



'it keeps us alive you know'

EVALUATING THE EFFECT ON STAFF WELLBEING OF A REMOTE MUSIC FOR LIFE PROJECT

OVERVIEW

The following report provides an evaluative account of the remote Music for Life project comprising six one-hour sessions that were delivered to staff and residents of Vi and John Ruben's house in November and December 2020. As an inevitable consequence of the Covid-19 pandemic and its associated restrictions, these music sessions were delivered remotely by a group of musicians, via the video conferencing platform *Zoom* – however they were live, synchronous events. For participatory arts projects in care homes, this form of delivery has become increasingly common in the last 12 months and necessarily influences every aspect of the sessions for the musicians, care staff and residents alike, including their reception, delivery and ability to engage participants.

The following account is based on the researchers' attendance at two sessions, discussions with the staff who led and participated in these sessions, a focus group with the staff who took part in the music sessions and insights gleaned from a survey about wellbeing that the staff completed. We have also drawn on the musicians' reflections about each session. Our focus has been on the ways in which these music sessions have affected the staff and their wellbeing. The objectives were to evaluate the processes involved in delivering remote musical sessions and, where possible, to assess the outcomes of delivering this programme. Due to the extraordinary pressures on the staff and their time, it has been impractical to have follow-up discussions with the care staff so there is no longitudinal data. Nevertheless, this report does indicate some of the multifaceted ways in which music sessions have an 'in the moment' and even a cumulative effect on the wellbeing of the staff. We have been interested to examine the way in which care home staff define and experience wellbeing in conjunction with the ways that the sessions affect wellbeing.

The report opens with some wider contextual background concerning the role of music for people living with dementia and an overview of some of the ways in which wellbeing has been understood in relation to this group. The main body of the report comprises observations drawn from the workshops and interviews. The title of the report was inspired by a comment from one of the staff members who exclaimed that the sessions were helping to 'keep her alive'.

A NOTE ON DIRECT QUOTATIONS

Direct quotations from the care staff are in blue

Direct quotations from the musicians are in green



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SECTION 1: BACKGROUND

1.1 MUSIC FOR PEOPLE LIVING WITH DEMENTIA

In the absence of cures or effective pharmacological treatments for dementia, the inherent possibilities of the arts for transforming the lived experience of dementia and even their therapeutic potential for addressing these complex conditions are gaining widespread recognition. The arts have been shown to be effective for supporting the health, wellbeing and cognition of people living with dementia (Camic, Hulbert, & Kimmel, 2017, Young, Camic, & Tischler, 2016), for aiding communication (Gjengedal, Lykkeslet, Sørbo, & Sæther, 2013), for stimulating the residual creativity of those with dementia (Palmiero et al., 2012), as a means of educating carers (Kontos, Mitchell, Mistry, & Ballon, 2010; Zeilig, Poland, Fox, & Killick, 2015) and also for challenging public perceptions and prejudice about the dementia (Gregory & Windle, 2013; Hughes, 2014). There has been an essential growth in interest in the role of the arts for those living with advanced dementia (Crutch, Isaacs, & Rossor, 2001) and also a recognition of the need to privilege the perspectives of people living with dementia (McFadden, Frank, & Dyset, 2008; Zeilig, Killick, & Fox, 2014).

There is probably more evidence regarding the beneficial effects of making music and singing on mood and wellbeing than any other art form (as noted by Cutler in *Creatively Minded*, 2020 p.30). As a neurologist who works with people with dementia noted: '.....music is embedded in the fabric of human culture and identity' (Devere, 2017) and as such is one of the most fundamental and enduring artforms for people living with dementia and others. Music engages an extensive network of auditory, cognitive, motor, and emotional processing regions in the brain (Särkämö, 2017). Coupled with the fact that the emotional and cognitive impact of music is often well preserved for people with dementia, music is a powerful tool in the care and rehabilitation of many ageing-related neurological diseases. As the neurologist, Devere goes on to note: 'In a study comparing standard care to regular singing or music listening sessions over 10 weeks in 89 people with dementia (type not specified), music sessions improved general cognition (MMSE score), attention, and executive function compared to standard care' (2017, p.33).

Music in dementia care has predominantly been considered in community settings and amongst groups of people with mild to moderate dementia. A unique international overview of the most current research into the impacts of music in healthy ageing for people living with strokes and also with dementia is given by Särkämö (2018), and an original study by Daykin et al. (2017) contributes to understanding about how live, participatory music sessions can ameliorate hospital-based care for those with dementia.

Several recent studies have also addressed the area of participatory and co-creative music making for people living with dementia. These studies situate the activity within the theory of 'musicking' (Small 1998), which emphasises the relational nature of music making and states: 'The act of musicking establishes in the place where it is happening a set of relationships, and it is within those relationships that the meaning of the act lies.'



A recent review of qualitative literature on the subject identified four key benefits of music engagement for people living with dementia that link to wellbeing, namely taking part, being connected, affirming identity and immersion in the moment (Dowlen et al 2018.)

Indeed, a study of Music for Life itself as a model revealed that the project provides a 'multisensory communicative environment, allowing for verbal and nonverbal communicative actions, social interactional components and agency to develop over time.' (Claire et al 2019)

1.2 WELLBEING: NOTES AND QUERIES

A major concern for the Music for Life project concerns its effect on care staff and participant wellbeing. Wellbeing is a concept which pervades contemporary life. As a phrase, wellbeing has become ubiquitous, a portmanteau term encapsulating a range of complex physical, emotional, psychological, and spiritual factors. However, a shared understanding and definitions of what it is, are elusive. Indeed, despite the development of numerous scales and questionnaires, there is no consensus on how to measure wellbeing or even how to conceptualise it (Algar et al, 2014, Zeilig et al, 2019). Nonetheless, the imperative to improve wellbeing guides much public health and social policy and as noted, there has been increasing interest in evidencing the possible ways in which arts projects can positively affect participants' wellbeing.

The wellbeing of care home staff is an important focus due to the many challenges that confront this sector, including low pay, limited opportunities for career progression and professional development (as outlined by the Nuffield Trust, Oung et al, 2020). In addition, further challenges are linked with the nature of care home work, which is pressured, tends to be task oriented and allows little scope for meaningful interactions with residents (Hussein & Manthorpe, 2012, Windle et al, 2019, Zeilig et al, 2015). Individual care homes stress the importance of wellbeing for their staff and during the Covid-19 pandemic there has been increased focus on how care staff are managing their stress and anxiety, for instance the Social Care Institute for Excellence (SCIE) outlines practice examples to enable care homes to better support their staff¹. These include the following suggestions to support the wellbeing of care home staff:

- Staff benefit from regular and reliable support to maintain mental wellbeing, including time and space away from their everyday tasks.
- Staff should be offered the time and opportunity to share their concerns with colleagues and experienced care workers.

¹<https://www.scie.org.uk/care-providers/coronavirus-covid-19/care-homes/supported-living/staff-wellbeing> accessed 11th February 2021



- Black, Asian and Minority Ethnic (BAME) staff have been disproportionately affected by the Covid-19 pandemic and may well have suffered additional stress as a consequence. It is important this is considered when looking at their wellbeing and ways of supporting them that are targeted and specific.

The Music for Life project presents an opportunity to further develop understanding of the concept of wellbeing in relation to care home staff. Our recent work (Zeilig et al, 2019) proposes that an understanding of wellbeing must also take into account ‘illbeing’ which is a necessary part of living with dementia or indeed working with those who live with dementia. We are interested in the extent to which music and the arts can provide a context for this illbeing to be safely acknowledged and expressed, and for artists and others to express solidarity with those living with dementia.

Ideas and definitions of wellbeing are many, but include:

“a state of complete physical, mental and social wellbeing and not merely the absence of disease or infirmity”

WHO constitution, signed on 22 July 1946 by the representatives of 61 States and entered into force on 7 April 1948

“the state of being comfortable, healthy or happy”

Oxford English Dictionary

“Wellbeing is more than just happiness. As well as feeling satisfied and happy, wellbeing means developing as a person, being fulfilled, and making a contribution to the community” (Shah and Marks, 2004).

Increasingly, we are encouraged as individuals to take care of our own wellbeing. The “Five Ways to Wellbeing” put forward by the New Economics Foundation² include:

- connect - with the people around you, family, friends, colleagues and neighbours
- be active - go for a walk or a run, garden, play a game
- take notice - be curious and aware of the world around you
- keep learning - try a new recipe, learn a new language, set yourself a challenge
- give - do something nice for somebody, volunteer, join a community group.

Recent scholarship arising from arts projects with people with dementia suggest that adopting a more nuanced, relational, fluid and dynamic approach to understanding the pervasive concept of wellbeing might be more useful than seeing it as a completed state that

² https://issuu.com/neweconomicsfoundation/docs/five_ways_to_well-being?viewMode=presentation

accessed 23rd February 2020



can be achieved (Dodge et al, 2012, Zeilig, West, van der Byl Williams, 2018, Zeilig et al 2019). This concept of wellbeing as deeply individual and yet also relational has considerable promise in furthering understanding of how the arts when practised co-creatively might promote wellbeing.

This then, is the wider sociocultural context – one in which the associations between arts for health and wellbeing are increasingly emphasised, within which the Music for Life project is situated. This is connected with the socio-political context of the arts in health that relies on empirically evidenced medical models of health (White, 2014).

1.3 Details about the project, a summary of activity and participants

The project took place over a series of one-hour long sessions that happened once each week for six weeks. Sessions took place in the morning, with the musician team meeting together for an hour before each time. During this preparation time, they also met with the care staff who were taking part in the project. Each session of the project was also followed by an hour of reflection and evaluation for the musicians, and there were also opportunities for the musicians to meet with the staff again to share thoughts and learning. In advance of the six sessions with the residents of the care homes, the team of musicians met twice on their own to plan and prepare, and they also met together twice with the care staff.

The sessions took place in one of the lounges of the care home, and were attended by a total of 8 residents, all of whom were living with dementia. One member of the care staff, an activities co-ordinator, was present for all of the sessions, and took on the responsibility for setting up and managing the digital equipment that was being used for the project; this included a laptop linked to a TV monitor and a wide-angle web cam, giving a view of the whole group, and an iPad on a stand which was taken to individual residents to enable more intimate communication with the musicians. A Bluetooth speaker was also used, but this proved to be temperamental and so was not used for all sessions.

In addition to the activities coordinator, six other members of staff took part in the project, working as two teams of three, and were present on alternating weeks. As well as setting up the digital equipment needed, the staff were also responsible for setting up the room (a circle of chairs with a selection of Music for Life instruments arranged in the centre). During the session, they selected and passed instruments to the residents, played instruments themselves, took the iPad to individual residents, and supported communication between residents and the musicians. They also gave feedback and suggestions for the musicians during the sessions. The staff were also called upon to maintain the safety and privacy of the session, endeavouring to ensure that sessions were not disturbed or interrupted. It is worth noting that usually, Music for Life sessions take place in a separate dedicated space where maintaining the focus of the work is less challenging. However, under the circumstances for this project, it was agreed that asking the staff to bring residents to the space would have added additional pressure for the staff.



Details about the staff who attended the sessions were also gathered from the survey and show that the majority of the staff were aged between 40 and 55 years, there were 5 women and 2 men who participated and that they had all worked in care home settings for over 7 years. The majority of the care staff who answered this survey and who participated in the Music for Life sessions are black (some identify as black African, others as black British) one person is Asian and no-one is white.

SECTION 2: EVALUATION

2.1 A Note on Methods and the Survey

This has been a small-scale qualitative study, based on interviews, a focus group, reflective notes from the musicians and survey data. The interviews and focus group were transcribed and coded (as detailed below).

The survey was developed by Unmapped (see appendix) to be accessible and brief, and yet comprehensive. Above all, brevity was important due to the time constraints that care staff confront.

The questions were based on ONS survey data, the UCLA Loneliness scale and research by the New Economics Foundation, including ideas from recent projects that have explored wellbeing. Unmapped have also drawn on their experience using the Canterbury Wellbeing Scale (CWS).

We have not used a scale to measure wellbeing or any other similar tool. This is due to their tendency to capture very narrow measures of wellbeing whereas in this project we are more interested in a wider understanding of this concept.

Our focus has been on how the care staff themselves understand 'wellbeing': hence we have developed a survey designed to capture individual understandings - these could be seen as the 'tools' that we are using; they are based on our extensive experience in this area.

This in-depth evaluative piece of work is less about measuring wellbeing (a concept which is nebulous and hard to pin down numerically) but more about understanding how and to what extent the music sessions affect the wellbeing of the care home staff and connected with this, what wellbeing 'means' to the staff.



2.2 Survey data: Staff Perceptions of Wellbeing

The majority of our respondents are familiar with the concept of wellbeing (one person mentioned that it is common knowledge) and three people associate it with the care home context. One respondent (male) wrote that he had come across the term from 'true friends.' Otherwise, it seems to be mostly linked with the work environment and therefore with productivity. However, it is worth noting that one person had not heard the term wellbeing.

Another question asked staff to rate the extent to which they agreed with a range of statements concerning wellbeing. Each statement is drawn from existing theories and definitions of wellbeing, as described above. The responses indicate that overall, the staff broadly agreed with all of the statements given, with the majority of responses being 'agree' or 'strongly agree'. From this, we can conclude that the care staff's understanding of wellbeing is complex and nuanced. However, there are some interesting points to note:

- All respondents either agreed or strongly agreed with the statement 'My wellbeing is about being satisfied with life and having a sense of purpose'
- The strongest level of agreement was for the statement 'my wellbeing is about how I feel and function'
- One respondent disagreed with the statement 'My wellbeing is about my health and prosperity'
- Two respondents strongly disagreed with the statement 'My wellbeing is about the absence of ill health'

As will be seen later in this report, feedback from the staff indicates that the Music for Life project did enhance wellbeing for the staff in relation to these first two points, relating to experiencing a sense of purpose, and how one feels and functions.

A detailed breakdown of the responses to these questions can be seen in histograms on the following pages:



Unmapped

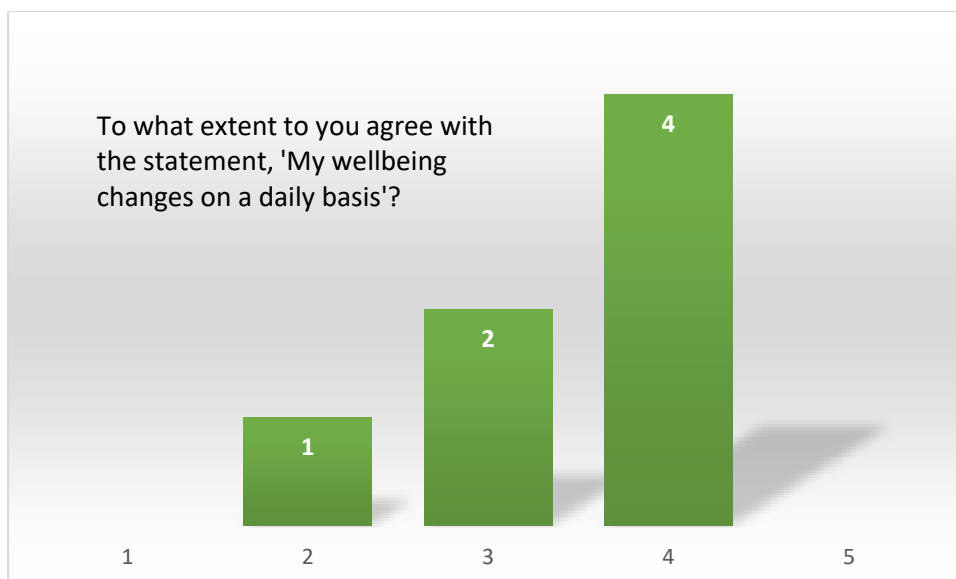
Horizontal axis: rating, where 1 = strongly disagree, 2 = disagree, 3 = neutral, 4 = agree, 5 = strongly agree

Vertical axis: number of responses

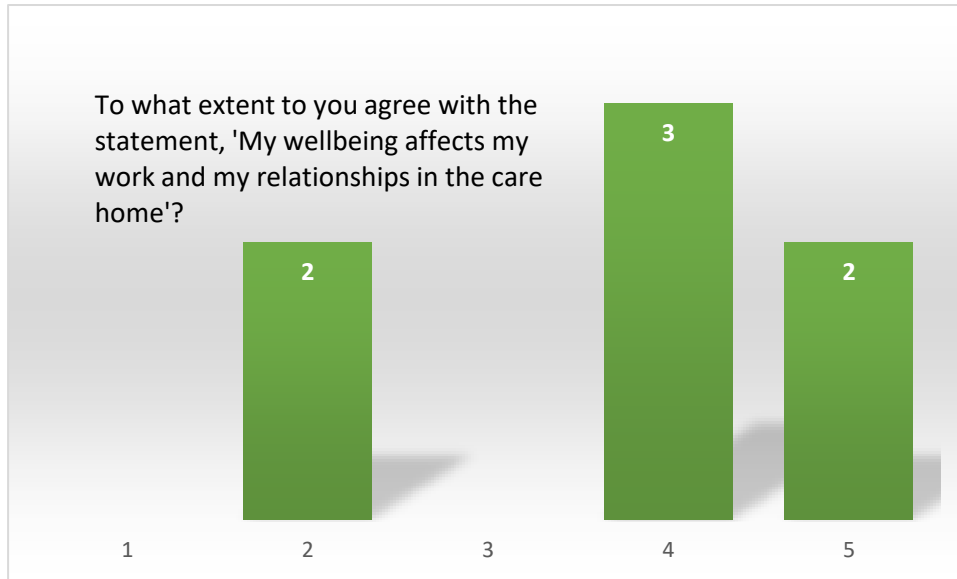




All of the responses to the question about the importance of wellbeing indicated that wellbeing is important to the care staff who took part, with six of the seven indicating that they considered it to be 'essential'.



The care staff were asked about the extent to which their wellbeing fluctuated on a daily basis. Responses to this statement were more mixed, with just over half the staff stating that they agreed with the statement, and the rest indicating that they felt neutral or disagreed. Overall, the notion that wellbeing is not a static state was evident.



The majority of the staff indicated that they were in agreement with the idea that wellbeing affects their work and relationships in the care home, however a significant proportion disagreed.

Finally, the survey presented a range of factors that have been stated in research and theories of wellbeing, and asked respondents to give them a rating relating to how important they are for the individual.

Again, the staff broadly indicated that they considered all of the factors to be important, but the areas where there is the most agreement relate to intrinsic feelings of purpose and worthwhile work, life satisfaction, the fulfilment of goals, feeling safe and secure and having positive working conditions. There was also a high level of agreement concerning the importance of good physical and mental health.

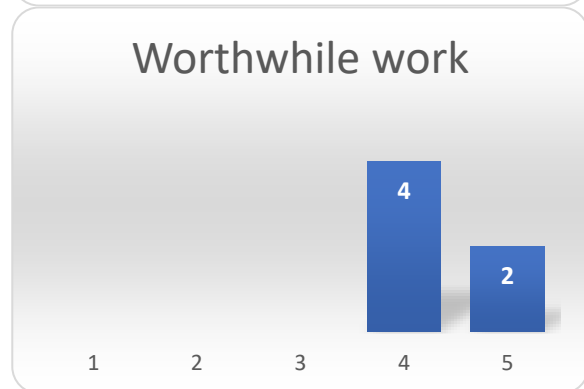
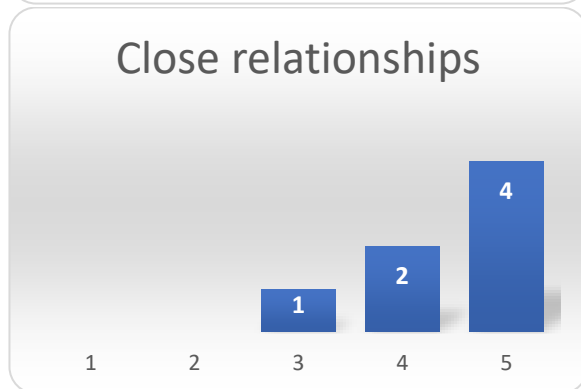
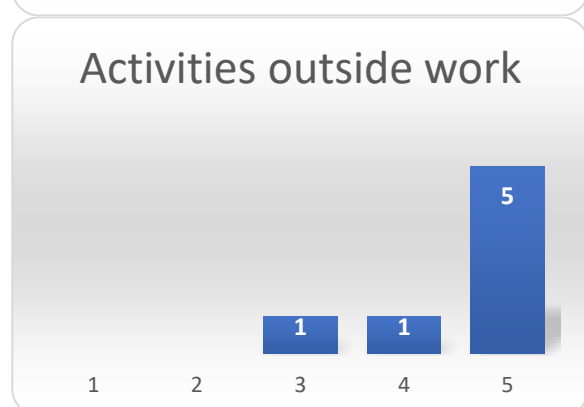
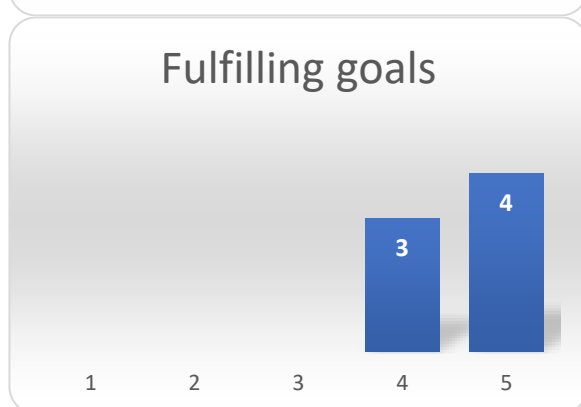
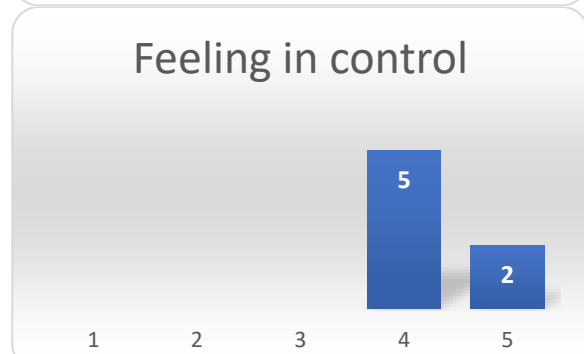
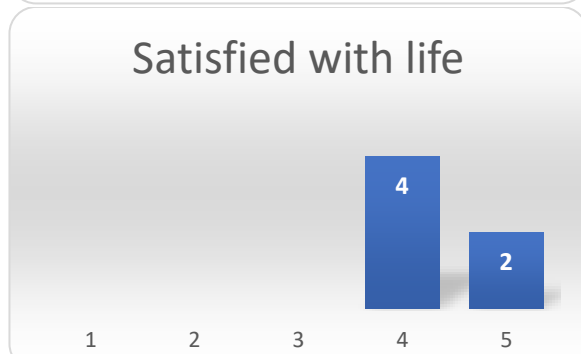
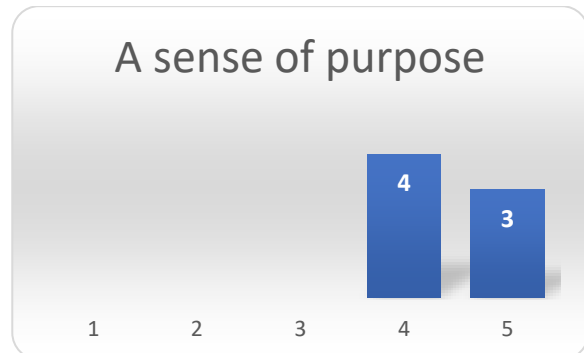
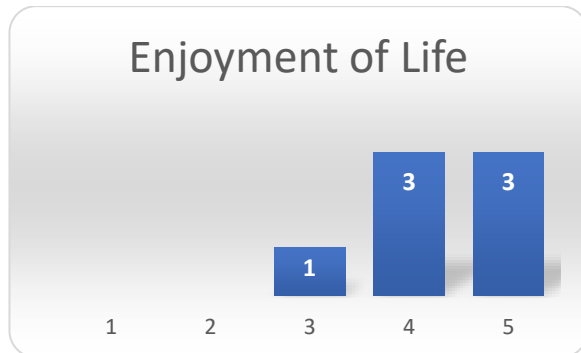
When asked about the importance of the Music for Life project in the focus groups, it was clear that in its ability to create a positive, calming and relaxing space for the staff, it could improve wellbeing. The project allowed the staff to slow down. One person explicitly comments on the pleasure of having professional musicians playing for them. The ability of the project to remind the staff about the importance of 'simple things' is also noteworthy.

Detailed analysis of the responses to this question can be seen in the following series of histograms:



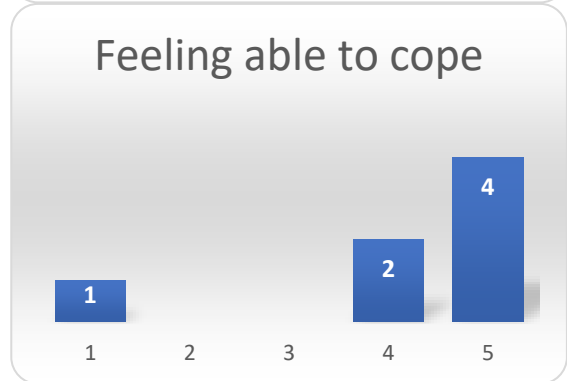
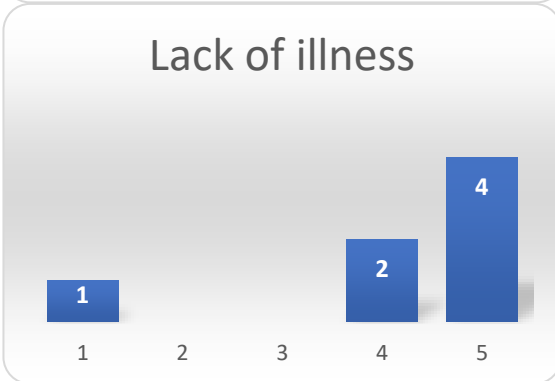
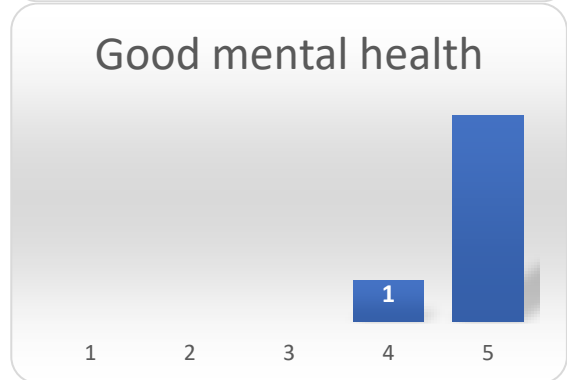
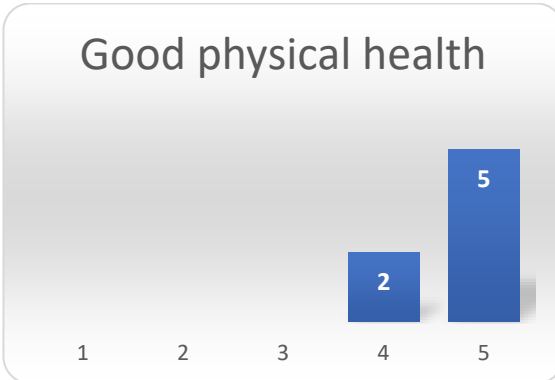
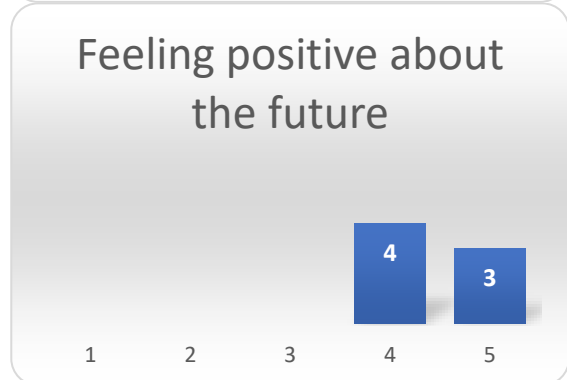
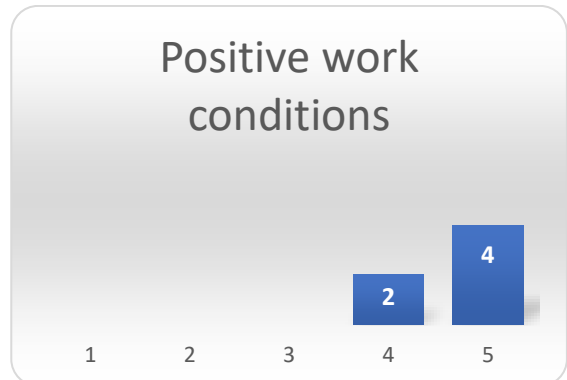
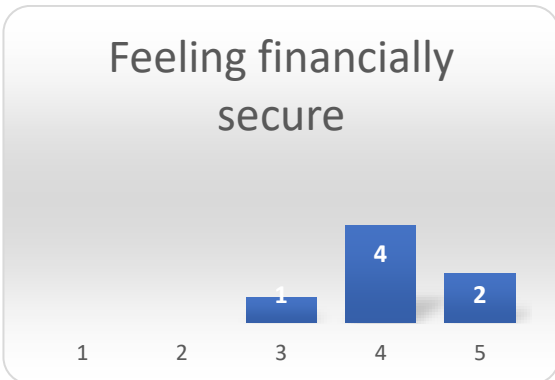
Vertical axis = number of responses

Horizontal axis: 1 = unimportant, 5 = essential





Unmapped





NB 7 surveys were completed but only 6 respondents answered questions 10 – 14*

All those who answered the question concerning how they improve their wellbeing revealed personal techniques for preserving their own wellbeing and in so doing demonstrated what they associate this concept with – mental health, physical health, the ability to relax and divert oneself (with music and singing old school songs). There is also an overall sense that wellbeing is also a personal responsibility, associated with ‘working on myself’.

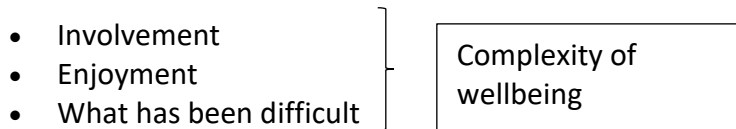
There is a need for the staff to have time and an actual space in which they are able to relax, rest and switch off whilst at work. This connects with other work (Zeilig et al, 2015) in which staff mentioned the lack of space where they could share experiences of the day. There is an impression that management could do more, and mention is made of support and need for staff to feel looked after. One person notes the possibility of having ‘some form of therapy’ (something which should be provided even during ‘normal’ times).

The staff identified a diversity of challenges to wellbeing in the workplace, including a lack of support, albeit ‘occasionally’, and structural issues such as long working hours which are connected with exhaustion. The difficulty of working with residents is also noted, and that it can be hard to manage when they are agitated. Challenges to staff wellbeing were understandably amplified by the ongoing Covid-19 pandemic. Their responses indicated the importance for the staff of being informed about the pandemic, and that this helps them to cope. It also comes through that the pandemic has increased people’s mental load and exhaustion levels, and this has been ‘disturbing’. There is an important detail that one member of staff noted that they hadn’t felt protected at the start of the pandemic.



2.3 How the Music for Life sessions affected staff wellbeing

The discussions and focus group that were held with the care staff, which took place in two stages to accommodate the staff according to their availability, were all recorded, transcribed and then coded by the researchers. In addition, the musicians' reflective notes were coded and included in this analysis. As in traditional qualitative research (Braun & Clarke 2006) in an iterative process, these codes were then collated into four main areas relating to staff wellbeing.



These areas overlap with and are contingent upon one another. Thus, for instance the involvement of the staff with the music sessions affected their enjoyment and wellbeing and similarly the difficulties that were experienced (with setting up and facilitating the remote delivery) impacted their enjoyment and wellbeing. Involvement, enjoyment and difficulties together contribute to the 'complexity of wellbeing' that is experienced by the care home staff.

Figure 1: Interconnection of themes



However, each of these themes are discussed separately below:



2.3.1 Involvement

Involvement relates to the extent to which the staff joined in with the sessions, their sense of agency within these sessions and how this active participation generated connections between them, the residents and the musicians, and consequently influenced their sense of wellbeing. Staff involvement with the sessions was physical, as they moved around the room to be with different residents or find instruments to play with, or to dance and sometimes to adjust the technology. However, involvement was also auditory and linked with their feelings of being engaged by the sessions.

Therefore, the music sessions actively involved the staff on a number of levels. The staff noted that this was both entertaining and helped support their resilience – keeping them going:

Because usually, when we're not working, we are just sitting down, you know, but this one is like, ... And we have to join in as well. It's really entertaining. Yeah. With all this madness going around this keeps us going. Yeah.

In addition, joining in with the sessions also prompted new experiences for the staff, as they engaged with unfamiliar instruments, both physically and audibly:

We have this, is it ocean drum or something like that? It's like you turn it and ah I love that one!

The music sessions enabled the staff to engage with each other and with their residents in different ways, so there were moments apart from the everyday routine of care work in which people danced and made music together:

This was a spritely and upbeat piece and C was dancing in the background – clearly a connection was made between him and A.

Joining in was also identified as important for the residents:

They're joining in with the music instrument. And that means they're all right, with what's going on. Yeah, I think so yeah.

Seeing the residents interact with music and instruments and not just 'sitting there watching TV' also has a palpable and positive influence on the staff. As one of the staff commented, her 'favourite moment' was knowing 'they're all joining in'. This indicates that staff wellbeing is closely linked with the wellbeing of the residents that they are working with. The ability for staff and residents alike to participate together in an activity, doing something active and creative is clearly supportive to their wellbeing.

The musicians' reflective notes clarify how they tried to explicitly involve the staff in each session. For instance, the musicians consciously attempted to give the staff 'agency' and 'control' over the sessions and in this way to ensure that they felt connected and integral to the event:

T asked if a member of staff wanted to have a go with the baton. ...T suggested F described what kind of music she'd like P to play – funky or gentle. F said 'something gentle'.



The musicians attempted to encourage ‘ownership’ and connection with the sessions. However, it is important to note that this was not always straightforward and at least one musician observed that due to the ‘limited amount of prep time’:

we did not convey our expectations of staff involvement clearly

However, where the staff had some sense of control and input and were therefore more connected with the sessions, this was also experienced as positive for their wellbeing.

2.3.2 Enjoyment and Play

Enjoyment is a critical component of what made the Music for Life sessions ‘work’ and this relates to the sessions being a change in the rhythm of the day and introducing new experiences such as the possibility of engaging with music and playing with unusual instruments:

You know, instead of doing the same old, we do something different. And music is always good for the soul.

The staff mentioned how much enjoyment they felt when watching the residents play music or participate in other ways during the sessions:

It keeps everybody awake, it’s like you know, sometimes they’re sitting there sleeping and all that, and this you know wakes them up, so yeah, it’s really entertaining.

.. this it seems they’re enjoying it. Because the music, you know, the different instruments and all that. Yeah they are really enjoying it.

I think there is some form of mood change. Yeah, it would have an effect because they like music, they light up, you can see the different reaction

Enjoyment then, can be understood as relational – something that is enhanced by knowing that others are also enjoying themselves at the same time.

The sessions also allowed the staff to play. Play is extremely important for children and adults alike, although opportunities for creative expression through play diminish for adults. As discussed cogently by Sennett (2018) the basis of play is engaging the imagination and having fun, something that these music sessions were able to facilitate. This was noted by several staff members:

It’s also the laugh and the fun that we have with Tony and Luke, and I think that’s the most important thing.

And:

It is more to do with the music but we’re also having fun and we’re also having a laugh with it.

The importance of play for children is well evidenced and increasingly it is recognised as something that is valuable for all others too. As noted by Whitebread (2012): ‘The value of play is increasingly recognised, by researchers and within the policy arena, for adults as well



as children, as the evidence mounts of its relationship with intellectual achievement and emotional well-being.'

As discussed elsewhere (Zeilig, West et al, 2018) play is an activity that has no directed or practical purpose and exists between imagination and the external world. Play has been described as opening up a space of trust and relaxation which then enables a 'creative reaching out' (Winnicott, 1971, p. 75). This experience of relaxation was also commented on in the focus groups:

I'm quite calm and relaxed, just going with the moment, going with the flow... Something we can relax and enjoy as well. It's good for staff as well.

It makes us relax. And I mean, just relax your mind and I mean turn yourself off what is going on around you and then focus your, refresh your mind in a way. That's one. Good one

This ability to relax through creative activity was reflected on as being especially valuable against the background of the ongoing pandemic and how this has affected the day-to-day task-based work of the care home staff:

Because what we've gone through in this pandemic...It is something that is life to us...to relax our mind and focus on what is ahead of us. That's what it's about because that's our wellbeing because you need something that can keep you going on every day. That's it

it was good to not focus on that (the pandemic), you know, not to be constantly reminded... So it was good to have a positive and productive, you know, session, which was good. And yeah, I find it very relaxing, and there's no pressure

Play and the relaxation that it encourages, has been cogently theorised as essential for emotional and psychological well-being and the maintenance of a sense of self (Winnicott, 1971). In this sense then, the sessions were invaluable for staff well-being.

2.3.3 The Complexity of Wellbeing

This broad theme covers ideas expressed by the staff and musicians of a sense of wellbeing as something that is fluctuating, relational and interdependent - an 'ecology of wellbeing'. It also encompasses a broad view of the nature of engagement and participation. These different but connected aspects of the same theme are outlined separately below:

An ecology of wellbeing

As has been mentioned already in this report, the idea of wellbeing as something that is relational stands in stark contrast to prevailing views that seem to fill contemporary media which highlight wellbeing as an individual imperative. One of the staff summed up the idea of wellbeing as being relational and contextual with these words:

your network of people...you're surrounding, because that can impact your wellbeing



Staff spoke about two factors often associated with wellbeing, sense of purpose and self-esteem, and how these connected with their roles as carers. This longer extract from the focus group with the staff illustrates this point well:

...how can I say...you know, made me feel more better. Better when I'm going this job because like...feed me, feed me inside...like I'm giving to my soul something to eat, then you feel great, really great. It's not for money...I don't enjoy that money. I don't have never enough. But made me feel really good here. So it's amazing thing for me.

The same staff member then went on to discuss the exchange that they felt takes place between themselves and the care home residents, and the way that this enhanced wellbeing in a reciprocal way:

Yeah. And I know, these guys, these clients. They need people like me. So yeah, I don't know for how long I will do it but at the moment I'm really happy to be here. I'm not going to do it all life because I [might do?] something else. But at the moment yeah. Really feeds me inside. We need something.

The insights from this member of staff demonstrate the extent to which she experiences her role as a carer as involving a symbiotic and mutual exchange, in which the 'carer' is also nurtured. Thus, wellbeing for her is not connected with an instrumental or financial exchange – on the contrary they explicitly state 'I don't enjoy the money'. The value for the care staff in this case, is associated with the knowledge that they are needed and this in turn 'feeds' them.

In the focus group, the staff spoke about the importance of their relationships with residents, saying that it was 'impossible' not to become attached. This stood in contrast to the training that they had received, which encouraged them to remain 'professional' and detached. There was a comment that the Music for Life project enhanced this sense of connection:

dementia is like you have to be very attached to your residents. And this hour makes you more attached.

It was felt that the Music for Life project provided an opportunity for the staff to feel supported in maintaining this relationship, providing an opportunity to be in relationship with their clients in a relaxed and calm way:

It's sort of a relaxing, because you're working with dementia, you need more, something that can calm you down, something that can make you relax, and reflect in what we are doing. they're doing. Because they, you are with them. So you have to be more relaxed

There were many comments from the staff that reflected the notion that they themselves experienced greater wellbeing through being able to facilitate experiences that enhanced the wellbeing of residents. Thus, wellbeing as involving an emotional / affective aspect which is supported by the Music for Life sessions, is evident. For example:

The best thing about it... they respond, and you know, they respond and it's lovely, you know, they interact with everything.



Yeah, and there are some activities that I can see some of the residents sleep through it. But this music is like they are all awake. Some will just walk away like S, but she was just sitting there like joining in. Yeah. It was really, really fun yeah to see that

Engagement and Participation

Another aspect of the sessions that was highlighted by the staff was that the approach of the musicians and the way of working allowed for a broad spectrum of ways for people to engage, respond and participate:

Individually it's um how you respond because at the moment, you know, they respond slowly, like S now is quite enjoying it. M enjoys it. And then you can see that they all have their bit you know, their part to play, even if it is a little

The free-flowing and improvisational nature of the sessions was valued by the staff:

They can all relate to music in their own individual way. And it has been also a very exploratory process as well, to see how some of the other client interact with the instrument and their curiosity around it as well

it was calm and nice. It is always a pleasure to see how residents respond to the music. It's engaging when staff see residents making a connection

Music itself as a medium for the activity was said to be important:

Because bingo, yeah, you're just calling out numbers, so it's not really having a long-lasting impact, whereas music for people living with dementia has always been an important aspect in their everyday. And everyone can sort of relate to it yeah in their own kind of way really. So, you can always touch someone in various way from the experience

The staff enjoyed seeing the clients exercise agency and find their own preferred ways to participate and express themselves. By the staff's own admission, their own wellbeing is partly dependent upon how 'successfully' they are able to support clients; witnessing these moments of creativity and engagement therefore serve to enhance the staff's own wellbeing. The flexibility and spontaneity of the approach taken in the Music for Life sessions facilitated this.

2.3.4 What has been difficult

Music for Life has developed a way of working in care settings over a period of 28 years. The practice has developed in the context of face-to-face workshops, and through musicians building their skills, knowledge and awareness through close contact with those living with dementia, care staff and each other. In the attempt to translate this practice to a remote practice using a video conferencing platform, there were inevitably some difficulties. In relation to the wellbeing of the staff, these difficulties included the challenge of operating the technology that was needed and maintaining good open communication between the staff and the musicians.



Staff and musicians alike reported that setting up and working with the digital technology presented difficulties and complications. On occasion these hitches and difficulties adversely affected the wellbeing of the staff. In the care home, the responsibility for this fell principally to the activities co-ordinator, and she spoke at length about the stress and anxiety this caused her, and that it took time away from the musical activity:

...all that wasted time wasted. Yeah, really annoying.

The technical bit which we can't do anything about. Yeah, yeah. And as a last session today, it really shone through. Yeah, so that was irritating, but we managed to at least have the last half an hour also filled with no more glitches but internet kind of consumes all the time,

This is the part I really don't like

The musicians were all aware of this in their reflective notes, for example:

The internet was not always kind to her and we had numerous occasions where the technology failed and we had to restart meetings, adjust settings and the like. but we were made aware halfway through the project that she was finding this responsibility very stressful.

The necessity of the musicians working remotely placed extra demands upon the staff alongside the set up and operation of the technology, a point that was also picked up by all of the musicians in their reflective notes. For example:

She (the activities coordinator) also took charge for most of the sessions of moving the tablet round the semicircle which allowed the musicians to see the faces of the residents clearly. Ultimately the responsibility for keeping the lines of communication open between musicians and the unit was with her.

I found that our relationship with and reliance on staff came into great focus whilst working remotely on Zoom. As we were not able to directly engage with the residents in person, we had to use the staff as our "translators" and our "helping hands" instead.

This comment is also interesting in that it throws light upon the complexity and challenge of negotiating equal, creative relationships between the musicians and the care staff when working remotely.

There appear also to have been some challenges in allowing for clear, open and honest communication between the staff and the musicians. The 'social awkwardness' of communicating over Zoom, compounded by unreliable internet connections and the time that staff had available to speak with the musicians may all be factors that contributed to this difficulty. One particular area of tension seems to have been a conflict between the musicians having to work together with the limitations of Zoom, and the staff's desire for rhythmic, energising music. As the musicians noted:



The time delay needs to be dealt with by the music being quite free and open rhythmically. For these reasons it is very difficult to play anything more upbeat and rhythmical together and the staff commented on this, asking for a different style of music. I felt we were compromised there.

This point came up in the focus group with the staff, who when asked for suggestions spoke of their desire for music that was rhythmic, upbeat and energised. Here, it could be useful for the musicians to try to find ways move beyond their concerns about the quality of the music making and to prioritise the perceived needs of the staff.

Further difficulties included issues about the sessions taking away from the staff's scheduled break time:

I don't know. Because I think from that time, from 11 til 12, it's a break for us. Because we start our break between 11 and 11.30, so that takes off our break. So yeah, it's that time from us, it takes off our break.



SECTION 3: CONCLUSIONS AND RECOMMENDATIONS

Wellbeing is now central to all aspects of contemporary life. Most commentators uncritically accept that wellbeing ameliorates health (physical and mental) and improves quality of life. Nonetheless, the ways in which it is understood and experienced by individuals is less well understood. Unmapped worked with care home staff to explore how they experience this complex concept, its relevance for their working life and how the Music for Life sessions have an effect on their wellbeing. Through their responses to the survey and their reflections and comments in the focus groups, it is clear that the care staff's experience and understanding of wellbeing is nuanced and differs from monolithic definitions that tend to dominate social, health and public policy. The staff worked with Unmapped to highlight the importance for them of several of these:

Feeling a sense of purpose, and that what one does is worthwhile

The staff's responses to the survey indicate that feeling a sense of purpose in their work is an important aspect of their wellbeing. For some of the staff, this even transcended the financial aspects of the job. The feedback in the focus groups is rich with testimony that indicates that the Music for Life sessions gave opportunities for the staff to interact in meaningful ways with residents and with each other, through the possibility of stepping outside of their usual roles and modes of interaction.

The relational aspect of wellbeing

In the focus groups, the staff spoke about the ways in which their own wellbeing is intertwined with that of the residents that they care for. They spoke often of the opportunities that the project had afforded them to witness enhanced wellbeing in the residents, through the broad range of possibilities that the project provides for engagement and participation. Furthermore, during the sessions the staff, residents and musicians were able to participate together, and with a greater equality than might usually be the case.

How one feels and functions on a daily basis

From the survey responses, it can be seen that the care staff consider their wellbeing is affected by the extent to which they feel able to cope, enjoy life, have opportunities for personal development, feel safe and secure, and experience good mental and physical health. Overwhelmingly, their comments in the focus group reveal that the Music for Life sessions provided opportunities for them to experience calm and respite which they found restorative and enabled them to continue in their work feeling refreshed and nourished. They also reported finding the sessions enjoyable, interesting and fun.

In conclusion, while there are certain factors that affect wellbeing that are beyond the reach of any arts project, for example financial security and working hours, many of the factors that the staff value as positively affecting wellbeing were active and effective in the Music for Life



project. Interestingly, these all resonate closely with the recent 'Great British Wellbeing Survey'³ which has demonstrated the importance of having meaning in one's life.

The factors which did not contribute to the staff's wellbeing, or even had a detrimental effect upon it, almost all relate to the reliance upon the digital technology that was necessary for the project to take place. The complexity of managing the equipment was often stressful, and at times could be said to have added additional burden and responsibility for them.

It seems that future iterations of a remote Music for Life project might benefit by considering the following:

Digital elements of the project

If the use of digital conferencing equipment and software is going to be an intrinsic element of the development of working remotely, then this could be viewed as being as important as other elements of the project, with musicians and care settings being supported through the provision of high-quality equipment, resources and training. This could alleviate the additional burden placed upon the care staff in managing this aspect of the project, and also the stress that musicians reported experiencing.

Communication with staff

Remote communication seemed to bring additional challenges concerning being able to reflect and evaluate with the staff, and to build relationships with them. In future iterations of a remote project, additional opportunities for this could be considered.

Exploring different approaches for remote delivery

Discussions with staff and the musicians' journals raised questions about whether alternative ways of working could be explored for remote delivery. Rather than attempting to replicate the format of the project sessions, it was suggested that the values, which are well developed and understood by the team, could be preserved whilst exploring alternative ways of working that might be able to work more effectively in the face of the challenges presented. Some additional time for the musicians to research and develop these approaches could be beneficial.

³ <https://www.bbc.co.uk/programmes/articles/4sC7RZ6Htj0cS1Nyrw0rXij/the-great-british-wellbeing-survey>



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INFORMATION ABOUT AUTHORS

Social gerontologist Hannah Zeilig and musician Julian West first met in 2014, and quickly established a shared interest in the role that creativity and the Arts might have in advancing understanding about dementia. Drawing on their combined individual experiences of working creatively with people living with dementia, they founded Unmapped, a transdisciplinary group of researchers dedicated to academic and artistic experimentation in order to find new ways of thinking. They were invited to take up leadership roles in Created Out of Mind, recipients of Wellcome's prestigious Hub Award from 2016-18. Here, they broke new ground in their exploration of co-creativity and the possibilities that might exist in adopting this approach when working with people living with dementia. They are currently working with [Culture Box](#), a research study promoting social interaction and public health through the arts in the time of Covid-19. They are also leading an ESRC funded research project, alongside colleagues in Japan, [The Arts and Dementia: how might the arts contribute to the creation of more inclusive ageing societies?](#)

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