

Our Songs Our Stories



Our Songs Our Stories a pilot creative project for people living with Dementia in East Sussex January - September 2024 Evaluation Report



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Registered charity no: 1192000

About Culture Shift

Culture Shift was established in 2011 as a legacy of Creative Partnerships Sussex and Surrey and became a charity in 2020.

We have a dual focus on health and arts, working with those people who experience barriers to participation for a variety of reasons and are most likely to be socially isolated and living with physical and/or mental health inequalities. This includes adult and young carers, older people, disabled people, children and young people.

Culture Shift creates opportunities for people to connect with others through purposeful creative activity, developing a stronger sense of individual and community identity, pride, confidence and resilience.

We have a strong track record of working with diverse groups of people across a wide spectrum of artforms and in a variety of cultural and community settings. This includes our Carers O'Clock project which is focused on adult and young carers and our work with learning disabled adults in Sussex, established through our Arts Connect and Being Our Best Selves (BOBS) programmes.

Culture Shift projects

The Culture Shift portfolio of work also includes Voices From The Edges, focused on children and young people and the band Delta 7 which we have managed for over 10 years and has been the subject of a BAFTA shortlisted documentary, *Delta 7: Disabled Not Defeated*.

The diversity of these programmes is the foundation of the Culture Shift approach which encompasses a wide spectrum of artforms, participants and places.



Foreword: a commissioners perspective

“When you think of it we are all works of art”

What a great insight from one participant of ‘Our Songs Our Stories’, the creative project for people living with Dementia. I can think of no higher praise for this project than that.

Creativity is key to our human experience. We no longer aspire just to create shelter – we create works of architecture and homes and gardens full of our unique individuality, full of colour and texture which express ourselves and make us feel whole.

There is a growing evidence base that shows that creativity, culture, and the arts contribute hugely to our health and wellbeing and can ease symptoms of many illnesses and help prevent them and others.

On many levels, it just makes sense that people living with Dementia will benefit from creative activities. Yet we find ourselves in straightened financial times in the public sector, and so every pound we spend can rightly be expected to be justifiable. This can present difficulties for many public health methodologies, whereby outcomes may only become measurable at scale, many years after the intervention. What is so joyous about this evaluation, is that the benefits of creativity are so clear, and this should give all commissioners and providers of services for people living with Dementia the permission needed to get creative and to realise the benefits creativity will bring to people living with Dementia, their carers and families.

Culture Shift do amazing things and want to do more amazing things. In my [Annual Report](#) this year I celebrate the range and depth of creative health work in East Sussex. I want Culture Shift and the large number of other organisations working in this field to feel empowered to develop their work and to widen its scope. I want commissioners to feel able to bring creative health activities into scope, and to work together across the County to learn from this project, and to multiply its benefits and outcomes so that Dementia can be a creative and connected experience.

We are all works of art, and we should all be able to celebrate and appreciate each other as works of art, whatever health, sickness or ageing bring to us.

With many thanks for this instructive report and the ‘Our Songs Our Stories’ project.



Darrell Gale
Director of Public Health
East Sussex County Council

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Introduction



1.1 Context

East Sussex County Council Public Health commissioned Our Songs Our Stories as a learning pilot with the aim of informing future practice and commissioning for older people's health and wellbeing. An element of the funding was allocated to this brief evaluation to capture insights and recommendations for ways forward.

1.2 Overview of the project

Our Songs Our Stories (OSOS) is an action learning project delivered on a limited budget and delivery timescale. It was delivered by Culture Shift, working with established musicians and artists with specialist skills in facilitating creative engagement and co-creation. It is a pilot project, designed and delivered with the aim of identifying learning about what good practice looks like in the context of engaging older people in creating music and art. It has been delivered in three areas, with 2 taster sessions in Hastings and 6 sessions in each of the Newhaven and Bexhill areas between April and September 2024.

1.3 About this report structure

This report is presented in 5 sections. Section 1 provides an overview of the background to the project, why it was commissioned as it was. Section 2 gives details of the evaluation scope, purpose, questions and method. Section 3 is the main section of the report, reporting on findings from the evaluation which have been thematically analysed where appropriate. Section 4 gives conclusions of the evaluation and Section 5 makes proposed recommendations, pending review by the provider and commissioner of the project.



About the evaluation



2.1 Scope and purpose of the evaluation

There is a strong body of existing evidence on the benefits for older people of participating in music and art activity. This particularly relates to benefits for people with Dementia (1). This evaluation does not attempt to reference all of this, although some key research is indicated where it is illustrative of the work of OSOS. Linked to this, whilst useful data has been captured regarding impact, this evaluation is primarily focused on learning to inform future practice and commissioning.

The primary aim of the evaluation therefore is to capture learning for effective delivery and commissioning to improve the health and wellbeing of older people in East Sussex through music and art interventions. The objectives are to:

- Record participation data
- Identify benefits for key stakeholder groups
- Explore how any of the benefits identified are linked to specific practice and/or design
- Explore learning for future design, delivery, practice and commissioning, focusing on opportunities for sustainable delivery models
- Identify any further research questions that might usefully be addressed

2.2 Evaluation questions

These were identified as part of the co-produced evaluation framework (see 2.3 Method). They can be summarised as:

- Who took part in the project?
- How was the project managed and delivered?
- What was the experience of the project for stakeholders?
- What were any identifiable benefits of the project?
- What is any learning from the project that can inform practice and commissioning going forward?

(1) For example, see:

Creative Health Review Report Launched – Dementia Community (journalofdementiacare.co.uk)

All-Party Parliamentary Group on Arts, Health and Wellbeing (culturehealthandwellbeing.org.uk)
Music and dementia - Dementia UK

Table 1 below shows a more detailed breakdown of the questions that the evaluation sought to answer, as identified as part of the evaluation framework. These are categorised by Participation, Project Management and Delivery, Experience, Benefits and Learning.

Participation	<ul style="list-style-type: none"> • Who took part? Numbers and what we know about their characteristics • How many carers/support workers and volunteers were involved? Anything about their respective job roles?
Project Management and Delivery	<ul style="list-style-type: none"> • What were the key promotion/recruitment/project management/delivery activities? • What were the challenges and how were they addressed?
Experience	<ul style="list-style-type: none"> • What has the experience of co-design participants been? • What has the experience of unpaid carers and support workers been?
Benefits	<ul style="list-style-type: none"> • What have been the self-reported benefits of the project, if any?
Learning	<ul style="list-style-type: none"> • What can we learn from existing research evidence? • What learning is there for the project that can promote real time improvements in the project? • What learning is there for Culture Shift going forward? • What learning is there for the wider system going forward? • What recommendations stem from learning from evidence reviewed and from practice experience?

2.3 Method

In line with the principles and practice of participatory action research (which involves a cycle of planning, action, reflection and evaluation) the project team and the evaluator have collaborated with each other, meeting regularly to discuss emerging issues and learning and to feed these back into delivery and data capture.

Before the project delivery started, an evaluation framework was co-produced with Culture Shift and the lead commissioner. This included the scope of the evaluation, specific research questions, target outcomes, stakeholders and a breakdown of methods for data capture. The framework has been used to inform the structure and content of this report.

To date, feedback from the following stakeholders has been used to inform the evaluation:

- People taking part in the project itself
- Culture Shift delivery and management team
- Support workers and unpaid carers
- Host venue partners

All data has been collated and a thematic analysis undertaken of the qualitative data to identify key themes and areas of triangulation.

Emerging themes and areas of learning have been discussed with the project team.



Findings



3.1 Target outcomes for the project

The target outcomes for the project included benefits for older people themselves, impact for unpaid carers and support staff and learning to inform the wider development of responses to health promotion for older people in East Sussex.

Stakeholder beneficiary group or learning area	Target outcome
Benefits for older people	<ul style="list-style-type: none">• Self-reported health and wellbeing benefits of participating in the sessions
Benefits for unpaid carers and support staff	<ul style="list-style-type: none">• Increased understanding of the benefits of music related participatory interventions.• Increased capacity to incorporate music related activities into their core offer.
Learning for the development of longer-term/wider responses in East Sussex	<ul style="list-style-type: none">• Adding to current local knowledge about existing evidence.• A better and documented understanding of what 'quality' looks like in a music related intervention for older people.• Learning from materials that are developed and piloted – how can these be optimized in a cost-effective way?• Learning regarding the options for expansion/longer term development including any capacity building developments (for example, 'Training the Trainer' model of development).

Table 2: below shows the target outcomes for the project, categorised by stakeholder beneficiary group/learning area

3.2 Project delivery

It is important to note that Culture Shift is an organisation that does not specialise in delivery in relation to a single target group. It's specialism is, rather, the processes and practices of working with people facing complex barriers to the determinants of wellbeing (for example, social isolation, physical and social barriers to accessing peer support and fulfilling activity, lack of opportunity for self-expression and self-fulfilment). It does this through the provision of arts-based co-creation.

Initial Steps

The first stage of the project was to establish good working relationships with partner organisations who would be hosting the delivery. These were:

- Castlemaine Care Home and Grosvenor House Care Home, Hastings, East Sussex
- Heart of Sidley/Southern Housing based in Sidley, Bexhill-on-Sea, East Sussex
- Sussex Community Development Association (SCDA) based in Newhaven, East Sussex

Initial contact focused on establishing the credibility of Culture Shift to deliver in a high-quality activity in a respectful way. The Creative Facilitators were involved in these meetings alongside the Project Manager and met some of the prospective participants prior to the sessions beginning. The project was planned, activities talked through and logistics agreed on.

Promoting participation

The relevant manager at each partner organisation (the host) identified participants against agreed criteria (see 3.3 Project Participation). In Newhaven and Bexhill, as sessions progressed, support staff at the host venue identified other residents who they thought would benefit who subsequently joined the sessions.

For the Hastings taster sessions, recruitment was managed directly within the care homes. For the sessions in Newhaven and Bexhill, a flyer was produced by Culture Shift, adapted to each host venue. A brief mapping of Dementia homes, coffee mornings and other activity groups, GP surgeries and care homes in the locality and surrounding areas, ensured a wide distribution of the flyers through Culture Shift databases and networks which have been extended as a result of this project, both via direct mailing. Culture Shift also shared promotional content via social media platforms in order to reach new audiences and raise awareness of the project.



Delivery

Professional Creative Facilitators worked with the Project Manager to develop a framework for the sessions, which was balanced between structure and flexibility.

Two taster sessions were held in care homes in Hastings. Six sessions were held in each partner venue in Bexhill and Newhaven. Sessions began with sharing refreshments together and included both visual arts and music making.

Debriefs were held after each delivery session, between the Project Manager and the Creative Facilitators. Notes from these meetings were used to inform the evaluation, alongside other data sources (see 2.3 Method).

A Consultant Practitioner who specialises in working with people with Dementia attended 2 sessions as well as being involved in co-design sessions and providing feedback on practical ways to make session delivery accessible, notably around communication.



Luke Reed-George - Project Manager

Luke has a degree in Psychology and Criminology from the University of the West of England (UWE). Before joining the team as a Project Manager, Luke worked for the Probation Service for 5 years, as a Residential Worker and then a Probation Services Officer.



Tom Cook - Creative Facilitator

Tom has been working as a multi-instrumentalist musician and music producer for 25 years. He creates music for TV, theatre, the gaming industry and as a community artist specialising in working with children, young people and learning disabled people.



Janey Moffat - Creative Facilitator

Janey is a visual artist who combines fabric, paper and stitch with drawing, painting and mark-making. Her work is deeply affected by her youth growing up in the Troubles of Northern Ireland, exploring trauma and healing.



Sam Glazer - Creative Facilitator

Sam is a composer, cellist and creative leader. For nearly 20 years he has been involved with Wigmore Hall's Music for Life project, working in care homes with people with Dementia, and co-founded Raise Your Voice Opera, Glyndebourne's group for people with Dementia and their carers.



Sam Baldwin - Creative Facilitator

Sam is a recording artist and multi-instrumentalist and has also been a music facilitator for young people and adults with learning disabilities and autism for the last 10 years.



Jane Haughton - Consultant Practitioner

Jane has worked for nearly 20 years as a professional musician, leading community choirs as well as opera and music projects in care homes, prisons and schools. For over 14 years she's been involved with Raise Your Voice, a Dementia and music charity.

Co-design of 'Be Here Now' resource

Over the course of the project, 3 co-design and knowledge share sessions were held with the delivery team and the Community 21 design team. The project commissioner (ESCC) attended the first co-design session. The aim was to develop and test a resource that could aid the delivery of music-based activity sessions for participants with Dementia, offering further engagement opportunities for participants.

A resource called the 'Be Here Now Box' was developed. This was tested during sessions in the Bexhill and Newhaven community settings.

The 'Raise your Voice' project (an established music/singing based service for older people with Dementia) also tested the resource in one of their sessions, facilitated by the project specialist consultant practitioner, Jane Haughton

The team of Creative Facilitators were each given a reflective journal to feedback their experience of the resources.

Four 'Be Here Now Boxes' were developed - all using re-used vintage containers and suitcases. They were designed to be easily mobile, transporting resources for the sessions and adding a sense of creativity and theatricality to how resources were presented in the sessions. Practitioners could fill the cases with a number of different objects based on the chosen themes of the sessions, with the aim of encouraging group members' active engagement as creative prompts and props.



Review meetings

Regular meetings took place between the Project Manager and Creative Facilitators to review sessions and adapt the structure and content of sessions if it was identified that this would be useful.

Monthly meetings were held between the Project Manager and Evaluator to discuss progress and any challenges arising and how they could be overcome.

Two meetings were held between the Evaluator, the Project Manager and the Creative Facilitators to identify key learning from the delivery.



3.3 Project participation

In total, 39 older people took part in sessions across the four sites, with 28 support staff or unpaid carers/family members.

- At Grosvenor House, Hastings, 13 residents took part in the session. Of these, 6 had a diagnosis of Dementia. 8 staff members also took part.
- At Castlemaine, Hastings, 15 residents took part in the session. Of these, 14 had a diagnosis of Dementia. 8 staff members and 2 family members also took part.
- At The Orangery (Southern Housing), Bexhill, 11 individuals participated in the sessions. Of these, 4 participated in all 6 sessions. 8 individuals took part in at least 3 sessions.
- At SCDA, Newhaven, there were more individuals living in the community that took part. This group was made up from 10 individuals with Dementia and 10 paid support staff or unpaid carers. 6 of these took part in at least 3 sessions.



3.4 Project impact

It is very clear from the data that participants and carers involved in the sessions enjoyed it immensely and there are many examples of individual progress in terms of levels of engagement, from listening and observing through to actively contributing and leading. Whilst this is to be expected the data also shows several other benefits that went beyond enjoyment to more specific impact.

Increase in socialisation and connection

Data from participants, carers, host venue managers and Creative Facilitators all showed a strong emphasis on reduction in social isolation and increase in active connection for individuals taking part in the programme. The Creative Facilitators all noted in their debriefs that they were struck by the sense of loneliness and isolation that many of the participants and their carers presented in the early sessions.

“It was my first time working with this group and I really noticed how isolated older people can be, especially with Dementia.”
(Janey, Creative Facilitator)

As sessions progressed, feedback from participants, carers and support staff highlighted increasing levels of active interest in the activity, and state of stimulation. One of the Creative Facilitators noted they were struck by how strong a unit the participants formed, coming to see themselves as part of a connected group.

The level of connection within the group at Castlemaine Care Home was commented on by family members:

“We came to visit our dad at Castlemaine and Culture Shift were doing an interactive session with the residents. It was wonderful to see the interest and interaction between the residents - and they wrote a fabulous song! We would like to see much more of this type of therapeutic input for the residents. Thank you!”

(Family members of participant, Castlemaine Care Home, Hastings)



Elevation from day-to-day life

The data shows several examples of a sense of elevation from the ordinariness and routine of everyday life and from boredom:

“A distraction from life, especially on days when you can’t get out and the days feel like they go on forever.”

(Participant, Southern Housing, Sidley)

Relief from stress, anxiety and aggression

One resident engaged with the session in a way that transcended his usual heightened state of emotion and behaviour, as described by staff:

“I couldn’t believe it.where did that come from? He is usually our most aggressive and violent resident, but in the session he was calm as anything. He was transfixed by the guitar. As he was leaving he said to me ‘cor, that was inspiring.”

(Staff Member, Castlemaine Care Home, Hastings)

Another resident was visibly relaxed, which care home staff attributed directly to the session:

“(resident) actually had a nap in the session which she never does. She is usually very anxious and walking around. Whilst it may have appeared that she was not engaged, we know that she clearly felt very comfortable, the session made her feel safe”

(Staff Member, Castlemaine Care Home, Hastings)

Opportunity to recognise ability, new and re-captured

Taking part in the project resulted in some of the participants widening their sense (or remembrance) of what they could do as well as having new experiences. One of the Creative Facilitators described the process of participants being ‘*extended beyond their assumptions about themselves or what they could do. This is important for anyone, but especially older people in care settings whose worlds often become smaller due to limits on social and enrichment opportunities.*’ The sense of ‘ability to do’ is linked in research literature to self-esteem and positive self-identity. Sometimes, these were linked to current, new experience and sometimes seemed to have triggered remembrance of earlier enjoyment of, and engagement in, arts-based activity:

“I have really surprised myself. I haven’t done art since I left school almost 60 years ago.”

(Participant, Southern Housing, Sidley)

“I went and put the xylophone in front of him, and I wasn’t sure he would play it as last week he was insistent that he just wanted to listen, but I thought I would give it a go, as he identifies as a musician.....and he just beamed at me and said yes, which seemed like a real breakthrough moment with him.”
(Sam, Creative Facilitator)

“There was an African drum and I had one the same once.”
(Participant, Southern Housing, Sidley).

“I noticed that my mum’s reading ability seemed improved when she was reading lyrics to sing along to songs.”
(Participant, SCDA, Newhaven)

There are many examples in the data of participants’ sense of achievement and fulfilment in what they have created, which linked in the data to self-affirmation’ and positive identity, for example:

“When you think of it, we are making art all the time through laughing and smiling. We are all works of art!”
(Participant, Southern Housing, Sidley)

Active co-creation and sense of control

Participant and support staff/carer feedback illustrates how being active contributors to a shared piece of music or visual art was linked to the self-affirmation noted above. As one Creative Facilitator noted:

“There is something so validating about contributing to something beautiful.”
(Janey, Creative Facilitator)

Several participants spontaneously took on leadership roles. For example, one participant took over some of the warm up activities. Another naturally began to conduct the group:

“I liked it as I was conducting the music.”
(Participant, Southern Housing, Sidley)

This was directly linked in the data to the facilitation approach and the expertise of the facilitators (see 3.5 Learning Regarding Practice).

Peer support

Peer support came out strongly across different data captured through the project. The Creative Facilitators commented on how participants helped them understand the support needs of their peers. There are many instances in the data of high levels of connection. Some of these are between peers with examples of people who were not vocal in the group but held hands during songs, between carers and individuals who formed closer bonds or learned new things about one another and between a couple:

“There was a really nice moment between Gill and David, when we were singing Stand by Me. Gill had her arm around him and was looking into his eyes as he sang to her, which was really sweet and another sign that, even though she wasn’t presenting as engaged during the whole session, they both seemed to really connect during the session.”

(Tom, Creative Facilitator)

One of the Creative Facilitators noted the high levels of mutual respect, peer affection and care. Peer connection was highlighted by the high levels of laughter in the sessions, that was noted by all stakeholders as being different to other times that the participants were together. Social affirmation is recognised in psychology research as occurring at greater levels in active music making. (2)

There are also several examples in the data of peer support between carers, including signposting other carers to local services, activities and resources.

Positive impact on physical wellbeing

There was one specific example of positive impact on physical wellbeing. One participant with a diabetes diagnosis commented on how her daily monitoring of blood sugar levels was lower than usual at the end of the session.

“This was really good for me. My blood sugar is 5.9 which is good for me!”

(Participant, Southern Housing, Sidley)

All the above benefits indicated by the data are linked in research to physical, and emotional wellbeing and, consequently, resilience.

(2) Creech, A. et al. (2013). Active music making: a route to enhanced subjective well-being among older people *Perspectives in Public Health* 133(1) p.36-43.
<https://journals.sagepub.com/doi/10.1177/1757913912466950>

Dwiartama, A., & Rosin, C. (2014). Exploring agency beyond humans: the compatibility of Actor-Network Theory (ANT) and resilience thinking. *Ecology and Society*, 19(3). <http://www.jstor.org/stable/26269633>

Impact for support staff and unpaid carers

The data from support staff and unpaid carers illustrates how the sessions have challenged assumptions that were made about individual participants. There are many examples of comments such as *'I didn't know that (name) could do that and had been a musician'*. The feedback gives a strong flavour of support staff and unpaid carers re-evaluating individuals as people, not just someone to be cared for.

There are also examples in the data of staff being motivated, by the benefits they saw in real time, to ask participants what other activities they would like to do and 2 instances of staff signposting or helping to arrange access to other activities.



One of the Creative Facilitators commented that the staff attending sessions appeared to have renewed confidence in their relationships with individuals. More detailed data would be needed to triangulate this but it could be part of monitoring/evaluation of any future project.

There are three examples in the data of unpaid carers noting how it had also benefited their own wellbeing, which is also apparent in research evidence, although this notes that interventions need to be ongoing to maintain this benefit. (4)



(4) McManus, K. et al. (2021) 'The effect of a performing arts intervention on caregivers of people with mild to moderately severe dementia', *Aging & Mental Health*, 26(4), pp. 735-744. doi: 10.1080/13607863.2021.1891200. doi: 10.1080/13607863.2021.1891200

3.5 Learning regarding practice

As outlined in Section 2, a key focus of the evaluation was to explore learning from the delivery model and processes for the project.

The data shows several strong themes in the structure and practice of the session delivery that appear to have contributed directly to the impact (see 3.4 Project Impact).

These are reported below:

Development of trust

The initial stages of the project delivery involved meeting venue host managers, staff and potential participants. Establishing credibility with the venue host staff appears to have been essential in developing trust. Because of this, some participants remembered the Project Manager and Creative Facilitators and the process of feeling at ease had already begun. This is important as proxy trust (trust placed in the project by someone who is directly a trusted person – a staff member or peer) can be an important driver to individuals feeling safe to participate.

“Lots of doors in”

The project management and delivery team felt that one of the key success factors in encouraging individuals to participate in the sessions was that there were a range of different ways into accessing the activity. At the participant recruitment phase, flyers were distributed in the wider community as well as to established residents and members of the host venue projects. Sessions were structured to begin with refreshments and informal chat, before moving into activities such as singalongs of well-known songs. This was then followed by co-creation of visual art and music pieces. Microphones were passed around participants who all took turns to speak into them, which promoted confidence to take part in activities to follow. Different musical instruments were available for people to experiment with and lyric sheets were distributed to participants as an alternative way to be involved in music creation, if they felt less confident.



Ethos and facilitation approach

A feature of the Culture Shift approach to the project can be characterised by inclusivity and avoidance of 'othering'. This was reflected in the structure, content and process of the sessions.

The 'flavour' of the sessions, that comes through clearly in the data, was one of joining in, rather than observing or needing to be 'good' at the activities. This was articulated by one of the Creative Facilitators as using an approach of collective endeavour, rather than the skills-based approach that often characterises activities. The facilitation actively encouraged an approach of 'Let's all be together', exploring what could be done collectively regardless of experience or previous knowledge or skill. This was integrated with a person-centred approach which recognised individual need and different types of contribution. An explicit focus of the approach from the beginning was to go beyond entertaining people or focusing on remembered experience. The sessions operated at the level of co-creation of new experience. Because the emphasis was on the collective rather than the performative, this took pressure off participants and enabled everyone to join in regardless of ability. This was a fundamental characteristic of the project, and it can be seen in the data that individuals and the groups moved quickly from a passive position in relation to the sessions to active engagement. One of the Creative Facilitators noted that:

“There is something about working creatively, it has the capacity to tap into the very personal. When it works, it opens a neural pathway to potentially quite profound and intimate connection. This is the difference between active engagement and expression and lower forms of engagement.”

(Sam, Creative Facilitator)

There was a particularly strong example of the link between the co-creation approach and the impact on participants, as described in this quote from a care home staff member:

“It was amazing to see (resident) had a real emotional journey. Throughout the session she appeared to be trapped in her grief cycle and kept telling the same story about how she had lost her husband. She kept saying ‘none of this means anything’ however when we started writing the song, it was amazing. She provided most of the lyrics for it, and her demeanour completely changed when we all started singing it. She was smiling and dancing along to it. It appeared to have really helped her mood at the time”

(Staff member, Castlemaine Care Home, Hastings)

This concept of active creative activity helping to tap into a deep sense of self is evidenced in more recent literature on music creation and people with Dementia(5)

(5) Baird, A. & Thompson, W. (2018). 'The Impact of Music on the Self in Dementia': 827 – 841.
The Impact of Music on the Self in Dementia - IOS Press

Expertise and experience of the Creative Facilitators

The Creative Facilitators recruited to deliver the project were highly skilled, with many years of experience in their own visual arts or music practice. This high quality, specialist expertise appears to have been a key factor in the opportunities provided for meaningful co-creation and leadership within the groups themselves. The facilitators all described the process within sessions as highly organic. It was important that they were sufficiently skilled and experienced to accommodate the 'messiness' of co-creation and to guide it into a high quality 'product' (a song, piece of music or piece of visual art) by the end of the activity. Furthermore, there are several examples of participants (see 3.4 Project Impact) taking a leadership role. This was made possible by the fact that the practitioners were confident to provide the space for this and to adapt sessions in real time to accommodate.

“It is important to be confident enough in your art not to feel scared of a blank page.”

(Janey, Creative Facilitator)

Despite this, facilitators were assured enough in their artistic expertise not to over value the 'product' but to value above all the role of arts as a 'playful expression of energy'. Because they were specialist in their arts practice and in facilitation, rather than working with older people or people with Dementia, they were able to focus on participants as co-creators. They reported that their experience made them confident to hold silences and gaps, leaving space for participants to contribute their own thoughts, ideas and reflections. Relaxed facilitation promoted a sense of safety within the group:

“We know our medium well enough to hold and improvise confident enough to launch the group off into the unknown and hold that space, but steering in a positive direction.”

(Sam, Creative Facilitator)

Participants appear from the data to have responded at an elevated level to this quality of practice, with several examples of unpaid carers and support staff expressing surprise at individuals' levels of engagement and contribution.

“Sometimes you feel no good at art, but when your brain relaxes you can do so much more.”

(Participant, Southern Housing, Sidley)

Celebrating collective achievement

Within the sessions, what was produced was actively celebrated in practical ways. For example, a parachute game was played around a piece of collective visual art. The facilitators described in positive terms what had been achieved.

The Creative Facilitators noted that they felt this was a valuable part of the process and could be integrated further into future practice.



Learning from the testing of the 'Be Here Now' box

Feedback on the use of the resource was mixed, with different practitioners, group sizes and settings apparently influencing how effective the resource was perceived to be.

Creative Facilitators in Sidley reported that introducing the box 'elevated' the session, adding another dimension of engagement to the sessions. It allowed for the practitioners to use their creativity to introduce and present resources in new ways, which helped to encourage conversation and provided inspiration for song lyrics.

“The ‘Be Here Now’ Box was on a table in front of the tablecloth, which gave it almost a stage adding a theatrical element to the session today. It made us really think about how we presented the instruments, artefacts and resources to the group today, which we felt took the session to another level.”

(Janey, Creative Facilitator)

“I really felt like the value of the box is that it is a reframing device that helps present the resources we already have in a new, interesting, playful and engaging way. Presenting them as ‘treasures’.”

(Sam, Creative Facilitator)

Practitioners delivering in other groups found the resource to be too restrictive and felt that participants lost interest following the first session. These practitioners reported preferring to use it as an optional addition to the sessions rather than being a central part of the activities.

The Consultant Practitioner tested one of the 'Be Here Now' boxes in different sessions including an established music group of 30 older people with Dementia and those who care for them and a smaller care home setting. This allowed them to compare the variety of responses and levels of engagements. The Consultant Practitioner reported that they felt using the resource in the smaller care home setting helped to engage and spark conversations with participants, adding a sense of intrigue and sparking conversations over what might be inside.

While the box did provide a sense of novelty to the established group it was less effective due to the larger size of the group which resulted in a restricted view for some participants.

Overall, the resource appears to have worked much better in smaller group situations and may be particularly useful in groups where members have engaged less with each other prior to the sessions.

Identified challenges and gaps

The main challenge for the project was the availability of support staff to support sessions through their attendance. In some cases, unpaid carers dropped participants off and returned to pick them up at the end. The delivery team accommodated the challenge of not having support staff in some of the sessions but noted that the experience was a lot richer for some participants when staff were more actively involved. They also noted that it would have been valuable for learning if a carer could have been present consistently in each session and contributed directly to post session feedback.

There were also physical challenges to delivery in some sessions, with facilitators noting distraction from a resident's alarm, which reflects the reality of working in a care home setting.

There were two main gaps or requests for additions that were identified in the data.

The first was a demand for further sessions for the participating groups and for the project to be delivered across a wider geographical area. This mainly came from unpaid carers and support staff and was directly linked to their observations of the high impact the sessions were making.

The second came from older people themselves. In one of the groups they asked if a piece of visual art they had made could be shown to others. They talked about it being taken into schools for example. This reflects an expression of pride in their collective achievement and perhaps a recognition of an opportunity to be connected with the wider community and to be relevant in the outside world. There is more consideration of this needed but if there was sufficient funding to have some public acknowledgement of the collective outputs of the groups, this could add significant wellbeing value to the participants as well as publicising the value of the approach. This could be done digitally as well as in person, in line with other Culture Shift programmes.

3.6 Learning regarding commissioning

As referenced in Section 1, Culture Shift does not specialise in working with people with Dementia, or in fact, any other group. Their core strategic position is to provide high quality arts-based specific experience to promote health and wellbeing (with the emphasis on high quality). The approach across the organisation is one of disrupting power dynamics between expert and participant – doing with rather than doing to or for. It is also a highly person-centred approach regardless of need and one of celebrating the power of arts-based engagement. It is highly asset-based, focused on what people can do, rather than what they cannot however, delivery structures, content and processes take into account distinct needs of groups they work with.

The data illustrates how this project has provided a mechanism for empowerment and an elevated engagement, going over and above passive engagement ('being entertained') to an active engagement in creating new experience, connection and achievement.

There is always a danger in commissioning that service delivery is siloed by 'client group' as the funding promotes this. However, the data captured for this project challenges this. The use of such highly experienced and skilled Creative Facilitators, rather than specialists in working with people with Dementia is what has made this project what it is and what has contributed to the benefits participants have experienced. It is a model that can be applied to any group, as evaluations of Culture Shift projects working with neurodiverse people and others, have shown (see Culture Shift website, www.cultureshift.org.uk)

The data underlying this report represents a useful reminder and example for commissioners of the importance of investing in good, evidence-based practice for the most cost-effective interventions.

Conclusions



Based on the data, the project has delivered an effective pilot across three East Sussex towns with high deprivation, with universally positive feedback from participants and carers/support staff. Attendance was good, although not everyone attended all sessions, there is nothing to indicate that this was due to a lack of enjoyment or benefit from the project, but is a reflection of the unpredictable and challenging reality for people with Dementia and those who care for them.

There was a high emphasis on ongoing learning in the project with input from a specialist in working with people with Dementia, debriefing after each session of delivery and regular meetings with the evaluator, all of which informed session planning and process.

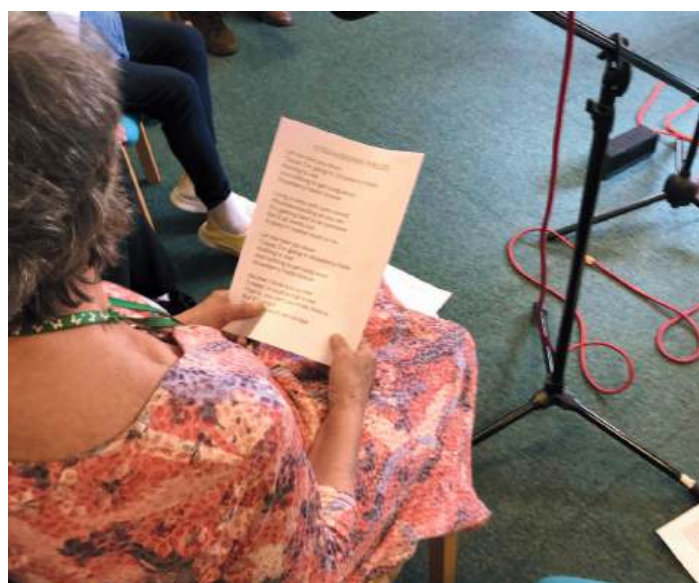
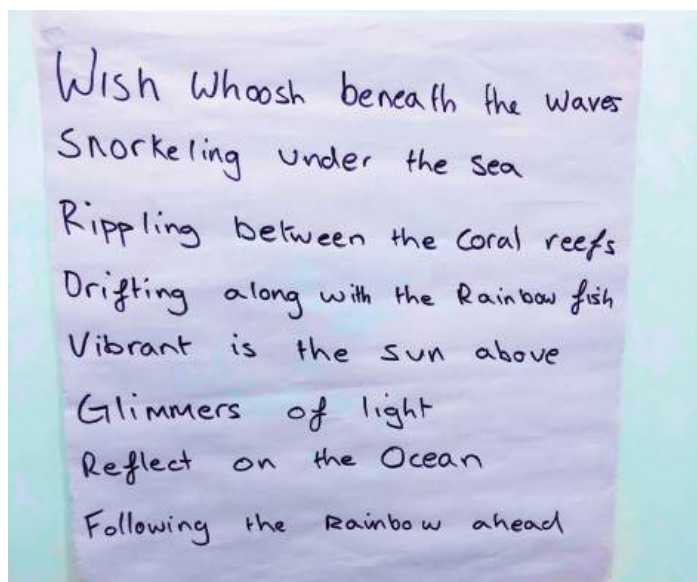
Benefits were various and marked in the data. Enjoyment of the sessions was consistently reported. Further, there are many examples in the data of participants moving from passive engagement to higher levels of engagement through co-creation of music and visual arts pieces and some examples of spontaneous co-leading. The facilitation style enabled this to take place and to accommodate participant-led involvement.

The data shows that the project enabled participants to build deeper connections with their peers, carers and support staff as well as the Creative Facilitators. This included many examples of direct peer support and advocacy between individual older people and support and peer signposting between unpaid carers. It enabled an elevation from the routines and boredom of everyday life. Crucially, there are also many reports of participants feeling a greater sense of agency through the sessions. There was one direct example of real time improvement in physical wellbeing.

Benefits can be directly linked through the data back to the co-creation model and inclusive, asset-based facilitation style, which stems from the ethos and approach of Culture Shift that is core to all their work. The use of creative arts as a vehicle for enabling wellbeing through empowerment and validation of the person is clear, as is the value of the end product of the art or music output itself. The data indicates that the employment of established, experienced musician/artists as Creative Facilitators with high levels of expertise in their media and in facilitation was fundamental to this.

There were limited examples of gaps or room for improvement in the data for this pilot. The key challenge reported was the patchy availability of support staff and carers to take part in the sessions themselves. This did not impact negatively as such but was perhaps a missed opportunity for more enriching experience all round. One group of participants expressed a wish to have their visual output more widely seen and appreciated. This could form part of any future project. The main demand from participants, carers and support staff was for more sessions and for them to be rolled out across a wider area.

For commissioners, there is learning in terms of the value of creative projects to promote older people's health and wellbeing. There is also key learning in relation to the value of the 'specialism' being less focused on specific target groups and more on high quality practice and process that can be applied to working with any group. The project is a testament to the benefits of co-creation – meaningfully active engagement – for agency, which is a foundation block of wellbeing. As such, it is an approach that is recommended as a core contribution to promotion of health.



Recommendations



The following recommendations arise from the findings and conclusions:

- That, whilst noting current financial restrictions, commissioners note the cost-effectiveness of the delivery model and consider commissioning of wider rollout across the county.
- That monitoring and evaluation of any future project should include more direct emphasis on benefits for staff and carers, including renewed confidence in their relationships with individuals.
- That practical ways of real time celebration of musical or arts outputs should be further integrated into session structures.
- That consideration is given in any future programme to the capturing of outputs from the sessions so that they are available to a wider audience and that participants can show their families and others what they have achieved.

“I went to a Dementia cafe and it was sad. Everyone sat around talking about their problems and not doing anything. I understand carers need to talk and share. But, here we can have fun together and laugh together. It helps us forget our problems and be ourselves, a couple again!”
(Participant, SCDA, Newhaven)



“When you think of it, we are making art all the time through laughing and smiling. We are all works of art!”





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