

# Open Arts

## Research Report

INCLUSIVE GROUP EXHIBITION EXPLORING IDENTITY

AN OPEN ARTS PROJECT

# MY SELF

THU 2 MAY TO SAT 8 JUNE 2019 WED-SAT 11AM-4PM

SUN PIER HOUSE GALLERY Medway Street, Chatham ME4 4HF  
Supported by British Sign Language and Braille interpretation  
PRIVATE VIEW: THURSDAY 2 MAY 6-8.30PM

FREE FAMILY SATURDAY 11 MAY & SATURDAY 25 MAY, 10.30AM-12.30PM  
Workshop delivered in spoken English and British Sign Language

Author: Kasia Senyszyn  
PHD STUDENT, UNIVERSITY OF KENT

## Abstract

This report was commissioned by Sun Pier House and the MESS ROOM to examine whether an arts engagement project directed at blind or Deaf people or people with hearing or sight loss could have an impact on wellbeing. The research included quantifying elements of wellbeing via the Canterbury Wellbeing Scale during the first and last stages of the project, as well as contextualising this data using detail garnered through semi-structured interviews. The findings indicate that some markers of wellbeing were dramatically improved during the project's lifetime, namely 'confidence' and 'optimism', although it was challenging to determine that 'wellness' and 'happiness' scores were directly influenced by the project. Data gathered during semi-structured interviews suggested that the socialisation and peer support received through participating in the project were the major influencing factors, although independence, encouraging facilitation and accessibility of space were also important aspects.

## Project Team Members

**Madeline Bell**

Project Support – University of Kent

**Heather Burgess**

Project Manager – Sun Pier House

**Wendy Daws**

Facilitator – MESS ROOM

**Lucy Medhurst**

Project Support – Ideas Test

**Christopher Sacre**

Facilitator – MESS ROOM

**Kasia Senyszyn**

Researcher – University of Kent

**Caren Stafford**

Fundraising/Development – Freelance

**Bethan Tomlinson**

Project Support – Ideas Test

Funding provided by Arts Council England, Ideas Test, Kent Association for the Blind, and the University of Kent. With support from Medway Council's Arts Development Team, Public Health Medway Voluntary Action.

## With thanks

The commissioners of this report would like to thank Arts Council England for funding this project, as well as the entire project team who made it happen. Thanks in particular to Lucy and Bethan from Ideas Test and to Heather and Caren at Sun Pier House. Thank you also to the Kent Association for the Blind volunteers, as well as carers, friends and family who supported participants, and of course the amazingly talented facilitators, Wendy Daws and Christopher Sacre. The last and biggest of thanks must be to all of the participants for their invaluable time and feedback, and for making it such an enjoyable process.

## Contents

Abstract.....	1
Project Team Members.....	1
With thanks.....	1
List of tables and figures .....	3
Executive summary snapshot .....	4
1. Introduction .....	4
1.1 Background and project overview .....	4
1.2 Rationale and literature review .....	5
1.3 Hypothesis.....	6
2. Method .....	6
2.1 Participants .....	6
2.2 Research design .....	10
2.3 Procedure.....	12
3. Results.....	12
4. Conclusion.....	14
5. Research limitations.....	14
References .....	15
Appendices.....	16
Appendix 1: Arts Council England bid .....	16
Appendix 2: Demographic data collection questionnaire .....	16
Appendix 3: Canterbury Wellbeing Scale.....	17
Appendix 4: Groups and participant data.....	18
Appendix 5: Wellbeing Scale results in full .....	19
Appendix 6: Related activity .....	21
Appendix 7: Schools outreach feedback.....	22

## List of tables and figures

Table 1: Groups and participant numbers summary (facilitated sessions) .....	7
Table 2: Groups and participant numbers summary .....	8
Table 3: Gender identity .....	8
Table 4: Age range .....	9
Table 5: Ethnic identity .....	9
Table 6: Hearing/Visual status .....	9
Table 7: Participation in arts/cultural activity affected by hearing/visual status.....	9
Table 8: Number of types of arts/cultural activities participated in during last year.....	9
Table 9: Participant postcodes.....	9
Table 10: Increase in % wellbeing score per category.....	13
Table 11: Groups and participant numbers in full .....	18
Table 12: Canterbury Wellbeing Scale results in full .....	19
Table 13: Events and activities related to the My Self project .....	21
Figure 1: Map of participant postcodes.....	10
Figure 2: Chart of overall wellbeing improvement according to Canterbury Wellbeing Scale scores .	13
Figure 3: Demographic data collection questionnaire.....	16
Figure 4: Canterbury Wellbeing Scale.....	17

**345% increase in Overall Wellbeing Score**

**32,158 audience reach**

**Increased wellbeing scores in all areas;  
happiness, wellness, optimism, confidence and  
interest**

## 1. Introduction

### 1.1 Background and project overview

In September 2018, Sun Pier House (SPH) CIC was awarded Arts Council National Lottery Project Grant Funding to deliver 'Open Arts', a research and development project facilitated by MESS ROOM artists Wendy Daws BEM and Christopher Sacre. The project was also supported by Ideas Test, and a consortium of Medway-based organisations working to facilitate participation in the arts.

The project's theme was 'My Self' and it was specifically aimed at BVP (blind and visually impaired), D/deaf and hard of hearing people<sup>1</sup>, young people and their families. It involved a series of facilitation workshops where people with hearing or sight loss were encouraged to explore their identity through artistic expression. The MESS ROOM, based at Sun Pier House, hosted the majority of the sessions, with the exception of the school outreach and pop-up sessions.<sup>2</sup> The project funding enabled the MESS ROOM to refurbish existing facilities and upgrade the interior of the space on the ground floor to accommodate the access needs of Open Arts participants.

Participants created and presented work collaboratively at three two-hour weekly facilitated sessions in the MESS ROOM at SPH (two for blind and visually impaired artists and one for D/deaf artists), a Schools Outreach Programme, and various curated exhibitions, interactive events and workshops at SPH. The MESS ROOM resident artists, Wendy Daws and Christopher Sacre, delivered skills-based training workshops, peer support and encouragement through the sessions themselves, and the curation of the exhibitions. Most of the materials used by the participants were sourced and supplied by the MESS ROOM.

In December 2018, the University of Kent was approached to provide a researcher who would capture demographic and experiential data from participants, collate feedback, and present a report on the findings and outcomes of the project. A PhD student



*MESS ROOM artist Christopher Sacre*

---

<sup>1</sup> D/deaf refers to people who are born profoundly deaf (Deaf) and perhaps use sign language as their main form of communication, and those who have acquired hearing loss (deaf) (Sign Health, 2019)

<sup>2</sup> The participation and process of the project is delineated in much more detail later in this report

from the School of Arts was selected due to their thesis focus on the experience of people with hearing and sight loss participating in theatre.

This report details the process and outcomes of the investigation, focusing on the facilitated sessions hosted in the MESS ROOM. It was decided to exclude the school outreach participants from the research report due to the additional control measures that would be required for working with under-age participants, and the ensuing demographic variation.

## 1.2 Rationale and literature review

Open Arts sought to identify and remove or reduce barriers participants might face in engaging with a programme of facilitated participatory arts sessions, and to explore individual sense of self through the programme's theme – 'My Self'. The research assumption centred on the idea that arts engagement, particularly for D/deaf and BVP (blind and visually impaired) people, would improve individual wellbeing.<sup>3</sup>

'Wellbeing' is a challenging term to define, as explored by an article in the International Journal of Wellbeing. In it, Dodge et al summarise previous descriptions and argue that wellbeing is an equilibrium between challenge and resources: "In essence, stable wellbeing is when individuals have the psychological, social and physical resources they need to meet a particular psychological, social and/or physical challenge" (Dodge, Daly, Huyton, & Sanders, 2012).

According to a 2009 Voluntary Arts England report created by Paul Devlin, 9 million people in the UK participate in arts or crafts activities annually, reporting that "regular participation in creative activities has benefited people physically, mentally, emotionally and socially" (Devlin, 2009). Arts engagement in the areas is relatively low with 57.4% in Medway having engaged in or attended an arts event compared with the England figure of 60.3% (Ideas Test, 2019, p. 14).

A Canadian study showed that social isolation in people with sensory loss is particularly an issue for the elderly, although all age groups report incidences of loneliness and a lack of social support.

"Social support can be classified as emotional or informational (e.g. empathy and advice), tangible (e.g. money), affectionate (e.g. love), and interactional (e.g. a sense of belonging). It might reduce stress, improve psychological well-being, promote healthy behaviour, facilitate access to health care, enable self-management of chronic diseases, and have positive physiologic effects" (P, M, W, N, & MK, 2018)

According to the same study, lack of social interaction has been linked with higher risks of alcoholism, lung cancer relating to smoking, and obesity (P, M, W, N, & MK, 2018).

There is a high proportion of disabled people in the Medway area, higher than the national average, and second highest in Kent. A high proportion of those people are affected by mental health problems, particularly in young people and older people where there is an overwhelming issue of isolation and loneliness (Medway Council, 2017). The experience of the facilitators, supported by research conducted by partners Ideas Test, led to the project's educated assumption that accessibility, as well as other barriers, is a central concern for participants wishing to engage in artistic activities.

"We know that older people, younger people, and families who have disabled family members are disproportionately affected by barriers to engagement. Social, economic and educational disadvantage are high in the (Medway) area, making people subject to multiple barriers in their lives. There is often a lack of confidence to

---

<sup>3</sup> The difficulty in differentiating between physical and emotional wellbeing will be discussed later in this report

take part in events or travel to arts activities with family members whose access needs may not be met" (MESS room; Sun Pier House, 2018)<sup>4</sup> ( Ideas Test, 2016)

This assumption has a particular impact on an individual's sense of self, as discovered by a later Ideas Test report, which found that "through taking part in the projects, committing time and performing together, individuals gained confidence and self-belief - in some cases, proving to themselves that they could overcome significant difficulties" (Ideas Test, 2019, p. 38). Therefore, the project would attempt to improve wellbeing measures by reducing access barriers and focusing on a participant's sense of self.

### 1.3 Hypothesis

The Open Arts project was designed to reduce these aforementioned barriers by creating an accessible space where facilitators experienced with working with people with hearing or sight loss could mentor and support participants. The support of the other artists at each session also provided a peer network to reduce social isolation and the stigma of any additional needs or time participants needed to complete their work. The hypothesis proposed was that the wellbeing of participants in the project would be enhanced. In order to support this claim, the aim of this research was "to investigate the value of socially engaged practice, concerned with **improving the wellbeing and engagement** of those people at risk of social isolation" (MESS room; Sun Pier House, 2018).<sup>5</sup> The research therefore focused on whether or not engagement had been accessible and fit for purpose, and if wellbeing had been enhanced.

## 2. Method

### 2.1 Participants

There are two series of participants; adult groups, and children's groups. The former are sometimes referred to collectively throughout the report as 'facilitated sessions' as the participants were self-referring and engaged in individual artwork sessions facilitated by the artists. The latter, children's groups, are sometimes collectively referred to throughout the report as 'school outreach sessions' as these were organised in association with the faculty of each institution and supported by teaching staff and BSL interpreters, as well as the artists. The researcher for this report was not involved with the school outreach sessions due to time and research methodology restraints<sup>6</sup>, and so analysis will mostly focus on the adult facilitated sessions. However, data collected by the artists and support staff for the school outreach sessions will be recorded in this report, to fit the requirements of the funding body and project coordinators.

#### 2.1.1 Groups

The participants for the adult sessions were drawn from three groups, meeting once a week for up to 10 weeks; the Medway Sight Loss Arts group, the Peer Arts group (mostly artists with sight loss) and the Medway Deaf Arts Group. This amounted to 16 participants in total across the three groups.

---

<sup>4</sup> See appendix for link to ACE bid

<sup>5</sup> ACE bid (see appendix), researcher's emphasis

<sup>6</sup> The research design for data collection and analysis was not fit for purpose for working with children. The researcher would have had to create an entirely new methodology, which unfortunately she had neither the time nor the expertise to do. The two different data sets would also be incompatible in terms of cross-purpose analysis, and therefore would need to be analysed separately. This report lists participation in the children groups for the purpose of recording engagement without providing any substantive analysis



Below is a table of attendants at these groups over the lifetime of the project. A session-by-session analysis can be found in appendix 5.

*Table 1: Groups and participant numbers summary (facilitated sessions)*

<b>Group</b>	<b>Overall number of sessions</b>	<b>Overall number of participants</b>
Sight Loss Group	10	92*
Peer Arts Group	7	26
Medway Deaf Arts Group	4	11

\*Does not include Kent Association for the Blind volunteers. Average 3/4 volunteers per week to support facilitation and personal needs of participants

Speaking about the group, Wendy said -

“I started the KAB Medway Art Group (sight loss art group) in 2006 after I ran 4 taster sessions for blind and partially sighted (BPS) residents of the Medway Towns. I approached the Kent Association for the Blind (KAB) charity, asking if they ran any art classes for BPS people, the answer being no. I wanted to further my own research. I managed to get funding for 4 sessions alongside delivering sessions for a local Mental Health charity. My dissertation ‘The Value of Touch and Museum approaches to visually impaired visitors’ 2004, is at the centre of my art practice. That led to my accidental setting up of the original sight loss art group. That’s now been running since December 2006. I established the KAB Gravesend Art Group up in 2015, and have just agreed to form the KAB Canterbury Art Group. After the 4 taster sessions I realised I had to continue with them somehow, after one of the group said they rarely leave the house, only going out for hospital and doctors’ visits. That’s how I became a volunteer for the KAB.”



*Participants discuss some of the art work displayed in the project exhibition*



*Artists Wendy and Christopher in the MESS ROOM with some of their participants and volunteers*

For the purpose of recording engagement only, the below is a table of participants for the children’s groups, which were made up of 20 students, 6 faculty and 1 BSL interpreter per session, as well as the two artists. At All Faith’s Academy, 10 of the students were D/deaf or hearing impaired and 10 were



hearing ‘buddies’. At Danecourt Primary, 10 of the students were SEN status (special educational needs) and 10 were ‘normate’<sup>7</sup> students from Barnsole primary.

Table 2: Groups and participant numbers summary

Group	Overall number of sessions	Overall number of participants
All Faith’s Academy	6	117
Danecourt/Barnsole	6	120

As the two sight loss groups were already established and had regular attendees at the MESS ROOM studio, participation in the project was relatively high. The Medway Deaf Arts Club, however, was started during the project’s lifespan and, starting from scratch, struggled to source participants. Facilitator Christopher Sacre observed that the key challenge was in finding effective ways to reach out to Deaf people in the Medway area, as there is no comprehensive method of contact. Using social networks relied on information being passed on by well-meaning contacts (which, it transpired, it wasn’t), and local Deaf service providers who were contacted were hesitant to forward information to users as it was beyond their remit.

As a result, the expected participation and income generation rates were adjusted, and, in an effort to extend reach, an e-flyer and BSL promotional video were created and shared via social media platforms. This resulted in more publicity and additional members. Pop-up sessions attached to existing Deaf social events such as ‘Sip and Sign’ for pre-school children and the Deaf Craft Club were also held, although these were unfortunately later in the timeline and therefore did not result in any additional project participants.<sup>8</sup>

Due to the disparity in engagement between the sight loss groups and the hearing loss group, there were significantly more participants with sight loss than with hearing loss, as can be seen below in the demographic summaries. One person from the sight loss group was excluded from the data collection due to a lack of cognitive understanding, which meant that they were unable to independently relay their feedback. One person from the Deaf Arts Group had a learning disability and was supported by carers, although his responses were still captured as he had a more developed level of understanding.

### 2.1.2 Demographics

Demographic data for the 16 participants was collected via a short survey which was presented by the researcher in person with the participant. Sighted participants completed these independently, whilst non-sighted participants were assisted by the researcher or by one of the Kent Association for the Blind volunteers attending the sessions. The survey was based on a design by Ideas Test and will be discussed in more detail later in the method section. Summaries of the demographic data collection categories are presented below. Findings will be explored in more detail in the results section of this report.

Table 3: Gender identity

Male/Trans man	Female/Trans woman	Non-binary	Prefer not to say
5	11	0	0

<sup>7</sup> ‘Normate’ is a term coined by Rosemarie Garland-Thomson in an attempt to refer to people who have no physical, sensory or cognitive disabilities, impairments or diversities

<sup>8</sup> As the ‘Sip and Sign’ participants were young children, this would have proven incompatible with the research design anyway

Table 4: Age range

16-24	25-34	35-44	45-54	55-64	65-74	75+	Prefer not to say
1	1	3	2	2	3	4	0

Table 5: Ethnic identity

White/White British	Mixed/Multiple ethnic background	Black/Black British	Asian/Asian British	Other	Prefer not to say
15	0	1	0	0	0

Table 6: Hearing/Visual status

D/deaf	Hard of hearing	Blind	Visually impaired	Other	None of the above	Prefer not to say
3	5	1	9	2	0	0

Table 7: Participation in arts/cultural activity affected by hearing/visual status

Yes – a lot	Yes – somewhat	No	Prefer not to say
9	8	1	0

Table 8: Number of types of arts/cultural activities participated in during last year

Less than 3	3 or more	Prefer not to say
6	10	0

### 2.1.3 Transportation

As explored in the rationale section of this report, and supported by statements made by participants (see appendices), people with sight loss frequently cite transportation as a major barrier to their ability and propensity to participate in social and cultural activities. Being unable, or finding it difficult to, independently attend sessions means that participants require services local to them. Disabled parking facilities or being close to public transportation routes are a necessity, as is the regularity of sessions, so that participants may schedule their arrangements with carers in advance, if necessary.

The below table notes the postcodes of participants and the following figure denotes their location in relation to the Sun Pier House premises (indicated by the white circle). This data indicates that all participants lived within a 15-mile radius of the premises, the furthest being a 25-minute journey by road. A high proportion (81%) of participants lived within 6 miles.

This data supports the hypothesis that the location of cultural activities is key to the engagement propensity of people with sight loss, although a control group to determine whether or not this is also the case for sighted participants would provide stronger evidence.

Table 9: Participant postcodes

Participant ID	Postcode	Area	Distance from SPH
0081	ME4 5XG	Chatham	1.7 miles

0036	DA13 0QT	Meopham	11 miles
0022	ME7 5NF	Gillingham	1.7 miles
0018	ME3 0BT	Isle of Grain	14 miles
0004	ME2 2LR	Rochester	2.5 miles
0103	ME2 3TY	Strood	3 miles
0044	ME8 9SS	Gillingham	5.3 miles
0141	ME8 6XE	Gillingham	3.6 miles
0052	ME8 0QF	Gillingham	5.6 miles
0011	ME7 3BX	Gillingham	2.4 miles
0034	ME4 3EB	Chatham	2.9 miles
0067	ME1 2DF	Rochester	0.9 miles
0014	ME7 1SX	Gillingham	3.7 miles
0017	ME16 8AU	Maidstone	9.1 miles
0073	ME8 7AD	Gillingham	3.7 miles
0058	ME1 2EB	Rochester	1.2 miles

*\*Highlighted boxes indicated sighted participants*

Figure 1: Map of participant postcodes



## 2.2 Research design

Whilst the focus of this project was on the creation of art, a humanities field, the research objectives were to examine social engagement and personal wellbeing and so the ethnographic methodology derived primarily from the fields of anthropology and sociology, within the remit of the social sciences.

Much of the research was qualitative; intended to capture personal accounts of people with hearing or sight loss, although quantitative methods were used to gather demographic data and to contextualise the rationale.

As noted by the All-Party Parliamentary Group on Arts, Health and Wellbeing, “Individuals within a group respond differently to the same experience, which is a challenge to evaluation” (All-Party Parliamentary Group on Arts, Health and Wellbeing, 2017). Both individual and group methods were therefore selected to mitigate any disparity. One-to-one sessions were conducted between the researcher and the individual participants, at which demographic data, wellbeing measures and personal testimonies were collected. Group focus groups were held to observe the dynamics and to collate overall feedback on the sessions.

The framework used to collect demographic data was based on a design by project collaborators Ideas Test and included general information such as gender identity and age range and specific data on sensory loss and participation in arts activities.

The Canterbury Wellbeing Scale (2017)<sup>9</sup> was used to extrapolate the participants’ understanding of their own wellbeing at the time of collection. This self-reporting framework was developed as a means of assessing the wellbeing of dementia patients and their carers, and asks respondents to evaluate themselves on a 0-100 scale from happy to sad, well to unwell, interested to bored, confident to unconfident and optimistic to pessimistic.<sup>10</sup> The questions asked in conjunction were as follows:

1. On a scale of 0-100, how happy do you feel within yourself at this moment?
2. On a scale of 0-100, how well do you feel within yourself at this moment?
3. On a scale of 0-100, how interested are you in this project at this moment?
4. On a scale of 0-100, how confident are you in your ability to complete this project at this moment?
5. On a scale of 0-100, how optimistic are you about whether this project will be of benefit to you at this moment?

For ease of recording, participants were asked to provide answers in increments of 5 e.g. 10 out 100, 85 out of 100.

Individual testimonies were collected in conjunction with the Canterbury Wellbeing Scale via a semi-structured interview, to inform and contextualise this data, and to assess whether other factors such as physical or mental health, economic stability or personal stresses might have impacted the answers given, and also to dig deeper into the motivations and aspirations of participants in being part of the project.

As per Bernard’s definition of semi-structured interviews, the discussion prompts were mostly open questions designed to garner individual experience related to the principle research aims, and to observe any mitigating circumstances that might affect the participant’s wellbeing. They therefore focused on the participant’s experience of the project so far, their experience of other such activities, and their general wellbeing. The prompts focused on:

1. General wellbeing – focusing on any notable results during the wellbeing scale data collection
2. Experience of the project and group so far
3. Experience of other such activities
4. Barriers faced by the participant in engaging with such activities
5. Thoughts around project’s focus of ‘My Self’

Participant postcodes were also collected in order to understand distribution and travel distances.

---

<sup>9</sup> Permission for use kindly granted by Canterbury Christ Church University

<sup>10</sup> See appendix 3

## 2.3 Procedure

The researcher attended three data collection sessions at the beginning and three at the end of the facilitated workshops timeline – one for each participant group. Three types of data were collected during individual 20 - 30 minute interviews with participants; demographic (using the Ideas Test-based form), wellbeing (using the Canterbury Wellbeing Scale) and experiential (semi-structured interview).

All of these methods were self-reporting, although participants with sight loss were given assistance to complete the data for access reasons. The researcher returned towards the end of the project, and conducted another semi-structured interview and re-issued the Canterbury Wellbeing Scale, to assess whether there had been any changes in participant perceptions of their wellbeing and experiences.<sup>11</sup>

Randomised ID numbers were created for participants so that the researcher could ensure the correct forms were used for each participant, and to maintain anonymity.

A focus group for each of the three adult groups (Sight Loss, Peer Arts and Deaf Arts) was conducted by the researcher towards the end of the project, which excluded the artists and project coordinators. A British Sign Language interpreter was employed to translate the questions and answers for the Deaf group, and an audio recording was made of the focus group for blind and visually impaired participants.

In addition, feedback and observations were collected from attendees of the My Self exhibitions and related events/activities, and from support workers/volunteers, teachers and artists. This information was gathered by the facilitators and project coordinators and not by the researcher, but will be recorded and discussed in the 'results' section to follow.

## 3. Results

The Canterbury Wellbeing Scale results showed that 11 out of the 16 participants noted a positive impact on their overall wellbeing following participation in the project; a total of 69%. 2 participants reported a decline in their general wellbeing since the beginning of the project and 3 participants' results were unchanged or inconclusive<sup>12</sup>. Although both participants who noted a decline in their wellbeing indicated during their semi-structured interview that this was a result of personal matters and not related to the project, their reported results cannot be discounted.<sup>13</sup>

The overall score indicated an increase in wellbeing measures of 345%. The response to the question "On a scale of 0-100, how confident are you in your ability to complete this project at this moment?" saw the largest increase on the scale of 125%, whilst the response to the question "On a scale of 0-100, how well do you feel within yourself at this moment?" saw the lowest increase at 30%.

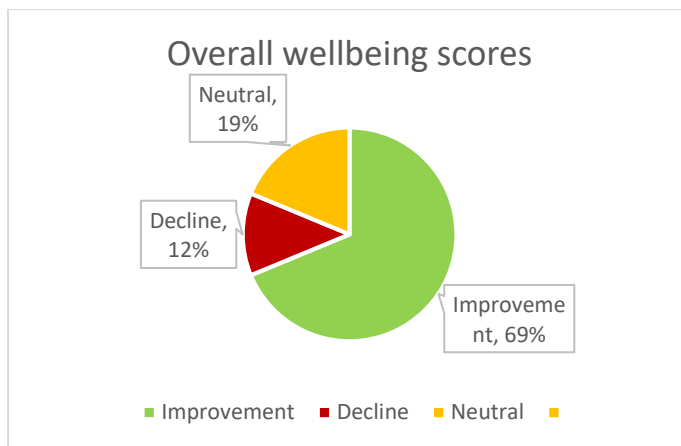
---

<sup>11</sup> See the appendix for copies of the Canterbury Wellbeing Scale and demographic data collection form

<sup>12</sup> Inconclusive results: one participant was not available during the second data collection and so there is only data on their pre-project scores. Another participant did not want to answer the questions on wellness or happiness at either data capture

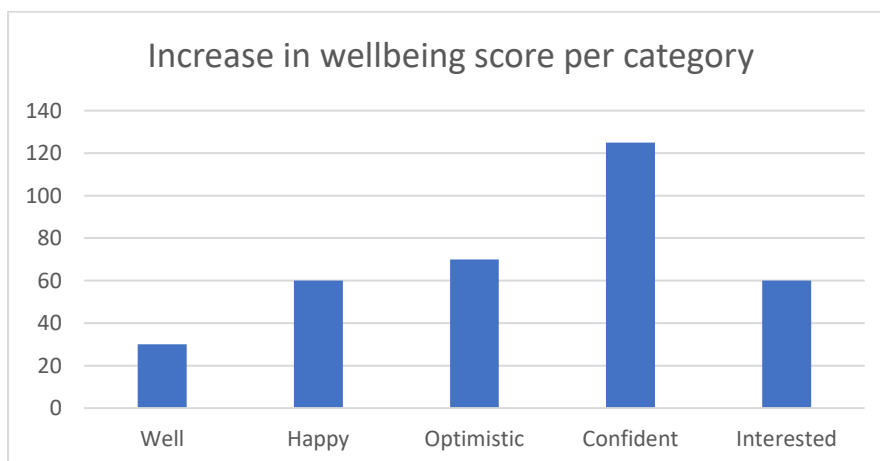
<sup>13</sup> The difficulty of separating mental from physical wellbeing and in connecting with certainty the wellbeing results and participation in the project will be discussed in detail in a forthcoming section

Figure 2: Chart of overall wellbeing improvement according to Canterbury Wellbeing Scale scores



The prevalence of older participants may have had a significant impact on the wellness marker in terms of health and, therefore, on the happiness rating. Testimonies collected during the semi-structured interviews support this hypothesis as a number of participants noted poor health being a factor in their wellbeing scale responses. Other mitigating circumstances included financial concerns, personal issues surrounding family and friends and, in one incidence, the death of a pet the day before the data collection.

Table 10: Increase in % wellbeing score per category



The sight loss groups, which had been established prior to the project, had a much higher participation rate than that of the Deaf group. Many of the members noted in the semi-structured interviews that their relationship with facilitator Wendy Daws was a major factor in both their participation in the project and in their positive experience of the groups themselves.

The interviews, combined with the wellbeing scale data, strongly indicated how a participant's feelings towards their visual status was markedly different between those who had been born with a profound visual impairment or blindness, and those who acquired it later in life. For the latter, there was often a profound sense of loss and a vulnerability which affected the participant's sense of self and wellbeing; some displayed anger or resentment and others sadness or regret. This in turn appeared to affect the participant's level of independence and social inclusion, also a factor in their overall wellbeing. This factor was not mentioned as part of the Deaf group interactions, possibly because all participants had been born with their current hearing status.



The testimonies collected via semi-structured interview intimated that the socialisation element of the groups had the largest impact on wellbeing as participants became a peer support network for one another; some participants noted that these groups were one of only a few social engagements they had. The fact that the groups focused on art seemed to be of a slightly lesser importance, with only a handful of participants stating an avid interest in art during the semi-structured interviews. However, the majority of participants remarked on the fact that there are few cultural activities in the area open to them, and noted that the accessible space and being supported and encouraged to create their own work had given them a stronger sense of independence and identity.

## 4. Conclusion

Overall, there is strong evidence to suggest that engagement in the Open Arts project had a positive effect on participants, particularly with regard to socialisation, sense of identity and independence. The relationship between the facilitators and the participants, the overall group dynamic and the accessibility of the space all have a strong impact on the confidence and independence of participants, particularly those who have lost their sight over time.

The theme of the project, 'My Self', had a much lower impact on participants than the concept of the groups themselves. Reflecting on their own identity for the project seemed to be treated as a by-product of the group's overall purpose and benefit and, though considered interesting, was secondary to the aforementioned social aspects. That is not to say it was entirely unappreciated, as some participants mentioned being glad of the opportunity to be introspective – merely that it was not nearly as important as the peer support of fellow participants and the accessibility of both the space and the facilitation.

## 5. Research limitations

As the Deaf Arts group was newly established, the engagement rate was much lower than that of the sight loss groups; this study would perhaps benefit another round of research once the former has a more reliable following.

There was a large audience for the My Self exhibitions held in the local area, although most of the spaces were not controlled or monitored by the project team, which means that little to no feedback could be gathered from members of the public attending ad hoc.

Whilst the Canterbury Wellbeing Scale was useful in identifying levels of confidence and interest in the project, unfortunately it was somewhat limiting in terms of wellness and happiness, as these are more longitudinal aspects that are much affected by mitigating circumstances, and it was very difficult to determine whether scores directly related to participation in the project or not, and to differentiate between emotional and physical wellbeing. The semi-structured interviews were much richer in terms of detail, although it would be almost impossible to quantify the results in terms of improvement.

There is an issue in that it is clear from comments during the semi-structured interviews, feedback at events and other anecdotal evidence, that the MESS ROOM activities in general and the Open Arts project in particular, are having a great deal more of an impact on individual participants than we can quantify, and so this report will inevitably lack the evidence to support what we know in terms of outcome.

## References

- All-Party Parliamentary Group on Arts, Health and Wellbeing . (2017). *Creative Health: The Arts for Health and Wellbeing, 2nd edition*. Retrieved from [https://www.culturehealthandwellbeing.org.uk/appg-inquiry/Publications/Creative\\_Health\\_Inquiry\\_Report\\_2017\\_-\\_Second\\_Edition.pdf](https://www.culturehealthandwellbeing.org.uk/appg-inquiry/Publications/Creative_Health_Inquiry_Report_2017_-_Second_Edition.pdf)
- Devlin, P. (2009). *Restoring the Balance: the effect of arts participation on wellbeing and health* . Newcastle Upon Tyne: Voluntary Arts England. Retrieved from [https://www.artsforhealth.org/resources/VAE\\_Restoring\\_the\\_Balance.pdf](https://www.artsforhealth.org/resources/VAE_Restoring_the_Balance.pdf)
- Dodge, R., Daly, A. P., Huyton, J., & Sanders, L. D. (2012). The challenge of defining wellbeing. *International Journal of Wellbeing*, 2(3), 223-235.
- Garland Thomson, R. (1997). *Extraordinary bodies: figuring physical disability in American culture and literature*. New York: Columbia University Press.
- Ideas Test. (2016). *Final Report December 2016*.
- Ideas Test. (2019). *Interim Main Report 27 June 2019*.
- Medway Council. (2017). *Public Health Outcomes Framework*. Retrieved from <https://democracy.medway.gov.uk/mgconvert2pdf.aspx?id=38294>
- MESS ROOM; Sun Pier House. (2018). *Arts Council England bid*. Retrieved from [https://sunpierhouse.co.uk/wp-content/uploads/2019/09/SPH-MESS-ROOM-Open-Arts-Project-Grant-bid-to-ACE\\_06-06-18-.pdf](https://sunpierhouse.co.uk/wp-content/uploads/2019/09/SPH-MESS-ROOM-Open-Arts-Project-Grant-bid-to-ACE_06-06-18-.pdf)
- P, M., M, P., W, W., N, P., & MK, P.-F. (2018). Associations between sensory loss and social networks, participation, support, and loneliness. *Canadian Family Physician*.
- Sign Health. (2019). *About Deafness*. Retrieved from Sign Health: <https://www.signhealth.org.uk/about-deafness/deaf-or-deaf/>

# Appendices

## Appendix 1: Arts Council England bid

The Arts Council England (ACE) bid can be found here: [https://sunpierhouse.co.uk/wp-content/uploads/2019/09/SPH-MESS-ROOM-Open-Arts-Project-Grant-bid-to-ACE\\_06-06-18-.pdf](https://sunpierhouse.co.uk/wp-content/uploads/2019/09/SPH-MESS-ROOM-Open-Arts-Project-Grant-bid-to-ACE_06-06-18-.pdf)

## Appendix 2: Demographic data collection questionnaire

Figure 3: Demographic data collection questionnaire

### Mess Room—Open Arts Project

The Mess Room will only use your data anonymously for research purposes and will not share your personal information with external companies for marketing purposes. For more information about how we use your data email [kes49@kent.ac.uk](mailto:kes49@kent.ac.uk).

ID.....

**Gender identity:**  Male/Trans man  
 Female/Trans woman  
 Non-binary  
 Prefer not to say

**Age:**  16-24  55-64  
 25-34  65-74  
 35-44  Over 75  
 45-54  Prefer not to say

**Ethnicity:**  White British  
 Mixed/Multiple ethnic background  
 Black/Black British  
 Asian/Asian British  
 Other  
 Prefer not to say

### What is your hearing/visual status or disability?

Deaf  
 Hard of hearing  
 Blind  
 Visually impaired  
 Other disability  
 None of the above  
 Prefer not to say

### Does your hearing/visual status or disability have an impact on your ability to participate in arts/cultural activities?


Yes – activities limited a lot  
 Yes – activities limited somewhat  
 No  
 Prefer not to say

### How many arts activities do you participate in per year?

Less than 3  
 3 or more

## Appendix 3: Canterbury Wellbeing Scale

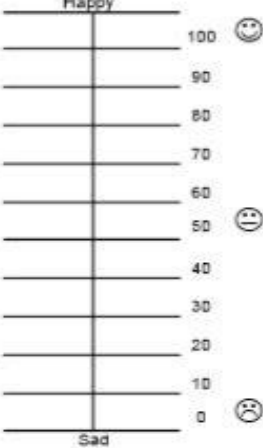
Figure 4: Canterbury Wellbeing Scale

**Canterbury Wellbeing Scales** (© 2015 Canterbury Christ Church University) 

ID \_\_\_\_\_ Pre / Post \_\_\_\_\_ Session \_\_\_\_\_

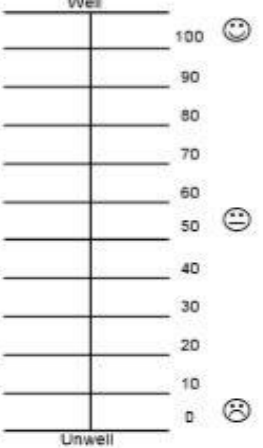
Please make a mark on these scales to show how you are feeling at the present moment.

**Happy**



Sad

**Well**



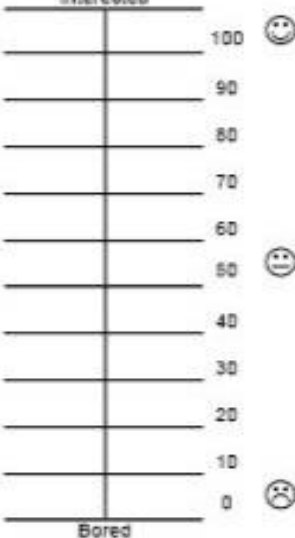
Unwell

ID \_\_\_\_\_ Pre / Post \_\_\_\_\_ Session \_\_\_\_\_

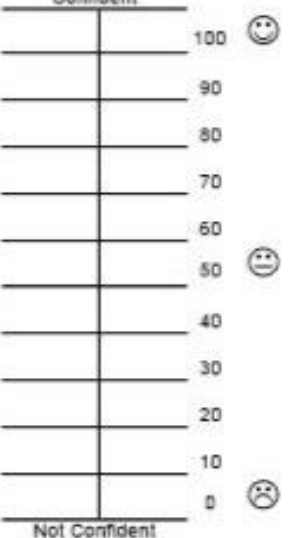
Please make a mark on these scales to show how you are feeling at the present moment.

**Interested**



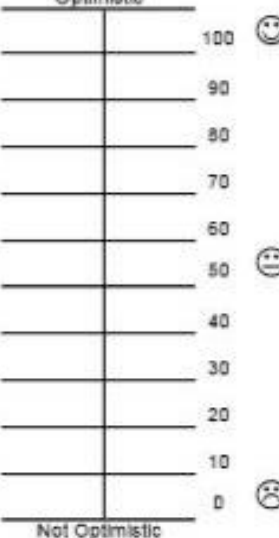
Bored

**Confident**



Not Confident

**Optimistic**



Not Optimistic

\*For ease of recording, participants were asked to provide answers in increments of 5 eg. 10 out of 100, 85 out of 100.

Questions asked alongside Canterbury Wellbeing Scale:

1. On a scale of 0-100, how happy do you feel within yourself at this moment?
2. On a scale of 0-100, how well do you feel within yourself at this moment?
3. On a scale of 0-100, how interested are you in this project at this moment?
4. On a scale of 0-100, how confident are you in your ability to complete this project at this moment?
5. On a scale of 0-100, how optimistic are you about whether this project will be of benefit to you at this moment?

## Appendix 4: Groups and participant data

Table 11: Groups and participant numbers in full

Date	Group	Participants
30/01/19	Sight Loss Group	8
01/02/19	Peer Arts Group	3
06/02/19	Sight Loss Group	10
08/02/19	Peer Arts Group	4
13/02/19	Sight Loss Group	Cancelled due to facilitator illness. 10 April added
19/02/19	Medway Deaf Arts Group	2
20/02/19	Sight Loss Group	6
22/02/19	Peer Arts Group	4
27/02/19	Sight Loss Group	12
05/03/19	Medway Deaf Arts Group	1
06/03/19	Sight Loss Group	9
08/03/19	Peer Arts Group	3
13/03/19	Sight Loss Group	10
19/03/19	Medway Deaf Arts Group	4
20/03/19	Sight Loss Group	9
22/03/19	Peer Arts Group	4
27/03/19	Sight Loss Group	8
29/03/19	Peer Arts Group	4
02/04/19	Medway Deaf Arts Group	4
03/04/19	Sight Loss Group	10
05/04/19	Peer Arts Group	4
10/04/19 added due to 13/02/19 cancellation	Sight Loss Group	10

## Appendix 5: Wellbeing Scale results in full

Table 12: Canterbury Wellbeing Scale results in full

ID	Interested	Confident	Optimistic	Happy	Well	OVERALL EXPERIENCE TOTAL
11	60	90	80	40	90	U/K
	U/K	U/K	U/K	U/K	U/K	
Difference	U/K	U/K	U/K	U/K	U/K	
18	90	90	90	50	60	+40
	90	90	90	90	60	
Difference	0	0	0	+40	0	
44	90	90	100	60*	80	+10
	100	100	100	60	70*	
Difference	+10	+10	0	0	-10	
103	80	100	80	90	70	+10
	90	90	90	90	70	
Difference	+10	-10	+10	0	0	
4	100	100	100	90	70	+10
	100	100	100	90	80	
Difference	0	0	0	0	+10	
58	80	100	100	90	70*	+10
	80	100	100	90	80*	
Difference	0	0	0	0	+10	
14	100	100	100	60	60	-10
	90	100	80	70	70	
Difference	-10	0	-20	+10	+10	
22	100	80*	100	100	100	0
	100	80*	100	100	100	
Difference	0	0	0	0	0	
36	80	70*	80	80	80	+95
	100	95	100	100	90	
Difference	+20	+25	+20	+20	+10	
73	100	100	100	PNS	PNS	0
	100	100	100	PNS	PNS	
Difference	0	0	0	U/K	U/K	
141	90	70	80	70	80	+70
	100	100	100	60	100	
Difference	+10	+30	+20	-10	+20	
52	100	100	100	50	90	-20
	100	100	100	60	60	
Difference	0	0	0	+10	-30	



81	100	80*	90	90	60	
	100	80*	90	90	80	
Difference	0	0	0	0	+20	+20
17	100	70	100	70	70	
	100	90	100	70	70	
Difference	0	+20	0	0	0	+20
67	80	70	80	100	90	
	100	90	100	100	80	
Difference	+20	+20	+20	0	-10	+50
34	100	60	80	100	100	
	100	90	100	90	100	
Difference	0	+30	+20	-10	0	+40
<b>TOTAL</b>	+60	+125	+70	+60	+30	<b>+345</b>

## Appendix 6: Related activity

Table 13: Events and activities related to the My Self project

	<b>Exhibition and Events related to project</b>	<b>Activity Location</b>	<b>Audience Numbers</b>
April	Medway & Kent Arts, Culture, Health & Wellbeing Symposium	Chatham Dockyard	111
2nd May - 8th June	My Self Exhibition (audience) 2nd May - 8th June	SPh Gallery	240
2nd May	Exhibition PV numbers	SPh Gallery	110
8th May	Exhibition KAB tea morning	SPh Gallery	35
20th May, 9:30am - 1pm	My Self Sharing Event	SPh Gallery	22
May - June	Events in Gallery at SPh during the exhibition	SPh Gallery	200
15th May,	Roch. Art Society tour by Christopher of exhibition	SPh Gallery	40
27th June - 30th August	Rochester Cathedral exhibition of My Self	Rochester Cathedral	18,500
6th August	Medway Wives Fellowship - Wendy & Barbara talk about My Self	MESS ROOM	22
Wed 10th July	PV at Rochester Cathedral of exhibition	Rochester Cathedral	80
6th-14th July 2019	MESS ROOM footfall during Medway Open Studios	MESS ROOM	30
1st - 30th September	Showcase Exhibition with Ideas Test, Sittingbourne	No34 Sittingbourne	77
1st - 30th September	Exhibition in Sittingbourne of My Self	Phoenix House	2400
1st - 30th September	Exhibition in Sittingbourne of My Self	Sittingbourne Library	10,291
<b>AUDIENCE TOTAL</b>			<b>32,158</b>

## Appendix 7: Schools outreach feedback

Comments made by teachers from All Faith's Primary School, Strood.

### Student engagement:

- "Thoroughly enjoyed by all. Excellent opportunity for both Deaf and hard of hearing children to work together"
- "The children have been engaged in all areas of this project. They have really enjoyed working together"
- "Very engaged in project, all looked forward to the next session"
- "All the children have really loved this project, it's brought them and hearing peers together"
- "I think they have really enjoyed the sessions, thoroughly engaging in the activities"
- "Fantastic. They look forward to it and engage really well."
- "Very positive - they look forward to the sessions each week and have taken pride in showing their work."

### My Self feedback

- "Provided time for the children to think about themselves and explore their likes and dislikes"
- "It has been really lovely being able to be a part of this project - thank you"
- "Great project, lovely to see the deaf children engaged and proud of their work"
- "I've realised the child I work with considers himself very angry all the time!"
- "They look forward to seeing what they will be doing each week and get very excited"
- "They love creating new things each week and take pride in everything they are doing"