

The Art Studios Impact Study: Executive Summary

April 12, 2016

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A Collaboration of the UBC Department of Occupational Science & Occupational Therapy and VCH Community Mental Health, with funding from The VGH and UBC Hospital Foundation. The research team acknowledges the outstanding contributions of the staff and clients of The Art Studios toward making this impact study the best it could be.



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“Psychosocial recovery” reflects a philosophy that respects client choice and autonomy in a healing journey, with outcomes best defined by individuals’ lived experiences.¹ Occupational therapists skillfully use occupation to facilitate recovery and the occupation of art-making shows promise to achieve recovery goals.² The Art Studios is a psychosocial rehabilitation program that uses art-making as the medium to engage clients with mental illness in learning and practicing life skills to support their recovery, well-being, and participation in society. It serves 200-230 clients annually.

The purpose of this study was to evaluate the impact of participation in the Arts Studios program on clients’ psychosocial recovery, health status, and goal attainment.

Principles of participatory action research and a mixed methods approach guided a one-year impact study. Focus groups and interviews generated qualitative data from clients, alumni, staff, and volunteers, analyzed thematically. A chart audit extracted demographic data and *Recovery Assessment Scale (RAS)*, *Rosenberg Self-Esteem Scale (RSE)*, and *World Health Organization Disability Schedule 2.0 (WHODAS)* scores at baseline, 4, 8, and 12 months, and one-year *Canadian Occupational Performance Measure* change scores, each analyzed using descriptive statistics and t-tests to assess differences between baseline and one year outcomes.

Over 200 unique individuals contributed data to the program evaluation. Clients ranged in age from 20 to 84 years (average age 47), most were female (approximately 80% depending on the measure), and most had some post-secondary education. The majority (74%) had multiple diagnoses, the most prevalent being major depressive/affective disorders, followed by physical disorders, anxiety, personality disorders, bipolar disorder, and schizophrenia.

Four focus groups (n=21 current and recent clients) and 24 individual interviews (12 current/recent clients, 12 current/recent staff and art instructors) yielded three main themes related to getting out of the house/back into the world, learning skills to build confidence and self-worth, and creating a safe environment in which to recover. Transcripts include compelling descriptions of life before and after art-making, stories crucial to the recovery journey: “I come here to be challenged to be social, creative, and give back. Because what they’ve given to me I can’t even measure.” Many clients progress from student to mentor: “I took one class and I loved it...the atmosphere of this place just enthralled me. And I started volunteering and helping out...and coming to the member meetings and being involved. ...And then they asked if I’d teach a class and I said yes I would. And never in a million years did I ever dream that would happen. But it’s all because of the support, the non-judgmental-ism, the encouragement, the feedback. You get feedback of all kinds. It’s not always good feedback but you get it. It’s a good learning tool. And my life has changed 150% since I’ve been here.”

Qualitative data also reveal key elements in the psychosocial rehabilitation program, suggesting that while some aspects of rehabilitation are apparent within the assessments, art classes, and wellness workshops, much of it is invisible as the occupational therapists and rehabilitation assistant adapt expectations and support to progressively challenge clients to develop social, communication, and other life skills – interventions that are woven into the routine, almost “undercover” with the art in the foreground.

Art classes are structured into terms beginning each September, January, and May. At the beginning of each term clients were asked to complete RAS, RSE, and WHODAS measures. There are baseline data from 168 clients showing that, on average, this group is at a relatively early stage of recovery (moving from pre-contemplation to action, RAS mean score of 151); has high self-esteem (RSE mean score of 14); and experiences some disability (WHODAS summary mean score of 33, on a 0-100 scale where 0 is no disability), with greater disability in the areas of *participation in community and society* (WHODAS subscale mean score of 44), *getting along with people* (WHODAS subscale mean score of 36), and *life activities* including household and paid work, school, and leisure (WHODAS subscale mean score of 35), areas upon which the Art Studios focuses. By the end of the study period, just over one-third of clients had completed one-year follow up assessments on the RAS, RSE, and WHODAS. These showed stability: there was no significant change on any of these scales, indicating that psychosocial recovery, self-esteem, and health/disability remained stable, potentially a reasonable outcome for a population whose illness is characterized by relapses or exacerbation of symptoms.

One year outcomes on the individualized outcome measure of occupational performance (COPM) were available for 59 clients. Functional issues identified by clients included returning to or maintaining leisure, recreational, physical, or creative activities; socializing and making friends; making art; and getting motivated to do self-care (brush teeth, bathe, get dressed, and out of the house). The COPM rates both *performance* ability and *satisfaction with performance*, generating a change score for each rating scale. Clients identified a total of 245 occupational performance issues, an average of 4 per client. The mean improvement in performance ratings was 1.5 points (on 10 point scale), and satisfaction with performance improved by 1.6 points. These are practical, meaningful and statistically significant gains. Not all identified issues showed improvement, but importantly, of the 148 issues that showed improved performance the average improvement was 3 points, and for the 130 issues that showed improved satisfaction with performance, the average improvement was 3.7 points. These are huge achievements in goal attainment for any population, but particularly for a clientele living with persistent mental illness.

This program evaluation is essentially a “before and after” study and does not have the rigor of a clinical trial where interventions are controlled and effectiveness measured against a comparator (such as usual care or alternative intervention) – clinical trials are also more expensive and best planned with the benefit of data such as that generated in this study. Study resources and timeline did not allow for economic analyses, but again, data are now available to help plan a future economic study.

Key Messages

Participants in the Art Studios program demonstrated stability in measures of psychosocial recovery, self-esteem, and health and disability status after one year. They showed large and meaningful improvements in occupational performance indicating goal attainment in practical life activities. Positive impact of Art Studio participation is immensely more apparent in narrative data, indicating that participants attribute their recovery to the learning, feedback, and environment provided by the Art Studios, enabling them to gain confidence and a sense of self-worth to move into increasingly more challenging roles and responsibilities and contribute to their community.

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1. Stoffel, V.C. (2011). Recovery, in Brown, C. & Stoffel, V.C. (eds.) *Occupational therapy in mental health: A vision for participation*. Philadelphia: F. A. Davis, pp. 3-16.
 2. VanLith, T., Schofield, M. J., & Fenner, P. (2013) Identifying the evidence-base for art-based practices and their potential benefit for mental health recovery: A critical review. *Disability & Rehabilitation*, 35 (16), pp. 1309–1323.

A Before and After Example from One Participant's Perspective

Before

Interviewer: How were you engaging in your communities around you before you started at the Art Studios?

Participant: I wasn't. I was isolating. I had one friend that I saw for lunch and my family. And that was it. There was no, no socializing, it was just me and my TV. And my knitting needles. It was like a jail.

(Client; Focus Group; 3/975)

After

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I took one class and I loved it...the atmosphere of this place just enthralled me. And I started volunteering and helping out...and coming to the member meetings and being involved. ...And then they asked if I'd teach a class and I said yes I would. And never in a million years did I ever dream that would happen. But it's all because of the support, the non-judgmental-ism, the encouragement, the feedback. You get feedback of all kinds. It's not always good feedback but you get it. It's a good learning tool. And **my life has changed 150% since I've been here.**

...My daughter is so thrilled with my improvement and how well I'm doing and how busy I am. I go swimming twice a week with a woman I met at [a mental health group]. I attend a wellness group. I belong to [a singing group]...**and I come here to the Art Studios to be challenged to be social, to be creative, and to give back. Because what they've given to me I can't even measure.** You know, it's immeasurable. It's really improved my whole well-being. I've cut back a lot of my meds, although I haven't been able to get any younger! (laughing)

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(Client; Focus Group; 3/186)