



Arts and Dementia: bringing professional arts practice into care settings

COLLECTIVE
ENCOUNTERS



About this report

Arts & Dementia: bringing professional arts practice into care settings was written for **care home managers** and others who might have the opportunity to commission arts work for and with people with dementia.

It has grown out of Collective Encounters' **Live and Learn** project: a three-year arts programme for and with people with dementia and their carers. As part of **Live and Learn** we carried out research into best practice in arts and dementia delivery and evaluation. We wanted to understand the dementia and related health sectors more deeply see how we could best contribute to the radical change agenda aiming to improve the lives of people with dementia and their carers. Finally, we wanted to review the evidence around the benefits of arts participation for people with dementia.

This report focusses on those benefits. It draws on research spanning the fields of health, dementia care and participatory arts; it is a selective review drawing on academic writing and grey literature including strategy and policy documents, practice and evaluation reports. It aims to **introduce the evidenced benefits of using the arts** for and with people with dementia, to **explore how the arts can be beneficial for and with people with dementia** in the context of current policies and strategies, and offer **inspiring case studies** and approaches. We hope you find it useful.

This is one of a series of publications around arts and dementia that have grown out of **Live and Learn**. Another key document is our **Carers' Pocket Guide**, which gives ideas, tips and support to carers who are interested in taking a creative approach to caring, and integrating the arts into their daily practice. The two publications together show what can be achieved when using the arts in a care setting for and with people with dementia, both when the creative work is led by professional artists and when led by carers. For more research and publications and to download these documents please visit www.collective-encounters.org.uk.

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Introducing Arts & Health

In 2004 **Arts Council England** commissioned Dr RL Staricoff and her team at the Chelsea and Westminster Hospital to conduct a review of the scientific literature published over the previous decade pertaining to arts in health care: 385 articles were reviewed. In 2007 the **Department of Health's** Art and Health Working Group reviewed over 1,000 submissions of evidence and in 2007 Arts Council England and the Department of Health published their joint **Prospectus for Arts and Health**. These documents, along with similar research and impact studies both nationally and internationally have helped to establish the validity of the arts as an effective and legitimate contributor to healthcare, delivering benefits across a wide range of health priorities. Evidenced benefits drawn from these documents include:

Among the general population: the arts have been found to effectively promote **good health** and wellbeing in communities; promote positive health messages; raise **awareness** of public health issues; help people to identify health and **wellbeing** needs.

For patients in clinical settings: the arts have been found to improve the mental, **emotional and spiritual health** of patients; improve the physical symptoms of illness; **reduce pain levels**; reduce the need for medication; improve **communication** between health care staff, patients and families; increase opportunities for **social interaction**, involvement and empowerment; **reduce hospital stays**; provide a stimulus for talking and help-seeking; increase control over patients' inner world, with **new routes** to self-expression, insight and hope; **reduce anxiety**, depression and psychotic symptoms; improve behaviours including eating and **sleeping patterns** and decreased agitation and aggression.

Among health care staff: the arts have been found to improve staff satisfaction, **recruitment and retention**; lead to greater **creativity** in nursing practice and **new approaches** to diagnosis and treatment; enhance counselling and **caring skills**; improve **communication** with patients; lead to a more **sensitive and humane** approach to care.

Arts and Health is now a well-established field of practice. Regional and national networks are flourishing, arts programmes are funded by many health care agencies, regular international conferences and extensive databases of case studies, best practice guides and evaluation reports are readily available and arts projects regularly feature as an option in social prescribing. **Arts and Dementia** is an emergent, but much less explored, part of this field.

Benefits of participatory arts with older people

In the last few years four major evidence reviews have been conducted into the benefits of participatory arts activity for older people (Age and Opportunity, 2006; Castora-Binkley et. al., 2010; Baring Foundation, 2011; Mental Health Foundation, 2011). Between them these draw on over 60 international peer-reviewed research studies and resoundingly highlight the benefits of participation in arts activity for older people.

Evidenced benefits on a personal level: relate both to **improved physical and mental wellbeing** for older participants. Research shows maintenance and improvement in physical health such as **cardiovascular function**, joint mobility, **breath control**; and that absorption in creative processes can lead to an increase in **levels of general daily activity**. With regards mental wellbeing, engagement in participatory arts activity has been shown to **increase confidence**, self esteem, dignity, **empowerment**, pleasure and interest; to **decrease depression** and anxiety; to provide for continued learning, the creation of meaning, **personal fulfilment** and growth, the opportunity to embrace **new and positive** aspects of personal identity and life roles; to enhance feelings of accomplishment and **raise expectations** of what is possible.

On a community and societal level: evidenced benefits include opportunities for **meaningful social contact**, friendship and **support**, improved communication and relationships. It has been found that **altruism** and 'giving something back' to the community can have a **positive impact** on community beneficiaries as well as on the arts participants and can enhance **social cohesion** and community integration; and that participatory arts projects can enable older people to **address age discrimination** by raising awareness and expectations, breaking down stereotypes and reducing **stigmatising attitudes** and behaviour.

Benefits of the arts for and with people with dementia

Several of the reports highlighted above address the more specific benefits of participation in the arts for people with dementia. These, alongside a systematic review conducted across art forms of benefits for people with dementia against control groups (Beard, 2011) found the following very detailed impacts.

Improved alertness, **happiness**, positive emotional state and independence; **improved quality of life** and social interaction, collaboration, verbal and non-verbal communication; improved face-name recognition, **long-term memory** and ability to **recall life events**; increased physical movement, motor skills and ability to complete visual tasks; **increased participation** in spontaneous activity and routine tasks and increased **expressions of pleasure**. Decreased fear, anxiety and agitation; **reduced 'wandering'**, physical agitation and 'disruptive behaviour'. Greater fellowship and **enhanced bond** between patients and caregivers. In addition, research suggests that benefits extended to care givers, in particular with regard **new learning about patients** which could be used in other settings and interactions.

Given that two thirds of people in care homes have some form of dementia, it is worth noting some of the benefits that arts work can bring to these settings and to the wider communities of which they are a part. **Baring Foundation** along with the **National Care Forum** and others (2011) recently conducted a survey of arts activity among care homes in England and found that **arts work can inspire both residents and staff**, often at little cost. Engagement in the arts can **actively involve residents and families**, creating a sense of agency, choice, engagement and celebration; **motivate staff and increase job satisfaction**, performance and retention, moving beyond basic care needs to appreciate residents' accomplishments and emotional lives; **provide links** to the wider community, strengthen local relationships and provide potential routes to engagement for volunteers; **enrich everyday life** and special occasions in the home and create a more sociable, attractive and happy environment that **improves morale** and well-being across the home.

"Over the weeks the residents produced some great pictures, they appeared happy attending the sessions and family members were delighted with the interaction. Staff at the home could identify residents by the art work, their past life was reflected and some of their dreams. Staff thought residents seemed more engaged and brighter in mood following sessions."

Anne McCann, Manager of Redholme Memory Care

"The Arts can be a really powerful tool in unlocking creativity for people with dementia and in improving how we provide care and support for them."

Pam Stopforth, Head of Development (Dementia), PSS

"The workshops have had a very positive impact on our service users. They really enjoyed the sessions and service users who are normally reticent in speaking out in a group, suddenly found their voices and felt comfortable and confident enough to share their experiences."

Joan Lightbody, Manager of Norris Green and Leighton Dene Day Centre

"More entertainment like this is needed"

"I liked that everyone could join in"

"Very enjoyable. Made us happy."

"I enjoyed talking about places I've not been for a while."

"Enjoyed it. Loved being here."

Feedback from participants at Leighton Dene and Redholme Care homes, Liverpool.

The Dementia Context: a reminder of the background

In 2009 the **National Dementia Strategy** found that the lives of people touched by dementia could be very bleak. Three key areas for change were identified:

Raising awareness and understanding: Within the health care community there was felt to be inadequate understanding about dementia and how to care for and support people experiencing it; within the wider community there was found to be stigma, fear and lack of understanding.

Early diagnosis and support: The report found that two-thirds of people with dementia in the community never receive a diagnosis and only one-third of GPs felt that they had adequate training to diagnose dementia.

Living well with dementia: The quality of life for people with dementia both in and out of care homes was found to be seriously impaired; often people were inappropriately medicated. The need for a social environment with rich interactions and relationships was not fully understood.

In 2012 the **Prime Minister's Challenge on Dementia** built on the Strategy and set out a programme of work to continue making improvements in health care; creating dementia friendly communities; and to enhance research.

The **Dementia Action Alliance** has worked with people with dementia and their carers, alongside organisations seeking a fundamental shift in the way people with dementia are treated. They have produced a **National Dementia Declaration** signed by many public, private and statutory agencies setting out what they aim to have achieved by 2014. This includes seven outcomes that people with dementia and their carers would like to see in their lives:

- I have **personal choice** and control or influence over decisions about me
- I know that services are **designed around me** and my needs
- I have **support** that helps me **live my life**
- I have the **knowledge and know-how** to get what I need
- I live in an enabling and **supportive environment** where I feel valued and understood
- I have a **sense of belonging** and of **being a valued part** of family, community and civic life

This empowerment agenda, along with awareness-raising, challenging stigma, and improving quality of life both for people with dementia and those who care for them are all outcomes that can be significantly assisted by the arts and creative interventions.

Connecting to policy & strategy targets

The National Dementia Strategy (2009) objective: **Living well with dementia**

The arts can offer an alternative to pharmacological solutions: The NDS found that 50% of all care home residents have depressive disorders that would warrant intervention and that behavioural disturbance in these settings is very common, but there is very little in the way of non-pharmacological management of these problems and antipsychotic medication is used “too freely”.

The arts can provide focussed, purposeful activity: The NDS found that a feature of excellent care homes was the provision of purposeful activities that related to individual preference rather than generalised entertainment. It also found that more than half of the people currently living with dementia in care homes were currently poorly occupied.


The arts can facilitate enhanced and alternative models of communication: The NDS found that story based work provided an effective vehicle for care home staff to communicate with residents and build stronger relationships based on unique life experiences.

The arts can help to improve relations between carers and those they care for, leading to increased dignity and respect, which is one of the nine statements of expectation set out in the implementation plan for The NDS (2012).

The arts can help people with dementia to enjoy life; to feel part of a community and be inspired to give something back; two more of the statements of expectation set out in the NDS implementation plan.

The National Institute for Health and Clinical Excellence’s **Guidelines on Dementia (2006)** highlight

The need to **apply the principles of person-centred care**, with particular attention to “respect, dignity, learning about each person’s life story, individualising activities, being sensitive to individuals’ religious beliefs and spiritual and cultural identity”. Research into person-centred care demonstrates 5 psycho-social needs: for comfort, attachment, inclusion, identity and occupation. **Participatory arts are grounded in a person-centred approach and beneficial impacts of arts activity connect with all these psycho-social needs.**



NICE also highlights the importance of **good communication skills**; and says opportunities should be created for people to participate in **structured group activity, cognitive stimulation programmes, therapeutic activity, and tailored interventions such as reminiscence**. The arts have been evidenced to support, assist and enhance each of these provisions.

Care Quality

Both the **Dementia Care and Support Compact (2012)**, signed by leading care homes and home care providers, and the Care Quality Commission's **Essential Standards of Quality and Safety (2010)** reiterate these features. In particular they highlight the need for **person-centred care** and to **respect and involve people who use services**.

In 2011 the **Social Care Institute for Excellence** published a definition for **excellence in social care** which had been commissioned by the **Care Quality Commission**. Some of the key elements for excellent care included:

- * Having **choice and control** over day-to-day and significant life decisions
- * Maintaining **good relationships** with family, partners, friends, staff and others
- * **Spending time purposefully and enjoyably** doing things that bring **pleasure and meaning**

As has been illustrated, **participatory arts can support and enable** each of these elements.

Delivering Dignity

The commission on **Dignity in Care (2012)** goes further, arguing the need for a **major cultural shift in the way the care system thinks about dignity**. "The care system must **bar the way to prejudice**. Instead of absorbing poor attitudes to ageing and older people from wider society, care staff and their organisations should be beacons for the rest of the community, demonstrating how we are all the richer when older people are respected, valued and celebrated." It highlights the fact that **activities in care homes need to be varied and tailored to individual residents**. And the importance of **building relationships with the wider community**. The benefits and impacts of participation in arts activities as outlined above can significantly contribute to this **radical change agenda**, and help to positively change the culture within institutions.

Raising Awareness and Challenging Prejudice

The National Dementia Strategy (2009) aims to **improve public and professional awareness and understanding of dementia** and to **develop an informed and effective workforce** for people with dementia.

The Prime Minister's Challenge on Dementia (2012) aims to **create dementia friendly communities that understand how to help.**

The National Dementia Declaration for England (2010) aims to foster **enabling and supportive environments where people with dementia can feel valued and understood**, where people with dementia have a **sense of belonging and of being valued in family, community and civil life.**

To create such positive communities and environments it is understood that awareness needs to be raised and prejudice challenged. Evidence shows that **arts work by, with and about people with dementia can significantly contribute** to this process.

In short, whether the arts are used as a dynamic training tool for health care professionals, as a participatory activity for care-home residents, as a joint venture between carers and those they care for, as a major project led by professional artists, or embedded into the daily running of the care home, the arts can play a valuable role in helping to achieve dementia targets and can significantly enhance quality of life for all involved.

Case Studies

There are so many examples of good practice and exciting arts initiatives for and with people with dementia that to choose just a few case studies is extremely difficult. Here we simply offer a taste of what's possible, from intimate one-on-one sessions to large-group creative activity. From work that requires a professional artist to lead on it to inspiring projects that can be led by carers themselves.

For further ideas, inspirations and case studies you could follow these links:

www.ageofcreativity.co.uk

This is an excellent portal into the world of creativity with and for older people, including an extensive range of work with people with dementia. It has a UK focus and offers inspirations, case studies, evaluations and resources including tool kits.

www.greatermanchesterartshealth.org.uk/library

This library contains extensive research, reports and documents on arts and health and has a case studies section which featuring work with people with dementia.

www.baringfoundation.org.uk/CreativeCareHomes.pdf

This report looks at how the arts can contribute to life in care homes and provides illustrative case studies.

www.baringfoundation.org.uk/AgeingArtfully.pdf

This report looks at older people and participatory arts in the UK and gives an extensive list of arts organisations currently working with older people, many of which have a dementia focus.

For further information on the case studies included here follow these links:

<http://collective-encounters.org.uk/arts-health-well-being/work-in-care-settings>

<http://gn.northumbria.ac.uk/gn/artists/ckolaiti/>

<http://www.ageuk.org.uk/health-wellbeing/conditions-illnesses/dementia-and-music/>

<http://www.artsforhealthcornwall.org.uk>

<http://www.age-exchange.org.uk/>

<http://www.staa.org.uk/>

<http://www.librarytheatre.com/project/storybox>

Case Studies: one-on-one work

One on one work between either an artist and a person with dementia or between a carer with some arts experience and the person they care for, can be extremely valuable. It really strengthens relationships, reaches people that are unable to engage in group activity, provides a wonderful quality of engagement and generates great pleasure. There are many examples of great one-on-one arts initiatives, and Collective Encounters has published a free Toolkit offering creative ideas for carers to use one-on-one in their daily care routine. It can be downloaded at www.collective-encounters.org.uk. Here are two examples of artist-led one-on-one projects.

Live & Learn Poetry

Professional poet Karen Hayes has worked extensively in care home settings across the UK. Karen spends time getting to know residents in the social spaces, chatting, laughing, singing, talking about her own and the residents' work and lives. She then works one-on-one with residents with dementia to produce a poem with each person.

Karen asks the resident to tell her something of their life, and writes down what they say word-for-word. She then takes the writing away and crafts a poem; using any instances of repetition, or particular speech patterns to provide the rhythm for the poem. Karen then returns to the care home, reads each individual person their own poem and presents them with a presentation copy.

Sometimes this leads to a public performance for other residents in the care home of all the poems produced, and sometimes it results in poetry publications which brings great pride to residents, families and the care home.

Karen has recently worked with Collective Encounters to support volunteers and carers to deliver this model; and the company's Third Age Acting Company has performed the poems in care homes across Liverpool; as well as recording podcasts which can be heard on the company's website.

Portraits for Posterity

Christina Kolaiti is a North East-based photographer with a PhD exploring photography in a health care context. One of Christina's simplest, yet very effective projects, involves one-on-one work with care home residents with dementia, and results in beautiful photographic portraits being left as a lasting legacy in the home.

Christina meets with each resident individually chatting informally and getting to know them a little. Christina talks about her work and shows portrait photographs, discussing what the individual resident likes and dislikes about each one. She discusses with residents how they would like to be represented: what kind of clothes would they like to wear? What location would they like their picture to be taken in? What kind of stance would they take? What do they want the picture to communicate? How do they want to be represented? Christina works with care home staff to plan a shooting schedule, gathers props and costumes and returns to the home to take the photographs.

Christina develops and frames each picture, mounting an exhibition in the corridors or social spaces of the care home. She hosts a formal opening at which those in the portraits are special guests, and leaves the pictures in place as a permanent exhibition.

It gets to the stage

When I was down in Hereford,
When I was stationed down in Hereford,
A town with a capital H,
I saw three girls come walking along,
And I said "I am lost", but I wasn't lost.
I talked to those girls, "Do you live here?"
I asked the one who I thought was the prettiest,
It gets to the stage where you think
That maybe I shouldn't have said that.

When I got back to Liverpool,
When I got de-mobbed,
And found my way back to Liverpool
I thought she is not coming up.
She was eighteen and I was twenty-one
And her uncle did not want to lose her,
But she came and we had a very nice time.
It gets to the stage when you say the best bits
Are when you love each other.

And when we were married
We loved each other for a start
And when we went to the Broadway pub
And I had a little wine
I thought that was the best bit, living together
With that girl from Hereford
Who came up to Liverpool.
It gets to the stage when you say
Oh! That was a nice life.

And when she passed away two years ago,
And when she was buried in the cemetery
And when you didn't realise, or when you did,
When you met that girl in Hereford,
It gets to the stage when you know
That ordinary life is finished.
It gets to the stage when you say
I wish that May was alive.

By Chris Brach

Leighton Dene Care Home, working with Karen Hayes and
Collective Encounters volunteers.

Case Studies: the art of song

Sing something simple

Singing is one of the most popular art forms used with people with dementia and has been proved to stimulate parts of the brain affected by the illness and have a positive affect. It is one of the most direct ways of engaging someone who has difficulty communicating, and has been used to reach people who seem to be 'locked inside themselves'. It can unlock memories and bridge differences. Whether a impromptu sing-along led by care home staff, or care workers simply singing to residents while doing daily chores, song can lift the spirits and create a positive and optimistic atmosphere.

There are many song-based projects led by arts organisations. One is **The Alzheimer's Society's Singing for the Brain** project which they run in over 30 care homes nationwide. This involves weekly sessions with a couple of artists leading and taking the time to get to know the residents. They use quizzes such as guess that tune, and invite residents to choose the songs they'd like to sing. They find that over the weeks as people become increasingly confident they sing more and more. **Lost Chord** runs similar work: they have several artist/musicians moving around the room engaging everyone - they have a flautist who skips around the room like a pied piper getting people up and dancing! They play a wide cross-section of music to ensure something that reaches everyone. **Arts for Health Cornwall** work with a lead and support artist, beginning sessions with vocal and gentle physical warm ups then distributing percussion instruments to everyone in the room. Participants can play the instruments, sing along or hum, and a warm, friendly atmosphere is created. Some arts organisations work with residents towards public concert performances which offer a positive social event for the care home and the opportunity for family and friends to see their loved ones happily engaged in a positive community activity.

Case Studies: Reminiscence

Reminiscence has become an extremely popular form over the past 30 years and is familiar to most people working in the field of dementia through memory boxes, 'my story' books and other simple but effective devices. In these cases the focus is often on helping the person with dementia recall elements of their own life stories, to share memories with loved ones and to help professional carers get to know them a little better. In arts projects, though, reminiscence is often a group activity involving aspects of personal and group or cultural memories. From a one off session to a long term project, reminiscence is used in many forms and can function at a variety of scales.

Creative Arts Residencies

Age Exchange is the longest established arts reminiscence organisations in the country and like many others delivers a wide range of bespoke projects. Their Creative Arts Residencies are tailored to the needs of individual care homes, but have many common features.

A team of artists work over several months in the care home with both individuals and in groups exploring a variety of themes. The sessions commence with a performance by the artists to get the ball rolling, but subsequent sessions are prompted by the interests of participants, who share their own memories and reminisce together about social, historical or cultural moments.

At a pace led by the group participants are slowly guided by the artists to build a performance. The project culminates in a public event which is structured to allow for different levels of involvement by participants depending on their interest, and usually involves drama, singing and visual arts exhibition. Friends and family are invited to the event, which is filmed and copies are given to all participants.

Museums & Artefacts

Sandwell Third Age Arts ran a project in partnership with Wolverhampton Museums service recently which combined practical arts activities with reminiscence and object handling.

Over seven themed half-day sessions participants with dementia were introduced to artefacts from the museums which they were able to handle. These prompted memories, discussions and creative activity including drawing, song, photography and games. In one session residents went on a visit to a local museum and looked at many of the exhibits in situ.

Many museums offer a service to people with dementia and their carers, either in the museum or through boxes or suitcases of objects that can be borrowed or loaned. It's worth getting in touch with your local museum to see what they can offer to your care home. Sometimes they will send staff out or offer training to care staff to help them use the artefacts most effectively.



Case Studies: Telling new stories

Storybox

Storybox is a Library Theatre project in Manchester. Each project lasts for 10 sessions in care home or day care settings, is led by two artist-facilitators, and is enhanced by training for staff in the setting. Storybox sessions are designed around a different theme each week, using a variety of music, props and costumes. The artists create sensory and fun experiences where new stories are created. A Hollywood premiere, a seaside pier, a western saloon. The emphasis is on the present and having fun in the moment. While there is the space to share and explore memories, the aim is the celebration of creativity right now. The artists believe that for those people with dementia who find memory-work stressful, moving beyond memory is fun and freeing. There is no right or wrong answer. No fixed reality. The participants feel valued and their ideas valid. Handling the props, listening to music, dressing up in costumes leads to conversations and ideas, social interaction and a great sense of playfulness. The social space in the care home is transformed into the appropriate setting for the session, with participants deciding all the details. The artist-facilitators move in and out of character roles as required, encouraging those who are keen to play along and take on characters, while supporting others to sit and chat or simply observe, joining in as and when they feel comfortable.

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Collective Encounters

was established in 2005 as a professional arts organisation specialising in Theatre for Social Change. We use theatre to engage those on the margins of society, telling untold stories and tackling the local, national and international concerns of our time. There are three main strands to our work:

Workshops and Community Productions: we work with young people, homeless people and older people locally using theatre to build confidence, develop skills and explore the issues and ideas which matter to them. We find performance platforms where participants can have their voices heard by those in decision and policy-making positions.

Professional Theatre: we mount exciting productions that explore pressing social and political concerns, transforming urban spaces into magical performance places, and reaching those who don't usually engage with the arts.

Research Lab: work which contributes to the wider national and international field of Theatre for Social Change and spearheads best practice in the UK. We also provide training and capacity building to enable those working in communities to develop excellent arts initiatives.

For the past four years we have been making work for, with and about people with dementia and their carers.

For Collective Encounters:

Artistic Director: Sarah Thornton
Executive Director: Annette Burghes
Creative Producer: Amanda Redvers Rowe
Administrator: Abi Horsfield
Youth Theatre Director: Matthew Elliott & Adrian Dakers
Arts & Dementia Consultant: Karen Hayes

Collective Encounters Third Age Theatre members, including:

Alma Brown, Linda Carver, Anne Gorton, June Hudson, Pat Kewn, Margaret Marriette, Hilary McCormack, Joan Pinnington, Edna Sexton, Maureen Thomas.

Collective Encounters Board of Directors:

Professor Bill Chambers, Pro-Vice Chancellor, Liverpool Hope University (emeritus)
Mike Eccles, Development Plans Manager, Liverpool City Council
Maria Hornsby, Senior Youth Worker and Manager, Rice Lane City Farm
Jim Johnson, Artistic Director, Peshkar Productions
John Sweeney, Service Manager, Liverpool Generic Floating Services
Eric Weitz, Head of Drama, Trinity College Dublin


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