

Ohio Arts Council

Summary (300 WORDS)

Provide a brief summary of your organization's proposed project, including an overview of who will be involved, what will happen, and where activities will take place. Should you be awarded funding, this summary will be used to develop language for your contract, as well as in public documents.

Opening Minds through Art (OMA) is an award-winning, evidence-based, intergenerational art-making program for people with dementia. It is designed to provide creative expression and social engagement opportunities for people with Alzheimer's disease and other dementias. Developed in 2007 at Miami University's Scripps Gerontology Center, the program is grounded in person-centered care principles.

OMA sessions are led by artists and gerontologists trained in OMA methodology. Each elder is paired with a trained volunteer who provides guidance but makes no aesthetic decisions for the elders. Our research shows that OMA improves the well-being of the elders and the attitudes of the students.

OMA received the Best Practice award from LeadingAge Ohio (2011) and was endorsed by the Ohio Department of Aging as a Quality Improvement Project (2015). With this endorsement, Ohio nursing homes can meet one of their licensing requirements by implementing OMA to improve the quality of life of residents with dementia.

To replicate the program, OMA conducts in-person facilitator training sessions for artists, healthcare professionals, and service learning educators. In 2014-2015, 99 people attended this training; resulting in OMA growth from 11 sites in 2014 to 38 sites (16 in Ohio) in 2016. Eighty-five more people will attend the three training sessions this summer. OMA Facilitator Training has a long wait-list. With limited OMA staff, further scaling will be achieved through developing a hybrid facilitator training, combining on-line training with in-person practicum.

OAC support will enable us to (a) create video footage for the hybrid training program and (b) develop and staff an online resource center to support trained facilitators upon completion of their training.

265 WORDS

PROGRAM QUALITY (1000 words)

- *In what ways will the proposed project facilitate person-centered participatory arts activities that have the potential to increase wellness, while demonstrating artistic, and/or educational value?*
- *In what ways will the project be strengthened, modified, or scaled with support from the OAC?*
- *Who will be involved as leaders (artistic, educational, organizational) in the project, and what qualifications do they have for working with older adults?*

MISSION:

The mission of the Opening Minds through Art (OMA) program is to use art “to bridge age and cognitive barriers.” Recognizing the social distance across generations and the lack of appreciation for older people, especially those with the disabilities that come with dementia, OMA set out to create social change through art-focused intergenerational interaction beginning in 2008.

BENEFITS:

Every week, student and community volunteers are paired with elders with dementia in long-term care or adult day facilities. All volunteers are trained in person-centered ways to support the elders’ freedom to make original art on their own. All this takes place in a quiet but vivacious social group atmosphere involving 12-30 pairs together in a common room.

Art-making in OMA brings the elders and the volunteers closer and staff often witness new levels of engagement and expression among elders released from the daily routines. Volunteers typically start out with some degree of apprehension and anxiety but by the end of the term, they develop a deep appreciation for the friendships, or even kinship, with their elder partners. And staff and family visitors witness new dimensions of social and aesthetic capability they had not seen before.

For the elders, living in nursing homes can be a very isolating existence. People with dementia tend to be misunderstood, rendered unable to engage in meaningful activities, and therefore underserved. The weekly arrival of student and community volunteers brings them joy and success in creating beautiful artwork that brings them pride.

OMA was designed in response to both the elders’ needs for more social engagement and students’ needs for experiences that will challenge their ageist values. To develop students that value diversity and appreciate all people regardless of age or cognitive status, we need to get students out of conventional classrooms and into the community. The opportunity to experience structured and supported interactions with their elder partners at a nursing home on a weekly basis is bound to change their views of aging. Over the years, we have witnessed the growth of genuine and reciprocal relationships that are built across the generations. An analysis of student journals and pre- post-tests of their change in attitudes show

that volunteering in OMA does contribute to a more positive view toward people with dementia.

Students may start the program believing they will be providing a service and helping the elders but quickly learn how much they benefit from the experience. They learn important life lessons, about paying attention and active listening; about love and respect; about valuing people who are very different from themselves. This transforms the elders' role from care recipients to teachers and artists which promotes the elders' wellbeing.

We have published studies reporting the above benefits for elders and students.

ART:

Although OMA's focus is the development of relationships between the volunteers and the elders, each week the elders create beautiful artwork (see our gallery in www.ScrippsOMA.org). OMA artwork is displayed in prominent places – in lobbies, hallways and galleries. Facilities with long-term OMA programs have created permanent OMA art walls for public viewing. OMA art has at times been sold at auction as a public fundraiser for the program and images have been loaned for regional public events like Empty Bowls. This public display and dissemination has spread the OMA program into the broader community.

We also hold art shows at local art and community centers. Our artists with dementia attend these openings accompanied by proud relatives and their volunteer partners, who often also bring their families and friends. These community events bring together people across generations and directly build upon their sense of appreciation for elders with dementia. The final artwork hanging in various settings continue to remind us of the special people who are “still inside” – a message that we have seen change how others view, interact with and care for people with dementia.

GROWING OMA WITH OAC SUPPORT:

OMA has created a very successful in-person Facilitator Training program that lasts 3.5 intensive days (see Facilitator Training Evaluation, attached). In 2014, OAC funded an artist to attend OMA facilitator training. Even though we offer 3 separate training programs this summer, they filled to capacity very quickly (before early registration closed) and generated a long waiting list. The demand for more OMA training is definitely there. With OMA's recent endorsement by the Ohio Department of Aging as a Quality Improvement Project, this demand will only escalate further. These facilitator training sessions are the main source of growth for OMA. However, so far all OMA training sessions have been conducted in person. This limits the number of facilitators we can train. With OAC support, OMA plans to train more facilitators by launching a hybrid OMA Facilitator Training program. This in turn will provide more elders with dementia new opportunities for creative expression.

LEADERS' QUALIFICATIONS:

Elizabeth Lokon, Ph.D., director/founder of OMA at Miami University's Scripps Gerontology Center. She combined her training in fine art, gerontology, and education to create the OMA program in 2007. OMA is now offered at 38 sites in North America and Europe. She has made over 100 presentations in the U.S., Canada, Japan, and the Netherlands about her work on the intersection of gerontology, the arts, and education and she has authored articles on this subject. She is also a Master Teaching Artist with the National Center for Creative Aging and is an art quilter.

Elizabeth Rohrbaugh is OMA's assistant director. She oversees implementation of OMA at several long-term-care facilities, and handles data management, program reporting and aspects of community outreach and training. She brings 18 years of experience in research and development and project management at Procter & Gamble to help grow OMA. She holds a B.A. in business administration and is a visual artist.

Michael DeGrazier, MFA is an Emmy winning videographer and editor. He holds an MFA in Media Arts from the University of Montana, Missoula. His work has covered commercial and television, higher education and social change documentaries. Michael has been collaborating with OMA and NCCA since 2014.

(1000 WORDS)

COMMUNITY ENGAGEMENT (1000 WORDS)

- What are your plans for attracting and engaging a diverse range of older adults as participants, including people with disabilities, in energetic and focused ways?
- Describe a recent example of a project that used the arts to engage older adults, including ways in which that experience will guide your proposed project.
- In what ways will you link this project with the broader community, i.e. caregivers, facility staff, family members, volunteers, etc.?
- What kinds of input/coaching would you find most valuable from colleagues in the Creative Aging Ohio learning cohort of other grantees?

Scripps Gerontology Center at Miami University, where OMA was developed, is an Ohio Center of Excellence. Its mission is “making a positive difference in the lives of aging individuals, their families and communities, and meeting the needs of aging societies.” OMA is one way that Scripps achieves its mission. Both Miami University and Scripps Gerontology Center can better achieve their organizational mission if OMA can be replicated more widely and more elders with dementia can engage in meaningful art-making experiences. Due to limited staffing, this is only possible if we develop on-line training tools.

OMA FACILITATOR HYBRID TRAINING PROGRAM:

To meet the increasing demand for OMA programming, we need to develop a hybrid OMA Facilitator Training program. So far, all OMA training programs have been in-person. With the support of OAC, we intend to develop this hybrid training program and an on-line resource center to support trained facilitators after they complete the training.

In the hybrid training program, artists, healthcare and aging professionals, and service learning educators will complete the theory, methodology, and research components on-line while the art-making and the practice of conducting an OMA session will be conducted in-person. This in-person practicum will be offered regionally throughout Ohio and will last 1.5 days.

OMA does have some prior experience in on-line training development. In 2014 the National Center for Creative Aging (NCCA) gathered six national leaders on dementia arts programming to create free, on-line video-based instructions for caregivers so they could learn how to provide artistic engagement to elders with dementia at home (see creativecaregiving.creativeaging.org). OMA is one of the six programs selected for inclusion in this initiative. To develop the video clips needed for OMA’s new hybrid training program, we intend to continue working with Michael DeGrazier, the videographer in this NCCA project.

OMA ON-LINE RESOURCE CENTER:

Upon completion of this training, OMA facilitators will be supported by an on-line resource center. The resource center will serve several purposes:

1. Scripps Gerontology Center will post new ideas, research studies, and grant opportunities for trained OMA facilitators.
2. Trained facilitators will have the opportunity to share new art-projects, ideas to resolve implementation challenges, and stay connected with each other to form a virtual community.
3. Scripps Gerontology Center will monitor OMA program quality and fidelity by holding regular online “office hours” and webinars to address issues raised.

Developing the hybrid OMA Facilitator Training program and the Post-training On-line Resource Center will enable OMA to serve a larger and more diverse portion of the aging population throughout Ohio and beyond.

MARKETING OMA ONLINE TRAINING AND RESOURCE CENTER:

Scripps Gerontology Center was established at Miami University in 1922. It generates and disseminates aging-related research; provides leadership, technical assistance, and information to elders, caregivers, aging professionals in the community, as well as to policy makers. Scripps has a rich database and is well-connected to all aging and care facilities in Ohio. Because of its strong outreach capacity, we will be able to promote this resource throughout Ohio.

The Ohio Department of Medicaid and the Centers of Medicare and Medicaid Services have designated OMA as a Quality Improvement Project. These organizations have listed OMA on their websites. Care facilities access these websites to complete their licensing requirement.

LEARNING WITH OAC COHORT:

The biggest challenge in implementing OMA is finding a steady source of committed volunteers. We hope to learn from colleagues in the Creative Aging Ohio learning cohort ways to recruit OMA volunteers throughout Ohio. We also plan to share our decade long experience of conducting arts programming for people with dementia with the cohort.

(593 words)

DEFINING AND MEASURING SUCCESS (1000 WORDS)

- Describe the planning process for this project. In what ways did the planning process involve a wide range of voices?
- In what way(s) do you anticipate this project will change your organizational practice(s)?
- What strategies will you use to gauge the impact of the project on the participants it is designed to serve?

OMA Facilitator Hybrid Training Program:

We have been training OMA Facilitators at Miami University campus, at partner sites, and at conferences since 2009. After each training session, we asked attendees to complete evaluation questionnaires to assess the effectiveness of the training program. We used this evaluation data to improve the training program.

We have also conducted interviews with top management, administrators, and activities staff to assess the OMA program from multiple perspectives. This qualitative data have been analyzed and presented at conferences (e.g. LeadingAge, The Society of Arts in Healthcare, The National Center for Creative Aging, The Society for the Arts in Dementia Care). OMA helps caregiving staff and family members see elders with dementia in a new light, thereby helping to promote person-centered care. "OMA brings out a different side that we don't usually see during the rest of the day" (nurse). "It lets us see how much they're capable of" (activity staff).

The voices of the elders with dementia in the OMA program are also included in the program assessment. Elders who are able to respond are always asked about their satisfaction and enjoyment with the art-making process and results at the end of every session. The elders' mood before and after each session is also assessed on a weekly basis. This evaluation form (attached) is shared with all facilitator training attendees. All OMA sites use this evaluation process to continue to improve the quality and suitability of the program at each setting. Qualitative data collected from the elders show that OMA offers a chance to discover new strengths and gain self-esteem. Participants often say "I surprised myself" or "I didn't know I was an artist!" A study in *Dementia* (2014) shows that OMA provides opportunities for the participants to be more creatively and socially engaged, leading to greater well being in comparison to traditional arts/craft activities.

The voices of the volunteers are assessed weekly and at the end of every semester through the use of questionnaires and journal writing. For student-volunteers, OMA provides a transformative learning experience. Studies in *Journal of Intergenerational Relationships* (2012) and *Journal of Applied Gerontology* (2013) revealed that participating in OMA enhanced learning and reduced ageism. In the students' eyes, the elders were artists, teachers, and friends. As one student said, "I joined OMA thinking that I would help older people. But they don't realize how much they are actually helping me learn about life itself."

All of the above evaluations have contributed to the improvement of the OMA program in general and the OMA facilitator training in particular. Now we are ready to launch a hybrid facilitator training program so that more people can be trained in OMA methodology and more elders with dementia can have the opportunity for meaningful creative engagement

OMA On-line Resource Center:

Currently, post-training support for OMA facilitators is conducted over the phone and emails. This is very labor intensive and time consuming. Since most of them share similar issues, it would be more effective and efficient if we conduct post-training support through regular online meetings. OMA staff members plan to be available for 4 hours/week (2 hours online office hours, plus 2 hours follow-up tasks) to respond to questions from trained facilitators. Equally exciting is the prospect of creating a system of mentoring and cross-fertilization between facilitators at established sites and newly trained facilitators. We are increasingly aware of the value of our most successful facilitators who are eager to share what they have learned and help spread best practice ideas (e.g. new and original ideas for effective art media and projects). We have always used panels of veterans at our 3.5 day in person trainings. We look forward to doing this through the social media aspects of our online training. So additional/booster training and webinars will also be conducted using the new platform. On-going support will keep up everyone’s enthusiasm for the program and build an interactive professional community that will enrich each other’s practice.

Footnote:

Below is a list of the evaluation data we have collected since 2008 and continue to collect now. We have multiple evaluation tools because we needed to include everyone’s voice in evaluating every aspect of the program. Opinions of relatives of the people with dementia are captured in the art show evaluation.

Evaluation Form	Evaluator	Evaluation timing
Dementia Attitude Scale	All new volunteers	Beginning and end of term
Training Evaluation	All new volunteers	Immediately after training
OMA Quiz	All new volunteers	Immediately after training
Leaders’ Training Evaluation	All new leaders	Immediately after training
Artists’ Feedback	People with dementia	Immediately after each session
Program Review	All leaders	At end of term
Activity Evaluation	All leaders	At end of weekly planning session
Journals	All volunteers	Due 3 days after volunteering
Program Evaluation	All volunteers and site staff members	Last 2 weeks of session
Art Show Evaluation	Everyone	At reception of the art show
Final Reflection	All student leaders	End of term
Live observations of PWD	Research assistants	Completed

Video data of PWD	Research assistants	Completed
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The supporting materials attached to this proposal include a summary of the above evaluations

Article References

Lokon, E., Sauer, P., Li, Y., & Parajuli, J. (Under review). Activities in dementia care: A comparative assessment of activity types. Dementia: The International Journal of Social Research and Practice.

Sauer, P., Fopma-Loy, J., Kinney, J., & Lokon, E. (2014). "It makes me feel like myself": Person-centered versus traditional visual arts activities for people with dementia.

Yamashita, T., Kinney, J. M., & Lokon, E. J. (2013). The Impact of a Gerontology Course and a Service Learning Program on College Students' Attitudes Toward People With Dementia. Journal of Applied Gerontology, 32(2), pp. 139-163. Doi: 10.1177/0733464811405198.

Lokon, E., Kinney, J. M., & Kunkel, S. (2012). Building Bridges across Age and Cognitive Barriers through Art: College Students' Reflections on an Intergenerational Program with Elders who Have Dementia. Journal of Intergenerational Relationships, 10(4), pp. 337-354. DOI: 10.1080/15350770.2012.724318.

(983 WORDS)

Resource Management (951 words)

- *What financial and other resources has your organization sought out to support this project?*
- *Describe your organization's administrative practices and the qualifications of the personnel that lead them.*

OMA operation is supported by Scripps Gerontology Center as well as by grants and contracts. OMA is a Scripps program. All OMA staff members are employed by Scripps Gerontology Center. OMA receives approximately 20-30% of its operating budget from Scripps. Scripps also provides OMA with leadership vision, administrative assistance, communication support, accounting and documentation support, financial and legal guidance, and graduate student assistantships. Miami University, the home of Scripps Gerontology Center, provides OMA with information technology and distance learning support, students to serve as OMA volunteers, management and transportation support through the Office of Community Engagement and Service and other resources to conduct OMA research and develop OMA's online resources.

Additional funding related to OMA facilitator training has been sought from the following sources:

- Model sites: Model sites are sites that have successfully implemented OMA. They will be invited to host the in-person component of the hybrid training program. In the case of SW Ohio, a memo of understanding has been signed between Scripps and the Knolls of Oxford for in-kind contribution for space rental, audio-visual equipment, all meals during the training, and gallery space for art shows. Similar arrangements will be made with other model sites.
- Center of Medicare and Medicaid Services: A grant has been received to engage an IT company to develop the online portion of the hybrid training program. This IT company (To be determined) will use video material created by Michael DeGrazier.
- Alzheimer's Foundation of America: Grant received to provide scholarships to a few selected attendees.
- Oxford Community Arts Center: An organizational partner that provides studio space for planning art activities and storing art supplies and gallery space for OMA art exhibitions.
- We will keep advertising costs low by tapping Scripps Gerontology Center's network to advertise the training opportunities, as well as announcing it through partner organizations below and making presentations at conferences associated with these organizations:

In Greater Cincinnati and Ohio:

- LeadingAge Ohio
- Miami Valley Chapter of the Alzheimer's Association
- Resident Activities Professionals (RAP Ohio)
- Ohio Health Care Association (OHCA)
- The Fitton Creative Center, Hamilton, OH
- The Oxford Community Arts Center, Oxford, OH

Nationally:

- The National Center for Creative Aging (NCCA), Washington, DC
- The Creative Center, New York, NY
- LeadingAge national
- Association of Jewish Aging Services (AJAS)
- The American Society on Aging (ASA)
- The Alzheimer's Foundation of America

Internationally:

- The Society for the Arts in Dementia Care, Vancouver, BC

Qualifications of administrative personnel:

Suzanne Kunkel, PhD. (Executive Director of Scripps Gerontology Center)

Dr. Suzanne Kunkel is Executive Director of the Scripps Gerontology Center and Professor in the Department of Sociology and Gerontology, Miami University, Oxford, Ohio. Her primary research focus is on planning for the health care needs for the older population. She has been involved in several large-scale studies projecting the future of long-term care needs for the nation, and for the state of Ohio and its counties. Her projections of population aging and the impact on long-term care needs have expanded to include a focus on global aging and the consequences of a rapidly aging society on less-developed regions of the world. Dr. Kunkel's research also includes federally funded projects related to community-based home care and the aging network. Dr. Kunkel is a frequent speaker at national and state professional conferences. She has authored numerous book chapters, research monographs, and articles, and a textbook. Dr. Kunkel's service to the field of aging has included offices as President of the Association for Gerontology in Higher Education, member of the governing board of the Gerontological Society of America, editorial board member for several professional journals, board member for several state and local organizations, and technical assistance to a number of Ohio area agencies on aging and service providers in the region.

Cheryl Johnson (Director of Finance and Operations, Scripps Gerontology Center)

Cheryl is responsible for the oversight and implementation of all fiscal management for the Center. This includes monitoring the organizational portfolio, managing accounts, implementing practices that align with Responsibility Center Management (RCM)-based budgeting, ensuring financial accountability in decision-making,

preparing and presenting financial reports on behalf of Scripps, and monitoring organizational growth and long-term fiscal sustainability. In addition, she works with principal investigators and research project staff to develop and monitor grant budgets and submissions, and manages organizational infrastructure.

(716 WORDS)

OAC Budget

Opening Minds through Art (OMA): Facilitator Training Budget 2016-17		
Expense Category	OMA Facilitator Training Program	Requested from OAC
Administrative Salaries & Benefits:		
Lokon salary: 400 hours	\$10,841	
Rohrbaugh salary: 400 hours	\$7,308	
Fringe benefits: Lokon	\$4,062	
Fringe benefits: Rohrbaugh	\$2,811	
Videographer		
DeGrazier	\$5,000	\$5,000
Information Technology:		
IT for development & tech support	\$30,000	
Lead Artists:		
Collopy	\$2,400	2,375
Friedman	\$2,400	2,375
Simcock	\$2,400	2,375
Fopma-Loy	\$2,400	2,375
Travel:		
Two trips to OAC meetings		\$500
Art Supplies:	\$1,500	
Printing:		
Printing 100 OMA Handbooks & Manuals @\$40	\$4,000	
Facilities Costs:		
Hosting (in-kind)	\$12,000	
Column Totals	\$87,122	\$15,000

Budget Narrative:

Elizabeth Lokon, Ph.D. will serve as the lead designer and trainer for this replication effort. She will work with the videographer and the IT company to design and implement the online portion of hybrid training and conduct the in-person practicum portion at regional training sites. She will also staff the online resource center on a weekly basis. It is estimated that she will spend 400 hours on this project. . Requested from OAC: 180 hours (45% of total).

Elizabeth Rohrbaugh will assist Dr. Lokon in all aspects of the training, coordinate logistics of these events, coordinate marketing/promotion of the replication effort and assist with assessing organizational readiness and monitoring program quality. Ms. Rohrbaugh will co-train with Dr. Lokon during all in-person regional training sessions and assist with the virtual support of trained facilitators. It is estimated that she will spend 400 hours on this project. . Requested from OAC: 110 hours (27.5% of total).

Michael DeGrazier, MFA will create all video recordings needed for the online portion of the hybrid training. He will record using two cameras and edit the video footage to meet the online training needs.

IT for online course and online resource center development

Once the videos of the hybrid course are developed, we need an IT company to turn these into an online course, develop the platform to ensure user friendliness of the program, its interactive quality, and the overall monitoring of trainees' competencies. An IT company (to be determined) will be tapped because these requirements are beyond what Miami University can provide. Funding for this item has been secured from another grant.

Four Lead Artists (Collopy, Friedman, Simcock, Fopma-Loy): Lead Artists will assist with studio preparation before and during all training sessions, the development of activities for the training participants, and help facilitate art-creation sessions during the various training sessions. Lead Artists also assist with observation and feedback during the small group practicum sessions.

Travel

This item covers two round trips between Oxford and Columbus to attend OAC meetings.

Art supplies

All attendees will receive an art kit with frequently used tools/supplies for one person. This includes items such as watercolor pad, paintbrush, sponge, watercolor paint, acrylic paint, permanent marker, pencil etc. for each person to create artwork during the art sampler component of the training.

Printing

The printing budget includes the cost of producing four-color, bound OMA handbooks and teaching manuals, containing information on OMA philosophies and methods, as well as

step-by-step instructions for leading 20 OMA-tested art activities. The budget also includes the cost of printing promotional postcards/flyers.

Support Materials

All support materials must be either hyperlinked from an online source, or uploaded into ARTIE; **nothing should be mailed to the OAC in hard copy**. Materials that are available online should be hyperlinked in your narrative, and need not be uploaded separately here. Upload materials not available online using the upload box below.

The following materials are required:

1. Detailed budget breakout of expenses and income

The following materials are *strongly encouraged*; the absence of these materials will result in a weaker application and lessen your organization's chances of receiving funding:

1. One-paragraph biographies of key artistic and administrative personnel mentioned in the application
2. Sample evaluation and/or assessment tool(s)
3. Summary of past research or evaluation responses/results
4. Up to five letters of support including, but not limited to letter of commitment from any organization mentioned in the application as a partner, endorsements or participant responses

Examples of possible additional materials may include:

1. List of board members and their professional affiliations; list of committee members
2. Up to five pieces of press and publicity materials including, but not limited to annual report, brochure, critical review, exhibition catalog, flier, invitation, newsletter, newspaper or magazine article, press release, program
3. Links to photographs or videos from past programs with older adults

To upload one file at a time, use the Single File box. To drag and drop multiple files at once, click Multiple Files.

Biographies

Elizabeth Lokon, Ph.D. (Director/Founder, OMA). Elizabeth founded OMA at Miami University's Scripps Gerontology Center. She combines her training in fine art (B.A., UC-Berkeley; B.F.A., California College of Arts), gerontology (M.G.S., Miami U.), and education (Ph.D., Miami U.) to create the OMA program in 2007. OMA is now offered at 38 sites in North America and Europe. She has made over 100 presentations in the U.S., Canada, Japan, and the Netherlands about her work on the intersection of gerontology, the arts, and education and she has authored articles on this subject. She is also a Master Teaching Artist with the National Center for Creative Aging and is an art quilter.

Elizabeth Rohrbaugh, BA (Assistant Director, OMA). She oversees implementation of OMA at several long-term-care facilities, and handles data management, program reporting and aspects of community outreach and training. She also administers the scholarship program for OMA's facilitator training. She joined OMA in 2013, bringing 18 years of experience in research and development and project management at Procter & Gamble. She holds a B.A. in business administration and is a visual artist.

Michael DeGrazier, MFA (Videographer). Michael is an Emmy winning videographer and editor. He holds an MFA in Media Arts from the University of Montana, Missoula. His work has covered commercial and television, higher education and social change documentaries. Michael has been collaborating with OMA and NCCA since 2014.

Irene Friedman, M.A. (Lead Artist, OMA). Irene has been a Lead Artist in OMA since 2008. She is a visual artist with 30 years of art teaching experience at the middle school level in Ohio. She received her B.A. in art history and M.A. in art education from the University of Cincinnati. For the past 28 years, she has been a volunteer reader with Radio Reading Services of Cincinnati Association for the Blind and Visually Impaired. She has exhibited her artwork locally.

Chrissy Collopy (Lead Artist, OMA). Chrissy loves her job as a Lead Artist for Opening Minds through Art. Through this program she has enjoyed being a part of many elders' lives. "Their excitement in knowing they can still be creative, while living with dementia, is inspirational." Chrissy is a practicing artist as well as a painting instructor. She has conducted various art education programs serving children and older adults with intact cognition as well as those with dementia.

Brad Simcock, PhD. (Lead Artist, OMA) Brad has been volunteering with the OMA program from the very beginning. He is a retired Professor Emeritus in Sociology from Miami University with extensive experience in both cross-cultural and diversity training in both Japan and United States. He views his retirement as an opportunity to bring some of the insights from his career to the training and development of volunteers and volunteerism in the field of aging.

Joan Fopma-Loy, Ph.D., R.N. (Lead Artist, OMA). Joan is a professor of Nursing and a Scripps Gerontology Center Research Fellow, Miami University. She is a clinical nurse

specialist in psychiatric-mental health nursing, specializing in depression and dementia in older adults, and has published and presented on these subjects in nursing and gerontology venues. She is an OMA facilitator and trainer, and has been collaborating on research on the impact of OMA. She is also involved in OMA program development, developing the OMA41 (OMA for One) program, which applies the OMA art-making process to elders living in home-based settings.

Suzanne Kunkel, PhD. (Executive Director of Scripps Gerontology Center)

Dr. Suzanne Kunkel is Executive Director of the Scripps Gerontology Center and Professor in the Department of Sociology and Gerontology, Miami University, Oxford, Ohio. Her primary research focus is on planning for the health care needs for the older population. She has been involved in several large-scale studies projecting the future of long-term care needs for the nation, and for the state of Ohio and its counties. Her projections of population aging and the impact on long-term care needs have expanded to include a focus on global aging and the consequences of a rapidly aging society on less-developed regions of the world. Dr. Kunkel's research also includes federally funded projects related to community-based home care and the aging network. Dr. Kunkel is a frequent speaker at national and state professional conferences. She has authored numerous book chapters, research monographs, and articles, and a textbook. Dr. Kunkel's service to the field of aging has included offices as President of the Association for Gerontology in Higher Education, member of the governing board of the Gerontological Society of America, editorial board member for several professional journals, board member for several state and local organizations, and technical assistance to a number of Ohio area agencies on aging and service providers in the region.

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Sample of Assessment Tools

1. Artist Feedback
2. Program evaluation
3. Journal prompts
4. Facilitator training evaluation
5. Dementia Attitude Scale

OMA Session Artist Feedback

Artist's Name: _____ Date: _____
Your Name: _____ Site: _____
OMA Project Name: _____

1. Which face shows how you feel right now?

BEFORE



Very Sad

1



Somewhat Sad

2



Neutral

3



Somewhat Happy

4



Very Happy

5

2. How much did you enjoy today's art project?

Very much

Somewhat

Not at all

3. How much did you enjoy talking to other people during art class?

Very much

Somewhat

Not at all

4. How often were you able to do whatever you wanted during art class?

All the time

Sometime

Never

5. How much do you like your finished artwork?
 Very much Somewhat Not at all

6. Do you think that your time was well spent?
 Yes Somewhat No

7. Which face shows how you feel right now?
 AFTER



Very Sad

1



Somewhat Sad

2



Neutral

3



Somewhat Happy

4



Very Happy

5

TO BE COMPLETED BY VOLUNTEERS:

8.	How appropriate was today's activity <u>for your partner</u> ?	Very appropriate				Not at all
		5	4	3	2	1
9.	Overall, how would you rate this activity?	Excellent				Poor
		5	4	3	2	1

10. Quotable quotes from your partner today and/or comments:

Overall Program Evaluation

Today's date: _____

Site: _____

Your position (Please circle one):

Activity staff / Nursing staff / Community Volntr. / Student Volntr. / Family /Other: _____

Number of OMA sessions attended: _____

1.	Overall, how would you rate the OMA program?	very good 5 4 3 2 1	very poor
2.	Overall, how much did you enjoy the OMA activities?	very much 5 4 3 2 1	not at all
3.	Overall, how well did the OMA Staff work with you and the participants throughout the program?	very well 5 4 3 2 1	very poorly
4.	Overall, how well did the SITE's staff work with you and the participants throughout the program?	very well 5 4 3 2 1	very poorly
5.	Overall, how well did the volunteers work with the participants throughout the program?	very well 5 4 3 2 1	very poorly
6.	Overall, how well did the residents respond to OMA's art activities?	very well 5 4 3 2 1	very poorly
7.	Overall, how appropriate were the activities in the program for the participants?	very appropriate 5 4 3 2 1	not at all

Overall, to what extent did the OMA program:

8.	encourage residents' creative self-expression?	Very much 5 4 3 2 1	so-so	not at all
9.	encourage residents' engagement with the art materials/activity and/or with other people?	Very much 5 4 3 2 1	so-so	not at all
10.	improve residents' mood and/or behavior?	Very much 5 4 3 2 1	so-so	not at all
11.	Before participating in the OMA program, I thought it was possible for people with dementia to express themselves creatively	Did think so 5 4 3 2 1	Did not think so	
12.	After participating in the OMA program, I think it is possible for people with dementia to express themselves creatively	Do think so 5 4 3 2 1	Do not think so	

12. What have you personally learned from participating in the OMA program?

13. Please share other thoughts about the program and/or ideas for improvement.

14. Please comment on the journal reflections and responses to your journals.

15. Please comment on the “Artist’s Feedback” form that we used to gather the participants’ opinions at the end of every session.

OMA JOURNAL PROMPTS

- 1. (REQUIRED JOURNAL FOR NEW OMA VOLUNTEERS. Returning volunteers may choose any of the other prompts.) Please compare your feelings about working with people with dementia and life in a long-term care facility before and after you went on your first visit. What were your expectations before going? Did these change after you went? After the first visit, write your impressions about your first day of volunteering in a dementia unit. Write about how the interaction with the elder with dementia made you feel. Give examples and explain why it made you feel that way. Be frank in your writing.**
2. Please describe your interaction with the elder that you assisted. Was there anything that you said or did that made him/her react or respond expressively (either positively or negatively)? Was there anything that s/he said or did that made you feel/react strongly (either positively or negatively)? Please describe these interactions with as much detail as you can.
3. Please explain your initial reasons for signing up with OMA (please be frank in your writing). Have these reasons changed since you began volunteering? Now that you have volunteered for a few weeks, what do you hope to learn or gain from this volunteering experience? Do you think that you will be able to achieve this by the end of the semester? Why or why not?
4. How have your perceptions of long-term care facilities/adult-day centers and people with dementia changed since volunteering with OMA? Has your experience with OMA had any impact on your personal attitudes, beliefs, or values? Have any of them changed or been reinforced?
5. Please write whether and how this service learning experience influenced your career goals, personal life, and/or ideas about your own aging. And if you are currently in a class dealing with aging, how has this service learning experience influenced your academic learning?
6. Please describe how you feel about your relationships with the elders now and compare it with how you felt after your first visit (Please reread your first couple of journals). Describe any changes in how you feel and try to analyze what may have caused these changes.
- 7. (REQUIRED JOURNAL OF ALL VOLUNTEERS) Please write a letter to a new volunteer who will be working with your partner. What do you know about your partner? What descriptions and advice about your partner would you give to the new volunteer? PLEASE WRITE YOUR PARTNER'S NAME AND THE SITE'S NAME ON THE TOP OF THE LETTER.**

8. How would you describe the artist you are/ were working with? Can you give examples for why you would describe the artist that way? What were your first impressions of the artist you are/were working with? How did these first impressions change over time? Compared to the beginning of your OMA experience, what has changed for you when you think about the artist you are/were working with? What are salient features of the artist that make him or her different from (or similar to?) other artists, other volunteers, other people in the room, or from yourself?
9. What do you think are the benefits of doing OMA for your partner, for you, for the staff members, and others? What were the best parts? What were the most challenging parts? In retrospect, how useful was the training that you received prior to going to the site? How can we improve the program, the training? How can we better support you and other volunteers like you in this kind of learning experience? Please write any insights you gained from volunteering with OMA that you have not written in earlier journals.
10. **(REQUIRED JOURNAL OF ALL VOLUNTEERS) On your last visit please BRING two letters in two separate envelopes, one for your partner and the other is for your partner's family. Thank them for the opportunity to work together and tell them what you have learned from working with your partner for the whole semester. Share some memorable moments that you experienced with your partner during OMA this semester. Complete the letter by adding your email and postal addresses on the bottom, in case families would like to write to you. Please submit these letters in Niihka as your last journal entry in addition to bringing the two printed letters to the last session (or art show).**

**Opening Minds through Art (OMA):
Scripps intergenerational art program for people with dementia**

OMA Facilitator Training Evaluation 2016

Today's date: _____ Name (optional): _____

Your position (Circle one):

Activity Staff/ Nursing Staff/ Administrator/ Social Worker/ Artist/ Educator/
Other: _____

The type of facility where you work (Circle one):

Long-term care/ Assisted Living/ Adult Day/ Home-based care company/
Private practice/ Other: _____

Your place of work is (Circle one): Not for profit / For profit

1. As a result of this training, I feel more knowledgeable about facilitating the creative process of people with dementia.	Strongly disagree 1 2 3 4 5 Strongly agree
2. As a result of this training, my attitudes about the creative potential of people with dementia have become more positive.	Strongly disagree 1 2 3 4 5 Strongly agree
3. As a result of this training, I feel more competent in facilitating the creative process of people with dementia.	Strongly disagree 1 2 3 4 5 Strongly agree
4. The trainers explained things clearly.	Strongly disagree 1 2 3 4 5 Strongly agree
5. The art-making activities and discussions were helpful in my learning process.	Strongly disagree 1 2 3 4 5 Strongly agree
6. Please comment on the length and pacing of the training session.	Length: Pacing:

7. Overall, how would you rate this training session?	Very Poor 1 2 3 4 5 Excellent
8. How likely are you to recommend this training to colleagues?	Very Unlikely 1 2 3 4 5 Very Likely
9. How likely are you to start an OMA program at your site or in your practice as a result of attending this training?	Very Unlikely 1 2 3 4 5 Very Likely
Please explain your response to question 9:	
10. If you plan to implement an OMA program at your site, please indicate the approximate number of people with dementia that would be served by this program per year:	Number: _____
11. If you do not intend to implement a full OMA program, how likely are you to apply OMA methods and philosophies at your site or practice?	Very Unlikely 1 2 3 4 5 Very Likely
Please explain your response to question 11:	

12. How did you hear about this OMA facilitator training?

13. The most important things you learned in this facilitator training:

14. The strengths of this facilitator training:

15. Suggestions for improvements or additions:

OMA EVALUATION SUMMARIES

1. Summary of OMA Research Findings

Opening Minds through Art has been the subject of four studies that have been published or accepted for publication, as well as two additional studies that are in progress. These studies are finding that OMA can have a significant impact on both the elder artists and their partner-volunteers. For example:

In a study published in *Dementia: the International Journal of Social Research and Practice*, video data of 38 people with dementia in the OMA program was analyzed to assess the program's impact on the elders' wellbeing. Participants showed greater engagement, social interest and pleasure when involved in OMA activities than when doing traditional arts and crafts activities such as "cut-and-paste" or coloring book exercises. They also showed less disengagement, fewer negative emotions, less sadness and confusion in OMA than in traditional activities.

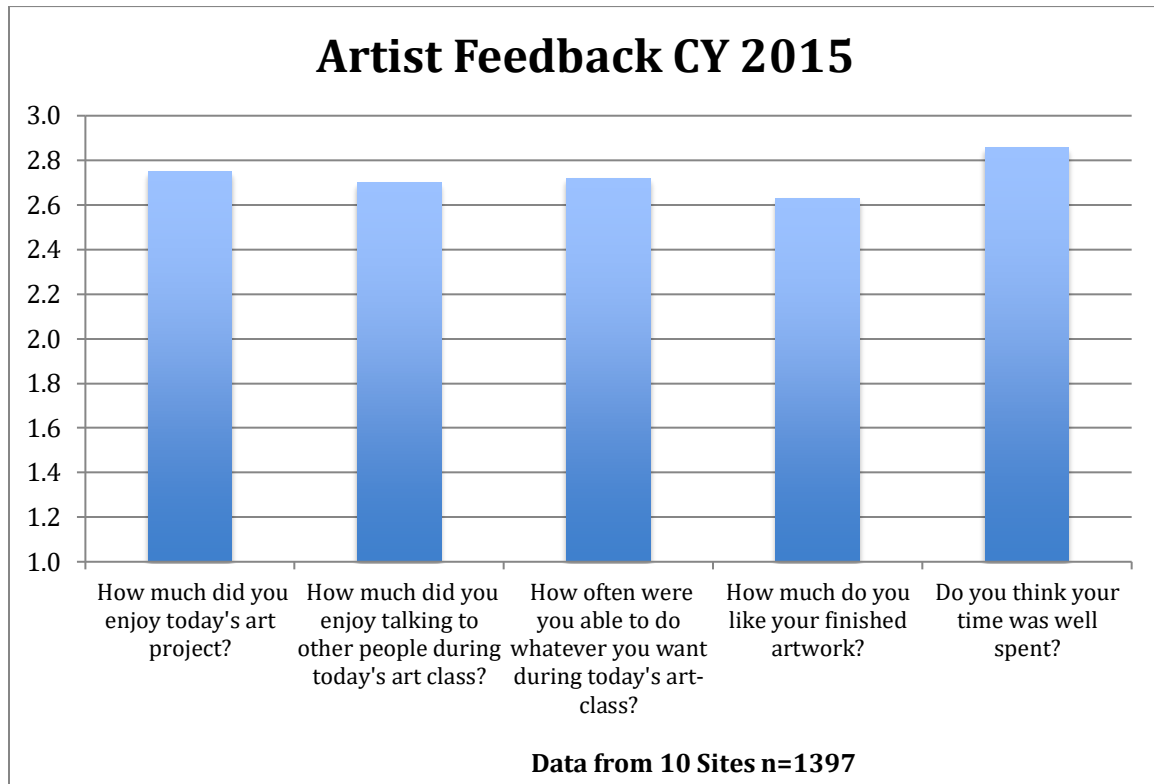
In another study, 300 journal entries written by 59 OMA student volunteers were analyzed for recurring themes. The study, published in the *Journal of Intergenerational Relationships* (2012), found that the students' "attitudes toward elders in general and elders with dementia in particular became more positive, and they developed both insights and skills to interact with people with dementia in ways that promote dignity and autonomy. They were able to build genuine reciprocity with their elder partners through these relationships and learn more about themselves and about life."

References:

- Lokon, E., Sauer, P., & Li, Y. (Under review). Activities in dementia care: A comparative assessment of activity types. *Dementia: The International Journal of Social Research and Practice*.
- Sauer, P., Fopma-Loy, J., Kinney, J., & Lokon, E. (2014). "It makes me feel like myself": Person-centered versus traditional visual arts activities for people with dementia. *Dementia: The International Journal of Social Research and Practice*.
- Lokon, E. & Dana, C. (2014). Using Art to Overcome Cognitive Barriers. *LeadingAge Magazine* 4(1).
- Yamashita, T., Kinney, J. M., & Lokon, E. J. (2013). The Impact of a Gerontology Course and a Service Learning Program on College Students' Attitudes Toward People With Dementia. *Journal of Applied Gerontology*, 32(2), pp. 139-163. Doi: 10.1177/0733464811405198.
- Lokon, E., Kinney, J. M., & Kunkel, S. (2012). Building Bridges across Age and Cognitive Barriers through Art: College Students' Reflections on an

Intergenerational Program with Elders who Have Dementia. *Journal of Intergenerational Relationships*, 10(4), pp. 337-354. DOI: 10.1080/15350770.2012.724318.

2. Summary of the elders' assessment of the OMA program:



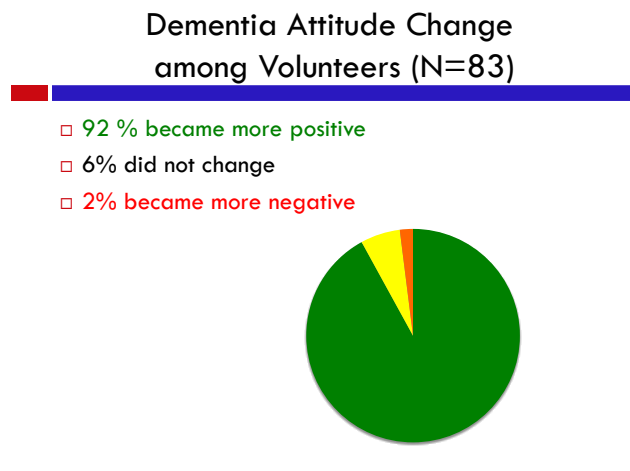
Some comments by elders with dementia in the OMA program:

- "I learned to take an interest in it."
- "I love how you can mix the colors and make new ones you never expected."
- "I like today's project because it reminded me of home."
- "I think I am doing pretty good after all. This makes me feel good."
- "I'm not an artist, but I like it."
- "I feel like I did something."
- "I was able to anything I wanted – upside down, sideways, backwards!"
- "It brightens my day when I look at it."
- "Thank you all so much for organizing this... I love you."
- "I love all of the sunset colors, the remind me of my loved ones." – Pat Franz
- "I don't know if there is anything else I would have rather done."
- "I think this is good for me, it makes me happy."
- "Rembrandt, step aside!"

3. Some comments by nursing home staff members about OMA at their facilities:

- “During OMA my residents light up, smile and engage as they participate in the program. Many of these residents do not participate in most programs; some wander aimlessly without regard to their environment. OMA enriched the lives of the residents and volunteers.”
- “OMA has helped me see the pride of my residents as they are given the freedom to make choices. OMA has shown me that freedom of choice and expression can unlock even the most confused of minds.” – Facility staff
- “OMA has created a new mindset in our department. The program has validated the necessity of the residents doing things for themselves. OMA provides a new culture that is now used in our department when planning and implementing all activities.”
- “I learned from OMA that you do not have to do everything for someone with dementia; they are able to [do things] for themselves if you have the patience with them.”
- “Now I am much slower to jump in and do things for my residents.”

4. Summary of student’s change in attitudes toward aging



Some comments by student volunteers:

- “The most important thing that I learned from participating in the OMA program is that human beings can connect emotionally under any circumstances. Even when all other cognition fails, emotions linger in the mind.”

- “I can honestly say I liked EVERYTHING about the OMA experience. The one-on-one interaction with the participants made the experience more meaningful by permitting emotional connections and naturally encouraging patience. As a bonus, watching the individuals merge as a group was rewarding.”
- “Before OMA, I talked to them like children. Now, I know the most important thing is to make them feel important and show that their life still means something to someone.”
- “It pointed out to me how important it is for an older person to be allowed the time to respond in their own way, not in a way others want them to.”
- “I learned that even though someone has dementia, it doesn't mean they are unable to be creative and express themselves.”

5. Summary of Facilitator Training Evaluation (2015)



Summary of Participant Evaluations for Opening Minds through Art (OMA) Facilitator Training Program June 2015

A total of 46 participants, representing elder-care facilities, art programs and

educational institutions from around the U.S. and Canada, attended the June 2-5, 2015, OMA training, held at Cedar Village Retirement Community in Mason, Ohio.

Participants gave the training an “overall rating” of 4.8 out of 5 (5 being the highest possible).

On a scale of 1-5 (5 being “strongly agree,”), participants responded that:

- “I improved my ability to apply person-centered care philosophy in an art setting” (4.8 out of 5)
- “As a result of this training, I feel more competent in my ability to design, implement, and evaluate meaningful art activities for people with dementia.” (4.8 out of 5);
- “How likely are you to start an OMA program at your site or in your practice as a result of attending this training?”(4.6 out of 5)

Comments from participants included:

- “(The training was) Well thought out, organized and has a set process”
- “Devoted staff. Extraordinary leaders. Fantastic and knowledgeable speakers”
- “OMA has taught me to slow down and appreciate more.”