ON THE MAP:
ARTS & HEALTH IN BC

Final Report and Inventory of Arts & Health Initiatives in British Columbia | April 2015
On The Map: Arts & Health in BC was funded by Arts Health BC.
Arts Health BC is a not for profit organization that champions participation and engagement in the arts as a path to improved health, healing and wellbeing for all British Columbians. As the founding community partner of Arts Health Network Canada, Arts Health BC promotes the field of arts & health in BC, through outreach and education, engagement, collaboration and professional development.
Contact: admin@artshealthbc.ca
ACKNOWLEDGEMENTS

ARTS HEALTH BC PROJECT TEAM

▶ Kira Tozer | MPH | Project Manager and Lead Author
▶ Erica Corber | MPH | Project Assistant
▶ Zara Contractor | MAA | Communications and Design
▶ Sam Lui | B.AS | Web Support and Map Design
▶ Lori Baxter | MBA | Management Consultant
▶ Nicki Kahnamoui | MA | (Former) Executive Director

ADVISORY COMMITTEE

Ken Blackburn, BFA, MFA | Director, Campbell River Arts Council, Campbell River
Joan Bottorff, PhD, RN | Professor, School of Nursing, UBC Okanagan, Kelowna
Belinda Boyd | Community Engagement Leader, Vancouver Coastal Health, Vancouver
Mary Chernoff, Dipl. I.D. | Principal, In-House Design Services Ltd, New Westminster
Sarah DeLeeuw, PhD | Research Director, Health Arts Research Centre, Prince George
Sana Fakih, MPH | Leader Diversity Education, Fraser Health Authority, Surrey
Bev Holmes, PhD | Vice President, Research and Impact, Michael Smith Foundation for Health Research, Vancouver
Vicki Kelly, PhD | Arts Health BC Board Member, Burnaby
Guenther Kruger, PhD | Burnaby
Monique Lacerte-Roth, BA | Community Arts Development and Partnerships Officer, BC Arts Council, Victoria
Lynda LeFleur | Arts Health BC Board Member, Castlegar
Sue Popesku | Arts Health BC Board Member, Fort St John
Suzanne Strutt | CEO, BC Recreation and Parks Association, Vancouver

SUGGESTED CITATION

# TABLE OF CONTENTS

- **Acknowledgements** ................................................................. (i)
- **Executive Summary** .............................................................. 01
- **Introduction** ........................................................................... 02
- **Methods** ................................................................................ 05
- **Results** .................................................................................. 09
  - General .................................................................................... 09
  - Geography ............................................................................... 12
  - Art Modalities .......................................................................... 14
  - Administrators and Facilitators ............................................... 16
  - Funding ..................................................................................... 18
  - Research Initiatives .................................................................. 22
  - Frameworks, Philosophies and Paradigms ............................... 23
  - Motivations ............................................................................... 25
  - Challenges ............................................................................... 28
- **Discussion/Next Steps** ......................................................... 32
- **Final Thoughts** ......................................................................... 35
- **Appendix 1** – OTM Initiative Profiles ................................... 36
- **Appendix 2** – OTM Initiatives Listed by Region ....................... 187
- **Appendix 3** – The Survey .......................................................... 195
- **Appendix 4** – Additional Arts & Health Initiatives .................. 205
- **Appendix 5** – Additional Directories ....................................... 211
EXECUTIVE SUMMARY

“Art has the power to inspire, the power to heal, the power to transform, to rehabilitate, to bear witness, and to make us believe that there are better days ahead.”

- Michaëlle Jean, former Governor General of Canada

THE LAST DECADE has seen a burgeoning of arts & health activity across Canada. In hospitals, classrooms, community centres, prisons, parks and galleries, more and more Canadians are embracing the notion that the arts have a role to play in health, healing and wellbeing. Further, the arts provide an innovative avenue to explore personal, social and environmental factors that influence the health of individuals, populations and the sustainability of the health care system. However, despite growing interest and awareness, there remains a lack of comprehensive information on the scope, frequency and location of arts & health activities.

To address this information gap, Arts Health BC launched On The Map: Arts & Health in BC, a survey-based mapping project to identify arts & health activity in an effort to provide a more complete picture of this growing sector. In the fall of 2014 an online survey was widely distributed to administrators and facilitators of arts & health programs, projects, events and research studies. In total, 127 eligible responses were received from a variety of arts & health initiatives occurring in health care, health professional education, community and research settings from all corners of the province.

This report includes background information on arts & health, a summary of the OTM survey methodology, results of the survey including information on the geographic location of arts & health initiatives in BC, art modalities employed, funding, facilitators, frameworks and paradigms, motivations and challenges, a discussion of next steps, and a directory of the participating initiatives, including a one page profile and contact information (see Appendix 1).
IN 2005, CHAMPIONS FROM the arts, health and social service sectors from across Canada met in Vancouver at the first ever Canadian Forum on Arts & Health. The group agreed that while “arts & health activities in British Columbia and Canada were growing, they were still little recognized and their important contributions were not yet well known or appreciated.”1 Further, they noted that practitioners and researchers in arts & health “often worked in isolation, without the knowledge or support from others doing similar work that could enhance their efforts.”2 They also noted the lack of a current and comprehensive picture of the types and level of arts & health activity across the country. To address these gaps, the group called for the creation of a network as a way to stay in touch, have a point of contact to meet others in the country involved in arts & health work, and to be able to learn about, and learn from, others’ initiatives and research.

The connections and momentum that grew from this Forum led to the eventual creation of two organizations in 2010, Arts Health Network Canada and Arts Health BC. The organizations work, at the national and provincial levels respectively, to champion engagement in the arts as a path to improved health, healing & wellbeing.

The decade following the first arts & health Forum has seen a burgeoning of arts & health activity across Canada. In hospitals, classrooms, community centres, prisons, parks and galleries, more and more Canadians are embracing the notion that the arts have a role to play in health, healing and wellbeing, and provide an innovative avenue to explore personal, social and environmental factors that influence the health of individuals, populations and the sustainability of the health care system.

However, despite growing interest and awareness, there remains a lack of comprehensive information on type, level and location of arts & health activities. To address this information gap, Arts Health BC launched On The Map: Arts & Health in BC (OTM), a province-wide mapping project to identify arts & health initiatives, provide a more complete picture of this emerging and growing sector, and turn up the volume on the conversation about arts & health in British Columbia. OTM aims to increase the profile of arts & health initiatives in BC, create new opportunities for individuals and organizations to speak about their projects, encourage knowledge and resource sharing among like-minded but perhaps geographically dispersed organizations and practitioners, encourage partnerships and build the overall capacity of the arts & health sector in BC.

---

WHAT IS ART?
The OTM project adopted a very broad definition of art and welcomed any creative activity or product, including but not limited to: visual arts, performing arts, literary arts, media arts, and design.

WHAT IS HEALTH?
The OTM project embraced a definition of health put forward by the World Health Organization: "a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity." This definition acknowledges a very broad concept of health that includes positive wellbeing and flourishing for all. Further, the OTM project acknowledged the social determinants of health (SDOH), the living conditions and experiences that shape and influence health, and invited submissions from projects that related to the SDOH, as well as more traditionally acknowledged constructs of health.

WHAT IS ARTS & HEALTH?
Arts & health is “a growing international field that embraces many forms of art to promote health and prevent disease in individuals and communities, enhance health service delivery and enrich research inquiry.” There is a growing international body of literature that both describes and studies arts & health, much of which can be found in Arts Health BC’s literature repository on Mendeley. (https://www.mendeley.com/groups/3687871/arts-health-bc-literature-repository/)

Arts & health is a complex and nuanced sector and Arts Health BC does not endeavor to dictate, shape or mold how it is understood, explained or practiced. Instead, the organization works to create spaces, platforms and at times frameworks for discussing, describing and ultimately sharing the many ways that arts and health can intersect to support health, healing and wellbeing. To that end, Arts Health BC often refers to the six themes or subfields of arts & health put forward by Arts Health Network Canada: recreational arts; arts in health care settings; community arts, health promotion and prevention; arts-based health research; arts-based health communication; and medical humanities.

---

The scope of the OTM project was further refined to focus on four specific streams:

**Arts in Health Care**
This category intended to capture initiatives taking place within or in direct partnership with health care facilities/institutes: health authorities, hospitals, hospices, residential care homes, community clinics, doctor’s offices, etc. Initiatives may include creative arts therapy programs (music, art, drama, dance/movement, play, etc.) for patients/clients; participatory art-making opportunities, performances or art exhibits within health care settings for patients, families and staff to enjoy; the use of art and design principles in the construction of facilities or delivery of programs; and therapeutic gardens, public art works, etc.

**Arts in Health Research**
This category intended to capture health research endeavors where the arts are used as a methodology, a tool to collect and/or analyze data, an intervention with a patient or community group, or as a way to share/communicate research findings.

**Arts in Health Professionals’ Education**
This category intended to capture training programs for health care professionals in post-secondary institutions or continuing education forums that include a curricular or extra-curricular creative arts component. Although such activities are most often seen in medical schools and referred to as “medical humanities,” when applied more broadly as “health humanities” the arts can also help learners in other disciplines to develop or improve skills related to observation, communication, reflection and empathy. This category also captures schools and training programs for creative arts therapies.

**Arts & Health in Community**
This category intended to capture arts & health activities not captured by one of the three institutional settings noted above. These “community settings” might include professional arts organizations, not for profit organizations, community recreation centres, parks, libraries, homes, work places, municipal/provincial governments, etc.

---

8. Bygren LO, Konstaan BB, Johansson S-E. Attendance at cultural events, reading books or periodicals, and making music or singing in a choir as determinants for survival: Swedish interview survey of living conditions. BMJ. 1996;313(7072):1577-1580.
METHODS

In an effort to manage the scope of this project and create a current and relevant directory, the following eligibility criteria were established prior to the survey launch:

ELIGIBILITY CRITERIA

INTENTIONAL RELATIONSHIP BETWEEN ART & HEALTH
For the OTM project, “arts & health” initiatives refer to projects, programs, research and events where there exists an intentional relationship between arts and health, healing or wellbeing. That “intentional relationship” may have to do with the initiative’s participants, setting, goals or the epistemology informing the work. Further, the concept of “health” may include positive wellbeing, prevention, treatment, therapy, illness, disease, or the social determinants of health.

INITIATIVES NOT INDIVIDUALS
The word “initiative” was used in an attempt to capture various arts & health activities including: programs, projects, events, research, group practices, etc. OTM set out to identify initiatives as opposed to general information about an individual or organization’s services. While individuals or organizations were encouraged to respond to the survey regarding their initiatives, submissions re: services for hire (etc.) were discouraged.

Note: Although a scan of arts & health practitioners was beyond the scope of the OTM project, many arts councils and professional associations maintain directories of individuals who are available for hire (see Appendix 5).

TIME FRAME
OTM included initiatives that are ongoing, currently operating, or were operating as recently as September 2012.
SURVEY DESIGN AND DATA COLLECTION

SURVEY DEVELOPMENT
The survey questions were developed by the project team based on similar arts & health surveys,9,10,11 from other jurisdictions. Additional questions were added to generate specific information about each initiative to create profile summaries (see Appendix 1). The survey was piloted with a group of 10 arts & health champions in July/August 2014, shared with the Advisory Committee, and revised based on feedback regarding content, language and presentation.

The final survey (see Appendix 3) included approximately 30 questions (stream dependent) and on average, took respondents 37 minutes to complete.

DATA COLLECTION AND STORAGE
Fluid Surveys, a sophisticated online survey program, was selected as the primary data collection tool due to its compliance with Canadian privacy laws and assurance that data collected remains in servers within Canada.

CONFIDENTIALITY AND CONSENT
A consent page was embedded after the landing page on the online survey. The consent page, as well as notifications embedded throughout the survey, informed respondents that answers collected in the survey would be included in the On the Map final report, which would be made available online and distributed widely. The consent page and notifications also explained that profile summaries would be posted to the Arts Health Network Canada website. The top of each survey page indicated if responses to questions on that page would be reported verbatim and associated with the specific initiative, or, in aggregate form only. IP addresses were not collected.

The consent page reiterated that participation in the survey was entirely voluntary and that respondents would be free to withdraw at any time. By clicking "Next" and continuing with the survey, participants agreed that consent had been given.

As a final check, all profile summaries were emailed to the survey respondents, prior to publication, to allow for a final proof and edit if necessary.

---

9. Art Bridges Profile Directory available at www.artbridges.ca/community/community_map
10. Mapping the Arts & Health 2010: An Inventory of Initiatives and Resources. Alberta Foundation for the Arts. Available at: www.affta.ab.ca/Arts-In-Alberta/Research-and-Publications
RECRUITMENT AND PROMOTION

SURVEY RESPONDENTS
The intended respondents for the survey were practitioners, administrators, educators, artists and/or researchers who lead arts & health activities in BC. Recruitment of survey respondents relied on the distribution of promotional emails, social media posts and articles in various organizations’ e-newsletters. This passive dissemination was bolstered by the strategic engagement of “endorsers” within the arts, health or recreation sectors, other “champions” within the arts & health community in BC, as well as “targeted outreach.”

► ENDORSERS – Individuals with administrative oversight of organizations that house arts & health initiatives (health authorities, arts councils, medical schools, etc.) were approached by Arts Health BC and asked to email a link to the survey to their affiliated programs/projects/members, under their own signature, encouraging participation; and/or mention the OTM project in their organization’s newsletter.

► CHAMPION ENGAGEMENT – The survey link was also sent to well-known champions/leaders in the BC arts & health community, with an additional request that the survey link be forwarded to others in their networks who may wish to participate, and/or, that they suggest names for Arts Health BC to follow up with.

► TARGETED OUTREACH AND INVITATIONS - In addition to relying on the support and reach of “endorsers” and “champions,” the survey was sent to individuals known to lead arts & health initiatives, and organizations of particular interest to OTM; for example, residential care homes, research institutions, and not for profit agencies. Information was emailed to such facilities/organizations with the request that they respond to the survey if interested, and/or forward the survey to any individual within the organization responsible for arts & health work, and/or, to include a short blurb about the survey in an upcoming newsletter.

DATA ANALYSIS

Survey data was reviewed by two members of the project team for eligibility and completeness and uploaded to Microsoft Excel for data management. Of the 136 complete responses received, 127 met inclusion criteria. Descriptive statistics were calculated using Microsoft Excel. Responses to the open-ended questions around frameworks/paradigms, motivations and challenges, were coded, categorized and eventually grouped into themes using paper-based analysis.
# Project Timeline

<table>
<thead>
<tr>
<th>Period</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jan - Jun 2014</td>
<td>Planning and Proposal Development</td>
</tr>
<tr>
<td>Jul - Aug 2014</td>
<td>Pilot Survey</td>
</tr>
<tr>
<td>Sep - Dec 2014</td>
<td>Data Collection</td>
</tr>
<tr>
<td></td>
<td>Survey open (Sept 22 – Dec 19)</td>
</tr>
<tr>
<td>Jan 2015</td>
<td>Data Analysis</td>
</tr>
<tr>
<td>Feb - Mar 2015</td>
<td>Report and Map Development</td>
</tr>
<tr>
<td>Apr 2015</td>
<td>Report Release</td>
</tr>
</tbody>
</table>
In total, 127 complete responses were received that met eligibility requirements. The majority of the initiatives fell within the “Community-Based Arts and Health” category and were ongoing as opposed to a fixed length.

**FIGURE 1: CATEGORY/STREAM**

- Community: 85 (67%)
- Health Professional Education: 10 (8%)
- Research: 12 (9%)
- Health Care: 20 (16%)

**FIGURE 2: TIME FRAME - FIXED LENGTH VS ONGOING**

Number of Initiatives
PARTNERSHIPS

More than half of all initiatives noted formal partnerships, often with more than one partner, illustrating the interdisciplinary and multi-sectorial nature of that arts & health.

FIGURE 3: PARTNERSHIPS

WEB PRESENCE

Over 75% of initiatives have a website, or pages on a parent organization's website specific to the initiative. Around half of the initiatives have a social media presence via Facebook (53%) and/or Twitter (43%).

FIGURE 4: WEB PRESENCE
Evaluation, the need for it and the "right" way to do it, is a frequently debated subject in the arts & health sector. When asked about evaluation, only 25% noted that their initiatives had been evaluated. Of the majority (~75%) who reported their initiatives had not been evaluated, they weren't sure, or it wasn't applicable, ~20% indicated they plan to evaluate their initiatives in the future.

Note: Initiatives often supplied multiple participant descriptors.

FIGURE 5: EVALUATION

| No: 40 initiatives |
| Yes: 31 initiatives |
| Not Sure: 17 initiatives |
| N/A: 18 initiatives |
| Plan to in the future: 21 initiatives |

FIGURE 6: PARTICIPANT DESCRIPTORS

Note: Initiatives often supplied multiple participant descriptors.
Initiatives were submitted from across the province; most frequently from the lower mainland, southern Vancouver Island and the Okanagan. Although data is displayed via Health Authority regions and Health Service Delivery Area boundaries, this does not imply that initiatives are formally affiliated with the HA or HSDA that they fall within. Please note that many initiatives take place in more than one region of the province.
Initiatives that identified as falling within the Community stream were asked to describe the types of facilities they operate within. The most common locations were community/recreation centres, arts and cultural spaces (galleries, theatres, etc.), schools and health care facilities.
ART MODALITIES

Note: The majority of initiatives noted more than one art modality.

*Note: Although a number of respondents indicated their initiative included one of the creative arts therapies, many of them did not report a professional creative arts therapist as the facilitator; therefore, these numbers should be interpreted with caution.

FIGURE 11: ART MODALITY - ALL STREAMS

FIGURE 12 - PART A: ART MODALITY - INDIVIDUAL STREAMS
FIGURE 12 - PART B: ART MODALITY - INDIVIDUAL STREAMS

ART MODALITY - TOTALS

<table>
<thead>
<tr>
<th>Creative Arts Therapies</th>
<th>65</th>
</tr>
</thead>
<tbody>
<tr>
<td>Music Therapy</td>
<td>21</td>
</tr>
<tr>
<td>Art Therapy</td>
<td>20</td>
</tr>
<tr>
<td>Drama Therapy</td>
<td>8</td>
</tr>
<tr>
<td>Dance/Movement Therapy</td>
<td>7</td>
</tr>
<tr>
<td>Play Therapy</td>
<td>4</td>
</tr>
<tr>
<td>Photo Therapy</td>
<td>3</td>
</tr>
<tr>
<td>Poetry/Bibliotherapy</td>
<td>2</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Design</th>
<th>24</th>
</tr>
</thead>
<tbody>
<tr>
<td>Graphic Design</td>
<td>16</td>
</tr>
<tr>
<td>Clothing Textiles</td>
<td>2</td>
</tr>
<tr>
<td>Landscape/Gardening</td>
<td>2</td>
</tr>
<tr>
<td>Architecture</td>
<td>1</td>
</tr>
<tr>
<td>Industrial Design</td>
<td>1</td>
</tr>
<tr>
<td>Interaction Design</td>
<td>1</td>
</tr>
<tr>
<td>Interior Design</td>
<td>1</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Literary Arts</th>
<th>42</th>
</tr>
</thead>
<tbody>
<tr>
<td>Writing</td>
<td>18</td>
</tr>
<tr>
<td>Poetry</td>
<td>12</td>
</tr>
<tr>
<td>Reading/Literacy</td>
<td>10</td>
</tr>
<tr>
<td>Graphic Novels/Comics</td>
<td>2</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Performing Arts</th>
<th>154</th>
</tr>
</thead>
<tbody>
<tr>
<td>Drama/Theatre</td>
<td>34</td>
</tr>
<tr>
<td>Music</td>
<td>30</td>
</tr>
<tr>
<td>Poetry/Storytelling</td>
<td>30</td>
</tr>
<tr>
<td>Singing</td>
<td>28</td>
</tr>
<tr>
<td>Dance/Movement</td>
<td>20</td>
</tr>
<tr>
<td>Comedy</td>
<td>7</td>
</tr>
<tr>
<td>Clowning</td>
<td>4</td>
</tr>
<tr>
<td>Circus Arts</td>
<td>1</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Media Arts</th>
<th>76</th>
</tr>
</thead>
<tbody>
<tr>
<td>Film/Video</td>
<td>29</td>
</tr>
<tr>
<td>Digital/Electronic</td>
<td>25</td>
</tr>
<tr>
<td>Multimedia</td>
<td>16</td>
</tr>
<tr>
<td>Television</td>
<td>4</td>
</tr>
<tr>
<td>Creative Use of Social Media</td>
<td>1</td>
</tr>
<tr>
<td>Gamification</td>
<td>1</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Visual Arts</th>
<th>271</th>
</tr>
</thead>
<tbody>
<tr>
<td>Painting</td>
<td>41</td>
</tr>
<tr>
<td>Mixed Media</td>
<td>36</td>
</tr>
<tr>
<td>Photography</td>
<td>33</td>
</tr>
<tr>
<td>Drawing</td>
<td>32</td>
</tr>
<tr>
<td>Colour Use</td>
<td>23</td>
</tr>
<tr>
<td>Crafts</td>
<td>23</td>
</tr>
<tr>
<td>Sculpture</td>
<td>16</td>
</tr>
<tr>
<td>Fiber Art</td>
<td>15</td>
</tr>
<tr>
<td>Printmaking</td>
<td>14</td>
</tr>
<tr>
<td>Jewelry</td>
<td>10</td>
</tr>
<tr>
<td>Ceramics</td>
<td>9</td>
</tr>
<tr>
<td>Glass</td>
<td>5</td>
</tr>
<tr>
<td>Culinary Arts</td>
<td>4</td>
</tr>
<tr>
<td>Drum Making</td>
<td>2</td>
</tr>
<tr>
<td>Metal Working</td>
<td>2</td>
</tr>
<tr>
<td>Body Mapping</td>
<td>1</td>
</tr>
<tr>
<td>Carving</td>
<td>1</td>
</tr>
<tr>
<td>Games</td>
<td>1</td>
</tr>
<tr>
<td>Installation</td>
<td>1</td>
</tr>
<tr>
<td>Murals</td>
<td>1</td>
</tr>
<tr>
<td>Upcycled Ethical Arts</td>
<td>1</td>
</tr>
</tbody>
</table>

| All Art Modalities      | 11  |
ADMINISTRATORS AND FACILITATORS

Facilitators
With regards to those who facilitate/lead/does the work of the submitted arts & health initiatives, the largest group of facilitators is professional artists.

Note: Many initiatives reported more than one type of facilitator, and the qualifications/experience of the volunteers is unknown.

FIGURE 13: FACILITATORS

FACILITATORS - TOTALS

OTHER CREATIVE PROFESSIONALS 35
Expressive Arts Facilitator 19
Designers 11
Arts Administrator/Producer 2
Applied Theatre Practitioner 1
Cooking Instructors 1
Yoga Instructor 1

CREATIVE ARTS THERAPISTS 24
Music Therapist 9
Art Therapist 6
Not Specified 5
Many/Multi 3
Drama Therapist 1

VOLUNTEERS 36
### Facilitators - Totals [Contd.]

<table>
<thead>
<tr>
<th>Artists</th>
<th>95</th>
</tr>
</thead>
<tbody>
<tr>
<td>Visual Artist</td>
<td>23</td>
</tr>
<tr>
<td>Not Specified</td>
<td>16</td>
</tr>
<tr>
<td>Musician</td>
<td>14</td>
</tr>
<tr>
<td>Filmmaker</td>
<td>9</td>
</tr>
<tr>
<td>Director/Actor/Theatre Pro</td>
<td>9</td>
</tr>
<tr>
<td>Photographer</td>
<td>7</td>
</tr>
<tr>
<td>Dancer</td>
<td>6</td>
</tr>
<tr>
<td>Many (5+)</td>
<td>6</td>
</tr>
<tr>
<td>Writer</td>
<td>4</td>
</tr>
<tr>
<td>Choral Conductor</td>
<td>1</td>
</tr>
<tr>
<td>Comedian</td>
<td>1</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Health Care Professionals</th>
<th>46</th>
</tr>
</thead>
<tbody>
<tr>
<td>Other</td>
<td>6</td>
</tr>
<tr>
<td>Physician</td>
<td>6</td>
</tr>
<tr>
<td>Child Life Specialist</td>
<td>5</td>
</tr>
<tr>
<td>Counsellor</td>
<td>5</td>
</tr>
<tr>
<td>Recreation Therapist</td>
<td>5</td>
</tr>
<tr>
<td>All</td>
<td>4</td>
</tr>
<tr>
<td>Nurse</td>
<td>4</td>
</tr>
<tr>
<td>Occupational Therapist</td>
<td>3</td>
</tr>
<tr>
<td>Psychologist</td>
<td>2</td>
</tr>
<tr>
<td>Support Worker</td>
<td>2</td>
</tr>
<tr>
<td>Exercise Physiologist</td>
<td>1</td>
</tr>
<tr>
<td>Infection Control Practitioner</td>
<td>1</td>
</tr>
<tr>
<td>Nutritionist</td>
<td>1</td>
</tr>
<tr>
<td>Social Worker</td>
<td>1</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Others</th>
<th>51</th>
</tr>
</thead>
<tbody>
<tr>
<td>Educators</td>
<td>33</td>
</tr>
<tr>
<td>NFP Organization Staff</td>
<td>5</td>
</tr>
<tr>
<td>Academics/Researchers</td>
<td>3</td>
</tr>
<tr>
<td>University Students</td>
<td>3</td>
</tr>
<tr>
<td>Youth/Community Workers</td>
<td>3</td>
</tr>
<tr>
<td>City/Municipal staff</td>
<td>1</td>
</tr>
<tr>
<td>Distribution/Social Media Co.</td>
<td>1</td>
</tr>
<tr>
<td>Facilitator</td>
<td>1</td>
</tr>
<tr>
<td>Software Developer</td>
<td>1</td>
</tr>
</tbody>
</table>

### Administrators

The majority of initiatives are administered/managed by people in a full or part-time employment role with the initiative or host organization. Note: A few respondents noted more than one type of administrator.

![Figure 14: Initiative Administrators](image)
NOTE: The “other” category includes one or two responses reporting funding from private companies, school districts, school Parent Advisory Committees, speaker fees, universities’ operating budgets, gift shop revenue, contract work, licensing fees (film) and membership fees.
FIGURE 16b: FUNDING SOURCES - HEALTH CARE

FIGURE 16c: FUNDING SOURCES - RESEARCH
Nearly half of all initiatives are funded, at least in part, by grants. Government grants (both arts specific and not) appeared to be the leading source of grant funds.
## ALL GRANTS - TOTALS

<table>
<thead>
<tr>
<th>RESEARCH ORGANIZATIONS</th>
<th>9</th>
</tr>
</thead>
<tbody>
<tr>
<td>CIHR</td>
<td>5</td>
</tr>
<tr>
<td>MSFHR</td>
<td>2</td>
</tr>
<tr>
<td>NSERC</td>
<td>1</td>
</tr>
<tr>
<td>SSHRC</td>
<td>1</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CHARITIES AND FOUNDATIONS</th>
<th>18</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family Foundations (various)</td>
<td>6</td>
</tr>
<tr>
<td>Vancouver Foundation</td>
<td>4</td>
</tr>
<tr>
<td>Variety Children's Charity</td>
<td>2</td>
</tr>
<tr>
<td>Abbotsford Foundation</td>
<td>1</td>
</tr>
<tr>
<td>Alzheimer’s Society of Canada</td>
<td>1</td>
</tr>
<tr>
<td>Canada Post Foundation</td>
<td>1</td>
</tr>
<tr>
<td>Chilliwack Foundation</td>
<td>1</td>
</tr>
<tr>
<td>CKNW Orphans’ Fund</td>
<td>1</td>
</tr>
<tr>
<td>United Way</td>
<td>1</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>GOVERNMENT ARTS</th>
<th>12</th>
</tr>
</thead>
<tbody>
<tr>
<td>BC Arts Council</td>
<td>5</td>
</tr>
<tr>
<td>Canada Council for the Arts</td>
<td>5</td>
</tr>
<tr>
<td>Canadian Heritage Grants</td>
<td>1</td>
</tr>
<tr>
<td>National Film Board Canada</td>
<td>1</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>GOVERNMENT OTHER</th>
<th>24</th>
</tr>
</thead>
<tbody>
<tr>
<td>City/Municipality Grants</td>
<td>9</td>
</tr>
<tr>
<td>Province of BC (Gaming Grants)</td>
<td>7</td>
</tr>
<tr>
<td>Government (not otherwise specified)</td>
<td>3</td>
</tr>
<tr>
<td>Min of Child and Family Services</td>
<td>1</td>
</tr>
<tr>
<td>Min of Community Services</td>
<td>1</td>
</tr>
<tr>
<td>Min of Justice (Civil Forfeiture Grant)</td>
<td>1</td>
</tr>
<tr>
<td>Province of BC (Welcome BC)</td>
<td>1</td>
</tr>
<tr>
<td>Service Canada</td>
<td>1</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>HEALTH ORGANIZATIONS</th>
<th>11</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health Authorities</td>
<td>8</td>
</tr>
<tr>
<td>Canadian Nurses Association</td>
<td>1</td>
</tr>
<tr>
<td>Health Canada</td>
<td>1</td>
</tr>
<tr>
<td>Victoria Hospitals Foundation</td>
<td>1</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>NGOS</th>
<th>4</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community Action Initiative</td>
<td>1</td>
</tr>
<tr>
<td>East Feast Micro Funding Grant</td>
<td>1</td>
</tr>
<tr>
<td>Healthy Schools Network Grants</td>
<td>1</td>
</tr>
<tr>
<td>Service Clubs</td>
<td>1</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>UNIVERSITIES</th>
<th>4</th>
</tr>
</thead>
<tbody>
<tr>
<td>University of British Columbia</td>
<td>3</td>
</tr>
<tr>
<td>Simon Fraser University</td>
<td>1</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CORPORATE</th>
<th>6</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pharmaceutical Industry</td>
<td>2</td>
</tr>
<tr>
<td>Telus</td>
<td>2</td>
</tr>
<tr>
<td>Coast Capital Savings</td>
<td>1</td>
</tr>
<tr>
<td>Vancity</td>
<td>1</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>OTHER</th>
<th>21</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not Specified</td>
<td>8</td>
</tr>
<tr>
<td>Private Donors/Individuals</td>
<td>4</td>
</tr>
<tr>
<td>Unions</td>
<td>4</td>
</tr>
<tr>
<td>Currently Applying for Grants</td>
<td>3</td>
</tr>
<tr>
<td>Too many to list</td>
<td>2</td>
</tr>
</tbody>
</table>
When asked how art was employed, respondents in the health research stream noted a variety, and sometimes multiple uses of art, including art as: education; a social connecting activity as part of a health promotion study; a research method to generate and/or analyze data; a knowledge translation tool to share research findings; or a therapeutic intervention to be studied.

**FIGURE 18: ARTS ROLE IN HEALTH RESEARCH**

When asked to describe the research methodologies used in these arts-based health research studies, a variety of research methods were noted, including: quantitative, qualitative, mixed methods, Community-Based Participatory Research, and arts-based methods (described by some more specifically as Photo Voice, Co-Creation, Design-Centered Research Methodology).

**FIGURE 19: METHODOLOGIES**
“Arts” and “health” intersect and hold meaning in various ways across different worldviews. People and programs arrive at the connection of arts & health from various directions, and explore/experience that connection in diverse ways. To that end, and to help understand the orientation of initiatives submitted, an optional question was included in the survey that invited respondents to provide a statement about the philosophy, framework or paradigm that informed their initiative.

With such a broad invitation it is not surprising that the responses received were greatly varied. Some responses described a motivation or rationale behind initiatives, several described beliefs or assumptions, and others noted academic theories and established frameworks that informed their work. In total, 74 respondents included a statement regarding paradigms and frameworks, all of which are included on their individual profiles (see Appendix 1).

Despite the breadth of perspectives shared, there were a number of common themes that emerged: Art Effects; Communication; Connection; Innate Creativity; Approaches and Methods.

**ART EFFECTS**
The most frequently mentioned theme referred to the ability of art to impact or change the individuals who engage with it, as participant or observer. Most frequently, these comments referred to the value of arts engagement for building self-esteem, confidence and empowering individuals, particularly when provided with an opportunity to share their own story, or otherwise express themselves.

Some described art as a powerful tool for self-discovery and insight to one’s own experiences. Others described the life skills one can gain through arts participation. Additional responses described the impact of arts engagement on people living with an illness or injury through a therapeutic reduction of symptoms, providing a coping mechanism or contributing to a therapeutic and healing environment:

“Art Heals encourages clients in the hospital to use art making to express themselves and their experiences. The program occupies the individual’s hands and mind and may assist them with their healing process.” – Two Rivers Gallery

**COMMUNICATION**
The second most frequently mentioned theme was the ability of art to communicate. Statements noted the potential for art to connect with people on an emotional or aesthetic level and translate information in a way that it is heard or received anew, and remembered:

“Stories help portray subject matter and reach individuals in ways not possible in news or statistics.” – Comics with a Cause
“Most information on the subject was written material with heavy medical jargon that may or may not be remembered. Art has the capacity to leave a lasting impression on one in a different style of communication.” – Art and Arthritis

In some instances, arts-based communication was mentioned as a means to address stigma, stereotypes and power imbalances. The cultivation of empathy was often noted as both a powerful effect and desired outcome of arts-based initiatives:

“It is important for First Nations youth to understand the cross-generational impact the Indian residential schools have had. It is also important for the general public to understand this part of Canadian history. In particular, the Vancouver Aboriginal Community Policing Centre Society also works to create understanding between Urban Aboriginal people in Vancouver, and the Vancouver Police Department. This project plays a big role in not only educating but using the arts and stories in particular to create empathy, and help all those on their healing journeys.” – Circles of Understanding

Arts-based communication was most often mentioned in reference to raising awareness about a health-related issue or problem among the general public. Other times, it was referred to in the context of education for a specific group of learners:

“Educating through art and storytelling provides us a platform where we can become immersed in someone’s experience, emotions, and journey to gain a deeper understanding about issues that are more difficult to teach using traditional methods. Art and stories provide a door to cultivating empathy and understanding, and might evoke us to discuss and reflect on tough issues such as power in health care relationships, inequality, discrimination and how these affect health and health care.” – Art Gallery Exhibit: Diversity Competency in Health Care

CONNECTION

As an activity, creating or observing art is an effective means of bringing people together. Social connectivity, the sense of belonging and inclusion, is a well-established social determinant of health, and was mentioned by many respondents as a benefit of group-based arts activities:

“People yearn for social connectivity. Art can be a context for simply being in the presence of others, witnessing together, sharing and differing in perspectives.” – Fairfield Community Mural Project

Statements also noted the potential for art to act as a bridge that connects groups of people of diverse backgrounds, experiences and worldviews. Further, art can bring people together around conversations that matter, and modality dependent, even facilitate dialogues that explore problems and imagine solutions:

“Encouraging thoughtful cooperative dialogue can address problems and build a stronger and more inclusive culture. In performance we try not to tell people answers but provide the opportunity for people to explore their beliefs, share ideas and brainstorm positive means of creating change.” – Street Spirits Theatre
INNATE CREATIVITY
A number of statements described art and creative expression as a vital necessity for human growth and development: an “innate instinct,” a “human right,” and an “intrinsic part of holistic health.” Anchored in this belief, many respondents described a motivation to ensure that everyone, regardless of age, health status, geography or ability, has access to the arts:

“Everyone is creative, regardless of age or health condition. Even in the presence of dementia, creativity is possible and can bring pleasure to the creator.” - Fun With Paint

APPROACHES AND METHODS
A number of initiatives, particularly those in the arts-based health research stream, made note of methodologies and approaches to research. In addition to arts-infused knowledge translation for the dissemination of research findings, the deliberate decision to design and conduct studies in collaboration with the population of interest was a common thread that weaved through a number of the approaches mentioned (Photo Voice, CBPR, Social Marketing, Arts-Based Educational Research, etc.).

MOTIVATIONS

An optional survey question asked respondents to share the motivating reason(s) behind their initiative. This question received 116 responses noting a number of motivations, from which 10 major themes were identified: personal and community growth; problems and issues; health improvement; service gaps; the power of arts & health; supporting artists and audiences; opportunities; education; community requests; and others.
PERSONAL AND COMMUNITY GROWTH
Most frequently, survey responses referred to harnessing the power of arts to facilitate the growth of individuals and communities. With regards to individual growth, responses included topics such as skill building, giving people a voice, fostering pride, self-esteem and self-worth, empowerment and self-discovery. With regards to community growth, responses largely focused on arts engagement to foster relationships, promote inclusion, provide a sense of belonging and more generally “create a sense of community.” Responses also included the need to create safe and accessible spaces to allow for such growth and connection.

“To help youth grow into healthy, caring and responsible adults, develop connections in the community and learn valuable, employable skills.”

“Theatre is a great way to make your voice heard, get out of your shell, face fears, and become a part of a community of all kinds of people.”

ADDRESSING A PROBLEM OR ISSUE
Many motivations centered on taking action to address a problem or issue facing a community. While the actual problems and issues varied greatly, they all related in some way to health or the social determinants of health: mental illness stigma, seniors’ isolation, violence against women, poverty, eating disorders, cancer screening, HIV, organ donation, etc. The types of action noted included advocacy, creating dialogues and raising awareness and education.

“Through focus groups, participants in our projects have told us that the stigma associated with mental illness is worse than the symptoms.”

“There is a huge need to educate and empower First Nations youth in BC and they are over represented in many negative statistics around health and wellness.”

HEALTH IMPROVEMENT
A number of motivations related, in some way, to the notion of health improvement. On one end of the health continuum, respondents described arts engagement as adding value because it is fun, enjoyable, and contributes to quality of life and positive wellbeing. Others described arts as being a strategy for outreach and prevention with vulnerable populations. Others still referred to the use of arts in a therapeutic sense as a means to cope, heal or recover from illness, injury or trauma.

“The motivation was the pursuit of wellbeing through a creative outlet.”

“Art, music, dancing, medicine, and culture are all intertwined in the aboriginal culture, and are all elements that have been removed from this culture in Residential Schools and other institutions in past attempts to integrate and ‘reform’. Therefore, to approach healing and wellness without these elements is nonsensical.”
SERVICE GAPS
Acknowledging the benefits of arts engagement for health, healing and wellbeing, many initiatives were motivated by the need to fill a service gap and create programs or increase access to the arts for populations that faced health or SDOH-related barriers.

“Artists with mental health issues needed a space to work on art and exhibit their artwork without the usual barriers of the professional art world.”

“Socio-economic disadvantage and cuts to public school funding for the arts meant that inner-city children had limited or no access to quality music education.”

POWER OF ARTS & HEALTH
A number of the motivations described a more general belief and appreciation for “the power of arts & health” and arts for social change. A few initiatives were established specifically to explore and celebrate the connection between arts and health.

“An increasing understanding of the potential for the arts to contribute to positive physical, emotional and mental healing alongside an energetic work environment for staff.”

SUPPORTING ARTISTS AND AUDIENCES
Some motivations centered on the desire to support and develop artists; both those who practice recreationally and professionally. For example, some efforts were to nurture innate talents and encourage expression by the artist in all of us. Others were in place to increase arts access and opportunities for artists with a health, disability or SDOH-related barrier. Related, are efforts to ensure that audience members and art appreciators with health-related barriers maintained access to quality arts programming. Others still worked to ensure that professional artists had employment opportunities or support for chronic stress and burnout.

“Many individuals with mental health issues - have strengths in the arts and are creative. Promoting rehabilitation through art and clinical occupational therapy strategies to set goal to foster recovery.”

“We were interested in enabling children and adults with atypical physical and cognitive abilities to participate in an art program that accommodates for their needs.”

OPPORTUNITIES
For some survey respondents, motivation for their initiative came in the form of an opportunity: available funds, keen volunteers, a new partnership, a large scale event, a popular news story, a high-profile champion, etc.

EDUCATION
A number of initiatives began in response to a need for some kind of education. Many initiatives relied on community-based arts projects as a means to raise public awareness and education around a health topic or issue. Others used art for education tailored for a specific group of learners or subset of the population. Lastly, some initiatives were motivated to provide education about the application of arts for health; for example, music therapy schools.

“To educate children and the community about health in a unique way.”
COMMUNITY DRIVEN
The initial motivation for a number of initiatives appears to have originated with the participants or community members themselves; specific requests, demands and efforts to create arts & health programs by a committed and engaged core group of participants.

- “It was started in response to a request from young people involved with a Youth Resource Centre. They wanted access to arts programming.”
- “It has an amazing core group of participants that choose to keep coming back to be creative.”

Other
Other, less frequently mentioned motivations included honouring the memory of a loved one, social experiments, righting previous failures and a desire to learn/research something new.

CHALLENGES

The survey also included an optional question asking respondents to share the main challenges their initiative has encountered. This question received 111 responses noting a number of challenges, from which 7 major themes were identified: Financial Capacity; Infrastructure and Process Challenges; External Values and Awareness; Participant Needs; Human Resource Capacity; Administrative Instability; and Research Challenges.

FIGURE 21: RESPONSE FREQUENCY

RESULTS
FINANCIAL CAPACITY

Close to 60% of respondents noted (lack of) funding as a major challenge. As phrased by one respondent, “funding for this kind of thing is s#!t.” Some specific examples of financial challenges include relying on volunteered time due to insufficient funds to hire staff and/or compensate artists at appropriate rates. A number of respondents commented on funding cutbacks, the challenge of inconsistent funding streams and operating on a grant-to-grant basis. Further frustrations were articulated around the availability of funding only for “one-off” projects, the paucity of funding to support ongoing programs, and the related hesitancy of funding agencies to sponsor the same program more than once. As articulated by one respondent, “they are continually chasing the new, different or unique, leaving important services struggling to serve their clientele.” Others noted challenges with adapting and planning projects to comply with the funder’s requirement.

- “As with any arts-based initiative, funding is always a concern. Our facilitators and organizers are unpaid volunteers.”
- “Low funding. We would like to offer professional artist fees at CARFAC rates to our community artists.”
- “The difficulty of finding financial supporters willing to fund more than a “one off” type of program.”

INFRASTRUCTURE & PROCESS CHALLENGES

Another major theme revolved around day-to-day challenges in operations, infrastructure and organizational processes. The most frequently reported of such challenges had to do with space; finding it and insufficient amounts of it for programs to run. Another common challenge was keeping up with rapid growth, and having too much to do with too little time. Other infrastructure challenges included operating with insufficient or out of date supplies and technology. Process challenges included pushing past stigma, maintaining participant privacy and confidentiality, managing program scope and participant eligibility, and transportation issues with regards to transporting participants and supplies to deliver programs over geographic distances.

- “Keeps growing! We had to limit the number of pieces per artist as they were overtaking the space at the gallery!”
- “It has also been challenging to acquire state-of-the-art equipment to use, and we often make do with older, in-need-of-repair equipment.”
- “Due to limitations of space, it is not entirely possible to provide a private, safe space. Because of this, participants will often not approach certain activities even if they have expressed interest, as they don’t want be seen or heard by others.”
EXTERNAL VALUES AND AWARENESS
Often mentioned in tandem with funding challenges, respondents shared the view that there is a general lack of appreciation for the value in arts & health activities; specifically, or perhaps most detrimentally, among funders, administrators and decision makers. Related to this, a few respondents discussed the need for more research or evaluation of their own and other arts & health projects to demonstrate effectiveness to funders. Respondents also cited promotional difficulties like trouble “getting the word out” and a lack of awareness about their initiatives or full scope of offerings.

“Continually fighting the bureaucratic notion that The Arts (in all its forms) can only be seen as an adjunct to other forms of therapeutic approaches. The pervasive, entrenched, misguided notion that The Arts does not show “best practice” and “outcomes.” Everyone seems individually to endorse the Arts but few people in positions of power and influence seem willing to put money on the table.”

“A lack of understanding, especially by bio-science medical researchers and clinicians, about the role of arts/humanities in medicine and health research and education - consequently, it is difficult to secure more funding.”

PARTICIPANT NEEDS
Respondents noted challenges related to finding and engaging participants in their programs; more specifically, getting word of initiatives out to people who may benefit from them, and assessing participants’ commitment to, and enthusiasm toward, the initiative. One respondent noted a shift in the way that art is consumed, and pointed to the vast availability of digital media accessible at home/online, as a challenge to connecting with participants in more conventional arts venues like cinemas and galleries.

Others described challenges related to frequent turnover of participants and planning activities appropriate for drop-in settings or programs with inconsistent attendance. Related to this was a common challenge of adapting activities to meet participants’ unique needs: transportation and physical access, coordinating times to meet participants’ schedules, culture and language differences, varying skills and abilities, etc.

“Our group is drop in, there is no obligation to be there, therefore finding projects to do that we can get through in just one session is difficult. It is also hard to know where everyone stands sometimes.”

HUMAN RESOURCE CAPACITY
The most common HR challenge had to do with finding, training and retaining staff and volunteers. Respondents also noted the difficulty in finding facilitators with broad skill sets and multiple qualifications or affording to hire an interdisciplinary team to respond to the range of participant needs. For example, finding an arts instructor who also has experience working with people who have chronic and persistent mental illness, or, finding a youth worker with strong classroom management skills and additional knowledge of video production. Some respondents noted that at times, due to the potentially triggering content of the work and/or existing vulnerabilities of the participants, individuals require additional psychological support or crisis interventions; arranging for professional support to be available in those instances posed an additional human resource challenge.
“Having at least one volunteer at each session is helpful, but maintaining a volunteer pool is difficult. The volunteer need not be an artist but needs to be aware of this illness and its effects.”

**ADMINISTRATIVE INSTABILITY**
Some of the administrative difficulties noted were focused on governance structures and transitions. For example: leadership role confusion, a lack of sustainability planning, organizational restructuring (triggering the loss of champions and good work), and natural shifts in an organization’s lifecycle. Other administrative challenges involved the formation and maintenance of partnerships with other organizations. Connected to administrative instability, a small number of respondents commented on leadership fatigue and burn out and the ongoing challenge of staying immune to bureaucracy and sector politics.

“The project came to an abrupt end when most of the staff, at every level, had shifted. The mandate from the top had changed, and this project was not understood by those who had a different concept of ROI.”

“It is difficult to work across so many disciplines with silo approach in service.”

**RESEARCH CHALLENGES**
Challenges somewhat unique to those initiatives in the arts-based health research stream included Research Ethics Board approval, methodological challenges, and a lack of interdisciplinary research journals and publications options.
DISCUSSION & NEXT STEPS

LIMITATIONS
While OTM was successful in providing a bigger picture of arts & health activity in BC, this report cannot be considered a “complete” inventory of arts & health activity in the province. The project team is aware of 75+ other initiatives that did not participate in the survey (see Appendix 4) and there are likely many others. Further, the sample of respondents from the BC arts & health sector may not be an accurate representation of the sector as a whole. This is particularly true with regards to the health research, health care and health humanities streams that had the fewest responses.

OPPORTUNITIES FOR ACTION

► **Partnerships** – Approximately 60% of the OTM initiatives operate as the result of a partnership between two or more organizations. Given the interdisciplinary nature of arts & health, as well as the limited funding available to conduct programs, partnerships appear to be an excellent strategy to overcoming human resource and fiscal constraints. A number of respondents articulated their enthusiasm for the OTM project and interest in learning from, and collaborating with, like-minded organizations. Reaching out to OTM initiatives to network and/or discuss partnership opportunities is encouraged.

► **Evaluation** – Less than 25% of the initiatives reported completing an evaluation, and it is unknown how many of those evaluations were shared outside of the organization. While only a few respondents specifically named “lack of evaluation” as a challenge, a larger proportion of respondents spoke to a lack of appreciation for arts & health and the need for more buy in from administrators, funders and decision - makers. A discussion regarding the merits of and appropriate methods for evaluating arts & health activities is beyond the scope of this report; however, acknowledging the current era of evidenced-based decision making, particularly in health care environments, there is an apparent need to better showcase, articulate and substantiate the value of arts & health to decision makers and funders. While rigorous research investigations may not always be feasible, particularly for small community-based programs operating on a shoe-string budget, small scale process or outcome evaluations shared online would certainly help as a first step to filling the arts & health evidence gap in BC.

► **Training for Artists and Facilitators** – A number of respondents spoke to the challenge of finding facilitators who possess both artistic skill and experience working with various populations that often require additional support or instructional strategies (youth, people with dementia, etc.). Training opportunities for artists and other facilitators that cover population-specific challenges, needs and best practice strategies might help organizations in their search for dually-qualified staff, and also improve facilitators’ employability. This learning might also be achieved by creating population or art modality-specific working groups for those interested in sharing best practice ideas.
THE ONLINE MAP
As a complement to this report, a Google Map has been produced plotting the submitted initiatives on a map of British Columbia. Initiatives that were not submitted to the OTM survey can still be added to the Google Map & AHNC website by submitting a profile summary at www.artshealthbc.ca/on-the-map

![Google Map of British Columbia with initiatives marked](image)

Additionally all initiatives have been added to the Arts Health Network Canada directory of arts & health initiatives. The AHNC Initiative Directory can be accessed at www.artshealthnetwork.ca/initiatives

NEXT STEPS
The OTM survey project was embedded within the broader strategic priorities of Arts Health BC. The findings of this report along with the connections made over the course of the project will contribute to and inform Arts Health BC’s ongoing work and larger organizational goals of:

- Raising awareness about arts & health projects and initiatives in BC among the public, different levels of government, health professionals, individuals involved in the arts, funders, and other health and wellness service providers.
- Promoting awareness of the role arts and creativity play in enhancing quality of life, health and wellness.
- Brokering cross-sector relationships/partnerships in the arts, culture, design, health, recreation and wellness sectors.
Future projects that Arts Health BC is exploring to complement and build on the OTM project include:

- A short video on arts & health in BC.
- Creating topic and geography-specific working groups for arts & health practitioners.
- Creating a directory of artists/practitioners in the arts & health sector in BC.
- Hosting dialogues and meet-ups across the province to promote networking, knowledge and resource sharing among arts & health practitioners and to generate dialogue about arts & health across different paradigms to promote mutual respect and understanding.
- Storytelling cafes; providing a platform for individuals who have participated in arts & health activities to share their stories/journeys.

**ARTS & HEALTH MAPS FOR OTHER PROVINCES AND BEYOND**

Arts Health BC encourages other jurisdictions, within Canada and beyond, to undertake similar mapping exercises as a means to locate arts & health projects, identify opportunities for new projects and partnerships, promote knowledge and resource sharing among like-minded organizations and practitioners, and create communities of practices for the development of best-practice guidelines and training opportunities.

Other organizations interested in conducting an arts & health mapping project are welcome to use the survey (or portions thereof) developed for OTM. Further, the project team is happy to answer any questions on the process and experience. Contact us at admin@artshealthbc.ca

Additional reading that may be of help includes:

- Creative City Network Canada and 2010 Legacies Now - Cultural Mapping Toolkit
- Alberta Foundation for the Arts – Mapping the Arts & Health 2010
- SAGE Research Methods – Planning the Online Survey
British Columbia is home to some remarkable arts & health initiatives and an impressive community of interdisciplinary champions. On The Map: Arts & Health in BC has provided a snapshot of BC’s current arts & health landscape, and also a motivation to explore new prospects, forge new paths and discover new territories in arts & health.

“A map does not just chart, it unlocks and formulates meaning; it forms bridges between here and there, between disparate ideas that we did not know were previously connected.”
- Reif Larsen, Author, The Selected Works of T.S. Spivet

British Columbians with a shared passion for arts & health can widen the circle of support for the sector by inviting others to the conversation, showcasing arts & health projects at every opportunity, and sharing rich narratives that illustrate the impact of arts engagement on health, healing and wellbeing.

Using OTM as a compass, Arts Health BC is committed to ongoing efforts to raise awareness about the value of arts & health and facilitate networking and resource sharing. With a commitment to collaboration, the BC stage is set to maintain, expand and create new opportunities for British Columbians to connect with the arts, for the health of it!

“Art knows no prejudice, art knows no boundaries, art doesn’t really have judgment in its purest form. So just go, just go.”
- K. D. Lang, Musician
ARTS & HEALTH IN THE COMMUNITY
‘65._RedRoses’ is a 2009 documentary produced and directed by Nimisha Mukerji and Phillip Lyall, and distributed in Canada by Hello Cool World, who created and now direct the ongoing ‘65._RedRoses #4Eva’ campaign. At 23, Eva Markvoort was waiting on the transplant list for new lungs. Living with the fatal genetic disease, cystic fibrosis (CF), was a constant reminder that she needed to make every breath count. When Eva agreed to open up her life and that of her family’s for the documentary following her story, the result was a powerful message of life, of love, of hope. By doing so, she started a global campaign for organ donation and CF awareness.

After her transplant, Eva and then medical student, Cyrus McEachern, collaborated on an image for a heart-themed photo contest his cardiology professor was hosting. By painting a heart on her own body, Eva literally became the heart and the designer of the campaign for organ donation and CF awareness. These stunning images borne from Eva’s artwork and Cyrus’ photos, became the heart of the #4Eva campaign. They also inspired a further collaboration, when BC Transplant commissioned the pair to do a “Live Life. Pass it On.” photo series — Eva with her lungs, and other transplant recipients with the organs they had received, painted on their bodies. BC Transplant partnered with the distributor to license the film free to all high schools in BC, and collaborated on a television PSA that they used during ‘Organ Donation Awareness’ week along with print ads using the photo series.

Eva was an artist, an actor, and an accomplished writer with an international following. While waiting for a second transplant on March 27, 2010, at the age of 25, Eva’s breath ran out, but her vision did not die.

PURPOSE
To promote organ donation and awareness of cystic fibrosis (CF) through film and art.

PARTICIPANTS
Eva and the other subjects of the documentary were all in their early 20s, and were living with cystic fibrosis. The film and campaign resonate with young people, and have been effective at reaching out to high school aged youth.

[CONTD. ON THE NEXT PAGE]
This project is rooted in Eva’s story. And Eva was a young artist, actress, creative blogger, and through this work, also a filmmaker. The young directors of this film consider her a co-director. When the teacher’s guide to this film was created, the filmmakers considered it important to use the film not only to teach about health and science, but to use it as a creative response to living with illness, and to make every moment count. Eva’s philosophy was to live as large as she could. Her creativity in the face of death is beyond inspiring. Because of her spirit, this film will have a long life. It has already inspired many creative efforts in her name: paintings, other films and creative tributes.

OUTCOMES

The film has proven impact. When it premiered in Canada, organ donation groups across the country saw an increase in donor registrations with BC Transplant reporting a 300% increase as a result of the film. CF groups have held legacy events as fundraisers, raising hundreds of thousands of dollars. BC Transplant, a key partner in the Canadian campaign, viewed the film as an effective way to reach a younger audience. They are gifting the film to BC high schools along with a teacher’s guide as part of Eva’s legacy. Now every school in BC can have the film for free. When ‘OWN’ aired the documentary in the US, they also aired our PSA. It was also promoted via the American CF network on Facebook, with over 150,000 members and as a result, it was re-posted on Facebook 800 times in the 48 hours surrounding the broadcast.

FRAMEWORK/PHILOSOPHY

This project is rooted in Eva’s story. And Eva was a young artist, actress, creative blogger, and through this work, also a filmmaker. The young directors of this film consider her a co-director. When the teacher’s guide to this film was created, the filmmakers considered it important to use the film not only to teach about health and science, but to use it as a creative response to living with illness, and to make every moment count. Eva’s philosophy was to live as large as she could. Her creativity in the face of death is beyond inspiring. Because of her spirit, this film will have a long life. It has already inspired many creative efforts in her name: paintings, other films and creative tributes.
African storytelling comes to life wherever you find African Stages. Dancing, singing, drumming, acting, costumes, masks and the great storyteller Comfort Ero, bring traditional and contemporary African arts to gathering places, festivals, libraries and theatres in the Greater Vancouver area and across the country. African Stages Association was officially incorporated in Victoria, BC in 1997, although Comfort was telling stories long before then under the name ‘Zibota African Moonlight Theatre’. The society was formed as a way to aggregate all of the various activities that Comfort was delivering in the community and region. The formation of African Stages was, and continues to be, a hub for Comfort’s vision of building community through African wisdom and creativity, as well as building a rightful place for African artists to create and perform for everyone. Tohio means: “Come quickly, I have a story to tell!” Hia hia kpo means: “tell it, we are listening.” When you come to see Comfort tell a story, she will always begin like this. While growing up in her native Nigeria, before video games and television, telling stories was the way in which families were entertained in the evening. A storyteller would alert everyone with a cry of “tohio!” and the listeners would gladly reply “hia hia hia hia kpo!”

DESCRIPTION

African storytelling comes to life wherever you find African Stages. Dancing, singing, drumming, acting, costumes, masks and the great storyteller Comfort Ero, bring traditional and contemporary African arts to gathering places, festivals, libraries and theatres in the Greater Vancouver area and across the country. African Stages Association was officially incorporated in Victoria, BC in 1997, although Comfort was telling stories long before then under the name ‘Zibota African Moonlight Theatre’. The society was formed as a way to aggregate all of the various activities that Comfort was delivering in the community and region. The formation of African Stages was, and continues to be, a hub for Comfort’s vision of building community through African wisdom and creativity, as well as building a rightful place for African artists to create and perform for everyone. Tohio means: “Come quickly, I have a story to tell!” Hia hia kpo means: “tell it, we are listening.” When you come to see Comfort tell a story, she will always begin like this. While growing up in her native Nigeria, before video games and television, telling stories was the way in which families were entertained in the evening. A storyteller would alert everyone with a cry of “tohio!” and the listeners would gladly reply “hia hia hia hia kpo!”

PURPOSE

To empower children, youth and immigrants, also, elderly and people who face everyday struggle with issues like bullying, racism, poverty, immigration, victims of war and/or abuse, and sufferers of mental health and so on through storytelling and forum theatre, accompanied with dancing, drumming, and acting.

PARTICIPANTS

All ages, for storytelling, and small to medium audience size for forum theatre. All health conditions can benefit from our programs.

OUTCOMES

Empowering with storytelling, and promoting self-respect.

FRAMEWORK/PHILOSOPHY

In Africa, and many indigenous cultures, storytelling is integrated into everyday life. As such, it plays a major role in shaping people’s lives. It is not only entertaining, but it passes on the values and principles of a culture. It is a teaching tool and a guide used to raise children and instill wisdom and harmony in people.
AGEWELL questions the current aging paradigm, attempting to understand and tease apart conventions and assumptions from lived realities and experiences. With this understanding, we use arts-based facilitation to support cross-sector dialogue and collaboration to help improve seniors’ wellbeing. AGEWELL consists of two phases. In the first phase we invited the community to share their thoughts and feelings on aging by submitting creative expressions on the topic. Selected submissions were exhibited at the Vancouver Performing Arts Lodge (PAL) between May 30th and June 8th. At the same time, art-making workshops that ranged from theatre/movement, to storytelling, puppetry and music, ran alongside the exhibition, creatively deepening the dialogues around aging. In the second phase, which kicks off in January 2015, we will conduct cross-sector arts-based dialogues on key themes that emerged during the first phase of the project. Our goal is to imaginatively nurture understanding and collaboration across professional silos and to contribute to the creation of innovative and concrete solutions to complex issues that affect the lives of our elders.

**Partners:** Arts Health BC

**Time:** January 2014 – Ongoing

**Location:** Metro Vancouver

**Resources Available:** AgeWell Chataqua Project Booklet

**Art Modalities:** Poetry, Writing, Digital/Electronic, Film/Video, Multimedia, Dance/Movement, Drama/Theatre, Music, Singing, Storytelling/Poetry, Ceramics, Colour Use, Crafts, Drawing, Fiber Art, Metal Working, Mixed Media, Painting, Photography, Printmaking, Sculpture

**Contact:**
Kim Gilker, Community Liaison, ASC! Project, Simon Fraser University
Judith Marcuse Projects/International Centre of Art for Social Change (ICASC)

**Email:** info@icasc.ca

**Web:** http://www.icasc.ca/AgeWell

**Image Source:** http://artshealthbc.ca/work/making/agemwell-chataqua-project

**DESCRIPTION**

AGEWELL questions the current aging paradigm, attempting to understand and tease apart conventions and assumptions from lived realities and experiences. With this understanding, we use arts-based facilitation to support cross-sector dialogue and collaboration to help improve seniors’ wellbeing. AGEWELL consists of two phases. In the first phase we invited the community to share their thoughts and feelings on aging by submitting creative expressions on the topic. Selected submissions were exhibited at the Vancouver Performing Arts Lodge (PAL) between May 30th and June 8th. At the same time, art-making workshops that ranged from theatre/movement, to storytelling, puppetry and music, ran alongside the exhibition, creatively deepening the dialogues around aging. In the second phase, which kicks off in January 2015, we will conduct cross-sector arts-based dialogues on key themes that emerged during the first phase of the project. Our goal is to imaginatively nurture understanding and collaboration across professional silos and to contribute to the creation of innovative and concrete solutions to complex issues that affect the lives of our elders.

**PURPOSE**

Use arts and arts-based facilitation to help identify themes and issues; and then, in turn, to engage in dialogue across sectors and silos on issues that are important to the health and wellbeing of seniors.

**PARTICIPANTS**

Most participants so far are over 60 years old (over 300 people attended the exhibition and workshops); however, we encourage diversity in this project and look forward to more inter-generational participation in future events.

**OUTCOMES**

Not yet determined as project is in process.
**ARTS STUDIO REHABILITATION PROGRAM**

**DESCRIPTION**

The Arts Studio is a specialized rehabilitation unit of Vancouver Community Mental Health and Addiction Services. The program offers clinical occupational therapy services, and uses group art instruction to develop an individual’s self-management skills, wellness and art skills, leading to recovery and independent community living. Many individuals benefit by taking part in the program and move on to employment and/or further education, opening their own studio and/or selling their artwork.

**PURPOSE**

Assisting youth and adults with mental health conditions to recover and become independent in community living, through structured art classes and providing opportunities to develop self-management skills and wellness in a supportive environment.

**PARTICIPANTS**

Youth 16 years to older adults with a diagnosis of a mental health condition.

**OUTCOMES**

By taking part in the Art Studio’s programs such as pottery, painting, drawing, printmaking and knitting, individuals can grow and recover to return to college or university, to be employed, open their own art studio, and/or become self-employed as artists selling significant amounts of artwork.

---

**Time:** 2004 – March 2016

**Location:** Vancouver

**Art Modalities:** Ceramics, Colour Use, Drawing, Mixed Media, Painting, Printmaking, Knitting

**Contact:**
Vancouver Community Mental Health Services
Mariella Bozzer, Registered Occupational Therapist and Project Coordinator
Email: mariella.bozzer@vch.ca
Web: www.vch.ca
Phone: 604-871-9788
**ARTISM - A SPECTRUM OF CREATIVITY**

**DESCRIPTION**

Artism is a series of art workshops located at 100 Braid Street Studios in New Westminster, British Columbia.

**PURPOSE**

Artism’s focus is to instruct individuals with atypical physical and cognitive abilities in an inclusive and supportive environment. Artism is not just about art classes. We pay close attention to developing fine motor skills and promoting positive social behaviours in a safe, fun, and inclusive environment.

**PARTICIPANTS**

Children and adults with atypical physical and cognitive abilities.

---

**Time:** Oct 2014 - Ongoing  

**Location:** New Westminster  

**Art Modalities:** Colour Use, Crafts, Drawing, Mixed Media, Painting  

**Contact:**  
100 Braid Street Studios  
Cliff Blank, Founder & Director  
Email: support@artism.ca  
Web: www.artism.ca  
Phone: 604-600-4405
AHA! provides artists with studio space, affordable materials and the opportunity to pursue their aspirations concerning artistic expression. The cooperative believes art is a vital element in tolerance and inclusion and 51% of the membership is made up of artists with special needs. Membership is open to any person over the age of 16 who is an artist or who would like to support artists in the production and marketing of art.

**PURPOSE**

To provide an accessible and inclusive space for artists of all abilities. To support people of all abilities in the creation of art.

**PARTICIPANTS**

We have between 40 and 60 members per year, all 18 years old or older. We accept artists of any ability, both independently and assisted.

**OUTCOMES**

Creation of art and the growth of artistic skill. Using drawing and painting to build self-esteem.

**Image Source:** [http://aha-artists.ca/](http://aha-artists.ca/)
ARTISTS WITHOUT BORDERS

DESCRIPTION

A non-profit organization of artists who wish to provide an art experience and education with youth living in impoverished communities around the world.

PURPOSE

To promote peace, understanding, goodwill, and improved health and welfare by providing an arts experience for youth who would otherwise be neglected. To provide a program structure that would make it easier for all artists to donate their time and skill in a beneficial way.

PARTICIPANTS

Projects are focused in impoverished “third-world” communities where an arts education is not currently possible. Participants are mostly youth up to age 18.

OUTCOMES

To address poverty and hopelessness and physical/mental well-being by utilizing the process and techniques of art therapy.

FRAMEWORK/PHILOSOPHY

No child should miss an opportunity of an arts education.

Time: October 2013 - Ongoing

Location: Based in Vancouver, operates primarily third world communities and to be expanded to include North American areas.

Art Modalities: All Art Modalities

Contact:
Brian Hardie, Director
Email: info@theartistswithoutborders.org
Web: www.theartistswithoutborders.org

Image Source: www.theartistswithoutborders.org
Arts & Alzheimer’s – an art and music participation program for seniors with dementia living at home with their caregivers to stimulate minds and support caregivers.

Dementia can affect a person's ability to communicate leaving them feeling lonely and isolated. Parts of the brain associated with the arts and music remain intact far into the disease. Arts & Alzheimer’s engages the best practices of dementia care including socialization, structured routine, non-verbal activity and an expressive outlet.

Seniors 65+ years with Alzheimer’s or dementia. Group size ranges from 10-30 people including participants, caregivers, art and music guides as well as volunteers and support staff.

Partners: Silver Threads Service, The Art Gallery of Greater Victoria, Ballet Victoria, Pacific Opera

Time: April 2011 - Ongoing

Location: Victoria

Resources Available: Examples of art projects and much more can be acquired by contacting our Foundation.

Art Modalities: Art Therapy, Music Therapy, Dance/Movement, Drama/Theatre, Music, Singing

Contact: We Rage We Weep Alzheimer Foundation, Marjorie Moulton, Executive Director and Founder
Email: info@werageweweep.com
Web: www.werageweweep.com
Phone: 250-920-9573

Image Source: http://www.werageweweep.com

ARTS & ALZHEIMER’S

DESCRIPTION

Arts & Alzheimer’s – an art and music participation program for seniors with dementia living at home with their caregivers to stimulate minds and support caregivers.

PURPOSE

Dementia can affect a person’s ability to communicate leaving them feeling lonely and isolated. Parts of the brain associated with the arts and music remain intact far into the disease. Arts & Alzheimer’s engages the best practices of dementia care including socialization, structured routine, non-verbal activity and an expressive outlet.

PARTICIPANTS

Seniors 65+ years with Alzheimer’s or dementia. Group size ranges from 10-30 people including participants, caregivers, art and music guides as well as volunteers and support staff.

OUTCOMES

Encourage socialization, fighting isolation and loneliness.

FRAMEWORK/PHILOSOPHY

Mounting research has shown the arts to be particularly helpful in reaching those with dementia. We have witnessed the following benefits with our seniors. Freedom of expression, social interaction, companionship, cultivation of new or renewed talents, increased confidence, improved mood, a sense of purpose, accomplishment, enjoyment and fun.
The Arts and Health Project is a working collaboration of seniors and professional artists, who together develop an arts practice that focuses on the creative expression of ideas and issues that are important to them. The project provides a forum for expression and communication, exploration and imagination, which in turn fosters a sense of well-being and belonging. The Vancouver Board of Parks and Recreation and Vancouver Coastal Health partner with other organizations and associations with close ties to the community and with mandates focused on health, community recreation, and/or art participation to deliver this community engaged art programming for seniors.

The Arts and Health Project addresses the current gap in seniors’ services between those for well older adults and those for frail seniors who are in care. It provides professionally led arts programming for vulnerable seniors in community and seniors’ centres. The program maintains, and/or improves the health and wellbeing of vulnerable seniors through their participation in community engaged arts practices. It also creates a supportive environment for community engaged arts practices and increases their use within health environments and centres for community programming, and demonstrates the positive impact of participants in arts-based activities on the health and wellbeing of communities.

ARTS AND HEALTH PROJECT: HEALTHY AGING THROUGH THE ARTS

DESCRIPTION

The Arts and Health Project is a working collaboration of seniors and professional artists, who together develop an arts practice that focuses on the creative expression of ideas and issues that are important to them. The project provides a forum for expression and communication, exploration and imagination, which in turn fosters a sense of well-being and belonging. The Vancouver Board of Parks and Recreation and Vancouver Coastal Health partner with other organizations and associations with close ties to the community and with mandates focused on health, community recreation, and/or art participation to deliver this community engaged art programming for seniors.

PURPOSE

The Arts and Health Project addresses the current gap in seniors’ services between those for well older adults and those for frail seniors who are in care. It provides professionally led arts programming for vulnerable seniors in community and seniors’ centres. The program maintains, and/or improves the health and wellbeing of vulnerable seniors through their participation in community engaged arts practices. It also creates a supportive environment for community engaged arts practices and increases their use within health environments and centres for community programming, and demonstrates the positive impact of participants in arts-based activities on the health and wellbeing of communities.

PARTICIPANTS

The project provides support for seniors dealing with marginalization or conditions of vulnerability.

OUTCOMES

The intended long-term outcome of this project is “strong, healthy communities that engage seniors as full and active participants and that value the arts as a key contributor to health.”

FRAMEWORK/PHILOSOPHY

The Arts and Health Project is built on the understanding that all people are creative. We have unique knowledge and life experience and can benefit greatly by connection to the arts.
The City of Richmond’s Arts Services section, Vancouver Coastal Health - Richmond Public Health, and General Currie School (SD-38) formed a partnership to pilot an arts outreach program. Through the existing Richmond Arts Centre’s ARTS Truck initiative, children at General Currie School are engaged in arts activities with the goal of supporting their emotional and physical wellbeing. Richmond Arts Centre ARTS Truck provides art education in traditional and unconventional mediums (i.e. theatre, dance, paint), led by a professional trained artist/skilled instructor. All sessions are held on a monthly basis, at the school during after school hours. In 2015, the program will expand to three other schools. As well, there will be the integration of a healthy eating initiative following the guidelines of the ‘Healthy Eating after School Manual’ developed by the British Columbia Ministry of Health and the YMCA. Blending healthy eating and active living initiatives to support after school programs, can help to further improve the health of children and youth.

**DESCRIPTION**

The City of Richmond’s Arts Services section, Vancouver Coastal Health - Richmond Public Health, and General Currie School (SD-38) formed a partnership to pilot an arts outreach program. Through the existing Richmond Arts Centre’s ARTS Truck initiative, children at General Currie School are engaged in arts activities with the goal of supporting their emotional and physical wellbeing. Richmond Arts Centre ARTS Truck provides art education in traditional and unconventional mediums (i.e. theatre, dance, paint), led by a professional trained artist/skilled instructor. All sessions are held on a monthly basis, at the school during after school hours. In 2015, the program will expand to three other schools. As well, there will be the integration of a healthy eating initiative following the guidelines of the ‘Healthy Eating after School Manual’ developed by the British Columbia Ministry of Health and the YMCA. Blending healthy eating and active living initiatives to support after school programs, can help to further improve the health of children and youth.

**PURPOSE**

Increase participation in physical and creative activities during after school hours in children who may have barriers to participate in regular community programming; increase the number of positive adult connections/interactions to help foster school connectedness; increase awareness of the effectiveness of arts activities in increasing both physical and emotional confidence; and increase awareness of the importance of healthy eating as an integrated component of physical and emotional health.

**PARTICIPANTS**

Children 8-12 years in the school community who may not otherwise have the access/means to participate in regular arts classes at the Richmond Arts Centre or other programs in the community. Barriers may include: English as a second language challenges; socio-economic barriers; differing cultural expectations between an ethnic community and their adopted country; accessibility to affordable transportation; high rate of time spent in front of a television, computer or digital device screen; idleness after school; and absence of parents/guardians after school.

**OUTCOMES**

Students completed evaluations providing data that showed a reduction of sedentary activities after school and increased connections to adults in their community.

[CONT'D. ON THE NEXT PAGE]
The framework that informs the Richmond Arts Truck School Program is the Comprehensive School Health (CSH) framework endorsed by the World Health Organization. The framework helps educators, health practitioners, school staff, students and community partners to work together to create an environment that makes their school the best place possible to learn, work and play. The Comprehensive School Health (CSH) framework recognizes that healthy young people learn better and achieve more; understands that schools can directly influence students’ health and behaviours; encourages healthy lifestyle choices, and promotes students’ health and wellbeing; incorporates health into all aspects of school and learning, including after school; acknowledging that health is more than just the absence of illness; links health and education issues and systems; and needs the participation and support of families and the community at large (i.e. the arts). Source: Healthy Schools BC (http://healthyschoolsbc.ca/about/comprehensive-school-health.aspx).
The ArtWorks Studio is part of the Kelowna Branch of the Canadian Mental Health Association’s (CMHA Kelowna) complement of wellness programs. It is designed to support mental health recovery by providing a safe space for art to be an avenue for self-expression. The ArtWorks studio is open 4-hours per day, 3-days per week, and is located in the Wellness Development Centre of CMHA Kelowna. The ArtWorks Studio program offers open studio time, art classes, group art projects, art-focused outings, and special events. Art classes are led by local artists, wellness coaches, and volunteers; whereas, open studio time offers participants access to the space and supplies, allowing them the freedom to play, create, and work on self-led projects. On average, 7 art classes are offered per month covering a wide variety of subjects, techniques and mediums. These classes include both fine art instruction as well as artisan (functional or decorative) projects. Many participants of the ArtWorks Studio have overcome isolation, achieved a sense of belonging, and built a stronger connection to the community. ArtWorks Studio Participants are mentally and emotionally supported by the Wellness Development Centre staff team (Wellness Coaches), volunteer CMHA Kelowna Peer Mentors, and the natural peer community that has emerged within the studio. Many of the art instructors and volunteers have also built trusting and supportive relationships with the participants. These supportive relationships offer opportunities for self-discovery, learning healthy social skills, navigating the interpersonal conflict that comes with shared space, practicing teamwork, and building meaningful friendships. The ArtWorks Studio program facilitates an annual art gala and celebration called Artists Among Us. In October 2014, CMHA Kelowna hosted the 10th annual Artists Among Us art gala showcasing the art of 29 ArtWorks studio participants. The gala displayed 75 art installations including 13 group projects, all of which were sold to members of the community.

The ArtWorks Studio program exists to promote mental health and recovery through creative expression and social inclusion.

Program participants are adults experiencing mental health concerns. The studio comfortably houses 10-12 participants per class or session. In 2013-2014, the studio engaged 120-individual participants.

[CONTD. ON THE NEXT PAGE]
OUTCOMES

Program outcomes include mental health recovery, social inclusion, self-discovery, self-expression and communication skills, technical art skills, and improved sense of self.

FRAMEWORK/PHILOSOPHY

The ArtWorks Studio teaches art for art’s sake. The process of creating art is in itself therapeutic, however, the focus of our program is not art as therapy. Rather, the ArtWorks Studio supports self-determination, allowing program participants to take from the experience what they need, be it self-discovery, sense of self-worth, social inclusion, skill-building, community connection, etc.
**ArtWorks/PhotoClub**

ArtWorks/PhotoClub is a client-driven program developed over several years with support from professional local artists and photographers. Offered in groups, this initiative is designed to develop skills and self-confidence of people who have survived acquired brain injuries. This is a program that started with the concept of using colouring books in a support group. It has evolved into a sustainable program resulting in the acquisition of new skills and self-confidence in a safe, comfortable environment. Participants have gained the opportunity to share their experiences with peers and become more comfortable within the larger community.

**Description**

ArtWorks/PhotoClub is a client-driven program developed over several years with support from professional local artists and photographers. Offered in groups, this initiative is designed to develop skills and self-confidence of people who have survived acquired brain injuries. This is a program that started with the concept of using colouring books in a support group. It has evolved into a sustainable program resulting in the acquisition of new skills and self-confidence in a safe, comfortable environment. Participants have gained the opportunity to share their experiences with peers and become more comfortable within the larger community.

**Purpose**

The groups promote skill development in the arts and connection with a broader community of people who share common interests.

**Participants**

People who have sustained an acquired brain injury. The average age of participants is approximately 48 years old (ranges in age from 35 to 60). There are 35-50 participants per year throughout the Fraser Valley.

**Outcomes**

1. Community inclusion for participants with acquired brain injuries through art fairs/shows, local photo clubs, and art classes. 2. Increased profile of this group in the community through the production of a community mural in Chilliwack; stepping stones donated to Care Facility in Hope; sales of art/photo calendars/greeting cards, and a coffee table alphabet book; and the publication of news magazine articles. 3. Increased perceptions of self-worth through the acquisition of new skills, public displays of work, and the development of a self-sustaining/client-driven PhotoClub.

**Partners:** Blue Heron Reserve, OPUS Langley, Chilliwack Cultural Centre, TD Bank (Abbotsford), Grey’s Gallery, Abbotsford Art Gallery, Soroptimist Int’l Abbotsford Mission, Chilliwack Foundation, Fraser Health, Douglas Centre Langley, Hamil Studios Langley, and The Eagles in Hope. Instruction for these groups is/was provided by local professional artists and professional photographers.

**Time:** July 2007 - Ongoing

**Location:** Abbotsford, Chilliwack, Langley, Hope

**Resources:**


**Art Modalities:** Art Therapy, Drama Therapy, Poetry, Writing, Digital/Electronic Media, Drama/Theatre, Storytelling/Poetry, Ceramics, Crafts, Drawing, Glass, Jewelry, Mixed Media, Painting, Photography

**Contact:**

Fraser Valley Brain Injury Association
Mary McKee or Carol Paetkau
Email: info@fvbia.org
Web: www.fvbia.org
Phone: 604-557-1913

**Image Source:** info@fvbia.org, photographed by Fred Whitlock
The Breastfeeding Art Expo is a three-year arts & health project hosted by Kelowna Community Resources, Interior Health and a 10 member Steering Committee. It will celebrate and support breastfeeding. The project will involve artists and community members from across the Interior Health region who will work as a team to explore the topic of breastfeeding through art. Breastfeeding has important medical, social, economic and environmental benefits. This community art project aims to advocate for policies and improve cultural acceptance, which will better support mothers to breastfeed.

The beauty of the Breastfeeding Art Expo is that ingenuity and inspiration comes from engagement within individual communities. The community members being mentored by the artists will be shaped by their own personal experiences, which will result in ten unique art pieces that will each have their own impactful story. Our mission is to advocate for policy that will support new mothers to start and continue breastfeeding, by improving breastfeeding awareness and support within communities. Ultimately, our vision is to improve the long-term health of infants and families.

Partners: Kelowna Community Resources, Interior Health, and other partners across Interior Health are invited to participate

Time: January 2014 – October 2018

Location: A variety of locations across the Interior Health geographical region

Art Modalities: All Art Modalities

Contact: Karen Graham, Project Coordinator
Email: karen.graham@interiorhealth.ca
Web: www.breastfeedingartexpo.ca
Phone: 250-868-7846

Image Source: karen.graham@interiorhealth.ca ©breastfeedingartexpo.ca

**DESCRIPTION**

The Breastfeeding Art Expo is a three-year arts & health project hosted by Kelowna Community Resources, Interior Health and a 10 member Steering Committee. It will celebrate and support breastfeeding. The project will involve artists and community members from across the Interior Health region who will work as a team to explore the topic of breastfeeding through art. Breastfeeding has important medical, social, economic and environmental benefits. This community art project aims to advocate for policies and improve cultural acceptance, which will better support mothers to breastfeed.

**PURPOSE**

The beauty of the Breastfeeding Art Expo is that ingenuity and inspiration comes from engagement within individual communities. The community members being mentored by the artists will be shaped by their own personal experiences, which will result in ten unique art pieces that will each have their own impactful story. Our mission is to advocate for policy that will support new mothers to start and continue breastfeeding, by improving breastfeeding awareness and support within communities. Ultimately, our vision is to improve the long-term health of infants and families.

**PARTICIPANTS**

10 artists or artist teams; 1 videographer or videography team, 50 or more mentorees (community members), and thousands who will have the opportunity to attend the Expo in person or online.

**OUTCOMES**

Outcomes include: exploring how the creation of art can help improve community and individual health; increasing awareness of breastfeeding as a cultural norm; improving support for breastfeeding women and breastfeeding policy; and increasing potential for future health/arts collaboration.

**FRAMEWORK/PHILOSOPHY**

The project will engage artists and community members across Interior Health in broad community-based discussion and celebration of breastfeeding, through the avenue of art. We hope that this will stimulate public engagement and support for breastfeeding policy that supports women to breastfeed.
“Building Capacity in our Children” created by Liz McKenna, is an Art Therapy program organized through the Canadian Mental Health Association (Delta) in collaboration with the Delta School District and as an after school program. This program uses a group art therapy process developed for use with children who are having difficulty functioning in their Grade because of developmental, cognitive, linguistic, behavioural, emotional or social issues. It is easily adapted for general populations of children. The learning modules work for an open, mixed group of children. The goal is to expand their “range of play” using the arts. The skills learned can then filter across disciplines to help make greater meaning of lived experience. The process helps children understand how the world works and fosters a better acceptance of who they are and how they function. The weekly program, through ritual and repetition, helps participants honour and respect feelings and emotions, teaches them how they function, develops a love of the “Arts”, helps each individual to see themselves as budding artists, develops sensitivity to the language of the “artist”, and develops skill acquisition in the arts as a by-product.

The Art Therapy program is based on the belief that the arts have the power to nurture and heal the mind, body and spirit.

Children and youth (Grades 1 through Grades 12) geared towards the developmental level of the individual, caters to the social learning stream, and children having difficulty functioning in regular classes.

Participants explore issues, refine skills, ask questions and solve problems in a warm, safe and trusting environment. The process provides a safe and creative space for growth with some challenges, provocative questions, and problem solving situations and where they can practice empathic skills. Ultimately, the process hopes to stimulate the transfer of what has been learned to one’s own life that deepens the individual’s understanding.

[CONTD. ON THE NEXT PAGE]
The intent with this group process is to incorporate more fully and systematically, the curative factors associated with group dynamics. The focus is on the individual learning how they function and how to work collaboratively and communally in groups. The product and skill acquisition is de-emphasized and the process emphasized more. In the beginning, the process emphasizes orientation, support, warmth and acceptance. Later it develops creativity, universality, imitation, interpersonal learning, social skills, altruism, and hope. A child’s privacy and personal boundaries are highly valued and they are in charge of the type, and degree of their level of interaction and disclosure. While a supportive group is usually helpful for everyone, the process is presented as being particularly helpful for children who feel anxious, depressed, empty, negative or uncreative. The mental health concern is deliberately down played and is given a subordinate role in terms of the overall thematic content. The spotlight is gently focused elsewhere. The underlying themes are learning mindfulness, mindsight, learning about feelings and stressors through participation in various art mediums. The focus is on mental wellness and destigmatizing mental illness.
CAMPBELL RIVER ARTS COUNCIL -
ARTS & HEALTH PROGRAM

DESCRIPTION

What started as an “Arts & Health” initiative, and has continued as the ABCD (Arts Based Community Development) project, includes many ‘micro-projects’ (or micro-engagements) including art programs with the Stroke Recovery Association, Head Injury Support Group, John Howard Society, Family Services and others, as well as a Music Therapy Program at the local hospital and various seniors’ homes. Our Graphic Recording service works with AIDS Vancouver Island, local schools and anti-bullying, First Nations and reconciliation, etc. The scope of Art & Health is quite far ranging; it is to this understanding that we adopted a broad program that addresses many diverse elements of overall development. Our motto is ‘No Story is Too Small.’

PURPOSE

This program was created in 2008 to connect the Arts Council with various health and social service agencies in Campbell River. It aims to address overall community development issues, recognizing that community ‘health’ can be measured in many ways. These include economic, social, cultural, personal, physical, emotional and mental health.

PARTICIPANTS

The program also aims to engage a broad section of the population from children to seniors.

[CONTD. ON THE NEXT PAGE]
From the Executive Director, Ken Blackburn: “My personal interest grew from the study of sculpture and my MFA thesis work that recognized the role public sculpture could play in rehabilitating or rejuvenating fallow, derelict or empty urban space. Sculpture came to be defined in its broadest sense, one that included multi-media, time based works, performance and socially engaged community works, requiring in some instances a strategy of community ‘programming’ and facilitation that would interface people with places. This evolved to understand the relationship between personal health, urban space and communal health and began to question definitions of each. Alongside, the growth of community engaged social art practice began to interweave into the discussion, resulting in a hybrid ‘program’ of action that viewed overall community health as a mosaic of economic, social and cultural factors, tempered within an understanding of public, private and civil society sectors of governance and enterprise. My interest lay in working from the front lines of community, at the micro-level, recognizing that micro-engagement contained within it the broad scope of the entire discussion, but at a level of personal interaction and individual human scale. Passion still exists here and has not been filtered out through the bureaucratic or economic process. This scale of engagement fits well within an arts approach to community ‘health’ and served to re-define the role that an Arts Council can play at the local level. Hence, I have worked to position the Campbell River Arts Council, as well as my own work, as central to the discussion of where art and health define one another.”
CHRONIC PAIN IN FOCUS

DESCRIPTION

‘Chronic Pain in Focus’ is a photography project where individuals are encouraged to use photography in order to express and share their feelings about, and the reality of living with chronic pain. We plan to hold a ‘Photo-a-Day’ chronic pain community photography project in 2015, as well as a private online space for individuals to share their chronic pain photos and writing. Until those parts of the project start, people can become involved by hashtagging their photos with #chronicpaininfocus. Find chronic pain photos on Instagram @chronicpainlife.

PURPOSE

To encourage people living with chronic pain to utilize photography as a coping mechanism, as well as a method of communication and connection.

PARTICIPANTS

Anyone experiencing chronic pain.
The Circles of Understanding project brought together First Nations youth and elders in Vancouver to create a brochure, banners, a website and teaching resources around the impact of Indian residential schools. These materials are also used for public education and in workshops within the VPD for their cadet training. The stories of survivors of Indian Residential Schools are not easily shared. However, we know that an essential aspect of the healing process is for long-held secrets to be revealed. The people whose portraits you see are from different nations who share a common message: Canadian history regarding the Indian Residential School System isn’t just about Aboriginal, Metis, Inuit and First Nations people in the distant past; it is about Canada and how our history is affecting people today. Understanding and compassion are important contributions to the healing that is needed between our peoples, our communities and our nations. These statements are offered in the spirit of unity and healing, recognizing that we are all part of the human family. By understanding each other better, our community and country is strengthened. A society based on honour, respect, fairness and compassion is one in which all children, all families, and all generations can live in safety and reach their full potential. Will you join us?

PURPOSE

To educate the public, schools and the police about the long-term impacts on health and wellbeing as a result of the Indian residential school system.

PARTICIPANTS

12 Elders and youth participated in the first year, and many people viewed the materials as they were part of the Year of Reconciliation events in Vancouver.

OUTCOMES

The materials from year one of this project were so well received that further funding was found to re-print the brochure, and do a photo shoot for a second brochure and 10 more banners, this time on the theme of resilience. In addition a Theatre for Living production was initiated “I have to tell my story” and some videos of elders’ stories were produced.

FRAMEWORK/PHILOSOPHY

This is primarily a storytelling project, in multiple modes. It is important for First Nations youth to understand the cross-generational impact the Indian residential schools have had. It is also important for the general public to understand this part of Canadian history. In particular, the work of the VACPC works to also create understanding between Urban Aboriginal people in Vancouver, and the Vancouver Police Department. This project plays a big role in not only educating but in also using the arts and stories in particular to create empathy, and help all those on their healing journeys.
COMICS WITH A CAUSE

DESCRIPTION

Comics with a Cause is a small team of artists and advocates based out of Vancouver with a mission to use comics and storytelling to spread awareness of sexual assault and violence.

PURPOSE

With support from the Sexual Assault Initiative Fund at the University of British Columbia, our crowd-funded web comic, “BRANDED”, is aimed at raising awareness of sexual assault on campus. It tells the story of four characters whose lives become entangled with - and eventually transformed by - the controversial actions of an anonymous vigilante named "The Brander." BRANDED is written by Rodrigo Caballero, illustrated and lettered by Delia Gable and Reetta Linjama, and coloured by Shari Chankhamma.

FRAMEWORK/PHILOSOPHY

Everyone can play a part in helping to end violence against women. Yet lack of exposure and public acknowledgement of its prevalence has too often contributed to its normalization in every-day life. Stories help portray subject matter and reach individuals in ways not possible in news or statistics. We believe comics have true potential to not only reach audiences not yet familiar with the topic of violence against women, but to help lift the veils on this heinous phenomena that impacts countless women around the world every day.

Image Source: http://brandedthecomic.com
COMMUNITY PARTNERSHIP PROGRAMS AT LEIGH SQUARE COMMUNITY ARTS VILLAGE, PORT COQUITLAM

DESCRIPTION
Leigh Square Community Arts Village encourages and facilitates community development through arts, culture and heritage within Port Coquitlam, and serves as a cultural meeting place - a 21st century community arts centre. Leigh Square partners with local organizations to provide quality, low cost, accessible arts and culture programs for the community. Such initiatives include: The Singing Project - Partnership between Port Coquitlam Stroke Recovery Association and Leigh Square, The Youth Music Project - Supported by the Friends of Leigh Square Society and Leigh Square, Crossroads Coffeehouse - Partnership between Crossroads Hospice and Leigh Square, Philosophers Cafe Talks - Partnership between SFU and Leigh Square, Art Demonstrations - Partnership between Art Focus Artists’ Association and Leigh Square, and Open Art Studio Drop In - Facilitated by Friends of Leigh Square Society and Leigh Square.

PURPOSE
To provide accessible arts and culture programs for the community.

PARTICIPANTS
All ages.

OUTCOMES
Community participation, cultural benefits, health benefits.

FRAMEWORK/PHILOSOPHY
Leigh Square Community Arts Village uses the Community Cultural Development model which is based on a grassroots approach. Community Cultural Development is an approach to cultural activity that employs the principles and techniques of community development: facilitating rather than providing, supporting rather than directing, and creating an enabling environment that permits community members and artists to work in partnerships to achieve community cultural goals.
CREATIVE EXPRESSIONS ART NIGHTS

DESCRIPTION

A celebration of meeting and making, a social way to share a passion for craft, art, and design in the community. Participants may drop in anytime, and bring any creative project they are working on, or come and see what everyone else is working on.

PURPOSE

Each session has a free mini-tutorial offered to get participants’ creativity pumping with hands-on crafting activities. We provide the supplies, tools, snacks, and know how at no cost to participants that attend.

PARTICIPANTS

This is a free inclusive event open to all artistic skill levels, ages, and demographics, however participants must identify as having a mental health issue or an addiction.

Partners: Vancouver Coastal Health/Consumer Initiative Fund


Location: Vancouver

Art Modalities: Art Therapy, Design - Clothing/Textiles, Writing, Digital/Electronic, Colour Use, Crafts, Drawing, Fiber Art, Glass, Jewelry, Mixed Media, Painting, Photography

Contact: Christie, Project Manager
Email: BestEventsInVancouver@gmail.com
Web: http://besteventsinvancouver.com/want-to-know-more/art-nights-2014/

Image Source: BestEventsInVancouver@gmail.com
DO BUGS NEED DRUGS?

**DESCRIPTION**

The Do Bugs Need Drugs? (DBND) program is a multifaceted public and health care professional education program that uses video, music, art and other activities, and is geared towards decreasing antibiotic overuse and misuse and the spread of resistant organisms (www.dobugsneeddrugs.org). Do Bugs Need Drugs? focuses on three key messages: 1. Handwashing is the best way to stop the spread of infections; 2. Not all bugs are created equal. Both bacteria and viruses cause infections but antibiotics only work on bacteria; and 3. Use antibiotics wisely to stop bacteria from becoming resistant to antibiotics.

**PURPOSE**

Human antibiotic use is a known driver of antibiotic resistance. Although antibiotic resistance is a naturally occurring biological phenomenon, it has been exacerbated by the abuse, overuse and misuse of antibiotics. As such, concerted effort is needed to strategically reduce the overuse and misuse of antibiotics at the individual and population levels. Combined, these efforts not only have the potential to arrest and possibly reverse the current upward trends in resistance, but also have the potential to alleviate the burden placed on individuals and the health care system associated with antimicrobial resistant infections.

**PARTICIPANTS**

Public teaching within the DBND program is comprised of several components, including a Daycare Program, a Grade 2 Program, and an Older Adult Program. DBND also provides support for adaptation of the standard programs under General Teaching as well as for use of DBND approved teacher resources for children in Kindergarten to Grade 3 (K-3).

**OUTCOMES**

The public education and health care professional education programs using art, song and other mediums, raises awareness about the importance of handwashing in preventing the spread of infections. This is particularly important in settings where many objects are shared. Proper handwashing reduces rates of infections and the need for antibiotics, and prevents the development of antimicrobial resistance.
ENTERPRISING WOMEN MAKING ART

Time: 2003 - Ongoing

Location: Vancouver

Art Modalities: Crafts, Drawing, Jewelry, Mixed Media, Painting

Contact: Fiona York or Anna Jones, Program Coordinators
Email: ewma@atira.bc.ca
Web: http://www.atira.bc.ca/enterprising-women-making-art
Phone: 604-685-8043

DESCRIPTION

EWMA was launched in 2003 as a development initiative of Atira Women’s Resource Society. It has focused on supporting women in Vancouver’s Downtown Eastside to work together to develop an alternative form of business or employment that is grounded in their needs and realities. The program is a self-employment initiative for women impacted by violence who face significant barriers to traditional employment and who seek safe, income-generating opportunities free from exploitation, abuse or other vulnerabilities. Blending art, community and social entrepreneurship, EWMA works with emerging women artists and artisans in Vancouver’s Downtown Eastside to participate in a democratic and equitable social enterprise that coordinates the pooling of resources to produce and market women’s visual art and handmade products, as well as focuses on building women’s capacities and knowledge, and increasing their access to lucrative markets and sales. This project will strengthen and foster women’s full and equal participation in the community and economy. EWMA is a community-based initiative that works with and celebrates the talents of its participants, contributes to their community, and supports their personal and economic empowerment.

PURPOSE

To empower the artisans, their local production and help to create a fair connection between producer and consumer; improve socio-economic conditions; promote recognition of the strengths and capacities of the DTES low income community; promote community cohesion by creating opportunities for diverse groups to work together; and increase individual self-sufficiency.

PARTICIPANTS

The program is inclusive of all women in Vancouver’s Downtown Eastside who have been affected by violence (including aboriginal, immigrant, visible minorities, senior women and women with physical or mental disabilities) and operates from a harm reduction, low threshold, and anti-oppressive framework with the goal to offer immediate income-generating alternatives.

OUTCOMES

EWMA participants are active in the design, planning, marketing and production of their products. The handmade products are: semi-precious jewelry, hand knit garments, cards/paper arts, ceramics, fine arts photography and textiles.
ERIC MARTIN THEATRE GROUP
(THE 6TH FLOOR PLAYERS)

- **Partners:** Allan Weeks
- **Time:** Ongoing
- **Location:** Victoria

**Resources Available:** The group can make scenes, or short plays for almost any occasion or event.

- **Art Modalities:** Dance/Movement, Drama/Theatre

**Contact:**
Vancouver Island Health Authority
Drew Barnes
Email: drew.barnes@viha.ca

**DESCRIPTION**
A group of people with mental health issues that come together to explore different styles and techniques of theatre and acting. For example, working on scripted pieces like Shakespeare, or participating in Augusto Boal’s acting techniques. We hope to eventually put on a play of some sort for a one night performance.

**PURPOSE**
To help people by working in groups and exercising their artistic side.
To enjoy drama/theatre in all of its forms.

**PARTICIPANTS**
All ages, with mental health issues.
EXPRESSION - BAREFOOT CARAVAN

DESCRIPTION

Barefoot Caravan believes in the influence that music has in the creation of unity. Music and the arts are a gateway to knowing ourselves; a window to the soul. Healing the self is a step towards healing the whole. This is why music is so important in the world today. This is the intention that the group plays with. Barefoot Caravan is a five piece band that performs indigenous music in various languages that represent the people of the world with unique, upbeat arrangements along with original compositions. They combine root rhythms; Soca, Afro-Cuban, Gypsy and Reggae with melodic three part harmonies. The Caravan is based in BC’s Okanagan Valley. They travel across western Canada offering diverse and highly interactive performances. This project is constantly evolving, bridging community, art and people of all ages. The members offer various experiences including rhythm, dance, song workshops, onsite live recording/media and drum making programs. They are a group who truly share the greater goal of re-connecting us all to the world we live in together. They nurture experiences that support emotional wellness, social justice, building communities and supporting an inclusive approach.

PURPOSE

Barefoot Caravan performances are appropriate for all ages and are developmentally sound. Performances respond to various learning styles, individual needs, and can be customized to a specific school’s focus and interests. The performances are delivered in a positive learning environment to create inclusive participation that fosters individual and collective success. The performance is interactive - in school settings, it involves students and teachers. The goal of the performance is to use energy and engagement to empower participants to take a deeper interest in world music, culture, and language, and to take a deeper interest in the world itself and the impact they have on it. This program is designed to develop understanding of world music and percussion; awareness of cultural diversity and global citizenship; increased appreciation and enthusiasm for world music and culture; awareness of cultural interconnectedness and social responsibilities; highlight the value of world music and global community connections; and recognition of one’s own cultural diversity and cultural roots.

PARTICIPANTS

Expression Barefoot Caravan provides programs for all ages and abilities.

OUTCOMES

Through the pathway of the arts, we build community and empower people to connect, which supports both social and emotional wellness.
FAIRFIELD STORIES COMMUNITY MURAL PROJECT

DESCRIPTION

Through public engagement, residents and visitors are invited to create art contributions for a collaboratively made mural for exterior beautification of the Fairfield Community Centre. Inter-age free public workshops, plus tailored sessions for young learners 2-5, K-12, are presented to participants of the community centre. Themes explored are home, belonging, food (for humans and urban nature dwellers who we depend on to pollinate food). Sensitive ecosystem ideas prompt participants to consider the shared elements we need to rely upon clean water, air, lands, as well as social determinates of health such as agency, community connectivity, friendliness and safety for all beings.

PURPOSE

An antidote to despair, simply gathering in a friendly, inclusive atmosphere creates community for those new to the city, region, or neighbourhood. Inter-age activities create opportunities to dispel notions of otherness. Offering new possibilities inspires people to be included and creates a sense of belonging. People share ideas, food, and feel cared about, leading to possible personal and collective resilience in uncertain times. An anonymous Pop-up Art Station located in the community centre foyer provides an option for participating by writing a Letter to the Future about current life in the neighbourhood, contributed confidentially, sharing perspectives from those wishing to add thoughts quietly.

PARTICIPANTS

Participants are Inter-age. Infants in arms to 70+ years; several mums with young children accompanied by other mothers with young children; new immigrants and foreign language students; post-secondary students and seniors; retired professionals lending technical skills; 80 out of school care licensed care participants; attendees of other registered programs operating at the community centre who engage in the project at the Pop-up Art Station; community centre board members and staff.

OUTCOMES

The public will be authentically included by active participation and by the legacy left. Those who took part will have gained perspectives of themes, for themselves and for their neighbours. Ecosystem health education will have been made available to those unfamiliar with need for learning about our shared reliance upon a healthy environment. Support for family resilience and inclusion reminds about the value in community processes, interactions, and for some, an introduction to community cooperative initiatives.

[CONTD. ON THE NEXT PAGE]
Human creative expression is essential for wellbeing. People yearn for social connectivity. Art can be a context for simply being in the presence of others, witnessing together, sharing and differing in perspectives. The place created for the considerations people share ought to be as essential as food/shelter/clothing. Community settings provide this essential place and encourage connectivity. Artists provide a safe, happy, friendly place to explore our shared human experiences.
Frames Film Project is a Vancouver-based film production and life skills program that provides opportunities for youth to learn the basics of filmmaking in a supportive, safe and fun environment, at no cost.

Youth who have been affected by mental health issues or substance misuse in any way, either personally or through family and friends, are eligible to participate. Selected youth will receive both filmmaking education and personal development training, leading to the creation of short film projects expressing their thoughts, experiences and ideas for change. These projects are shared with the community via numerous events and media channels subsequent to each course.

Approximately ages 16-24, all genders and sexual orientations. Each intake services about 9-15 youth affected by mental health issues in some way.

Participants (groups of 9-15 youth) work as a team generally over a 10-13 week curriculum, creating public service announcements and short films. The process provides participants with valuable life and employment skills from relationship building, team work, community outreach, project management and client services. The 10 weeks culminate in a grad ceremony and film premiere.

Youth engagement and life skills delivery through arts-based programming.

Image Source: http://framesfilmproject.com/
FRAMES OF MIND MENTAL HEALTH FILM SERIES

DESCRIPTION

The Frames of Mind Mental Health Film Series (launched in 2002) and annual film festival (held from 2004-2008) is an initiative of the UBC Department of Psychiatry’s Institute of Mental Health presented in conjunction with The Cinémathèque. The goal of these events is to use thought-provoking cinema in order to promote community and professional education of issues pertaining to mental health and illness. The series consists of monthly evening screenings of a dramatic feature film or documentary directly related to a particular mental health theme, followed by an informal presentation related to the mental health issue depicted in the film. Speakers and panelists range from psychiatrists and other mental health professionals to representatives from mental health community-based and nonprofit organizations, cinema experts and mental health consumers and their family members. A moderated discussion concludes each evening, with full audience participation encouraged. Screenings are held at 7:30pm on the third Wednesday evening of each month at the Pacific Cinémathèque Theatre, 1131 Howe Street, Vancouver, BC.

PURPOSE

To promote professional and community education of issues pertaining to mental health and illness, and in doing so, acquaint the audience with award-winning, thought-provoking cinema.

PARTICIPANTS

Attendees are diverse, and range from the general public, cinephiles, mental health professionals, those affected by mental illness and their friends and families. Age is limited to 19+ as attendees must become members of the Pacific Cinémathèque, which is limited to this age group.

OUTCOMES

Education, awareness, support, stigma reduction, finding community and local resources, etc.
Established in 1989, the Friends of Music Society is a non-profit, charitable organization that uses music as the basis for rehabilitation and socialization programs to build partnerships between musicians with and without a mental illness.

Our goal is to provide a safe, fun and supportive musical environment that also helps to raise awareness and reduce stigma associated with mental illness in the community.

All ages, from teen to senior, participants are from the general public and individuals with developmental and societal mental illnesses.

Rehabilitation, socialization and creative employment strategies for people with a mental illness, in a safe and fun environment. Improves physical and mental health, increases morale, decreases loneliness, and improves respiratory function.
GABRIOLA ARTS COUNCIL’S HEALING POWER OF ART PROGRAM

DESCRIPTION

This initiative is based on the belief that the creative process and self-expression can help people develop insight into their situations—mental, emotional and physical. The program has various aspects - the current one is for people living with a cancer diagnosis, and recent programs include one for seniors on “elder wisdom,” one for those suffering from chronic pain, and one for children dealing with grief or loss. The current program is an arts-based support group for those who are recovering from cancer or living with a cancer diagnosis. This six-week program is carried out in a safe, facilitated space to: share support and experiences with others; reduce anxiety, stress and isolation; develop tools for self-help and self-empowerment; and to have fun with creative expression. Participants can play creatively with images and colour, with collage, paint and clay, while exploring their feelings and fears. They don’t have to be an artist to benefit from this program, or have any experience of art at all. Participants in the previous program enjoyed fun and laughter while learning to express themselves in new and different ways. They developed trust in one another and in themselves. By sharing and communicating through the creative process, another part of their healing journey had begun. Professional Art Therapists Liz McKnight and Jaki Deer facilitate the program.

PURPOSE

To support and build health and wellbeing in our community through the healing power of art.

PARTICIPANTS

Vary according to the program being offered.

OUTCOMES

Participants report positive outcomes. Here are some examples of participants’ experience: “This was a pleasurable, constructive and helpful series... It was safe, non-judgmental and uplifting. We all learned to take some risks and we learned more about ourselves and the others. It helps to know one is not alone when cancer drops by to totally mess up one’s life.” Another participant added that “This program for me was a wonderful experience. Living with chronic illness can be isolating... leaving you feeling alone and misunderstood. I found being in an environment with others who face a similar challenge, gave me comfort. Listening and sharing is good for the soul. Having two trained professionals putting us at ease and leading our group through the “class” made it a safe place to truly open up. Having the ability to create something out of our emotional and mental status at the time was helpful each session. I just found it a soul-pleasing experience.”
FRAMEWORK/PHILOSOPHY

Healing with art is based on the belief that the creative process and self-expression can help people develop insight into their situations—mental, emotional and physical.
GALLERY GACHET

- **Time:** August 1996 - Ongoing
- **Location:** Vancouver
- **Resources Available:** Volunteer training program, retrospective show catalog, history of performance art at Gallery Gachet catalog, and tons of art. Come to the gallery.
- **Art Modalities:** Poetry, Reading/Literacy, Writing, Digital/Electronic, Film/Video, Comedy, Dance/Movement, Drama/Theatre, Storytelling/Poetry, Ceramics, Colour Use, Crafts, Drawing, Fiber Art, Mixed Media, Painting, Photography, Printmaking, Sculpture
- **Contact:** Anthony Meza-Wilson, Volunteer and Facility Coordinator
  - **Email:** volunteer@gachet.org
  - **Web:** www.gachet.org
  - **Phone:** 604-687-2468

**DESCRIPTION**

Gallery Gachet is a unique artist-run centre located in Vancouver’s Downtown Eastside. Gachet is a collectively-run exhibition and studio space built to empower participants as artists, administrators and curators.

**PURPOSE**

We strive to provide a focal point for dialogue amongst outsider/dissident artists. Through artistic means, we aim to demystify and challenge issues related to mental health and social marginalization in order to educate the public and promote social and economic justice. We see a time and place where people who have experienced marginalization feel fully supported in their struggle for a creative life and career, including access to adequate housing, studio space and economic security. We believe that the expression and practice of art and active participation in culture-building is a human right, and that art and culture are critical elements of a healthy society.

**PARTICIPANTS**

People of all ages, marginalized by mental health, trauma, and/or addictions experience.

**OUTCOMES**

Gallery Gachet is a space that actively empowers participants by governing the space with a collective that is comprised of participants. We are not a traditional service-provider model, instead we act as a resource centre to support artists with mental health, trauma, and/or addictions experience by providing gallery space, exhibition and curatorial opportunities, technology, and staff support. Our exhibitions are educational opportunities for the public, acting to destigmatize mental illness.
HEALTH AND SOCIAL LITERACY THROUGH VIDEO AND GRAPHIC NOVELS

DESCRIPTION

The Healthy Aboriginal Network continues to create graphic novels on health and social issues for youth, but has recently added a few new mediums to its toolbox - animation, video and augmented reality - triggering video on a cellphone with a static image.

PURPOSE

To create entertaining knowledge translation tools for youth.

PARTICIPANTS

Pre-teen to mid-twenties.

---

Time: January 2005 - Ongoing

Location: All of BC

Resources Available: www.thehealthyaboriginal.net

Art Modalities: Graphic Design, Reading/Literacy, Film/Video, Multimedia, Graphic Novels

Contact:
Healthy Aboriginal Network
Sean Muir, Executive Director
Email: sean@thehealthyaboriginal.net
Web: www.thehealthyaboriginal.net
Phone: 250-941-8881

Image Source: www.thehealthyaboriginal.net
HEALTH PROMOTION BOOKMARK CONTEST

- **Partners:** Vancouver Coastal Health (Richmond Public Health), Richmond School District, Richmond Public Library, City of Richmond, Richmond Children First

- **Time:** January 2005 - Ongoing

- **Location:** Richmond

- **Resources Available:** A portfolio of winners and a sample of winning bookmarks are available from julie.stuart@vch.ca.

- **Art Modalities:** Colour Use, Drawing

- **Contact:**
  Julie Stuart, Public Health Nurse
  Email: julie.stuart@vch.ca
  Web: www.vch.ca
  Phone: 604-233-3207

**DESCRIPTION**

Public Health staff choose a health promotion theme/slogan around which elementary school students design a bookmark. Bookmarks are judged by public health and community partners and one winner for each grade (K-7) is chosen. Each winner receives $75 to Chapters/Indigo, and their bookmark is professionally printed and distributed in the community (3000 of each design are printed for a total of 24,000 distributed).

**PURPOSE**

To raise awareness and mindfulness about a specific health topic in our community, through distribution of bookmarks depicting the health topic, designed by children.

**PARTICIPANTS**

Elementary aged children, grades K-7, with an average of 2300 participants each year.

**OUTCOMES**

Greater awareness of a specific health topic in elementary school children and the community. A sense of pride and accomplishment for winning children and strengthened partnerships between organizations.

**FRAMEWORK/PHILOSOPHY**

Children will be mindful of a health topic when they are interpreting it into a drawing/design for a bookmark. The children’s bookmarks are used as a tool to educate the community about the health topic.

Image Source: julie.stuart@vch.ca
HEART FIT

**DESCRIPTION**

heART Fit is a practice for those seeking a creative lifestyle and improved health through creativity, a 3-hour session of Spontaneous Process Painting, a time to create ‘a resting heart’ by embarking on a journey of creative exploration, inviting creative spirit to lead you within, and awaken you to your authentic ‘self.’ The program is open to all ages and levels of experience – to those who have never picked up a paintbrush and those who are experienced painters. The program is supported and operated by participants in the group.

**PURPOSE**

A group experience whose focus is to learn from and encourage others as we evolve creative values.

**PARTICIPANTS**

Open to everyone. All ages.

**OUTCOMES**

Self-awareness and improved sense of wellbeing.

**FRAMEWORK/PHILOSOPHY**

Spontaneous Process Painting encourages relaxation and self-reflection. The intent is to tap into the subconscious to increase self-awareness and balance energy.

---

**Partners:** The Rotary Centre for the Arts, Kelowna

**Time:** February 2008 - Ongoing

**Location:** Kelowna

**Resources Available:** 4 years of weekly newsletters, philosophy papers, contact Karen Close at keclose@yahoo.com

**Art Modalities:** Mixed Media

**Contact:**
Karen Close, Community Arts Activist
Email: keclose@yahoo.com
Phone: 250-870-3426

---

Image Source:
I'D RATHER WALK

DESCRIPTION

I’d Rather Walk is an album/collection of songs, but also a community building tour through sharing songs, stories, and a good walk. It is also a tribute to my late singer/songwriter father, Garry Averill, and ties in his musical history with CBC back in the 70’s. The project is a walking exploration of BC, and our whole country, and I host community walks in different regions when I tour there.

PURPOSE

It is a way to encourage people to connect with each other, get some exercise, as well as to provide a safe space to discuss death and loss.

PARTICIPANTS

All ages, all conditions welcome, provided they can walk, and no limit on numbers.

OUTCOMES

Provides people with a fun community to go walking with that otherwise might not go on their own, and a chance to experience the beauty of our province and country first hand.

FRAMEWORK/PHILOSOPHY

I used to be an exercise physiologist and coach, and worked with individuals, teams, businesses, and charity groups to overcome mental and physical barriers. I left this career to pursue music with the intention of utilizing it for positive community growth. Music has taken me to Asia, Europe, and now extensively through Canada, and I have learned a great deal from presenting deeper questions and conversation through song. Three years ago, my father passed away from a rare cancer. Through that experience, I became aware of how uncomfortable discussions of death are on this side of the world, and that it doesn’t need to be. While my father was in hospice, my brother and I would bring guitars, and we would just play. It reminded me of the first time my father had cancer about 20 years ago. I was too young to understand what was wrong with him at the time, but I knew it was really difficult for him and my mother. I have a very strong memory of my father, a patient of the Vancouver Cancer Clinic at the time, singing for the other patients and warming an otherwise very heavy atmosphere. It is from these experiences that I feel the importance of sharing what I can to help alleviate and/or brighten the moods of those in tough times. Music seems to be able to bridge gaps that no other language can, and helps people open-up, talk, and heal.

Time: July 2013 - Ongoing

Location: Mostly Vancouver, cities around Vancouver Island, the Okanagan, will branch out all over BC and Canada

Resources Available: http://michaelaverill.bandcamp.com

Art Modalities: Music Therapy, Music, Singing, Storytelling/Poetry

Contact: Michael Averill, Project Creator/Artist
   Email: michael@michaelaverill.com
   Web: http://michaelaverill.com
   Phone: 604-224-2141

Image Source: http://michaelaverill.com
IndigenEYEZ is a new aboriginal-led youth empowerment initiative that provides breakthrough training for practitioners and life-changing programs for First Nations youth in British Columbia. Our proven youth engagement model uses techniques with lasting impact drawn from the arts, experiential education and motivational learning. We know from experience that these methods can transform lives. Right now we are poised to expand across the province at a rapid pace.

Create thriving First Nations communities where youth, grounded in aboriginal culture and values, have the support and skills to find meaning and purpose in their lives and are creatively engaged in responding to the challenges they and society face.

IndigenEYEZ emerged from a collaborative relationship with Partners for Youth Empowerment (PYE), an international non-profit organization, and their Canadian partner organization, the Power of Hope, a BC-based youth empowerment program. The programs practice an arts-based program methodology called the Creative Community Model, which helps youth develop key life skills such as empathy and creativity that enable them to respond to our rapidly changing world. The two key elements to the model are: creative facilitation training for practitioners where they learn how to deliver transformative learning experiences for youth that help cultivate wellness and self-determination; and arts empowerment youth camps where, in a short period of time, youth have an experience that fundamentally shifts their notion of who they are and what they are capable of achieving.

Independent evaluation has found that youth who participate in programs based on the Model are more confident, and experience increased motivation to learn and take on leadership roles in their communities. Evaluation also shows that the transformational impact lasts over time. For example, in Canada, 90% of the youth camp participants surveyed reported sustained impact one year later. The Model has been recognized by the likes of Ashoka, the world’s leading network of social entrepreneurs and Archbishop Desmond Tutu, who is the chair of PYE’s international advisory board. It is practiced by thousands of practitioners and organizations on five continents, with an active network in British Columbia.

**CONTACT**

Kelly Terbasket, Program Director
Email: kterbasket@gmail.com
Phone: (250) 502-7900
Web: http://indigeneyez.com
Young people thrive in safe spaces where they can explore their cultures, history and strengths as valuable community members. One study revealed that youth who were connected to their culture were more likely to feel listened to and valued within their activities. Supportive relationships with adults have also been linked to increased confidence in youth, and reduced risky behaviours.
INSTRUMENTS OF CHANGE

DESCRIPTION

Instruments of Change uses the arts as an educational tool to empower people to become instruments of transformative change in their own lives. By expanding community access to cultural activities, we allow diverse populations the opportunity to make and experience music and art.

PURPOSE

To bring music and art to the broadest possible demographic, allowing people the chance to experience, make and do art themselves; to connect and impact the creators and audience of our art by enabling participants to become agents of change in their own lives through the act of collective art making; to advocate for the value of the arts by illustrating their broad-reaching benefits through our projects, performances, and stories; and to create a sustainable organization, using diversified funding strategies and by developing numerous community partnerships.

PARTICIPANTS

Youth, seniors, immigrants, marginalized adults, and women in prison.

OUTCOMES

Through our arts-based community development projects, which serve schools, hospices, shelters, community centres and prisons, we create synergetic experiences that give both our facilitating artists and our participants a means of expression to find their authentic voice using a variety of artistic modes.

FRAMEWORK/PHILOSOPHY

We believe that everyone deserves a voice and we recognize that each person has unique and personal ways they most authentically express themselves. We also believe that art is an intrinsic part of everyone’s holistic health. So, we reach out to communities with limited access to the arts and offer them a variety of interdisciplinary artistic choices to ensure that each person’s voice rings loud and true.
KICKSTART DISABILITY ARTS & CULTURE

DESCRIPTION
Kickstart Disability Arts & Culture presents and produces works by artists with disabilities and promotes artistic excellence among artists with disabilities working in a variety of disciplines.

PURPOSE
To support and promote artists with disabilities in BC.

PARTICIPANTS
Kickstart is a cross disability organization that works with different artists in many genres. We have about 75 members of various ages.

OUTCOMES
We strive to improve the professionalism of disability arts and work to support and promote artists with disabilities. Kickstart is 16 years old and has produced five multi-disciplinary festivals and many stand-alone art shows in Vancouver.

FRAMEWORK/PHILOSOPHY
We present authentic non-sentimental representations of the disability experience.

Time: Ongoing
Location: Vancouver

Art Modalities: Poetry, Reading/Literacy, Writing, Digital Electronic Media, Film/Video, Multimedia, Comedy, Dance/Movement, Drama/Theatre, Music, Singing, Storytelling/Poetry, Ceramics, Drawing, Fiber Art, Metal Working, Mixed Media, Painting, Photography, Printmaking, Sculpture

Contact:
Kickstart Disability Arts & Culture
Emma Kivisild, Artistic Director
Email: kickstartdirector@gmail.com
Phone: 604-809-5871
Facebook: https://www.facebook.com/KickstartDisabilityArts

Image Source: kickstartdirector@gmail.com
LADYSMITH PARKS, RECREATION & CULTURE - PARTNERSHIP WITH ARTS COUNCIL OF LADYSMITH & DISTRICT, COMMUNITY LINK, AND ISLAND HEALTH

**DESCRIPTION**

Ladysmith Parks, Recreation & Culture and the Arts Council of Ladysmith & District collaborate on a wide variety of activities conducive to the health of individuals within the community and the community as a whole. We recognize the many determinants of health, including: social environments, social support networks, education and literacy, personal health practices and coping skills, healthy child development, and culture.

The Arts Council has studios, classrooms, and a gallery located in the Town of Ladysmith facilities, and provides classes, events, and activities for diverse participants. The Arts Council also curates displays at the Ladysmith Community Health Centre and various local businesses.

**PURPOSE**

To engage with individuals in a community setting for personal growth, social support, community education, and artistic endeavours that enhance their personal health status through addressing the determinants of health.

**PARTICIPANTS**

Most of the programs and activities are universal and inclusive. Participants are of various ages in the general public with diverse health status; including developmental disabilities, mental health conditions, and chronic diseases.

**OUTCOMES**

Participants report improved quality of life after participating in these collaborative programs and activities.
Lafayette Health Awareness Series began in 2006, with a dialogue about breast cancer, which impacted the Lafayette String Quartet profoundly when one of its members was diagnosed and treated in 2001. The Lafayette Health Awareness Forum was created to provide expert and updated health information to the public, in a free forum on various health topics. With the Quartet’s experience that what affects one – eventually affects us all, it was their wish in their 20th anniversary year (2006), to offer some tangible way to share with the community, their gratitude for this universal connection. The Lafayette Health Awareness Forum brings this interconnection to their local community and provides the opportunity for specialists, health professionals and the general public to meet and discuss important health topics. A yearly event, the forum takes place at the University of Victoria, held on a Thursday evening in the early fall. The Quartet provides performances, which begin and end the forums each year.

The Lafayette Health Awareness Forum was created to provide expert and updated health information to the public on various health topics as a free event.

Purpose
The Lafayette Health Awareness Forum was created to provide expert and updated health information to the public on various health topics as a free event.

Participants
Each forum is held in the David Lam Auditorium at the University of Victoria. Depending on the topic, there have been as few as one and many as five speakers and 150-300 people of all ages in attendance.

Outcomes
The community is able to have access to health information and a connection to specialists in various areas of health care. Many who would normally not have this opportunity, are able to benefit from these types of lectures and also hear the Lafayette String Quartet perform.
LATE NITE ART 30: ARTS & HEALTH

**DESCRIPTION**

Late Nite Art is an event series of engaging hands-on dinner and art parties. Late Nite Art events unite a guest artist with a chef and host for a group of 30-50 people, to explore a theme through art workshops. Through experimental art making, fresh local food, and gratuitous beats, Late Nite Art brings communities together in a fun and social art experience to share conversation, art, food and drinks. On June 25 2014, Late Nite Art and Arts Health BC presented the 30th edition of Late Nite Art at the UBC Medical Student & Alumni Centre in Vancouver, with support from the UBC Resident Wellness Office of Postgraduate Medical Education and the Office of Student Affairs. This event was tailored for those who study and work in the health sector, to explore how the arts can contribute to health and wellbeing.

**PURPOSE**

To facilitate new relationships and have guests experience art in a new and unexpected format.

**PARTICIPANTS**

Generally 25-55 years old.

---

**Time:** July 2011 - Ongoing

**Location:** Vancouver BC and Oakland California

**Art Modalities:** Visual Arts - Colour Use, Crafts, Drawing, Mixed Media, Painting; Culinary Arts

**Contact:**
Late Nite Art  
Yashar Nijati, Event Producer  
Email: lateniteart.van@gmail.com  
Web: www.lateniteart.com  
Phone: 778-839-2828

Image Source: www.lateniteart.com
LIVE SINGING MANDALA

DESCRIPTION

Mandalas are vehicles for examination of your own thoughts, feelings, growth and healing. They connect different dimensions of your own universe, bringing harmony to your inner-self, and a better understanding of your purpose in life. Mandalas are integrated structures organized around a unifying center. The word Mandala comes from Sanskrit, and loosely means ‘circle’, but not as shape, it represents wholeness as a model of the cosmic diagram, geometric representation of creation and infinite, the world that extends both beyond and within our bodies and minds. Singing voice (or vocalization) is the sound produced by humans and other vertebrates using the lungs and the vocal folds in the larynx, or voice box. Voice is not always produced as speech, however. Infants babble and coo; animals bark, moo, whinny, growl, and meow; and adult humans laugh, sing, and cry. Voice is generated by airflow from the lungs as the vocal folds are brought close together. When air is pushed past the vocal folds with sufficient pressure, the vocal folds vibrate. If the vocal folds in the larynx did not vibrate normally, speech could only be produced as a whisper. Your voice is as unique as your fingerprint. It helps define your personality, mood, and health.

PURPOSE

Your voice is a holographic representation of all that you are and a reflection of your soul’s creation. Together we create and improvise our sacred sounds and harmonies to create a live singing Mandala.

PARTICIPANTS

Any age or gender, able to express sounds.

OUTCOMES

Using art forms and tools to achieve self-knowledge and deep transformation in life.

FRAMEWORK/PHILOSOPHY

This work dives deep into the alchemy of arts such as music, drumming, singing, sacred geometry, and others, to change and create positive patterns. Our life is a continuous dance around our own axis to enjoy the communion of all there is.

Time: September 2013 - Ongoing

Location: Kelowna

Art Modalities: Music Therapy, Music, Singing

Contact:
Yonisha Rhythms
Miriam Cunha, Director
Email: yonisha@yonisha.com
Web: http://www.yonisha.com
Phone: 250-808-9318

Image Source:
http://www.yonisha.com
**MAGPIE’S NEST COMMUNITY ART SPACE**

**DESCRIPTION**
Magpie’s Nest is a project that builds meaningful community connection through creative collaboration. For over a year, the Magpies have been offering pop-up art workshops focused on community building and up-cycling. While working toward opening their own space, the society currently hosts the public to create art together at various community events and venues.

**PURPOSE**
Our purpose is to create a safe, public home space that brings together community members regardless of their age, ethnicity or gender, to express themselves through creative avenues. To do this, we offer affordable and accessible art making opportunities. We engage community members by inviting them to make art, to create in collaboration with their neighbours, and to contribute their own ideas and expertise through skill sharing. We believe art making inherently transcends our differences and brings people together.

**PARTICIPANTS**
Diverse! We aim to connect people of all ages, from diverse backgrounds and experiences.

**OUTCOMES**
Reducing isolation, community building, creating opportunities to gain confidence, having fun and feeling hopeful.

---

**Time:** April 2013 - Ongoing

**Location:** Vancouver

**Resources Available:** Our public art can be found around the city. Currently there are wish flags in the Hastings North Community Garden.

**Art Modalities:** Poetry, Reading/Literacy, Singing, Storytelling/Poetry, Colour Use, Crafts, Drawing, Fiber Art, Jewelry, Mixed Media, Painting, Printmaking, Sculpture

**Contact:**
Magpie’s Nest Community Art Society
Sarah Peacock, Director
Email: sarah@magpiesnest.ca
Web: www.magpiesnest.ca

Image Source: www.magpiesnest.ca
MALADJUSTED

**DESCRIPTION**

“Maladjusted” is an interactive, Forum Theatre project, produced by Vancouver’s Theatre for Living, and created and performed by mental health patients and caregivers. The play asks questions about how we create more “human centered care” in a mechanizing mental health system. “Maladjusted” was first performed in Vancouver in 2013 to great acclaim. It is touring in 28 communities across BC and Alberta in 2015.

**PURPOSE**

The purpose of the project is to stimulate a community dialogue about how all of us are being asked to adjust to a maladjusted mental health system and to seek concrete ways to humanize care, inside individuals, families, and the health system. Native and non-Native organizations collaborate in each community to bring in the project.

**PARTICIPANTS**

The initial workshop participants (patients and caregivers) were a very diverse group in so many ways: age, gender, orientation, race, etc. Performances are open to the general public.

**OUTCOMES**

“Soft” outcomes are deeper understandings in individuals and families about navigating mental health issues; “hard” outcomes will be policy suggestions for agencies to “humanize” care in their specific communities.

**FRAMEWORK/PHILOSOPHY**

Founded in 1981, Vancouver’s Theatre for Living (Headlines Theatre), directed by David Diamond, uses THEATRE FOR LIVING to help living communities tell their stories. THEATRE FOR LIVING has evolved from Augusto Boal’s “Theatre of the Oppressed.” Since 1989 Theatre for Living (Headlines Theatre) work has slowly moved away from the binary language and model of “oppressor/oppressed” and now approaches community-based cultural work from a systems-based perspective; understanding that a community is a complexly integrated, living organism. Theatre for Living (Headlines Theatre) work is a worldwide leading example of theatre for social change; theatre for dialogue creation and conflict resolution; theatre for community healing and empowerment. Projects have taken place in collaboration with First Nations and multicultural communities through hundreds of theatre workshops, Power Plays and Forum Theatre events around the world on issues such as violence and suicide prevention, anti-racism workshops, youth empowerment, homelessness and mental health, othering, bullying and community development.

**Time:** 2013 - 2015

**Location:** 28 communities across British Columbia and Alberta during January/February/March of 2015.

**Resources Available:** A Community Action Report with policy suggestions to humanize mental health: http://www.theatreforliving.com/past_work/maladjusted/reports_maladjusted.htm

**Art Modalities:** Drama/Theatre

**Contact:**
David Diamond, Artistic/Managing Director
Email: david@theatreforliving.com
Web: www.theatreforliving.com
Phone: 604-871-0508

**Image Source:** www.theatreforliving.com
**MOVIE MONDAY**

**DESCRIPTION**

Movie Monday has become a well-known part of the city’s cultural scene, as well as a forum for discussion (using the films as the catalyst), education and, because we attract a mixed audience of users of the mental health system and people who just want to enjoy a good film, a way to reduce the stigma about people who have mental illness challenges (the founder is open about his bipolar condition, a past patient, but has run the events consistently since June 1993). See website “past movies” for title list and upcoming films.

**PURPOSE**

De-stigmatizing mental illness, addiction and other challenges. Softening the image of the hospital itself. Psychosocial rehab, reducing isolation, and recognizing creativity. Education using film as a catalyst, and sharing great entertainment.

**PARTICIPANTS**

Everyone welcome. By donation and refreshments are low cost, so we are particularly tuned to welcome people financially and or socially marginalized. We are wheelchair accessible, with 100 seats in the theatre and 25 overflow in the lobby.

**OUTCOMES**

Proving a “consumer run” program can thrive. Building community and changing community stereotypes about the institution and people who use it. Providing a consistent and accessible recreational event for people who need that in their lives. Generating consistently positive press and radio. Media and awards are available on website.

**Partners:** Main sponsors include VIHA and Canada Council for the Arts

**Time:** June 1993 - Ongoing

**Location:** Victoria

**Resources Available:** I consider this program a successful model that can be reproduced in other communities.

**Art Modalities:** Film/Video, Drama/ Theatre

**Contact:**
Bruce Saunders
Email: bruces@islandnet.com
Web: www.moviemonday.ca
Phone: 250-595-5977

**Image Source:**
www.moviemonday.ca
MS ART GROUP

DESCRIPTION

A weekly art group, run by volunteers, to allow people living with MS in our community a creative outlet. The weekly group paints at the MS Centre in Victoria. Here, in their own words, is what the painting group means to them: “As a group, we interact and offer one another encouragement, advice and friendship. The Painting Class has been ongoing since 1990, resulting in many long-term relationships – important to people who have lost the structure of their former lives. The quality of our work is not necessarily related to the level of our disability. Some of the best painters are very disabled. That is quite clear to us, and inspiring to all.” Another participant says: “Painting Class is physically challenging, and requires us to lean forward and back, continually exercising our most important muscles - the abdominals. At the same time our focus is on finding a way to get paint in the right spot with limited manual dexterity. This is an excellent physiotherapy, available for three or four hours at a stretch, one day a week. Most of us are not able to paint at home or outside of class.”

PURPOSE

Social, Recreational, Exercise, Therapy, Joy and Fun.

PARTICIPANTS

All ages. All participants live with MS. There were 18 individual artists in 2014.

OUTCOMES

“Painting offers a sense of accomplishment as well as the incentive to keep trying to do more. When working on a painting, it gives back more than one can put into it. During the rest of the week when painting is not available, it makes the world a more interesting place to look at in terms of light, line, and color. It’s a wonderful occupation and we thank the MS Society for making space available for our Painting Class.”
MTC STUDIO INC. SCHOOL PROGRAMS

DESCRIPTION
Partnering with a number of philanthropic organizations, school boards, health authorities and parents, MTC Studio Inc. provides a wealth of school based Music Therapy programs throughout the Lower Mainland. These programs include individualized adapted music, vocal groups, and percussion ensembles. MTC Studio works with the teacher and school to design and implement specialized programs for each site.

PURPOSE
The core commonality of all programs is that of enhanced self-esteem. When people feel positive about themselves, they contribute. Other goals are as wide ranging as increased mobility, dealing with grief issues, learning and practicing social skills and enhancing communication skills.

PARTICIPANTS
6 – 19 years, including children with intellectual deficits, a wide range of mental health issues, physical impairments and survivors of childhood trauma.

OUTCOMES
Outcomes include increased sense of self and others, more stable mental health, enhanced speech and communication, and enhanced social skills.

FRAMEWORK/PHILOSOPHY
While the “main” thrust of the work comes from Music Therapy, all art forms are included. When possible and when a therapeutic outcome can be reached, performance is included, as this can greatly enhance sense of self through the sharing of work.
MUSIC THERAPY FOR CHRONIC PAIN MANAGEMENT
(COURSE)

DESCRIPTION

Music Therapy for Chronic Pain Management is an arts-based self-study webinar (the recording is available online). This course is also taught in person at the Chronic Pain Program at Jubilee Hospital (Victoria, BC). In this experiential course, we introduce some of the most effective music therapy interventions for the management of chronic pain and will show how they can be applied by individuals, therapists and health practitioners. Through the application of multiple learning styles, including lecture presentation format, aural and visual case study material and discussion, students will be shown effective music therapy interventions, recent research and practical application. This workshop addresses a wide spectrum of theories and models of music therapy for this client population, and offers step-by-step goals and objectives relating to various cognitive, motor, affective, developmental and social domains.

PURPOSE

To educate relevant populations on how to manage chronic pain through arts-based processes in groups and individually.

PARTICIPANTS

Ages 15 – 95 years.

OUTCOMES

Learning objectives include being able to: create an effective intervention for pain management; evaluate how music therapy fits within a given pain management setting; identify relevant goals and objectives within a specific clinical context; and collaborate with health professionals in an effective way.

FRAMEWORK/PHILOSOPHY

Sometimes words simply can’t express the depth of what we are experiencing. In my work as a clinical counsellor, I’ve witnessed how often we feel something deeply significant but can’t put words to the experience and the resulting weight of silence can feel isolating. After twenty years of working with people through creativity-based processes as an educator, performer, composer, workshop facilitator and now more recently, as a therapist, some patterns have emerged with enough consistency and coherence that I have decided to give my approach a name. I call it Archetypal Music Psychotherapy (AMP) and it involves accessing, amplifying and integrating unconscious material through musical processes for the sake of wellbeing, individuation and self-discovery. This work relies on the notion that the creative process is a living thing implanted in the human psyche and that all creative expression represents a life-affirming process of self-regulation and a return to wholeness.
MUSIC THERAPY PROGRAM - WEST COAST ALTERNATE SCHOOL

DESCRIPTION

The music therapy program is designed to engage at-risk youth at West Coast Alternate School (WCA) with piano, guitar, bass, and percussion playing. We also offer instruction for singing, lyric analysis and song writing. WCA students can also explore interests in music and sound technology to learn how to create their own projects.

PURPOSE

A marginalized population of youth affected by addiction is engaged in creative outlets for coping and connecting through Music Therapy. Music is used as a tool to build community capacity and promote mental, emotional, physical and spiritual health.

PARTICIPANTS

The West Coast Alternate School services youth, 13-19 years of age, who have a diagnosis within the Fetal Alcohol Spectrum Disorder and an IQ over 70, who are experiencing difficulty in the regular classroom/school environment. The program has a strong focus directed towards the First Nations people, with a population that is approximately 75% Aboriginal. The maximum student capacity is 22.

OUTCOMES

Youth affected by addiction and mental health issues increasingly engage in healthy behaviours. Youth are also connected to strong community support networks to continually support their health and wellbeing.

FRAMEWORK/PHILOSOPHY

Our philosophy in all Vancouver Native Health Society (VNHS) programs is harm reduction, where we meet the client ‘where they are at’. Although goals and objectives are set for each student and group of students, the main objective is for students to have a successful experience, so that they will hopefully have a sense of pride that will encourage them to continue in music therapy, the overall goal being that they will take an interest and adhere to their own health and wellness, and learn to access relationships and services in the community that will assist them.
NEWS: NEW EVOLUTION IN WISE STORYTELLING

**DESCRIPTION**

RainCity Housing and partner, Work at Play, created ‘Open your Heart’ to illustrate the importance that support and acceptance play in caring for each other and our mental health. Inspired by real life stories, we hope that our interactive journey encourages a collective drive to care more about each other, and our community as a whole.

**PURPOSE**

NEWS was a year-long initiative funded by the Community Action Initiative and hosted by RainCity Housing and Support Society. This initiative created opportunities for community members to share first-hand stories about mental health as a way to counteract the myths, misconceptions, and stigma associated with mental illness.

**PARTICIPANTS**

Over 100 people participated in the NEWS project of all ages and had lived experience of mental illness recovery.

**OUTCOMES**

Website and documentary available at: www.open-your-heart.ca

**FRAMEWORK/PHILOSOPHY**

We are all affected by mental illness, whether directly affected or because of people we know: in our families, our communities or at our place of work. NEWS is a “coming out of the closet” project, through sharing our stories and “outing” that we are all affected, we as a community can end one of the last socially acceptable stigmas. It’s going to take all of us, but most of all it will take brave members of our community saying, “Yes, I’ve gone through hard times too, and it doesn’t make me weak, it made me stronger”
OPEN ART STUDIO

- **Time:** July 2007 - Ongoing
- **Location:** Victoria
- **Art Modalities:** Colour Use, Crafts, Drawing, Jewelry, Mixed Media, Painting
- **Contact:** Capital Mental Health Association
  Sabine Vanderispaillie, Program Manager
  **Email:** sabine.vanderispaillie@miravictoria.ca
  **Web:** www.miravictoria.ca
  **Phone:** 250-389-1211

**DESCRIPTION**
A welcoming place where people with mental illness can experiment or re-connect with art, or further their skill set.

**PURPOSE**
Using art as a means of bringing “calm” to people’s life. Using art as a form of meditation and as a coping skill to deal with anxiety.

**PARTICIPANTS**
Adults 19-65 years with mental illness. Group varies in size from 7-20 participants.

**OUTCOMES**
Improved anxiety management.
OUTREACH - CROSSING BRIDGES PROGRAM

DESCRIPTION
Crossing Bridges is an art outreach program that employs local artists and art therapists, who develop and deliver arts workshops to advance participants’ personal and social development. Crossing Bridges is a collaboration among social service agencies, artists, community workers and the at-risk communities they serve.

PURPOSE
Crossing Bridges provides individuals living in at-risk situations the chance to explore their creativity and build self-confidence in a supportive environment. The program builds skills and self-esteem for those living with challenges; promotes connection and healing of the whole person; demonstrates to participants that they are valued; and employs local artists to actively participate in bringing arts awareness to the broader community.

PARTICIPANTS
The program engages children, youth and adults, the homeless, those in substance abuse detox, the mentally ill, Aboriginal populations, women in domestic violence, and those with physical or mental challenges. There are over 500+ participants per year.

OUTCOMES
Artist/Facilitators are amazed at the profound impact that art can have on the lives of people in crisis. Outcomes may vary from temporarily helping someone in detox tap into their creative side as therapy, to mentoring a client at the Women’s Shelter to see beyond her present circumstance and realize that her creativity may supplement her family’s living or help her find a new career path.

FRAMEWORK/PHILOSOPHY
Each person, no matter how marginalized, should have an opportunity to access and creatively express themselves, experience a sense of connectedness and a chance to be a contributing member of their community.
PAUL’S CLUB

DESCRIPTION

Paul’s Club is a social and recreational day program in Vancouver developed to cater to the specific needs of those living with Early Onset Dementia. For men and women diagnosed or experiencing symptoms before the age of 65, Paul’s Club is the first program of its kind in Vancouver.

PURPOSE

To help our members to remain socially integrated, stimulated and physically active in a safe environment while offering regular and significant respite for families.

PARTICIPANTS

Our members are diagnosed or showing symptoms of Dementia prior to age 65 and typically have no other health issues or their medical conditions are stable. We have no more than 15 members at Paul’s Club each day. There is almost an equal split between female and male members. The majority of our members are in their 50’s or 60’s.
PIECE OF MIND ART EXHIBITION

DESCRIPTION

Presented by the BC Psychological Association, Piece of Mind is an art exhibition showcasing pieces of work that answer the question “What does psychological health mean to you?” Partnered with The Vancouver Public Library (VPL) for the month of May during CMH week, the Exhibition is brought to you in the Moat Art Gallery at the VPL. The Exhibition also has chapters at UBC, McGill University and an exhibition at SFU in March 2015 is in the works.

PURPOSE

The exhibition aims to inspire members of the community through artistic expression, to live a psychologically healthy life. A panel discussion of selected artists and Registered Psychologists speak on healthy coping mechanisms, self-preservation and the artistic process. The opening reception includes an interactive component where artists can draw a piece of their mind and become a part of the exhibition.

PARTICIPANTS

All ages are welcome to submit their artistic expressions.

PARTICIPANTS

The outcome of the exhibition is to create a safe space to speak about mental health, use creative coping mechanisms and using the e-newsletter and POM website to create resources throughout the year. We administer survey questions to measure the effectiveness of our goals and outcomes. The project was presented at the Canadian Psychological Associations conference in June of 2014.

Partners: Vancouver Public Library

Time: May 2012 - Ongoing

Location: Vancouver, Burnaby

Resources Available: Please visit our website for pictures of the art and online resource, including tips and articles from psychologists and the general public

Art Modalities: Clothing/Textiles, Graphic Design, Poetry, Writing, Storytelling/Poetry, Colour Use, Crafts, Drawing, Painting, Photography, Sculpture

Contact:
BC Psychological Association
Rukshana Hassanali, Project Coordinator
Email: info@mypieceofmind.ca
Web: www.mypieceofmind.ca; www.psychologists.bc.ca
Phone: 604-730-0501

Image Source:
www.mypieceofmind.ca
PLANET AHEAD

DESCRIPTION

The Planet Ahead Media Arts project was a youth-driven initiative as an offshoot of Condomania. Nine Vancouver youth formed the Planet Ahead Media Arts Collective and with a Canada Council grant worked over a year to develop two videos around gender stereotypes and sexual health. They were facilitated and mentored by Condomania coordinators (Vancouver Coastal Health) and by Hello Cool World. “Stereotypo” looked at gender stereotypes throughout the ages, and “5ensAsian” looked at Asian stereotypes around sexuality.

PURPOSE

To create youth-driven materials educating about sexual health.

PARTICIPANTS

9 youth aged 13-17

OUTCOMES

One of these youth went on to become a very proficient video editor and worked with Hello Cool World since the project began in 2002 until the present. The materials were launched and shown as part of the Condomania program at the time and the youth involved were part of the team that created the Condomania website in 2001-02.

FRAMEWORK/PHILOSOPHY

Engaging youth to tell their own stories, based on their own experiences is an effective way to do sexual health education. The creative process is a wonderful way to empower while exploring issues during adolescence.
PROVINCIAL EATING DISORDERS AWARENESS (PEDAW) CAMPAIGN 2015 WRISTBAND CHALLENGE!

DESCRIPTION
The Provincial Eating Disorders Awareness (PEDAW) campaign is a BC Province-wide effort to raise awareness around prevention and early intervention of eating disorders as well as media literacy, resiliency, building healthy body image and self-esteem. The initiative is led by Jessie’s Legacy Eating Disorders Prevention Program at Family Services of the North Shore in collaboration with Kelty Mental Health Resource Centre, Looking Glass Foundation, St. Paul’s Specialized Adult Eating Disorder Program, BC Children’s Hospital Eating Disorders Program, Healthy Minds, Healthy Campuses and Project True. PEDAW is launched the first full week in February with activities and events taking place throughout the year. PEDAW’s 2015 wristband challenge invites BC residents to order a free ‘Love our Bodies, Love Ourselves’ wristband http://bit.ly/PEDAW_Wristband and post a photo with the wristband to the Campaign’s Twitter http://www.twitter.com/loveourbodies and Facebook http://www.facebook.com/loveourbodiesloveourselves accounts, February 1-7, 2015.

PURPOSE
To mark the launch of PEDAW’s 2015 campaign and National Eating Disorder Awareness Week. The wristbands not only are a symbol of acceptance for oneself, but are also a symbol of support for those that struggle with an eating disorder.

PARTICIPANTS
Open to all BC residents.
PROVINCIAL EATING DISORDERS AWARENESS (PEDAW) CAMPAIGN MURAL CONTEST

DESCRIPTION

This unique contest invited BC amateur artists to paint or draw 2-dimensional artwork that reflects the question, “What does ‘love our bodies, love ourselves’ mean to you?” Participants submitted photos of their 2D artwork and winners were determined by votes from the PEDAW committee. Winning entries were posted on our blog July 7th, 2014. Our professional lead artist painted themes and design concepts from the winner’s piece onto a container in the City of Vancouver. Painting took place in the summer of 2014, along with youth from the community.

PURPOSE

To brighten up the streets of Vancouver by showing everyone that we can ‘love our bodies, love ourselves’ and promote positive body image through public art!

PARTICIPANTS

Amateur artists of all ages across BC.

Partners: Vancouver Graffiti Management Team

Time: June 2014 – November 2014

Location: BC

Art Modalities: Colour Use, Crafts, Drawing, Painting

Contact:
Jessies Legacy Eating Disorders Prevention Program
Amy Pezzente, Coordinator of the Provincial Eating Disorders Awareness (PEDAW) campaign
Email: amy.pezzente@bcmhs.bc.ca
Web: www.jessieslegacy.com
Phone: 604-988-5281

Image Source:
amy.pezzente@bcmhs.bc.ca
PSYCHIATRIC ART SHOW (7TH ANNUAL):
BEYOND WORDS

PARTICIPANTS:
All artists in the community of the South Okanagan Similkameen are invited to submit works that express the lived experience of mental illness. This includes persons in recovery, their support system and any other person having an interest in combating stigma. This show is an annual collaboration between the Mental Wellness Centre (BC Schizophrenia Society Penticton Branch) and the Penticton Art Gallery as part of Mental Illness Awareness week events.

OUTCOMES:
Any community member, any mental illness.

DESCRIPTION
All artists in the community of the South Okanagan Similkameen are invited to submit works that express the lived experience of mental illness. This includes persons in recovery, their support system and any other person having an interest in combating stigma. This show is an annual collaboration between the Mental Wellness Centre (BC Schizophrenia Society Penticton Branch) and the Penticton Art Gallery as part of Mental Illness Awareness week events.

PURPOSE
To provide an opportunity for the community as a whole to experience the positive impact of visual art on people's coping with a mental illness.

PARTICIPANTS
Any community member, any mental illness.

CONTACT:
Mental Wellness Centre (BCSS-Penticton Branch)
Sharon Evans, Board President
Email: bcsspenticton@shaw.ca
Web: www.penticton.bcss.org
Phone: 250-493-7338

PHILOSOPHY/FRAMEWORK
To provide opportunities for the community to view persons in recovery from a mental illness as persons with broad interests and talents.

Image Source: https://www.facebook.com/events/853146778037218/?ref=22
PTARMIGAN THEATRE AND MUSIC SOCIETY: STRENGTH WITHIN ARTS PROGRAM FOR SERIOUSLY ILL CHILDREN

DESCRIPTION

Strength Within is a multi-disciplinary arts program for children with serious illnesses, developed and delivered by the Ptarmigan Music and Theatre Society, a BC Charity, established in 1991. The project began in 2004, in cooperation with the BC Children’s Hospital as a program of music, theatre and dance for teenage survivors of childhood cancer. After 18 months of workshops, 15 participants under the mentorship of 8 Ptarmigan artists performed a 35 minute stage production which was an expression of their journey through surviving childhood cancer. The production was presented at the SIOP International Cancer Conference in Vancouver in September 2005. We sang, danced, laughed, did theatre sports, told stories and improvised. This arts program was a catalyst for summer arts camps on Pender Island for cancer survivors from all over western North America. The second phase of the program began in May 2011. Through the BC Children’s Hospital and a new partner, the Starlight Foundation, we became aware of the need for an arts program like Strength Within for children with other serious illnesses. Approximately 20 bi-weekly workshops for seriously ill children were held in Vancouver. Forty-five children took part with an average of 15 per session. We expanded the program to include clients in the Specialty Camps Network that provide summer programming for seriously ill children. From 2012 to 2014, Strength Within has been presented at Camp Goodtimes for children with cancer and at Zajac Camp for children with a wide range of serious illnesses including autism and blindness. In 2013-2014 the BC Arts Council sponsored a year-long pilot version of the program for Children with Mental Health issues in cooperation with the Canadian Mental Health Association. That program component will continue when the pilot segment is completed. In 2014, in partnership with Live Out Loud Theatre in Moose Jaw, Saskatchewan, Strength Within was presented to its first clients outside the province of BC. Workshops were presented for COWL (Creating Opportunities for Work and Life), a group dedicated to teens with intellectual disabilities and for Moxie’s Club Summer Camp who host youth with autism.

PURPOSE

To provide free programs of music, theatre, dance and the visual arts to children with serious illnesses and financial disadvantages.

[CONTD. ON THE NEXT PAGE]
PARTICIPANTS
Ages 6 to 18 years. Children and youth with serious illness, physical disabilities, and mental health issues.

OUTCOMES
Provides seriously ill children a chance to socialize; develop artistic abilities for enjoyment and as a means of expression.
QUEER IMAGING AND WRITING KOLLECTIVE FOR ELDERS

**DESCRIPTION**

The Queer Imaging and Writing Kollective for Elders (aka Quirk-e) is a group of artist-activists who self-define as queer and as old, and interpret these identifications in diverse ways. Some embrace the idea of being old, and some believe that the word is an empty signifier. As far as the word queer is concerned, people in the group define as lesbian, gay, bisexual, transsexual - and more. All define themselves as artists, working primarily with written memoir and digital images, but spilling out into other genres when necessary. Public shows and exhibitions have included readings, performances, shows and exhibits - most recently, the 26 memory boxes featured on the Arts Health Network Canada website.

**PURPOSE**

Quirk-e began as a grassroots writing group in 2006 - a joint initiative between QMUNITY Generations and local writer Claire Robson. The group was quickly adopted in its entirety into the Arts, Health, and Seniors Project, managed by the Vancouver Park Board. It became an independent organization in 2013, and is currently funded by a Community and Neighbourhood Development Grant from the City of Vancouver, as well as funding from its community partners - Britannia Service Centre and QMUNITY Generations. Lead artists Kelsey Blair and Claire Robson currently facilitate the group.

**PARTICIPANTS**

Aged 55-80 years, varying mental/physical challenges.

**OUTCOMES**

Memoir work in a variety of artistic disciplines.
REEL YOUTH

DESCRIPTION

Started in 2004, Reel Youth is a Vancouver-based media empowerment program that supports youth with economic, social, or geographic barriers to create and distribute films about their visions for a more just and sustainable world. Reel Youth works in partnership with other youth-serving organizations to facilitate mobile stop-motion animation, video production, photography and music video programs that empower participants to create their own media, engage communities, and play a meaningful role in inspiring positive change. These messages are shared through community screenings, online distribution platforms, and as part of the youth-juried touring Reel Youth Film Festival. The festival is a collection of youth-made shorts that celebrates and promotes youth filmmaking.

PURPOSE

Reel Youth, a project of Tides Canada Initiatives Society, supports communities in making films about their visions for a just and sustainable world, through engaging marginalized youth and adult mentors in process-oriented media creation and distribution.

PARTICIPANTS

We work primarily with youth aged 13-20, but also offer inter-generational programming and engage adult mentors.

Partners: Tides Canada Initiatives Society, various

Time: September 2004 - Ongoing

Location: As a mobile program we work throughout BC and Canada, with some international programs as well.

Art Modalities: Digital/Electronic, Film/Video, Multimedia, Mixed Media, Photography

Contact:
Reel Youth
Mark Vonesch
Email: info@reelyouth.ca
Web: www.reelyouth.ca
Phone: 778-888-7335
RETIREMENT CONCEPTS CONCERT SERIES: MUSIC THAT IS SO NICE TO COME HOME TO

DESCRIPTION

This year-long concert series kicks off at Retirement Concepts sites in Maple Ridge, Langley, Comox Valley, Nanaimo, Summerland and Kamloops. The concert series provides an opportunity for the community to enjoy a sophisticated performance alongside residents, while sampling first-class cuisine from an executive chef and view local arts programming.

PURPOSE

Purpose: The role of the arts to boost the health and wellbeing of seniors, is an important part of any quality seniors-serving organization. Retirement Concepts, one of the largest providers of seniors care and services in British Columbia, has taken that to heart by announcing that it will sponsor the Retirement Concepts Concert Series: Music that is, So nice to come home to, across all its sites in British Columbia, in partnership with the Health Arts Society.

PURPOSE

Independent, assisted-living and residential-care-residents, families and community members.

OUTCOMES

To increase socialization for our residents, to connect our sites to the surrounding community, to provide first-class entertainment in our homes.
The Richmond Youth Media Program (RYMP) is a free multimedia program for youth (13–24), presented in partnership with the Richmond Addiction Services Society and supported by the Vancouver Coastal Health Sharon Martin Community Health (SMART) Fund. Programming includes drop-in sessions (during which supervised youth can work independently) and a variety of structured classes.

**DESCRIPTION**

Participants learn media literacy skills that are relevant to their interests in a supportive environment where they can engage with positive role models.

**PARTICIPANTS**

Youth aged 13–24 years.

**OUTCOMES**

Increasing youth’s media arts skill set, increasing youth’s inventory of free-time experiences, connecting youth to peer mentors, connecting youth to adult mentors, helping youth develop greater connections to the community, and helping enrich a sense of self.
Predators ruin it for everyone. SafeVibe is a movement for everyone who wants to keep predators out of the bars and put an end to sexual assault. The more people who actively get involved (men, women, youth, everyone!), the closer we will be to making social change a reality. Keep the Vibe - Fight the crime! SafeVibe is an awareness campaign launched by WAVAW (Women Against Violence Against Women) to prevent alcohol and drug facilitated sexual assault. The campaign was meant to shame perpetrators, but not those who are out to party — no one is asking to be assaulted or to have their drinks tampered with. Through the SafeVibe campaign we are challenging myths around alcohol and drug facilitated sexual assault, to make bars, clubs, and events uncomfortable for predators — and safe and fun for everyone else.

SafeVibe was launched for the 2010 Olympics. Incidents of alcohol and drug facilitated sexual assault are on the rise in Vancouver, and an increased risk of sexual assault has been identified during major events like the 2010 Olympics. Everyone who wants to should be able to participate actively in all aspects of the Olympic excitement without fearing for their safety. SafeVibe formed a partnership with SafeGames 2010 to ensure that both Vancouver residents and international visitors are able to party safely.

The campaign was limited to three months of poster ads in bars, coasters and street team actions during the Olympics. It is hard to gauge how many people saw the campaign.

Anecdotally, our volunteer street teams got into some interesting conversations with party goers in the downtown areas where the festivities were occurring. The materials were very well received, but it’s hard to measure if there was any direct impact in preventing alcohol or drug facilitated sexual assault.

SafeVibe is a Community Solution. There have been a number of excellent public education campaigns detailing the dangers of alcohol and drug facilitated sexual assault, but many of these provided only an individual solution. Protecting drinks is not enough: we need to protect each other as well. The solution is a community of people, of all genders and sexual orientations, who come together to own their collective power and make change a reality.

[CONTD. ON THE NEXT PAGE]
FRAMEWORK/PHILOSOPHY

This project looked at the research around activating bystanders and countering myths about sexual assault as an effective intervention in bars, nightclubs and party situations. In addition it took a feminist and sex-positive approach, to avoid the victim blaming and slut-shaming that often prevents women from reporting these crimes, or courts from convicting in cases of drug and alcohol facilitated sexual assault. Foremost, it wanted to shift the conversation around sexual assault in these circumstances. Notably, the bystander approach is becoming more and more a way of being inclusive of entire communities in being part of the solution instead of turning a blind eye to the problem.
The Journal, Sage-ing With Creative Spirit, Grace and Gratitude, exists to honour the transformational power of creativity. The quarterly journal is intended as an initiative for collaboration and sharing. We present the opportunity for the free exchange of wisdom gleaned from creative engagement. We invite all ages to contribute their discoveries. Sage-ing is about seeking - satisfying inner gnawing and transforming it to knowing and action. Aging can be alchemy when one allows the realization that to Know Thyself and contribute that knowing to our culture is indeed one of life’s highest purposes. That knowing brings the gratitude, grace and integrity that a life deserves. The creative journey into self is a strong aid to health and wellbeing for the individual and to our culture. This journal exists for all those serious in exploring their creativity, in a chosen expression. It is a forum for publication and exposure to other artists, both novice and established. This journal is an easel for any form of artistry undertaken out of personal intuition and imagination.

**PARTICIPANTS**

Open to everyone.

**OUTCOMES**

Encourage the sharing of Creative Expression.

**FRAMEWORK/PHILOSOPHY**

SAINT JAMES MUSIC ACADEMY

DESCRIPTION

Saint James Music Academy is a free afterschool program that teaches classical music to children and youth who live in Vancouver’s Downtown Eastside (DTES), most of whom live in low-income families. The DTES is a vibrant community and yet also struggles with significant social problems, including high unemployment, poor living conditions, crime, and substance abuse. Children who are exposed to these conditions are vulnerable to these social realities. We believe it is crucial that the needs of these children and youth be met with creative and new possibilities. Our program harnesses the power and joy of music to help children discover the wealth of their own potential, and equip them with crucial life skills. At SJMA, children receive: a nutritious meal every day; classical music instruction, often out of reach to the disadvantaged child; choir and music theory; and one-on-one music therapy for children with special learning or behavioural challenges, or victims of trauma. Our program is entirely free to all students.

PURPOSE

Music is a proven tool for positive social transformation. Music uplifts and inspires, and yet much more: it builds self-esteem, improves intellectual and fine motor skills, enriches culturally, binds people together in a shared objective, and builds community. These are precisely the tools a young person needs to form a responsible, compassionate, and productive adult life. Through their pursuit of musical excellence, our children are inspired to continue on a path full of promise.

PARTICIPANTS

The Academy serves children in grade one through grade twelve, who primarily come from low-income families, some of whom are challenged with health and nutrition needs. Our enrolments in our core after-school program have grown from 37 in our founding year (2007) to 200 in 2014-15. We also serve another 250 children in four public schools, with free music instruction through our Outreach Program.

OUTCOMES

We have specific, though not always specifically measurable outcomes. Through the program, children and youth will: gain self-confidence, and discover the wealth of their own potential; learn crucial social skills, such as teamwork and collaboration, gratitude and sharing, respect of the other, and mutual praise; improve in their cognitive, academic, fine motor, and other learning skills; become musicians and artists who contribute their talent to the benefit of the community; and become role models to their peers and families through their pursuit of excellence in music and social engagement.

[CONTD. ON THE NEXT PAGE]
FRAMEWORK/PHILOSOPHY

SJMA is a heart and soul community-based program with a vision for social change, and music is our means. Young people in the Downtown Eastside and beyond are inspired to collaborate through our orchestras and choirs to pursue their creative potential, gain self-confidence, improve their academic success and become role models within their family and community. We believe in the value of equal opportunity for every child, irrespective of their ability, gender, ethnicity, religious belief, or socio-economic placement. We believe that the children and youth of the DTES have vast potential for creative good and positive contribution to our city and world.
2014 SECHELT ARTS FESTIVAL

- **Partners:** District of Sechelt, Sunshine Coast Arts Council, Sechelt Indian Band

- **Time:** October 2014 - October 2014

- **Location:** Sechelt

- **Resources Available:** Gordon Halloran (producer of one of our main stage events called Body of Light) is producing a video that will be part of the live stage presentation. He is also trying to raise funds to produce a documentary.

- **Art Modalities:** Dance/Movement, Drama/Theatre, Music, Singing, Storytelling/Poetry, Fiber Art, Glass, Mixed Media, Painting, Photography

- **Contact:** Sechelt Arts Festival Nancy Cottingham Powell, Festival Producer Email: nancy@secheltartsfestival.com Web: http://www.secheltartsfestival.com Phone: 604-885-0606

**DESCRIPTION**

The Sechelt Arts Festival 2014 Presents ‘Body of Light’. This year the ten-day tapestry of visual and performance art will explore the emotional, physical and spiritual issues we encounter as individuals and communities. ‘Body of Light’ as the festival’s overarching theme, will provide a unique opportunity for cultural and community collaboration and a shared experience leading to greater awareness and reconciliation. Using the arts as the medium, the experiences created will embody everything from life threatening to life-changing moments, presented through multi-dimensional art, film, comedy, theatre, music, dance, associated workshops and a heritage display.

**PURPOSE**

The Sechelt Arts Festival features accessible arts programming for all residents on the Sunshine Coast, showcasing local talent to residents and visitors in a professionally produced ten-day event. The Festival supports and encourages Sunshine Coast artists by providing opportunities for collaboration within the multi-talented coast arts community and embraces all art forms including dance, music, theatre and visual arts.

**PARTICIPANTS**

Performance and visual artists, along with local residence and visitors (all ages).

**OUTCOMES**

To engage our community in meaningful arts presentations that will inspire further dialogue and help strengthen our community as a whole.
SELF-DISCOVERY FOR HEALTH

DESCRIPTION

This is an experiential arts-based project that encourages individuals to explore identity and engage in a process of self-actualization through the creation of a life-sized self-portrait using a variety of paint and other mixed-media materials and techniques. Discussion is initiated around what constitutes identity and the subjective meaning of identity for each individual. Through art-making and self-reflection, participants are able to access intuitive, sensory, cognitive and emotional aspects of themselves that may lie beyond conscious awareness.

PURPOSE

Self-discovery and self-understanding contributes to either a “rebuilding” or “rebirth” of oneself and enhances mental, emotional, physical, and spiritual wellbeing. Creativity and the art-making process contribute to improved confidence, self-esteem, and self-efficacy. This identity project in particular, offers a celebratory journey into the authentic self and potentially increases self-worth. Furthermore, externalizing ones thoughts and emotions around self and identity are cathartic. In other words, the activity provides a means of release and relief that contribute to overall feelings of wellbeing.

PARTICIPANTS

All populations (including newcomers or refugees, mental health clients, First Nations communities, professionals, teachers, etc). Suitable for adolescents and adults. Groups between 6 to 12 participants are welcome. Excellent for school groups, professional development days and conferences (space and place always requires consideration as sinks, tables, and wall space are necessary).

OUTCOMES

Increased self-understanding, self-efficacy, self-esteem, and self-worth.

FRAMEWORK/PHILOSOPHY

This project is based on the idea that the process of art-making and self-reflecting on art product can help individuals access information about the self that lies beyond conscious awareness. The activity is also based on theories of creativity and flow. Creativity, or the generation of novelty, is essential for human growth, development, and self-actualization. Being in flow, means that one is engaged in a pleasant activity that provides relaxation, promotes mindfulness and offers a means of grounding, centering, and strengthening oneself.
SENIORS INTERACTING THROUGH ART

DESCRIPTION

An ‘Age Friendly Community’ is a community where seniors are supported to live active and socially engaged lives. The ‘Seniors Interacting through Art’ program is designed to introduce seniors in Pemberton, the SLRD Area C and Mount Currie, to a variety of cultural and artistic activities and promote interaction between youth and seniors.

PURPOSE

Creating art can be especially beneficial to seniors. This program provides an opportunity for seniors to be collectively engaged in social, educational and wellness opportunities through various artistic mediums.

PARTICIPANTS

This program is aimed at individuals living in Mount Currie, Pemberton and the Squamish Lil’wat Regional District Area C who are over the age of 50. We also have a number of youth who are documenting the activities through video and interviewing the seniors. These videos and pictures will be compiled into a short documentary film and presented to the seniors participating in the art activities.

OUTCOMES

Enhance the quality of life for seniors living in the local area through improved mental health and self-esteem; increase the interaction between the local communities (Pemberton, Mount Currie, Birken and D’arcy); and increase the use of the Pemberton Youth and Seniors Centre by local seniors.

Partners: Vancouver Coastal Health, Village of Pemberton, Mount Currie Band/Lil’wat Nation, Pemberton Valley Seniors Society

Time: April 2014 – February 2015

Location: Pemberton and Mount Currie

Art Modalities: Dance/Movement, Drama/Theatre, Music, Singing, Drawing, Fiber Art, Painting, Tai Chi, Herbal Medicine, Construction, Carving, First Nations Drum Making

Contact: Squamish-Lillooet Regional District Daniel Cindric, Recreation Program Specialist

Email: dcindric@slrd.bc.ca

Web: www.slrd.bc.ca

Phone: 604-894-2340
SENIORES’ HANDBELL CHOIR

**DESCRIPTION**

Led by a fantastic Music Therapist, this group of residents in an Assisted Living facility meets bi-monthly to practice various songs using a set of handbells. This group then has seasonal performances for other residents, family and friends to come and hear their work.

**PURPOSE**

To provide music therapy, improve hand eye coordination, provide opportunities for laughter and pride, and create a sense of belonging and something beautiful together.

**PARTICIPANTS**

Ages 75 to 95 years with vision, hearing and cognition abilities varying widely. Some have arthritis or are in a wheelchair. Currently, there are approximately ten members.

**OUTCOMES**

Seasonal performances for other residents, family and friends to come and hear their work.

---

**Time:** January 2008 - Ongoing

**Location:** Victoria

**Art Modalities:** Music Therapy, Music

**Contact:**
Sarah Smith,
Manager Seniors’ Services
The Cridge Centre for the Family
Email: ssmith@cridge.org
Web: www.cridge.org
Think of a song. Now sing or hum the first few bars and see what happens. Whether you’ve chosen an upbeat melody or a melancholic tune, the music has undoubtedly made a connection with you. It may have unlocked memories from your past, lifted your spirits, and possibly, made you feel less alone. Now, add a room echoing with mature voices, and you have the makings for a Silver Song Club.

Established in 2009 in Kelowna, BC, under the umbrella of the Sing for Your Life Foundation, the Silver Song Club brings participatory singing and music-making to seniors who are aging in place or at home. The club is the first international chapter of a UK charity which launched in 2005. The club’s participants are on average aged 65 and older and the program has a cross-section of cognitive capacity from people with high-functioning skills to others with relatively low functions. The club meets twice a week for 90-minute sessions at no cost to the participants. Each session is led by a musician trained to deliver the programming who, in addition to providing keyboard or piano accompaniment, guides the singers through vocal and breathing exercises and movement activities. Caregivers and family members are also invited to stay for the sessions. Now the Foundation is bringing the wellness benefits of their programming to residential care and other community facilities using technology. Portable, lightweight and with no musical skill required, the Music Box™ provides a turnkey opportunity for care facilities to deliver more singing opportunities for their residents.
SOCIAL SKILLS THROUGH DRAMA

DESCRIPTION

The study of drama has many crossover benefits in developing social skills. Taught by theatre professionals, this inclusive class is both fun and challenging as students develop self-expression through voice, movement, improvisation, acting games, and script work. All abilities welcome.

PURPOSE

To teach social skills through the study of acting.

PARTICIPANTS

Ages 13-18 years. Targeted towards youth with a diagnoses of Asperger’s, ADHD, and learning disabilities. Registration is not restricted to those with a diagnoses.

OUTCOMES

Improved social skills, while not the entire focus, is expected to be a happy crossover effect.

OUTCOMES

Framework/Philosophy: Social Skills through Drama was designed to fill an 'in-between' need. There are youth that are not quite skilled enough to succeed in a 'mainstream' class but are functional enough not to need a strictly adapted class. It also gives these youth (who already spend a lot of time in therapeutic settings) to get therapy without it feeling like therapy. The study of acting has many skills that are directly related to social skills - staying in relationship, being present with a group, social flexibility, identifying and responding to emotions, learning when to give and take focus, engaging with imagination and abstract ideas, and self-expression.
SOCIÉTÉ UMBELLUS

**DESCRIPTION**

Umbellus offers self-development retreats for artists and cultural workers. Umbellus is a Canadian chartered non-profit organization with two types of residency for artists.

**PURPOSE**

To provide a self-development stay for artists and cultural workers, so as to optimize or maintain their wellbeing and creativity.

**PARTICIPANTS**

Participants are of all age groups, from anywhere in BC and Canada and other countries who need respite from their cycle of negotiating contracts, producing art work and distributing it.

**OUTCOMES**

Concrete tools to deal with the pressures of a precarious lifestyle; to have the necessary strengths to remain true to themselves; and to play a positive role in society.
SONGS OF OLD, LIVES OF NEW

Grief and loss workshops for seniors, facilitated with songs and stories. It is a way to encourage people to connect with each other, as well as to provide a safe space to discuss death and loss.

Aged 65-95 years, of any health condition, with about 20-30 people.

That participants feel comfortable listening to positive stories and songs about loss, which in turn creates safety for them to express their own stories and feelings. Sing-a-longs have broken out from participants suggestions, and some participants have stood up to lead songs themselves.

I used to be an exercise physiologist and coach, and worked with individuals, teams, businesses, and charity groups to overcome mental and physical barriers. I left this career to pursue music with the intention of utilizing it for positive community growth. Music has taken me to Asia, Europe, and now extensively through Canada, and I have learned a great deal from presenting deeper questions and conversation through song. Three years ago, my father passed away from a rare cancer. Through that experience, I became aware of how uncomfortable discussions of death are on this side of the world, and that it doesn’t need to be. While my father was in hospice, my brother and I would bring guitars, and we would just play. It reminded me of the first time my father had cancer about 20 years ago. I was too young to understand what was wrong with him at the time, but I knew it was really difficult for him and my mother. I have a very strong memory of my father, a patient of the Vancouver Cancer Clinic at the time, singing for the other patients and warming an otherwise very heavy atmosphere. It is from these experiences that I feel the importance of sharing what I can to help alleviate and/or brighten the moods of those in tough times. Music seems to be able to bridge gaps that no other language can, and helps people open-up, talk, and heal.
SOUTH HILL INSIDE STORIES

DESCRIPTION

Three leading Vancouver artists and the feisty community of South Hill, have combined art and neighbours to create INSIDE STORIES, a surprising and intriguing interactive experience on the web. South Hill is made up of people from around the world. Some are First Nations, most have immigrated from cities and towns far away. Documentary filmmaker - Nettie Wild, web designer - Jeremy Mendes, and photographer - Shannon Mendes, spent seven months recording and shaping extraordinary and moving tales of leaving, of arriving, and of that momentous decision to stay. Come visit South Hill's virtual street. It's a place where a click on a house or a shop reveals the people inside and their surprising stories. People, like the tailor, who mends clothes and escaped famine and revolution in China; the teenager, fresh from India, who is bullied at high school; and the Dutch woman and her Chinese neighbour, who teach each other English and Mandarin. In multi-cultural South Vancouver, people from around the world live and work next to each other, but how many really know the people next door? INSIDE STORIES poses the question: if we heard our neighbours’ stories, would we relate to them differently? Can telling your story be a first step in moving from being a stranger to becoming a neighbour? The questions and stories don’t stop here; visitors to the site are asked to join the ‘hood’ and to contribute their own tale….because everyone has an inside story.

PURPOSE

The purpose of the INSIDE STORIES website is to embolden people to share their own story and to listen to the stories of others. Our hope is that sharing stories will help people to move from being strangers to being neighbours.

PARTICIPANTS

People participate in INSIDE STORIES by viewing the stories. This can happen online, in an un-facilitated setting, or it can happen in a group with facilitation. The nine interactive web stories are meaningful to people of different ages. The youngest storyteller is a teen in high school; the oldest storyteller is a retired man in his 90’s; and the rest are adults in between. The stories depict the real life experiences of people who have come to live in South Vancouver and the issues that they have faced. Some of the topics that come up are prejudice, bullying, depression, isolation, trust, cross-cultural friendship, integration, and language learning.

[CONTD. ON THE NEXT PAGE]
OUTCOMES

Create more welcoming communities with the use of thought provoking stories shared by local people with different cultural backgrounds. The stories inspire and model storytelling. They also support identified factors that contribute towards welcoming communities such as intercultural relationships, mutual trust and non-discrimination.
STAND UP FOR MENTAL HEALTH

DESCRIPTION
Teaching stand-up comedy to people with mental health diagnoses. Purpose: To build confidence and fight public stigma.

PARTICIPANTS
18-80 years old with depression, anxiety, PTSD, OCD, bipolar, schizophrenia, and schizoaffective.

OUTCOMES
Increased self-esteem, social support, and raising awareness around mental health issues for thousands of people through our shows.

Contact:
Stand up for Mental Health
David Granirer, Executive Director
Email: david@standupformentalhealth.com
Web: www.standupformentalhealth.com
Phone: 604-205-9242

Image Source: www.standupformentalhealth.com
STAR IN YOUR OWN STORIES

DESCRIPTION
The BC Centre for Disease Control’s Chee Mamuk teamed up with Hello Cool World to help First Nations youth, ranging from grades 8 through 12, create their own sexual health campaigns. Star In Your Own Stories is a video workshop project transforming high school students into filmmakers and advocates for HIV/AIDS and sexual health awareness. It gives the students a fun way to explore a serious issue, while gaining skills and knowledge at a time when Aboriginal people in BC and across Canada are disproportionately affected by HIV/AIDS.

So far, youth have made four films: By My Name, Strong Path, Step Up and Stand True. The project has also produced a fun, animated short on what to expect from STI testing called Don’t Stress the Tests. What is unique about this approach, is that it treats the youth like experts of their own experiences, and then offering their stories back as positive role models in their own community. By bringing in a professional creative team to help realize their ideas in a polished form, the creative team treats them like the client, and helps them to create their ‘brand’, and to develop key messages that will be for other youth as well. This is important as part of the process as it fosters an awareness of how and why other people think and behave and helps individuals understand their own potential to have a social impact as well as reinforce community belonging.

PURPOSE
To engage First Nations youth in HIV prevention, to create messages that will resonate with their peers to help prevent STI’s and HIV.

PARTICIPANTS
4 Workshops with a total of 48 youth participating in the filmmaking. Each video launched with a community feast with around 200 people. Some youth participated in conferences, did media appearances and one film was entered in a festival.

[CONTD. ON THE NEXT PAGE]
OUTCOMES

Youth activated, involved. For the first group and evaluator followed up and did a report one year after, there were many positive outcomes for the community identified, including no unplanned pregnancies in that year likely due to the strong condom messaging that film had. Youth from that project went on to become spokespeople at HIV/AIDS conferences and on MTV. In the last year of the project, the youth identified a need to learn their own traditions and as part of the workshop a man from their community translated key phrases for the video, and taught them to drum, many for the first time. After the video team left, the youth worked with this community member to make their own drums, they filmed the process, we incorporated it into the final video and they performed a song they learned on their own drums at the community launch of their film.

FRAMEWORK/PHILOSOPHY

We used social marketing best practices, namely root cause analysis of the problem to address, working with the intended audiences to create messages for them and their peers, treating the youth as ‘experts’ in their own experiences, while offering professional support to the video, while adapting all our activities to be culturally appropriate, and as specific to the community as possible. In this way the messages were more ‘universally’ adaptable, as they were authentic to the experiences of the youth who participated.
**STREET SPIRITS THEATRE COMPANY**

<table>
<thead>
<tr>
<th><strong>DESCRIPTION</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Street Spirits is a youth driven social action theatre company. We use the creative arts to raise awareness of problems in the world. We create audience interactive stage performances, video projects, and community events on topics such as racism, family violence, homophobia, poverty, gender violence, substance use, gang involvement and bullying. We also provide community workshops to create grass roots responses to problems. Organizations and communities can book us for performances, video productions and workshops. We support our members to pursue their dreams.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>PURPOSE</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Our goal as an organization is to change the world in positive ways. We provide a healthy introduction to social responsibility for the youth who join the program and influence communities to take action to address inequities, discrimination and violence.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>PARTICIPANTS</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>We are open to all ages. However, the majority of our performers are between the ages of 13 and 29.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>OUTCOMES</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Youth involved in the program gain life skills, performance skills and social responsibility.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>FRAMEWORK/PHILOSOPHY</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>We believe that we create culture, values and beliefs collaboratively as a society. Encouraging thoughtful cooperative dialogue can address problems and build a stronger and more inclusive culture. In performance, we try not to tell people answers, but provide the opportunity for people to explore their beliefs, share ideas, and brainstorm positive means for creating change.</td>
</tr>
</tbody>
</table>

---

**Partners:** Central Interior Native Health Society

**Time:** September 1999 - Ongoing

**Location:** Prince George

**Resources Available:** “Complete Actorvism” is a manual that we give to participants in our “Train the Trainer” workshops

**Art Modalities:** Drama Therapy

**Contact:**
Andrew Burton, Artistic Director

Email: andrew@streetspirits.com

Web: http://www.streetspirits.com

Phone: 250-564-4349

---

**Image Source:** http://www.streetspirits.com
THE SUPER POWER PROJECT

DESCRIPTION

The Super Power Project is a youth-driven multi-media project to create and distribute messages to prevent gendered violence. BC teens in Kitamaat Village and Vancouver got together in workshops and came up with E-Man & M. Power to bust myths and expose stereotypes.

PURPOSE

Gender Stereotypes can be a root cause of gendered violence in youth people. We wanted to create a project that included both young men and women, which busted the stereotypes but didn’t typecast girls as “victims” and boys as “perpetrators.”

PARTICIPANTS

24 youth in total were involved in this project and the projects launched with large screenings, one produced by Haisla Nation youth on the reservation of Kitamaat Village, and the others by culturally diverse youth from around Vancouver which premiered at the Vancouver Public Library.

OUTCOMES

A comic book, an animation and two creative-documentary style videos.

FRAMEWORK/PHILOSOPHY

A social marketing framework was applied to this project; address root causes of sexualized violence (gender stereotypes) work with intended audiences to create messaging meaningful to them. Support their ideas with skilled professionals then engage youth in being ambassadors for their project and its message.

YOU TUBE DIRECT LINKS

Super Power Project
Dr Z video
https://www.youtube.com/watch?v=ReQRFjoTPuM

SPP in the making video:
https://www.youtube.com/watch?v=AZFxEW7hj0Q

Excerpts from Busted
https://www.youtube.com/watch?v=dA27XrKJCnw

Blend Out PSA
https://www.youtube.com/watch?v=hw22_3Zcmno

Image Source: www.helloCoolWorld.com
TEA FOR TUTU

DESCRIPTION

Tea for Tutu - Ballet Victoria’s favourite seniors program, offers quality innovative daytime performances in a friendly community atmosphere with tea offered by our sponsors. Each event is free to seniors and includes an introduction to ballet, a performance of repertoire from our upcoming production, and refreshments.

PURPOSE

The purpose of the program is to reach out to seniors living in isolation and those unable to attend main stage performances due to physical or emotional reasons. The program allows seniors to interact with their peers and with the children who attend. Also, the dancers spend time with the seniors while volunteers serve refreshments.

PARTICIPANTS

Seniors 55+ attend free, home schooled children and their parents also attend. There is no charge for children and only a $10 charge for adults. Many seniors are in wheelchairs or use walkers, so we have a level entrance to facilitate ease of entry. Each performance draws 75 - 100 participants.

OUTCOMES

Seniors look forward to these events for the social and cultural benefit they receive, and also for the cookies!!

FRAMEWORK/PHILOSOPHY

Bringing seniors out of isolation and exposing them to cultural and social activities assists in lessening depression, makes their minds more active, gives them something to look forward to, and allows us to show respect for patrons who can no longer attend in theatres.

Time: March 2007 - Ongoing

Location: Victoria, coming to Vancouver

Art Modalities: Dance/Movement

Contact:
Ballet Victoria
Linda Ryder, Special Events Manager
Email: attendance@balletvictoria.ca
Web: www.balletvictoria.ca
Phone: 250-380-6063

Image Source: www.balletvictoria.ca
The One Project

DESCRIPTION

The One Project is a platform for people to share their stories of vulnerability, gain insight from the stories of others, and show gratitude to those who helped them in some way. With a photograph and a few sentences, we are able to break the silence and overcome great obstacles within ourselves to achieve mental wellness — while also helping others through their journey. We are committed to our community and helping people experience insight that can change lives.

PURPOSE

Our focus is on mental wellness and opening up conversations on difficult topics like depression, suicide, and bullying through photographic storytelling.

Time: December 2010 - Ongoing

Location: Vancouver

Art Modalities: Poetry, Writing, Photography, Photographic Storytelling

Contact:
The One Project
Bryce Evans
Email: hello@theoneproject.ca
Web: www.theoneproject.ca
Phone: 604-505-6152

Image Source: www.theoneproject.ca
THE SARAH MCLACHLAN SCHOOL OF MUSIC

DESCRIPTION
The Sarah McLachlan School of Music provides music education to underserved and at-risk youth at no cost in Vancouver. Students receive high quality music instruction in both contemporary and classical traditions in guitar, piano, percussion, voice, songwriting, ensemble, music and video production, DJing, beat-boxing and electronic music. No experience is required.

PURPOSE
The school is dedicated to helping young people build community and find their voice.

PARTICIPANTS
Students between the ages of 8 and 18 who are at-risk or vulnerable socio-economically, emotionally, academically or socially.

OUTCOMES
To give tools to our students to be able to build their confidence and sense of community and to be able to find their voice through music expression.

FRAMEWORK/PHILOSOPHY
The Sarah McLachlan School of Music offers its students diverse opportunities to cultivate healthy relationships, connect and collaborate with others, develop the skills needed to explore their creative potential, and ultimately build confidence to steer them on a successful course in life.
This is a seven foot sculpture of a martini cocktail glass made out of over 2000 plastic pill bottles. The sculpture was completed during a cross Canada tour that started in Victoria and ended in St. Andrews New Brunswick, where this community art piece was entered into a sculpture contest. Some of the bottles contain messages from the community of Canadians that live with HIV and the drug ‘cocktail’ designed to combat the virus.

The piece opens a discussion around living with HIV in this century, beauty in waste, pill burden, the overuse of plastics and their impact on the environment, medical nomenclature, and so much more.

Peggy Frank was the main contributor, but she used the engineering advice and assistance of about 20 HIV negative friends. She also worked in her community of women and men living with HIV in British Columbia (about 120 - 150 HIV positive individuals) and hundreds in the broad communities in 20-stops across the country from Prince George to Thunder Bay to Charlottetown. One stop was Ottawa where parliamentary assistants were introduced to the sculpture.

Themes grew over time and space, and with the input of others. Questions arose around many broad topics such as stigma, isolation, African reality, policy, legalities, and self-esteem.

Words can be twisted by medical experts to confuse issues, items that are initially a negative part of our days can become beautiful, something bigger than us is actually a reflection of ourselves, our lives and our perseverance. No one would take 2000 bottles of pills without an enormous desire to be part of life!
U-FIX-IT BIKEWORKS AND ARTWORKS

**DESCRIPTION**
This is a community based youth focused program aimed at teaching young people bike and arts skills. We also focus on community development and foster the creation of belonging, independence, generosity and mastery in all our participants.

**PURPOSE**
To enrich the lives of children and youth, develop skills, creativity, and general mayhem.

**PARTICIPANTS**
Up to 19 years.

**FRAMEWORK/PHILOSOPHY**
Circle of Courage

- **Time:** July 2005 - Ongoing
- **Location:** Duncan
- **Art Modalities:** All Art Modalities
- **Contact:**
  Dave Ehle, Team Leader
  Canadian Mental Health Association-Cowichan Valley
  Email: dave.ehle@cmha.bc.ca
  Phone: 250-746-5512
**VOCAL HEALTH FOR ALL AGES**

**DESCRIPTION**

The British Columbia Choral Federation recently engaged in a strategic planning review and one significant outcome of that exercise was the recognition that choral singing has a health benefit for everyone who participates. Choral singing is something in which people can be engaged throughout their lives. The BCCF motto is “Choral Music - a Lifelong Joy!”

**PURPOSE**

To foster and promote choral singing for everyone. There is a great deal of information available about the benefits of choral singing. The BCCF and other Choral Federations across Canada are actively using that information in their advocacy activities.

**PARTICIPANTS**

All ages.

**OUTCOMES**

Vocal, and physical health benefits. One of the BCCF Board members suffers from COPD - Since joining a men’s choir his symptoms have diminished.

**FRAMEWORK/PHILOSOPHY**

Choral Music - a Lifelong Joy!
VOCALEYE DESCRIPTIVE ARTS

Description

“VocalEye helps me experience what everyone else in the theatre can see.” VocalEye’s described performances include brief descriptions of the set, characters and costumes ten minutes before curtain. Once the show begins, important visual details and physical actions are described between the characters’ lines. All descriptions are voiced live and in real time by a trained Audio Describer. Only VocalEye users can hear the description through a small handheld receiver and simple headset, available from the VocalEye table in the lobby. Patrons are welcome to use their own earbuds or portable headphones, if preferred. Touch Tours may be offered at select performances, where VocalEye users and their guests are invited to the stage for a guided tour of the set, props and costumes. Cast and crew are often on hand to share backstage secrets and answer questions. VocalEye’s Theatre Buddy volunteers are available to guide able-bodied members age 18 and over from a designated meet up location to and from selected theatres for the described performance. Theatre Buddies must be arranged in advance. Tickets for VocalEye described performances are purchased through the theatre company’s Box Office, unless otherwise instructed. Ticket prices include all applicable VocalEye services and equipment. VocalEye memberships are free to anyone with vision loss. Membership includes a subscription to VocalEye’s e-newsletter, Theatre Buddy assistance, convenient pickup of equipment without a deposit, ticket discounts and rebates where possible. We describe theatre for young audiences as well as adults. We’ve described special events including Fireworks and an Alice Cooper concert as part of our research and development.

Purpose

Purpose: VocalEye’s programs and services help to lower barriers to participation in theatre, arts and cultural events for people with vision loss. We also promote access to theatre, arts and cultural events through education and outreach.

Participants

People of all ages who are blind, visually impaired or partially sighted.

[CONTD. ON THE NEXT PAGE]
OUTCOMES

Attendance has increased from 78 in 2010 to 298 at the end of our 4th season. The number of productions described has increased from 15 to 28 per year. The number of theatre partners has increased from 5 to 10.

FRAMEWORK/PHILOSOPHY

Living with vision loss can be isolating. Our programs are designed to make participation in the arts easier for people who are blind and visually impaired. A good part of what we do involves education and building bridges between communities - between the low vision community and the arts community and between the low vision community and the sighted community.
ARTS IN HEALTH PROFESSIONAL EDUCATION
**ART AND ARTHRITIS**

**DESCRIPTION**

Art and Arthritis provides Power Point presentations and a gallery walk of ceramic work, showing different aspects of living with chronic health conditions. With this body of work, including 16 ceramic sculptures and a 40-minute presentation, we hope to use art as a means of connecting with others and increasing understanding of illness for those with chronic health problems, their family and friends, and those in the health care field.

**PURPOSE**

Having worked with arthritis researchers and advocates, the initiative is an attempt to use different mediums of communication (ceramic art) as a tool for education or storytelling, that would provide a lasting message for those in the health care field or those affected by chronic health problem.

**PARTICIPANTS**

All ages and those who are affected or work with people with chronic health conditions.

**OUTCOMES**

This is not a research project, but there has been some interest in creating a project looking at health care students and the long term effects of being exposed to this medium of communication.

**FRAMEWORK/PHILOSOPHY**

This work was created because I saw that most information on the subject was written material with heavy medical jargon that may not be accessible or memorable to all learners. Art has the capacity to leave a lasting impression as a form of communication.
ART GALLERY EXHIBIT: DIVERSITY COMPETENCY IN HEALTH CARE

DESCRIPTION

What does it mean to provide diversity competent health care? This art gallery exhibits 11 short graphic novel stories/comics describing the knowledge, skills and character traits needed to provide quality care to Fraser Health’s diverse populations. Health care providers participate in the gallery through a guided tour, where they read the stories, reflect, and discuss how these stories relate to their practice.

PURPOSE

At Fraser Health, we have developed 11 standards that define what it means for a health care provider to be ‘diversity competent’ or culturally competent. Each story is related to a ‘diversity competency standard’ that health care providers should live up to. Through this art gallery and the stories being exhibited, health care providers will become better oriented to the standards, and how they relate to their practice.

PARTICIPANTS

All health care providers at Fraser Health (and other health authorities can participate too).

OUTCOMES

Knowledge of what it means to be diversity competent/culturally competent in health care; Tools provided to be more diversity competent in individual’s practice.

FRAMEWORK/PHILOSOPHY

Educating through art and storytelling provides us a platform where we can become immersed in someone’s experience, emotions, and journey to gain a deeper understanding about issues that are more difficult to teach using traditional methods. Art and stories provide a door to cultivating empathy and understanding, and might evoke us to discuss and reflect on tough issues such as power in healthcare relationships, inequality, discrimination and how these affect health and health care.
**BEVEL UP**

**DESCRIPTION**

Bevel Up is an interactive teaching DVD co-produced in 2007 by the street nurse program of the BCCDC and the National Film Board of Canada directed by award winning filmmaker Nettie Wild, with financial support from Health Canada and the BC Nurses Union. How can a nurse deliver effective and compassionate care to a person who uses drugs? Bevel Up follows a team of street nurses as they reach out to youth, sex-workers, and street entrenched men and women in the hotels and alleys of Vancouver’s inner city. Most importantly the nurses reflect on attitudes they bring to their work, attitudes that can make or break the relationship needed to successfully provide practical and non-judgmental health care. The DVD includes a 45 minute documentary, chapters with teaching menus, interview “reflections on practice,” and 26 interviews with leading experts on relevant topics. Bevel Up also comes with a teaching guide outlining learning activities, discussion points, and additional resources to augment each chapter.

**PURPOSE**

To offer teaching materials to help student nurses and seasoned professionals working with drug-using populations.

**OUTCOMES**

The film launched in festivals and proved to be unexpectedly popular with general audiences. It has been used continuously as a teaching tool (available from the NFB) since its launch. It has won many awards and also been translated into Russian.

**FRAMEWORK/PHILOSOPHY**

Documentary makers have always known that storytelling is a powerful educational tool. By telling compassionate stories, about real people, this film educates as much for empathy as for the mechanics of nursing.

---

**Partners:** BC Centre for Disease Control, National Film Board in collaboration with Canada Wild Productions Ltd.

**Time:** 2007 - ongoing

**Location:** Vancouver and anywhere the film is screened

**Resources Available:** Film available for purchase from National Film Board

**Art Modalities:** Film

**Contact:**
Katherine Dodds,
Hello Cool World Media
Email: Kdodds@helloCoolWorld.com
Web: www.helloCoolWorld.com
Phone: 604-251-5567

**Image Source:**
www.HelloCoolWorld.com
CAPILANO UNIVERSITY:  
BACHELOR OF MUSIC THERAPY DEGREE

DESCRIPTION

The Music Therapy program at Capilano University offers the final three years of training that lead to completion of a Bachelor of Music Therapy degree. The degree program is designed so that students may enter their third year with a variety of backgrounds: music, general arts, education, psychology, or another clinical field, etc.

PURPOSE

This program provides students with the opportunity to gain knowledge and develop competencies in all areas of music therapy and practice; clinical disorders; assessment, planning, intervention and documentation; improvisation; cultural awareness; counselling skills and group dynamics; and basic research. The program blends academic and experiential course work. Each semester contains a practicum placement allowing students to apply classroom learning in supervised clinical settings, to design, implement, and evaluate their own treatment programs. A supervised 1000-hour internship in the fifth year completes the degree and enables the student to apply for accreditation with the Canadian Association for Music Therapy.

PARTICIPANTS

Students range from 20-60 years of age; a total of 20 students are accepted each year.

OUTCOMES

Completion of the Bachelor of Music Therapy degree.

Time: 1976 - Ongoing  
Location: North Vancouver  
Art Modalities: Music Therapy  
Contact:  
Stephen Williams, Coordinator  
Email: swilliam@capilanou.ca  
Web: www.capilanou.ca  
Phone: 604-984-4951  

Image Source: www.capilanou.ca
CLEAN SHOTS CONTEST

DESCRIPTION

To promote World Hand Hygiene Day (May 5th), Clean Shots is a competition between all health authorities in BC to increase awareness for hand hygiene by asking staff to take "selfies," “friendies” or “photo bombs” while cleaning their hands.

PURPOSE

Purpose: To promote hand hygiene among hospital staff.

PARTICIPANTS

All hospital staff, students, and volunteers.

OUTCOMES

Staff feedback was excellent and there were over 1,000 photographs submitted. The plan now is to run the contest yearly to promote World Hand Hygiene Day.


Time: May 2014

Location: All BC

Art Modalities: Photography

Contact:
Vancouver Coastal Health
Sheila Browning,
Regional Coordinator
Hand Hygiene Program
Email: sheila.browning@vch.ca
Web: https://picnet.ca/cleanshots/
Phone: 604-872-6074

Image Source:
https://picnet.ca/cleanshots/
HEARTFELT IMAGES CONTEST

**DESCRIPTION**

An annual cardiac art contest for first year medical students in conjunction with their learning about the cardiovascular system, has been held for the past 14 years.

**PURPOSE**

The purpose of this contest is to engage visual and creative learners by providing them an alternate means of expression and an opportunity for generative meaning making.

**PARTICIPANTS**

280 students each year.

**OUTCOMES**

To date there have been no outcome measures initiated aside from anecdotal descriptions of what participating brought to the endeavour.

**FRAMEWORK/PHILOSOPHY**

It was designed as an opportunity to visualize learning about the heart using modalities aside from text (transmediation) and in so doing, generate new meanings and solidify their learning.

---

**Time:** February 2001 – March 2015

**Location:** Vancouver

**Resources Available:** A repository of hundreds of cardiac artworks can be found at www.heartfelt.med.ubc.ca

**Art Modalities:** Film/Video, Ceramics, Colour Use, Crafts, Drawing, Fiber Art, Metal Working, Mixed-Media, Painting, Photography, Printmaking, Sculpture, Installation

**Contact:**

University of British Columbia
Faculty of Medicine
Carol Ann Cournaya, Assistant Dean
Student Affairs

**Email:**
courneya@mail.ubc.ca

**Web:**
www.heartfelt.med.ubc.ca

**Phone:**
604-822-8245

---

Image Source:
www.heartfelt.med.ubc.ca;
“Eat Your Heart Out” Photograph by Milena Semproni, 1st Prize 2012
RainCity Housing uses a Housing First approach that offers homeless people immediate access to regular independent apartments in the neighbourhood of their choice. A workshop using video was developed to inspire staff members of homeless serving/housing organizations who are exploring the possibility of adopting the Housing First model. We’ve created this as an opportunity to better understand what the five interrelated Housing First principles mean in practice. We hope the ‘Housing First Principles into Practice’ guidebook and videos will inspire others to explore the possibility of adopting the Housing First model in their own housing/homelessness organization. These materials are focused on the power of finding shared values, focusing on strengths, and connecting to human stories, and we hope the learning here will move people to action.

Using video to explain Housing First Principles. Housing First is made up of five interdependent principles that require simple yet profound, transformative shifts in thinking. Each principle is explained in one of the videos. The principles are: immediate access to housing with no readiness conditions, consumer choice and self-determination, recovery orientation, individualized and person-driven supports, and social and community integration.
THAT'S JUST CRAZY TALK

DESCRIPTION

That's Just Crazy Talk is a 50 minute one woman stage play designed to address stigma towards mental illness. Endorsed by the Mental Health Commission of Canada as an effective anti-stigma tool, it looks at both the light and the dark side of living with bipolar disorder, anxiety and psychosis as it describes one woman’s journey of coming to terms with mental illness within herself and in her family. This funny and achingly truthful play both entertains and educates, exploring stigmas and portraying the love and resilience it takes to stay together as a family in the midst of illness and the beauty that can result when we face our fears.

PURPOSE

That's Just Crazy Talk is the product of a collaborative study, Using Theatre to Address Mental Illness Stigma: A BD Knowledge Translation Study, measuring the potential of a lived experience theatre piece to decrease stigma towards mental illness. The research was part of a 2-year knowledge exchange project of the Collaborative Research Team to study psychosocial issues in Bipolar Disorder (CREST.BD) and the Canadian Network for Mood and Anxiety Treatments (CANMAT) supported by the Canadian Institutes for Health Research. That’s Just Crazy Talk is based on the playwright’s lived experience and was designed to explore the impact of theatrical performance on attitudes towards bipolar disorder (BD) on people with BD and health care providers.

PARTICIPANTS

164 participants (80 people with bipolar disorder and 84 health care providers).

OUTCOMES

Findings from the study demonstrate the show is effective in reducing stigma and improving attitudes towards mental illness in health professionals. Quantitatively, health care providers showed significantly improved attitudes immediately post-performance, but this change was not maintained over time; people with BD showed little quantitative change. Qualitatively, both people with BD and BD health care providers showed enduring and broadly positive changes. Analysis of the impact of a DVD recording of the show also suggested that it was effective in reducing stigmatizing attitudes in health care providers.

[CONTD. ON THE NEXT PAGE]
Theatrical traditions clearly hold the potential to impact audience members, both at affective and cognitive levels, and to foster insight and deepen understanding. In recognition of this, there is a growing body of literature on the use of drama to share health information across a diverse range of health conditions. Comparatively, little research has specifically focused on the use of theatre to impact mental illness stigma; this research project, to the best of our knowledge, represents the first to address stigma specifically in relation to BD. The power of arts-based approaches, which are consonant with the current emphasis on narrative-based medicine, may lie in their potential to reach and speak to an audience that may not be responsive to conventional methods for addressing stigma and may represent a yet-to-be fully tapped mechanism for change.
THE CANADIAN INTERNATIONAL INSTITUTE OF ART THERAPY (CIIAT)  
GLOBAL EDUCATIONAL CONNECTIONS

- **Partners:** Lucille Proulx, Michelle Winkel, Christine Lummis
- **Time:** 2013 - Ongoing
- **Location:** Victoria
- **Art Modalities:** All expressive arts.
- **Contact:** Lucille Proulx, Co-Director  
  Email: ciat2013@gmail.com  
  Web: www.theciiat.com  
  Phone: 250-857-2996

**DESCRIPTION**

The Canadian International Institute of Art Therapy offers innovative art therapy training grounded in a professional, culturally connected, and research-based academic framework. The creative process is intrinsic to all cultures, and art therapy provides a path towards development and healing. Art therapy is a way to help us understand the human condition in all peoples. CiiAT is committed to inter-culturalism, promoting interaction between cultures through art-making and dialogue. CiiAT is approved by the Canadian Art Therapy Association (CATA). Graduating students are eligible to apply to become Professional and Registered members of CATA. Our training centers in Japan, Thailand, and Canada offer uniquely diverse educational experiences, blending small classes of students from different cultures. Courses are taught in English and Thai in Bangkok, and in Japanese and English in Tokyo. Students who speak English may choose to enroll in JIPATT (Tokyo) or IPATT (Bangkok), to complete coursework in either or both locations. Intake occurs three times yearly. The second training component, a practicum, may be completed in the student's home country, guided by regular supervision. Canadians are encouraged to apply and choose from various academic streams. The Canadian International Institute of Art Therapy offers several streams of training. The Professional Clinical Art Therapy Program is a post BA and post MA intensive training. The Personal and Professional Development Program offers community workshops throughout the year, for personal growth and professional development. We introduce you to the power and growth process of art-making. Continuing Art Therapy Training offers supervision, tutoring, thesis and academic support, advanced counselling skills, and graphic facilitation. Therapeutic services include individual, group, marital, and family art therapy. Our programs in Canada (CiiAT); Thailand (IPATT), and Japan (JIPATT) are open for student enrollment.

**PURPOSE**

Global Art Therapy Education.

**PARTICIPANTS**

Post Graduate students over 18 years with healthy mental conditions.

**OUTCOMES**

Certificate in Art Therapy.
UBC ARTS IN MEDICINE GROUP AND WEBSITE

DESCRIPTION

The Arts in Medicine UBC website is a platform to advertise contests and events run by the Arts in Medicine (AiM) group, as well as a medium in which student users can share works of art and creativity. We encourage students to post any art, photography, craft, or other, as a means of reflection in medicine and to celebrate the diversity of arts in medicine.

PURPOSE

A virtual meeting place to help build community in the arts and medicine, as well as celebrate the diversity of student artists.

PARTICIPANTS

Any UBC Faculty of Medicine and Dentistry student or alumni can post on the site and participate.

OUTCOMES

A catalogue of student works and reflections.
AN EXPLORATION OF THE IMPACT ON PSYCHOSOCIAL QUALITY-OF-LIFE THROUGH ACTIVE ENGAGEMENT IN FAMILY REMINISCENCE THEATRE WITH OLDER ADULTS IN CARE WITH MILD TO MODERATE COGNITIVE IMPAIRMENT.

DESCRIPTION

This study explores the impact of active engagement in family reminiscence theatre on older adults in care with mild to moderate cognitive impairment. Reminiscence theatre is performance created from the essence of real life stories and memories of older adults. This family reminiscence theatre initiative will develop, implement and document the process of creating theatre performance from older adults’ and family participants’ memories and stories. Individual reminiscence/life history interviews will be conducted with the older adult participants, audio-recorded, transcribed verbatim and reviewed with participants for story selection and consent, to select content for play devising. A core company of reminiscence theatre artists will collaboratively devise a reminiscence theatre performance from these stories and through group drama workshops with the older adult and family participants.

PURPOSE

The objectives are to provide a context wherein older adults in care and adult family members engage in a novel arts/reminiscence theatre initiative to reflect on lived experiences, share memories, build relationships, increase social activity, and reframe perceptions of health and wellbeing. The aims of the proposed research are to advance arts in health initiatives for older adults in facility care, and specifically explore family reminiscence theatre as an initiative to address the need for innovative, sustainable, dementia-specific programming which has the potential to enhance quality-of-life. The primary objective is to explore if and how family reminiscence theatre engagement enhances quality of life for older adults in care with mild to moderate cognitive impairment.

PARTICIPANTS

The target populations of interest in this study are the older adult residents in care at the facility and family participants.

OUTCOMES

Outcome measures are primarily qualitative as this study is essentially an interpretive inquiry. Ongoing ethnodrama field notes will provide data from the principal investigator’s reflections throughout the study. There will also be surveys and questionnaires employed.
The percentage of the Canadian population at least age 65 has been progressively increasing (Denton & Spencer, 2010), with the current demographic transition viewed as a period of accelerated population aging (Canadian Institute of Health Information, 2013). Older adults are living longer, healthy, active lives in the general community (Chappell & Hollander, 2013). The literature on social determinants of health identifies 14 factors linked to health and wellbeing (Mikkonen & Raphael, 2010). With regard to older adults, self-perceived health and psychosocial determinants are central to their quality-of-life (Lundberg & Manderbacka, 1996). Older adults in care are increasingly dealing with complex, chronic health conditions many of which include various forms of cognitive impairment including Alzheimer’s disease and other dementias (CIHI, 2011, 2013). The literature calls for innovative, sustainable initiatives to address these needs (e.g., Grone & Garcia-Barbero, 2001).
The Artworks Studio is located at GF Strong Rehabilitation Centre, which is British Columbia’s largest rehabilitation hospital, providing treatment to registered clients between 14-65 years with a traumatic physical disability or chronic health condition.

Staff of the artworks studio provide education and support to clients, helping them attain their rehabilitation goals, gain confidence, acquire new skills and increase confidence and quality of life upon discharge home and re-integration into the community. Clients work independently on their chosen projects in an arts program, focusing on exploration and acquisition of new creative skills.
BOOSTERBUDDY MOBILE APPLICATION

- **Partners:** Coast Capital Savings and Victoria Hospitals Foundation

- **Time:** March 2013 - Ongoing

- **Location:** Victoria, BC, but available worldwide

- **Art Modalities:** Digital/Electronic Media, Gamification

- **Contact:**
  - Vancouver Island Health Authority
  - Lauren Fox
  - Email: boosterbuddy@viha.ca
  - Web: www.viha.ca/boosterbuddy

**DESCRIPTION**

BoosterBuddy is a mobile application (app) designed to help teens and young adults improve their mental health. It is available for free through the App Store and Google Play and works on most Apple and Android mobile devices.

**PURPOSE**

BoosterBuddy utilizes design and gamification to help young people manage their personal wellness journey. A sidekick guides users through a series of daily quests designed to establish and sustain positive habits. The app includes: a daily check-in to track how users are doing each day; coping skills tailored to address individual challenges (addresses anxiety, depression, psychosis, general wellness and drug and alcohol misuse); reminders and tracking for appointments and medications; a jump-start to getting started on daily tasks and positive activities, such as self-care and socialization; encouraging and supportive messages; fun and rewarding as users move through “levels” and earn virtual “coins” to purchase clothing to customize the buddy.

**PARTICIPANTS**

Recommended for teens and young adults experiencing difficulties with depression, anxiety, psychosis and/or substance use.

**OUTCOMES**

Small scale beta testing and user feedback has been very positive. More rigorous evaluations are in progress.
CAMPBELL RIVER “ART IN THE HOSPITAL” INITIATIVE

DESCRIPTION

The Art in Hospital initiative is working to have art become an integral part of the Campbell River Hospital. The idea is to have local art become part of the healing process. Local groups will be providing art and design motifs. Partners in the Art in the Hospital Initiative include Family Services, Head Injury Support Group, Carihi, the Art Gallery, local elementary schools and hospital staff.

PURPOSE

We aim to have staff, visitors and patients all sense that they are part of the larger community when working in, visiting or recovering within the hospital. The therapeutic value of art is quickly gaining recognition around the world. It takes each of us, working within our individual capacities, to contribute to the complex healing process undertaken within our local hospital. Our role, through this art project, will be to create an environment that reflects the care and compassion of our community.

PARTICIPANTS

Local groups - from children, high school students, head Injury patients, family service clients, hospital staff.

OUTCOMES

To create a healing environment that reflects the care and compassion of our community. Visitor, staff and patient feedback will shape the future direction of the Initiative.

FRAMEWORK/PHILOSOPHY

To have art contribute to a healing environment within our hospital. To have the experience of the art create a sense of being included within a community.
CREATIVE ARTS PROGRAM, BC CHILDREN’S HOSPITAL

**DESCRIPTION**

The Creative Arts Program at BC Children's Hospital was first introduced in January 2013, providing service to children, youth and their siblings, 2-3 times a week. The program is facilitated by a child life specialist. The program offers one-to-one experiences for patients who have extended or repeated hospital stays, and an expressive arts group for youth in the teen lounge. The child life specialist collaborates with a music therapist to provide a variety of opportunities for self-expression for youth ages 12 and up. Painting, sculpting, drawing, photography and art using recycled and hospital related materials are some examples of mediums we have used. The program operates on a referral basis from the child life department as well as other disciplines such as nursing and psychology. The child life specialist reviews the referrals, assesses the needs of the patients, and coordinates appropriate creative arts activities. To kick off the program, we hosted a creative arts event with a local artist who brought easels, paints, and canvasses. With the materials and the assistance of an artist, patients created amazing works of art. A second exciting initiative was “A Day in the Life... at BC Children’s Hospital,” a photography project which engaged patients in taking photos of their day to day experience at the hospital which were then mounted and exhibited. Our future goal is to continue to promote both group and one-to-one activities to provide a broader range of mediums and experiences for our patients.

**PURPOSE**

Being in the hospital can be a stressful, sometimes scary and a difficult experience for anyone. Research suggests that for children and youth, negative hospital experiences can have significant and long term emotional effects. The role of the child life department is to promote coping, expression and normalization for hospitalized children, youth and their families. The use of creative arts in pediatric health care is one way to help achieve these goals and minimize the stress and anxiety related to health care experiences. It provides opportunities for self-expression as well as control, choice and distraction from pain and discomfort.

**PARTICIPANTS**

Participants range in age from school age children to youth and have varying medical conditions.

**OUTCOMES**

The Creative Arts Program has been well-received by patients and families who often state that the program makes a difference in their day to day coping.
EMBRACE AGING THROUGH THE ARTS & COMMUNITY ABERDEEN HOSPITAL'S ART PROGRAM (H-ARTS)

DESCRIPTION

The Art Program at Aberdeen Hospital was spear headed by Johanne Hemond, Recreation Therapist at Island Health. It began in Sept 2013, when a proposal, written by Johanne, was submitted to the District of Saanich’s Arts Centre at Cedar Hill Recreation Centre to develop an art program based on community inclusion and building partnerships. The proposal was well received and the program was then developed by the Saanich’s Arts Centre’s Arts Specialist, the programmer, the instructor, and Island Health’s Recreation Therapist. Once a month participants from Aberdeen Hospital (a complex care facility in Victoria) go to Saanich’s Arts Centre for art classes facilitated by an instructor, a Recreation Therapist, and volunteers. Three times a month, the art program takes place at Aberdeen Hospital. The program culminates in March in an exhibition during Embrace Aging Month (sponsored by the Eldercare Foundation) at the Community Arts Council of Greater Victoria’s Gallery, located at the Cedar Hill Recreation Centre.

PURPOSE

Research indicates that arts-based activities contribute to individual health and wellbeing, to community health, and to potentially increase the effectiveness of medical diagnoses and treatments. Potential benefits of an Art Program in Complex Care with access to the community may include: reducing the use of pharmaceuticals and thus their costs and complications; helping to manage persistent pain and other chronic health conditions, including mental health challenges; improving communication between medical staff and patients, and among staff members; and providing a feeling of inclusion into their community.

PARTICIPANTS

Residents at the Aberdeen Hospital, ages 60-95.

[CONT'D. ON THE NEXT PAGE]
Here is an excerpt from an article that was published in the Times Colonist which summarizes well the philosophy behind the program: “Therapeutic Recreation is much more than a hobby; it is a process that aims to enable people with physical and cognitive disabilities to acquire and/or maintain skills, knowledge and behaviours that will allow them to enjoy their leisure optimally, function independently with the least amount of assistance and participate as fully as possible in society. Enhanced communication with others and opportunities for self-expression and decision-making are all evidence of a successful Therapeutic Recreation program.”

To offer creative interventions for residents who have a special interest in the arts and to connect with the community. At times, residents can become disengaged with current therapy interventions and diversional programs and therefore, be less likely to participate. Areas of rehabilitation that may be involved are: cognitive based - attention skills, long and short - term memory, sequencing; psychosocial- anxiety management, motivation, acceptance, self-esteem, social interactions through feelings of belonging to the community; communication based - potential in increase in fluency and gives the potential to communicate through creation; and overall sensory stimulation and facilitating movement by the way of incorporating hand eye dexterity.
FUN WITH PAINT

**DESCRIPTION**

This program started in the fall of 2011 at Village at Mill Creek, a residential facility. Once a week, for one hour, we paint with watercolours and occasionally with acrylics. We might try process painting (with no particular outcome in mind), a collaborative project or if the participant is not so inclined, we offer colouring pages. An affiliated facility, Sun Pointe, started a similar program in 2012 - we alternate weekly sessions between these two facilities.

**PURPOSE**

Because creative expression is known to be supportive of health, this activity was chosen for its potential to be inclusive of all residents with minimal financial impact to the organization. Sometimes, family members will join in and paint with us and it then becomes a family activity.

**PARTICIPANTS**

Attendance varies - there may be a few or as many as 10. Because of varying degrees of dementia, an ideal number is 5-6, if there is one volunteer assisting the recreational therapist.

**OUTCOMES**

The intended outcome is engagement - residents have been seen to compliment each other, offer encouraging comments and will occasionally burst into song while painting. They can offer their creations to family and friends as gifts.

**FRAMEWORK/PHILOSOPHY**

The belief that everyone is creative, regardless of age or health condition. Even in the presence of dementia, creativity is possible and can bring pleasure to the creator.
HEALTH ARTS SOCIETY AND ARTWORKS PROGRAM AT BROCK FAHRNI PAVILION

- **Partners:** Health Arts Society and Veterans Affairs Canada

- **Time:** 2008 - Ongoing for Health Arts and 1990's - Ongoing for Artworks

- **Location:** Vancouver

- **Resources Available:** Health Arts Society already shares resources with the larger community.

- **Art Modalities:** Art Therapy, Music Therapy, Music, Singing, Crafts, Fiber Art, Painting

- **Contact:** Providence Health Care Remy Lim, Professional Practice Leader, Occupational Therapy Email: rlim@providencehealth.bc.ca Phone: 604-806-9184

**DESCRIPTION**

Health Arts Society brings classical performers to Residential Programs through monthly concerts. At the Brock Fahrni Artworks program, arts and crafts instructors provide tools, materials and instruction on a variety of crafts geared towards the frail and elderly veteran population.

**PURPOSE**

To continue to nurture the residents' interests in classical music and in a variety of arts and crafts.

**PARTICIPANTS**

Over 65 years, with the majority being over 80 years.

**OUTCOMES**

Program evaluations have shown that residents and their family members value these two programs.

**FRAMEWORK/PHILOSOPHY**

Health Arts Society aims to meet the need for high quality live professional arts programs for people in health care sites. The Artworks program's goal is to maintain seniors' interest in creative pursuits to the best of their ability.
**LACE CAMPAIGN**

**DESCRIPTION**

LACE (Live Aware Create Empowerment) Campaign was a project of the BC Cancer Agency, created by Hello Cool World, to use creative work and media to encourage women to get Pap tests. LACE was developed with an action team of young women in 2009 (young women were the original target audience) and the creative media campaign launched in April of 2010 with one of our short videos premiering at the ‘Projecting Change’ Film Festival. LACE expanded its target reach of young women to include older women, and grew into an effective and award-winning BC-wide grassroots campaign, which centred on promoting participating clinics across BC each year during Pap Awareness Week (held annually in October.) LACE quickly became a conceptual brand framework, able to lend itself to different interpretations. One of our early symbols was lace, of any colour, tied around a finger as a reminder to women to get their Pap smear, and to “not forget what’s inside.” We also had a significant uptake with First Nations communities. In 2010, Lee Anne Deneault won our LACE Campaign ad contest with a concept from her community, based on the creation of cards with reasons to get a Pap. We travelled to Q’wempts’in Health Society in Kamloops where we did a photo-shoot and a video. The materials we created were used to promote Pap Awareness Week all over BC in 2011. Even though the LACE campaign was meant for all women in BC, we were very pleased to have had a high percentage of First Nations communities sign on. In our final year, 21 First Nations health centres in the province were participating. In 2012, we re-purposed all the creative work done in previous years, and focused on recruiting volunteers from all over BC to promote the clinics. We documented their actions on social media and held a week-long tweet-athon during Pap Awareness Week.

**PURPOSE**

To promote Pap tests for women in BC. Cervical cancer is the second most common cancer in women under 45, and is highly preventable and treatable. Women who are screened regularly are at very low risk for cervical cancer. The original focus of the project was to get young women ‘talking about Paps’, and the focus expanded to reach out to women 29-55 years and to populations deemed more at risk from lack of regular testing (some immigrant and Aboriginal women).

**PARTICIPANTS**

The original Action team was a group of 12 young women, from 21–27 years.

---

**Time:** April 2009 – November 2012

**Location:** All BC

**Resources Available:** Hello Cool World is working on our own expanded report, including the archive of videos to offer as a model for other projects like this. For now, some of these items are housed at: www.HelloCoolWorldMedia.com and on Youtube https://www.youtube.com/user/LACEcampaign.

**Art Modalities:** Graphic Design, Reading/Literacy, Digital/Electronic Media, Film/Video, Multimedia, Television, Storytelling/Poetry, Mixed Media, Photography

**Contact:**
Hello Cool World
Katherine Dodds, Creative Director
Email: kdodds@helloCoolworld.com
Web: www.HelloCoolWorld.com
Phone: 604-251-5567
OUTCOMES

Various levels of community and media engagement and building a brand: we went from “Zero to LACE” with a campaign that really did get young women talking in the first year. We focused initially on Fashion and entertainment, and got some very good media coverage for the initial launch. We put BC on the map re: Pap Awareness Week (the PAW initiative was a national campaign). The program also received an award for “excellence in health promotion” from the BC Medical Association (now Doctors of BC).

FRAMEWORK/PHILOSOPHY

Our framework to develop this campaign, and subsequent brand comes from social marketing -- using the principle that to create a campaign for a group of people (in this case young women) we should work with them. Using video and storytelling was a natural fit, and all the nuances of this campaign, the LACEY- crafty element, the design, the videos, even the documentation of the entire process, was very driven by the creative possibilities from our action team.

Image Source:
www.HelloCoolWorld.com
MAKING ART FOR MAKING PLACE IN A TRANSITIONAL CARE ENVIRONMENT

**DESCRIPTION**

We are conducting an ethnographic research study (using interviews, observation and video) to better understand the important role of visual arts in the built environment as a contributor to healing and wellness for older people. Students from Emily Carr University took part in a community-based project to create paintings for a transitional care facility, where patients are older people who have been discharged from hospital but are too frail to return home. The study brings together an interdisciplinary team of practitioners and researchers in the fields of health care facility design, gerontological nursing, and art education.

**PURPOSE**

The purpose of the research is to explore how visual art that has been purposively created for a health care environment can benefit older patients by providing them a sense of meaningful place, while simultaneously understanding the transformative potential for students engaged in the creation of this art.

**PARTICIPANTS**

Older people with dementia who are in a transitional care facility, family members of the people with dementia, staff members of the facility, and students who created the art.

**OUTCOMES**

This research will provide a set of rich verbal and visual descriptions of how visual art in a transitional care setting benefits older people. We will have comparative data to inform understanding of how visual art contributes to wayfinding and social interaction, and a detailed thematic description of the experiences of students through their engagement in art as social action. Knowledge mobilization will include written reports for both academic and professional audiences; academic, educational and public presentations; website development; and arts-based activities.

**Partners:** Emily Carr University, Fraser Health Authority

**Time:** April 2014 – April 2016

**Location:** Surrey

**Art Modalities:** Colour Use, Painting

**Contact:**
University of British Columbia
Alison Phinney
Email: alison.phinney@nursing.ubc.ca
Phone: 604-822-7484
MIXED MESSAGES: A LIVING NEWSPAPER PLAY
ABOUT THE CONNECTIONS BETWEEN SMOKING
AND MENTAL HEALTH

**DESCRIPTION**

For four and a half months, clients from a psychiatric day hospital and an Applied Theatre Researcher and Practitioner explored the topic of smoking and mental illness through drama. They shared personal experiences, read medical research, and dug up information about the tobacco industry. They used drama to foster understanding. During their research and play devising, they looked at how tobacco companies’ support for research has personally affected many clients. Using the original Living Newspaper theatre form, they devised a play which aimed to educate audiences about the connections between mental health and smoking, by illustrating the problem on a local, national, and international scale. They performed the play six times to about 250 people in total. Their audiences consisted of health care professionals (psychiatrists, occupational therapists, and nurses), inpatients and outpatients, and their family and friends.

**PURPOSE**

The researcher studied the effectiveness of the theatre form, the Living Newspaper, in this community setting.

**PARTICIPANTS**

Ten outpatient clients (4 of them were actors, 6 helped out back stage) at the Eric Martin Pavilion Psychiatric Hospital in Victoria, BC.

**OUTCOMES**

The outpatients’ involvement with the creation and performance of the play helped to eliminate existing stigma against people with mental health issues. The actors were respected by the audiences for their careful reflections on their addictions, not to mention the many hours that they had spent creating and performing the play. Mixed Messages was one of the first occasions at this hospital in which health care professionals attended a play performed by their clients. Having the clients on the stage as ‘experts’ of their own addictions, challenged existing stereotypes regarding the abilities (cognitive, social, physical) of people who live with mental illnesses.

**FRAMEWORK/PHILOSOPHY**

In this project, we used community-based theatre and devising as a way to further understand and question a complex issue. As we saw it, theatre worked best when it did not simplify mental health and smoking by offering one “message” or “lesson”. Instead, we found it was most appropriate in this health care setting, because of its ability to shed light on complex societal contradictions.
Kiwanis Village Nanaimo was the first organization in BC to introduce Music and Memory, a program which connects residents with Alzheimer’s disease or other types of dementia to personalized music as a way of enhancing memories and enriching their lives. Board members for the society that operates Kiwanis Village Nanaimo, emphasize the importance of fostering best practices within the organization, and see this initiative as an opportunity to introduce an innovative component in dementia care. We hope to expand Music and Memory throughout our seniors’ campus.

We are in the process of piloting the program among complex care residents, especially those who do not commonly take part in recreational and social activities. The use of personalized music elsewhere has been overwhelmingly successful, providing therapeutic benefits, allowing residents to tap into their memories and become engaged. We all experience happiness and other powerful emotions in response to music that stirs deep memories, and it is remarkable to see the benefits this has on residents, who often become happier and calmer, and in the case of remote and unresponsive residents, may light up, keep rhythm to the music, hum or sing, and regain the ability to take part in conversations.

Complex care residents diagnosed with Alzheimer’s disease and other dementias.

Researched benefits of the Music and Memory program include: increased attention; reduced agitation; enhanced engagement and socialization, which fosters a calmer social environment; and reduced reliance on anti-psychotic and anti-anxiety medications.
MUSIC THERAPY AT GF STRONG REHABILITATION CENTRE

DESCRIPTION

The Music Therapy Program is provided by an accredited music therapist to clients at GF Strong Rehabilitation Centre.

PURPOSE

Using music and musical elements to address clients’ rehabilitation goals, such as increased concentration and memory, decreased pain, improving speech, increasing self-expression and creativity, and improving fine and gross motor skills.

PARTICIPANTS

Ages 13–75 years with traumatic brain injury, spinal cord injury, arthritis, amputations, multi-trauma, multiple sclerosis and other progressive disorders.

OUTCOMES

Many clients speak of music therapy as helping them to feel whole again, while they work on their rehabilitation goals.

FRAMEWORK/PHILOSOPHY

Music is processed in both hemispheres of the brain. We know through research that music drives neuroplasticity, and neuroplasticity helps recovery from brain injuries. Music and music therapy are used to maximize the benefits of neuroplasticity by setting up situations where both sides of the brain are used in making music, also specifically working on individual client goals. The inherent healing and emotional properties of music are used to promote coping and adjustment following an injury.
### Music Therapy Program, Victoria Conservatory of Music

**Description**

The Music Therapy Program at the VCM is in its 22nd year. The program offers sessions to over 1,800 participants weekly. Therapists work in their specialty area, therefore, there are many concurrent programs within the populations that we serve. The VCM’s Music Therapy sessions meet the needs of children as young as 12 months old, to the elderly, and those of all ages with exceptionalities, conditions, or illnesses, to improve the quality of life for all.

**Purpose**

To restore, maintain, and improve mental, physical, and emotional health.

**Participants**

Ranging in ages from a few days old to over 100 years old.

**Outcomes**

To support the life journey, improve skills, restore ability, and to explore and discover gifts.

---

**Partners:** Many

**Time:** Ongoing

**Location:** Victoria

**Resources Available:** [www.vcm.bc.ca](http://www.vcm.bc.ca)

**Art Modalities:** Music Therapy

**Contact:**
Victoria Conservatory of Music
Dr. Johanne Brodeur, Music Therapy Department Head
Email: brodeur@vcm.bc.ca
Web: [www.vcm.bc.ca](http://www.vcm.bc.ca)
Phone: 250-386-5311 ext. 1030

---

Image Source: [www.vcm.bc.ca](http://www.vcm.bc.ca)
MUSIC THERAPY: PALLIATIVE CARE UNIT VGH

DESCRIPTION
This initiative provides Music Therapy as it applies to end of life issues for patients in the Palliative Care Unit.

PURPOSE
Music Therapy can be helpful on many levels, including pain relief, emotional release, family cohesion, spiritual support and so on.

PARTICIPANTS
Patients range in age from 20 to 100 years, and all are terminally ill.

OUTCOMES
Outcomes vary from temporary distraction from boredom of the hospital setting, to deep processing of personal issues and everything in between.

FRAMEWORK/PHILOSOPHY
Music Therapists work in a number of modalities - with children with disabilities, people with mental health issues, and elderly people with dementia and so on. Palliative Care is yet another area where music seems to be effective in addressing a myriad of issues in a safe and supportive environment, as a member of a much larger team which includes medical personnel, dietician, occupational therapist, social worker, chaplain etc. The Music Therapist is a valued member of the team who often reaches patients in a way that none of the other disciplines can.
RECREATION PROGRAM FOR GERIATRICS IN AN EXTENDED CARE FACILITY (INTERIOR HEALTH)

**Time:** Ongoing

**Location:** Oliver

**Art Modalities:** Art Therapy, Dance/Movement Therapy, Music Therapy, Photo Therapy, Interior Design, Landscape/Garden, Poetry, Reading/Literacy, Digital/Electronic, Film/Video, Television, Comedy, Dance/Movement, Music, Singing, Storytelling/Poetry, Colour Use, Crafts, Drawing, Jewelry, Painting, Photography, Culinary Arts

**Contact:**
Interior Health
Cassie Clarke, Recreational Activity Worker
Email: cassie.clarke@interiorhealth.ca
Web: www.interiorhealth.ca
Phone: 250-498-5040

**DESCRIPTION**

The recreation program at South Okanagan General Hospital extended care unit and Mckinney Place Extended Care provides residents with various activities, including, but not limited to: group exercises, crafts, bus outings, parties, baking, decorating, whoga (wheel chair yoga), active wee games, lunch clubs (where residents make special lunches), games, trivia, various visiting entertainers, reading, and reminiscing.

**PURPOSE**

To better the residents’ life in the facility by keeping them socialized and meeting their recreational needs.

**PARTICIPANTS**

Ages 40-104 years, with health conditions from minor to severe Dementia, Stroke, MS, ALS, and Parkinson’s.

**OUTCOMES**

A healthier and happier body of residents.
We have been collecting visual art for VGH, UBC Hospital and GF Strong for 15 years and have at present, a collection of some 1200 pieces, all of which have been donated. BC artists' work make up 95% of the collection. The work is donated by collectors and artists.

To create a healing environment for staff, patients and their families.

The outcomes are at present anecdotal, as we have not engaged in a research project, but we know that art is VERY important to staff and patients alike, as it provides distraction, beauty and creates a very humane environment to work and heal.

**PARTICIPANTS**

VGH & UBC Hospital Foundation
Jim O'Hara, Vice President
Email: jim.ohara@vch.ca
Web: www.vghfoundation.ca
Phone: 604-875-5100
THE PRIMARY GALLERY

DESCRIPTION
This project was initiated shortly after the Primary Health Centre in Kaslo, BC opened. The core idea was to use space along the corridors of the Primary Health Centre as gallery space, where local artists’ work would be displayed. For the first 6 years (2005-2011), this involved rotating shows every 6-months. The exhibit space is now home to a permanent collection of work, which is enjoyed and explored by patients and visitors coming to the PHC.

PURPOSE
To offer locally created, pleasant images for patients (primarily) visiting the Primary Health Centre, to observe and enjoy, instead of the sometimes stark interiors of health care facilities.

PARTICIPANTS
The artists who hang their work here and the audience, made up of anyone coming to the PHC for a health care related issue.

OUTCOMES
Prior to beginning the gallery, surveys were completed at five Primary Health Centres in the Interior Health Region, which gathered feedback from patients as to what type of artwork they did or did not want to look at. This informed the exhibits (to a degree) and helped to make this passive arts in health care activity virtually free of negative criticism in the nine years that it has been running. There are frequently positive comments about the artwork. Patients and visitors like the fact that the art is often produced by artists whom they know personally, and they appreciate having something in the Health Centre to distract them in sometimes difficult circumstances.

FRAMEWORK/PHILOSOPHY
To allow visual, creative, locally produced artwork to be a distractor for those visiting a health care setting, who may want (even for a short while) to not have to think about or consider their medical issues.
DESCRIPTION

For children and adolescents who are patients in our pediatric unit, we provide opportunities for creative, recreational, and therapeutic art activities (such as painting, sculpture, photography, gardening, etc.). Some patients have donated their pieces of art to the program, and we hope to put these pieces of art on display. So far, we have about 20 beautiful pieces of art donated. We also use “Chill & Spill” with some of the teenagers, which is a self-expressive guided journal. In addition to art activities, we also offer pediatric patients a chance to play music during their stay here. Thanks to a generous partnership with Long & McQuade, our collection of music instruments available for patients to use includes 3 guitars, 2 ukuleles, a mandolin, a banjo, an electric guitar (with headphones!), and a keyboard. We’re also thrilled to announce that we have a new music volunteer who comes in once/week to give lessons, play music, or just “jam” with some of the patients in the unit.

PURPOSE

When admitted to hospital, patients and families often feel vulnerable and are at the mercy of other peoples’ schedules. By having opportunities to participate in creating art or making music, children and youth have a chance to create, explore, imagine, play and have fun, which reduces stress and temporarily allows them to forget that they are in hospital.

PARTICIPANTS

3-years to 17-years, with mental health conditions (OCD, depression, anxiety, suicidal ideation, eating disorders), crohn's disease, diabetes, and other general pediatric condition.

OUTCOMES

Reduction in stress, a chance to learn new skills and have new experiences, and to be creative while in hospital.

FRAMEWORK/PHILOSOPHY

Dittbrenner (1999) point out with regard to children, that “the patients are not just ill; they are growing. They need stimulation in addition to health care, medication and feeding.” (As cited in Meeting Children’s Psychosocial Needs Across the Healthcare Continuum, p. 355).
TWO RIVERS GALLERY’S ART HEALS

**DESCRIPTION**

Art Heals is a Two Rivers Gallery program that has a history of over 10 years. Through this program, an artist works with University Hospital of Northern BC clients in the pediatric unit, adolescent psychiatric assessment unit, youth detox, adult psych, and adult detox once or twice each week throughout the year. Each session is a hands-on studio art activity aimed at engaging the clients and giving them an opportunity to express themselves through art.

**PURPOSE**

To give clients in the hospital an opportunity to create. This activity may take their mind off of their pain and suffering, engage their minds and hands, and/or encourage them to express themselves through guided art projects.

**PARTICIPANTS**

Individual child and youth patients in the pediatric unit, small groups of approximately 6 youth in the adolescent psychiatric department, small groups of approximately 6 youth in youth detox, groups of up to 10 in adult psych and adult detox.

**OUTCOMES**

Outcomes vary; some clients make huge steps just leaving their rooms, joining the group and participating in Art Heals sessions. Some clients use the Art Heals projects to "escape" their hospital experience while others use the projects to document their progress.

**FRAMEWORK/PHILOSOPHY**

Art Heals encourages clients in the hospital to use art making to express themselves and their experiences. The program occupies the individual’s hands and mind and may assist them with their healing process.

---

**Partners:** Two Rivers Gallery and the University Hospital of Northern BC

**Time:** 2002 - Ongoing

**Location:** Prince George

**Resources Available:** By request

**Art Modalities:** Art Therapy, Colour Use, Crafts, Drawing, Mixed Media, Painting, Printmaking, Sculpture

**Contact:**
Carolyn Holmes, Director of Public Programs
Email: carolyn@tworiversgallery.ca
Web: www.tworiversgallery.ca
Phone: 250-614-7804
ARTS IN HEALTH RESEARCH
The Health Arts Research Centre (HARC) is intended as part of an integrated response to an identified need for a knowledge centre dedicated to renewing health in Northern BC through creative, geographically, and socio-culturally specific means and as an agent for building capacity to bring that knowledge into practice, especially in the North, and especially for First Nations.

Four primary principles guide the vision, relationships and work of HARC:
1. Respectful and reciprocal relationships with multiple and diverse communities;
2. Thinking creatively about health disparities in the North;
3. Merging artistic ways of knowing and being with health and medical paradigms;
4. Producing new spaces for innovative and creative knowledge about wellbeing.

HARC provides opportunities to bring northern Indigenous peoples/knowledge/communities into dialogue with undergraduate medical and other health-focused students.

Improved health for Northern and specifically Northern Indigenous peoples and communities in British Columbia.

We are a group of learners, researchers and collaborators from diverse disciplinary backgrounds and experience, who are interested in synergistic and creative ways to interrogate the determinants of health disparities in the north, and to engage in strengths-based visioning and action to address the revival of health, healing and wellbeing in northern communities.
HEALTH DESIGN LAB, EMILY CARR

- **Partners:** Our partners are a mix of for-profit and non-profit organizations, and include Fraser Health, Vancouver Coastal Health, and PHSA

- **Time:** Ongoing

- **Location:** Greater Vancouver Area

- **Resources Available:** Website, Current (ECUAD publication, community-based projects)

- **Art Modalities:** Graphic Design, Industrial Design, Interaction Design

- **Contact:**
  Emily Carr University of Art + Design
  Health Design Lab
  Jonathan Aitken, Director
  Email: jonathan_aitken@ecuad.ca
  Web: http://research.ecuad.ca/
  healthdesignlab
  Phone: 604-630-4560

---

**DESCRIPTION**

The Health Design Lab provides design opportunities to students and faculty through collaborative partnerships that apply solution-focused, human-centred research methodologies to complex problems in health care. Our focus puts people at the core of the research process. It ensures that the experts, the actual stakeholders in a problem, have a voice. This involvement results in more innovative outcomes, a better “fit,” and higher acceptance rates than with traditional design methodologies. As part of this process, we often hold co-creation workshops with our stakeholders. These workshops consist of a series of exercises that engage the end-user by asking, listening, learning, and creating solutions collaboratively.

**PURPOSE**

Our goal is to provide innovative solutions for problems in health care, based on human-centred, evidence-led research.

**OUTCOMES**

We have completed many projects in the last few years. Outcomes have ranged from systems design recommendations, to product design, and communication and interaction designs.
"Executive Functions" (EFs) make it possible for us to think before we act, resist temptations, stay focused, mentally play with ideas, reason, and quickly adapt to changed circumstances. Not surprisingly, they are predictive of achievement, health, wealth, and quality of life throughout life. We want to test a theory proposed by Dr. Adele Diamond that activities that most successfully improve EFs will be those that not only provide train and challenge EFs (working to directly improving them) but those that also indirectly support EFs by reducing things that disrupt EFs (like stress) and/or by increasing things that aid EFs (like social support). We propose that some of the activities that do that best are the arts and physical activities. They challenge EFs (demanding focused concentration, holding complex sequences in mind, etc.), make us happy and proud (participants see very concretely that with effort they can succeed), address social needs (involve working together toward a valued, shared goal), and help improve physical skills and fitness. Thus we propose that the arts and physical exercise may be critical for the best health and best educational outcomes for our children.

The kinds of studies we are eager and ready to do, if we can only obtain funding, include: 1. Examining possible benefits of Social Dance for EFs and academic outcomes, and for emotional, social, and physical health; 2. Possible benefits of Youth Circus (YC) for EFs and academic outcomes, and for emotional, social, and physical health; 3. Study of EF benefits from learning to play an instrument as part of an ensemble from the start versus learning to play an instrument alone first; 4. Storytelling as an aid to help kindergarten (K) children develop better EFs.

Depending on the study, children would be anywhere from 4 to 16 years of age, both genders, all ethnicities, and all economic means (but especially focusing on children living in poverty or whose families have limited means). No one would be excluded because of a developmental disorder or learning disability, unless their safety might be at risk by participating.

We will do assessments just before each program starts, immediately after their last session of the year, and then once a year thereafter for as long as we have funding (especially for Studies 1 & 2). We assess several different components of EFs, academic performance, physical fitness and skills, mood, and social wellbeing.
IMPROVING HEALTH OUTCOMES FOR PROSTATE CANCER PATIENTS

Description

Androgen deprivation therapy is a common treatment used to control prostate cancer. About 50% of prostate cancer patients receive androgen deprivation therapy. This therapy has many side effects, including a decrease in bone health, an increase in bone fracture risk, weight gain, and interpersonal relationship changes. 96% of men with prostate cancer will survive five or more years post-diagnosis, but many will live with side effects of the disease and treatment, and may develop related chronic conditions. Nutrition can have a role in preventing or lessening the impact of some of the side effects. Cooking classes are a known effective way to teach nutrition information. Because dietary decisions and changes are often made in discussion with partners, the cooking classes in this study will be offered to men with prostate cancer and their partners. We are interested in studying whether cooking classes are helpful to men with prostate cancer who are receiving androgen deprivation therapy and their partners in making healthier nutrition decisions. Study participants will complete a six-session hands-on cooking class and nutrition education program, which may help manage treatment side effects. The program will focus on improving knowledge about nutrition for androgen deprivation therapy patients. It will also offer tips in food preparation and how to modify recipes, as well as provide other nutritional information. Each class will involve hands-on activities requiring both the patient and their partner to participate. All classes will have sampling of healthy dishes. Recipes and resource information will be provided. There is no cost to participate.

Purpose

We will evaluate the program’s usefulness, and study other factors that may contribute to health promotion success. This study will help us learn how to better manage the side effects of prostate cancer treatment and how to prevent other types of cancer and chronic conditions.

Participants

Men with prostate cancer who are receiving androgen deprivation therapy, and their partner.
SEXUALITY AND DYING: PATIENT, PARTNER AND CARE PROVIDER PERSPECTIVES ON INTIMACY AT THE END OF LIFE (A PHD DISSERTATION)

**DESCRIPTION**

Sexuality is a central aspect of human life. Yet despite a recent movement towards approaching medical care from a holistic perspective, sexuality has often been excluded from our understanding of the individual as a whole. This is especially true within palliative care settings where a patient’s sexuality and sexual needs may seem less imperative than various complex physical health needs and symptom management. Discussing sex and sexuality at end of life also presents a variety of communication challenges for both the care provider and the patient.

**PURPOSE**

This proposed two-phase qualitative and arts-based study will examine patient, partner and health care provider perspectives on intimacy and sexuality at end of life. Several key questions will be addressed: 1. How do patients and patient’s partners understand their own bodies, intimacy and sexuality through their illness experience; 2. How are the sexual identities of patients affected by the dying process and palliative care environments; and 3. How do these environments need to be modified in order to enable healthy, respectful, intimate spaces at end-of-life?

**PARTICIPANTS**

Patients residing at hospice based care settings within Vancouver and Victoria, BC.

**OUTCOMES**

This work will contribute to improved clinical practice through a deeper understanding of intimacy and sexuality at end-of-life. It will broaden the conversation around ‘healthy dying’, the ethics of research approaches to sensitive topics, and intimacy-informed hospice design. It will contribute to the development of patient-centered knowledge translation tools emphasizing an individual’s desire to live fully even as they are dying.
SAFETY, BELONGING AND MENTAL HEALTH: UNDERSTANDING THE INTERSECTIONS BETWEEN VIOLENCE, PLACE, AND MENTAL HEALTH IN THE LIVES OF TRANSGENDER AND GENDER NONCONFORMING PEOPLE

This study will examine the relationship between gender identity, violence and place in the lives of transgender and gender nonconforming (T/GNC) people, and the impact on their mental health and wellbeing. The project uses Photovoice - a participatory action research method where co-researchers take photos, share stories and use these for social action.

Studies reveal that T/GNC people experience pervasive and multiple forms of violence in numerous public and private places, suggesting they may be more vulnerable to violence across their lifespan than the general population. This study will develop knowledge about the intersections between violence, gender identity/expression, place and mental health in the lives of T/GNC people. It will investigate the strategies that T/GNC people develop and use to prevent and resist violence and maintain their mental health, as well as how different contexts (including, but not limited to, geography, gender discrimination, transphobia, homophobia, racism, and/or poverty) undermine or enhance safety, belonging, resiliency and mental health. The study will offer an in-depth understanding of how the enforcement of gender norms impacts the mental health and wellbeing of Canadians, and will have broad implications for the development of best practices and protocols for trauma-informed and gender-sensitive mental health services, health promotion and violence prevention/intervention with marginalized communities.

PARTICIPANTS

Self-identified trans and gender nonconforming adults who are 19 years and older. Approximately 30 people will be involved including community advisory members.
The study will use Photovoice, a qualitative, community-based participatory research (CBPR) method that combines photography, dialogue and social action (McIntyre, 2003; Wang, 1999). Consistent with the principles of CBPR, this project is being developed and conducted in collaboration with trans and gender nonconforming people, to address community health concerns and strategies for action. CBPR methodologies are well suited for marginalized populations who have historically been left out of research processes or who have experienced discrimination or barriers to health care access. Collaborative research can build confidence and trust within a community, improve study validity, and the results can be used to improve the health of the community in various ways including influencing education, policy and protocols (Catalani, C. & Minkler, 2010). Data will be analyzed using thematic content analysis through the lens of intersectionality theory, wherein themes identified will be considered in the context of participants’ potential experiences of multiple, intersecting oppressions. Intersectionality theory examines how different systems of social marginalization and power work together. Other frameworks informing this work include critical studies in gender, sexuality, race and Indigenous knowledge.
The purpose of this research is to study a standard (such as treadmills and stationary bicycles) and a culturally relevant exercise program (Bhangra) in post-menopausal South Asian women. South Asian origin refers to individuals who have grandparents from India, Pakistan, Bangladesh or Sri Lanka. We are focusing this study on post-menopausal women as body fat distribution may change with menopause and affect heart health. We are interested in seeing how 12 weeks of these exercise programs affects levels of body fat (specifically abdominal fat) and heart health compared to participants who will be asked not to exercise.

The aim of the South Asian Exercise Trial (SAET) is to test the efficacy of a standard aerobic exercise program and a culturally acceptable Bhangra dance exercise program on body fat distribution and cardiovascular disease risk factors in postmenopausal South Asian women. This information will allow us to determine appropriate exercise programming for post-menopausal South Asian women.

PARTICIPANTS

75 post-menopausal South Asian women who are physically inactive and who do not have diabetes or heart disease will complete this program.

OUTCOMES

Body Fat Distribution, Cardiovascular Risk Factors, Aerobic Fitness and Adherence.
STORIES FROM THE CLOSET: A PLAY ABOUT LIVING WITH CHRONIC ILLNESS

DESCRIPTION

With content based on patient interviews, research findings, and Yvette Lu’s own experiences as a doctor, Stories from the Closet: a play about living with chronic illness, is a story about a young woman and her journey through the trials and tribulations of learning to cope with illness.

PURPOSE

To gain a better understanding of the experiences of young women living with chronic illness, to identify potential ways in which medical practitioners can help these women in coping with the burden of disease, to create a dramatic work inspired by the information acquired through these interviews and an accompanying literature review that can be performed for the public and for health care practitioners, and to use drama as a means of better understanding the experiences of women living with chronic illness.

PARTICIPANTS

Women aged 17-40.

FRAMEWORK/PHILOSOPHY

The impact of chronic illness is well-established as a research topic. However, generally the results of such studies and analyses are presented within an academic environment as articles in journals and books, or within a specialized conference. Using theatre as a means to explore and disseminate research findings has the potential to educate a much larger and broader group of people, including the lay public. It is interactive and accessible, and the emotional impact of having immediate audience engagement is potentially more effective in creating lasting impressions and stimulating discussion. Furthermore, drama is particularly suitable when presenting the results of qualitative research, as it can evoke the emotional and sensory experiences that were present in the original encounters with subjects, but which are difficult to capture in a written report.
THE MEMORY PROJECT: CRITICAL COLLECTIVE
MEMORY WORK WITH LGBT SENIORS

**DESCRIPTION**

This is a two year research project conducted with an arts-engaged group of LGBTQ elders in Vancouver BC, funded by SSHRC - the Social Sciences and Humanities Research Council of Canada. This research is being conducted by a postdoctoral fellow at Simon Fraser University in the department of Gender, Sexuality, and Women's Studies.

**PURPOSE**

The object of the research is to examine how practices of art making can keep participants socially and cognitively connected and help them understand, articulate, and represent their individual and collective memories.

**PARTICIPANTS**

55-83 years old, they identify variously as gay, queer, trans and bisexual. Some experience significant physical, cognitive, and emotional challenges, including MS, depression, bipolar disorder, dementia, memory loss, and general physical frailty.

**OUTCOMES**

The research has found that making art in collaboration, leads to greater insight into life experience, including the recovery and representation of counter normative memories. Members of the group feel empowered, more visible, and feel that they have greater agency.

**FRAMEWORK/PHILOSOPHY**

My research falls under the broad category of Arts Based Educational Research. My arts practices are oriented by the beliefs in collaborative art making that challenges participants to be critical - since our culture is organized through structures of power, cultural activity involves examining and ‘speaking back’ to structures that have been oppressive.
Alzheimer Disease (AD) is common, representing about 64% of all dementias in Canada. In addition to memory problems, AD patients often develop psychological and behavioural symptoms such as depression, agitation, anxiety, and aggression. Music therapy is a safe and low-cost intervention that has been applied in residential care settings. Observational studies suggested potential benefits such as decreased agitation and improved social interactions. Other studies also found that the ability to remember music can be preserved even into the late stages of dementia. Music therapy makes use of remaining brain functions and is believed to maximize the patient’s expression and communication ability to improve their function, enjoyment, sense of self-worth, and quality of life. However, evidence is lacking from well-designed randomized controlled studies. Our group has completed two randomized controlled trials and the results are pending. In the first music therapy study, patients with mild to moderate AD received 4 weeks of individualized music therapy and measurements of cognition and behaviour were taken before and after the music therapy intervention. Also measured were pre and post-intervention morning salivary cortisol levels to determine the change in biological stress response of music therapy. As well, fMRI studies were included to assess areas of brain activation before and after intervention in order to correlate any cognitive changes and health benefits from the music therapy. For the second music therapy study, patients with mild to moderate AD and their caregivers received 10 weeks of group music therapy. Measurements of stress hormones, behaviour, memory, and quality of life before and after the intervention were taken.

**PURPOSE**

To determine, using randomized controlled studies, whether music therapy has beneficial effects for patients with Alzheimer disease.

**PARTICIPANTS**

Patients with mild to moderate Alzheimer disease were enrolled.

**OUTCOMES**

Memory, cognition, behaviour, and quality of life measurements, stress hormone measurements, and brain activation, using fMRI.
USING PHOTO - JOURNEY TO ILLUMINATE THE RISKS OF HEALTH DELIVERY FOR OLDER ADULTS WITH ATRIAL FIBRILLATION IN RURAL COMMUNITIES: A PILOT STUDY

DESCRIPTION

Obtaining the voices of older adult patients with atrial fibrillation (AF) about their health and health care experiences is important in meeting their needs for safe, quality care. This is especially important in rural communities that are well known to have inequities in health services. This pilot study, funded through a CIHR Catalyst Grant, used a mixed methods design to understand risks related to health service delivery for older adults with AF living in rural communities. It obtained the perspectives of patients, providers and decision makers. In understanding health care delivery risks, one part of the larger study involved 6-month patient journeys with 10 patients who kept logs, took pictures and participated in 1 and 6 month face-to-face interviews and monthly telephone conversations. The use of photographs was a valuable tool that made visible aspects of the patients’ journeys with AF that were not accessible in narrative accounts alone. Photographs illuminated variations in patients’ journeys with AF, health service delivery risks in rural communities, and the life-space impact of AF. Maintaining participant engagement with photo-taking over time, enhances the journey but poses challenges that need to be addressed to take full advantage of the photovoice methodology.

PURPOSE

1. Describe current service delivery for rural/small urban older adults with AF from the perspective of patients, service providers, and decision-makers; 2. Understand the needs, values, preferences, valued outcomes and feasibility of integrated care for this sub-population from multiple perspectives (e.g., older adult with AF, providers, decision makers); and 3. Identify strengths and gaps in services for older adults with AF.

PARTICIPANTS

Ten journey participants, 13 older adult focus group participants, 10 providers, and 2 decision-makers.

OUTCOMES

All stakeholders identified health care risks related to services across the continuum (primary to tertiary), inter-professional team effectiveness, and patient-centeredness, but differed in what they emphasized as most salient. The multiple perspectives gained from this study have practice, policy and research implications and provide a broad lens for addressing health service-related risks for rural older adults with AF.
YIN KAK HONZU, THE EARTH IS BEAUTIFUL.

**DESCRIPTION**

The Yin Kak Honzu is a digital story developed to illustrate the relationships between an indigenous people (sacred Laws/language, Nation and Community), Watersheds (Laws & Wet’suwet’en homelands/territories) and Health (social determinants of health) and the linkages required to form a holistic ‘framework’, and a true holistic approach to wellbeing.

**PURPOSE**

To promote a Wet’suwet’en understanding of wellbeing for greater equity in health, and providing education to promote healthy people and healthy communities.

**PARTICIPANTS**

All ages, addressing serious inequities in the social determinants of indigenous peoples’ health.

**FRAMEWORK/PHILOSOPHY**

To explore various ways of knowledge translation, to share ‘stories’ and insights exploring how health, environment and communities connect together in a ‘place’.

**Partners:** UNBC and the Office of the Wet’suwet’en

**Time:** April 2011 – December 2014

**Location:** Primarily Prince George

**Resources Available:** Three digital stories can be found at http://ecohealthkta.net/digital_stories/

**Art Modalities:** Digital/Electronic Media, Film/Video

**Contact:**
Affiliated with the Office of the Wet’suwet’en
University of Northern British Columbia, Ecohealth Knowledge to Action Research Group
Sandra Harris, lead digital story maker and volunteer
Email: smharris877@gmail.com
Web: www.wetsuweten.com
Phone: 250-847-3630

APPENDIX 2

INITIATIVE LISTING BY REGION
<table>
<thead>
<tr>
<th>REGION</th>
<th>ORGANIZATION</th>
<th>PAGE #</th>
</tr>
</thead>
<tbody>
<tr>
<td>ALL / PROVINCEWIDE</td>
<td>65_RedRoses #4Eva Campaign</td>
<td>38</td>
</tr>
<tr>
<td>Provincewide</td>
<td>African Stages Association of BC</td>
<td>40</td>
</tr>
<tr>
<td>Provincewide</td>
<td>Bevel Up</td>
<td>140</td>
</tr>
<tr>
<td>Provincewide</td>
<td>BoosterBuddy Mobile Application</td>
<td>153</td>
</tr>
<tr>
<td>Provincewide</td>
<td>Chronic Pain in Focus</td>
<td>58</td>
</tr>
<tr>
<td>Provincewide</td>
<td>Clean Shots Contest</td>
<td>142</td>
</tr>
<tr>
<td>Provincewide</td>
<td>Do Bugs Need Drugs?</td>
<td>63</td>
</tr>
<tr>
<td>Provincewide</td>
<td>Expression ~ Barefoot Caravan</td>
<td>66</td>
</tr>
<tr>
<td>Provincewide</td>
<td>I'd Rather Walk</td>
<td>78</td>
</tr>
<tr>
<td>Provincewide</td>
<td>LACE Campaign</td>
<td>160</td>
</tr>
<tr>
<td>Provincewide</td>
<td>Maladjusted</td>
<td>88</td>
</tr>
<tr>
<td>Provincewide</td>
<td>Provincial Eating Disorders Awareness (PEDAW) Campaign Mural Contest</td>
<td>101</td>
</tr>
<tr>
<td>Provincewide</td>
<td>Retirement Concepts Concert Series: Music that is so nice to come home to</td>
<td>107</td>
</tr>
<tr>
<td>Provincewide</td>
<td>Sage-ing: An Online Journal of the Arts and Aging</td>
<td>111</td>
</tr>
<tr>
<td>Provincewide</td>
<td>Songs of Old, Lives of New</td>
<td>121</td>
</tr>
<tr>
<td>Provincewide</td>
<td>Health and Social Literacy Through Video and Graphic Novels</td>
<td>75</td>
</tr>
<tr>
<td>Provincewide</td>
<td>The Provincial Eating Disorders Awareness (PEDAW) Campaign 2015 Wristband Challenge!</td>
<td>100</td>
</tr>
<tr>
<td>Provincewide</td>
<td>This is Not a Cocktail Party</td>
<td>132</td>
</tr>
<tr>
<td>Provincewide</td>
<td>Using Photo - Journey To Illuminate The Risks Of Health Delivery For Older Adults With Atrial Fibrillation In Rural Communities: A Pilot Study</td>
<td>185</td>
</tr>
<tr>
<td>Provincewide</td>
<td>Vocal Health for All Ages</td>
<td>134</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>INTERIOR HEALTH REGION</th>
<th>ORGANIZATION</th>
<th>PAGE #</th>
</tr>
</thead>
<tbody>
<tr>
<td>East Kootenay</td>
<td>None</td>
<td></td>
</tr>
<tr>
<td>Kootenay/Boundary</td>
<td>The Primary Gallery</td>
<td>170</td>
</tr>
<tr>
<td>Kaslo</td>
<td>The Primary Gallery</td>
<td></td>
</tr>
<tr>
<td>Thompson/Cariboo/Shuswap</td>
<td>Outreach - Crossing Bridges Program</td>
<td>96</td>
</tr>
<tr>
<td>Kamloops</td>
<td>Outreach - Crossing Bridges Program</td>
<td>188</td>
</tr>
<tr>
<td>REGION</td>
<td>ORGANIZATION</td>
<td>PAGE #</td>
</tr>
<tr>
<td>-------------------</td>
<td>-----------------------------------------------------------------------------</td>
<td>--------</td>
</tr>
<tr>
<td>Okanagan</td>
<td>ArtWorks Studio (Kelowna CMHA)</td>
<td>50</td>
</tr>
<tr>
<td>Kelowna</td>
<td>Breastfeeding Art Expo</td>
<td>53</td>
</tr>
<tr>
<td>Kelowna</td>
<td>Fun with Paint</td>
<td>158</td>
</tr>
<tr>
<td>Kelowna</td>
<td>heART Fit</td>
<td>77</td>
</tr>
<tr>
<td>Kelowna</td>
<td>Living Singing Mandala</td>
<td>86</td>
</tr>
<tr>
<td>Kelowna</td>
<td>Safety, belonging and mental health: Understanding the intersections between violence, place, and mental health in the lives of transgender and gender nonconforming people</td>
<td>179</td>
</tr>
<tr>
<td>Kelowna</td>
<td>Sage-ing: An Online Journal of the Arts and Aging</td>
<td>111</td>
</tr>
<tr>
<td>Kelowna</td>
<td>Sing For Your Life Foundation BC</td>
<td>118</td>
</tr>
<tr>
<td>Osoyoos</td>
<td>IndigenEYEZ</td>
<td>79</td>
</tr>
<tr>
<td>Oliver</td>
<td>Recreation program for geriatrics in an extended care facility (Interior Health)</td>
<td>168</td>
</tr>
<tr>
<td>Penticton</td>
<td>Psychiatric Art Show (7th Annual): Beyond Words</td>
<td>102</td>
</tr>
<tr>
<td>Vernon</td>
<td>Expression ~ Barefoot Caravan</td>
<td>66</td>
</tr>
</tbody>
</table>

**FRASER HEALTH REGION**

<table>
<thead>
<tr>
<th>Fraser East</th>
<th>ArtWorks/PhotoClub for people with acquired brain injuries</th>
<th>52</th>
</tr>
</thead>
<tbody>
<tr>
<td>Abbotsford/Chilliwack/Hope</td>
<td>ArtWorks/PhotoClub for people with acquired brain injuries</td>
<td>52</td>
</tr>
<tr>
<td>Sto:lo Nation (Chilliwack)</td>
<td>Star In Your Own Stories</td>
<td>125</td>
</tr>
<tr>
<td>Fraser North</td>
<td>Art and Arthritis</td>
<td>138</td>
</tr>
<tr>
<td>Port Moody</td>
<td>Community Partnership Programs at Leigh Square Community Arts Village</td>
<td>61</td>
</tr>
<tr>
<td>Fraser South</td>
<td>Building Capacity in Our Children</td>
<td>54</td>
</tr>
<tr>
<td>Delta</td>
<td>ArtWorks/PhotoClub for people with acquired brain injuries</td>
<td>52</td>
</tr>
<tr>
<td>Langley</td>
<td>Artism - A Spectrum of Creativity</td>
<td>43</td>
</tr>
<tr>
<td>New West Minister</td>
<td>Art Gallery Exhibit: Diversity Competency in Health Care</td>
<td>139</td>
</tr>
<tr>
<td>Surrey</td>
<td>Artists Helping Artists</td>
<td>44</td>
</tr>
<tr>
<td>Surrey</td>
<td>Imagine a World Where Every Child Thrives!</td>
<td>176</td>
</tr>
<tr>
<td>REGION</td>
<td>ORGANIZATION</td>
<td>PAGE #</td>
</tr>
<tr>
<td>------------</td>
<td>------------------------------------------------------------------------------</td>
<td>--------</td>
</tr>
<tr>
<td>Surrey</td>
<td>Making Art for Making Place in a Transitional Care Environment</td>
<td>162</td>
</tr>
<tr>
<td>Surrey</td>
<td>MTC Studio Inc. school programs</td>
<td>91</td>
</tr>
<tr>
<td>Surrey</td>
<td>Social Skills Through Drama</td>
<td>119</td>
</tr>
<tr>
<td>Surrey</td>
<td>South Asian Exercise Trial</td>
<td>181</td>
</tr>
<tr>
<td>Surrey</td>
<td>VocalEye Descriptive Arts</td>
<td>135</td>
</tr>
</tbody>
</table>

**VANCOUVER COASTAL REGION**

<p>| Richmond   | Artists Helping Artists                                                       | 44     |
| Richmond   | Arts Truck School Program 2015: Creating Healthy Children                    | 48     |
| Richmond   | Health Promotion Bookmark Contest                                            | 76     |
| Richmond   | Imagine a World Where Every Child Thrives!                                   | 176    |
| Richmond   | Richmond Youth Media Program                                                  | 108    |
| Richmond   | Stand Up For Mental Health                                                    | 124    |
| Richmond   | That's Just Crazy Talk                                                        | 145    |
| Richmond   | VocalEye Descriptive Arts                                                    | 135    |
| Vancouver  | Agewell Chataqua Project                                                      | 41     |
| Vancouver  | Artists Helping Artists                                                       | 44     |
| Vancouver  | Artists Without Borders                                                       | 45     |
| Vancouver  | Arts and Health Project: Healthy Aging through the Arts                       | 47     |
| Vancouver  | Arts Studio Rehabilitation Program                                            | 42     |
| Vancouver  | Artworks Studio, GF Strong Rehabilitation Centre                              | 152    |
| Vancouver  | Bevel Up                                                                      | 140    |
| Vancouver  | Circles of Understanding                                                     | 59     |
| Vancouver  | Comics with a Cause                                                           | 60     |
| Vancouver  | Creative Arts Program, BC Children's Hospital                                | 155    |
| Vancouver  | Creative Expressions Art Nights                                               | 62     |
| Vancouver  | Enterprising Women Making Art                                                 | 64     |</p>
<table>
<thead>
<tr>
<th>REGION</th>
<th>ORGANIZATION</th>
<th>PAGE #</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vancouver</td>
<td>Frames Film Project</td>
<td>69</td>
</tr>
<tr>
<td>Vancouver</td>
<td>Frames of Mind Mental Health Film Series</td>
<td>70</td>
</tr>
<tr>
<td>Vancouver</td>
<td>Gallery Gachet</td>
<td>74</td>
</tr>
<tr>
<td>Vancouver</td>
<td>Health Arts Society and Artworks Program at Brock Fahrni Pavilion</td>
<td>159</td>
</tr>
<tr>
<td>Vancouver</td>
<td>Health Design Lab, Emily Carr</td>
<td>175</td>
</tr>
<tr>
<td>Vancouver</td>
<td>Heartfelt Images Contest</td>
<td>143</td>
</tr>
<tr>
<td>Vancouver</td>
<td>Housing First - Principles into Practice</td>
<td>144</td>
</tr>
<tr>
<td>Vancouver</td>
<td>I'd Rather Walk</td>
<td>78</td>
</tr>
<tr>
<td>Vancouver</td>
<td>Imagine a World Where Every Child Thrives!</td>
<td>176</td>
</tr>
<tr>
<td>Vancouver</td>
<td>Improving healthy outcomes for prostate cancer patients</td>
<td>177</td>
</tr>
<tr>
<td>Vancouver</td>
<td>Instruments of Change</td>
<td>81</td>
</tr>
<tr>
<td>Vancouver</td>
<td>Intimacy, Sexuality and Dying: Patient, Partner and Care Provider</td>
<td>178</td>
</tr>
<tr>
<td>Vancouver</td>
<td>Perspectives on Intimacy at the End of Life (A PhD Dissertation)</td>
<td></td>
</tr>
<tr>
<td>Vancouver</td>
<td>Kiskstart Disability Arts &amp; Culture</td>
<td>82</td>
</tr>
<tr>
<td>Vancouver</td>
<td>Late Nite Art 30: Arts &amp; Health</td>
<td>85</td>
</tr>
<tr>
<td>Vancouver</td>
<td>Magpie's Nest Community Art Space</td>
<td>87</td>
</tr>
<tr>
<td>Vancouver</td>
<td>MTC Studio Inc. school programs</td>
<td>91</td>
</tr>
<tr>
<td>Vancouver</td>
<td>Music Therapy at GF Strong Rehabilitation Centre</td>
<td>165</td>
</tr>
<tr>
<td>Vancouver</td>
<td>Music Therapy: West Coast Alternate School</td>
<td>93</td>
</tr>
<tr>
<td>Vancouver</td>
<td>Music Therapy: Palliative Care Unit VGH</td>
<td>167</td>
</tr>
<tr>
<td>Vancouver</td>
<td>NEWS: New Evolution in Wise Storytelling</td>
<td>94</td>
</tr>
<tr>
<td>Vancouver</td>
<td>Paul's Club</td>
<td>97</td>
</tr>
<tr>
<td>Vancouver</td>
<td>Piece of Mind Art Exhibition</td>
<td>98</td>
</tr>
<tr>
<td>Vancouver</td>
<td>Planet Ahead Media Arts Project</td>
<td>99</td>
</tr>
<tr>
<td>Vancouver</td>
<td>Ptarmigan Theatre and Music Society: Strength Within Arts Program for Seriously Ill Children</td>
<td>103</td>
</tr>
<tr>
<td>Vancouver</td>
<td>Queer Imaging and Riting Kollective For Elders</td>
<td>105</td>
</tr>
<tr>
<td>Vancouver</td>
<td>Reel Youth</td>
<td>106</td>
</tr>
<tr>
<td>Vancouver</td>
<td>SafeVibe</td>
<td>109</td>
</tr>
<tr>
<td>REGION</td>
<td>ORGANIZATION</td>
<td>PAGE #</td>
</tr>
<tr>
<td>-------------------------------</td>
<td>-----------------------------------------------------------------------------</td>
<td>--------</td>
</tr>
<tr>
<td>North Shore / Coast Garibaldi</td>
<td>Safety, belonging and mental health: Understanding the intersections between violence, place, and mental health in the lives of transgender and gender nonconforming people</td>
<td>179</td>
</tr>
<tr>
<td>North Vancouver</td>
<td>Saint James Music Academy</td>
<td>112</td>
</tr>
<tr>
<td>North Vancouver</td>
<td>Self-Discovery for Health</td>
<td>115</td>
</tr>
<tr>
<td>North Vancouver</td>
<td>Songs of Old, Lives of New</td>
<td>121</td>
</tr>
<tr>
<td>North Vancouver</td>
<td>South Hill INSIDE STORIES</td>
<td>122</td>
</tr>
<tr>
<td>North Vancouver</td>
<td>Stand Up For Mental Health</td>
<td>124</td>
</tr>
<tr>
<td>North Vancouver</td>
<td>Stories from the Closet: a play about living with chronic illness</td>
<td>182</td>
</tr>
<tr>
<td>North Vancouver</td>
<td>Tea for Tutu</td>
<td>129</td>
</tr>
<tr>
<td>North Vancouver</td>
<td>That's Just Crazy Talk</td>
<td>145</td>
</tr>
<tr>
<td>North Vancouver</td>
<td>The Intersection of Art and Healing (VGH Art Collection)</td>
<td>169</td>
</tr>
<tr>
<td>North Vancouver</td>
<td>The Memory Project: Critical Collective Memory Work with LGBT Seniors</td>
<td>183</td>
</tr>
<tr>
<td>North Vancouver</td>
<td>The One Project</td>
<td>130</td>
</tr>
<tr>
<td>North Vancouver</td>
<td>The Sarah McLachlan School of Music</td>
<td>131</td>
</tr>
<tr>
<td>North Vancouver</td>
<td>The Super Power Project</td>
<td>128</td>
</tr>
<tr>
<td>North Vancouver</td>
<td>UBC Arts in Medicine Group and Website</td>
<td>148</td>
</tr>
<tr>
<td>North Vancouver</td>
<td>UBC Studies of Music Therapy in Alzheimer Disease</td>
<td>184</td>
</tr>
<tr>
<td>North Vancouver</td>
<td>VocalEye Descriptive Arts</td>
<td>135</td>
</tr>
<tr>
<td>North Vancouver</td>
<td>Arts and Health Project: Healthy AgingThrough the Arts</td>
<td>47</td>
</tr>
<tr>
<td>North Vancouver</td>
<td>Capilano University: Bachelor of Music Therapy Degree</td>
<td>141</td>
</tr>
<tr>
<td>North Vancouver</td>
<td>Stand Up For Mental Health</td>
<td>124</td>
</tr>
<tr>
<td>North Vancouver</td>
<td>That’s Just Crazy Talk</td>
<td>145</td>
</tr>
<tr>
<td>Pemberton</td>
<td>Seniors Interacting Through Art</td>
<td>116</td>
</tr>
<tr>
<td>Sechelt</td>
<td>2014 Sechelt Arts Festival</td>
<td>114</td>
</tr>
</tbody>
</table>

**Northern Health Region**

<table>
<thead>
<tr>
<th>REGION</th>
<th>ORGANIZATION</th>
<th>PAGE #</th>
</tr>
</thead>
<tbody>
<tr>
<td>Northern Interior</td>
<td>Star In Your Own Stories</td>
<td>125</td>
</tr>
<tr>
<td>Nak’azdli (Fort St. James)</td>
<td></td>
<td>192</td>
</tr>
<tr>
<td>REGION</td>
<td>ORGANIZATION</td>
<td>PAGE #</td>
</tr>
<tr>
<td>--------------------------</td>
<td>------------------------------------------------------------------------------</td>
<td>--------</td>
</tr>
<tr>
<td>Prince George</td>
<td>Health Arts Research Centre</td>
<td>174</td>
</tr>
<tr>
<td>Prince George</td>
<td>Street Spirits Theatre Company</td>
<td>127</td>
</tr>
<tr>
<td>Prince George</td>
<td>Two Rivers Gallery’s Art Heals</td>
<td>172</td>
</tr>
<tr>
<td>Prince George</td>
<td>Yin Kak Honzu, the earth is beautiful.</td>
<td>186</td>
</tr>
<tr>
<td><strong>Northeast</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Northwest</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Kitimaat Village</td>
<td>Star In Your Own Stories</td>
<td>125</td>
</tr>
<tr>
<td>Kitimaat Village</td>
<td>The Super Power Project</td>
<td>128</td>
</tr>
</tbody>
</table>

**ISLAND HEALTH REGION**

**South Vancouver Island**

<p>| Victoria                 | An exploration of the impact on psychosocial quality-of-life through active engagement in family reminiscence theatre with older adults in care with mild to moderate cognitive impairment. | 150    |
| Victoria                 | Arts &amp; Alzheimer’s                                                           | 46     |
| Victoria                 | BoosterBuddy mobile application                                              | 153    |
| Victoria                 | Embrace Aging Through The Arts and Community - Aberdeen Hospital’s Art Program (H-Arts) | 156    |
| Victoria                 | Eric Martin Theatre Group (The 6th Floor Players)                            | 65     |
| Victoria                 | Fairfield Stories Community Mural Project                                     | 67     |
| Victoria                 | Friends of Music Society                                                     | 71     |
| Victoria                 | Intimacy, Sexuality and Dying: Patient, Partner and Care Provider Perspectives on Intimacy at the End of Life (A PhD Dissertation) | 178    |
| Victoria                 | Lafayette Health Awareness Series                                            | 84     |
| Victoria                 | Mixed Messages: A Living Newspaper play about the connections between smoking and mental health | 163    |
| Victoria                 | Movie Monday                                                                  | 89     |
| Victoria                 | MS Art Group                                                                  | 90     |
| Victoria                 | Music Therapy for Chronic Pain Management (course)                            | 92     |
| Victoria                 | Music Therapy Program, Victoria Conservatory of Music                         | 166    |
| Victoria                 | Open Art Studio                                                              | 95     |</p>
<table>
<thead>
<tr>
<th>REGION</th>
<th>ORGANIZATION</th>
<th>PAGE #</th>
</tr>
</thead>
<tbody>
<tr>
<td>Victoria</td>
<td>Seniors' Handbell Choir</td>
<td>117</td>
</tr>
<tr>
<td>Victoria</td>
<td>Société Umbellus</td>
<td>120</td>
</tr>
<tr>
<td>Victoria</td>
<td>The Canadian International Institute of Art Therapy (CiiAT) Global Educational Connections</td>
<td>129</td>
</tr>
<tr>
<td>Victoria</td>
<td>Tea for Tutu</td>
<td>147</td>
</tr>
<tr>
<td>Victoria</td>
<td>This Is Not a Cocktail Party</td>
<td>132</td>
</tr>
<tr>
<td>Victoria</td>
<td>VocalEye Descriptive Arts</td>
<td>135</td>
</tr>
<tr>
<td><strong>Central Vancouver Island</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Duncan</td>
<td>Star In Your Own Stories</td>
<td>125</td>
</tr>
<tr>
<td>Duncan</td>
<td>U-Fix-It BikeWorks and ArtWorks</td>
<td>133</td>
</tr>
<tr>
<td>Gabriola Island</td>
<td>Gabriola Arts Council’s Healing Power of Art Program</td>
<td>72</td>
</tr>
<tr>
<td>Ladysmith</td>
<td>Ladysmith Parks, Recreation &amp; Culture - Partnership With Arts Council of Ladysmith &amp; District, Community Link, and Island Health</td>
<td>83</td>
</tr>
<tr>
<td>Nanaimo</td>
<td>Chronic Pain in Focus</td>
<td>58</td>
</tr>
<tr>
<td>Nanaimo</td>
<td>Music and Memory at Kiwanis Village Nanaimo</td>
<td>164</td>
</tr>
<tr>
<td>Nanaimo</td>
<td>Therapeutic, healing arts for pediatric patients at NRGH</td>
<td>171</td>
</tr>
<tr>
<td><strong>North Vancouver Island</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Campbell River</td>
<td>Campbell River “Art in the Hospital” Initiative</td>
<td>154</td>
</tr>
<tr>
<td>Campbell River</td>
<td>Campbell River Arts Council - Arts &amp; Health Program</td>
<td>56</td>
</tr>
<tr>
<td>Courtney</td>
<td>Health and Social Literacy Through Video and Graphic Novels</td>
<td>75</td>
</tr>
</tbody>
</table>

*Note: many initiatives are listed more than once as they take place in more than one region.*
APPENDIX 3

THE SURVEY
Welcome!
Thank you for your interest in this survey. We appreciate that you are taking the time to ensure that your initiative is “on the map”. On The Map: Arts & Health in BC is a project of Arts Health BC.

On The Map: Arts & Health in BC This project is led and funded by Arts Health BC, a not-for-profit organization championing participation in the arts for health, healing and wellbeing. You are being asked to participate in this survey because you lead an arts & health initiative in BC. You can learn more about the project and read through the background information and FAQs (privacy, eligibility, etc.) on the Arts Health BC website. Should you have any additional questions, please contact us.

Note: We have used the word “initiative” in an attempt to capture various arts & health activities including: programs, projects, events, research, group practices, etc.

Procedures This online survey includes questions about arts & health initiatives’ activities, aims, participants, funding sources, motivations and challenges. Most questions are optional. The survey takes on average 15-20 minutes to complete; however, you can save your responses and return to the survey at a later time before submitting it.

Results A final report of the On The Map project will include an inventory and description of all initiatives, which will be distributed widely. Additionally, selected initiatives will be featured on the Arts Health BC website, promoted via Arts Health Network Canada’s (AHNC) social media outlets and also posted on the AHNC website. In Spring 2015, Arts Health BC will approach and invite some initiatives to be featured in a short video about arts & health activity in BC. Findings from the project will be shared with a variety of audience groups, including the general public, community partners and agencies, responding organizations and individuals, health professionals, arts and cultural organizations, municipalities, government officials, as well as the academic community.

Risks and Benefits Participating in the survey may help to connect you with others in the province who are engaged in similar work, facilitate knowledge exchange and networking and further raise the profile of your initiative. As initiatives will be posted on the Arts Health Network Canada website, participation in the survey will also provide a free online presence for your initiative. We do not foresee any risks in participating in this survey.

Confidentiality Most of the information collected in the survey will be included in the On the Map final report which will be made available online and distributed widely. Select initiatives will also be posted on the Arts Health BC and Arts Health Network Canada websites. The top of each survey page indicates if responses will be reported in their entirety (verbatim) and associated with your initiative, or just in aggregate. Survey information will be collected and stored within Canada. IP addresses will not be collected. Contact information collected about the survey respondent will be kept by Arts Health BC and not shared with anyone else. It may only be used by Arts Health BC for follow up questions pertaining to this survey.
Contacts If you have any questions about this project, please contact the Project Manager.

Participant Consent Your participation in this project is entirely up to you. You are free to withdraw at any time. By clicking “Next” and continuing with the survey, you agree that consent has been given.

INITIATIVE DESCRIPTION PAGE

Please note: any information shared on this page may be included in the final report, or posted as an initiative on the Arts Health BC or Arts Health Network Canada websites.

Initiative Title:

Initiative Description
We invite you to share a short description of your initiative. Please take care in entering this information, as content from these fields may appear in our final report. Hint: You may wish to cut and paste text directly from an existing abstract, pamphlet, website (etc.) about this initiative.

Description:
Purpose:
Participants (age, health conditions, how many, etc.):
Outcomes:
Other:

Initiative Contact Information
If someone wanted to learn more about this initiative, where can they find additional information?

Name:
Email Address:
Organization:
Website:
Phone Number:
Facebook:
Twitter:

Partners
Is this initiative run in partnership with any other organizations or individuals?

Yes. The partners are:
No

CATEGORY PAGE

Initiative Category
Please let us know which one of these categories best fits your initiative (see category descriptions below if you’re stuck).

___ Arts in a Health Care Setting
___ Arts in a Research Setting
___ Arts in a Health Care Professional Education Setting
___ Arts (and health) in a Community Setting
Category Descriptions

**Arts in Health Care Settings:** This category intends to capture initiatives taking place within or in direct partnership with health care facilities/institutes: health authorities, hospitals, hospices, residential care homes, community clinics, doctor’s offices, etc. Initiatives may include creative arts therapy programs (music, art, drama, dance/movement, play, etc.) for patients/clients; participatory art-making opportunities or observational performances or art exhibits within health care settings for patients, families, staff to enjoy; the use of art and design principles in the construction of facilities or delivery or programs; therapeutic gardens, public art works, etc.

**Arts in Health Research Settings:** This category intends to capture health research endeavors where the arts are used as a methodology, a tool to collect and/or analyze data, an intervention with a patient or community health population, or as a way to share/communicate research findings.

**Arts in the Education of Health Professionals:** The category intends to capture training programs for health care professionals in post-secondary institutions or continuing education that include arts in their curricular or extra-curricular programs. Although such activities are most often seen in medical schools and referred to as “medical humanities”, when applied more broadly as “health humanities” the arts can be used to help learners develop observational, interpretive and empathetic skills in other disciplines as well.

**Arts (and health) in Community Settings:** This category intends to capture arts and health activities not captured by one of the three institutional settings noted above. These “community settings” might include professional arts organizations or galleries, not for profit organizations, community recreation centres, parks, prisons, libraries, homes, work places, municipal/provincial governments, etc.

**ARTS IN HEALTH CARE SETTINGS – UNIQUE QUESTIONS**

On this page we have a question(s) that are specific to arts & health activities within health care settings. *Please note: Information collected on this page may be included in the final report and appear on the Arts Health BC or Arts Health Network Canada website.*

**What is the name of the health care facility where this initiative takes place?**

**ARTS IN HEALTH RESEARCH SETTING – UNIQUE QUESTIONS**

On this page we have a few questions that are specific to arts & health research studies. *Please note: Information collected on this page may be included in the final report and appear on the Arts Health BC or Arts Health Network Canada website.*

**Research Team Information**

Research Institute:
Faculty/Department:
Name of PI:
**Arts & Health in your Research**

In what ways does this research involve art? Please select all that apply.

- Art as an intervention being studied for therapeutic benefits to a specific population
- Art as a knowledge translation tool to share research findings
- Art as a research method to generate, collect and/or analyze data
- Art as a social connecting activity as part of a health promotion study
- Art as education
- Other, please specify:

**Methods**

What methods/approaches are you employing in this research? Check all that apply.

- Arts-based methods
- Qualitative
- Quantitative
- Mixed Methods
- Community Based Participatory Research / Action Research
- Other, please specify...

**Publications**

Has any part of this research been published to date? If so, please note the citation(s). *Please Note: Arts Health BC may add any listed publications to its database of arts & health publications on Mendeley.*

**ARTS IN THE EDUCATION OF HEALTH PROFESSIONALS - UNIQUE QUESTIONS**

This page has questions specific to arts & humanities programs in health care professional education programs. *Please Note: Answers to these questions will be reported in aggregate only.*

**Extra Curricular or Curricular**

Is this initiative a mandatory part of the educational program?

- Yes
- No

**Next Steps**

If you could expand your arts & health initiative or create a new one for your learners, what might that be?

**ARTS & HEALTH IN COMMUNITY SETTINGS – UNIQUE QUESTIONS**

This page has a question(s) specific to arts & health initiatives operating in community settings. *Please note: Answers to the questions on this page will be reported in aggregate form only.*

**Facility**

In what kind of facility does this initiative take place? (art gallery, rec centre multi-purpose room, farm, etc.)
Please Note: any information shared on this page may be included in the final report, or posted as an initiative on the Arts Health BC or Arts Health Network Canada websites.

**Timeline**
Is this initiative ongoing or did/will it run for a fixed length of time?
- Ongoing
- Fixed Length

When did this initiative start? If applicable, when did/will it end?
Start Date (MM/YY):
End Date (MM/YY):

If this initiative has ended, what was the primary reason it ended?

**Location**
In what city/cities, does this initiative take place?

This initiative is located in which geographic region(s)?
- East Kootenay
- Kootenay/Boundary
- Okanagan
- Thompson/Cariboo
- Fraser East
- Fraser North
- Fraser South
- Richmond
- Vancouver
- North Shore/Coast Garibaldi
- South Vancouver Island
- Central Vancouver Island
- North Vancouver Island
- Northwest
- Northern Interior
- Northeast

**ART MODALITY & PARADIGM PAGE**

Please Note: any information shared on this page may be included in the final report, or posted as an initiative on the Arts Health BC or Arts Health Network Canada websites.

**Art Modalities**
What art modalities are included in this initiative?
- All
- Creative Art Therapies - Art Therapy
- Creative Art Therapies - Dance/Movement Therapy
- Creative Art Therapies - Drama Therapy
Philosophies and Frameworks (OPTIONAL)
Arts and health intersect and hold meaning in various ways across different worldviews. To help understand the orientation of this work, we encourage a statement about the philosophy, framework or paradigm behind this initiative.

OPERATION & ADMINISTRATION PAGE

Please note: Information collected on this page will be reported in aggregate form only, and not directly linked to your initiative.

Facilitators
We would like to get a better understanding of who is facilitating arts & health initiatives in the province.
Who facilitates your initiative? Check all that apply.
__ Artist (if so, what kind?):
__ Creative Arts Therapist (if so, what kind?):
__ Child Life Specialist
__ Designer
__ Educator
__ Expressive Arts Facilitator
__ Recreation Therapist
__ Volunteer
__ Health Professional (if so, what kind?)
__ Other, please specify:

Facilitator Name(s)
We are also interested in assembling a directory of arts and health practitioners in the province. If possible, please leave us the name(s) and email(s) of those who facilitate this initiative, so that we may connect with them about this directory.

Name(s) & Email(s):

Administration
We are also interested in who administers/manages the arts & health activity in the province. Who administers/manages this initiative?

__ In-house coordinator (as part of full or part-time employment)
__ External organization/partner (e.g.: gallery, theatre company, orchestra, etc).
__ Volunteer
__ Other, please specify...

Funding
To help inform the business case around the need for designated funding for arts & health initiatives, we invite you to share how this initiative is funded. Check all that apply.
__ A not-for-profit organization’s operating budget
__ A publicly funded organization’s operating budget
__ Discretionary Funds
__ Grants (if so, from where?)
__ Fee for service (participants pay)
__ Gift Shop Revenues
__ Hospital Foundation/Endowment
__ In-kind hours from volunteers
__ Private Donations/Fundraising
__ Other, please specify...

Evaluation
Has this initiative ever been evaluated?
__ Yes
__ No
__ I don’t know
__ N/A
__ It will be in the future
If yes, and if available, please provide a link or information on where information on this evaluation can be found.
MOTIVATIONS & CHALLENGES PAGE

Please note: Information collected on this page will be reported in aggregate form only, and not directly linked to your initiative.

Motivation
What do you believe are the primary reasons your initiative was implemented.
Reasons:

Challenges
What are some of the main challenges this initiative has encountered?
Challenges:

RESOURCE SHARING PAGE

Please note: Information shared on this page may be included in the final report or posted on the Arts Health BC or Arts Health Network Canada website.

Resource Sharing
Has this initiative developed any resources that could be shared with the larger arts & health community? (Books, reports, art works, guidelines, policies, activities, etc).
___ Yes
___ No
If yes, please briefly describe the resource and if possible, information on where the resource can be found.

Photos & Videos
Are there any photos, videos, narratives or other arts-based representations of this initiative that you would be willing to share to further describe this work? If so, please provide a link to where they can be found, or leave your email address and we will follow up with you about them at a later date.

Additional Information?
Is there any additional information or content about this initiative that you would like to share? (Awards, Sponsors, expanded partnership details, etc).

NETWORKING PAGE

Branching Out
Are there other initiatives you can think of that should be included in the On The Map: Arts & Health in BC project?

Survey Respondent Information
Last but not least, we would love to know who YOU are, just in case we have further questions about your awesome initiative. Fear not, answers to questions on this page will not appear in the final report or be posted online.
Name
Role/Title
Organization
Email Address
Phone Number
Staying in Touch
We would love to stay in touch to share information about arts & health activity in BC and abroad. Please indicate the mailing lists you would like to join by checking the box(es).
___ On The Map (for project updates including the final report)
___ Arts Health BC (general distribution list)

The End!
APPENDIX 4

ADDITIONAL INITIATIVES
The following initiatives did not participate in the OTM project, but were identified via web-search, or suggested by survey respondents. Based on available information, they appear to meet OTM eligibility criteria. This list has been included to provide a more complete picture of arts & health activity in BC.

<table>
<thead>
<tr>
<th>INITIATIVE</th>
<th>ORGANIZATION</th>
<th>WEBSITE</th>
<th>CITY</th>
<th>STREAM</th>
</tr>
</thead>
<tbody>
<tr>
<td>Access to Media Education Society</td>
<td></td>
<td><a href="http://accesstomedia.org">http://accesstomedia.org</a></td>
<td>Galiano Island</td>
<td>Community</td>
</tr>
<tr>
<td>Band Wagon Legacy Project</td>
<td>Music Therapy Ride</td>
<td><a href="http://musictherapyride.org/bandwagon">http://musictherapyride.org/bandwagon</a></td>
<td>Vancouver</td>
<td>Community</td>
</tr>
<tr>
<td>Britanniua Urban Aboriginal &amp; First Nations</td>
<td>Vancouver Arts &amp; Health Project</td>
<td><a href="http://www.artsandhealthproject.com/britannia---urban-aboriginal--first-nations.html">http://www.artsandhealthproject.com/britannia---urban-aboriginal--first-nations.html</a></td>
<td>Vancouver</td>
<td>Community</td>
</tr>
<tr>
<td>Caring Concerts</td>
<td>Music Heals</td>
<td><a href="http://www.musicheals.ca/caring-concerts">http://www.musicheals.ca/caring-concerts</a></td>
<td>Vancouver</td>
<td>Community</td>
</tr>
<tr>
<td>Carnegie Centre Seniors Dance Outreach in DTES</td>
<td>Vancouver Arts &amp; Health Project</td>
<td><a href="http://www.artsandhealthproject.com/carnegie.html">http://www.artsandhealthproject.com/carnegie.html</a></td>
<td>Vancouver</td>
<td>Community</td>
</tr>
<tr>
<td>Complaints Choir - Woodwards Singers</td>
<td></td>
<td><a href="https://www.facebook.com/events/772271522792680/">https://www.facebook.com/events/772271522792680/</a></td>
<td>Vancouver</td>
<td>Community</td>
</tr>
<tr>
<td>Cool Arts Society - Okanagan</td>
<td></td>
<td><a href="http://www.coolarts.ca">http://www.coolarts.ca</a></td>
<td>Kelowna</td>
<td>Community</td>
</tr>
<tr>
<td>Creative Arts Club</td>
<td>Richmond Centre for Disability</td>
<td><a href="http://www.rcdrichmond.org/ServicesActivitiesWorkshops/ServicesActivitiesWorkshops.php">http://www.rcdrichmond.org/ServicesActivitiesWorkshops/ServicesActivitiesWorkshops.php</a></td>
<td>Richmond</td>
<td>Community</td>
</tr>
<tr>
<td>Downtown Eastside Heart of the City Festival</td>
<td></td>
<td><a href="http://www.heartofthecityfestival.com">http://www.heartofthecityfestival.com</a></td>
<td>Vancouver</td>
<td>Community</td>
</tr>
<tr>
<td>HeART School</td>
<td></td>
<td><a href="http://www.heartschoolkelowna.com">www.heartschoolkelowna.com</a></td>
<td>Kelowna</td>
<td>Community</td>
</tr>
<tr>
<td>heARTful Expressions</td>
<td>Comox Valley Hospice Society</td>
<td><a href="http://advancecareplanningcv.ca">http://advancecareplanningcv.ca</a></td>
<td>Comox</td>
<td>Community</td>
</tr>
<tr>
<td>Hope in the Shadows</td>
<td>PIVOT Legal Society</td>
<td><a href="http://www.hopeinshadows.com">http://www.hopeinshadows.com</a></td>
<td>Vancouver</td>
<td>Community</td>
</tr>
<tr>
<td>I Boost Immunity</td>
<td>Public Health Association of BC &amp; Immunize BC</td>
<td><a href="http://www.iboostimmunity.ca">http://www.iboostimmunity.ca</a></td>
<td>BC-wide</td>
<td>Community</td>
</tr>
<tr>
<td>Intersections Media</td>
<td></td>
<td><a href="http://www.intersectionsmedia.com">http://www.intersectionsmedia.com</a></td>
<td>Vancouver</td>
<td>Community</td>
</tr>
<tr>
<td>iPod Pharmacy</td>
<td>Music Heals</td>
<td><a href="http://www.musicheals.ca/ipod-pharmacy">http://www.musicheals.ca/ipod-pharmacy</a></td>
<td>Vancouver</td>
<td>Community</td>
</tr>
<tr>
<td>INITIATIVE</td>
<td>ORGANIZATION</td>
<td>WEBSITE</td>
<td>CITY</td>
<td>STREAM</td>
</tr>
<tr>
<td>------------------------------------------------</td>
<td>---------------------------------------</td>
<td>----------------------------------------------------------------</td>
<td>--------------</td>
<td>----------------</td>
</tr>
<tr>
<td>Leave Out Violence (LOVE)</td>
<td></td>
<td><a href="http://www.bc.leaveoutviolence.org">http://www.bc.leaveoutviolence.org</a></td>
<td>Vancouver</td>
<td>Community</td>
</tr>
<tr>
<td>Let’s Bhangra!</td>
<td>South Asian Arts</td>
<td><a href="http://www.southasianarts.ca/about">http://www.southasianarts.ca/about</a></td>
<td>Surrey</td>
<td>Community</td>
</tr>
<tr>
<td>Living History Storytelling Group</td>
<td>Victoria Storytellers Guild</td>
<td><a href="http://www.victoriastorytellers.org">http://www.victoriastorytellers.org</a></td>
<td>Victoria</td>
<td>Community</td>
</tr>
<tr>
<td>Lost &amp; Found Puppet Co</td>
<td></td>
<td><a href="http://www.lostandfoundpuppets.com">http://www.lostandfoundpuppets.com</a></td>
<td>Vancouver</td>
<td>Community</td>
</tr>
<tr>
<td>Metaphor</td>
<td></td>
<td><a href="http://artstarts.com/aotd/metaphor">http://artstarts.com/aotd/metaphor</a></td>
<td>Vancouver</td>
<td>Community</td>
</tr>
<tr>
<td>Miscellaneous Productions</td>
<td></td>
<td><a href="http://www.miscellaneousproductions.ca">http://www.miscellaneousproductions.ca</a></td>
<td>Vancouver</td>
<td>Community</td>
</tr>
<tr>
<td>Moberly Arts &amp; Cultural Program</td>
<td>Vancouver Arts &amp; Health Project</td>
<td><a href="http://www.artsandhealthproject.com/moberly1.html">http://www.artsandhealthproject.com/moberly1.html</a></td>
<td>Vancouver</td>
<td>Community</td>
</tr>
<tr>
<td>Music Therapy Program</td>
<td>North Shore Stroke Recovery Centre</td>
<td><a href="http://www.nssrc.org/music_therapy.html">http://www.nssrc.org/music_therapy.html</a></td>
<td>North</td>
<td>Community</td>
</tr>
<tr>
<td>Peace It Together</td>
<td></td>
<td><a href="http://peaceittogether.com">http://peaceittogether.com</a></td>
<td>Vancouver</td>
<td>Community</td>
</tr>
<tr>
<td>Performing Arts Lodges</td>
<td></td>
<td><a href="http://palvancouver.org">http://palvancouver.org</a></td>
<td>Vancouver</td>
<td>Community</td>
</tr>
<tr>
<td>Project Everybody Film Festival</td>
<td></td>
<td><a href="http://projecteverybody.ca/tag/film-festival/">http://projecteverybody.ca/tag/film-festival/</a></td>
<td>Vancouver</td>
<td>Community</td>
</tr>
<tr>
<td>Puente Theatre Society</td>
<td></td>
<td><a href="http://www.puentetheatre.ca">http://www.puentetheatre.ca</a></td>
<td>Victoria</td>
<td>Community</td>
</tr>
<tr>
<td>Raincity Chronicles</td>
<td></td>
<td><a href="http://www.raincitychronicles.com">http://www.raincitychronicles.com</a></td>
<td>Vancouver</td>
<td>Community</td>
</tr>
<tr>
<td>Real Wheels</td>
<td></td>
<td><a href="http://realwheels.ca">http://realwheels.ca</a></td>
<td>Vancouver</td>
<td>Community</td>
</tr>
<tr>
<td>Renfrew Collingwood Drawing &amp; Fabric Arts Program</td>
<td>Vancouver Arts &amp; Health Project</td>
<td><a href="http://www.artsandhealthproject.com/renfrew-collingwood1.html">http://www.artsandhealthproject.com/renfrew-collingwood1.html</a></td>
<td>Vancouver</td>
<td>Community</td>
</tr>
<tr>
<td>Renfrew Park Visual Arts</td>
<td>Vancouver Arts &amp; Health Project</td>
<td><a href="http://www.artsandhealthproject.com/renfrew-park1.html">http://www.artsandhealthproject.com/renfrew-park1.html</a></td>
<td>Vancouver</td>
<td>Community</td>
</tr>
<tr>
<td>Roundhouse Express Your Voice Choir</td>
<td>Vancouver Arts &amp; Health Project</td>
<td><a href="http://www.artsandhealthproject.com/roundhouse1.html">http://www.artsandhealthproject.com/roundhouse1.html</a></td>
<td>Vancouver</td>
<td>Community</td>
</tr>
<tr>
<td>StoryTurns</td>
<td></td>
<td><a href="http://www.storyturns.org">http://www.storyturns.org</a></td>
<td>Vancouver</td>
<td>Community</td>
</tr>
<tr>
<td>Strathcona Puppetry Program</td>
<td>Vancouver Arts &amp; Health Project</td>
<td><a href="http://www.artsandhealthproject.com/strathcona1.html">http://www.artsandhealthproject.com/strathcona1.html</a></td>
<td>Vancouver</td>
<td>Community</td>
</tr>
<tr>
<td>INITIATIVE</td>
<td>ORGANIZATION</td>
<td>WEBSITE</td>
<td>CITY</td>
<td>STREAM</td>
</tr>
<tr>
<td>----------------------------------------</td>
<td>---------------------------------------</td>
<td>-------------------------------------------------------------------------</td>
<td>-----------------</td>
<td>---------</td>
</tr>
<tr>
<td>Student Health Photo Voice Project</td>
<td>Simon Fraser University</td>
<td><a href="http://www.sfu.ca/content/dam/sfu/healthycampuscommunity/SHAC.pdf">http://www.sfu.ca/content/dam/sfu/healthycampuscommunity/SHAC.pdf</a></td>
<td>Burnaby</td>
<td>Community</td>
</tr>
<tr>
<td>Teriffic Theatre</td>
<td></td>
<td><a href="http://www.theatreterrific.ca">http://www.theatreterrific.ca</a></td>
<td>Vancouver</td>
<td>Community</td>
</tr>
<tr>
<td>The Power of Hope</td>
<td></td>
<td><a href="http://powerofhope.ca/programs/">http://powerofhope.ca/programs/</a></td>
<td>Victoria</td>
<td>Community</td>
</tr>
<tr>
<td>The Stranger Project</td>
<td></td>
<td><a href="http://www.thestrangerproject.ca">http://www.thestrangerproject.ca</a></td>
<td>Vancouver</td>
<td>Community</td>
</tr>
<tr>
<td>The Writer’s Exchange</td>
<td></td>
<td><a href="http://www.vancouverwe.com">http://www.vancouverwe.com</a></td>
<td>Vancouver</td>
<td>Community</td>
</tr>
<tr>
<td>Vancouver Adapted Music Society</td>
<td></td>
<td><a href="http://www.vams.org">http://www.vams.org</a></td>
<td>Vancouver</td>
<td>Community</td>
</tr>
<tr>
<td>Vancouver Moving Theatre</td>
<td>Vancouver Moving Theatre</td>
<td><a href="http://vancouvermovingtheatre.com">http://vancouvermovingtheatre.com</a></td>
<td>Vancouver</td>
<td>Community</td>
</tr>
<tr>
<td>Vancouver Society of Storytelling</td>
<td></td>
<td><a href="https://www.facebook.com/vancouverstorytelling">https://www.facebook.com/vancouverstorytelling</a></td>
<td>Vancouver</td>
<td>Community</td>
</tr>
<tr>
<td>Western Gold Theatre</td>
<td></td>
<td><a href="http://www.westerngoldtheatre.org/welcome.html">http://www.westerngoldtheatre.org/welcome.html</a></td>
<td>Vancouver</td>
<td>Community</td>
</tr>
<tr>
<td>Victoria Target Theatre Society</td>
<td></td>
<td><a href="http://www.targettheatre.ca">http://www.targettheatre.ca</a></td>
<td>Victoria</td>
<td>Community</td>
</tr>
<tr>
<td>Art &amp; Creativity Workshops</td>
<td>Mood Disorders Association of BC</td>
<td><a href="http://www.mdabc.net/saturday-wellness-workshops">http://www.mdabc.net/saturday-wellness-workshops</a></td>
<td>Vancouver</td>
<td>Health Care</td>
</tr>
<tr>
<td>Art, Music &amp; Recreation Therapy at the Burnaby Centre for MH&amp;A</td>
<td>Vancouver Coastal Health</td>
<td><a href="http://www.vch.ca/media/burnaby-centre-brochure.pdf">http://www.vch.ca/media/burnaby-centre-brochure.pdf</a></td>
<td>Burnaby</td>
<td>Health Care</td>
</tr>
<tr>
<td>Eric Martin Pavilion - Drumming</td>
<td>Vancouver Island Health Authority</td>
<td><a href="http://www.timescolonist.com/life/eric-martin-pavilion-offers-a-variety-of-therapeutic-programs-1.8181">http://www.timescolonist.com/life/eric-martin-pavilion-offers-a-variety-of-therapeutic-programs-1.8181</a></td>
<td>Victoria</td>
<td>Health Care</td>
</tr>
<tr>
<td>Heritage Village “Safety Dance” &amp; “Hey Mickey-Go Wash Your Hands” videos</td>
<td>Fraser Health Authority</td>
<td><a href="https://www.youtube.com/watch?v=klHKxTLBM">https://www.youtube.com/watch?v=klHKxTLBM</a> <a href="https://www.youtube.com/watch?v=mzikZnF-mWU">https://www.youtube.com/watch?v=mzikZnF-mWU</a></td>
<td>Chilliwack</td>
<td>Health Care</td>
</tr>
<tr>
<td>Music Therapy @ Lions Gate Hospital</td>
<td>Vancouver Coastal Health</td>
<td><a href="http://alliedhealth.vch.ca/music.htm">http://alliedhealth.vch.ca/music.htm</a></td>
<td>North</td>
<td>Health Care</td>
</tr>
<tr>
<td>Music Therapy @ Minoru Residence</td>
<td>Vancouver Coastal Health</td>
<td><a href="http://alliedhealth.vch.ca/music.htm">http://alliedhealth.vch.ca/music.htm</a></td>
<td>Richmond</td>
<td>Health Care</td>
</tr>
<tr>
<td>INITIATIVE</td>
<td>ORGANIZATION</td>
<td>WEBSITE</td>
<td>CITY</td>
<td>STREAM</td>
</tr>
<tr>
<td>---------------------------------------------------------------------------</td>
<td>---------------------------------------</td>
<td>-------------------------------------------------------------------------</td>
<td>-----------------</td>
<td>-----------------</td>
</tr>
<tr>
<td>Music Therapy @ UBC Purdy Pavilion</td>
<td>Vancouver Coastal Health</td>
<td><a href="http://alliedhealth.vch.ca/music.htm">http://alliedhealth.vch.ca/music.htm</a></td>
<td>Vancouver</td>
<td>Health Care</td>
</tr>
<tr>
<td>Music Therapy at BC Children's Hospital</td>
<td>Provincial Health Services Authority</td>
<td><a href="http://www.bcchildrens.ca/Services/ClinicalDiagnosticFamilyServices/ChildLife/Healthcareteam.htm">http://www.bcchildrens.ca/Services/ClinicalDiagnosticFamilyServices/ChildLife/Healthcareteam.htm</a></td>
<td>Vancouver</td>
<td>Health Care</td>
</tr>
<tr>
<td>Recreation Therapy @ George Pearson</td>
<td>Vancouver Coastal Health</td>
<td><a href="http://alliedhealth.vch.ca/recreation.htm">http://alliedhealth.vch.ca/recreation.htm</a></td>
<td>Vancouver</td>
<td>Health Care</td>
</tr>
<tr>
<td>Recreation Therapy @ Richmond - Minoru</td>
<td>Vancouver Coastal Health</td>
<td><a href="http://alliedhealth.vch.ca/recreation.htm">http://alliedhealth.vch.ca/recreation.htm</a></td>
<td>Richmond</td>
<td>Health Care</td>
</tr>
<tr>
<td>Recreation Therapy @ VCH Older Adult</td>
<td>Vancouver Coastal Health</td>
<td><a href="http://alliedhealth.vch.ca/recreation.htm">http://alliedhealth.vch.ca/recreation.htm</a></td>
<td>Vancouver</td>
<td>Health Care</td>
</tr>
<tr>
<td>Recreation Therapy @ VCH Rehab Team</td>
<td>Vancouver Coastal Health</td>
<td><a href="http://alliedhealth.vch.ca/recreation.htm">http://alliedhealth.vch.ca/recreation.htm</a></td>
<td>Vancouver</td>
<td>Health Care</td>
</tr>
<tr>
<td>Recreation Therapy at Sunny Hill Centre for Children</td>
<td>Provincial Health Services Authority</td>
<td><a href="http://www.bcchildrens.ca/Services/SunnyHillHealthCtr/TeamsServices/TherapeuticRecreation/default.htm">http://www.bcchildrens.ca/Services/SunnyHillHealthCtr/TeamsServices/TherapeuticRecreation/default.htm</a></td>
<td>Vancouver</td>
<td>Health Care</td>
</tr>
<tr>
<td>Therapeutic Clowning Program at BC Children's Hospital</td>
<td>Provincial Health Services Authority</td>
<td><a href="http://www.bcchildrens.ca/Services/ClinicalDiagnosticFamilyServices/ChildLife/Healthcareteam.htm">http://www.bcchildrens.ca/Services/ClinicalDiagnosticFamilyServices/ChildLife/Healthcareteam.htm</a></td>
<td>Vancouver</td>
<td>Health Care</td>
</tr>
<tr>
<td>ArtWorks Studio @ George Derby</td>
<td>Fraser Health Authority</td>
<td><a href="http://georgederby.ca/wp-content/uploads/Annual-Report-2013.pdf">http://georgederby.ca/wp-content/uploads/Annual-Report-2013.pdf</a></td>
<td>Burnaby</td>
<td>Health Care</td>
</tr>
<tr>
<td>Downtown Intercultural Gardeners Society (DIGS)</td>
<td></td>
<td><a href="http://www.digsvancouver.ca">http://www.digsvancouver.ca</a></td>
<td>Vancouver</td>
<td>Health Care</td>
</tr>
<tr>
<td>Jest for Joy - Clown Doctoring</td>
<td></td>
<td><a href="https://www.youtube.com/watch?v=CmU8AHa149w">https://www.youtube.com/watch?v=CmU8AHa149w</a></td>
<td>Vancouver</td>
<td>Health Care</td>
</tr>
<tr>
<td>Music Therapy @ Richmond Hospital</td>
<td>Vancouver Coastal Health</td>
<td><a href="http://alliedhealth.vch.ca/music.htm">http://alliedhealth.vch.ca/music.htm</a></td>
<td>Richmond</td>
<td>Health Care</td>
</tr>
<tr>
<td>Music, Art &amp; Recreation Programs</td>
<td>Dr. Peter's Centre</td>
<td><a href="http://www.drpeter.org/dr-peter-centre/programs-and-services/">http://www.drpeter.org/dr-peter-centre/programs-and-services/</a></td>
<td>Vancouver</td>
<td>Health Care</td>
</tr>
<tr>
<td>Applied Theatre Program</td>
<td>University of Victoria</td>
<td><a href="http://finearts.uvic.ca/theatre/future-students/specialties/applied_theatre/">http://finearts.uvic.ca/theatre/future-students/specialties/applied_theatre/</a></td>
<td>Victoria</td>
<td>Health Humanities</td>
</tr>
<tr>
<td>Acting Together</td>
<td></td>
<td><a href="http://www.actingtogether.ca">http://www.actingtogether.ca</a></td>
<td>Surrey</td>
<td>Research</td>
</tr>
<tr>
<td>International Centre of Art for Social Change</td>
<td>Simon Fraser University</td>
<td><a href="http://www.icasc.ca">http://www.icasc.ca</a></td>
<td>Burnaby</td>
<td>Research</td>
</tr>
<tr>
<td>INITIATIVE</td>
<td>ORGANIZATION</td>
<td>WEBSITE</td>
<td>CITY</td>
<td>STREAM</td>
</tr>
<tr>
<td>----------------------------</td>
<td>-------------------------------------------</td>
<td>-----------------------------------------------------------</td>
<td>------------</td>
<td>--------</td>
</tr>
<tr>
<td>Photographic Research in</td>
<td>University of British Columbia-Okanagan</td>
<td><a href="http://www.ubc.ca/okanagan/nursing/faculty/pmarck.html">http://www.ubc.ca/okanagan/nursing/faculty/pmarck.html</a></td>
<td>Kelowna</td>
<td>Research</td>
</tr>
<tr>
<td>Health Care. PI: Patricia</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Marck</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Taking Action 4 Youth</td>
<td></td>
<td><a href="http://www.takingaction4youth.org">http://www.takingaction4youth.org</a></td>
<td>Fort St. James</td>
<td>Research</td>
</tr>
<tr>
<td>(Nak’azdili)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
APPENDIX 5

ADDITIONAL DIRECTORIES
As the OTM project focused on initiatives (projects, programs, events, research) it was beyond the scope of OTM to survey and create a directory of all arts & health practitioners in the province. Fortunately, many professional associations and arts councils maintain directories of their members that may be useful when searching for an artist, creative arts therapist or arts & health practitioner to hire or collaborate with for an arts & health endeavor. For reference, a few of such directories are noted below:

### Creative Arts Therapies and Arts Organization Directories

<table>
<thead>
<tr>
<th>ORGANIZATION</th>
<th>WEBSITE</th>
<th>DIRECTORY</th>
</tr>
</thead>
<tbody>
<tr>
<td>BC Art Therapy Association</td>
<td><a href="http://bcarttherapy.com/bcata/bc-art-therapists-directory/">http://bcarttherapy.com/bcata/bc-art-therapists-directory/</a></td>
<td>Find an Art Therapist</td>
</tr>
<tr>
<td>Music Therapy Association of BC</td>
<td><a href="http://www.mtabc.com/find-therapist.php">http://www.mtabc.com/find-therapist.php</a></td>
<td>Find a Music Therapist</td>
</tr>
<tr>
<td>ArtsBC</td>
<td><a href="http://www.artsbc.org/resources/links">http://www.artsbc.org/resources/links</a></td>
<td>Resources &amp; Links</td>
</tr>
<tr>
<td>Alliance for Arts and Culture</td>
<td><a href="http://www.allianceforarts.com">http://www.allianceforarts.com</a></td>
<td>About - Member Directory</td>
</tr>
<tr>
<td>ArtStarts in Schools</td>
<td><a href="http://artstarts.com">http://artstarts.com</a></td>
<td>Resources - Artist Directories</td>
</tr>
<tr>
<td>BC Touring Council</td>
<td><a href="http://bctouring.org">http://bctouring.org</a></td>
<td>Directories</td>
</tr>
</tbody>
</table>

Hospital Foundations may be good first points of contact with health care facilities regarding potential arts & health initiatives.

### Hospital Foundation Directories

<table>
<thead>
<tr>
<th>ORGANIZATION</th>
<th>WEBSITE</th>
<th>LOCATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provincial Health Services Authority Foundations</td>
<td><a href="http://www.bccancerfoundation.com">www.bccancerfoundation.com</a></td>
<td>BC-wide</td>
</tr>
<tr>
<td>BC Cancer Foundation</td>
<td><a href="http://www.bcchf.ca">www.bcchf.ca</a></td>
<td>Vancouver</td>
</tr>
<tr>
<td>BC Children’s Hospital Foundation</td>
<td><a href="http://www.bcmhf.ca">www.bcmhf.ca</a></td>
<td>Vancouver</td>
</tr>
<tr>
<td>BC Mental Health Foundation</td>
<td><a href="http://www.trfbc.org">www.trfbc.org</a></td>
<td>Vancouver</td>
</tr>
<tr>
<td>BC Transplant Research Foundation</td>
<td><a href="http://www.bcwomenstaking.org">www.bcwomenstaking.org</a></td>
<td>Vancouver</td>
</tr>
<tr>
<td>BC Women's Hospital &amp; Health Centre Foundation</td>
<td></td>
<td></td>
</tr>
<tr>
<td>ORGANIZATION</td>
<td>WEBSITE</td>
<td>DIRECTORY</td>
</tr>
<tr>
<td>--------------------------------------------------</td>
<td>----------------------------------------------</td>
<td>-------------------</td>
</tr>
<tr>
<td><strong>Northern Health Foundations</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Spirit of the North Healthcare Foundation</td>
<td><a href="http://www.spiritofthenorth.ca">www.spiritofthenorth.ca</a></td>
<td>Prince George</td>
</tr>
<tr>
<td>Northern BC - BC Cancer Foundation</td>
<td><a href="http://www.bccancerfoundation.com">www.bccancerfoundation.com</a></td>
<td>Prince George</td>
</tr>
<tr>
<td>North Coast Health Improvement Society</td>
<td></td>
<td>Prince Rupert</td>
</tr>
<tr>
<td>Bulkley Valley Health Care &amp; Hospital Foundation</td>
<td><a href="http://www.bvhealthfoundation.ca">www.bvhealthfoundation.ca</a></td>
<td>Smithers</td>
</tr>
<tr>
<td>Dawson Creek &amp; District Hospital Foundation</td>
<td><a href="http://www.dawsoncreekfoundation.ca">www.dawsoncreekfoundation.ca</a></td>
<td>Dawson Creek</td>
</tr>
<tr>
<td>The Dr. R.E.M. Lee Hospital Foundation</td>
<td><a href="http://www.remlieehospitalfoundation.org">www.remlieehospitalfoundation.org</a></td>
<td>Terrace</td>
</tr>
<tr>
<td>Kitimat General Hospital Foundation</td>
<td><a href="http://www.kghf.ca">www.kghf.ca</a></td>
<td>Kitimat</td>
</tr>
<tr>
<td>Fort Nelson Hospital &amp; Healthcare Foundation</td>
<td><a href="http://www.fnhhf.com">www.fnhhf.com</a></td>
<td>Fort Nelson</td>
</tr>
<tr>
<td><strong>Vancouver Coastal Health Hospital Foundations</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Powell River Hospital Foundation</td>
<td><a href="http://www.prhospitalfoundation.com">www.prhospitalfoundation.com</a></td>
<td>Powell River</td>
</tr>
<tr>
<td>Pemberton &amp; District Health Care Foundation</td>
<td><a href="http://www.pembertonhealthcarefoundation.org">www.pembertonhealthcarefoundation.org</a></td>
<td>Pemberton</td>
</tr>
<tr>
<td>Richmond Hospital Foundation</td>
<td><a href="http://www.richmondhospitalfoundation.com">www.richmondhospitalfoundation.com</a></td>
<td>Richmond</td>
</tr>
<tr>
<td>Squamish Health Care Foundation Society</td>
<td><a href="http://www.squamishhospital.com">www.squamishhospital.com</a></td>
<td>Squamish</td>
</tr>
<tr>
<td>St. Mary's Hospital Foundation</td>
<td><a href="http://www.stmaryshospitalfoundation.ca">www.stmaryshospitalfoundation.ca</a></td>
<td>Sechelt</td>
</tr>
<tr>
<td>St. Paul's Hospital Foundation</td>
<td><a href="http://www.helpstpauls.com">www.helpstpauls.com</a></td>
<td>Vancouver</td>
</tr>
<tr>
<td>VGH &amp; UBC Hospital Foundation</td>
<td><a href="http://www.vghfoundation.ca">www.vghfoundation.ca</a></td>
<td>Vancouver</td>
</tr>
<tr>
<td>Whistler Health Care Foundation</td>
<td><a href="http://www.whistlerhealthcarefoundation.org">www.whistlerhealthcarefoundation.org</a></td>
<td>Whistler</td>
</tr>
<tr>
<td>Tapestry Foundation for Health Care</td>
<td><a href="http://www.tapestryfoundation.ca">www.tapestryfoundation.ca</a></td>
<td>Vancouver</td>
</tr>
<tr>
<td>Lions Gate Hospital Foundation</td>
<td><a href="http://www.lghfoundation.com">www.lghfoundation.com</a></td>
<td>North Vancouver</td>
</tr>
<tr>
<td>ORGANIZATION</td>
<td>WEBSITE</td>
<td>DIRECTORY</td>
</tr>
<tr>
<td>--------------------------------------------------</td>
<td>---------------------------------------------</td>
<td>----------------------------------------</td>
</tr>
<tr>
<td>Fraser Health Hospital Foundations</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Burnaby Hospital Foundation</td>
<td><a href="http://www.bhfoundation.ca">www.bhfoundation.ca</a></td>
<td>Burnaby</td>
</tr>
<tr>
<td>Delta Hospital Foundation</td>
<td><a href="http://www.dhfoundation.ca">www.dhfoundation.ca</a></td>
<td>Delta</td>
</tr>
<tr>
<td>Eagle Ridge Hospital Foundation</td>
<td><a href="http://www.erhf.ca">www.erhf.ca</a></td>
<td>Port Moody</td>
</tr>
<tr>
<td>Fraser Valley Health Care Foundation</td>
<td><a href="http://www.fvhcf.org">www.fvhcf.org</a></td>
<td>Abbotsford, Chilliwack, Mission</td>
</tr>
<tr>
<td>Langley Memorial Hospital Foundation</td>
<td><a href="http://www.lmhfoundation.com">www.lmhfoundation.com</a></td>
<td>Langley</td>
</tr>
<tr>
<td>Queen's Park Healthcare Foundation</td>
<td><a href="http://www.qphf.org">www.qphf.org</a></td>
<td>New Westminster</td>
</tr>
<tr>
<td>Ridge Meadows Hospital Foundation</td>
<td><a href="http://www.rmhfoundation.com">www.rmhfoundation.com</a></td>
<td>Maple Ridge, Pitt Meadows</td>
</tr>
<tr>
<td>Peace Arch Hospital &amp; Community Health Foundation</td>
<td><a href="http://www.pahfoundation.ca">www.pahfoundation.ca</a></td>
<td>White Rock</td>
</tr>
<tr>
<td>Royal Columbian Hospital Foundation</td>
<td><a href="http://www.rchfoundation.com">www.rchfoundation.com</a></td>
<td>New Westminster</td>
</tr>
<tr>
<td>Surrey Memorial Hospital Foundation</td>
<td><a href="http://www.championsforcare.com">www.championsforcare.com</a></td>
<td>Surrey</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Island Health Hospital Foundations</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Campbell River Hospital Foundation</td>
<td><a href="http://www.crhospitalfoundation.ca">www.crhospitalfoundation.ca</a></td>
<td>Campbell River</td>
</tr>
<tr>
<td>Chemainus Health Care Foundation</td>
<td><a href="http://www.chcfoundation.ca">www.chcfoundation.ca</a></td>
<td>Chemainus</td>
</tr>
<tr>
<td>Children's Health Foundation of Vancouver Island</td>
<td><a href="http://www.childrenshealthvi.org">www.childrenshealthvi.org</a></td>
<td>Victoria</td>
</tr>
<tr>
<td>Cowichan District Hospital Foundation</td>
<td><a href="http://www.cdhfoundation.org">www.cdhfoundation.org</a></td>
<td>Duncan</td>
</tr>
<tr>
<td>Greater Victoria Eldercare Foundation</td>
<td><a href="http://www.gvef.org">www.gvef.org</a></td>
<td>Victoria</td>
</tr>
<tr>
<td>Lady Minto Hospital Foundation</td>
<td><a href="http://www.ladymintofoundation.com">www.ladymintofoundation.com</a></td>
<td>Salt Spring Island</td>
</tr>
<tr>
<td>Nanaimo &amp; District Hospital Foundation</td>
<td><a href="http://www.nanaimohospitalfoundation.com">www.nanaimohospitalfoundation.com</a></td>
<td>Nanaimo</td>
</tr>
<tr>
<td>Saanich Peninsula Hospital Foundation</td>
<td><a href="http://www.sphf.ca">www.sphf.ca</a></td>
<td>Saanichton</td>
</tr>
<tr>
<td>St. Joseph's General Hospital Foundation</td>
<td><a href="http://www.cvhospitalfoundation.com">www.cvhospitalfoundation.com</a></td>
<td>Comox</td>
</tr>
</tbody>
</table>
**ORGANIZATION** | **WEBSITE** | **DIRECTORY**
---|---|---
Tofino General Hospital Foundation | www.victoriahf.ca | Tofino
Victoria Hospitals Foundation | | Victoria
West Coast General Hospital Foundation | www.wcghfoundation.com | Port Alberni

**Interior Health Hospital Foundations**

<table>
<thead>
<tr>
<th>ORGANIZATION</th>
<th>WEBSITE</th>
<th>DIRECTORY</th>
</tr>
</thead>
</table>
East Kootenay Foundation for Health | www.ekfh.ca | Cranbrook |
Kootenay Boundary Regional Hospital Foundation | www.kbrhhealthfoundation.ca | Trail |
Kootenay Lake Hospital Foundation | www.klhf.org | Nelson |
Castlegar & District Hospital Foundation | www.castlegarhospitalfoundation.org | Castlegar |
Kelowna General Hospital Foundation | www.kghfoundation.com | Kelowna |
South Okanagan Similkameen Medical Foundation | www.sosmedicalfoundation.com | Penticton |
Vernon Jubilee Hospital Foundation | www.vjhfoundation.org | Vernon |
Royal Inland Hospital Foundation | www.rihfoundation.ca | Kamloops |
Shuswap Hospital Foundation | www.shuswaphospitalfoundation.org | Salmon Arm |
South Cariboo Health Foundation | www.southcariboohealthfoundation.com | 100 Mile House |
Nicola Valley Health Care Endowment Foundation | www.nvhcef.com | Nicola Valley |