



# The Royal Conservatory's Living Through the Arts Program ARTS-REHAB PROJECT

# ARTS-REHAB UPDATE March 2016



Inspired by nature and the beauty of summer, this activity of mono printing on canvas was led by Visual Arts Artist-Facilitator Leslie Ashton.

With the generous support of the Ontario Trillium Foundation, The Royal Conservatory's Living Through the Arts Program continues the ARTS-REHAB Project – a multi-year initiative that examines how meaningful engagement in a creative arts program can assist rehab patients to re-enter their communities sooner and more positively than under standard treatment regimes. The ARTS-REHAB Project enables specially-trained Artist-Facilitators to work with slow-stream rehabilitation patients, exploring themes such as new personal stories & identities, sense of purpose, and positive images of the future.

We are in the third year of this four-year project. By the end, the ARTS-REHAB Project hopes to: raise awareness of how creative arts can serve an experience of social and personal wellness for patients; expand our understanding of whole person care beyond simple clinical needs; and communicate an arts-based model of care that can be adopted by hospitals across the province and throughout Canada.

The ARTS-REHAB Project is currently partnering with the following hospitals across Ontario:

- Bridgepoint Active Healthcare (Toronto)
- Hotel Dieu Grace Healthcare (Windsor)
- St. Joseph's Care Group (SJCG) (Thunder Bay)
- St. Joseph's Continuing Care Centre of Sudbury (Sudbury)
- St. Peter's Hospital (Hamilton)
- ❖ UHN Toronto Rehabilitation Institute (Bickle Centre) (Toronto)
- West Park Healthcare Centre (Toronto)

# The ARTS-REHAB Project at the Power of the Arts National Forum (Ottawa)

Dr. Lisa Meschino (ARTS-REHAB Research Manager) and Nicole Arends (ARTS-REHAB Project Manager) had the opportunity to present some of the early research results that have emerged from the ARTS-REHAB Research Study at the Power of the Arts National Forum held in November 2015. Coorganized by the Michaëlle Jean Foundation and Carleton University's Faculty of Arts and Social Sciences, the forum convenes researchers, business leaders, legal experts, policymakers, urban planners, architects, youth, health practitioners, artists and representatives of other key sectors of Canadian society.



The ARTS-REHAB presentation was part of the workshop series focusing on mental and physical health – "The arts are increasingly being used as a tool to improve health. Over the past decade, health care workers and artists have intensified their investigation of the relationship between well-being and the arts. Join us to learn how a diverse group of stakeholders is demonstrating the power of the arts, as an intervention tool, within clinical practice and beyond." [Power of the Arts National Forum – Sustaining Social Change Program]

Please see below for some of the research results that was presented at the Forum.





# **AHNC Snapshot!**

While Lisa and Nicole were at the Power of the Arts Forum, they were approached by the Arts Health Network Canada to be interviewed for one of their monthly "Snapshot" columns. To access the interview (which includes a video from the butterfly story below) visit <a href="http://artshealthnetwork.ca/">http://artshealthnetwork.ca/</a>. The direct link to the interview is: <a href="http://artshealthnetwork.ca/content/snapshot-lisa-meschino-and-nicole-arends">http://artshealthnetwork.ca/content/snapshot-lisa-meschino-and-nicole-arends</a>



Patients participating in a drama/movement activity led by Artist-Facilitator Erica May.

# **ARTS-REHAB Research Study**

The ARTS-REHAB Project Research Study seeks to answer the question:

How can meaningful engagement in a creative arts program serve the personal and social wellness of patients in rehabilitation?

The ARTS-REHAB Project aims to describe and interpret the expectations and experiences of patients' evolving sense of self in recovery as informed by their participation in The Royal Conservatory's Living Through the Arts program. This creative arts program is designed to empower individuals and communities through artistic self-expression and creativity. Many different arts disciplines are offered: visual arts, music, drama, creative movement and creative writing. For those patients receiving this arts intervention in addition to their rehabilitation activities, we expect to see the following differences in patients' experience of their quality of life and care during their hospital stay: a greater sense of hope, optimism and future purpose; increased engagement in their rehabilitation; and a decreased length of hospital stay.

The following summary provides a slice of the qualitative data analysis of the participants' expectations and experiences in recovery over a 7 month period (from March to September 2015). The following trends in the analysis are based on the responses of 36 Intervention participants and 22 Control participants. It is important to note that data collection and analysis is on-going until April 2017. At the time of the final project report, all qualitative and quantitative data will be analyzed.

# Pre-Questionnaire Data Trends (to date)

#### THE RECOVERY PROCESS

For patients' recovery process, these themes emerged in both Intervention and Control groups:

#### 1) Hoping for the best

To varying degrees, both Intervention and Control participants were positive about the prospect of recovery. Patients expressed excitement and that they are in the right place, saying:

"[I'm] extremely excited to see where it will bring me."

"I'm going to do a lot better in a few days."

#### 2) Managing uncertainty and impatience

Alongside the hopefulness is a sense of having to manage their expectations. Patients from both groups qualified their speculations on a positive outcome by expressing their uncertainty. Also, patients took a more philosophical view that relinquished their own agency in the process:

"[I'm] Excited and nervous. It takes time to heal - have to keep reminding myself of that." "Trust in God that things will work out."

Where there was a shift away from a positive outcome, patients also tended to focus on their impatience and, potentially, their frustration:

"Too darn long. I'm impatient - I'm wanting things to happen now."

"It's slowly, slowly coming - difficult to understand - like a leash around your mind".

Other themes articulate and confront what might contribute to their uncertainty and impatience:

#### 3) Struggling with motivation

"Right now I'm bored."

"I'm not able to see that process. My optimism is not there."

#### 4) Fearing dependence and loss

"It's hard - you've lost a part of your body. You can't do what you used to do...you lose your freedom."

#### PROGRAM EXPECTATIONS

Both groups expressed a desire for the activities (rehab exercises for the Control group and arts activities for the Intervention) to help them "get back to normal" and "gain confidence". So, what does "getting back to normal" mean? What do they need to feel more confident and "normal"?

Control Group (attending their Rehab activities only)	Intervention Group (attending Creative Arts sessions)
For the Control group, getting back to normal seems to be associated with survival, i.e., immediate needs for basic daily function:  • Restoring physical ability / setting physical goals  • Going home  "I want to walk out of here - no cane, no walker."  "[I] Hope it will restore my physical body to some of its original abilities."	By contrast, the Intervention group seems to associate getting back to normal with:  • Being open to possibilities (for fun, for learning about the arts)  • Helping oneself (learn about oneself; new ways of expressing self)  • Helping others/contributing something  "I may get some insights to help me understand me more and this process I'm going through."
So far, their data shows motivation to be the biggest challenge to fulfilling their expectations.	So far, their data shows scepticism and self- consciousness about one's abilities as the biggest challenge to fulfilling their expectations.

# Post-Questionnaire Data Trends (to date)

#### **EXPERIENCES OF ABILITIES AND RECOVERY**

Prior to their discharge, participants in both groups revisited the questions they were given at the start of their stay in hospital. We were curious about how the Control and Intervention participants described their experiences of their recovery and about any differences in their reflections. What is emerging from the post-questionnaires about their experience in the programs and of their own abilities and recovery processes is quite nuanced and very intriguing.

# Control Group (attending their Rehab activities only)

Intervention Group (attending Creative Arts sessions)

For the Control group, the following themes emerged:

- Healing the physical (very positive experience)
- Understanding their limitations
- Being helped (during and after rehab);
   becoming more dependent

The positive outcome and experience of the rehabilitation of their immediate health conditions seem to be accompanied by a pronounced loss of agency. More specifically, patients express an acute awareness of their limitations and dependence following their rehabilitation.

"Here I don't do things for myself – stopping myself from doing things because I'm here. Then again, the nurses are helping me. As it winds down, I've got friends to help. I shall buy a wheelchair. I shall live a very normal life with assisted living."

Interestingly, within this context of decreased agency, Control participants also identified the following needs as significant to the experience:

- Celebrating small accomplishments
- Talking with others
- Fighting boredom

"They were very encouraging, just one more step, one more level...It was good. I even kicked the ball to another patient. We celebrated each fall as a learning on how to get back up."

While the seeds of non-physical needs begin to emerge in the Control group in the form of connection to others, celebration, and sense of accomplishment, these themes appear at the forefront of the Intervention group experience. For the Intervention Group, the following themes emerged:

- Having a greater sense of purpose
- Creating in community (having a sense of belonging, a connection to others)
- Discovering something about themselves / surprising themselves
- Having fun
- Empowering active selves Having greater sense of their own independence (agency)

"It helped me quite a bit because I had something to do, somewhere to go, and be with others and not feel so helpless and useless."

"It helped keep my mind occupied. When I stay busy, I can't think about my pain and stay overall happier."
"I like it. I don't really speak a lot but I was able to speak a lot. Felt more relaxed."

Over and above their physical survival, Intervention participants seem to find greater opportunity for expressions of **independence**, **agency**, **purpose** and **community** through the arts. These Intervention group themes are also echoed by the Artist-Facilitators in the Artist Logs:

"Participants have so much story to tell and seem ripe for connection. They were also ready and willing to laugh."

"There was lots of laughter and smiles during the session. I asked one of the men what his lion on his cover symbolized and he said courage – "I am courageous"."

"One participant was smiling, joking and quietly conversing with (another) participant whom she'd just met. By the end of the session, she appeared less reliant on her caregiver."

#### **Further Thoughts on Research**

Overall, the themes emerging from the pre- and post-questionnaire data on participant expectations of and experiences of recovery, rehabilitation and arts suggest that there are patient needs that must be valued and addressed over and above the immediate physical ones. In other words, patient care is care for the whole person. With continued data collection, we expect greater articulation of these needs, particularly as we analyze data for specific questions about patients' sense of self, future purpose and engagement in program activities. The themes identified so far provide us with clues into what a whole-person approach to care might look like from the patient's perspective and the role the arts can play in that approach. Specifically, a whole-person model of care would address patients' needs for a sense of belonging and community, for a sense of purpose, for fun and celebration, and for independence and agency. Inclusion of staff focus-group data will also provide us with the hospital perspective on that model of care.



A patient waltzing with his wife during a "wedding" drama activity led by Artist-Facilitator Erica May.



A story-box activity using found objects, pictures and words led by Artist-Facilitator Suzanne McCrae.

# **Artist-Facilitator Training**

In February 2016, the ARTS-REHAB Project conducted training for over 30 Artist-Facilitators from across Ontario. The focus of this third annual training session was on sharing the successes, challenges and best practices of those Artist-Facilitators who have already delivered several creative arts sessions for the ARTS-REHAB Project. All of our seasoned Artist-Facilitators have extensive experience in working with vulnerable populations and specialize in adapting to the needs of the diverse participants present in the room. Some of the themes that we explored in this training included:

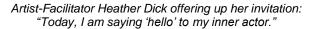
#### **Successes**

- Creating in community and nurturing relationships with others (comradery, relationship building, patients connecting and encouraging one another)
- Working in more than one arts discipline (interdisciplinary work)
- Using props (eliciting stories)
- Providing extensions (what patients can take back to their rooms)
- Rewarding work for the Artist-Facilitators

### **Challenges**

- Working with physical challenges (fatigue and pain, visual impairment, hearing impairment, mobility challenges and breathing challenges)
- Working with resistance (adapting to patients' needs)
- Getting information from the patients (asking questions to dig for clues and building on what patients offer - unlocking the creative process)
- Working with emotion







Conducting an orchestra of sounds with rehab patients led by Artist-Facilitator Abby Zotz.

#### A Butterfly Takes Flight

In Sudbury, Visual Arts Artist-Facilitator Liz Lott chose a butterfly theme for a session, and one particular participant had a very strong connection with the activity which involved painting, drawing and writing on a butterfly template and to complete the sentence: "Like a butterfly, I am \_\_\_\_\_\_". This participant completed the sentence by saying "Like a butterfly, I am dainty, so that I can fly". She then coloured her butterfly and wrote on it the words 'dainty', 'flying free, 'freedom', 'love' and 'friendship'. Once she had completed her artwork (which included a cut-away butterfly that "sat" on top of the piece of paper that she had also painted) there was a wonderfully playful moment where she blew on the stencil of the butterfly to make its wings flutter (to view the video, visit the AHNC link above).

By the end of the session, the participant said to the Artist-Facilitator "You have changed my whole thinking. I would have never gone to art had it not been for you". She said that she wanted to dedicate a whole room to her art when she went home. It was a beautiful moment of connection, both between the participant and the Artist-Facilitator as well as for the participant with the creative process – how it freed up her imagination and perceptions of herself and what's possible for her in spite of the current condition of her health.







For more information about the ARTS-REHAB Project – <a href="www.rcmusic.ca/arts-rehab">www.rcmusic.ca/arts-rehab</a> Nicole Arends, Project Manager – 416-408-2824 x469 <a href="mailto:nicole.arends@rcmusic.ca">nicole.arends@rcmusic.ca</a>













