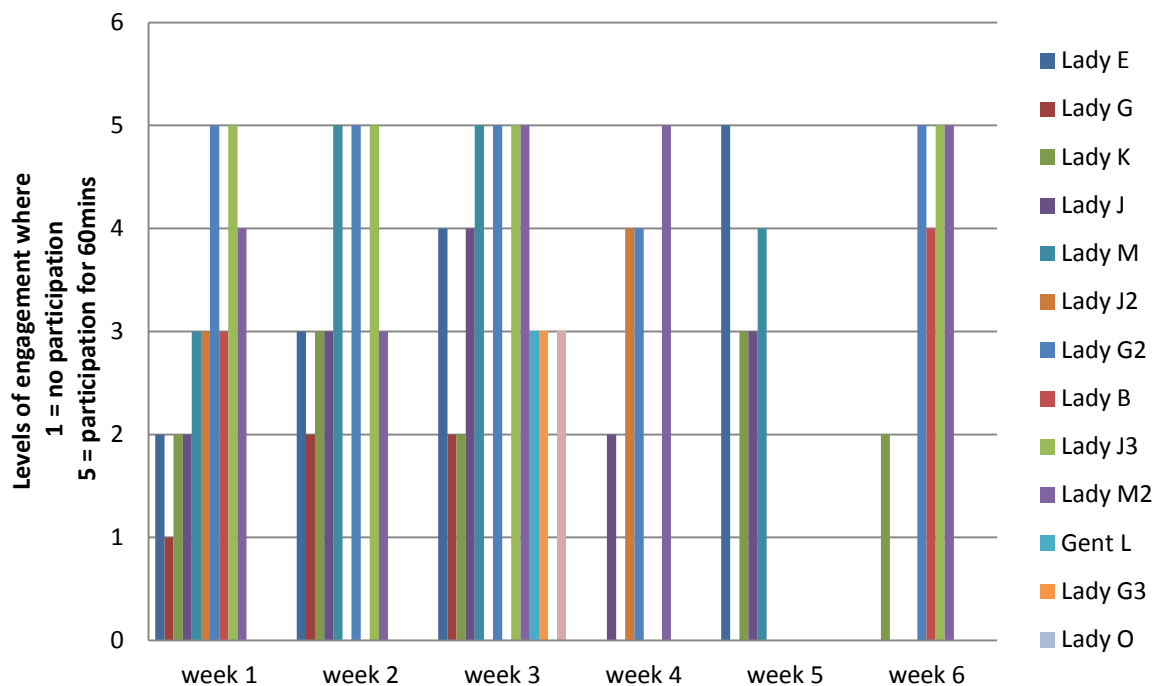
The following week, the facilitator brought a range of children's toys to the session which created great interest:

'Gent G took the rope and said "ooh yes I liked to skip". He then stood up and took a few paces forward, as though he wanted to skip. (Gent G does not usually walk by himself; he is normally in a wheel chair and transferred to a chair by two carers). He then held the skipping rope with his hand and waggled the rope in the air as though he was playing a skipping game. He did this several times, and then walked back to the chair and sat down.'

Participants perceived to be energised or lively



Participants perceived to be engaged or focussed



By gradually introducing the group to different kinds of art media, the facilitator was able to increase the participants' motivation to experiment creatively and to concentrate on the task:

'Lady G2 was expressing that she was "no good at painting or drawing", but was happy once the task was explained as 'experimenting with the pastels and charcoal'. She concentrated on this task for 30-40 minutes.

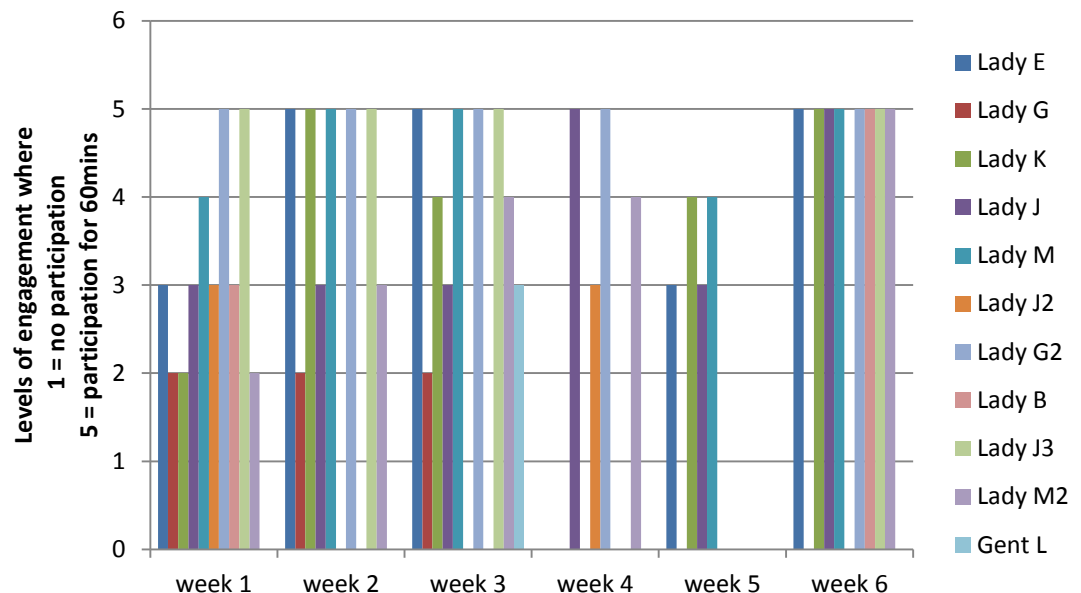
Lady J3 was more interactive, asking questions then being very keen to get started; she concentrated on these tasks for about 30 minutes. Lady J3 was also interested in and commenting on Lady M2's picture.'

The reminiscence and play sessions also enabled the participants to build their concentration skills.

'Gent L was very keen to look at the Elves and Shoe Maker book. I asked him to read out the title and he was able to do this straight away. Initially I had to turn the pages for him, but after I had shown him how to do this he was able to turn the page and read the story.'

PERSONAL WELL-BEING: Positive functioning: autonomy & competence

Participants perceived to be physically coordinated & dextrous



The repeated exercise with the beach-ball and creative activity enabled even the least dextrous to build on their skills.

The facilitator observed:

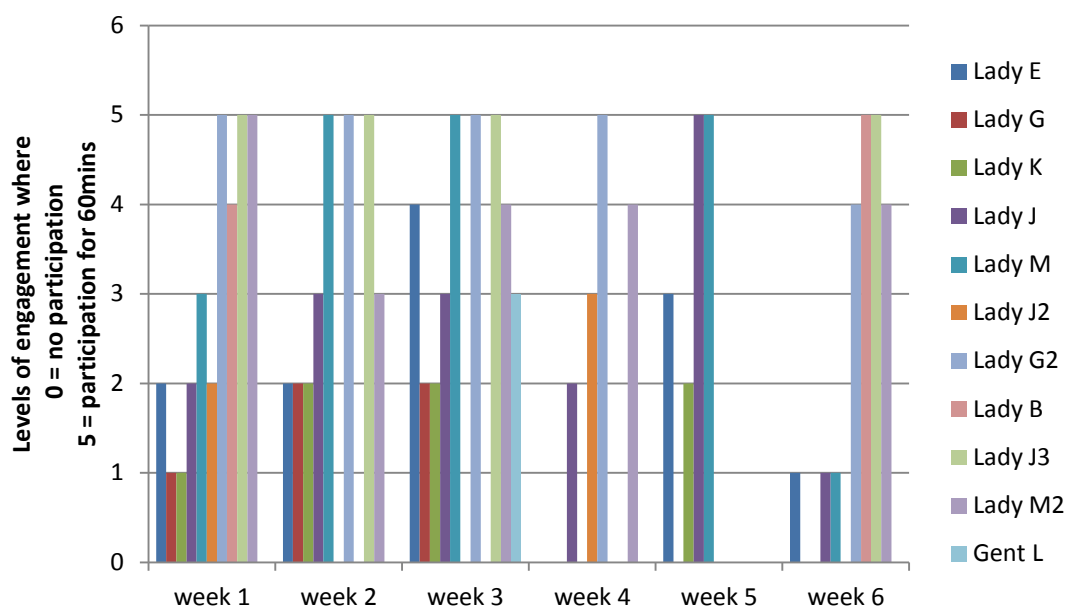
'Lady K said as she does every week that she can't catch and that she can't draw. I explained to her how looking at the picture and breaking it down into shapes may help.'

Lady K did some very concentrated looking and drawing, replicating more closely than previous weeks what she was looking at. She became less self-conscious and was able to focus much better on looking.'

Many participants were initially reluctant to try drawing saying that they were 'no good at art' or 'couldn't draw'. However, once the materials were produced, the facilitator observed:

'Lady J required prompting to come to the table and begin drawing, but once she was set up with her pencil, canvas and paint she appeared to "automatically" know what to do and it came very naturally to her. She was able to concentrate for approx. 30 minutes. She appeared more relaxed and comfortable in the group this week.'

Participants perceived to be able to make up their own mind



The participants were invited to make their own choices during the sessions, from selecting a name for their group to choosing the colours to use when painting or images or poems to discuss in later weeks.

'Lady M needed no prompting or motivation and decided she was going to choose one of her three postcards and copy it. She chose the colours herself and needed no guidance on how to apply paint.'

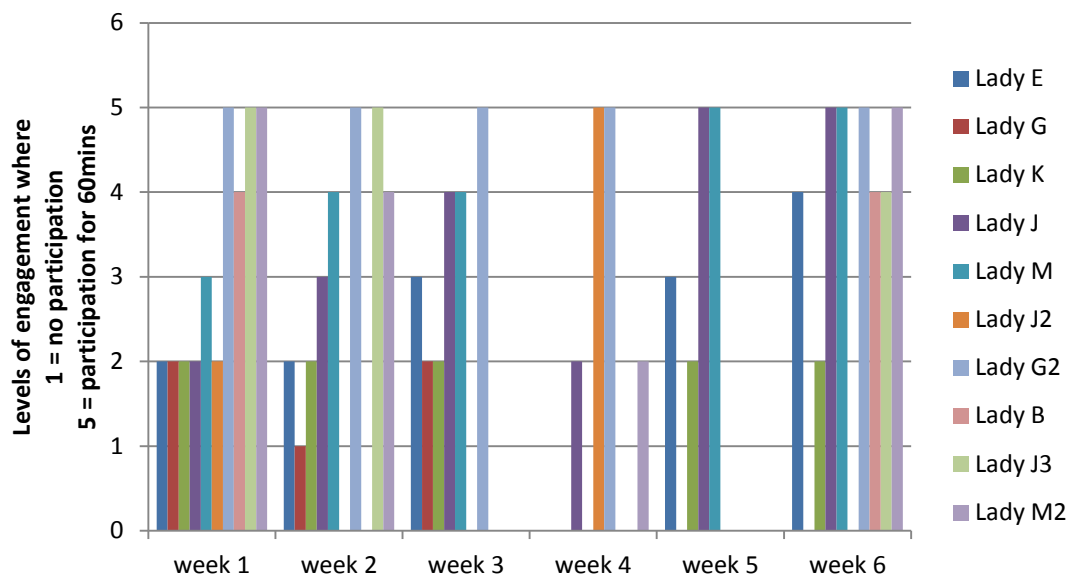
Lady G needed prompting to be able to catch the ball in the warm up exercise and chose not to take part in painting; she did choose two postcards that she liked with assistance.

Lady E needed some guidance to choose her post cards and paint colours. She was happy to paint her canvases with a wash, but then needed a lot of encouragement to do any more than that.

Lady J needed a little assistance to choose her three postcards but was able to do so. She chose one colour at a time to paint with and would paint for approximately 5 minutes and then forget what she was doing and need reminding to continue painting which she would then do again straight away.'



Participants perceived to be lucid



In encouraging the participants to make their own choices, the care staff, volunteers and facilitator were able to prompt further reminiscence and lucid behaviour:

'Lady P sat with Bridgette (the activities organiser for the home) and was helped to choose three colours from the palette, she used the paint brush herself with prompting and placed colours on the bottom of the big sheet of paper. Lady P said that pink was her favourite colour, so Bridgette mixed up a pink colour for her.'

'Where did you go to school Gent G? "Jamaica" What did you like at school? "Drawing". Gent G then drew a picture of a mango and a cashew nut. I said that we could do some drawing if he would like to next week... He insisted he wanted to do drawing straight away so I gave him the note pad and pen and he drew a mango and a cashew nut on white paper.'

'Lady J4 said at the end of the session that she had enjoyed it as people were talking about interesting things and this meant she was able to remembered things from "way back" that she wouldn't have otherwise remembered

The presence of family carers in sessions, or a member of care staff who knew something of their past history, enabled the participant to be more lucid. For example, the facilitator took a number of cameras to a session at Coton House, as one of the participants had been a keen photographer:

'Lady G3 took some pictures with the DSLR, was very enthusiastic to do this and decided to take pictures of Lady H and [volunteer] talking, of herself and [care-giver]... When she looked at the picture she had taken of herself she did not recognise herself. She said "is that me? That's not me is it?"'

Lady H said that the Kodak colour snap camera reminded her of happy times and taking pictures of her children. She said that she used to have an Ensign [box camera]. [Volunteer] talked to Lady H for a long time about the camera, looking at the camera and taking pictures.'

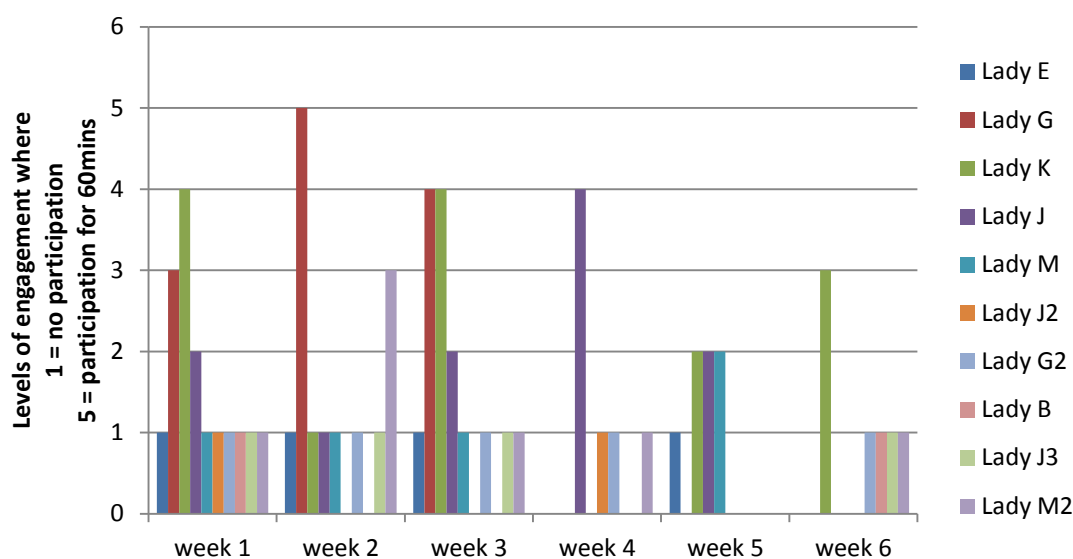
In addition, once personal details were revealed, through reminiscence or as a result of information received, the facilitator adapted sessions to incorporate these familiar elements:

'Gent G said that he was a carpenter. I asked him what he used to make and he said nothing. I asked him what his favourite tools were and he said a plane and a saw. I said I would try and get [some] for next week and Gent G said that he would show me how to build a house.'

[the following week] 30-Jan-12, Gent G looked at the plane and saw magazine for a long time. He also did a drawing and concentrated on it for approximately 20- 30mins.'

EMOTIONAL WELL-BEING: Optimism

Participants perceived to be depressed



There were several instances noted by the facilitator and other observers where participants in the sessions clearly underwent some form of emotional disturbance during sessions. On occasion, these episodes were triggered by memories inspired:

' Lady I came in and said she remembered being here last Monday. She said that she had not slept well. She was a lot more settled this week. She did cry at the end when she was assisted back into her wheel chair as she did not appear to like this as she found it very confusing.'

Lady I made some marks on the page using a pastel pencil and needed guidance and assistance. She was able concentrate for small periods once it was demonstrated how to apply the pastel to the page.'

On other occasions, a participant's emotional disturbance appeared to have begun before the session started and the activity allowed the participant an outlet for their distress:

'When Lady J came into the session she was saying "you're all murderers" "you've murdered us" and "I'm dead"...

I asked Lady J if she would prefer to sit somewhere else this morning, and she said "I'm quite alright here thank you."

We then moved the room around and sat people around tables to view a still life. I said to Lady J that she didn't seem very happy this morning and she said "no I'm not" ... "I don't exist" "I'm mental" I reassured her that she was not mental, but that she was experiencing some distressing thoughts and feelings at that time.

I asked Lady J if she wanted to do some drawing and she took the pencil and very angrily started to draw on the page, at first she was just scribbling, but then it became clear that she was making the outline of a bird, pressing very hard on the page.

I asked her if she would like to choose a colour, but she seemed unable to do this, I then suggested a colour that corresponded to the bird in the still life and put this out for her. I also gave her some water and selected her paint brush. She then went ahead and applied the paint, mixing it with water and altering the consistency of the paint.

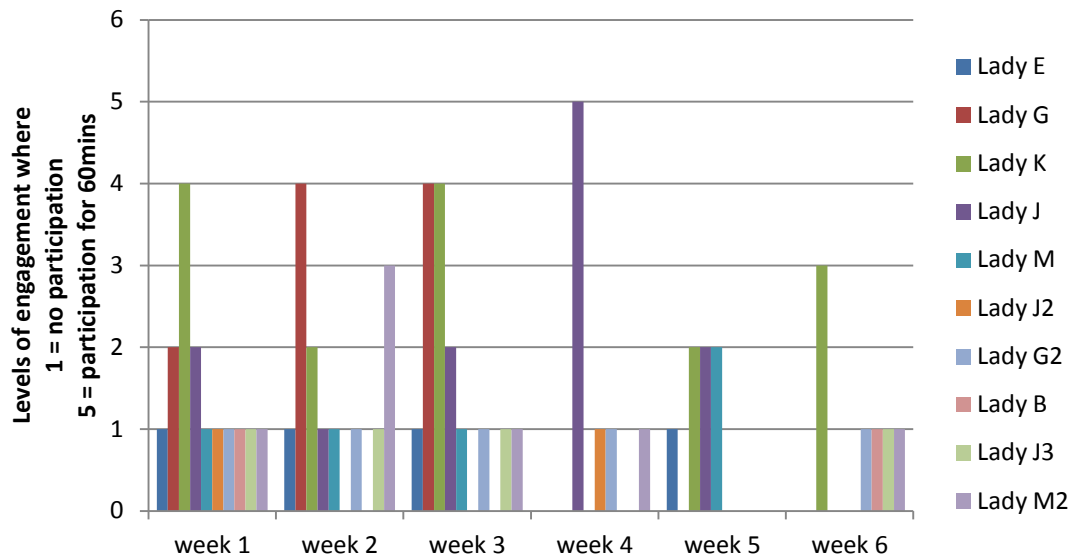
She stopped doing this after about 10 minutes. She then sat there staring into space and did no more. I asked her if she wanted to do anymore painting and she said no thank you. After a few moments I noticed that she had selected a tube of green paint by herself and had applied this to this picture.



I felt that this session gave Lady J the opportunity to express some of her distress in safe environment both verbally and through being able to engage in a creative activity. The process of drawing and painting gave her a focus and temporary respite from the distress she was experiencing.

Lady M commented that Lady J's drawing was very good, and Lady M showed Lady J her own drawing and Lady J looked. Although Lady J was quite aggressive towards others in her manner of speech and suspicious of others, she was able to open up during the session and participate more than she has in previous weeks.'

Participants perceived to be lonely



EMOTIONAL WELL-BEING: Resilience & optimism

As the graph shows, the majority of participants found the opening meetings to be the most difficult. Observations show that they were also less likely to present as relaxed or confident during these sessions, probably because of nerves about the nature of this new activity.

'Lady I2's mood seemed to lift, as during the beginning of the session she would give monosyllabic answers when addressed and seemed annoyed to be bothered and did not make eye contact with me.'

'... However when a greater amount of attention was addressed directly to Lady I2 she smiled towards the end of the session, and I took this to mean that her mood had lifted.'

This was particularly obvious with a participant named Lady P who was new to both the care home and the activity group:

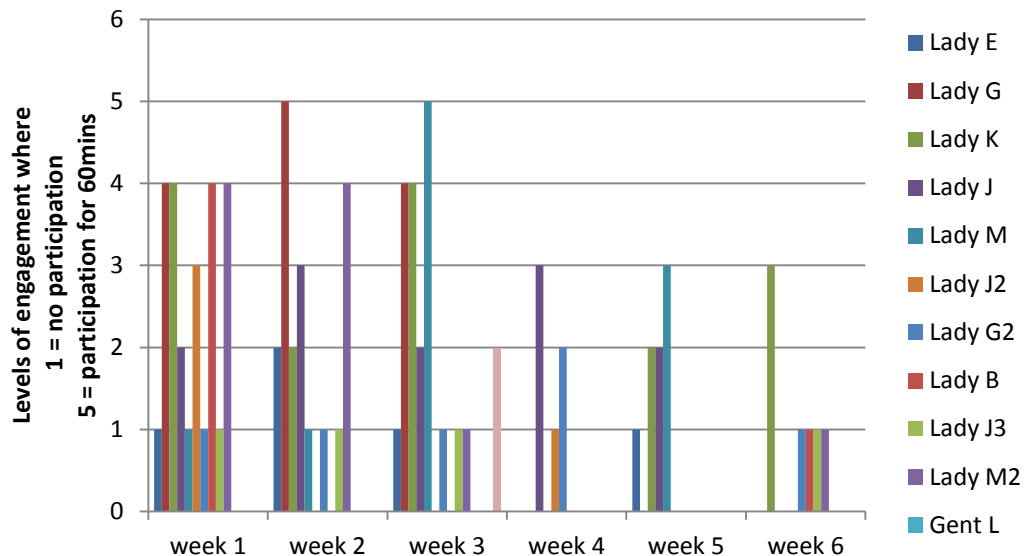
'Lady P was happy to come and sit in the group. She was able to catch the ball, usually on the third attempt, and was quite able to throw. She seemed a little cautious and shy; this may be because she is new to the care home and to the group. She was not able to say her own name when prompted on catching the ball.'

Her second week was also difficult:

'Lady P fell asleep quite frequently through the ball throwing exercise and then stayed awake for some of the object handling, but also fell asleep when she was not receiving individual attention. [About half way through the session] she began to get agitated and said that she did not do this sort of thing... I decided she had perhaps had enough as a new member to the group and care home and she slept in the chair.'

However, despite the profound nature of dementia experienced by most of the participants and their physical disabilities, most managed to maintain a mid-line score in this area.

Participants perceived to be finding everything an effort



The group visits to Wolverhampton Art Gallery were a major test of the participants' resilience:

'The groups stayed in the gallery for 2 hours and had a tea and coffee break. We sat down in Sensing Sculpture [gallery] and brought out a trolley with lots of different pots with different herbs and spices to smell and different materials to handle.'

'They wandered around Sensing Sculpture for approximately 20mins and really enjoyed interacting with the sculptures. They then went into the Joy of Making exhibition and looked at paper boats and Polish paper cuts.'

'It was quite far for people to walk throughout the gallery, due to mobility issues, i.e. they got tired due to limited mobility.'

The visits were deliberately timed to take place later in the series, giving the group time to build confidence as a unit, and to build familiarity with some of the art and objects they would see.

Therefore, when the group from Coton House visited the Art Gallery, the facilitator described the participants' reactions at finding themselves in an unfamiliar place. It appeared that the colourful art on display provided a calming and familiar presence.

'Lady H came in first and she commented how lovely and bright and shiny the floor was in the new atrium. Lady H said that she had been to the art gallery before, and she said how lovely and friendly all the staff were here. She said that she thought she had been to visit here with me before.'

'Lady M3 came in ... when she got inside she began saying "oh dear, oh dear" to herself and "I don't know, I don't know". I reassured her by holding her hand and saying that everything was ok and then she began to appear less agitated. I gave her a copy of the art gallery current events leaflet and she liked the picture of the Polish paper-cut peacock on the front of the leaflet.'



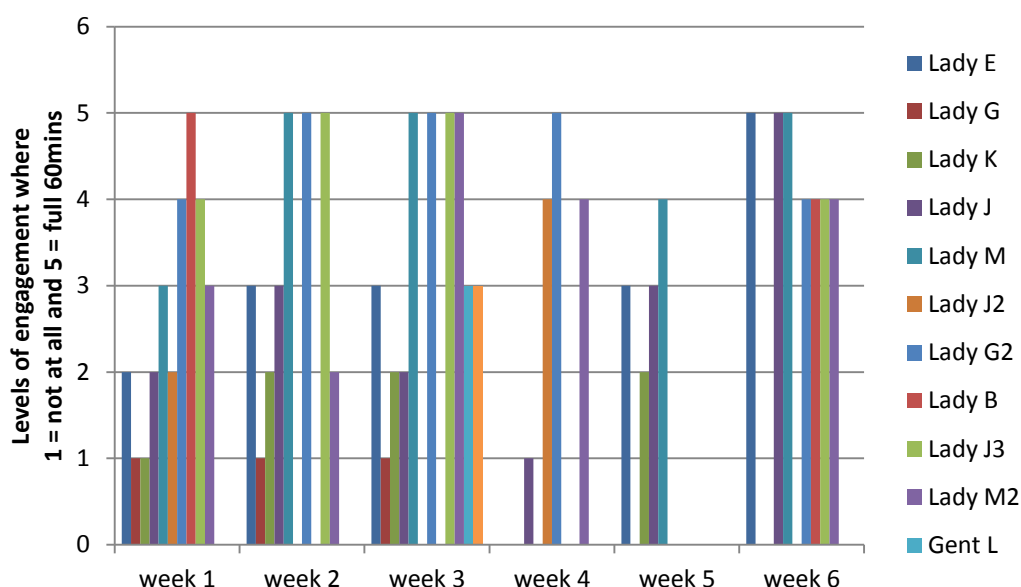
SOCIAL WELL-BEING: Relatedness

In each group, there appeared to be at least one participant who, despite the memory difficulties caused by dementia, still maintained strong enough social skills to engage confidently with the other participants:

'There is interaction in the group between participants, usually instigated by Lady M. Once people have finished paintings they are interested to see what each other have done. Lady M commented to a member of care staff after the group that she had enjoyed it.'

'Lady J4 ... maintained attention throughout the whole game and when she had the ball, and other people's attention seemed to be wavering, she brought the group back together by asking, "So come on, who shall I throw it to next?"'

Participants perceived to be engaging confidently with people



'Lady K has grown in confidence both socially and with her own creative outcomes over the weeks.'

'Lady E has continued to enjoy the groups and has relaxed and become very chatty.'

One of the strongest outcomes of the Memories in the Making activity was the appreciable growth of social interaction over the course of 9 weeks between the participants as a group and also between them and their carers/care staff.

Reflecting on the final session at Inspirations care home, the facilitator observed that:

'It is clear that some group members have started to develop a greater understanding of each other and perhaps the beginnings of a friendship (e.g. Lady K and Lady M). Lady M has also on several occasions shown concern for Lady J by telling her to sit down and join the group during this session and that she hadn't drunk her tea.'

Group members have begun to acknowledge each other more than when the group commenced.'



Individuals: comparative observations by care-givers

The professional care-givers and family carers providing support at each of the sessions were asked to provide comparative observations of the participants state of mind and engagement both during and outside the sessions.

In almost every case, care-givers observed that the participants overall well-being improved noticeably during the sessions.

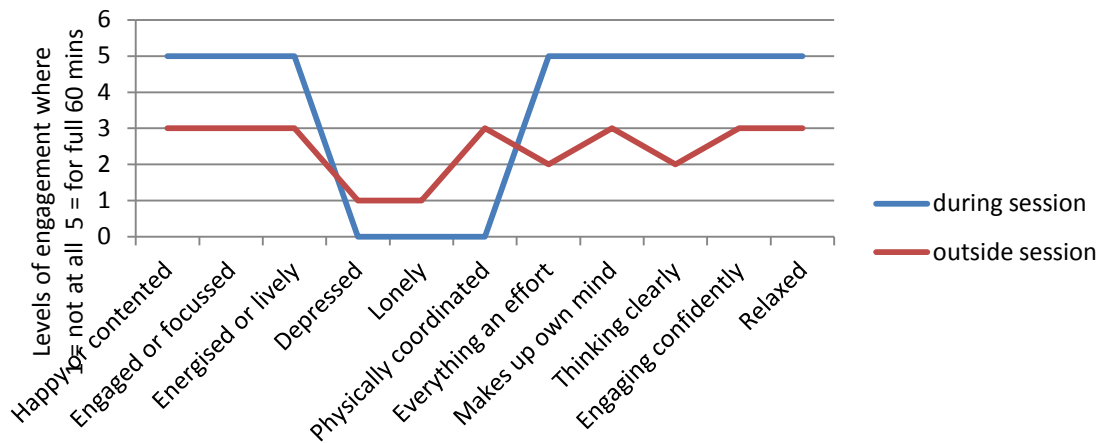
On average, the participants were more happy and contented and were able to remain engaged and focussed for at least 10 mins longer during the hour than they usually would.

Participants were in general perceived to be less depressed and expressed less feelings of loneliness than they would outside the session.

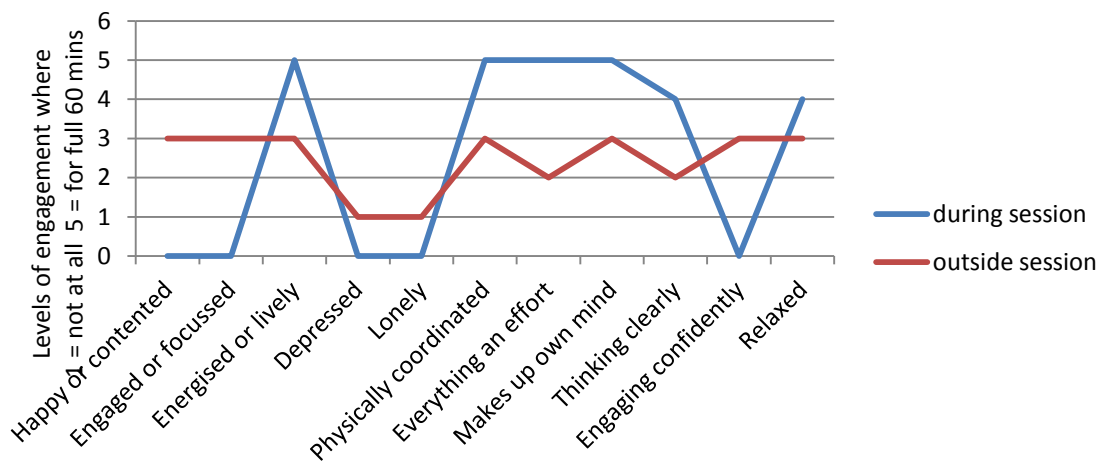
After the ball-throwing exercise and given a clear task to accomplish, the participants were physically more dextrous and less likely to find activity an effort than they would outside the sessions.

As a result, the majority of those participants surveyed in this comparison exhibited signs of thinking more clearly, engaging more confidently and being more relaxed during the sessions than outside them.

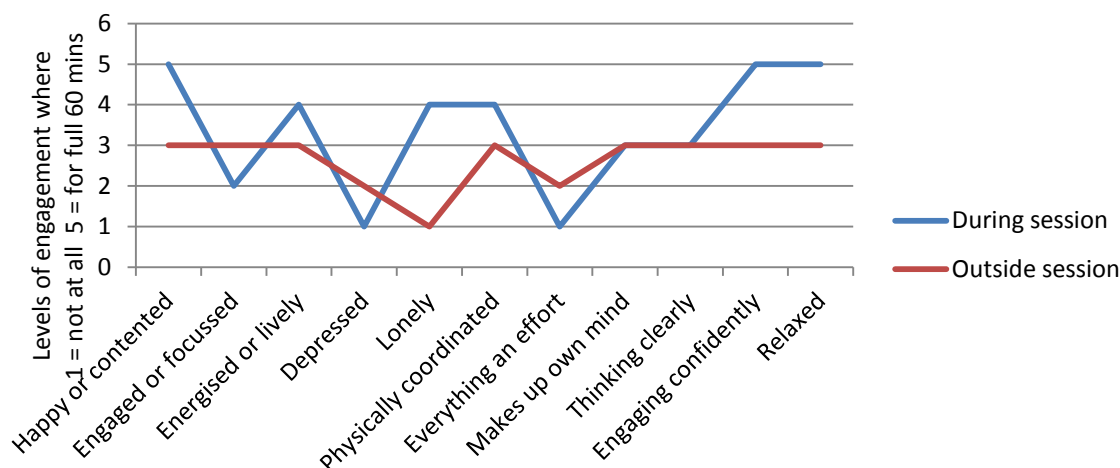
Care-giver observations of Gent L



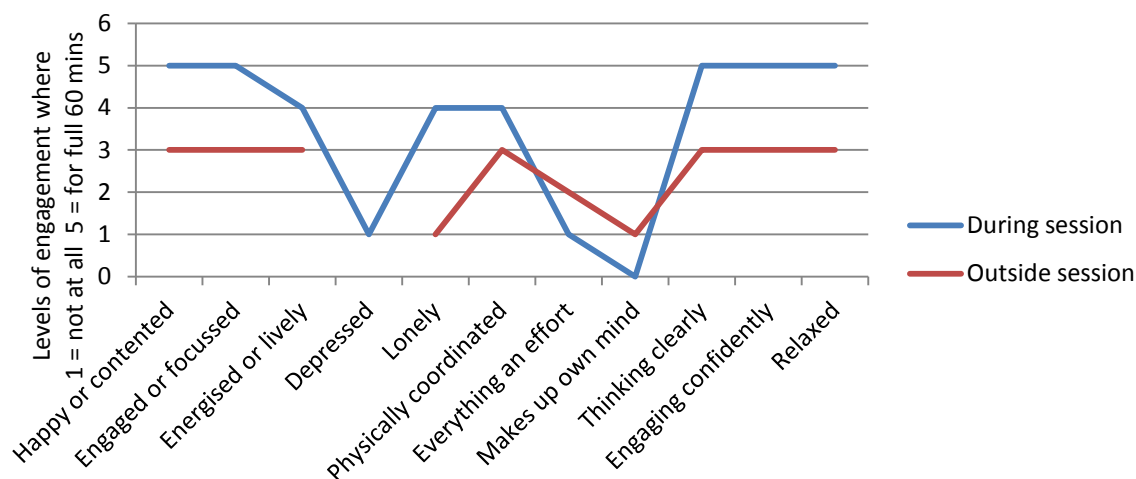
Care-giver observations of Lady G3



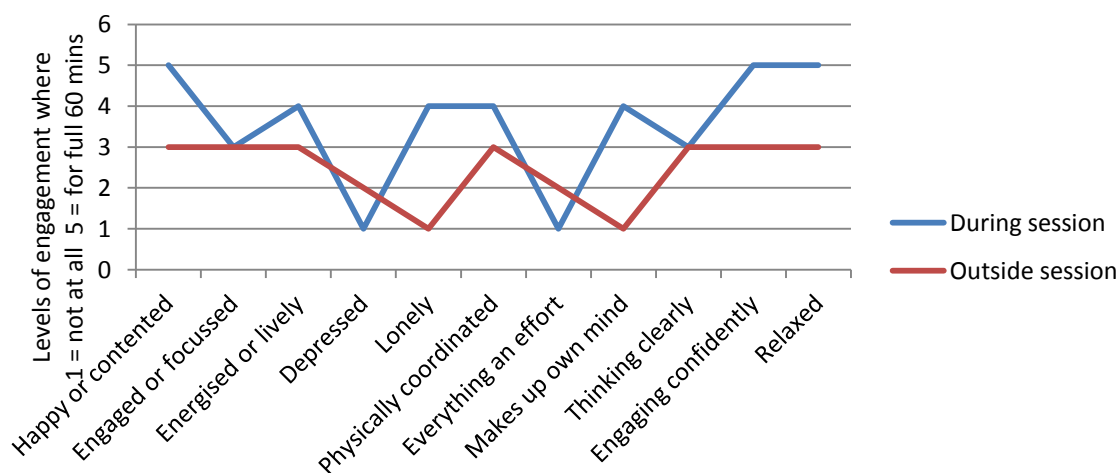
Care-giver observations of Lady G



Care-giver observations re Lady E



Care giver observations of Lady J



Elements affecting well-being

The comparative observation of Lady O was compiled on 10 Apr 2012, three weeks after Olive had suffered a period of illness which left her feeling disoriented and weaker than she had been during the first 2 sessions.

The facilitator remarked upon the difference in her state of mind:

In session 1, the facilitator observed on the sharpness of Lady O's memories

'Said "it's a baby's bottle!" I asked if she remember using it and she said that she remembered her mum giving it her and as soon as she had finished giving her another one. She enjoyed the milk and liked to drink it all up. She was the second eldest so she used to look after the younger ones... She used have a penny farthing doll at Christmas.'

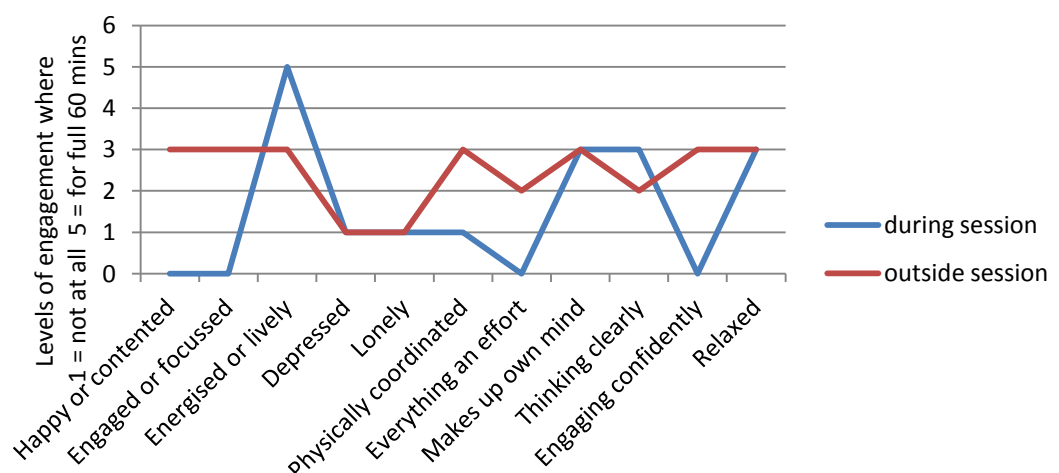
By session 5, *'Lady O came in first. She was quite agitated (has not been to the group for 3 weeks as she has been unwell). She was saying that she was cold and that she hated this place, and asked for a drink which was brought to her.*

I sat with her and asked her how she was and she said that my shirt was lovely. She said that she had never been in such an awful place. She became calmer once she had had a drink and once she had talked to me and Susan for a little bit, she then decided to go to sleep in her chair.

Lady O had to be woken up regularly to participate in the group and had to be called by name several times to get her attention , after about 10 minutes she began to stay awake for longer in between her turns.'

Lady O's health continued to be poor over the next 5 sessions, which could in part explain how difficult she found it to concentrate, remain focussed and engage with others during the assessment. She did however have increased energy levels within the group and appeared relaxed, suggesting that the workshop caused her little overall distress.

Care-giver observations of Lady O



Care Staff/Carer desires for well-being of the participants

Care staff and family carers were asked to respond to the follow statements, stating whether they agreed on a scale of 1 to 4, where 1 = not at all and 4 = very much.

All respondents felt that the WAVE Arts & Reminiscence activity contributed VERY MUCH to the participants' well-being.

		Does the activity...	Response
Personal well-being	Positive functioning	Promote the interests of the person you care for	Very much
		Encourage the person you care for to be involved	Very much
	Satisfying life	Give the person you care for pleasure	Very much
		Give the person you care for something to look forward to	Very much
Social well-being	Supportive relationships	Are friendly and engaging	Very much
	Trust & belonging	Are trustworthy	Very much
		Treat every participant fairly	Very much

Carers, care-staff and volunteers very much valued the activity for granting them the opportunity to get to know the participants better in a safe and creative environment.

Although all residents are encouraged to bring mementoes of the earlier lives with them when they move into the care homes, and each care home was decorated with historic images and artefacts that related to the 1940s to 1960s, it appeared that none of the care staff had actively led any group reminiscence activity.

By watching the creative practitioner at work with the groups and taking part in the sessions themselves, care staff and volunteers learned new skills and the value of these therapeutic approaches, enabling them to work more effectively in future.

Volunteer S remarked: *'The group leader demonstrated how to motivate the group members and how to try and keep them focused. Hopefully I have learnt things that will help me to engage with the group in future sessions.'*

Volunteers and care staff also found it hugely enjoyable to have an opportunity to get to know their residents better and to see them having a good time.

A member of the care-staff at Aldergrove said that she had become involved in order *'To observe the residents and how they interact in a group activity. To see what parts they enjoy...*

The group activity gave staff and volunteers a new context to get to know their residents and also the time to build on these new relationships.

The professional carer at Aldergrove was delighted to find that, beyond simply observing residents, *'I really enjoy sitting in on the group. It's nice to see everyone taking part and having a laugh. I have got to know the residents a little more personally.'*

In reflecting on her first session at New Cross, Volunteer D2 wrote about how affecting the whole experience had been for her:

'I think that the session as a whole was productive and I learned quite a lot from the participant's own experiences of the past, things that I have never heard of before.

I also think that it was good that they have learned to listen to one another most of the time. I also learned to appreciate their abilities to take part in the session because eventually some participants were more capable than others in terms of expressing themselves for instance.

This creative session was quite new for them as it was for me but progress was clearly seen throughout the entire session as level of participation gradually improved. Therefore I have learned to be patient with them and that the energy of group can fluctuate.'

6. CONCLUSIONS

It is clear that the programme of Arts & Reminiscence activity carried out by WAVE's creative facilitator and volunteers in residential care homes has a noticeable impact on the general well-being of its participants.

Many participants came to remember the activities or personalities from week to week, and despite having to overcome the physical and mental disabilities caused by dementia and infirmity, it is clear from comparative observation that during the activity, participants engage more fully and for longer periods of time than they would without it.

By creating a familiar combination of gentle exercise, memory games, reminiscence sessions and creative activity, participants are encouraged to rediscover their proper selves within a safe setting.

The emphasis on including the same participants, care-staff, family carers and volunteers for each series of sessions enables the facilitator to build a bond of trust, encouraging the participants to feel increasingly relaxed and able to engage confidently with each other.

In encouraging the participants to make their own choices about the activities undertaken and being responsive to their histories, the facilitator has created a series of activities that are perceived to be of great value.

During the progress of the 10-week programme, as a result of the repeated activities, observation shows that session by session, within the course of the 60 minute workshop, participants' concentration and lucidity levels improve, their ability to engage confidently with each other increases and their levels of depression decrease.

Professional care staff, family carers and volunteers greatly valued the activity for granting them the opportunity to watch the creative practitioner at work and learn new skills and therapeutic approaches, enabling them to work more effectively in future.

They also found it hugely enjoyable to have the dedicated time and opportunity to get to know their residents better and to see them having a good time in a safe and creative environment.

It is clear that varied activity - exercise, reminiscence, play, art, music or performance - have a demonstrable value in increasing the well-being of care-home residents with dementia and enabling older people to rediscover their memories in the act of making.

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Memories in the making

The Impact Of Arts &
Reminiscence Activities
On people With
Dementia

A report for

WAVE

THE MUSEUMS, GALLERIES &
ARCHIVES OF WOLVERHAMPTON

January 2013

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Anna Logan, Creative facilitator, WAVE

WAVE volunteers

Tomas McDowell, graduate work experience

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Appendix 1: Outcome evaluation frameworks

OUTCOME 1: Older people, family carers & people living with dementia enjoy participating in reminiscence & creative activity						
INDICATORS	EVALUATED GROUP			EVALUATOR & METHOD		
	People living with dementia / Older people	Family carers	Professional care givers	Facilitator / Creative Documenter	Dementia UK	Jenni Waugh
People living with dementia willingly participate in activity & produce creative outputs	Patients create artistic outputs			Creative documenter Facilitator activity diary	Observation/Dementia Care Mapping of patients	Observation of participants
	Patients actively participate in sessions			Monitoring sheet Facilitator activity diary	Record length of participant engagement	
	Patients express enjoyment			Smiley sheet – self assessment during sessions		
	Participants remain engaged for full duration of session			Monitoring sheet: length of sessions		
Family carers / professional caregivers identify positive enjoyment of sessions by person they care for		Identify positive enjoyment of sessions by person they care for		Observation during sessions		One to one interviews with sample group of family carers

OUTCOME 2: Improve the well-being & quality of life of older people, family carers & people living with dementia

INDICATORS	EVALUATED GROUP			EVALUATOR & METHOD		
	People living with dementia / Older people	Family carers	Professional care givers	Facilitator / Creative Documenter	Dementia UK	Jenni Waugh
Participants exhibit signs of positive well-being	Patients exhibit signs of positive well-being	3rd party confirms that the patient exhibits signs of positive well-being		Observation Creative documenter	Observation/Dementia Care Mapping of patients	One to One interviews / Self-complete questionnaires
Number of repeat attendances to project events	Patients willingly return to sessions	3rd party notes interest in / memory of / eagerness to return to sessions		Monitoring sheets		Plot findings against Well-being matrix Individual case studies

OUTCOME 3: Family carers of people living with dementia perceive galleries & museums as safe spaces where they can enjoy, learn & socialise OR

OUTCOME 3: Family carers of people living with dementia perceive the WAVE staff to be trustworthy & respectful, & the activities to provide valuable opportunities for carer & their cared-for to enjoy, learn & socialise

INDICATORS	EVALUATED GROUP			EVALUATOR & METHOD	
	Family carers	Professional care givers	Care home managers	Facilitator / WAVE	Jenni Waugh
Express enjoyment in activities provided by WAVE	Express enjoyment in activities provided by WAVE			Facilitator notes	One to One interviews / Self-complete questionnaires
Keen to continue encouraging person they care for to engage creatively	Express desire & eagerness to continue participating in activity or seeking similar			Facilitator notes: Carers / care givers comments to facilitator	Phone interview with care-home managers
Identify sessions as being of value to the person/people they care for	identify sessions as being of value to the person they care for				
Identify WAVE as a trustworthy service provider	Express trust in WAVE staff & service Identify WAVE facilitator as respectful & positive				