

## **Building Community through Arts (BCA)**

### **Cooperative Enquiry using Arts Media with people with dementia**

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Abstract .....	2
INTRODUCTION & LITERATURE REVIEW .....	3
BUILDING COMMUNITY THROUGH ARTS (BCA) .....	5
METHOD Introduction of Cooperative Inquiry (Idea stage) .....	6
A. Implementing the Weaver's triangle. (Action stage of the cooperative enquiry) .....	11
B. Arts Intervention (Action stage of cooperative enquiry) .....	13
RESULTS –Review stage of Cooperative enquiry .....	16
A. Effects of staff training .....	17
EVALUATION .....	20
DISCUSSION .....	29
A. Staff training .....	29
B. Arts intervention .....	31
FUTURE DIRECTIONS .....	31

A = Staff training

B = Arts Intervention

## **Building Community through Arts (BCA)**

### ***Abstract***

This paper describes BCA's innovative use of John Heron's *Cooperative Inquiry* method (a cycle of 'idea, action and review') with people with dementia (Heron 1996). Basic communication skills and simple arts activities were introduced with care staff, clients, school and business volunteers sharing in the inclusive training. Care staff, whose focus has often been limited to physical care, were helped to realise a more creative attitude to their day to day routines; clients benefited from the new inclusive attitudes towards 'activities'; The BCA Team and community volunteers, including those recruited from business and schools, gained insights and skills, and satisfaction from knowing they helped to make a difference to clients with dementia.

### *Key words:*

Arts / Activities; Community; Cooperative Enquiry; Dementia; Staff  
Training

## ***INTRODUCTION & LITERATURE REVIEW***

Over the last few decades there has been a profound change of attitude towards people with dementia: no longer ‘imbeciles’<sup>iiiiiv</sup> – implying a loss of identity and lack of respect (Farrer 1962: 189). Rather, the work of many, particularly Kitwood (1997: et al),<sup>v</sup> is bringing about a change in the culture of care: ‘personhood’, individual care plans, and activities designed to restore a sense of meaning to the lives of people with dementia.

The provision of activities has involved two main strands: *direct intervention* by professionals, and *staff training* to develop skills and awareness that any activity beyond basic physical care can be ‘beneficial’,.

### *Direct intervention*

Trained facilitators work to produce an improvement in living experience – often a performance including a great variety of creative activities.

Stimulating, fun and providing great enjoyment, Age Exchange’s programmes, for instance, rely on the trained facilitation of the providers.<sup>vi</sup>

### *Staff Training*

There are many short courses offering ideas and insights into dementia and appropriate activities. It is not clear how far learning can be sustained on the trainees’ return to their institutions. Writing on the

effects of a research project using the 'snoezelen' room (an individual program of multi-sensory stimulation) Colin MacDonald commented that it was very dependent on the interest of the staff using it; after the project ended there was a 'loss of interest and disillusionment after the staff realised that multi-sensory stimulation was no miracle cure'.<sup>vii</sup> (2002: 34)

#### *Sustainability of person-centred staff attitudes to care*

Well- and ill-being profiles were used in one Home to assess the effect of a careful introduction of person centred care, As staff became more aware of the value of person-centred care plans, tailored to previous life experiences and present needs, so general well-being scores improved. Christine Hosking commented that a year later staff attitudes were still changing, and that 'what was once considered an unpopular job is now increasingly about enabling people to get the best out of their remaining days.' (Hosking 2002: 18-20)<sup>viii</sup>.

#### *Value of shared activity establishing trust*

Gottlieb -Tanaka et al (2003: 125)<sup>ix</sup>, reported on the development of creative activities for people with dementia. They recognised the value of developing friendly relationships between facilitators and the group with whom they were working – sharing their experiences to establish trust and equality in the group (in contrast to traditional training which discourages sharing feelings or experience). However, it appears that while the day to day staff were impressed with the importance of creative activities, they were not being trained to carry on with their provision.

## ***BUILDING COMMUNITY THROUGH ARTS (BCA)***

During this time (1993 – 2002), BCA developed a series of workshop programmes focusing on a collaborative style of working and using simple arts media to break down barriers between people who would not normally relate easily to each other, particularly those with disabilities or dementia who are often marginalized or excluded from our community life.

*Sidney Jones PhD – early research into education and creative activity<sup>x</sup>:*

Jones observed the effects of introducing activities to homes and hospitals including music, art, poetry writing, poetry and play reading, French conversation, music and movement. The improvements noted were physical, social and psychological – greater self esteem, physical control, moods and social interaction. (1983)

The second author, Kitty Lloyd-Lawrence, (founder and coordinator of BCA) followed up Jones' work by developing workshops for enhancing interaction between staff and residents in the care of the Central and Cecil Housing Trust, using simple arts media.

*'New' interactive arts sessions*

A key value was learned which influenced all further work of BCA (1994). When asked why she preferred the 'new arts sessions' put on in the Home, one resident replied that the 'other sessions were just for a wet Wednesday – she challenged us to be original.' In the other sessions staff

went off for a cup of tea. It felt like pouring water into sand when they were not there to take advantage of the process and positive outcomes.<sup>xi</sup>

However, staff were interested, and wanted to be included in the new art sessions. After some negotiation, this was achieved.

BCA's aim has been to enable carers (staff, relatives or community volunteers) to maximise day to day opportunities to develop deeper levels of relationship. As far as possible programmes are designed 'with' rather than 'for' those in their care, to enhance their quality of life and provide greater interest in their work for the carers.

#### *The BCA team*

The BCA team, as well as the two facilitators and consultant, included a widely diverse group of volunteers. They were given an introductory workshop, and stayed to participate in the training. From time to time many different people from surrounding communities were included, for instance relatives, the local minister, school children or business volunteers.

#### ***METHOD Introduction of Cooperative Inquiry (Idea stage)***

The third author, a facilitation trainer, helped BCA to develop a collaborative training style based on John Heron's *Cooperative Inquiry* process. (Heron 1996)<sup>xii</sup> This is an action learning approach where participants consciously use a cycle of Idea / Action / and Review, working as equal enquirers across several layers of an organisation, including clients, sharing together as peers in a learning partnership.

### *Shift from culture of blame to learning culture in cooperative enquiry*

Before entering into a contract for a cooperative enquiry BCA and management needed to agree their overall goal – to work together collaboratively towards a learning culture. This contrasts with the hierarchical culture of blame which tends to dominate institutional life. Often ‘Whose fault?’ is the question when something goes wrong, rather than ‘Why did that happen, and what have we learned to prevent it happening again?’ This is not easy where there has been an authoritarian management style. ***Failure to achieve this understanding may undermine the whole programme.***

### *Anchoring a Cooperative enquiry*

#### *The ‘Initiating Group’*

An ‘Initiating Group’ is set up to anchor a cooperative enquiry. As far as possible this represented all levels of the host community, including relatives and the BCA team of consultant, facilitators and volunteers. The task of this group is described by Heron as three-stranded:

- to understand and accept the methodology being introduced, so that ‘they can make it their own’;
- to develop ‘participative decision-making and authentic collaboration so that the enquiry becomes truly cooperative’
- to ‘ create a climate in which emotional states can be identified, so that distress and tension aroused by the enquiry can be openly accepted and processed, and joy and delight in it and with each other can be freely expressed.’<sup>xiii</sup> (1996: ch 4)

### *Agreement on Evaluation methodology*

The initiating group agrees the methodology for the monitoring and evaluation of the project at the beginning of the project. It will meet at the very least three times: at the beginning of the project to define the starting profile of the organisation, at mid-point to monitor progress – or if necessary adjust the project goals – and at the end of the project to assess progress.

### The Weavers' Triangle<sup>xiv</sup>

#### ***A: Staff training (the action stage)***

Programmes comprised training workshops, arts workshops, review time and individual consultations. Supporting materials, explanatory leaflets and learning tools were provided, with final workbooks for staff developed from their own learning experience during the projects. The concept of a fully and equally cooperative process is unfamiliar to usual management structures or participating staff. Each person is equally important having a unique view of the community and can contribute to a more complete picture of how things are and how they could be – more than any one layer, e.g. management alone, can achieve. Members could bring their peers' views to the initiating group, and 'cascade' – share the thinking, information and practice of the initiating group – with their colleagues.

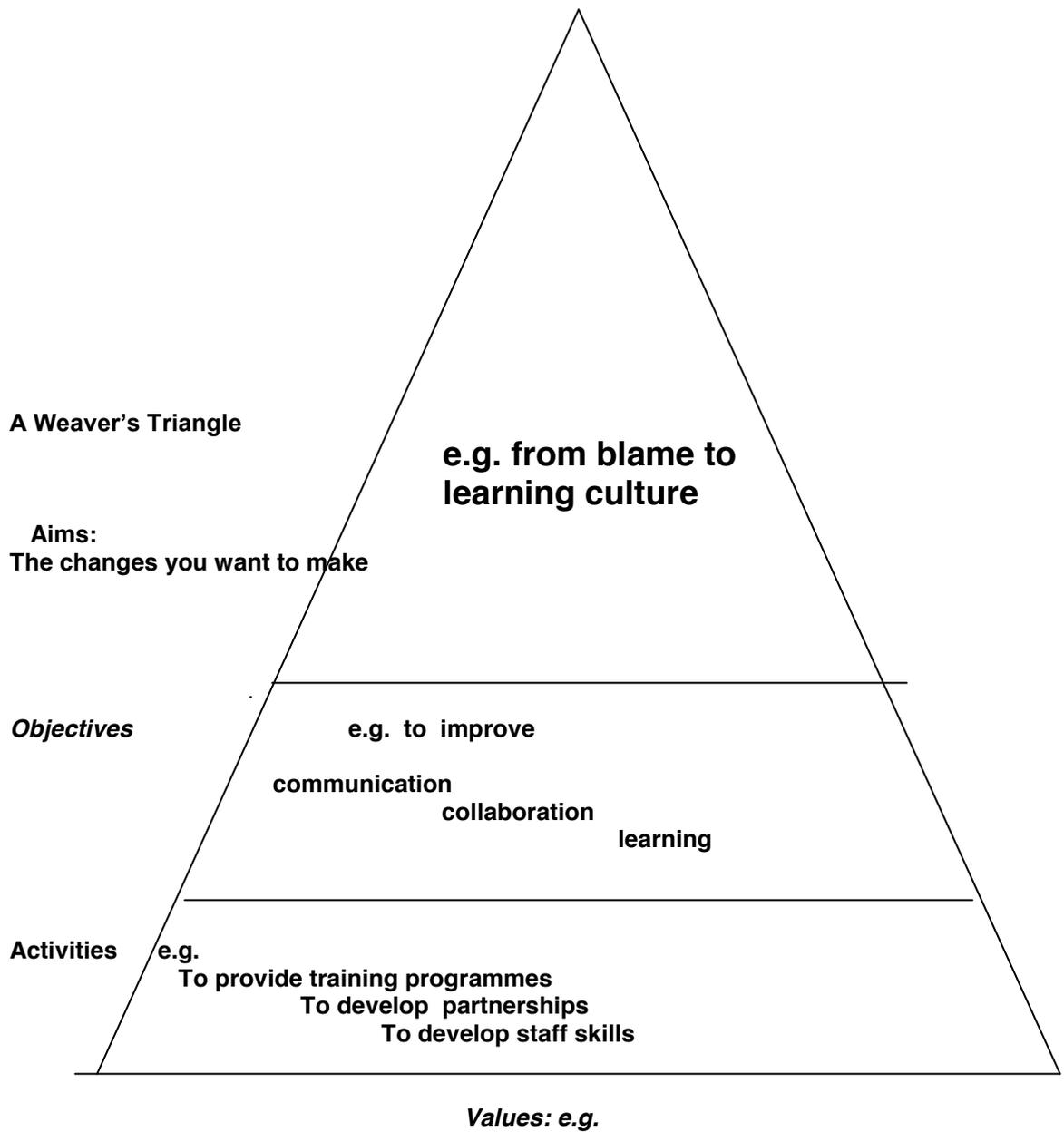
#### *The Weaver's Triangle*

BCA uses the Charities Evaluation Services' Weavers' Triangle, a way of identifying the overall aim and resulting goals of an organisation or

programme of work. These aims, objectives and activities in turn can be tested against the organisation's expressed values. This also enables others, such as trustees, relatives, peer professionals or volunteers to understand the work being undertaken and the culture needed to support it.

### *Cooperative monitoring*

The Weavers' Triangle includes evaluation sheets identifying markers for success which can be reviewed cooperatively, and used as benchmarks for future development. One of the three key stages is *review*, looking back to become more consciously aware of the process, accepting successes and shortcomings; planning the next stage – and avoiding unproductive 'blame games'.



- *Everyone has creative potential*
- *We learn from each other by working together in partnership*

- *Good interpersonal communication is vital to community development*
- *Presentation validates all concerned*

**The Charities Evaluation Services** provide further pages to identify the indicators to monitor and test these aims, objectives, activities and values.

***A. Implementing the Weaver's triangle. (Action stage of the cooperative enquiry)***

Working with the Weaver's Triangle in the Home for people with dementia the initiating group identified overall aim – '*to achieve more together building their community*', the principal issues being addressed to achieve their aim – '*communication, collaboration, confidence and care of residents*', and the activities planned to achieve these objectives

*Individual goal setting*

Individuals set their own goals giving added meaning to their day-to-day routine using a pro forma based on the work of Edgar Schein. Private and confidential learning logs helped to clarify learning points, which could be shared in the peer learning groups identified at the start of the programme. These groups were kept together within, and, as far as possible, outside the workshops. There were also opportunities to consult with BCA facilitators and the House Manager.

*Group goal setting*

In the final workshops staff planned and implement an activity which could include residents. In one Home a Tea Dance was arranged, in another an Easter Bonnet Parade and Tea Party. Responsibility was shifted from a 'management' led activity to group discussion and shared planning.

### *Communication Skills (199...)<sup>xv</sup>*

The programmes introduced or revisited basic communication skills – listening, body language, use of language, the management of emotions, and self and peer assessment. These were practiced in the workshops and in small group work. In many cases we were making explicit and thus validating what staff already practised, yet on one occasion our facilitator was interrupted and told ‘*I’ve already done listening!*’ However, our programmes emphasised that these are lifelong learning skills, achieved by continuing practice and through self and peer assessment, learning more about our own reactions and feelings.

### *Language*

Language is always particular to a group or culture. In one programme we explored different interpretations of words used, such as *facilitation*, *disseminate* and even *activities*. ‘*Facilitation*’ was variously interpreted as ‘teaching’, ‘showing how to’, or ‘training’. For BCA it means more ‘enabling others to develop or release their hidden potential’. For some it was a new idea that ‘*activities*’ could refer to any day to day routine rather than identified sessions.

### *The Cascade*

We encouraged participants to pass their learning on to others not on the programme. This was also relevant for relatives or friends in the community.

### *Monitoring progress*

Pre- and post-programme questionnaires covered personal, group and organisational issues, goals and outcomes. Interpreting results was undertaken internally, not as judgments but as learning points.

### ***B. Arts Intervention (Action stage of cooperative enquiry)***

#### *The Experiential Method (199...) <sup>xvi</sup>*

We had noted the liberating effect on both residents (with or without dementia) and care staff of experiencing simple creative arts activities together at a level where particular expertise was not required. Arts provide a bridge for building a sense of community, value and purpose, to express feelings and moods. In art there is no 'right' or 'wrong'; we can value differences and enjoy finding commonly held feelings. We can experience working on the right side of the brain – spontaneous, intuitive, open to the unexpected, rather than the left side – logical, methodical, orderly. The arts are particularly appropriate when the cognitive faculties are minimal as with dementia.

#### *Inclusive training sessions using arts media*

The process offers a combination of direct intervention and staff training. It included practical sessions which involved clients joining in at an early stage. This helped to set a pattern of inclusive working, adapting to the needs of clients from the start. Even if they could not be actively involved

in the proceedings, simply to be present offered stimulation and a feeling of being part of the community.

*A typical arts workshop plan*

While the BCA team proposed the outline plan for each workshop, it was open for discussion. Reviews were shared with all participants, recorded to a flipchart, and circulated. Timings can be adapted to the clientele, medium used etc.

**Aims:** To interest and stimulate participants

To encourage interpersonal communication

To develop facilitation skills

<b>Time</b>	<b>Activity</b>	<b>Comment</b>
Preparation:	Facilitators and volunteers clarify workshop programme	Identify materials and timetable.
00 00 00.05  00.15	Gather Introductions (general information)  Round: - all respond to a question e.g. 'How am I today?' Or 'What colour / animal could I be today?' and why.	Up to 12 participants facing in a circle with clip boards, pens and paper Depending on time and numbers, one word replies, one sentence or 1 minute...
IDEA 00.30	Short description of aims of workshop and medium being used.	
ACTION 00.35	Explain working in groups of 3 'doer', 'helper', 'observer' roles  Opportunity for demonstration by facilitator with a volunteer	Groups with mix of people Team can demonstrate helpful and unhelpful facilitation, participants commenting as observers
00.50	Working in groups of 3 taking 10 minutes taking turns to be doer, helper and observer.	Facilitator warns 2 minutes before each change over
01.20 - 1.30	Still in small groups individually give a title or one-liner to the work drawing out the doer's ideas – not imposing the helper's.	
1.30 – 1.40	Each group shares results with whole group	Copied to a flip chart or blue-tack for a display
REVIEW 1.40 - 1.50	Review of workshop (Group). What happened? Did we achieve what we set out to do? What have we learned? How can we take this forward? What might we change next time?	If short of time can be one-word or choice of smiley / angry 'faces' – especially helpful working with children
1.50 – 2.00	Closing Round (personal) How do I feel? Did I enjoy the workshop? How have I changed?	
Post Workshop Review	Facilitators and volunteers review with commissioning group.	Take note of pluses and minuses for future amendment

### *Use of simple arts media*

We introduced simple arts media: words; painting with black ink, using unusual tools such as string, sponges or pieces of card, fat or thin brushes, mapping pens; colour, using paint or wax crayons; clay, or plasticine; and everyday or old-fashioned objects to stimulate the senses (smell, taste, touch, sound or sight) which provoked reminiscence and often animated conversation and comparisons with modern equivalents. Adapting activities to accommodate individual reactions but not preclude the experiential elements offered valuable learning experiences.

Setting aside expectations of being able to learn anything new the present moment and immediate experience of safety, caring, and mutual interest is paramount. In one project the Home Manager had commented that even if there was no subsequent conscious memory of the experience, a series of ten minute good experiences helped to build confidence for people with dementia.

### ***RESULTS –Review stage of Cooperative enquiry***

In the final Review workshop in the Home for people with dementia a general feeling of achievement was expressed, summarised by comments such as: *My confidence grew watching staff develop as I sat back*' (House manager), *'There is now more appreciation and respect for each other'* (a

care team leader) and, crucially, one care assistant said: *'At first it was a bit of a challenge. I could not relate the study to the work that I do day to day, but at the end she said 'Having taken guidance from the facilitators I was encouraged to treat it as a normal working day. From then on it was plain sailing.'* This echoed our experience in earlier projects.

### ***A. Effects of staff training***

#### *Participation of Management Staff*

Participation of management personnel in workshops gave programmes necessary recognition. For a resident, a care staff and a member of management to spend time together on a common activity confirmed their common interest in the life of the institution. It helped to develop feelings of safety and good relationship. When asked what part of the programme she had enjoyed most a resident had replied *'Sitting down together like this with the staff.'*

#### *Individual goals - consultations with Management and/or BCA*

Personal goals were discussed, agreed with, and validated by the House Manager. This raised staff morale, giving them confidence to pursue their own learning. In contrast to the more usual appraisal or assessment interviews where a junior feels 'examined' by her line manager, with consequent anxiety and stress. Participants were also encouraged to monitor their own progress in their private files, and by discussion in the small learning groups. The process of developing a greater awareness of

their own learning was unfamiliar to some staff: *'It felt very abstract'*, and *'Too rich a mixture'* were comments made in a first workshop review.

The personal consultation meetings offered by BCA in our final project helped to clarify the process and reassured several participants that the programme was relevant to their every day work. Individual consultations were not always taken up, some preferring to work in their peer groups, reviewing together, with or without the BCA facilitators.

### *Group goals*

Group activities encouraged staff to work together. The Tea Dance included residents, relatives and other staff. Posters, invitations and suggestions from all involved were incorporated into the programme. The final event was felt to have been qualitatively different: *'enjoyable; challenging; different.'* The House Manager particularly appreciated the high level of cooperation and responsibility taken by the staff.

### *Involvement in 'activities'*

By the end of the extended training project in the Home for people with dementia more care staff were seeing activities as an integral part of their work and regarding each other as resources, more prepared to get involved both in the Activities Room and in their day to day routine. One care staff reported *"At first I was shy, scared, confused, I gradually learned and grew in confidence."* Another said *"Being reinforced around activities gave more confidence to work with residents and in the team."*

### *Working with Community volunteers*

Working with this wider group meant that individual attention, careful listening and sensitive support could be given to clients. Staff, as partners, contributed their own expertise, knowledge and skills winning the respect of the visitors and BCA team. Business executive volunteers in two of the programmes were welcomed, bringing new insights and energy into the workshops. Their contribution was affected by shifting priorities outside their control which disrupted expected attendances. Ironically, this was parallel to difficulties experienced in the Homes themselves, creating a common bond. Nevertheless, one care staff declared *'Thank you for showing us we can be more. I promise you we will be more.'*

### *Social interaction*

The registration officer for the borough in which we worked kept in close touch with BCA. Her verdict was *'BCA were filling a gap by attending to social interaction. This social core training with spontaneous and continuous work on creativity fills a great need in training provision. It's brilliant.'*

### ***B.Effects of training and arts intervention on staff and residents***

Not surprisingly 'playing' evoked making a mess, threatening a loss of control, which aroused anxiety for some residents – it was not what they had learned. We needed to be flexible to respond to individual feelings and response to the workshop activities.

Repeatedly the introduction of simple arts activities aroused a surprised reaction from care staff: 'I *didn't know so much could come from so little*' said one after a conversation triggered by an old-fashioned sweet. 'I've *never heard her talk so much*' was another comment.

### *Presentation*

The presentation of finished artworks – notelets, laminated bookmarks or posters, a group poem, the making of cards – was gratifying. This is an extract from a group poem, compiled from responses to an abstract black ink painting on this occasion done as an example by a BCA team member in front of the whole group – clients, care staff, BCA team member and relatives:-

A dark forest  
A tropical forest  
An anteater eating ants  
An overnight train journey  
A lakeside with reeds  
A fern reflecting in water  
Crashing waves  
A windy tree  
Birds fighting .....

### **EVALUATION**

While this section gives an overview from the final reviews of the process, at all stages the cycle of 'idea' 'action' 'review' is integral to continuous monitoring. Based on the cooperative work of the initiating group the

process is not felt to be threatening, as for instance having to respond to external inspection by a Registration Officer

### *Interpreting statistics*

Statistics require close interpretation and discussion with the participating group. Where small numbers are converted into percentages, since in a group of say 10, one person represents 10% - an 'off-day' or absence can give a very misleading percentage reading. We wondered in one Home whether there had been some distortion in the pre-programme questionnaires which showed remarkably positive scores. Were there anxieties about being too honest and revealing difficulties before trust had been established? In the final, post-programme reviews goals had largely been met, although some scores had shown a deterioration in quality of relationships – were these perhaps more honest in admitting difficulties not yet resolved?

Overall comments made in final reviews ranged from one-word thoughts: *Happy, Exciting, Pleased, Challenging, Astonished, Enjoyable, Surprised, Different, Energy, Confident, Rewarding, Connected, Achievement, teamwork, delighted, thankyou* to deeper comments taken from the post-programme questionnaires distributed to the staff.....

*I learned to let go and enjoy instead of control (a manager)*

*At meetings I used to tell – now I use more open questions (a manager)*

*We learned to listen to one another as a group, more appreciation and respect for each other (care staff)*

*Being reinforced around creativity gave more confidence to work with residents and team (care staff)*

*There's a more relaxed atmosphere, lot more stability; people not so guarded to say what they feel. The organisation's culture is getting happier – loosening up, getting more relaxed (a manager)*

*Increase in confidence and localised activities*

Localised activity initiated by the regular care staff increased.<sup>xvii</sup> They had developed greater personal confidence and in organising activities, even small arts workshops with residents, with concomitant stimulation, interest and involvement of the clients. Activities staff became more supportive providing a resource, rather than being sole providers of 'activity'. The idea that day to day activities could be used as opportunities for 'building community' developed in a number of cases. A typical comment came from a care worker who summed up her experience: *'At the end of the course I really feel I have achieved something – more relaxed and confident to talk to people.'*

One care staff, who came to a programme illiterate decided to take up literacy classes. Another realised that instead of bingo she could facilitate a small workshop for residents; later she moved to another Home, where she was asked to train other staff.

### *Process development v. traditional 'training'*

Process development through experiential cooperative enquiries can result in a sense of some unmet expectations of having 'solutions' handed down by an expert. However overall results reported in internal reviews, Social Services evaluation sheets and BCA questionnaires showed increased confidence and positive learning by the majority of participants. The post- programme questionnaires indicated that the concept of working cooperatively had met with considerable success. This was also evident in the high level of individual staff commitment to the programmes over a period of several months, and the many hours spent in shared planning, review and learning. The element of 'playing together' was valuable in breaking across barriers of status, and between staff, residents and volunteers.

### *Effects on residents*

#### *Observation of mood changes*

It is not always practicable to elicit review comments from residents with dementia, however it was possible to assess some level of mood, especially where these revealed changes. 'Smiley faces' drawn large and placed on the floor round the room proved a useful, simple review tool; all participants were invited to choose the expression (miserable, unhappy, OK, pleased, excited) which best matched their mood at the end of a session.

More explicit feedback came from some. One resident, Dr M., a retired GP, who appeared to have had his own past experience of training others, sat comfortably through a training session. At the end he stood to address the reviewing group, encouraging them with his opinion that the session had been '*very good*'. Whereas in the morning he had been noticed for his depressed mood, the House Manager reported that later that day after the workshop he was in high spirits, and cheerful.

Another resident surprised a care staff by commenting on the training session he had enjoyed the previous day, which the staff member had assumed he would have forgotten. We learned never to make assumptions about how much was being understood, and to pay close attention to the sometimes confused or apparently unrelated responses of residents in these arts sessions.

Alerted by Sidney Jones to the 'psycho-social benefits of presentation' attention was paid to framing and presenting selected pieces of artwork, Books of poems and artwork were kept and displayed in each of the Homes. An open ended loose leaf '*ABC of Activities*' was gathered, ready for additions by staff, and a workbook with instructions on presentation using computers and photocopiers was compiled for the use of the team, in one Home a copy was left with an interested member of staff.

(2000...)<sup>xviii</sup>

## *A Case history: Recovery of meaning through art – Elizabeth's story*

The story of Elizabeth illustrates the main stages by which the BCA process developed – adapting Heron's cycle of *Idea, Action and Review*, within a cooperative framework.

Elizabeth had multi infarct dementia. Her story illustrates the various stages by which she came to produce a meaningful image and caption which helped her to relate back into her own life, and with her family.

*Cooperation:* Elizabeth was introduced to the activity in a small group which included an artist volunteer. She was not left to flounder on her own.

*Experimentation:* The medium used in the group was black ink and unusual tools – twigs, sponges, card, string as well as brushes – at first simply to play with the ink to make experimental marks. There was no 'right' or 'wrong' – marks could not be rubbed out, but a fresh piece of paper could always be provided for more experimentation.

*Random drawing from life:* When accustomed to playing with the tools and the ink, a selection of random natural objects were presented to offer inspiration for further working with the ink. Stones, leaves, familiar vegetables, flowers – but NOT, for instance in a vase with symmetrical sides. It was pointed out that the frustration of failing to get the image 'right' could sidetrack the whole experience. Elizabeth chose to focus on the mushrooms, and covered her paper with a variety of images relating to these.

*Selection of images:* With the help of the artist volunteer two or three images were selected, and isolated for photocopying. They could be enlarged, reduced, placed together in a group, given some significance.

*Listening:* While this was going on a volunteer was asking Elizabeth about the mushrooms, and listening intently to her responses. It was then that she made the remark which revealed her underlying feelings: *'Mushrooms, how Tom loved them. Now he's gone'*

*Presentation:* Together her images and the caption were presented as the cover for a notelet, enlarged as an A4 picture for display in her room, and included in a book of similarly gathered images. An unrelated visitor was so impressed he asked to be allowed to have a copy of this example of art enabling meaning to emerge from the circumscribed life of someone with dementia.

*Sharing:* The day came when her key worker showed the picture to her grandchildren. For the first time they were able to understand that Elizabeth had realised that her son, their father, Tom, had died – was 'gone'. Together they were able to share their grief with her for the first time. Comforting one another a strand of reality was woven into their relationship, a degree of meaningful interaction, significant to Elizabeth, her grandchildren, and illuminating as well for her carers. Her key worker's comment was *'This afternoon a lot of healing took place. It is the kind of afternoon that makes my job worthwhile'*.

*(Names have been changed to preserve confidentiality)*

*Significance of presentation, display and publicity*

In the Home where an Easter Bonnet competition was arranged it provided valuable publicity material. Combined with an Easter Tea, the parade was celebrated with families and friends and significant VIPs from the community. A photographic collage was gathered and kept on display for some time afterwards. The event was reported in a house newsletter, and served to evoke interest amongst relatives and friends unable to be directly involved.

To have a record in the form of a selected piece of work, carefully produced and presented, is significant. It can by-pass the loss of memory, and preserve the moment for both the client and others, as with Elizabeth's grandchildren. Indeed on that occasion it opened up an avenue of understanding to a complete stranger, whose assumptions about dementia may have been very negative.

*Effect on Team members and Volunteers.*

*Releasing creative energies in the BCA team*

As a result of the inclusive and cooperative nature of the work individual team members demonstrated a variety of new developments after the programmes closed. A visually impaired volunteer enrolled on a Drama

therapy course. An Indian architect is working on a paper on the architectural aspects of providing a Home for People with Dementia. A young girl with cerebral palsy, a wheelchair user, stayed with the BCA team from her introduction at the age of 13 through to graduation from University. Trained in facilitation skills with the team, she works with young children in a local school. She and the drama graduate facilitated a Millennium arts programme introducing children with learning disabilities to a local Guide company, culminating in a celebration to which the Mayoress, parents and friends were invited.

### *Community volunteers*

Involving community volunteers extended the concept of community to include not just staff and residents but also the wider community from the outside world. One business volunteer offered the Homes Management a paper on Volunteering which he had written; he was later invited to become a Trustee of the Home in which he had been involved. A college student who joined in an early project when still at school, reported that even 5 years later she recalled it as a life-changing experience.

### *Case history of a business volunteer's change of attitude*

## Mathew's story

Mathew worked as a counter clerk for the high street bank sponsoring a programme. He'd joined the bank straight from school, and was now wanting something to test his abilities, especially at a time of organisational change in the bank. His Manager invited Mathew to represent the bank on the project.

Mathew was given a short introductory workshop initiating him in the activity he was later going to use with the older people in the Home. Using black ink and unfamiliar tools, Mathew found the process quite threatening. His abstract shape looked to him like a dollar sign!

He wrote afterwards

On playing with ink

It's hard to let go  
I was just experimenting to see  
How you could use the brush  
Or even the twig  
And then I suddenly found  
I had drawn a dollar sign

Oh!

I'm still at work I thought  
I mustn't do that  
And I tried to hide it  
I didn't want everyone  
Thinking I was still at work

I wasn't sure  
If the dollar sign  
Was for myself  
Or for other people

I wanted to break out of this

Later, reflecting on the workshop where he had been the facilitator for a very confused older lady, he commented 'I enjoyed doing the workshop myself and found it revealing...' Mathew returned to work with renewed enthusiasm and several new ideas. One customer commented 'I know who did that training – he treats us like real people in the queue; no one, however confused they may seem, is made to feel a nuisance.'

His manager saw the value of the experience to Mathew in developing his awareness of people, and to the bank as a form of staff training which impacted positively on communication between staff and customers. Mathew was later promoted, and transferred to a bigger branch.

Mathew's comment at the end was *'You haven't just changed how I see my work; you've changed how I see my life'*. This was a theme echoed by other volunteer and team members. Memorably a resident confided that she had wanted to end her life, but as a result of participating in the workshops she had found something worth living for.

## ***DISCUSSION***

### ***A. Staff training***

Heron's Cooperative Inquiry method combined with non-judgmental arts activity to enable profound changes in people's lives. The absolute commitment of management and staff to this style of working is essential. It is a challenging shift in view, especially where a blame culture is being replaced by a commitment to learning. The releasing of people's creativity, as shown by Mathew's and Elizabeth's stories, was inspiring, and impressive in the variety of ways people expressed themselves. Individual attention, play, collaborative working and letting go of negative attitudes towards themselves set free a remarkable flow of creative inspiration in staff, clients, and the BCA team itself.

### ***Financial viability***

BCA training programmes employing two facilitators and a consultant are beyond the budget of most social welfare organisations. We aimed to create working partnerships between a social welfare organisation, a charitable trust and a business. However small, it was important that the host organisation committed some part of their training budget to the

project, and that a sponsoring business released a staff member (or team) to participate in the project. As this was innovative work not fully understood as being different from the employment of an artist for 'wet Wednesday' afternoon sessions it was not easy to obtain grants. In some of our pilot work the role of the charitable trust was taken on by substantial voluntary contributions from our consultant and facilitators.

### *Business partnerships*

Business partnerships were invaluable, and offered not only a useful PR benefit to organisations with lively community awareness programmes themselves, but also valuable personal development opportunities for volunteers given leave to participate.

### *Need for cover for staff in training workshops*

Cover is essential to free staff up for programmes. At times this proved difficult with shift work, agency staffing and routine holidays or staff changes. To be called away in a training session to deal with telephone calls or unexpected visitors is unacceptable. Frequently more time than was originally envisaged was put into a programme by all parties, particularly by the very committed House Managers, with some participants voluntarily taking time to attend workshops on their days off or during holidays. It was also difficult for learning groups to liaise effectively. Arrangements may need to be made to accommodate staff making their own plans to overcome these problems (e.g. exchanging shifts with colleagues).

## ***B. Arts intervention***

It was not difficult to enthuse care staff – but the availability of an art-trained facilitator was essential both at and outside the training sessions to respond to unexpected and imaginative initiatives, and develop new ideas.

### *Use of printing technologies -*

Selecting interesting type faces, arranging material, enlarging or reducing, photocopying and laminating, is in itself an absorbing and satisfying contribution which can be taught to care staff in a Home, or to a computer-happy volunteer supporting the Home.

## ***FUTURE DIRECTIONS***

### *Financial viability*

Financial support from partners ready to support a social welfare institution is essential. Developing a relationship with a local firm or business, or local branch of a national organisation is one obvious route whereby substantial financial support can be asked for, in return for favourable PR as a local community involvement, and valuable personal development training for seconded volunteers.

### *Publicity*

Where the Mayor or other local VIPs are invited to a final Exhibition of work the local press may be attracted and draw attention to a Centre

which may have felt neglected and unknown. Participation by local business interests, or their national training departments serves to raise the profile of the work, and encourages participants and raises staff morale.

### *Residential Homes*

At the end of each programme participants were invited to look ahead to the future. Suggestions included:-

*Improving and building on the work*

*Involving relatives in the activities programme*

*Improving communications and internalising 'learning culture'*

*Design / develop volunteer programmes*

Whether such aspirations are carried out depends on an organisation's willingness to re-visit their issues after a period of 6 months or a year.

BCA did not find this easy to implement, as 'life moves on' –

organisations change, staff change, new goals are pursued and there is a reluctance to look back.

Although the team have now disbanded, by recording our work, BCA hopes to make our experience and learning available by documenting our experience and providing a 'toolkit' for others to use in the same field of *'building community through arts.'*

Age Exchange .....

BCA Feb 1994 Art is not just for a Wet Wednesday article reprinted from *Disability Times*

BCA leaflet *A Way of Relating*

BCA Leaflet *A Way of Working Together*

BCA Leaflet *A Way of Working Together* based on the work of John Heron

BCA (200...)ABC of Activities Presentation Instruction booklet

Charities Evaluation Services: Weavers' Triangle

Farrer A (1962) *Love Almighty and Ills Unlimited* U.K. The Fontana Library

Gottlieb-Tanaka, D., Small, J., Yassi, A. (February 2003 vol. 2 No1) A programme of creative expression activities for senior with dementia, *Dementia* London, Sage

Heron *Cooperative Inquiry: Research into the Human Condition* Ch.4 1996 London Sage

Hosking C (Jan/Feb 2002) Looking after well-being: a tool for clinical audit in *Dementia Care* p.34

Jones S 1983

Kitwood T *Dementia Reconsidered* Open University Press 1997 et al.

MacDonald C (March/April 2002) Back to the sensory world our 'care' has taken away *Journal of Dementia Care Journal*

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<sup>i</sup> Heron, J. (1996) *Co-operative Inquiry: Research into the Human Condition* London Sage

<sup>ii</sup>

<sup>iii</sup>

<sup>iv</sup> Farrer A (1962) *Love Almighty and Ills Unlimited* U.K. The Fontana Library p.189

<sup>v</sup> Kitwood T *Dementia Reconsidered* Open University Press 1997 et al.

<sup>vi</sup> Age Exchange .....

<sup>vii</sup> MacDonald C Back to the sensory world our 'care' has taken away in *Journal of Dementia Care* Jan/Feb 2002 p.34

<sup>viii</sup> Hosking C Looking after well-being: a tool for clinical audit in *Dementia Care Journal* March/April 2002 pp18-20

<sup>ix</sup> Gottlieb-Tanaka, D., Small, J., Yassi, A. (February 2003 vol. 2 No1) A programme of creative expression activities for seniors with dementia, *Dementia* London, Sage

<sup>x</sup> Jones S 1983 *Education & Creative Activity in Homes and Hospitals*

<sup>xi</sup> BCA Feb 1994 *Art is not just for a Wet Wednesday* article reprinted from *Disability Times*

<sup>xii</sup> BCA Leaflet *A Way of Working Together* based on the work of John Heron

<sup>xiii</sup> Heron (1996) *Cooperative Inquiry: Research into the Human Condition* Ch.4 London Sage

<sup>xiv</sup> Charities Evaluation Services: Weavers' Triangle

<sup>xv</sup> BCA leaflet *A Way of Relating*

<sup>xvi</sup> BCA Leaflet *A Way of Working Together*

<sup>xvii</sup> e.g. Workshop 9 flipchart 2

<sup>xviii</sup> Presentation Instruction booklet; ABC of Activities