

# ARTS (Artists and Residents Together)

A guide for those who bring professional arts programs to long term care facilities



Renaissance Enterprises  
<http://www.visioncouncil.org/bobrowe/>

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*Thank you!*

This guide was written with the help of a grant from the Arts & Industry Council, serving the Greater Calhoun County, Michigan.

We are proud to be a member of this progressive “arts council” organization, one that truly works for the benefit of artists and our community.

Thank you also to the many artists and facility staff members that shared their experiences and advice for this publication.

And a special thanks to the staffs that provide loving care for these wonderful residents.

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## Toward a Renaissance of Love

Residents of nursing homes, other long term care facilities, and even senior housing are too often bypassed by our society. Typically, they cannot enjoy the benefits that the live arts bring.

That is, unless we bring the performing arts to them.

These individuals are often our elders who helped build our country and our veterans who sacrificed for it. Also, in such living arrangements are the mentally and physically impaired who are dependent on our society to care for them.

As Mother Teresa said, they are Jesus in disguise.

The therapeutic benefit of live arts is well-known. Not as well-known is the benefit of this work for artists. I routinely hear from artists that this work helped them too. They see themselves and their art differently; they see the power of their work and how to continue to grow as an artist.

Our purpose in this guide is to encourage more artists and facility managers to reach out to each other.....for the benefit of these wonderful residents.

*Bob Rowe*

Founder and Executive Director  
Renaissance Enterprises



**Bob Rowe at Mercy Pavilion**

## Why Live Arts?

Loneliness and the feeling of being unwanted is the most terrible poverty. - **Mother Teresa**

Abundant medical literature exists supporting the benefits of the arts to elderly and people with other significant impairments (e.g., physical pain, mental illness, etc.). In fact, art therapy and music therapy are accepted practices. The American Art Therapy Association believes that the creative process involved in the making of art is healing and life-enhancing. To work as a therapist, of course, requires extensive training and certification.

According to the American Music Therapy Association, music therapy can:

- ✓ Promote wellness
- ✓ Manage stress
- ✓ Alleviate pain
- ✓ Express feelings
- ✓ Enhance memory
- ✓ Improve communication
- ✓ Promote physical rehabilitation

The Journal of Clinical Nursing (1997; 6: 341—346) includes an article “The Therapeutic Use of Music in a Care of the Elderly Setting: a Literature Review.” The author notes other literature that shows music can provide a soothing effect on agitated patients, serve as diversion from sadness or anger, can positively effect moods, and touch multiple levels of consciousness.

While no one without certification should ever purport to provide such therapy (an individualized therapy technique requiring a trained therapist), the above authenticates the power of art to improve the lives of the people we serve. We have seen this power of live arts and it is why we do this work.

“In Plainwell I had just finished a performance at a nursing home. I had packed up my equipment and was pushing it down the hall when the activity director got my attention. She asked me to please come back down the hall and speak to an elderly woman in a reclining wheeled chair. I leaned over to hear, as her voice was very quiet. She whispered to me that she wanted ‘just one more.’ I asked, ‘one more what?’ She repeated herself and I looked up to the activity director who explained that she wanted just one more song. She said the woman hadn’t spoken one single word in over two months; not to staff, not to family not to anyone until just this moment.” – **Jerry Ball, Artist**

“They brought the residents in and placed their chairs in a semi-circle. One lady was totally withdrawn and slumped down in her wheelchair and I was determined to reach her and draw her out to participate in the music. Well, after about three trips over to her side of the circle she raised her head up, ever so slowly, and gave me the biggest, cutest wink I had ever seen; plus she began singing 'This Little Light of Mine, I'm Gonna Let It Shine.' I knew then, in that moment, I had seen the true face of God.

A member of the nursing home staff phoned me a few weeks later and said, 'you have to come back, she hasn't stopped singing, 'This Little Light,' and it is driving us crazy!' We laughed together.” - **Bob Rowe, Artist**

## Walk in their shoes...

What is it like to live in senior apartments and long-term care homes?

It is probably different from your routine. Here is a brief summary, starting with the most independent organized arrangements to the least.

**Senior Apartments:** They are a bit more than just an apartment complex. True, there is typically no central kitchen and individuals live in their own apartments without any monitoring. But the culture is a bit more defined and residents are more isolated from society than ordinary apartment complexes. Costs for residents vary widely, depending on the facility and if government support is available. Some charge simply a percentage of the resident's income.

- ✓ Typical residences have a central activity room where there are organized events and classes. A small budget may be available for such events.
- ✓ Many residents do not have cars and rely on family, friends and public transportation to shop and otherwise get around town. One manager said that about one third of her residents have cars. Some may organize shopping trips via bus to local grocery stores or shopping centers.
- ✓ The residents tend to look out for each other, rather like a family. For example, if friends and neighbors haven't seen "Walt" all day, someone may knock on his door to see if he is OK.
- ✓ Such apartments range from especially well appointed self-pay facilities to low income subsidized housing (also typically quite pleasant.)

**Assisted Living:** This is a growing category of intermediate living arrangements. Because there are no direct subsidies, residents tend to be somewhat financially better off. The cost to residents and families is in the range of \$2,700 per month. Typically:

- ✓ Staff is present 24 hours, available to residents for their needs.

- ✓ There is a central kitchen and dining area. Normally residents do not cook in their apartments, although some include kitchenettes.
- ✓ Nearly everyone has their medicine managed by the staff. That is one of the main reasons people undertake this type of living arrangement.
- ✓ Services are provided on a “level of care” basis, e.g. help with personal hygiene, monitoring of the resident, etc.
- ✓ Normally, access is easy with sign in and out sheets. However, some facilities include an Alzheimer’s section, where access is tightly controlled (to prevent residents from wandering away.)
- ✓ A few residents may have cars; some couples live together in a larger apartment.
- ✓ Residents are generally isolated from mainstream culture due to their impairments and/or lack of transportation.
- ✓ Personal privacy is compromised somewhat in this environment, out of necessity, in order to provide needed care.

**Adult Foster Care (AFC):** These are residential settings that provide 24-hour personal care, protection, and supervision. They are intended for individuals who are developmentally disabled, mentally ill, physically handicapped or aged who cannot live alone, but who do not need continuous nursing care. Resident costs range widely, but about \$1400 per month is not uncommon. Costs are born by the individual and/or family and/or state government.

- ✓ In Michigan, AFC homes are restricted to providing care to no more than 20 adults.
- ✓ Residents are usually monitored closely. Normally medicine is managed by the staff. However, there is a wide range of situations, and sometimes residents are able to hold a job outside of the home. Some residents just need the temporary help and eventually move out to live independently.
- ✓ A family-like atmosphere is normal; some homes are family residences that also double as AFCs.
- ✓ Residents often share bedrooms.
- ✓ AFCs also include activities as part of their routine, e.g. trips to the movies.

"Before I started doing this work I asked my grandmother, a retired Sunday school teacher, what to sing to these people. She said 'Oh, just sing the old hymns and church songs and they will love you.' It was true! Songs from their era, from the heart reached everyone in the room and they all began to sing and smile, even those who hadn't come out of their rooms for any other type of programs. It was a beautiful thing to see!" – **Bob Rowe, Artist**

**Nursing Homes and Homes for the Aged** provide 24 hour room, board, and supervised personal care. In nursing homes you will also find individuals who are not aged, but require intensive care. Expenses are high and the cost per resident is in the range of \$5,500 per month. Costs are born by the individual and/or family and/or state government.

Typically,

- ✓ Staff is present 24 hours, available to residents for their needs.
- ✓ There is a central kitchen and dining area.
- ✓ Residents live in one or two person rooms.
- ✓ Everyone has their medicine managed by the staff.
- ✓ Residents range from severely impaired to people who are cognitively high functioning. Some residents live there only for a few months for recuperation.
- ✓ Residents are typically more isolated from mainstream culture due to the nature of their condition. The staffs work very hard to offset this circumstance and provide a reasonable quality of life. For example, this includes special outings. Of course entertainment is a key component of the resident's contact with mainstream culture and their quality of life.
- ✓ Personal privacy is significantly reduced, out of necessity, in order to provide needed care.

**In all cases,** managers must work with slim activity budgets. One facility with over 100 residents reports an activity budget about \$200/month. This includes the cost of parties for residents, extra expenses for outings, various supplies for events (e.g., Mother's Day, Father's Day, and Halloween), get well cards, etc. Out of necessity they must be frugal with regards to paying artists for performances.

Different guidelines apply to different types of facilities, but generally activity directors seek entertainment and activities that meet the following criteria:

- ✓ Based specifically on the wants and needs of the residents.
- ✓ Age appropriate.

"If the television is on and a visitor leaves it on MTV, this is a problem for us because we need to provide age appropriate entertainment." – **Lynda Sherrell, Activity Director**

- ✓ Un-offensive.
- ✓ Evokes participation.
- ✓ Encourages a positive outlook.

“We want to give our residents something to look forward to on Monday, even if the event is on Thursday. We particularly appreciate all that Bob Rowe does; he brings a zest for life to our residents.” – **Kristin Boyd, Manager**



**Brenda Mathews at Heritage Assisted Living in Battle Creek, Michigan**

## How to Reach Your Audience

### First, understand them....

“Sometimes I don’t seem get much reaction from the audience and then, afterwards, they will come forward and want to talk about the show!” – **Tammy Ford, Artist**

First of all, adjust your expectations in terms of audience reaction. Their response will probably not be as animated as you normally experience. Their reaction is influenced by:

- ✓ Their health, to include mental acuity, hearing and eyesight.
- ✓ Their emotional state.
- ✓ The leadership from the staff.

“Our residents often look at the staff as part of their family. Sometimes they think we even live there like a family member.” – **Lynda Sherrell, Activity Director**

- ✓ Peer expectations of behavior, for example sometimes the prevailing culture discourages loud or animated behavior.

Such audiences are usually very appreciative, but they don't show it in the ways that you expect. You never know what is going on inside their mind and heart.

Look for small reactions, a tapping foot that stops with the music, a brief smile, a turn of the head. If you can get some overt reaction from eighty percent of an impaired audience, you may have done very well indeed.

The arts can touch the mind and heart in mysterious ways. A resident in an Alzheimer's section may not be able to remember her daughter's name, but she may remember the words to an old song!

“Seniors are all different. Some respond like a young audience, others may not respond at all. You never know until you get into your show. One resident was unresponsive; rocking back and forth...then looked up, smiled and said “Kukla, Fran and Ollie!” We laughed. He was obviously enjoying the show.” – **Clem Camp, Artist (Puppeteer)**

## Then, adjust to them....

### What to do:

- ✓ Good memories. Choose music and arts that they relate to. Typical choices are intended to bring back memories of their youth. Every generation has its own music and art forms. Seniors, particularly, are not attracted to modern forms of music and art. In fact they may resent it.

For example, references to old television shows, gospel music, old celebrities (e.g. Bob Hope, George Burns), and music from the thirties through the sixties are usually successful. Gauge the material to the audience. On the other hand, a performance at a Veteran's hospital could include more contemporary material.

“Sometimes I include the classic song ‘Sentimental Journey’ in my routine. Once I noticed a resident particularly moved by this song, she had a big smile on her face. Afterwards she approached me and explained that her husband was a soldier in World War II. Once she took a train trip to visit him before he went overseas and this song was played on the train. She thanked me for helping her bring back that good memory.” - **Tammy Ford, Artist**

- ✓ Closeness. Get physically close to your audience....physical distance means emotional distance. Insist on a setup that brings you close, even sitting at a table with everyone.

- ✓ Mingle before and after. Visit residents confined to their rooms (with staff permission) and perform a bit just for them.

“A violinist visits our nursing home and walks down the halls while playing. It is beautiful to see the reactions, especially in people who are room-bound and unable to attend group programs”.  
– **Lynda Sherrell, Manager**

- ✓ Visit shut-ins. Take some time to visit people who are confined to their beds.
- ✓ Use humor.

“Interaction and joking brings in an audience – **Brenda Mathews, Artist**

- ✓ Adjust the length of your performance. What is best? Opinions vary from 30 minutes to 90 minutes.

“Some audiences often cannot sit for a lengthy performance nor have the attention span for this. It depends on the audience, particularly their physical and mental condition.” - **Bob Rowe, Artist**

“I like to play medleys of three songs, sandwiched with an observation or a joke. This is something I learned from pastors, that three of something is appealing to the audience.” - **Jerry Ball, Artist**

- ✓ Speak slowly and clearly. Some people will cup their ear if you are speaking too softly. Others may cover their ear if too loud.
- ✓ Eye contact. Without this you may lose them. Work hard at making personal contact...recognize each person.
- ✓ Adjust to your audience. Be savvy about gauging your audience and be flexible so you can adjust your material to them. If you read them well, they will let you know what they want.

#### **What to avoid:**

- ✓ Loud background music. If you are singing, people want to hear your voice, not so much your guitar. People with hearing aids may particularly struggle with this.
- ✓ Modern material that does not relate to their life experience.
- ✓ The same art form more than once per day. If you bring in music in the afternoon and you want an evening program, choose another art form. (Activity Directors).
- ✓ Asking for donations, passing out pamphlets, and promoting an organization or a specific faith. If religion (or politics) is part of your performance, keep it general. Naturally, your audience is often made up of people who are more vulnerable to other people's agendas,

and managers must strictly protect them. Managers must specifically approve any promotional activity.

- ✓ Doing anything that is off color or distasteful.
- ✓ Playing down to your audience or otherwise patronizing them.
- ✓ Formal recitals may or may not work with some audiences, particularly when there is no emotional connection made with the artist. Possible exceptions include dinner music or ones that involve youth.

“We have an arrangement with a local piano teacher, who teaches out of her home. We allow her to hold her recitals here and our residents enjoy interactions with the students.” – **Lynda Sherrell, Manager**

- ✓ Over dress or under dress. Sloppy attire suggests that you don’t really care about the audience. A suit or tuxedo might reduce your ability to connect with the audience.

## Finally, love them....

“What is going to make these people happy? How can I make their day better? How can I make a difference? These are the questions I ask myself.” – **Jerry Ball, Artist**

- ✓ They need to know you care about them. Make it personal, warm and upbeat. Performances should overtly reach out to the audience. Interaction is critical. This should challenge your communication skills.
- ✓ Never cancel an engagement, unless you are absolutely too sick. You will disappoint many people who often have little to look forward to.

“I see my mom and grandma in these audiences. Both are gone now, but this is a way for me to honor them.” – **Brenda Mathews, Artist**

“I tell them about myself before the show and I invoke reminiscences to make it more personal.” – **Clem Camp, Artist**



Jerry Ball at the Calhoun County Medical Facility, Battle Creek, MI

## Other Important Details

**Compensation of Artists:** Due to budget constraints, facilities are able to pay a modest fee for some performances, but also rely heavily on volunteers for performances. However, artists need revenues to continue their work. Some relief, however, does come from outside sources such as foundations and arts councils.

This is a problem with no solution in view. Organizations like Renaissance Enterprises have been able to obtain some support for the arts from funders, however the funding is inadequate compared to the need.

Our advice: Everyone involved should continue to lobby with facility owners, legislators, arts organizations, foundations, etc. to provide better support for this important work.

“Do it for the experience with different audiences. The gratitude is wonderful. Sometimes I think I enjoy the performances even more than my audience” – **Clem Camp, Artist**

### **Choosing Artists (Activity Directors):**

Of course you consider the wants and needs of the residents in making a selection from available artists. Here are a couple of other suggestions:

- ✓ Use a variety of live art forms: music (bell ringers, performers, etc.), dance (including cloggers, international groups), puppetry, etc.
- ✓ Don't use the same art form more than once per day.
- ✓ Check out the artist's work in advance. You can obtain a CD/DVD, or visit their web site or ask for references from other care facilities, ask for their play list (music) or even ask for a short sample of the performance.

“Once I invited an artist to perform who assured me that his music would relate to our residents. Quite the opposite happened. Although very talented and successful, his performance clearly was not appreciated! Usually, however, these are positive and fun occasions.” – **Pat Speck, Activity Director**

### **Preparing for live arts presentations (Activity Directors):**

- ✓ Some artists are concerned that an audience resident may wander into their equipment or “play with it.” Or that there will be significant distractions. Activity directors should station someone to monitor the audience.
- ✓ Artists often have a lot of equipment. Where possible, facilities should provide a cart to transport equipment to and from the car.
- ✓ Arrange for a staff member to be present and participating (not doing paperwork during the performance).
- ✓ Evaluation and feedback is normally welcomed by all concerned. Activity directors should observe the audience and obtain sample opinions afterwards. This should be shared with the artist as constructive feedback and considered in future arts scheduling.
- ✓ Don't forget the residents who are confined to their bed; have a list ready for the artist (if your arrangement allows for visitation).

## Final Thoughts

“I performed my first program at Calhoun County Medical Care Facility in Battle Creek to an audience of one: the activity director’s dying mother. Even though she could no longer vocalize, she mouthed every word to every song I sang that afternoon. It brought a tear to my eye. I knew then that this pursuit was going to be something very special. She died peacefully four days later.” – **Jerry Ball, Artist**

"Some of the most moving experiences come from in-room visits. Sometimes all the family will gather together to comfort a passing loved one and we all sing and praise God. A peace would develop over the family that is indescribable. Later, when I learn that the loved one passed away, I am proud that the families had that time. I know they had that warm memory of their loved one and their togetherness!" - **Bob Rowe, Artist**

## Background on Bob Rowe and Renaissance Enterprises

Rowe began his career singing in local clubs and coffee houses, in Chicago, Detroit, New York, Milwaukee, and other cities throughout the United States and Canada. His music was inspired (and mentored) by Judy Collins, Joan Baez and Peter, Paul and Mary.

In the late 1970s and early 80s, his passion led him to concentrate on performances for "special" groups and audiences, such as the developmentally disabled, visually impaired, and the beloved elderly.

For years Rowe maintained a correspondence with Mother Teresa about this work and sought her advice. Mother Teresa wrote: "Your work of love in nursing homes, hospitals and for the aged, the neglected and the forgotten is truly the work of peace, for the fruit of love is service and the fruit of service is peace. Works of love like yours bring one face to face with God. Continue to use music to make the presence of God - His love and compassion better known to those in need - His little ones who have forgotten to smile. My prayer is with you in a special way and also with all connected with Renaissance Enterprises."

By bringing live music to residents of long term care facilities Rowe seeks to deliver messages of love, healing and hope.

His appreciation for those audiences and their needs led to the formation of the nonprofit organization Renaissance Enterprises in 1988.

Since its inception, Renaissance has sponsored thousands of performances for these audiences and touched the lives of tens of thousands of residents. Dozens of artists have participated in this work through Renaissance and nearly all have noted how this work has enhanced their art and their lives.

His work has been well recognized in national magazines (Time, American Profile, etc.) and he is the recipient of numerous awards, including the Mother Teresa Award.

Rowe is increasingly focused on sharing his experiences with others in hopes that more artists and more facility managers will bring live arts to these people in need.