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**Art Making Practices for Groups of Individuals with Alzheimer's
Disease**

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Disease**

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Dedication

In loving memory of “Grandmother” Claire Scott Murray

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Abstract

Art Making Practices for Groups of Individuals with Alzheimer's Disease

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Through the method of action research, this study reflects upon the individual practice of an art educator in facilitating visual art making experiences for a group of adults with dementia caused by Alzheimer's disease. The study's qualitative data consists of interviews with class facilitators, photos of the class environment and resulting artwork, and written observations, which were analyzed for emergent themes supporting the participants' cognitive and social engagement. In adopting Kitwood and Bredin's (1992) approach of person-centered care, the study connected their twelve indicators of relative well-being to observations of engagement in the class.

The discovered themes include personal objects and stories, collaboration, mood, repetition, stimulating materials, multiple steps, individualized assistance, minimized distractions, and limited options. These described attributes could provide a resource for those designing and facilitating similar experiences for adults with Alzheimer's disease.

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Chapter 1: Introduction to the Study

How can art educators assist in creating a better understanding of the needs of the 5.3 million adults living with Alzheimer's disease in the United States (Alzheimer's Association, 2015)? The Alzheimer's Association predicts that this number will grow to 7.1 million in the year 2025, as the proportion of the U.S. population over age 65 increases. Those living with the disease experience a loss of memory and cognitive ability, which negatively affects their well-being in a number of ways (Seman, 2011; Tyler, 2002; Waller, 2002). In this study, I examined the practice of art making with groups of individuals with Alzheimer's disease, in order to explore how art education can contribute to increasing the quality of life of this population.

CENTRAL RESEARCH QUESTION

In this study, I focused on answering the following question: As a teacher in the Mobile Art Program (MAP), how can I facilitate art making to support the cognitive and social engagement of a group of individuals with Alzheimer's disease, and what are the implications of the practices I developed and implemented for those working with people who have the disease?

PROBLEM STATEMENT

I am interested in how art making can be used as a tool for cognitive and social engagement for individuals diagnosed with Alzheimer's disease. People suffering from Alzheimer's disease generally experience diminished verbal and cognitive capabilities, usually beginning with memory loss (U.S. Department of Health and Human Services [HHS], 2015). These symptoms limit their ability to engage in social activities and self-expression, leading to isolation, loss of identity and sense of purpose, and feelings of depression and frustration (Seman, 2011; Tyler, 2002; Waller, 2002). Art making

provides an opportunity for those affected by the disease to increase their social and cognitive engagement, as a way of sustaining their abilities in these areas and improving their quality of life (Abraham, 2005; Hattori, Hattori, Hokao, Mizushima, Mase, 2011; Osborn, 2012; Seman, 2011; Tyler, 2002; Waller, 2002). My aim in undertaking this research was to examine the specific ways these art making activities can support the social and cognitive engagement of those with Alzheimer's disease. This study is intended to benefit the caregivers of adults with Alzheimer's disease, including family members, care center employees, and art educators, as it demonstrates tangible additions and recommendations for the way art making could be facilitated with this population.

MOTIVATIONS FOR RESEARCH

Personal

“Vincent, you remember the time that...you know...it was....” “No I don't, Sweetheart.” “You know!” she pleads. The woman with haphazard gray hair grunts and throws her hands up in the air in frustration, while the man softly laughs and smiles. “I don't know.” This scene repeated over and over in my experience with my grandmother. I watched as “Grandmother,” the storyteller, who had read to me throughout my childhood, slowly lost her ability to communicate in the most basic forms of conversation. Like many others who live with Alzheimer's disease, she was unable to participate in the many social activities that had once been such an important part of her life. Her only interactions were with her family and in-home caregiver. And even those interactions could be frustrating, as we attempted to navigate her loss of verbal communication.

It was only after her passing that I learned of the work being done by the Mobile Art Program (MAP) for people with Alzheimer's disease and attended the screening of *I*

Remember Better When I Paint (2009). In volunteering with MAP and through watching the film, I realized the important work that could be done to re-connect individuals with Alzheimer's disease to social experiences and to themselves. MAP is a non-profit organization whose mission is to deliver free art activities to senior adults with disabilities in Austin, Texas (MAP, 2014). Their focus is directed toward low-income nursing homes, Alzheimer's respite programs, and adult day programs (MAP, 2014). In my first time assisting in a MAP art activity, I witnessed a marked difference in the attitude of one of the participants. She entered the room crying inconsolably, but by the end of the thirty-minute art activity she was enthusiastically showing off her finished work and agreeing to be photographed with a group of the other participants and volunteers. Many of the other class participants—who had exhibited signs of agitation or disengagement when we met them before the class—displayed concentration, activity, and social interaction in the class. This experience showed me how art could be an outlet for inner reflection and processing of emotions that arise within a person as a result of living with Alzheimer's disease. I also saw its possibilities as a way for communication and social engagement for those who are beginning to lose their verbal ability or have lost it altogether.

Professional

I was inspired to pursue this study by Osborn's (2012) conclusion that art practices could be developed to enhance the quality of life of individuals with Alzheimer's disease. In her research, she facilitated art making experiences for individuals in their own homes. I met with her to discuss her research, and she expressed to me in our conversation that studying the practice of facilitating art making in a group setting would be of practical value for those working with this population (R. Osborn,

personal communication, April 6, 2015). Her sentiment is echoed by the researchers Kate de Medeiros and Anne Basting (2014) in their article which calls for more research to take a qualitative approach to describing social changes in groups involved in art activities, taking into consideration the environment and other complex factors not included in more limited surveys. This call for research is timely, since 32% of individuals in adult day services and 40% in residential care facilities have Alzheimer's disease and other dementias (Alzheimer's Association, 2015).

As an instructor with MAP, I examined the methods of engaging participants socially and cognitively through the research methodology of action research. Approaching the subject through action research gave me the opportunity to refine my own practice as an art educator and contribute to the body of action research. In doing this, I hoped to highlight and broaden the body of work and research of practicing educators and caregivers. In this time of educational standardization and low teacher income, the role of the individual teacher has been de-valued. By adding to the body of action research, I intend to demonstrate the value of an individual teacher's practice.

SPECULATIONS ABOUT THIS INVESTIGATION

Here I speculate on what I thought I would discover in my analysis of the data, so that I may recognize my biases in its interpretation. Since I do not have many first-hand experiences of art making with individuals who have Alzheimer's disease, I have relied on findings from other studies to form many of my speculations.

First of all, I expected to discover that open-ended activities with multiple options would give the participants a feeling of autonomy and thus increase their cognitive engagement and self-expression, as discussed by Sauer, Fopma-Loy, Kinney, and Lokon (2014). Also in agreement with their study, I expected that training the volunteers to

assist in ways to create as little distraction as possible, while supplying participants with materials for their artwork, would assist in keeping the level of cognitive engagement high.

From reading Tyler's (2002) account as an art therapist, I realized the importance of consistency in creating a feeling of comfort and reliability for the participants. I planned on incorporating his advice of arranging the classroom in the same way, having the same routines, and keeping consistency with the volunteers, in order to encourage the participants to feel comfortable in engaging with the art making activity. I anticipated that maintaining the same placement of participants in the room, at the same tables with the same peers and volunteers, would also encourage positive social interaction and engagement.

Inspired by de Medeiros and Basting's (2014) finding of the importance of the social aspect in dementia interventions, I planned to support social engagement by scheduling a period of time at the end of each class for viewing and sharing thoughts about the artwork, leading into an informal time of social interaction.

I drew from my own previous observations of MAP classes to imagine ways to make the materials and art surfaces physically closer and more accessible for the participants. In doing this, I hoped to increase the participants' comfort and ease in using the materials, and thus increase their focus.

RESEARCH METHOD

Action research

I chose action research as the methodology for my thesis research. It has also been called "teacher research," "classroom research," "practitioner inquiry," "teacher inquiry," and "teacher self study" (Dana, 2013, pp. 1-2). There are a variety of definitions for

action research, including some that are participatory (Hutzel & Anderson, 2005), but for the purpose of this study, I adopted the following definition: “the combination of action and research renders that action a form of disciplined inquiry, in which a personal attempt is made to understand, improve, and reform practice” (Cohen, Manion, & Morrison, 2011, p. 345). I followed what is considered to be an ingrained habit of self-reflective teachers, which is a repeating pattern of “planning, acting, observing, reflecting, and re-planning” (McNiff, 2002, p. 7).

Rationale

Action research provides a “bridge” between research and practice (Cohen et al., 2011, p. 345). This aspect of the research methodology fulfilled my goal of ensuring this research contributes to the actual practices of caregivers and art educators who facilitate art activities for individuals with Alzheimer’s disease. In addition, choosing a methodology focused on tangible outcomes also strengthened the stability of my own practice as a professional art educator.

Action research also accommodated the unpredictability of human interactions by including open-ended, qualitative data collection methods, not just searching for data in predetermined, limited categories. The focus is placed on the observations of the researcher, guided by his or her intuition and participation in the research (McNiff, 2002). Both these characteristics are important in analyzing the social situation of a group class, which may be influenced by a variety of factors that are difficult to anticipate (de Medeiros & Basting, 2014). It was also important that the emphasis of data collection be placed on the researcher’s observations because of the decreased ability to communicate verbally with the participants who have Alzheimer’s disease.

Method of data collection

As a teacher and intern at MAP, I gathered data in the form of my written descriptions of the classes, interviews with the MAP director and the volunteer who assisted the class participants, and photographs of the class environment and of the artwork created by the participants. Since verbal communication for people with Alzheimer's disease can be limited, collecting data through my observations provided me a way to observe what the participants were communicating physically through nonverbal communication and verbal communication during the class. I supplemented my descriptions of the class environment with photographs of the facility to further analyze environmental factors affecting the participants' engagement. By interviewing the class volunteer, I was able to triangulate her observations with my own and what I learned from my interviews with the MAP director to confirm my conclusions. And lastly, I included photographs of the artwork created by the participants in order to further extend the richness and depth of the qualitative data collected.

Method of data analysis

I employed thematic analysis in analyzing data after each of the three cycles of research to make revisions for the following classes. In making revisions, I relied on the perspective of the MAP director, as my "critical friend" (McNiff & Whitehead, 2009, p. 173) to assist me by providing a different, critical perspective on the research. I also discussed the revisions with my thesis supervisor to bring in another viewpoint.

The various collected data from transcriptions of my interviews with the volunteer and the director of MAP, photographs of the participants' artwork and the classroom environment, and written descriptions of my observations of the classes provided for triangulation in the analysis. In the final data analysis, I explored emergent themes from all the classes in the categories of social and cognitive engagement. Finally, I applied

Kitwood and Bredin's (1992) 12 indicators of relative well-being to describe the participants' state of well-being in the class.

DEFINITION OF TERMS

Dementia

Dementia is the loss of an individual's cognitive ability due to a number of causes. In older adults, Alzheimer's disease is the most common cause of dementia (HHS, 2015).

Alzheimer's disease

Alzheimer's disease is an irreversible, progressive disease affecting the brain, in which connections between the neuron nerve cells in the brain, and eventually the nerve cells themselves, are damaged and lost. There is currently no known cure, although there are some therapeutic treatments of symptoms available. The greatest known risk factor for the disease is increased age, however it is not a normal part of the aging process (HHS, 2015).

Mild stage

Individuals experience memory loss, changes in cognitive ability, poor judgment, and possibly mood and personality changes (HHS, 2015).

Moderate stage

In this stage, damage occurs in areas of the brain that control language, reasoning, sensory processing, and conscious thought. Memory loss and confusion grow worse, and people begin to have problems recognizing family and friends. They may be unable to learn new things, carry out multistep tasks such as getting dressed, or cope with new situations. In addition, people at this stage may have hallucinations, delusions, and paranoia, and may behave impulsively. (HHS, 2015, p. 3)

Severe stage

“Brain tissue shrinks significantly. People with severe Alzheimer’s cannot communicate and are completely dependent on others for their care” (HHS, 2015, p. 3).

Early onset

A rare form of the disease that affects individuals ages 30 to 60 (HHS, 2015)

Late onset

The more common form of the disease, affecting individuals 60 years and older (HHS, 2015)

Art making activities

For this study, when I refer to art making activities, I am only referring to the creation of two-dimensional and three-dimensional visual art. The activities involved could include painting, drawing, sculpture, printmaking, collage, and use of various visual media.

LIMITATIONS OF THE STUDY

This study was conducted in a series of weekly classes facilitated by the Mobile Art Program (MAP) in Austin, Texas, in Fall 2015. I developed a lesson plan, my first cycle of action research, based on the practices I researched in my literature review. Then, I taught the lesson plan and later analyzed the collected data to see how it affected the social and cognitive engagement of the participants. I changed and refined the lesson based on the findings of the data from the first cycle, and then taught the remaining classes, treating each class as one cycle of the research. The data collected from the following cycles provided further opportunities for analysis and gave me data to support the use of particular practices and the avoidance of others in my conclusion.

I did not set out to prove the benefits of art making with groups of individuals diagnosed with Alzheimer's disease. Instead, I based the study on the acceptance of preceding studies supporting the view that art making practices are beneficial for those who have Alzheimer's disease (Abraham, 2005; Osborn, 2012; Seman, 2011; Tyler, 2002). In addition, I did not propose that art making could permanently improve an individual's condition or symptoms resulting from the disease, but rather, I focused on improving the participants' experiences and level of engagement within the time period of the class.

BENEFITS TO THE FIELD OF ART EDUCATION

My intention with this study is to contribute to the body of art education research that addresses the development of programming for adults with Alzheimer's disease and to encourage additional research. A majority of research in the field of art education has historically targeted the education of children in kindergarten through high school, but the field now has a great opportunity to expand whom it serves through programming and research. By expanding the population it serves, the field of art education will demonstrate its versatility and usefulness outside its traditional application for school-age children.

The topic of this study required that I cross disciplines to include research from the fields of art therapy, art education, and geriatric psychology. How art therapy specifically relates to Alzheimer's disease is a relatively new and growing field and is closely linked to the goals of art education. It would benefit art educators to become knowledgeable of the current research in the field of art therapy to recognize the ways it overlaps current issues faced in art education.

Community art programs could become more inclusive of all members of their particular community by expanding their view of who can participate in their programming, specifically including individuals with Alzheimer's disease. In order to better accomplish community building and break down the habits of isolation and segmentation in the U.S., community programs need to explore opportunities for intergenerational learning and shared community spaces. This study described an example of community art programming and the particular aspects and challenges to consider in designing experiences for individuals with Alzheimer's disease. It is intended to be a resource for those that wish to design similar programs.

CONCLUSION

In the study of how to sustain cognitive and social engagement for adults with Alzheimer's disease, I began a rewarding journey of discovery and reflection upon my own teaching practice. The next chapters encompass descriptions of my research and outcomes in the following order: the review of literature, the methodology of action research, the description of data from three action research cycles, the emergent themes from the final analysis, and the conclusion.

Chapter 2: Review of Literature

As I reviewed the relevant literature for my study, I investigated how the specific qualities of art making fit with the unique symptoms of Alzheimer's disease, which first required an understanding of the disease. I then explored the recorded best practices for engaging adults with Alzheimer's disease through art making activities, so I could construct a plan for the first cycle of action research. In my search of the approaches to care for adults with dementia, I found Kitwood and Bredin's (1992) theory of person-centered care to fit well with the goals of my study. Finally, to support my data collection and analysis, I reviewed various approaches to observing and recording observable indicators of cognitive and social engagement, in order to construct my own observational tool.

ALZHEIMER'S DISEASE

Symptoms and stages

Alzheimer's disease causes plaques and tangles to build up in the brain and results in the loss of connections between nerve cells in the brain, causing dementia—the loss of cognitive functioning (HHS, 2015). Eventually, this process results in the damage and death of nerve cells in the brain and the shrinking of brain tissue (Alzheimer's Association, 2015; HHS, 2015). There are other causes of dementia, but Alzheimer's disease is the most common (Alzheimer's Association, 2015; HHS, 2015). The changes in the brain begin with the hippocampus, where memories are formed, which is why memory problems are some of the first signs of the disease (Alzheimer's Association, 2015; HHS, 2015). Other indicators of the onset of Alzheimer's disease include trouble in finding words, apathy, depression, vision/spatial issues, and impaired judgment (Alzheimer's Association, 2015; HHS, 2015).

Alzheimer's disease progresses through roughly three stages: mild, moderate, and severe (HHS, 2015). In the mild stage, individuals experience memory loss, getting lost, repeating questions, difficulty with simple math, and personality changes (HHS, 2015; National Institute on Aging [NIA], 2015). As the disease progresses and damages areas of the brain that control language, reasoning, and sensory processing, the individual may have difficulty recognizing people, learning new things, dealing with unfamiliar situations, and doing tasks with more than one step (HHS, 2015). The moderate stage may also include symptoms such as hallucinations, impulsive behavior, and paranoia (HHS, 2015). Lastly, the severe stage causes the interruption of verbal communication, and the individual is mostly dependent on others for care (HHS, 2015). Finally, the end result is death; in 2013, the National Center for Health Statistics of the Centers for Disease Control and Prevention listed Alzheimer's disease as the sixth-leading cause of death in the United States (HHS, 2015).

Care giving practices and person-centered care

In 1992, Kitwood and Bredin introduced their theory of person-centered care, which has now been embraced and built upon by many researchers and practitioners in dementia care, such as Verity and Kuhn (2008), Zeisel (2009), and Waller (2002). They define personhood "as essentially social: it refers to the human being in relation to others" (Kitwood & Bredin, 1992, p. 275). Given their definition of personhood, person-centered care then examines the social relationships surrounding the person receiving the care. Their theory begins with describing a shift in attitude for caregivers, from not only looking at the disabilities of those they care for, to also examining themselves for ways they may exacerbate the difficulties experienced (Kitwood & Bredin, 1992). Kitwood and Bredin's theory proposed a system of care acknowledging the social interdependence of

each member to create an environment of well-being. As practical application of this theory, Kitwood and Bredin authored the Dementia Care Mapping tool (University of Bradford School of Dementia Studies, 2015) for measuring relative well-being, which I discuss later in this chapter with a number of other tools for measuring social and cognitive engagement.

For example, Diane Waller (2002) described the use of person-centered care as looking to encourage and nurture the positive abilities of each person with dementia, instead of focusing on their deficiencies. Waller founded the Art Psychotherapy Unit at Goldsmith College, London. She has done action research on art therapy training, art therapy with groups, and people with dementia (Waller, 2002). Waller interviewed Kamal Beeharee, a psychiatric nurse and co-coordinator of services for people with early onset dementia, who provided freedom of choice and opportunity for his clients to use their abilities and do things for themselves. Beeharee found that this practice resulted in his clients feeling more valued and less frustrated and disappointed (Waller, 2002). Beeharee claimed that individuals with dementia are like anyone else, in that they "must have a role, a purpose in life, and respect" (Waller, 2002, p. 144).

The person-centered approach is also found in the NIA's (2015) article "Caring for a Person with Alzheimer's Disease," which offers practical advice for caregivers on how to interact physically and verbally with a person with dementia to avoid typically frustrating situations.

Practically, how do these researchers recommend to interact with those who have dementia in order to maintain respect for the individual? Zeisel (2009) and Verity and Kuhn (2008) go into great detail to describe recommended attitudes and actions for caregivers to provide person-centered care. One approach that many agree upon is to speak directly to the person, to not refer to an individual in third person while in front of

them (NIA, 2015; Verity & Kuhn, 2008; Zeisel, 2009). Another is to avoid the temptation to ask the person specific questions about their past, which they may not be able to remember. Zeisel refers to this as “testing,” which he says reminds the person of their disability instead of reaffirming their personhood (2009, p. 161). The person-centered approach by caregivers also endeavors to leave as much control over decisions to the individual, and to encourage them to still do things for themselves they still have the ability to do (Verity & Kuhn, 2008; Zeisel, 2009). Verity and Kuhn (2008) and Zeisel (2009) found that this practice of encouragement builds self-esteem in the individual, to contrast with the feelings of uselessness and loss of purpose that tend to accompany the disease. However, too many options can be overwhelming for the person with dementia, so Verity and Kuhn recommend offering a limited number of options and asking simple “yes” or “no” questions, when possible. Verity and Kuhn (2008) offer a simple list of questions for the caregiver to consider when examining ways to change their behavior to create a more positive experience:

- “Was my body language warm and friendly?
- Did I make eye contact before I began to speak?
- Was I being heard?...
- Did I speak slowly and clearly?...
- Did I talk respectfully?” (p. 57)

Based on the values of person-centered care and my own experiences as a teacher with MAP, I developed a guide for MAP volunteers to give them ideas on how to interact with the participants in constructive ways. It is as follows:

- Respect each Participant’s Individuality and Self-Expression.
- Keep Consistency.

- As much as possible, try to keep consistency from one class to the next by remembering which seat each participant usually sits in and how they like their place to be set-up. If there are enough volunteers, ideally you would work on assisting the same participants each class, to develop trust and a more comfortable relationship.
- Help Participants Engage with Artwork.
 - Volunteers assist with the steps of the art activity as needed, but not until it is apparent that the participant needs the extra help. If a participant looks like they are not engaged with the work, here are some steps to try:
 - Remind them of the next step in the process.
 - Ask them one of the reflection questions for that day.
 - Look at one of the inspirational images for that lesson with the participant and ask them what they see in the image.
 - If the participant is having a hard time starting on a blank canvas, you may suggest picking one color for the background to start with.
- Minimize Distractions & Avoid Frustrations.
 - Do not overwhelm the participant with too many questions or options. Observe their nonverbal cues and listen to what they are saying in order to understand what they need in that moment.
 - Do not attempt to contradict participant if they say something that does not seem to make sense to you.
- Assist with Set-up.
 - As participants begin working, assist with making the artwork physically more accessible to the participants, depending on their ability. Examples

include setting up table stand easels to bring the artwork closer to the individual, taping or holding down palettes, or rotating a piece of artwork if the participant can only reach a portion of it in one position. Be observant and sensitive to different individual needs.

At the end of each class, I included a reflection time for participants to see their own work displayed in front of the group and to observe the work created by the others in the class. I was inspired to do this practice to encourage social engagement and for the participant to see themselves as individuals within a larger group, an important element to support their self-esteem and sense of purpose (Kitwood & Bredin, 1992; Zeisel, 2009).

Contributing organizations

To assist with understanding the nature of Alzheimer's disease, I referred to resources provided by the Alzheimer's Association. They are the largest non-profit organization focused on ending Alzheimer's disease and dementia and enhancing care for those with the disease (Alzheimer's Association, n.d.). Since their beginning in 1980, they have begun a number of initiatives: publishing the peer-reviewed research journal, *Alzheimer's & Dementia*; holding an annual conference on Alzheimer's research; advocating for support from the political arena; and hosting a number of services for caregivers (Alzheimer's Association, n.d.). Their website was useful for providing a basic understanding of the disease, along with the most recent research and statistics. The Alzheimer's Association provides resources for researchers to share ideas and to find financial support, participants, and partner organizations for their studies.

I also reviewed resources distributed by the National Institute on Aging (NIA), which leads the federal government's support of research into understanding aging and how to improve the lives of aging adults. It is a part of the National Institutes of Health,

which is a division of the US Department of Health and Human Services (HHS). Their report—entitled “Alzheimer’s Disease Fact Sheet”—covered the following topics: symptoms, diagnosis, suspected causes, stages of the disease, changes in the brain, treatment, support for caregivers, and research.

Another organization of note is the Alzheimer’s Foundation of America (AFA, 2015), which joins member organizations assisting individuals with Alzheimer’s disease across the country. Both organizations involved in this study, MAP and AGE of Central Texas, were members of this organization at the time of this study (AFA, 2015). AFA’s mission is “to provide optimal care and services to individuals confronting dementia, and to their caregivers and families—through our member organizations dedicated to improving quality of life” (AFA, 2015, “About Alzheimer’s Foundation of America,” para. 1). AFA provides a quarterly publication for caregivers, along with a professional training and certification program through their division, Dementia Care Professionals of America (AFA, 2014). They also offer free memory screenings and a hotline to call with questions for those who believe that they, or someone they know, may be at risk for dementia (AFA, 2015). Of particular interest to me, as an educator, was their member spotlight page, where they described the most recent practices of some of their members.

VISUAL ART PRACTICES FOR INDIVIDUALS WITH ALZHEIMER’S DISEASE

Overview

I was first introduced to the idea of visual art practices for people with Alzheimer’s disease when I viewed the film, *I Remember Better When I Paint* (2009). It reviewed the many approaches and possibilities for interaction between individuals with Alzheimer’s disease and visual art (*I Remember Better When I Paint*, 2009). Showing broad support from many sectors, it included the perspectives of participants, caregivers,

physicians, family members, artists, and museum educators from various initiatives focused on using visual art with individuals with Alzheimer's disease as a therapeutic and meaningful activity. This film gave me an example of the potential for constructive engagement for those living with Alzheimer's disease through the stories and footage of participants interacting with the visual arts. The stories constructed about particular individuals were compelling and contributed to the overall argument of the film for the expanded use of visual art as a therapeutic activity for individuals who have Alzheimer's disease. This documentary led me to explore further various avenues of research on this subject.

In my review of literature, I identified studies of art therapy (Abraham, 2005; Beard, 2012; Brooke, 2006; Tyler, 2002; Waller, 2002), and I identified one study published specifically within the field of art education (Osborn, 2012). I also looked at studies outside the fields of art therapy and art education and within gerontology (de Medeiros & Basting, 2014; Hattori et al., 2011; Sauer et al., 2014).

Examples in art education

There have not been many studies done specifically within the field of art education on the subject of visual art interventions for people with Alzheimer's disease. However, considering the predicted growth in population of those living with Alzheimer's disease, the field of art education now has a great opportunity to add their expertise in facilitating art experiences to the effort of providing a better quality of life for those with Alzheimer's disease. Supporting the well-being of those with Alzheimer's disease through social and cognitive engagement fits within the National Art Education Association (2012) Research Commission's vision statement: "Art education enables

individuals to integrate experience and knowledge into meaningful forms of knowing by using media and methods to create new understandings” (para. 3).

In Osborn’s (2012) thesis research in art education, she described two particular situations of facilitating visual art activities for an individual with Alzheimer’s disease. Her qualitative case study research consisted of the development and application of a therapeutic program for two different individuals who were living with Alzheimer’s disease (Osborn, 2012). Osborn’s data was thoroughly documented and provided insight into the benefits and challenges of facilitating art activities for this particular population. My proposed thesis research was inspired partly by her statement of opportunities for further study on methods for caregivers to use in facilitating art activities (Osborn, 2012).

Examples in art therapy

Within the field of art therapy, I found more examples of art making with individuals living with Alzheimer’s disease than I had solely in the field of art education. The practice of art therapy differs from art education in its purpose, and thus its practice. To clarify my approach as an art educator, in this section I have examined the differences and similarities between my practice as an art educator and the practices of art therapy.

First, for gaining an understanding of the definition and credential requirements of art therapy, I referred to the Art Therapy Credentials Board’s website (ATCB, n.d.). At the time of this study, the ATCB was the only recognized credentialing organization for art therapy in the United States. The ATCB website defined what is entailed in art therapy, its desired outcomes, and the certification process for art therapists. It also provided information on the American Art Therapy Association, which is their membership organization (ATCB, n.d.). The ATCB website posted the “Code of Professional Practice” and a guide for those who are planning on taking the examination

for credentials as a practicing art therapist. Although limited in the scope of information offered, one of the most relevant aspects of the ATCB website for this study was its definition for art therapy, representing the practice and study of a collection of art therapists. They defined art therapy as using “art media, the creative process, and the resulting artwork as a therapeutic and healing process” (ATCB, n.d., “What is Art Therapy”). They emphasized the “process is not an art lesson” but “grounded in the knowledge of human development, psychological theories, and counseling techniques” (ATCB, n.d., “What is Art Therapy”).

Within the field of art therapy, a spectrum of approaches is utilized. Essentially, the differences come from how art is used in the therapeutic process. Some art therapists use art as a tool for the client to relate to the therapist, who can then use psychoanalytic concepts in their treatment of the client; Killick and Schaverien (1997) describe this practice as “analytical art psychotherapy” (p. 4). Other art therapists view art as the central therapeutic treatment, which Killick and Schaverien label simply “art therapy” (p. 4). These differences spring from two of the early proponents of art therapy: Margaret Naumberg and Edith Kramer (Junge, 2010). Naumberg supported the use of art in psychotherapy in her seminal work, *Dynamically Oriented Art Therapy*, published in 1966 (Junge, 2010). Her book was the first to describe art therapy as its own field and profession (Junge, 2010). Influenced by Freud, Naumberg used the creation of images and their interpretation by her clients as a springboard for conversation and as a tool for therapy, thus the aesthetics of the artwork was not important (Junge, 2010). On the other end of the spectrum, Kramer proposed that the process of making art was in itself healing, so she gave more emphasis to the aesthetics and techniques of art making (Junge, 2010). Kramer saw art making as encouraging sublimation, the transformation of

“antisocial desires and drives...into socially acceptable ones” (Junge, 2010, p. 166). Junge described Kramer’s approach as “art as therapy” (p. 166).

For an example of a case study using art therapy with an adult living with Alzheimer’s disease, I looked at the work of Vetter (2007). Vetter’s stated goal was to reduce her participant’s agitation through art therapy. She met with him over 18 sessions within four weeks and facilitated art therapy using the materials of markers, colored pencils, and collage on white paper (Vetter, 2007). The projects included drawing a timeline of his life, a collage of the participant’s favorite images from a magazine, drawing emotions, and others (Vetter, 2007). The stated purposes for drawing the emotions was to provide a release for the participant’s emotions in a way that made him feel listened to and validated (Vetter, 2007). Emphasis was given to interpreting meaning from the participant’s artistic decisions and images to give insight into the participant’s psychological state.

This interpretation of art therapy differs from art education, because it prioritized therapy over the creation of artwork. As an art educator, I was primarily focused on creating opportunities for participants in my study to enjoy the act of making art. Due to this difference, I focused more on the aesthetics of their work, art medium techniques, and the creative process. My approach had more in common with Kramer’s “art as therapy” practice, however I didn’t adopt her theory of sublimation. My study embraced the practice of working with various visual art materials in a group to provide many opportunities for positive cognitive and social engagement. I believe that art therapy can miss some of these opportunities for engagement by overlooking the importance of the art materials and processes. The art therapist’s focus on analyzing the participant’s artwork for psychological meaning has the potential to take the focus off of engagement in the rich process of creating artwork.

Purpose for art making activities

My purpose in pursuing this study was to investigate how the cognitive and social engagement of the participants was sustained through their participation in this program. I arrived at this specific purpose and my chosen methods through reviewing previous research on the topic of art making activities for people with dementia.

For an overview of the previous research, I looked at the review of research by Renee Beard (2012). In her article, Beard reviewed a number of studies carried out on the use of art therapy with individuals who have dementia caused by Alzheimer's disease. She analyzed and described records of therapies involving music, visual arts, drama, and dance/movement between 1990 and 2010, and she made recommendations for ways to improve this body of research. This article provided a thorough base for understanding the state of the field of art therapy research regarding Alzheimer's disease specifically. By outlining the weaknesses and limitations of this particular field of research, this article guided me in designing this study to address some of the areas in need of more attention. Specifically, she called for more measurements of well-being in relation to art therapy practices:

More investment into process-oriented interventions using research methods that can appropriately track such variables as quality of life and subjective well-being, both of which have recognized measurement and evaluation tools that could be utilized and/or adapted to use with persons who have dementia, are needed.
(Beard, 2012, p. 647)

I also examined a review of art therapy research by de Medeiros and Basting (2014); they conducted a comparative study of 27 different pharmacologic, psychosocial, and cultural arts interventions in dementia research. Similar to Beard (2012), their motivation in conducting the review was to question why more qualitative studies had not been included in the systematic reviews (de Medeiros & Basting, 2014). They agreed

with Beard in highlighting a need to branch out from clinical trial formats to more effectively research how the cultural arts could provide quality personal experiences over quantifiable physical improvements. I appreciated de Medeiros and Basting's critical analysis of the ways in which researchers have attempted to measure quality of life. Their critique informed the process that I chose to employ for collecting data in an open-ended and inductive way, instead of narrowly focusing on a few indicators. De Medeiros and Basting also created an argument, based on studies they reviewed, for the need to involve a group in the art activity with the participants for investigating its social benefits.

One quantitative study of the benefits of art therapy compared an art activity to a control calculation activity for groups of individuals with mild Alzheimer's disease (Hattori et al., 2011). Hattori et al. observed increases in cognitive functioning in the art therapy group over the 12 weeks of the study, in which they recorded improvements in vitality and quality of life indicators. Although calling for more empirical studies, Hattori et al. (2011) also called for more studies to examine the satisfaction of program participants and their family members.

Lastly, I looked at a study by Phinney, Moody, and Small (2014). Their research combined qualitative and quantitative methods to examine the physical, emotional, and social benefits of community art programs for senior adults. The data was collected over a three-year period and reflected positive improvements in all examined areas, both in the quantitative and qualitative methods of collection (Phinney et al., 2014). This study provided a basis of comparison of the needs of senior adults who do not have Alzheimer's disease, to those in other studies who do have the disease. It was also useful to compare how this study defined well-being to methods in other studies, especially in the way that it combined the quantitative and qualitative approaches.

As interpersonal communication: Social interaction

Art making activities in a group setting provide an opportunity for quality social engagement, supporting two of Kitwood and Bredin's (1992) indicators of well-being: initiation of social contact and social sensitivity. By sharing in an activity, participants have a common experience that can spark verbal and nonverbal communication. As noted by de Medeiros and Basting (2014): "cultural arts interventions...develop individual potential and social meaning systems to achieve a transformative experience" (p. 350). Since the primary focus of the experience is on art making, those who are losing their verbal abilities are still able to participate and feel included in the group. Art-making activities provide an avenue for participants to interact with others in ways that do not rely on their ability to have conversations.

As intrapersonal reflection: Expression of meaning

By supporting the cognitive engagement of the participants in my study, I hoped to provide them with opportunities to express themselves in a meaningful way, sustaining their well-being. Included within cognitive engagement were two of Kitwood and Bredin's (1992) 12 indicators of well-being: creativity and self-expression, and the assertion of desire or will.

I also found support for this purpose in Beard's (2012) review of art therapy research. In her review, she noted that a majority of studies attempted to change behaviors, rather than focus on recording the enrichment of the participants' quality of life through the art activity (Beard, 2012). She focused her attention on supporting studies that instead used art therapy "as a process of meaningful activity for individuals" (Beard, 2012, p. 637).

For an example of a case study that supported this purpose, I turned to Waller's (2002) book, *Arts Therapies and Progressive Illness: Nameless Dread*. In the chapter

entitled “Art Therapy with Older Adults Clinically Diagnosed as Having Alzheimer’s Disease and Dementia,” Tyler (2002) drew upon his own experience as a licensed art therapist and psychotherapist to write narratives of individuals who have benefitted from art therapy. In this chapter, he proposed that art therapy offers an opportunity for those who have lost verbal abilities because of Alzheimer’s disease and dementia to share meaningful social experiences and also engage in clarifying self-reflection as they approach the end of life. I appreciated Tyler’s detailed, narrative descriptions of his experiences in the field, and my construction of this study benefitted by his detailed observations of the affects of art therapy on individuals who have Alzheimer’s disease.

Recommended methods for application

Through my review of recommended practices of facilitating art activities for adults living with dementia, I gathered many valuable words of advice from practitioners who drew upon their experiences with this population.

Activities

As far as the activities that can be employed with individuals living with Alzheimer’s disease, there are a number of specific recommendations. Many writers agreed that while projects should not be complicated, they should also be careful to not be childish (Osborn, 2012). Tyler (2002) pointed out that he had observed caregivers do holiday craft projects with their care receivers, which would only involve the person with dementia coloring in one section of the piece, which was mostly constructed by the caregiver. He emphasized that this behavior does not encourage independence but dependence, and reinforces the idea that the participants have nothing to contribute (Tyler, 2002). Waller (2002) also observed that in day centers and hospitals, many

activities tend to be "low-level and demeaning" (p. 123), focusing on the participants' lack of abilities rather than what they are still able to do.

Another common element among the recommended art activities was referring to the person's past and elements of their identity (de Medeiros & Basting, 2014; Osborn, 2012; Zetter, 2007). Cohen-Mansfield, Dahkeel-Ali, and Marx (2009) supported the use of stimuli that referred to a person's self-identity, which they have categorized into four different roles: family, work, hobbies, and personal attributes. They found support for the use of "person-tailored" activities, chosen based on a person's past preferences or self-identity, as more effective for engagement than other activities (Cohen-Mansfield et al., 2009, p. 303). Cohen-Mansfield et al. (2009) also found stimuli were more engaging to the degree that they involved social qualities, were physically manipulative, and resembled a work role, invoking the individual's procedural memories.

Finally, Huebner (2011) has advised for caregivers to include a variety of activities that relate to and inspire the creative process, such as visits to the museum or looking at artwork. By including a number of different artistic activities in her care, Huebner encouraged her mother, a painter who had stopped creating art, to begin painting again. I found this advice to be helpful in my own experience in facilitating groups with MAP. Since there are typically many diverse interests and abilities in any one group of individuals with Alzheimer's disease, it is helpful to have a book of art images for participants—who prefer to observe rather than paint—to look through and still feel included in the group activity.

Class environment and set-up

As far as the space uses for the activity, Falk (2002) emphasized the importance for it to be closed off from distractions. He cited his experience facilitating an art therapy

group for young individuals with Alzheimer's disease (Falk, 2002). Seman (2011) advised the facilitator to think about decreasing the level of noise in the environment, since individuals with dementia can be distracted easily by crowds and noise. Supporting this advice, Tyler (2002) also found that the disorientation of his patients increased with distractions. In addition to paying attention to the noise level, Waller (2002) stressed the importance of the time of the class to be consistent and respected by staff and participants to achieve the best results. She also recommended finding a space that is well-lit and ventilated (Waller, 2002).

TOOLS FOR MEASURING SOCIAL AND COGNITIVE ENGAGEMENT

After determining my goals of supporting social and cognitive engagement, I researched ways to measure well-being and engagement by direct observation. I was inspired to be open-ended in the approach of my observations by the work of Beard (2012) and de Medeiros and Basting (2014).

Since art interventions are personal and will affect each person differently, the research model must accommodate the nature of the treatment and not be limited by a few measurements of change (de Medeiros & Basting, 2014). De Medeiros and Basting proposed a search for meaning, in the midst of the confusing, frustrating, and isolating aspects of living with dementia at home or in an assisted living facility. They argued that measurements of cultural arts interventions should include the individual and their surrounding social network, since the treatment not only “involve[s] meaningfulness, creativity, and imagination, they [also] involve social connectedness and engagement with the outside world” (de Medeiros & Basting, 2014, p. 351). These researchers cited that many assessment tools in the studies they reviewed did not ask the caregiver or

person with dementia to give personal input on how the scale items are relevant to them, or make notes on the environment (de Medeiros & Basting, 2014).

In her review of studies of different therapies for people with dementia, Beard (2012) called for more value to be given to qualitative and interview-based research, rather than only focused on the biomedical approach. She called for more research to emphasize the stories and subjective experiences of individuals who are living with Alzheimer's disease (Beard, 2012). With this focus on quality of life and experiences, Beard found art interventions to be a crucial part of this approach. She pointed out that many studies did not focus on the subjective well-being of the participants, but rather limited, objectively observed behaviors (Beard, 2012). This narrow focus on a few quantifiable characteristics limited the creativity and breadth of the data collection and analysis (Beard, 2012). Similar to de Medeiros and Basting (2014), Beard found many studies relied on clinical evaluations only, and did not include the perspective of the person with dementia. She noted a few studies that stood out as the exceptions evaluated based on the Dementia Care Mapping tool (University of Bradford School of Dementia Studies, 2015), which includes the participants' perspectives. Another tool that Beard praised was a study that utilized The Greater Cincinnati Chapter Well-Being Observation Tool, which measures well-being, including the factors of attention, pleasure, self-esteem, and normalcy.

Review of assessment methods

In my search for a method to observe and record social and cognitive engagement and its contributions to quality of life, I reviewed the methods of four studies that took various approaches in the measurement of engagement and its relationship with well-being. The first two studies focused primarily on measuring engagement (Cohen-

Mansfield et al., 2009; Judge, Camp, & Orsulic-Jeras, 2000), while the remaining two studies focused on defining elements of well-being related to engagement (Kitwood & Bredin, 1992; Sauer et al., 2014).

On the premise that constructive engagement leads to the decrease of problem behaviors related to dementia, Cohen-Mansfield et al. (2009) developed an observational tool for measuring engagement. They recorded the participant's rate of refusal of the stimulus, duration of time involved with the stimulus, level of attention given to the stimulus, attitude towards the stimulus, and action towards the stimulus (Cohen-Mansfield et al., 2009). Level of attention was based on eye contact and feedback that was either facial, motoric, or verbal, and it was measured on a four point scale: not attentive, somewhat attentive, attentive, and very attentive (Cohen-Mansfield et al., 2009). The attitude towards the stimulus was judged by positive or negative facial expressions, verbal content, positive physical expressions such as smiles or laughs, or negative expressions including pushing away and cursing (Cohen-Mansfield et al., 2009). Cohen-Mansfield et al. evaluated action towards the stimulus object on whether the participant held it, manipulated it, talked to it, talked about it, disrupted the activity, or interacted inappropriately. The target and content of the participant's speech was also recorded in writing by the researchers (Cohen-Mansfield et al., 2009).

In a study measuring the effectiveness of Montessori-based activities for individuals with dementia in an adult day care setting, the researchers, Judge et al. (2000), observed four main categories of engagement: constructive engagement, passive engagement, non-engagement, and self-engagement. They defined constructive engagement as "any motor or verbal behavior exhibited in response to the activity in which the client was taking part" (Judge et al., 2000, p. 43). Passive engagement included "listening and/or looking behavior exhibited in response to the activity," while non-

engagement was defined as “staring off into space or another direction away from the activity, sleeping, or any motor and/or verbal behavior activity in response to an activity the client was not currently participating in” (Judge et al., 2000, p. 43). Lastly, self-engagement was defined as “motor, verbal, listening and/or looking behavior during a transition period when an activity was not currently being offered or when the client chose not to participate in the scheduled activity” (Judge et al., 2000, p. 43).

In their qualitative study, Sauer et al. (2014) compared the observed well-being of people with dementia who participated in an intergenerational, person-centered art activity to the well-being of people with dementia who participated in more traditional visual art activity. It is important to note that each of the participants in the person-centered art activity received one-on-one assistance with the activity from a student volunteer. To measure the quality of life observed, Sauer et al. recorded both activities on video and then rated their observations based on their revised version of the Greater Cincinnati Chapter Well-Being Observation Tool (Table 1). They separated well-being into three positive categories—social interest, engagement, and pleasure—and contrasted it with four categories of ill-being—disengagement, negative affect, sadness, and confusion (Sauer et al., 2014). At the conclusion of the study, their data showed more characteristics associated with well-being in the group engaged in person-centered, intergenerational art activities than were present in the control group (Sauer et al., 2014).

Well-being domains	Indicators	Operational definition
<ul style="list-style-type: none"> Social interest 	<ul style="list-style-type: none"> Interest in others (e.g. eye contact, politely smiling) Without prompts offers support Acknowledges support Seeks approval/affirmation Initiates or engages in conversation Verbal/non-verbal expression of assertiveness 	Participant makes eye contact, eyes following object or person; attempts to socialize by extending hand, pat on shoulder; turning body toward or moving body toward person; chats with others (does not have to have sustained conversation or even intelligible conversation); smiles; offers and receives support from others during session.
<ul style="list-style-type: none"> Engagement 	<ul style="list-style-type: none"> While engaged sustains attention Requires verbal prompting and cueing Seeks task support Engaged in task-related conversation 	Participant is able to attend to project or activity for 5 min at a time; participant stays focused on the task at hand; ideally enters a state of "flow" or total engagement; engages with others for task-related support and initiates in task-related conversations; participant may engage in conversation with facilitator during the activity but major focus is task-related.
<ul style="list-style-type: none"> Pleasure 	<ul style="list-style-type: none"> Smiles, laughs Verbal/non-verbal expression of pleasure/enjoyment Verbal/non-verbal expression of pride Verbal/non-verbal expression of satisfaction 	Verbal expression of pleasure while participating in the actual activity; eyes crinkled, smiles, laughter; relaxed facial expression; nods positively, relaxed body language; participant expresses enjoyment of being creative, pride of his/her piece of art, and satisfaction both verbally and non-verbally.
Ill-being domains	Indicators	Operational definition
<ul style="list-style-type: none"> Disengagement 	<ul style="list-style-type: none"> Neutral passivity Sleeping Staring into space Leaving activity area 	Participant is not engaged in the activity; stares down or into space; falls into a deep sleep; leaves the activity area.
<ul style="list-style-type: none"> Negative affect 	<ul style="list-style-type: none"> Anger Physical signs of agitation Verbal/non-verbal expression of anxiety Verbal/non-verbal expression of frustration 	Closed body language, frown on face, angry verbal outbursts; facial grimacing, or brows furrowed; psychomotor agitation (hand tapping, moving in chair, leg jiggling, wincing); rapid breathing, eyes wide, frightened look.
<ul style="list-style-type: none"> Sadness 	<ul style="list-style-type: none"> Behavioral signs of sadness Verbalizes feeling sad 	Flat affect or weeping quietly; verbalization of feeling sad over situation; eyes drooping; sighing.
<ul style="list-style-type: none"> Confusion 	<ul style="list-style-type: none"> Verbal/non-verbal expression of confusion 	Participant shrugs his/her shoulders and does not know what to do with the materials at hand (e.g. paint brush, color palette); verbalizes feeling lost and asks what is happening.

Table 1: Greater Cincinnati Chapter Well-Being Observation Tool revised by Sauer et al. (2014)

Kitwood and Bredin (1992) developed twelve indicators of relative well-being, which they tested in observations of people experiencing dementia in various stages of cognitive decline, and found well-being to be independent of the state of cognitive ability. This aspect of their observational tool makes it appropriate for evaluation of group settings, such as the location of this study, where there will be individuals at various stages of dementia. The twelve indicators are the following:

- “the assertion of desire or will”
- “the ability to experience and express a range of emotions (both ‘positive’ and ‘negative’)”
- “initiation of social contact”
- “affectional warmth”
- “social sensitivity”
- “self-respect”
- “acceptance of other dementia sufferers”
- “humour”
- “creativity and self-expression”
- “showing evident pleasure”
- “helpfulness” and
- “relaxation” (Kitwood & Bredin, 1992, pp. 281-282).

Kitwood and Bredin claim that these indicators point to four different mental states of well-being: “self-esteem,” “sense of agency,” “social confidence,” and “hope” (Kitwood & Bredin, 1992, p. 283). Based in the idea of person-centered care, Kitwood and Bredin developed the Dementia Care Mapping tool in 1992, which has been used by dementia care centers for over 20 years to make observations and reflections on their practice to improve the quality of life for people with dementia (University of Bradford

School of Dementia Studies, 2015). This mapping tool provided a way for focusing on a care plan for an individual and for the group (University of Bradford School of Dementia Studies, 2015). The method involved an observer making notes in five-minute intervals of an individual's behavior, mood, and engagement; the observer also noted the quality of interactions between the staff members and the individual living with dementia (University of Bradford School of Dementia Studies, 2015).

Defining social and cognitive engagement

In defining cognitive engagement in this study, I examined the definition of engagement as described by Cohen-Mansfield et al. (2009), which is “the act of being occupied or involved with an external stimulus.” They specified *constructive* engagement as “motor or verbal behavior in response to the specific activity” (p. 300). To differentiate cognitive engagement from social engagement, I designated it as engagement with an external non-human stimulus. Given that definition, I designated social engagement as all engagement with other human beings in the participants' environment.

While not directly addressed in the studies by Cohen-Mansfield et al. (2009) or Judge et al. (2000), the measurement of social engagement was emphasized in the two remaining studies I reviewed. I expanded the social interest category used by Sauer et al. (2014) into the two categories of attention and attitude, inspired by Cohen-Mansfield et al. I then added 6 related indicators of well-being from Kitwood and Bredin (1992) to the social engagement category.

Defining well-being

There are some disagreements in how each of the studies defined well-being. One of the most noticeable differences is found in their interpretation of the expression of emotions. While Sauer et al. (2014) placed observations of sadness and frustration in the

category of ill-being, Kitwood and Bredin (1992) pointed to the expression of emotions, both positive and negative, as an indicator of well-being. In order to respect the individual's personhood, I decided to strive for a class environment supporting the expression of any emotion, and not immediately categorize that expression as negative. Such a position could be an opportunity for the person to feel validated and experience relief.

Cohen-Mansfield et al. (2009) and Sauer et al. both directed attention toward focused engagement, with the dictated activity as a sign of well-being. However, Judge et al. (2000) and Kitwood and Bredin (1992) would point to self-engagement and the expression of an individual's desire or will, including their possible refusal of an activity, as a more positive indicator. Judge et al. and Kitwood and Bredin's work have encouraged me to take a broad approach to what I consider positive engagement. For example, an individual may not be actively doing the activity the way I imagined, but they may be enriched by simply observing the activity or interacting with the materials in a different way.

Finally, many assessment tools do not ask the caregiver or person with dementia to give personal input on how the scale items are relevant to them, or make notes on the environment (de Medeiros & Basting, 2014). In light of this observation, I decided to ask the participants what they enjoyed most about the experience during the reflection time at the end of class. These observations are included in my data collection chapter.

Developed assessment for this study

After reviewing the four different approaches to observing engagement and well-being, I created an observational tool for this study divided into two categories: social engagement (See Table 2) and cognitive engagement (See Table 3). I was inspired by the

study by Cohen-Mansfield et al. (2009) for the first three aspects of cognitive engagement for my observational tool: attention, attitude, and action towards the activity. Drawing information from the study by Judge et al. (2000), I included “passive” and “active” as a description of attention in cognitive engagement. I also evaluated my observation of the participants for signs of the 12 indicators of well-being developed by Kitwood and Bredin (1992). I assigned each of the 12 indicators into either the social or cognitive category.

Observation Tool Key	Explanation
Social Engagement	The involvement of a person with other people in their environment
General Level of Attention to Others in the Class: (Disruptive, Not Attentive, Attentive, Very Attentive)	Does the participant make eye contact with others in the class, or make other physical signs of interest? Do they engage in conversation with others in the class?
General Level of Attitude towards Others in the Class: (Negative, Somewhat Negative, Neutral, Somewhat Positive, Positive)	Do they verbally expressive a positive feeling towards the others in the group? Nonverbally, do they express pleasure or dislike for others through smiles, laughs, frowns, sighs, or other types of body language?
Initiation of Social Contact: (Not Observed, Occasional, Frequent, Continual)	Participant attempts to gain the attention of another in the group.
Affectional Warmth: (Not Observed, Occasional, Frequent, Continual)	Participant expresses affection for others in class, physically or verbally.
Social Sensitivity: (Not Observed, Occasional, Frequent, Continual)	Participant notices when another person is emotional and changes their behavior to accommodate the other's feelings.
Helpfulness: (Not Observed, Occasional, Frequent, Continual)	Participant offers to assist another person in the class.
Acceptance of Others: (Not Observed, Occasional, Frequent, Continual)	Participant adjusts their own behavior as a reaction to the presence of another, such as moving aside for someone to pass by in the hall.
Humor: (Not Observed, Occasional, Frequent, Continual)	Participant makes verbal or nonverbal jokes and reacts to particular situations with humor.

Table 2: Observation Tool for Social Engagement

Cognitive Engagement	The involvement and level of focus of a person in an activity
Attention to Activity: (Distracted, Not Attentive, Passive, Active)	Does the participant make eye contact with the focus of the activity? Do they talk the stimulus, or talk about it to others? Do they ask questions about the activity? Or are they easily distracted?
Attitude towards Activity: (Negative, Somewhat Negative, Neutral, Somewhat Positive, Postive)	Do they verbally expressive a positive feeling towards the activity? Do they talk about the activity to themselves or others? Nonverbally, do they express pleasure or dislike for the activity through smiles, laughs, frowns, sighs, or other types of body language?
Action towards Activity: (No interaction, Inappropriate Handling, Manipulated with Assistance, Manipulated Independently)	How much did the participant interact with the activity stimuli?
Assertion of Desire or Will: (Not Observed, Occasional, Frequent, Continual)	Participant perseveres in the idea of what they would like.
Signs of Self-respect: (Not Observed, Occasional, Frequent, Continual)	Participant shows courtesy and politeness in their behavior.
Creativity and Self-expression: (Not Observed, Occasional, Frequent, Continual)	The participant makes their own individual choices in deciding how to approach their artwork.
Expression of Emotion: (Not Observed, Occasional, Frequent, Continual)	Participant expresses emotion, such as sadness or happiness, and eventually returns to a state of neutrality.
Demonstration of Pleasure: (Not Observed, Occasional, Frequent, Continual)	Participant shows physical signs of pleasure, such as laughing or smiling.
Relaxation: (Not Observed, Occasional, Frequent, Continual)	Participant physically holds their body in a loose way that does not reflect any tension.

Table 3: Observation Tool for Cognitive Engagement

CONCLUSION

With knowledge of the nature of Alzheimer's disease, practical advice from experienced practitioners in the field, prepared observational tools, and the theory of person-centered care (Kitwood & Bredin, 1992), I set out to develop my lesson plans for the three classes of my study. Within my chosen methodology of action research, these three classes were treated as three cycles of research. In the next chapter, I describe the action research methodology and how I specifically employed it for this study.

Chapter 3: Methodology

INTRODUCTION

The purpose of this study was to closely examine and reflect upon the entire experience of facilitating art making for a group of people with Alzheimer's disease. It focused on refining practice and finding nuances and new insights into this specific activity. The study's purpose is supported by de Medeiros and Basting's (2014) suggestion for cultural arts interventions to focus on how the activity is delivered to the participants and what kind of engagement it affects—to focus on asking questions that begin with “how” and not “what.” Based on this purpose, I found the qualitative approach to data and analysis to be best suited for answering the question of “how” in regards to the social act of teaching.

To address my research question of how to support cognitive and social engagement for individuals with Alzheimer's disease, I chose to use an action research methodology with qualitative data collection. One important benefit of this open-ended and inductive process of action research is its strength to provide an opportunity to discover new aspects of the research subject. De Medeiros and Basting (2014) stated its benefit this way: “Qualitative approaches, which can yield rich description of the environment and actors, are important to understanding the many facets of a complex notion such as QoL [quality of life], while also providing insight through which better instruments and measures can be developed and tested” (p. 352).

Another of my primary reasons for choosing action research is how it combines research and practice (McNiff, 2002; Zuber-Skerritt & Fletcher, 2007), resulting in immediate benefit to my practice as a teacher and the experience of the study participants. In addition, I hoped to offer details and insight into facilitating a group class that could be helpful to fellow practitioners—caregivers and art educators—while also

encouraging them to be self-reflective in their own practice. By engaging in action research, I am also contributing to the collection of teacher-led action research, which publicly records and examines the intuitive process of self-reflective teachers. This record strengthens the validity of the educator's profession and challenges educators to take active roles in their own continuing education (McNiff, 2002).

ACTION RESEARCH

Action research is supported by the ideas of John Dewey (1938), who called for the teacher to take the responsibility of observing and guiding each individual student's experiences for optimal learning. The first use of action research began with the work of John Collier, commissioner of the Bureau of Indian Affairs from 1933 to 1945, and social psychologist Kurt Lewin in the 1930s and 1940s (Efron & Ravid, 2013). It was applied to the field of education in 1953 by Stephen Corey, dean and professor of education at Teacher's College (Dana, 2013; Efron & Ravid, 2013).

Essentially, action research is defined by its action; it is working for positive change in a situation as much as it is developing research. Cohen et al. (2011) detailed action research as two types: critical action research that is participatory and democratic, involving the group of participants in the research decisions; and the second type, which places the teacher in the role of researcher to be self-critical and reflect upon her or his practice. My study follows the second type, so I adopted the following definition of action research: "a form of disciplined inquiry, in which a personal attempt is made to understand, improve, and reform practice" (Cohen et al., 2011, p. 345). This form has also been called "classroom action research" (Stout, 2006, p. 195). The primary focus of my study is on my practice as a teacher of a group of participants with Alzheimer's

disease. The elements of reflection and of self-critical awareness are key to the methodology (McNiff, 2002; Zuber-Skerritt & Fletcher, 2007).

Action research gives equal value to the perspectives of the active participants in a system and the observers (McNiff, 2002). It encourages collaboration and the inclusion of multiple perspectives (McNiff, 2002; Zuber-Skerritt & Fletcher, 2007). This approach is in contrast to the empiricist, positivist tradition that aims for objectivity and encourages hierarchical structure and a separate, neutral researcher (McNiff, 2002). Rather, the understanding of action research is that observations are subjective and must be done by the active participants within the researched system, in order to provide insight into the complex nature of human beings (Zuber-Skerritt & Fletcher, 2007). My study involved collaboration through an interview process with the volunteer and the MAP director, who were also working with me to facilitate the three classes. Their feedback and perspective were invaluable in my revision and reflection of the class action plans. I also consulted with the MAP director when I wrote the original lesson plans for the three classes. After each class, I interviewed the MAP director and volunteer separately for their feedback and perspective on the class. Based on their feedback, my own reflections, and discussions with my thesis supervisor, I listed revisions for the next class. Before the next class, I shared the revised lesson plan with the volunteer and the MAP director.

McNiff (2002) outlined how action research can specifically be applied to the field of education. He described the practice of action research as a repeating cycle of “planning, acting, observing, reflecting, and re-planning” (McNiff, 2002, p. 7). The planning stage begins with a problem identified by the researcher, and concludes with the research and development of a possible solution (McNiff, 2002). The solution is then conducted and observed in the acting and observing stages (McNiff, 2002). Next, the researcher reflects upon the enactment of the solution individually and collaboratively

with other active participants in the study (McNiff, 2002). After developing some revisions for the next cycle of research in the re-planning stage, the next cycle begins with the acting stage (McNiff, 2002). In this study, I treated each of the three classes as its own cycle in the research.

Complexity theory

The use of action research as an appropriate methodology in educational settings, such as a classroom in the case of this study, is supported by the complexity theory. Complexity theory, as it is applied to the field of education, addresses the particular subject of study as a holistic system instead of narrowly focusing on just one part of a system (Cohen et al., 2011). It acknowledges the interconnectedness of all elements in a system and does not look simply for linear cause and effect (Cohen et al., 2011). The research subject is seen as greater than the sum of its parts, and so it must be treated as a whole (Cohen et al., 2011). I found this theory a fitting way to think of a class environment where the participants are each unique and many human interactions are happening at once. De Medeiros and Basting's (2014) review of cultural art interventions supported the holistic study of the individual and their surrounding social network, since the cultural arts not only "involve[s] meaningfulness, creativity, and imagination, they [also] involve social connectedness and engagement with the outside world" (p. 351).

According to complexity theory, a system grows and improves through feedback, connectedness, and self-organization (Cohen et al., 2011). Positive and negative feedback occurs between the different elements of the system (Cohen et al., 2011). As in action research, an important aspect of complexity theory is the inclusion of multiple perspectives from those within the system (Cohen et al., 2011). The connectedness of all the elements means that each element influences the health of the entire system (Cohen et

al., 2011). Self-organization develops order from within the system, instead of being controlled by an external force (Cohen et al., 2011). For this reason, the researcher in action research plays an active role within the system instead of objectively observing the setting in question.

Validity

The validity of this study is supported by triangulation and disciplined subjectivity. Disciplined subjectivity, also known as reflexivity, involves acknowledging and reflecting upon my own bias as the researcher and pre-conceived ideas throughout the research process (Efron & Ravid, 2013). Triangulation “is the practice of relying on more than one source of data by using multiple methods or obtaining varied perspectives” (Efron & Ravid, 2013, p. 70). To enable triangulation in my data analysis, I collected data using different methods and including the various perspectives from those involved in the study. The different perspectives in the collected data came from the participants in the form of their artwork, from the MAP director as interviews, from the volunteer in written interviews, and from my own written observations of the class. The methods of data collection included audio recordings of my interviews with the MAP director, photographs of the classroom environment and artwork, and the written observations and interviews.

DATA COLLECTION

My methods of data collection included interviews with the two individuals assisting me with the class, my written observations, and photos of the classroom environment and of artwork produced by the participants.

To include multiple perspectives and collaboration in the design of the data collection, I interviewed the volunteer and the director of the MAP, who were both

assisting me in teaching the class. I provided the volunteer with a consent form permitting her to be interviewed. She signed it and agreed to reply to my questionnaire via email after the first and second class. On her request, I emailed her the list of interview questions. Questions I sent to the volunteer are found in the “Guide for Interview Questions,” offered below. I focused the questions on examining the engagement of the participants and discussing ways to increase engagement.

I interviewed, in person, the director of MAP, Theresa Zelazny, after each class. She also signed a consent form to be interviewed. I made audio recordings of our interviews and later transcribed them. I followed the “Guide for Interview Questions” below and asked clarifying questions to gain more details and confirm that I understood her responses correctly. I used a semi-structured format to our interviews in order to encourage conversation and discussion on the topics directed by the interview guide (Ayres, 2008). The open-ended format provided an opportunity for details and nuances about the class experience to be discovered more than would be possible in a rigidly structured interview. Our interview after the first class was conducted in her home, and the following interviews were held in a local café she suggested. The interviews were all less than 30 minutes in duration. The interviews were audio-recorded on my personal smart phone, which is password-protected. After I finished transcribing the interviews, the audio recordings were deleted.

Zelazny provided the perspective of a “critical friend,” a concept described by McNiff and Whitehead (2009, p. 173). The purpose of the critical friend is to assist the researcher with developing a critical perspective towards the study and providing another viewpoint to validate the collection and analysis of the data (McNiff & Whitehead, 2009). As director of MAP, Zelazny was also able to ensure that the study was contributing towards the mission of the organization, and she was able to provide insight

from her years of experience as an art instructor of individuals with Alzheimer's disease. I also discussed the collected data from each class with the study's supervisor, Dr. Christopher Adejumo, who was also able to offer a valuable, critical perspective as an art educator.

Guide for interview questions

1. Did you observe any of the participants exhibit any indications of social interest, engagement, or pleasure during the class, and if so, which did you notice?
2. Did you observe any of the participants exhibit any indications of disengagement, negative affect, sadness, or confusion during the class, and if so, which did you notice?
3. Do you have any ideas for why the participant responded in this way?
4. At which part of the class did you notice these indicators?
5. What did you think was the most engaging aspect of the class?
6. If you could change anything to make the class more engaging for the participants, what would you change?
7. Did you observe anything else during the class that you would like mention?

Additional questions for the MAP director only:

8. Was any of the participants' behavior noticeably different during or after the class than it had been before the class?
9. Since the beginning of this series of class, have there been any noticeable changes in any of the participants' behavior when they are not at the class?
10. Have any of the participants attended similar art classes in the past, and if so, how did the classes affect their level of engagement or behavior?

11. From your observations of each participant, could you tell me which stage of Alzheimer's disease you think they are in?

I recorded my observations from each class in the form of a narrative, which I wrote in the two-week period following each class. The classes were held every other week on Tuesdays from 2:00 to 3:30 PM. To add a structured element to my observations, I completed the observation tools for cognitive engagement and social engagement for each participant after each class, in addition to my narrative observations. Filling out the observation tool gave me a way to compare the participants' behavior from class to class and reflect on their engagement during the class. I developed these observation tools as part of my literature review (See Table 2 and Table 3).

To add breadth to the collected data, I photographed all the participants' finished artwork after each class. In addition to the participants' artwork, I also photographed the classroom environment. This visual data provided me with an opportunity for triangulation in my data analysis, contributing to the validity of the study's conclusions (Efron & Ravid, 2013). I edited and stored these photos in my personal computer, which is password-protected. I labeled the digital files using pseudonyms to protect the participants' confidentiality.

DATA ANALYSIS

The data analysis occurred within the action research cycle of "planning, acting, observing, reflecting, and re-planning" (McNiff, 2002, p. 7). During the two-week reflecting period between each class, I analyzed the collected data from the previous class. This analysis and triangulation between the various data inspired the revisions applied to the next class.

In my final thematic analysis of the collected data from all three classes, I coded for indicators of well-being and emergent themes within the categories of social and cognitive engagement. By including the various methods of collecting data and different perspectives, I employed triangulation and reflexivity in the data analysis to increase validity for this study.

STUDY LOCATION & ORGANIZATIONS

The examined experience in this study consists of the three classes that I designed and facilitated as an intern with the Mobile Art Program (MAP) in Fall 2015. The classes were held at the Austin Adult Day Health Center of AGE of Central Texas.

My internship responsibilities at MAP included teaching and assisting with art classes, developing lesson plans, preparing materials, and researching grants. Theresa Zelazny, the director of MAP, granted permission for me to conduct this research study on my involvement with this series of three classes. Along with providing a signed site permission letter representing MAP, she also agreed to be interviewed personally as part of the research study and signed the interview consent form.

As a non-profit organization, MAP “delivers art activities to seniors and adults with disabilities living in Austin, Texas” (MAP, 2014, “Mission and Goals”). Their classes are offered for free, and their focus is directed toward providing classes in low-income areas, including low-income nursing homes, Alzheimer’s respite programs, and adult day programs (MAP, 2014). They view the role of art to be a way for providing an opportunity for expression, increasing quality of life, improving cognitive skills, building friendships, and dealing with difficult experiences (MAP, 2014).

AGE of Central Texas is a nonprofit organization with the mission of “tackling the challenges of aging with expert solutions” (AGE of Central Texas, n.d., “Our Mission

& Vision”). The Austin Adult Day Health Center is located in a large room within a larger building housing the AGE of Central Texas administrative office and other non-profit organizations. I arranged the details of the study with the activity director of the Austin Adult Day Health Center. She signed the site permission letter and provided us with the use of their multi-purpose room, which is a small room connected to the main room of the health center by a door that can be closed to provide some separation from the other ongoing activities.

The center is a licensed day care program, open Monday through Friday from 7:00 a.m. to 5:30 p.m. (AGE of Central Texas, n.d.). The stated purpose of the center is to “enable older adults to socialize with peers while receiving the care they need during the day” (AGE of Central Texas, n.d., “What We Do,” para. 1). They have a full-time nurse at the center to assist with medication and health needs, and they also provide activities, meals, and snacks (AGE of Central Texas, n.d.). The cost is \$60 per day and is eligible for Medicaid and veteran benefits (AGE of Central Texas, n.d.).

PARTICIPANTS

At my request, the activity director at AGE of Central Texas’s Austin Adult Day Health Center collected registration information, including permission forms, from the legal representatives of a selection of regular participants at the center whose records indicated they had been diagnosed as having dementia caused by Alzheimer’s disease. Based on her experience and knowledge of the participants, she also limited her selection to those who showed interest in visual art making. Because of the size of the room and my desire to have close to a one-to-one ratio of assistants to participants, I asked the activity director to enroll no more than eight participants. For each participant registered for the class, she gave me a form signed by their legal representative, granting us

permission to include them in the research study. I filed digital copies of the permission forms in a folder on my computer, which is password-protected.

CONCLUSION

When considering which methodology would enable me to examine the process of art making as a way of supporting engagement for a group of individuals with Alzheimer's disease, I chose action research for its focus on observing a complex system from the inside as an agent of change. It lends itself to a collaborative atmosphere within a classroom with the inclusion of multiple perspectives, and it examines the holistic system through many methods of data collection. Action research also provided me with an opportunity to improve my practice as an art educator for this specific population for my own professional development. My hope is for the recording of my experiences and discoveries will contribute to the community of caregivers and art educators who are working with people with Alzheimer's disease.

In the next chapter, I compile a description of each of the three classes from my observations and interviews with the MAP director and volunteer. After each class description, I list revisions, resulting from my reflections and feedback from the MAP director, the volunteer, and the study supervisor. An evaluation of the proposed revisions follows the second and third class descriptions.

Chapter 4: Data Collection

DESCRIPTION OF PARTICIPANTS

For the first class, the activity director of the AGE Adult Day Health Center told me in advance that she had collected consent forms from the legal representatives for four participants, two men and two women. For the second and third classes, she received and passed on to me consent forms for two more men. She had chosen the participants from among the members of her program based on their inclination towards art, the availability of their legal representative to sign the permission form, and their diagnosis as having dementia caused by Alzheimer's disease. She gave me their signed permission forms in advance of their participation. Here I will refer to the participants as Ms. A., Mr. B., Mr. D., Mr. E., Ms. M., and Mr. R. The director of MAP had also told me that, in addition to herself, we would have one volunteer assist with all three classes. This volunteer had volunteered with MAP in the past and usually assisted with MAP projects at this particular location. In the class descriptions, I have used the term "class facilitators" to refer to the MAP director, the volunteer, and myself.

Based on my observations and interviews with the MAP director, I have described below each participant's symptoms related to their dementia and their approximate stage of Alzheimer's disease at the time of this study.

Out of the six participants, Mr. B. had the least severe symptoms. He could easily begin and continue conversations, and he could complete most of the steps to the projects independently. The MAP director told me that, compared to her experience with individuals experiencing early memory loss in the mild stage of the disease, Mr. B.'s lack of inhibitions indicated he was experiencing early symptoms of the moderate stage rather than just the mild stage. When she worked with individuals in the beginning mild stage, she said they were in denial of their diagnosis and much more resistant to participating in

art activities that could be perceived as “childish.” However, Mr. B. was proud to show me the artwork he had created previous to the class and enthusiastically participated in all three classes.

On the other end of the spectrum, Mr. D. exhibited later symptoms of the moderate stage of the disease and seemed to be progressing towards the advanced stage. The MAP director said she didn’t know that he would be able to keep coming to the facility much longer, because he was getting lost and not recognizing where he was.

We only had limited opportunities to get to know Ms. M., since she declined from participating in the classes longer than the first few minutes of the first two classes. However, even though English was not her first language, she was able to effectively communicate verbally with us her desire to return to the main room. Although we were not able to discover how much memory loss she was experiencing, she did seem to be easily confused by new situations. These symptoms indicated a moderate stage of the disease, specifically in the way she was not able to “cope with new situations” (HHS, 2015, p. 3).

An AGE staff member and the MAP director informed me that Ms. A. was prone to wandering and easily distracted from an activity. The volunteer noted that she was also easily confused by each new step of the project. Her difficulty to “carry out multistep tasks” pointed to the moderate stage of the disease (HHS, 2015, p. 3).

Mr. R. seemed to also experience some later symptoms in the moderate stage of the disease. Mr. R. was easily confused by the steps of the project and needed continual assistance and reminders of what to do next. He also struggled to communicate verbally at times.

Mr. E. was able to communicate more effectively than Mr. R. and Ms. A., but he did appear to have some memory loss. The MAP director reported that he has denied

doing art when she asked him, however, his daughter told us that he used to be an avid woodworker and currently makes art frequently.

PREPARATION OF ENVIRONMENT

Before each class, I arrived an hour early to set up the designated classroom, which was a small room connected to the larger room by a door. I informed the few people who were in the room an hour ahead of time that the art class would be occupying the room.

The classroom was small, with one small window and fluorescent lights, and had an assortment of chairs and tables. There was a side table set up along the wall with a computer, Wii controllers, and speakers. Above the side table was hung a large flat screen monitor. Along one wall was a bookcase with various books, games, and puzzles. Tissue-paper decorations were hung around the room. It seemed like this room had been set up originally with a few different purposes in mind, but in my experience, I only observed it being used as a staff break room and for puzzles. See Figure 1 in Appendix for photographs of how the classroom appeared before I set up for the class.

For each class, I centered the table in the room and added a second table from the main room to line up with the first, so that there would be space around the sides for all the participants. I brought in a couple chairs from the large, main room to place around the combined tables. For the first class, I then set up the projector and laptop on the side table. For all three classes, I laid out the paint and supplies on a low coffee table in the corner of the room. I took a photo of the set-up (Figure 2 in Appendix) for reference. Finally, the MAP director and I covered the tables with white paper to assist with clean up and provide a clear, clean surface for working.

DESCRIPTION OF FIRST CLASS ON OCTOBER 20, 2015

Within the descriptions of each of the three classes, I interweave my observations with the notes and viewpoints of the MAP director and volunteer taken from their interviews. Their perspectives and observations on how the class proceeded were valuable in creating a rich description.

Music playlist

I connected speakers to my smartphone and set them up on the same side table. I had prepared a playlist on my smartphone's music application in advance for the class. I hoped that this would create a warm but focused environment. I chose pieces that expressed a range of emotions, but overall had a mellow, relaxed, and meditative feeling. The chosen songs were purely instrumental, since I thought that lyrics might be distracting. The range of emotions in the chosen music was important, as the art activity was based on expressing emotions through abstract art. I did not want to limit the painting to one emotion, but to give open-ended options to the participants. To ease the transition, I started playing the playlist softly through the speakers as the participants were entering the room. The playlist consisted of the following songs in this order:

“Hover 1” (Bird, 2013, track 5)

“Hover II” (Bird, 2013, track 6)

“Appalachia Waltz – Solo Cello Version” (O’Connor, 1999, track 1)

“Ethio Invention no. 1” (Bird, 2013, track 1)

Directions for volunteer

The volunteer arrived 10 minutes before the class. I showed her and the MAP director my example painting and explained the basic schedule and process of the lesson to the volunteer. The MAP director asked the volunteer if she would also participate in

making a painting, since there would be a small number of participants that day. The MAP director explained that seeing someone else doing the activity would encourage the participants to be engaged with the project.

Introduction to project

Ms. M. and Mr. B. were both guided into the classroom by the AGE Adult Day Center activity director. She told us that Ms. A. was not feeling well enough to participate that day, and Mr. R. would be in after using the bathroom.

The MAP director went to the main room to assist Mr. R. with finding the class, and I closed the door. Ms. M., Mr. B., and the volunteer all sat around the table facing the projected image on the wall.

I introduced myself and the volunteer to Ms. M. and Mr. B. Then I set the projector on the table and stood behind it to start showing the four images of abstract pieces by Kandinsky. (See Figure 4 in Appendix for the four images from the slideshow.) I explained that Kandinsky was one of the first to work in the abstract expressionist style, and he was inspired by the expressive qualities of music to find ways to express with art.

I asked what the participants saw in the first image in the slideshow. At first there was silence, so I suggested my own interpretation of a calm, centered feeling because of the large blue shape in the middle of the image. Mr. B. pointed out the colored areas that reminded him of stained glass windows. The volunteer made a comment about how she appreciated the varied interpretations possible with abstract work. I asked Ms. M. what she thought about the piece, but she did not respond.

I moved on to the next image in the slideshow. Mr. B. was very engaged in discussing the artwork and bringing up his own questions, which was more participation than I had expected based on my previous experiences with MAP. Noticing that Ms. M.

did not contribute to the conversation and thinking that she might need some encouragement, I asked her again what she thought. She said that she liked this piece better than the first one.

After a few more minutes of discussion, I switched to the third image. At this time in the class, Ms. M. said to me that the class was nice, but she would prefer to be in the main room. The group in the main room was beginning a yoga and dance activity. I said that of course she could go to the large room and that she was welcome to return to the art class whenever she liked. I was told later by the MAP director that Ms. M. has some difficulty understanding English, since it was not her first language. In her interview, the volunteer offered another reason for why she preferred to return to the main room. She pointed out that Ms. M may have felt more comfortable in the main room, where she could “blend in” with the rest of the participants and not have to answer as many direct questions.

At this point, the MAP director had returned to the room, so I moved to the last image in the slideshow and asked what they thought about the last piece. I mentioned the last piece seemed more chaotic to me than the previous three. The MAP director commented that the repeated groups of small black lines appeared to be flying around the canvas. Mr. B. said the same lines reminded him of a time when he had accidentally spilled some food in a closed off area of his house and later had returned to the area to find a bunch of rats. He remembered how his wife had been upset about the event.

At this point in the class, Mr. R. joined us. I briefly summarized what we had been discussing for Mr. R., and then I asked him what he thought of the image that we were looking at on the screen. He did not say much about the image. We flipped back to the past three images to briefly summarize for him the different thoughts we had discussed with each one. The MAP director later told me that she thought the participants

were probably “a little nervous” when were looking at the images of artwork, but “they warmed up as it moved along.”

I turned off the projector and moved it to the side table to make room on the art table, and then I moved to the other side of the table to stand in front of the seated participants. Pointing to my example piece (See Figure 5 in Appendix), I introduced the project idea of making our own abstract pieces. I brought the example closer to the table, while explaining how I first picked a background color to paint with a wide brush over the entire surface. Then pointing to the large, dark blue marks, I explained that I used a feather to paint that specific texture. I explained that I had used a pine cone to make the small white marks at the top of the image. To demonstrate, I painted a swatch of blue paint on the paper mounted to my easel. I picked up a piece of torn cardboard—one of the textural objects I had brought—and dipped into the orange paint on my palette and made marks on top of the blue swatch. Then I encouraged the participants to pick a color to start with for their background and communicate their choice to one of the class facilitators.

Art making

With the playlist still playing in the background, I set out the different textural objects (See Figure 6 in Appendix) in the center of the table, picking up each one and explaining what it was. The volunteer, MAP director, and I began to distribute to each participant a painting board on a table easel, a white paper plate with their chosen colors of acrylic paint, a wide flat brush, a rag, and a plastic cup of water (See Figure 3 in Appendix. Please note that this photo does not include the table easels.)

The MAP Director and I assisted Mr. R., while the volunteer helped Mr. B. get set-up and choose his first color palette. Since it seemed difficult for Mr. B. to choose a

color to start with, I gave him and the volunteer the paper color wheel to use to get started. After they picked a color, I gave the color wheel to Mr. R. to help him pick a color. Mr. R. chose to start with orange, and Mr. B. chose to begin with purple. Once Mr. B. was working with his painting, the volunteer proceeded to sit at the end of the table next to him and work on her own painting with the same set-up and supplies.

Mr. B.

Mr. B. engaged in conversation periodically throughout the class with the volunteer, the MAP director, and me. The MAP director and I both noticed how he asked specific questions and seemed engaged in the project and conversations. Mr. B. occasionally hummed along to the music playing in the background. He also added a humorous comment in our conversation and had a pleasant demeanor throughout the class. He expressed sympathy for Ms. M., who asked to leave early because of the language barrier. He remarked that it must be hard for her to not understand the language very well.

Mr. B. started with purple for the background of his first piece. The volunteer sat next to him and worked on her own piece as a demonstration. She noted in her interview that he seemed inspired to use additional colors and employ the different tools to create texture after observing her experiment with different colors and tools. He used the plastic wrap to create a textured border around the edge of the painting. At first he was dipping the plastic directly from the paint and dabbing it up-and-down on the painting surface. He said the result was not what he had been thinking it would be, so I encouraged him to rub the plastic in circular motions around on the surface to give it a more interesting texture. At the very end, he added the bright green to the center, which gave the image some interest in the center (see Figure 7 in Appendix).

As he was nearing completion of his first piece, a little over halfway through the class, he asked me if I could play anything more upbeat. I switched the music to a playlist of American folk tunes. I put this on, and I noticed that Mr. B. seemed to enjoy it and even said that he knew some of the songs. I told him that one of the songs we listened to—“Down by the Old Mill Stream”—had been one of my grandfather’s favorites, and he proceeded to sing the first few lines.

When beginning his second piece, I handed Mr. B. the color wheel again to help him choose his colors. He discussed it with the volunteer and said that it was too much and that he was tired. He looked overwhelmed, so I took the color wheel back. He took an extended break from his work to converse with the volunteer about the color options for his next piece and watch her work on her painting. The volunteer discussed his color choices with him and added the chosen colors to his palette. He started painting some soft, light blues and purples on the left side of his painting and seemed to be pleased with the result.

Eventually, he painted the left side with mostly hues of green and the right side with blues. There was a distinct contrast between the two sides. I remarked on this dramatic contrast and held it up to show him how it resembled either land and the ocean, or the land and sky. At the very end, he took some yellow paint and used some of the textural objects to create streaks of yellow crossing the two sides diagonally. He explained to me that the yellow paint represented “the act of God’s creation” (see Figure 8 in Appendix).

The MAP director noted that Mr. B. was engaged in exploring color, making marks, and listening to the music. She also remarked how it was nice to see him take a break and become inspired to begin working again. She also observed how Mr. B.

enjoyed engaging in conversations with me, the volunteer, and herself. For the most part, however, Mr. B. and Mr. R. did not engage in conversation with each other.

At 10 minutes before the end of class, I asked the volunteer if I could start the group reflection with her painting. She agreed, and I proceeded by holding up her painting and asking the group what they saw. The MAP director commented that it reminded her of an Asian landscape, with figures walking in the foreground and a sun moving in the background. Mr. B. looked at the painting and smiled. Next, I picked up Mr. B.'s first painting and then his second painting and introduced them to the class. Mr. B. said that he had initially thought his first piece not good enough to show but had since changed his mind. He seemed to be more proud of the work done on his second piece and the meaning behind it. When we looked at Mr. R.'s artwork, Mr. B. seemed to be engaged in looking at and admiring the paintings.

Mr. B. initiated conversations with me before and after class, as he wanted to show me work that he had done previously, which included a piece of artwork hanging on the wall of the main room and a collection of coloring sheets he was working on with watercolor pencils. He also offered to help us clean up after class, but we let him know that wasn't necessary.

Mr. R.

Mr. R. first painted an orange square in the center of his painting, and then he asked me what he should do next. I recommended for him to paint some more of the background. He asked which color to use, and I suggested that he try using some of the blue paint. Without washing or drying his brush, he painted the blue paint below the orange square, matching the width of the orange square's sides until the blue paint

reached the bottom of the canvas. He blended the blue paint on top of the orange by painting over the still wet orange paint with his paintbrush.

The MAP director and I remarked on how we liked the gradient that he had created. He then paused, looking like he didn't know what to do next, so I suggested that he continue to cover the entire surface with the orange paint. I also recommended that he dip his paintbrush in some water to help the paint flow more easily and cover a larger area at a time.

Most of his brush strokes moved from top to bottom, except at the bottom of the image surface, where he would move the brush strokes horizontally. I supposed that he changed the brush direction because it became easier to move the brush horizontally at the bottom where the board was resting on the easel. He proceeded to cover the entire board with orange paint, so that it was completely covered in paint with varying hues of browns from the remnants of the blue paint that mixed in as he painted over the entire surface.

At some point while he was working, he set his brush down and told me that he had heard a news story that day about a man who had shot his girlfriend. I told him that I was sad to hear the news. He remarked that things were getting crazy and it didn't use to be like that. The MAP director observed this interaction and suggested to me that he felt a need to engage in conversation with me, since I was working with him on his painting. By sharing a current news event, he made his own contribution to our conversation.

Then to encourage him to try something besides the brush and create some texture, I suggested that he paint with one of the textural objects and handed him the feather. He looked confused at how to use the feather with the paint and asked if he could use the brush. I suggested that he could use the brush to paint the blue paint on the feather. He meticulously covered the top half of the feather with blue paint with his

brush. When it appeared that he had added enough paint to the feather, I told him that the feather was ready to be applied to the image surface. He started in the top right corner of the board and painted in downward strokes to about the center of the right side. I remarked to him that it reminded me of a waterfall. He seemed to be focused on what he was doing. He eventually picked the brush up again and was painting the blue paint with both the brush and the feather, one in each hand. He put the feather down and proceeded to paint blue paint only with the brush until it covered the entire canvas.

Mr. R. told me that the music playing in the background sounded like opera. I took this to indicate that he may not have been familiar with the music being played. He also had some difficulty saying the word opera. He said, "You know what I mean." I told him that I thought I understood his meaning. It took many repetitions before I was able to understand that the word he was saying was "opera," which looked as if it caused him some frustration. In her response to my interview questions after class, the volunteer brought up this particular moment. She noticed Mr. R. was frustrated in trying to find the right word and communicate it to me; she added that he was silent for a period after this occurrence.

When I noticed that he had covered the entire canvas with blue, I suggested he switch back to the orange. He asked if I could wash out his brush for him, so I washed out the brush in the water cup and dried it on the rag. He dipped the brush into the orange and painted the orange on the left side of the board surface and blended it outward in rounded brush strokes, creating a gradient to about a third of the surface from the left side. The majority of the canvas remained blue, with orange and brown hues showing through from the previous layers. I remarked to him that his painting reminded me of a fire at night like on a camping trip. He seemed pleased with this remark and agreed. We

talked briefly about camping. I asked if he was done with the painting, and he said yes. (See Figure 9 for a photograph of Mr. R.'s finished painting.)

I asked Mr. R. if he would like to do another painting, and he agreed. I removed his finished first painting and set it aside to dry, while the MAP director brought him a second board. The MAP director brought him a couple tubes of paint to choose from, and he decided to add green and yellow to his palette. I asked him which color he was going to start with. He indicated green and began brushing on the green paint to cover the entire canvas. The second time, Mr. R. seemed more confident in beginning and continuing his painting, as he needed less encouragement between steps. After covering the entire canvas in vertical strokes of green and yellow. I told him that his work felt like spring: very bright and cheerful. When I asked if he was finished, he said that he was not done and wanted to try adding some other colors. The MAP director brought him a palette with dark brown and light tan colors. He first added the tan to most of the surface of the painting, muting the brightness of the colors, and finished with adding the dark brown to only a few areas of the painting. These last actions brought more complexity and areas of contrast to the painting (see Figure 10 in Appendix).

Throughout this process of the second painting, he was very focused on the task with even fewer breaks in concentration or pauses than during his first painting. At one point, he asked me to bring him more dark brown paint to refill his palette, which showed his intention for the work and recognition of how he needed to proceed to accomplish his goal.

The MAP director noted in her interview that he seemed to be very relaxed throughout the class and to be enjoying the repetitive movement of the brush and application of paint. She also agreed with my description of him as “in the zone.” When I

asked her about how she observed him interacting socially, she described his participation in conversations as listening, but focused on painting.

In the reflection time, Mr. R. continued to work on his painting and did not pay attention to the work on display until I picked up his first painting to show everyone. He smiled, and I asked him if he was finished with his second piece and wanted to show the class. He agreed, so I also showed the class his second piece. Mr. R. was smiling and seemed to enjoy the attention given by the class to his paintings.

Reflection

15 minutes before the end of class, I announced that we were going to end soon, so everyone should finish their paintings. I had originally planned to start the reflection time at 15 minutes before the end of class, but noticed they were not finished. At 10 minutes before the end of class, I began the group reflection with the volunteer's painting. We were able to look at all of the paintings and have time for a short discussion on each.

Interviews

After I had cleaned up the room with the help of the MAP director and the volunteer, I thanked the volunteer for her help and asked her if she would be willing to be interviewed about her experience in the class that day and in the two future classes. She said that she would feel comfortable answering questions by email, so I agreed to send her the consent form and questions over email later that day. I met the MAP director at her house to review the class and to ask her the same interview questions on her observations of the participants and their engagement in the class. I obtained signed consent forms from the MAP director and volunteer, giving me permission to use the information from our interviews in my study.

Revisions

The following changes to my plan for the next class resulted from the information gathered from my interviews with the MAP director and volunteer after the first class. These revisions were also reviewed in a discussion with my thesis supervisor.

Revision one: Provide opportunities for interaction with materials at the start of class

In my interviews with the MAP director, the volunteer, and my thesis supervisor, they were all in agreement that the most engaging aspect of the class occurred when the participants were interacting with the materials. They all recommended that I revise the lesson to include some interaction with the materials at the very beginning of class to catch the participants' attention from the start. The MAP director, volunteer, and I predicted making this revision could affect Ms. M.'s reaction to the class from disinterest to engagement. Mr. B. was the only participant to actively engage in our conversations about the artwork in the slideshow, and the MAP director noted the participants, Mr. R. and Mr. B., seemed to be "a bit nervous" while viewing the slideshow but "warmed up as it [the class] moved along." By starting the next class with an easily accessible and engaging activity, I hoped to encourage an atmosphere of play and fun.

Therefore, I decided to not continue with the slideshow element in the next two classes. I printed several color copies of each of the artworks which inspired the project to include with the other supplies on the side table. I thought it would be more interactive for them to hold the prints in their hands, and they could keep them out as they work. My thesis supervisor also liked this idea because of its potential to decentralize the process of looking at the artwork and make it more tailored to each participant.

Revision two: Leave door open for the first five to ten minutes

Another common element that came up in my interviews with the MAP director and the volunteer was the need to make alterations to work with the nature of the classroom. The MAP director pointed out the room “felt cramped.” She and I both agreed it would be ideal to have a room with more natural light from windows and more space. Switching to another room was not a possibility, so I looked for ways we could make the room feel more inviting. In her interview, the volunteer suggested that since Ms. M.’s request was to return to the main room, she might have felt more comfortable in staying longer if the door had been open, connecting the two rooms. I decided to leave the door open for the beginning of the next class until everyone was engaged, and then I shut the door to decrease distractions from the noise of the activities in the other room.

Revision three: Provide for breaks for participants

The fact that Mr. B. returned to enthusiastically working on his painting after becoming tired and taking a short break indicated that providing for breaks, as needed, could increase the participants’ enjoyment and ability to re-engage with the materials later in the class. My thesis supervisor agreed with the idea of providing breaks within the time of focused work to break up the monotony of a class lasting one and a half hours. I decided to make efforts to be attentive to the participants’ needs for a break. I developed a few feasible ideas for breaks in our particular environment: bringing the participant a cup of water, taking a moment to discuss a reflection question for that lesson or look at the artwork which inspired it, stopping to discuss a participant’s artwork or the artwork of someone close to them, or reading a poem or some other inspirational writing.

Revision four: Manipulate materials alongside participants

It did not seem to me that the participants understood how to use the different painting materials just by watching my short demonstration on the easel at the front of the room. In our discussion following the class, my thesis supervisor suggested to use a more personalized approach, demonstrating and exploring the materials with each participant individually. This recommendation fit with the MAP director's suggestion for the volunteer to work alongside the participants to demonstrate by example. The volunteer agreed in her interview that Mr. B. was more engaged with the materials after watching her demonstrate how to use them. Working individually with the participants also provided opportunities for specific and positive feedback, which the volunteer observed to increase the participants' positive responses, such as smiles and participation in conversation.

Revision five: Provide more accessible options of art media

In the second lesson, I had originally intended for the participants to use brushes with black acrylic paint to paint the outlines of their portraits on the glass pane. After interviewing the MAP director, however, I discovered from her that the new participants in the second and third classes did not particularly think of themselves as artists or have a lot of prior experience with painting. I also noticed in my observation of the two participants in the first class that they may not be able to accomplish the small details of a portrait easily with a brush. After discussing the lesson plan with my thesis supervisor, I decided to provide sharpie markers as a simpler, more accessible medium.

Revision six: Develop a new playlist of music more familiar to participants

Based on the feedback I received directly from Mr. B. in his request for more upbeat music, I assembled a music playlist for the second and third classes, which

included popular recordings in the Big Band style from the 1940s and 1950s. Based on my estimation of the participants' ages and on Mr. B.'s knowledge of the song "Down by the Old Mill Stream," I hoped by including widely popular songs from this time period I would be playing music familiar to the participants. I intended for this music to assist in creating a comfortable atmosphere, encouraging the participants to relax and enjoy themselves.

Revision seven: Email lesson and reflection questions to volunteer ahead of time

After the first class, I realized I needed to do everything I could to make sure my mood was relaxed and welcoming to set the overall tone of the class. I planned to send the lesson outline to them a day in advance for the second and third lessons, so I wouldn't feel rushed in informing the volunteer and the MAP director of all of the details of the lesson in the few minutes before the class.

Revision eight: Ask for participant feedback in the class reflection

After seeing how the participants were able to communicate verbally and wanting to include as much of their perspectives into the study as possible, I determined to ask each of the participants what they liked most about the experience during the time of group reflection at the end of the class. I made this change in response to the call for including more subjective perspectives from people with dementia in research (Beard, 2012; de Medeiros & Basting, 2014).

Conclusion

The revisions I developed after the first class focused on how to create a pleasant atmosphere in the room and how to tailor the experience to each individual through one-on-one interactions. In creating a pleasant atmosphere, I took into account my own mood, the way the room was set-up, and how the class facilitators interacted with the

participants. I also incorporated a person-centered approach by asking for each of the participants to share their individual experience of the project with the rest of the group. In the next section, I describe the second class, evaluate my revisions, and list new revisions for the third class.

DESCRIPTION OF SECOND CLASS ON NOVEMBER 3, 2015

Participants

The AGE activity director was able to register two more participants: Mr. D. and Mr. E. She sent me their permission forms signed by their legal representatives. When we arrived for the class, the AGE activity director let us know that Mr. E. had already been picked up and taken home for the day. This brought our total number of participants up to six total, and five for this particular class.

Preparation of environment

I laid out the colorful pieces of paper throughout the center of the table. In front of each seat around the table, I placed a wooden shadow box (with the glass removed), a plastic cup, a brush, and a pair of scissors. We also had containers of matte medium on the table, which we added to the cups when the participants were ready to glue. The same painting supplies that we used in the first lesson were organized on the side table for the class facilitators to bring to the table when the participants were ready for them.

The MAP director and I taped each of the glass pieces for the frames to a rigid board with wide packing tape and taped the black-and-white printed photograph facing up, behind the glass. Then we placed each of the boards onto a table easel and taped it to the back with the packing tape. Since the glass was breakable, we wanted to take as many precautions as possible. I placed a tray of sharpie markers next to these prepared glass panes on the side table to be ready and out of the way until the second step of the project.

Introduction to project

Based on the feedback from the last class, I decided to start off with manipulating the art material, instead of beginning with viewing artwork. When each of the participants came into the room, I introduced myself and asked them to start looking through the decorative papers on the table to find their favorites. As they were looking and asking what the paper was for, I showed them the example project I had made in advance (See Figure 12 in Appendix). I removed the glass pane and showed them how I had first glued paper and cut images into the box, then added paint on top to unify the piece with a few colors.

Art making

For photos of all the artwork completed in this class, please see Figures 13 through 16 in Appendix.

Ms. A.

Before the start of class, I was talking to Mr. B.—who was sitting just across from Ms. A. at the table—about my young, preschool-age nephews and how they had a lot of energy. Ms. A. joined in our conversation and said in a playful way “Mikey, get down from here,” referring to the kind of thing you would say to little boys who are getting into mischief. I saw the comment as her way of being humorous and joining in the conversation.

At the beginning, when I was first showing her the material, she got up and started walking towards the door. The MAP director and an AGE employee redirected her to have a seat. Once she was working with the volunteer though, she didn’t wander. She would sometimes stand and work at the same time.

At first, she picked out the paper that had gold-colored areas. I noted her preference and said that it matched the gold sweater she was wearing. I guessed that Ms. A. might like to start with the group of images labeled “jewelry and purses,” so I asked the volunteer to bring that folder over and help Ms. A. pick some images. I asked Ms. A. if she liked shopping, and she said, “I like to look for...” I guessed that she meant to say bargains or deals, so I asked her if she liked to look for deals. She responded: “Oh, yes!”

She worked with the volunteer most of the time, as they collaborated together on the artwork. The volunteer said later in her written interview that Ms. A. needed multiple reminders and demonstrations from her on how to carry out the steps of gluing, painting, and tracing. As I observed her in the class, she looked very engaged and focused in painting the gold paint on top of the collage. The MAP director also observed that Ms. A. enjoyed painting the gold paint, which she attributed to Ms. A. being attracted to the shiny and bright color. Lastly, Ms. A. and the volunteer both worked on the drawing of her portrait onto the glass with the black permanent marker.

At the end of the class, I held up Ms. A.’s work to show the class, and Mr. B. and Mr. D. both attentively watched. I remarked how it seemed to radiate and glow from the center, where she had placed the distinct turquoise jewelry. She smiled and seemed pleased with the attention.

Ms. A. stayed afterwards to tell us how much she enjoyed the class and thanked us multiple times. She told us, “I just had the biggest time.” A couple of times at the end of the class, in reference to her portrait, she said, “See, I don’t look scary.” She also humorously added in our conversation at the end of class—when we were talking about what it takes to be a lady—that “a little make-up never hurt.” The MAP director described Ms. A.’s mood as “happy,” and said that she had never seen her in such a happy mood in any of the previous MAP art classes.

Ms. M.

She came into the room at the beginning of the class and sat down at the table. I sat down across from her and showed her what we were doing by pointing to my example and gluing on a new piece of paper. She watched and started looking through the paper. One of the AGE employees offered words of encouragement to Ms. M. to work on the project, and the MAP director also encouraged her to find some paper. She eventually picked out a black piece of paper with silver leaf patterns on it, and the MAP director assisted her with gluing it down inside her box. However, after that, she asked to go back to the large, main room. So, the MAP director walked with her back to her seat in the main room. Later, the MAP director told me that she thought that Ms. M. was confused being in a new room, and preferred her usual seat in the large room.

Mr. R.

Mr. R. came in a few minutes late to the class and told the MAP director at the beginning that he had been feeling nauseous. To start, the MAP director assisted Mr. R. with getting set up to paint blue on his background. He thoroughly covered the entire back of the box in an ultramarine blue paint, without pause or losing focus. She then encouraged him to paint the interior sides of the box with the same color. As he was painting, I commented on how he was being thorough with the background color, and he smiled.

After he was done with painting the blue color, the MAP director encouraged him to look at the colorful paper spread out on the table and pick some of his favorites. He paused for a while and didn't seem motivated to proceed. The MAP director told me that she thought he needed a break, so I suggested she bring him a cup of water. She did, and we waited until he had time to sit and drink his water until we encouraged him to continue with the collage.

Eventually, I sat down next to Mr. R. and asked him which papers he liked best to begin his collage. He pointed to a few papers in front of him, and so I showed him how to add glue to the back of the papers with the paintbrush. I asked him where each paper should go, and he pointed to locations in the box. I would place the paper where he pointed. Then I would ask him to pick another paper, and he would paint the glue on the back of it. I assisted him with placing each of the papers, one at a time, in this way.

Next, I helped him pick out his images to put in the collage. I pulled out a few bird images from the “bird” themed folder and laid them on the table for him to look at. I asked him which one he thought should go in the piece, and he said that it didn’t matter. I asked him to pick his favorite. After a few minutes, he picked the largest image of two birds on a branch. He put it inside the box, where he wanted it to go. I helped him cut it down, so that it would fit. Then I turned it over and showed him how to apply the glue to the back with a glue stick. He added the glue and then put it in the box a little off from the way that he had placed it the first time. I asked him if that is the way that he meant it, and he said no. So I assisted him in straightening it out to the location where I had seen him place it before. Although he had some difficulty physically making his piece, Mr. R. still had definite preferences for the design.

When it seemed like he was ready to move to the next step, I brought him a handful of food images to choose from. It took him a few moments to look at them, and he didn’t seem like he was going to make a choice. So, I suggested the pie. I asked if he liked pie, and he seemed to light up and responded an emphatic “yes.” I cut the pie image out in a circle and gave it to him. He added glue and then placed it at the bottom of his box’s interior.

At the end of the class, I asked Mr. R. if he was finished and ready to show his piece. He said yes and agreed to present it to the class. I picked it up and held his shadow

box at the front of the room. I asked Mr. R. what he thought about the project, and he said that he liked it. I pointed out that his pie made me hungry, and that brought some laughs from the group. At the end of class, Mr. R. was smiling when we talked about his work. He said that he liked the way it turned out, and he told the MAP director that he felt better.

Mr. B.

Mr. B. came early to the class and was the first one there, so I explained to him what we were doing and showed him my example. He asked if I had put the paint on before the collage or after, and I explained that we would glue the images down first before painting. He walked around the table and gathered several different kinds of paper: one with music notes and some that were a blue color. He said that music was important to him, which is why he picked the image of the music notes.

Mr. B. asked about my family, so I told him about my two nephews, who are four and two years old. He responded that he has two grandsons, who are one and three years old. I turned on the playlist of swing music, and Mr. B. started humming. He asked, “Are we going to dance today?” He asked me if I danced much, and I said sometimes I like to go swing dancing.

He asked if he could paint the background first, because he was worried about covering up the images with paint. I said that he could definitely do that if he preferred. He asked for blue paint, and so I gave him a palette with dark blue, light blue, and white acrylic paint. He did not waste any time in painting the blue on the background with broad “painterly” strokes, making gradations with the white and lighter blue colors mixed with the dark blue.

Mr. B. was the only participant to use the scissors for his collage. He used them to cut up the paper and a landscape image into vertical rectangles, which he employed in his collage. After he had glued everything down, he mentioned to me that one rectangle was crooked on one side. I pulled it up, gave it to him, and suggested that he straighten the edge with scissors. He did this and then glued it back in place on the image surface where it had been. He seemed happy about the change.

The MAP director suggested that he use the image of a bird on top of his cut paper. He asked me what I thought of the bird on top of the blue square, and I responded that I liked it because it provided a focal point and helped break up the rigid lines created by the squares. He liked the feedback and glued the bird down.

Next, he moved on to the step of drawing his portrait onto the glass, which he did mostly independently of any assistance. We set up the table easel in front of him with his photograph taped behind a piece of glass, which was taped to a rigid board. He was given a black permanent marker, and he proceeded to trace his outline with the marker. He worked slowly and concentrated on each small detail. He even wrote the words that appeared on the front of his t-shirt in the photo.

When asked about what his favorite part of the class was, Mr. B. responded that he most enjoyed talking with the class facilitators. He said that he enjoyed discussing the artwork with us and being encouraged to do art in new ways. In her interview, the MAP director also remarked on the “very positive” interaction between Mr. B. and the class facilitators, as he asked us “relevant questions” about his artwork.

Mr. D.

I sat next to Mr. D. to assist him with the beginning of his project. First I suggested that he pick out some paper he liked, which he did. Then I showed him how to

paint glue onto the back of the paper and lay it inside the box. I worked with him on gluing his paper inside the box, as he remained confused about the gluing process. He would take the brush and start brushing the matte medium on top of the paper instead of the back. When I would flip the paper over on the table and ask him to put glue on the back, he would start brushing on the back of the paper but not remember to add more glue to his brush. I told him that we could put the glue on together, so we both worked on adding glue to the paper. At some point, I traded brushes with him, so that he would have my brush with more glue on it.

He was very intentional in choosing the placement and direction of the two small rectangular pieces of paper. I helped him put the glue on the backs of the paper, and he placed them within the box. One was in the center of the image, towards the left side, going in a diagonal line from the bottom left side towards the upper right corner. He placed the second piece of paper, where it covered the right end of the first rectangle and went in the opposite direction, from the bottom right towards the top left. He told me that he liked how the directions were going this way, as he motioned with his hand in a diagonal movement.

He started whistling along to one of the songs on the playlist. I commented on how nice his whistle was, and he smiled.

After it seemed he was done with adding the paper, I brought him the painting supplies, and he became focused and engaged in the painting process. He did not need as many reminders on how to paint but was able to be independent for a while. I noticed that he took great care in the brush strokes and really seemed to enjoy the act of making marks and mixing paint colors. He did a lot of mixing on his palette.

Then the MAP director assisted him with the step of drawing his portrait onto the glass with the permanent marker. She helped him get a basic outline of his face, and he

started making marks on top with the permanent marker. They were repetitive, circular marks, creating an energetic rhythm across the top of the image. He seemed to really enjoy the act of making the marks and was pleased with the result, even though it was different from the other projects and didn't realistically resemble the photograph of his face.

When I asked Mr. D. which part of the project he enjoyed most, he said that painting was his favorite part of the art making process. He also said that he liked the marks that he had made on the glass. I noted that they had a lot of energy and excitement, and he agreed.

Break

When almost everyone had begun the final step of drawing the outline of their portrait onto the glass, I asked the volunteer if she would be willing to read the poem that I had brought as inspiration. I announced that she would be reading the poem and that they could continue to work while they listened to the poem. They quietly listened to the poem for the first few lines, and then Ms. A. began to talk and move around. The other three participants were quiet, but not looking up from their work or seeming to pay attention to the poem.

Interruption

Sometime in the middle of the class time, a facility employee and maintenance personnel came in to do work on a light fixture. However, they did not stay more than a few minutes. This incident was distracting for me, since I had to divert my attention from assisting Mr. D. to talking with the AGE employee and making sure the art supplies were not damaged in the process of the electrician's work. The participants did not seem to be distracted by the interruption.

Reflection

15 minutes before the end of class, I announced that we were going to take time for some reflection on our work before the end of class. I had noticed that most everyone was finished, except for Mr. R., who had started late. I told Mr. R. that he was welcome to continue working. I think that if I had waited any longer to begin the reflection, Ms. A. would have started to leave, since she tended to wander. I held up each of the finished pieces of artwork, pointed out some characteristics that I enjoyed about each particular piece, and asked the participants to share their favorite part of the class.

To finish, I congratulated everyone for the good work on their projects, and I held up my example for the last project and reminded the participants to bring special objects from home to incorporate into the next project. I told them we would also send them paper reminders a few days before. I propped open the classroom door and thanked the participants for coming and making art with us. I left the music on while they were leaving to the main room. After cleaning up the classroom, I met the MAP director at a local café to interview her on her experience in the class, and I emailed the interview questions to the volunteer.

Evaluation of planned revisions

All the participants were actively engaged from the very start of the class in looking through the art papers spread out in the center of the table. The volunteer and the MAP director both mentioned in their interviews that they thought the participants were most engaged in looking at the art papers and cut-out images. Based on this observation and feedback, I determined this change to a more interactive beginning activity as a positive revision and one to continue in the third class.

Although interacting with the art materials on the table at the beginning of class provided us with a way to immediately engage Ms. M., resulting in her staying longer

and actively participating, she still decided to return to the larger room. After the class was over, the MAP director mentioned to me that she usually sees Ms. M. sitting in the same place in the main room and that she just may be more comfortable being in her normal seat. The change of room, regardless of our attempts to make it more inviting, may have been too unsettling for her. I thought another possible reason for Ms. M's decision to return to the main room could be that we were overwhelming her with attention and questions. One of the facility employees, the MAP director, and I were all trying to interest her in staying in the class. The volunteer had pointed out in the first class that Ms. M. didn't seem to enjoy being asked questions; she guessed because speaking English was difficult for her.

The volunteer and the MAP director both commented on how all of the participants looked as if they were enjoying themselves and having a good time during the class. The volunteer specifically mentioned in her interview that "everyone smiled often and repeatedly expressed excitement over different parts of the project." We left the door open for the first few minutes of the class and were playing the background music, as the participants entered the room. The affect of this small change was subtle, but I think it did help the class start with a positive feeling. After observing Mr. B., Mr. D., and Ms. A. humming, whistling, and moving to the music, I determined that the new playlist of background music also helped to set an engaging and fun environment. The MAP director attributed the cheerful mood partly to the participants' enjoyment of the music. I planned to continue using this same playlist in the last class.

Being sensitive to the needs of the participants and providing for individual breaks, as needed, worked well in the second class. For example, the MAP director brought a cup of water for Mr. R. when he stopped working because he said he was tired. After having a break for a few minutes and drinking the water, she and I were able to

encourage him to start working again on his project. He felt better at the end of the class, which the MAP director attributed to his positive engagement with the project.

Taking a break to read the poem in the middle of class proved to not be as effective as I had originally hoped it would be. The volunteer noted in her interview that reading the poem seemed to be too much stimulation, since it was occurring while the participants were working and with the music playing in the background. The MAP director described the poetry reading as confusing to the participants. She didn't think they saw the connection between the poem and the art activity. The fact that Ms. A. began talking in the midst of the reading, and the other participants were not looking up, corroborated the perspectives of the MAP director and volunteer.

As another break, I had also planned to bring out the printed copies of the artwork that inspired the project and show them to the participants individually. However, I never felt during the class that switching to viewing artwork would be helpful, because everyone appeared to be focused on their work.

I didn't detect any noticeable changes during the second class related to sending the lesson plan to the volunteer in advance. However, it didn't have any negative consequences, so I determined to continue to send the lesson information ahead of time to the volunteer and the MAP director.

The switch to permanent markers instead of paint, as the material for drawing the portraits, proved to be a positive change. The process of drawing with the markers was successful and resulted in an aesthetically pleasing finished product. A couple of the participants, Ms. B. and Mr. D., required more assistance with this step. In fact, Mr. D.'s drawing deviated from realism and consisted mostly of non-representational, energetic marks. However, he said he was very pleased with the way the marks had turned out during our reflection time at the end of class.

As another revision from the first class, I decided to explore and demonstrate the use of materials alongside the participants and encourage the other class facilitators, the MAP director and volunteer, to do the same. Collaboratively working with the participants increased the participants' engagement with the materials, as the class facilitators encouraged the participants to actively work on the project and move through all the steps. The volunteer confirmed in her interview that she gave continual demonstrations and reminders to Ms. A. on how to accomplish each step of the process, because Ms. A. was frequently confused on what to do next. The MAP director observed that Ms. A.'s enjoyment of the project was directly linked to her collaborative process of work with the volunteer, and she didn't think that Ms. A. would have stayed for the entire project if the volunteer had not been collaborating with her. And the MAP director also connected Mr. D.'s focused work on the project to my individual work with him. In the past, she noted that Mr. D. has been easily distracted from finishing a project because he would get involved in painting on his palette and not move onto the step of adding the paint to his image. However, she noted he was able to concentrate more on this project than she has seen him in the past, and he enjoyed the process and the result.

One of the positive changes from the first class was the addition of asking the participants to share what they enjoyed about the class. Their responses gave me insight on their perspectives of how the class impacted them.

Although some of the revisions did not achieve the desired results, I saw many beneficial changes take place in the second class. These changes sustained focused engagement and enjoyment for the participants who attended the class. In the next section, I detail the revisions developed after the second class.

New revisions

Revision one: Avoid overwhelming participants with conversation and assistance

I noticed that three different people were all trying to give encouragement and direction to Ms. M. in the hopes that she would become engaged with the activity. I think that all of this attention and stimulation may have been overwhelming and contributed to her decision to return to the activity in the main room. I determined to be mindful about noticing who was assisting each participant and avoid having two people working with the same participant at the same time.

Revision two: Ask facility to assist in minimizing interruptions

After experiencing the interruption caused by the facility employees who were working on a light fixture in the room, the MAP director and I agreed that we needed to communicate with the facility our needs for an undisturbed space to be able to sustain the participants' engagement with the activity. The MAP director made a sign to hang on the door to notify employees that the room was in use for the third class and sent reminders to the facility employees of the next class day and our request to minimize disturbances.

Revision three: Provide for breaks to occur individually

After noting the reaction of confusion and disinterest to the reading of the poem, I decided not to facilitate breaks requiring everyone to pay attention to something different from the main activity at the same time. Instead, I encouraged the MAP director and volunteer to take a break with the participant they were assisting, as needed. I notified them that I would place copies of the artwork inspiring the project on the side table for them to use as a conversation piece for breaks.

Revision four: Have an example in progress to show project steps

The volunteer suggested that having an in-progress example to manipulate and show the various steps of the project would be useful, since much of her time was spent explaining the steps. I constructed an example for the third class that was halfway completed, in addition to the finished example. (See Figure 18 in Appendix.) I intended for all the class facilitators to add media onto the in-progress example, as needed, in order to demonstrate the specifics of a particular step.

Revision five: Limit the number of materials on table

In looking forward to the last class, the MAP director and I discussed the fact that the last project involved more choices of materials than the previous first two lesson plans. The MAP director had cautioned me against giving too many options to the participants, as that could seem overwhelming. We encountered this issue in the first class, when Mr. B. had difficulty choosing a color from the color wheel. To address this challenge, we organized the different collage materials of cut-out images and trinkets into themed envelopes and containers by type and themes, such as “trees,” “jewelry,” “outdoor scenes,” and “sports.” I also arranged these on the side table in the corner of the room for the class facilitators to bring out as needed in the process of the project. I communicated this plan to both the volunteer and the MAP director by email before the last class.

Conclusion

The revisions from the second class focused on ways to decrease confusion for the participants, as we found that too many options and questions could be overwhelming. I also reflected on the ways we communicated our needs for the class to the facility, as maintaining an enjoyable environment for us and the participants relied on

the support of the employees of our hosting organization. The success of the second class in sustaining engagement for the four participants indicated our individualized approach was beneficial. The most confusing moment occurred when we brought everyone together for the poetry reading in the middle of class, so this reinforced the idea of arranging for individual breaks, as needed. In the next section, I describe the third class, evaluate the enacted revisions, and list additional revisions.

DESCRIPTION OF THIRD CLASS ON NOVEMBER 17, 2015

Participants

Mr. E. was able to attend for the first time, and he was joined by Mr. R., Mr. B., and Mr. D. However, Ms. A. did not feel well enough to return to the class.

We did not ask Ms. M. to participate in the art class this time, since she had not wanted to stay for either of the two previous classes. When I went into the main room after the art class had ended, I saw Ms. M. in her usual seat in the main room working on a puzzle. She seemed to be pleasantly engaged with her activity.

Preparation

A few days before the class, the MAP director had sent home paper slips to all the families of the participants with a picture of my finished sample project and the following reminder:

The artists will be making a shadow box on Nov. 17th. We will provide all of the supplies, but to make it more personal, we are asking for them to bring special objects that remind them of home to be incorporated into the project. *Examples of objects: jewelry, scraps of fabric, ribbon, handkerchiefs, broken ceramics, postcards, trinkets, and souvenirs.*

I placed the different materials for the project into separate shallow containers: large, red plastic plates and assorted plastic containers. They were separated into one

plate of yarn, one plate of different colored wires and twine, one container of small shapes of balsa wood pieces, and several small containers of small trinkets, such as buttons, coins, and small ceramic pieces. (See Figure 17 in Appendix for a photo of the containers of material.) I situated at each place a wooden box, a pair of scissors, a plastic cup filled with matte medium, and a brush. In the center of the table were several red, plastic plates filled with the colorful paper squares. I also laid the prints of a selection of works by Joseph Cornell to the side for the volunteers and instructors to bring out when they thought the participant they were assisting needed a break.

I decided to play the same playlist again for the last class. I started it before the participants arrived, and I left the door open while everyone was entering the room and getting settled.

Introduction

As Mr. D. walked into the room, I told him it was good to see him again. He asked me what my name was, and said that it was good to meet me. He did not remember me from the last class, which had taken place two weeks before.

Mr. B. and Mr. D. arrived early, while we were finishing setting up. They had both brought a bag of meaningful objects from home. I encouraged them to have a seat and start looking through their objects and the paper on the table. The MAP director and I asked them to tell us about their objects, and they shared some informative stories about where the objects came from and why they were important. They were both engaged from the very beginning of the class by looking at their objects and telling the objects' stories.

The volunteer, Mr. E., and Mr. R. arrived punctually at the start of the class time. I explained that we would be making shadow boxes, showing my finished example I had

created. I encouraged everyone to start picking out paper that went well with their chosen objects and gluing it down. I briefly described the steps of collage, paint, and then adding the objects last of all.

Art making

For a majority of the art making time, the instructors and volunteer each sat next to one of the participants and assisted them individually. The MAP director sat next to Mr. D., I sat next to Mr. R., and the volunteer sat next to Mr. E. For most of the class. Mr. B. worked independently, and we gave him periodic feedback and encouragement. He was able to ask for assistance when he felt he needed it. Because I spent most of my time assisting Mr. R., I have more written details about our interactions than I have with the other participants. However, I developed my general observations of the others with the information gleaned from my interview with the MAP director to develop a narrative for the whole class. See Figures 19 through 22 in Appendix for photographs of the artwork created during this class.

Mr. R.

Mr. R. came into the room and rapidly found a seat at the table, on the opposite side from where he had sat previously. He seemed excited and intent on beginning the artwork and participating in the class. I instructed him to start looking at the papers on the table and to pick out some he would like to use. He chose a large square of green paper with a bamboo-like pattern and glued it in the center of the main section of the wooden box, using the brush to add matte medium to the back of the paper.

When I saw that he had stopped after just adding the green paper, I came and sat next to him to assist and encourage him to keep working. He had one thin strip of tan, natural-looking paper, and I suggested he glue it to the left side of the box's interior. He

liked that idea, so I turned the paper over on the table and showed him where to add the glue to the back. The MAP director noted in her interview that she thought Mr. R. would have stopped after gluing the paper down, if I had not sat down next to him and encouraged him to continue.

After placing that piece of paper in the box, I picked up two different prints of paper and asked him which one he liked better. He picked a large square of paper with a pattern of dark red lines. I cut a strip off of the paper, placed it on the right side of the box interior, and asked him if he thought it should go there. He said yes. I placed the paper in front of him and asked him to apply the glue again. He did so, and then I picked up the piece and placed it in the box. I asked him if he thought the piece needed more paper, and he replied “yes” and pointed to the bottom of the interior of the box. So we repeated the same process: he chose the paper, I cut it out, he applied the glue, and I placed it in the spot he had picked inside the box.

I asked him if he was ready for the paint, and he nodded. So I put together a palette of dark red paint that matched the dark red pattern and a dark green paint that matched the dark green paper he had picked out first. Since he’s right-handed, I set out on his right side all of the paint supplies: the white paper plate palette with the acrylic paint placed in the middle, the rag, the cup of water, a small brush, and a larger brush.

He didn’t immediately start painting, so I thought it might be a good opportunity for me to give a demonstration. I brought out my in-process example and started applying paint to the interior, partly covering up some of the paper I had glued down inside earlier. Then I prompted him to start painting the interior of his box. He began painting the interior with the dark red paint, covering the upper half of the green paper in the center of his design. Then, he painted the dark red paint over the entire triangular area, completely covering up the triangle shape of paper we had placed there.

As he was painting, he asked for assurance and recommendations about where to paint next as he was working. He started painting the triangular area's interior walls, so I held the box and moved it so he could better see the walls and access them with the brush. In the process of painting the inside of this area, he started painting the edges of the box that faced the front. Noticing that the edges along the front of the rest of the box were not painted, he asked me if he should paint them. I said yes, if he wanted to. He painted them with the red paint.

Next, I suggested he try using the green paint with the smaller brush. I handed it to him, and he began to paint the unpainted areas surrounding the green paper with the green paint. In some places he painted over the red paint, especially on the left side. After he painted the green paint, he put down his brush and appeared to be finished painting.

Since he had not brought any objects from home, I decided to start looking through the magazine images and trinkets that the MAP director had brought with her to see if we could find anything that reminded him of home. From the time I had spent with Mr. R. and his previous artwork, I thought he might be interested in the outdoors, so I showed him some images of landscapes. I asked him if any of the landscapes looked familiar or like from where he grew up. Most of them were images from national parks in the western United States. He said he didn't really see anything that looked familiar. I asked him where he had grown up. This prompted him to start telling me a story of how he grew up in the southern United States, on Halifax Street. The MAP director noted in her interview that this moment was one of his most lucid and verbally engaged.

I looked through the tree-themed envelope and pulled out a cypress tree. I showed it to him, asking him if that looked familiar. He nodded and agreed that we should use the cypress tree. We worked together to glue the cypress tree in the middle of the box, as we had before with the paper.

About this time in the class he started coughing, so I asked him if he needed a drink of water. He said yes, and the MAP director brought him a cup of water from the main room. I suggested he take a break and sip his water for a few minutes. He seemed to be congested and tired, which I guessed might be due to a cold or seasonal allergies.

After giving him time for a break, I brought to the table a small container of various buttons and spread a handful of them out on the table. I asked him if he saw any that he would like to use. He didn't seem to be interested in the buttons, so I brought over another small container of small, circular metal tags with single words written on them. I placed the box in front of him and laid out a selection of the tags and read the inscriptions to him. I asked him if he saw anything that he would like to use in the piece. He seemed apathetic and said, "Whatever you think." Since he had seemed more interested in the metal tags, I chose the one with "Imagine" written on the front and asked him if he liked that one. He said yes. I got a piece of wire and threaded it through the hole at the top of the metal tag, then placing it in front of the triangle area of the box, I asked him if he liked it there. He agreed, and I threaded the wire through the hole on either side of the triangle and twisted it back on itself to secure it to the box. Throughout this part of the class, Mr. R. dozed off a few times, so I decided to take a break every time he fell asleep. We also refilled his water cup, and he drank most of his second cup.

At one point, I decided to show him the printed out images of the artwork by Joseph Cornell, the artistic inspiration for this project. He didn't show interest in the images, and at that time he was also falling asleep.

I noticed we were running out of class time, so I asked him if he wanted to use a ceramic piece from the boxes of trinkets that had a rooster painted on the front. I placed it in the foreground of the shadow box and asked him what he thought. He said he liked it,

so I used the grout to attach it to the right side and bottom of the box. He seemed pleased with the finished artwork.

During the reflection time at the end of class, I began with Mr. R.'s artwork. I held it up for everyone to see. I asked Mr. R. what he thought of it, and he said he liked it. He smiled as I described how the cypress tree and rooster represented his home in the southern United States.

Mr. B.

Mr. B. had brought a range of special objects from home. He had quite a few things, so he didn't end up using all of them. The two pieces glued to the top of the top of the box were paper origami made by his wife. The picture of the football players was part of a football game ticket from a Dallas Cowboys game he attended with his son. He told me that unfortunately the Broncos had beaten the Cowboys that game. The wooden carving of the name "Bob" was a piece that he had carved himself. He decided to paint it with the same brown paint he used in the background of his box. He also brought a small sculpture of a bird and glued it in the top triangular portion of his box.

He started by examining the objects he had brought with him. Then, he asked the MAP director if she could bring him a palette with brown acrylic paint. She brought him the painting supplies with a palette of the brown paint and an additional gold hue. He thoroughly painted the interior of the box with the brown paint. He also glued down a triangle-shaped paper inside the triangular, top portion of the box. Inside the main portion of the box, he glued a yellow paper on top of the brown paint.

Mr. B. seemed to be pleasantly engaged with his artwork during the whole class. He hummed along to the music and asked for assistance when it was needed. The assistance and encouragement Mr. B. needed was simply verbal affirmation and

reminders on the next steps. He would ask the class facilitators what we thought of particular decisions regarding the artwork, and we would either encourage him by saying that we liked what he was doing or making suggestions of how he could make it better.

For example, Mr. B. said he was not sure how to fit all of the objects into the box without making it look too overwhelming. The volunteer showed him the finished example and pointed out the number of different objects and elements in the example. This seemed to encourage him to find a way to unify the different objects into one piece. He also wanted a piece of green felt to place underneath the stone bird sculpture. The volunteer helped him find a piece of green paper, and he cut it into a circular shape. He seemed pleased with this addition.

While looking at my finished example, he saw the images of wood I had glued to the top of the outside of the box. He wanted to do something similar to his piece, but not having any images of wooden planks, he decided to use paint resembling the natural color of wood. He chose the gold color and painted the exterior of the top of the box.

Some time in the middle of the art making process, Mr. B. spoke to me from across the table and told me that his doctor had recommended for him to engage in art making and conversation as therapy for his dementia. He said he had been trying to be involved in art and conversation because of its benefits for his condition. I told him that I was really glad he had decided to make art with us.

At a time when Mr. R. was resting, I sat next to Mr. B. and had suggested that he cut the football ticket. He had already folded it into the shape that he wanted it to be inside the box, but he seemed unsure on how to proceed. I think he may have been hesitant, because he didn't want to lose any of the information on the ticket. I suggested that if he cut it, he could keep the bottom half and not lose that information while

prominently displaying the top half in the box. He liked this idea and proceeded to carry it out.

When I was displaying Mr. R.'s artwork for the group to see at the end of class, I spilled some of the grout from the ceramic rooster piece on the floor and on the top of my boot. Mr. B. came over with a rag and helped to wipe the grout off of the floor and off of my shoe. After the class, he expressed concern over the spilled grout my boot, and I thanked him for helping to clean it off.

When I held up Mr. B's piece for the class to see, Mr. B. explained that the bird in the top represented spirituality, which was important to him. Mr. B. said he benefitted by the conversations with us about his artwork. He specifically mentioned how I had helped him figure out what to do with the ticket, so that it would fit inside the box.

Mr. D.

Mr. D. brought a bag of trinkets and souvenirs from a time when he lived in Singapore. After reviewing his objects from home with the MAP director and telling her the story behind them, Mr. D. seemed confused at how to start. The MAP director encouraged him to paint the box, bringing him a palette and supplies. She said it seemed like he was unsure how to begin on the blank box. After he began, he painted with focus and enthusiasm. However, the MAP director, who was individually assisting him with his project, noticed that he was painting the same color over and over again on top of the same areas. She guided him to paint the other areas of the box that had not been painted yet. In our interview, she said she had to physically cover the painted areas with her hand, so that he would move on to painting the other areas.

The MAP director noticed that his interest in the piece increased when they moved on from the painting to arranging and placing the objects in the box. They

incorporated the paper and coin money from Singapore into the collage. He had also brought a patterned paper from Singapore, which they also glued to the box. It appeared to me that the metal pendant was important to him, as I saw him handling it and looking at it throughout the class. It is fitting that he and the MAP director chose to put it in the center of the box. They worked collaboratively on the box for the entire duration of the class. The last item they added was the metal piece strapped to the left side with wire. I noticed him say how impressed he was with how the MAP director had managed to strap it to the side with the wire.

Mr. D.'s piece was the last I introduced in the time of reflection at the end of class. After I introduced Mr. D.'s piece about Singapore and asked him if he would like to share anything about it, he went on to tell his story of living in Singapore, which was the most I had seen him talk. I was amazed that Mr. E. and Mr. D. proceeded to engage in a conversation about the piece. Mr. E. listened carefully to his story and responded with "yes" and "uh huh" after each detail. He also asked relevant questions, showing his interest in the subject. Mr. B. and Mr. R. were looking attentively at Mr. D. and listening as well, even though Mr. R. took a candy bar out of his pocket and started eating it in the middle of the reflection time. Mr. D. told how he had lived in Singapore and loved living there. He said it was beautiful, very rich, and also very poor. When asked about the food, he said it was very good. He expressed a wish to return some day.

Mr. E.

Mr. E. and the volunteer worked collaboratively on his box. He worked diligently and independently on painting the interior and exterior with paints he had picked with the volunteer. He was able to hold the box in one hand and turn it to the angle he needed to

paint each side. The volunteer supported him in choosing the papers to include in the collage and showing him how to glue them inside.

The volunteer and Mr. E. spent a lengthy period of time discussing which objects should be included within the shadow box. Mr. E. was not interested in most of the objects, and finally after many suggestions from the volunteer, he determined to use the toolbox and the ring. The volunteer and Mr. E. decided to make a table to support the toolbox and give it a central place within the box. Mr. E. helped to cut out the pieces of balsa wood into the right shapes for the legs, and they both worked on gluing the legs to another piece of balsa wood with tacky glue. Lastly, they glued the table into the box and glued the toolbox on top of it. The ring was added as the final touch.

At the end of class, I asked Mr. E. if the toolbox had a special meaning to him, and he responded that he has a toolbox at home but doesn't use it anymore. The MAP director told me she had learned from his daughter that he has done woodworking in the past and participates in art activities frequently, even though he denies being an artist.

After the class, we also learned from talking with his daughter that most of the personal items she had brought for him to use were from a box of bingo prizes. She said this was because she didn't want to include anything too expensive or important, because she was concerned about damage or potential loss. She did point out that the miniature toolbox had been a souvenir she had given him from her trip to the National Building Museum.

Reflection

I walked around the room and picked up each participant's artwork, with their permission, to display to the rest of the group. All of the participants watched attentively and showed appreciation for each other's work by verbal affirmation, smiles, and nods.

The MAP director communicated to me in our interview that she thought the participants were most engaged in this time of reflection at the end.

Clean up and interviews

At the end of the reflection time, I thanked everyone for making art with us and said that this was the end of the class. I opened the class door and propped it open with the doorstop. I started walking around and cleaning up, and the MAP director noted to me later in our interview that the participants were reluctant to get up and leave. It was as if no one was in a rush to leave the class.

I had told the participants that I would be keeping the artwork to put it in a display, and they all initially agreed. However, Mr. D. came back to the room in search of his artwork. I explained to him that I was going to put it in the display, as we agreed. Since this did not seem to put him at ease, I told him that he could definitely take his work home today, and I would just take a photo of his piece. He seemed to be happy with this arrangement. He took his shadow box over to show the AGE health center activity director, and she expressed admiration for what he had done. The MAP director mentioned in our interview later that it was worth noting Mr. D. did not have the same feeling of attachment to the self-portrait he made in the previous class.

Mr. B. also came back to the room after the class had ended and asked for his artwork, because he also wanted to show it to one of the AGE employees. He brought it back after a few minutes and stayed to chat for a few minutes with the MAP director, the volunteer, and me.

Evaluation of planned revisions

First of all, I observed that the class facilitators did a better job this class of focusing on assisting one participant, so the participants were not put in a position where

they were interacting with more than one facilitator at a time. This set-up encouraged a collaborative process to take place with the facilitator and the participant, where creative ideas were exchanged in a socially engaging way. Rich conversations occurred between each facilitator and each participant. Overall, the MAP director noted in her interview that the social interaction between the participants and facilitators in this class was “really great.” For example, as I was working with Mr. R. and asking him which images reminded him of home, Mr. R. told me about the place where he grew up in the southern United States and the name of the street where he used to live. The MAP director and I agreed Mr. R. was lucid and engaged in talking more than usual at this particular moment.

After communicating with the staff and posting the notice on the class door, we experienced more assistance from the facility staff in preparing for the class and fewer interruptions. Although not possible for this study, ideally this class would become a regular occurrence, so the facility staff and participants could develop habits and routines regarding the class.

Even as we were limited by only having three classes, I think we succeeded in developing a pleasant atmosphere in that time. The MAP director pointed out that the participants were reluctant to leave the room after the third class ended and seemed like they wanted to stay longer. They remained seated even after I had propped open the door to the main room and announced the end of class. In addition, Mr. B. and Mr. D. both returned to take their artwork and show it to others in the main room.

I observed how our decision to provide breaks for each participant, as needed, affected the third class. Mr. R. started coughing halfway through class, so the MAP director brought him a cup of water from the main room. He didn't seem to be feeling as well as he had in the previous two classes, so he took several breaks to doze and to drink

water, finishing two cups. However, he was able to participate in the entire process to make the artwork, and the MAP director and I both agreed that he seemed pleased with his finished piece. Besides Mr. R., none of the other participants took any noticeable breaks. This may have been because the project took up the entire class time.

Since the rest of the participants never seemed ready for a break, Mr. R. was the only participant to review the copies of artwork that I brought in for inspiration. He was dozing off when we were looking at the images; it was difficult to determine if this reaction was due to his tiredness or due to the activity.

Revisions

Revision one: Provide one-on-one ratio of assistants to participants

In the third class, we had three class facilitators and four participants. This ratio gave us the opportunity to match up one facilitator to each participant for the majority of the class. Mr. B. was the only participant who did not collaborate with a facilitator throughout the class. Since Mr. B. was fairly independent, he was able to ask for help and feedback when he needed it. After experiencing close to this one-on-one ratio in each of the classes, the MAP director and I found this ratio ideal for future projects. She imagined that we would not have been able to sustain engagement as well if Ms. A. had attended the third class, since most of the participants needed constant attention and reminders from the facilitators.

Revision two: Ask participants to bring personal items for future projects

The MAP director and I both saw a marked difference in engagement between the participants who had brought personally meaningful items for the project from home and those who did not. Mr. B. and Mr. D.—who both brought personally significant objects

related to their past—appeared to be more attached to the artwork, to enthusiastically share stories of their past, and to have a greater sense of pride in their finished work.

Revision three: Encourage participants to share stories of their past and identity

All the participants were able to tell a story about their past. The MAP director and I both agreed that the participants were most engaged at the end when everyone shared their story and how it connected to their artwork. I was surprised by the length of Mr. R.’s reply when I asked him to tell me about the place where he grew up. The MAP director also noticed that he “perked up” when telling me about his home, and this moment contrasted with how he acted during the rest of the class.

Revision four: Involve multiple steps to sustain engagement

The MAP director pointed out that Mr. R. would have stopped much earlier if there had not been multiple steps to move through. Since each step was distinct in process from the others, it kept him working on the artwork longer. If we had just been gluing the paper in the box, he would have been finished in the first 30 minutes of class. However, this approach required more one-on-one attention, since multiple steps also caused confusion. When she was assisting Ms. A. in the second class, the volunteer reported that she needed to demonstrate each step individually, in order to ease her confusion at the multiple steps. Another way to address this issue is to provide multiple projects for each participant, as we did in the first class. Even then, we encouraged the participants to add new colors and use different painting tools to bring some additional steps to the process.

Conclusion

Including objects of personal significance, encouraging the participants to talk about their objects and connections made to their past, giving multiple steps for the project, limiting the number of options, and giving individualized and collaborative

assistance were all strengths confirmed in the third class. The class facilitators and I were rewarded for our efforts with the opportunity to observe a rich conversation between two of the participants and to see the participants' enjoyment in their finished artwork. In the next chapter, I have listed the themes revealed from all the data within the study's main categories of cognitive engagement, social engagement, and well-being.

Chapter 5: Data Analysis

INTRODUCTION

Through reviewing and triangulating all the data, I developed emergent themes related to the categories of cognitive engagement and social engagement. I found the following collected themes to be the most affective characteristics for sustaining engagement in the three classes of the study. Finally, I closed this chapter with a reflection on how observations of the participants' cognitive and social engagement aligned with Kitwood and Bredin's (1992) indicators of relative well-being.

COGNITIVE ENGAGEMENT

Through my analysis of the data, I found the following themes contributed to the cognitive engagement of the participants.

Stimulating materials

After reflecting upon the feedback I received regarding the first class, I revised my lesson plan to begin the class by encouraging the participants to start by interacting with some of the art materials: the decorative papers. Notably, the papers were made of thick, textured papers in a wide variety of colorful patterns, so they were stimulating to view and to touch. I also hoped to make the papers look inviting by spreading them out throughout the center of the table. I designed this step to be intentionally simple and to not require much instruction, so that the participants—regardless of their verbal or cognitive ability—could confidently interact with the materials and enjoy choosing patterns, which reflected their own personal preferences. This change proved successful in engaging all the participants who were present at the beginning of the class, even Ms. M., who glued some papers in her box before deciding to leave the class. Ms. A. specifically picked paper with gold accents, which matched the gold sweater she was

wearing. Mr. B. arrived early to the class, so he spent a long time at the beginning looking through the papers. His choice of paper also reflected his personal preferences for music and the color blue. Both the MAP director and volunteer said in their separate interviews that choosing and interacting with the decorative papers was the most engaging aspect of the class.

Repetitive movements

Both in the first and second classes, Mr. R. showed great focus in making repeated, up-and-down brushstrokes across his canvas board and his box. The MAP director described his demeanor as “relaxed” and “enjoying the process” when painting his canvases in the first class, which I observed also described the way he focused on covering the entire interior of his box in blue paint in the second class. He worked mostly independently until he would finish with one step or be ready to switch to a different color of paint.

The MAP director and I observed a similar occurrence with Mr. D., who independently painted the interior of his box in the second class, intently mixing the paint on his palette and adding it to the box. The MAP director described her experiences with facilitating art for him in the past and said that the act of painting seems to be “very soothing” for him, even though he sometimes will forget about his project and spend the class moving paint around on his palette. In the third class, the MAP director assisted Mr. D. and said that he continued to add paint to the same area of his shadow box until she physically blocked that section and moved the box for him to paint a different area.

Notably, Mr. R. and Mr. D. needed one-on-one assistance for all of the steps of the project, except for the act of painting, which kept them engaged independently with great focus. Since my primary goal was to sustain their engagement, I was less concerned

with the finished product being completely painted. This finding of repetitive movements sustaining engagement echoed one of Cohen-Mansfield et al.'s (2009) characteristics of engaging stimuli: invoking the individual's procedural memories. The MAP director informed me that Mr. R. and Mr. D. had both been regular participants in painting classes with MAP in the past, which possibly contributed to their positive reactions to painting with a brush. They may have also had past experiences with using a brush that contributed to their enjoyment of the process.

Multiple steps

As participants would finish a step at different times, it was helpful for the facilitators to have another step to progress to, in order to keep the participant's engagement with the project. For instance, once Mr. R. indicated to me that he was satisfied with the paper he had glued within his box in the third project, we were able to move on to the step of adding paint. Not only did this step add complexity and interest to his piece, but it also engaged him for additional time that would not have occurred if it had just been a paper collage. The MAP director specifically mentioned the benefit of having the multiple steps in her interview after the third class. Ms. A. moved relatively quickly through all of the steps, and without having multiple steps, it is likely she would have finished much earlier in the class and left to go back to the main room. However, she did stay through the entire length of the class. Even with all of the steps, she still finished earlier than the other participants, so the volunteer and I encouraged her to paint a border around the printed photograph of her portrait. This extra project kept her engaged until the reflection time at the end of class.

The projects in the second and third classes both had many specific steps. The first class project had the least number of steps compared to the other projects, but we

filled the time with the art viewing at the beginning of class and with working on two versions of the project. Therefore, I found that either providing multiple steps per project or multiple projects per participant accommodated the wide variety in the time each participant needed for particular steps.

Individualized assistance and breaks

As in the study by Sauer et al. (2014), I found that matching one class facilitator to each participant gave the best results for engagement, for this approach provided the participants with the specific support they needed to succeed in the project and to have in-depth social interactions.

This one-on-one attention also gave the facilitator a chance to adapt the tools of the project to suit the abilities of the participant. For example, I saw that Mr. R. could paint the glue on the paper, but had difficulty laying it where he wanted in the box. So, I took the paper with glue on it and asked him where he would like me to place it in the box. I also held Mr. R.'s easel still while he painted in the first class, to keep it from moving across the table. The MAP director assisted Mr. D. in covering his box in paint by holding the box still and turning it to reveal unpainted areas.

The facilitators supported the participants' engagement with the project through reminders and demonstrations. All the participants needed reminders of the different steps due to the nature of Alzheimer's disease, which limits one's ability to do tasks with multiple steps (HHS, 2015). As the volunteer pointed out in her interviews, she was able to give demonstrations, reminders, and positive feedback to the participants she assisted individually, which led them to react positively and be engaged in the project and conversation. The volunteer also requested an in-process example project to use in demonstrating the project steps, depending on the individual needs of the participant.

Although we only had the in-process example for the last class, it proved useful for working alongside the participants and showing each step.

By matching one facilitator to one participant, we also avoided overwhelming the participants by having more than one person at a time asking them questions or giving advice. Too much assistance may have contributed to Ms. M.'s decision to leave the second class. She received encouragement and attention from three different people within a short period of time, which may have been confusing and overwhelming.

There were a wide variety of preferences for breaks, which changed from participant to participant and day to day. For example, Mr. B. took a break halfway through the first class but didn't need a break on the second or third class. After his break, Mr. B. returned to his work with renewed enthusiasm and created a painting which he liked better than his first one. His positive experience with the second painting indicated the importance of the class facilitators to be sensitive to his individual experience in the class. Mr. R. didn't need a break the first class, but did need to take a break and drink some water in the second and third classes. Additionally, he was tired and dozed off in the third class as well, which didn't happen in either of the two previous classes. Therefore, I decided to encourage the volunteer and MAP director to facilitate breaks individually for each of the participants as they saw the need.

Minimizing distractions

MAP director cautioned me that Ms. B. tended to get distracted easily and to wander, which is a common symptom of Alzheimer's disease (HHS, 2015). And at first, she seemed as if she was going to leave the room after briefly looking through the decorative papers, but the MAP director and the AGE employee successfully encouraged her to sit down next to the volunteer and pick out some papers for her project.

Considering how easily the participants could become distracted, I determined to limit the number of stimulating experiences occurring at one time as much as possible. The class experienced two different occurrences of distractions contributing to some confusion and break in concentration within the class. The planned poetry reading during the class work time seemed to cause some confusion within the class. The MAP director and volunteer both pointed out that the participants didn't seem to understand how the poem related to the work they were doing on their artwork. In fact, Ms. B. began talking on an unrelated topic during the poetry reading. After observing how the poetry reading was received, I revised my plan to encourage individual breaks instead of group breaks in the middle of the class. The second distraction for maintenance in the room didn't lead to much confusion or loss of focus on the part of the participants, but it did pull my attention away from assisting the participants. Both these distractions either affected the focus of the participants or the attention of the class facilitators, which detracted from the goal of sustaining engagement.

Limiting options

I was surprised by how the most successful lesson plans were less open-ended than I originally thought they would be. I didn't anticipate the overwhelming nature of having too many options. Even the participant with the least progressed symptoms, Mr. B., found the choices provided by the color wheel overwhelming. In light of this and other observations, I revised the lessons to present fewer options, while also leaving room for the individual's unique preferences, self-expression, and creativity.

The class facilitators were key in this revision. They talked one-on-one with the participant to discover if they were ready to move on to the next step, and they gave options, reminders, and demonstrations for each new step of the process. In this way, the

participants were left in control of their projects, but were given some direction to avoid confusion and overwhelming them with too many steps at one time. The class facilitators encouraged the participants to make decisions by providing limited options and making suggestions when the participant didn't know how to proceed in the project. I did not anticipate that the participants would positively respond to the facilitator's input on their projects. As the MAP director noted in her last interview, "sometimes you [the class facilitator] have to gently nudge them in a direction." She followed up this statement with the qualifier: "It's a fine line between encouraging them and telling them what they should do."

As a revision for the third class plan, I decided to group the many different materials in containers on a side table to avoid providing too many options at one time to the participants. By limiting the options and spreading out the steps and decisions, I managed to design the lesson to focus on one step at a time. The class facilitators were able to easily reach the different containers of supplies and bring them to the attention of the participant when it was the right time in the process.

SOCIAL ENGAGEMENT

In this section, I explored the question: how was social engagement sustained in the three classes?

Personal objects and stories

Anytime the class facilitators referred to aspects of the participants' identity, whether past stories or current preferences, they seemed to become positively socially engaged and contribute more to conversations. To clarify, the facilitators did not press the participants on specific details of their past or accuracy, but we asked general, open-ended questions such as, "What makes you think of home?"

Asking the participants to bring personally meaningful objects from home helped to inspire them to share personal stories. For example, during the reflection time of the third class, I asked Mr. D. to share the importance of the personal objects he brought from home. Mr. D. responded by sharing a few different memories about his time in Singapore. This kind of verbal sharing was remarkable for Mr. D., who typically had difficulty in finishing sentences. In addition, Mr. E. asked him questions and actively listened to his story. Normally in the class, the participants did not engage in conversations with each other, so this interaction especially stood out to me and to the MAP director. The presence of Mr. D.'s personally meaningful objects from his time in Singapore gave him a visual reminder of his story to tell, which sparked a conversation. The MAP director remarked that Mr. B. and Mr. D. both showed more enthusiasm for the project in the third class because it included personally meaningful objects. Mr. R. and Mr. E. were not as easily engaged with the project, as they had not brought personally meaningful objects for the project. I observed Mr. B. and Mr. D.'s attachment to their artwork and their joy in telling the stories related to the meaningful objects they incorporated into it. Not only did they share the stories about their chosen objects with the class in the reflection time, they both took their artwork with them to share it with a few of the AGE employees, resulting in more meaningful social interactions.

However, the facilitator can also use other approaches that don't rely on the participant having personally meaningful objects with them. Another example of positive social engagement happened when I asked Ms. A. if she liked shopping. She enthusiastically shared that she liked to look for deals. This social interaction was very positive and sparked her interest to look at the images of jewelry and purses with the volunteer. In the end, she found an image of turquoise jewelry that formed the central element of her piece of artwork. This approach required me, as the facilitator, to ask

about the participant's preferences and assist her with finding images to represent her personally. I also followed this approach with Mr. R. when I assisted him with finding images that reminded him of home to include in his shadowbox. This conversation led him to share with me a personal story of where he grew up, which was also a rich, social interaction.

The group reflection time at the end of each class was another way I facilitated social engagement through the telling of personal stories. I asked the participants what they enjoyed about the class and sometimes asked them to talk about particular elements in their artwork. The participants' answers provided me with valuable information regarding what they enjoyed about the class and also gave them opportunities to share their personal stories with the rest of the group. Many of the best moments of social engagement occurred in the reflection time, such as the conversation between Mr. E. and Mr. D. about his experiences in Singapore. It was also in the reflection time that Mr. B. shared the personal significance of the bird sculpture in his shadow box and the football game ticket. Through this time, we were able to celebrate each individual by listening to their stories and appreciating their unique creativity.

Collaboration

By the third class, it became clear to me how matching one facilitator to one participant for each class positively contributed to each participant's social engagement. I had not anticipated how important a collaborative relationship between the facilitator and the participant would be in sustaining engagement, but it proved to be essential. Through the in-depth interactions with one of the class facilitators, the participants progressed through the project and seemed to enjoy the process of working with the facilitators. With each participant and facilitator team, the collaborative process looked a little different,

depending on the participant. The facilitators conversed with the participant about the project—asking them what they would like to do, giving suggestions, and encouraging with positive feedback—and physically assisted when needed.

When asked what he enjoyed about the class, Mr. B. remarked after the second and third classes that he most enjoyed discussing the project with the class facilitators, encouraging him to do art in new ways. As I assisted Mr. R. in the third class, I did some of the physical work of placing the glued papers by following his verbal direction, which gave us a way to collaborate and work together. The MAP director compared our working method to a master technician and apprentice. Through my collaboration with Mr. R., I was able to converse with him about his home and encourage him to share a story of where he grew up. I thought this interaction was meaningful for both him and me, and the MAP director also agreed that it was one of his most lucid moments of that particular class.

For Ms. A. and Mr. D., the constant attention and collaboration they received contributed to their completion and sustained engagement with the project. The MAP director and the volunteer both noted in their interviews how their assistance and constant verbal affirmations were vital to Ms. A. and Mr. D.'s enjoyment and completion of the projects. The participants showed their enjoyment by their pleasant demeanor in the class—smiling, humming, and dancing—and by their comments made at the end of class. Mr. D. noted how he liked the quality of the marks he made on his self portrait in the second class, and he was so attached to the project from the third class that he felt the need to take it with him and show it to one of the facility employees. Ms. A.'s response to her self portrait project, "See, I don't look so scary!", which she said in a humorous tone, demonstrated her enjoyment of the final product. Considering both Mr. D. and Ms. A.

had a history of wandering and becoming distracted, it is unlikely they would have completed these projects without the collaboration of the class facilitators.

Music and mood

When thinking about how to set up the class, I explored how I could create a class atmosphere that would encourage social and cognitive engagement. In the first class, I prepared a music playlist of instrumental music with a mellow and meditative quality in the hopes that it would encourage the participants to focus on their paintings. While the participants were focused and cognitively engaged, this music did create a more serious mood and was unfamiliar to the participants. Combined with the small size of the room and the fact that the door was closed from the very start of class, the music may have made the atmosphere feel too unfamiliar and uncomfortable, which may have contributed to Ms. M.'s decision to leave the room.

Based on Mr. B.'s request for something more upbeat, I changed the music halfway through the first class to some American folk tunes. He recognized some of the songs and sang and hummed along to the music. This music in the first class provided a topic of conversation for Mr. B. to discuss with me and contributed to his cognitive engagement.

For the second class, I brought a new playlist of upbeat, swing music popular in the 1940s and 1950s. This music had a positive effect on the mood of the class, making more of a fun, party-like atmosphere. Mr. B., Mr. D., and Ms. A. all either hummed, whistled, and moved to the music at different times in the class. The MAP director attributed the cheerful mood of the second class partly to the music. In creating this cheerful mood, I think the participants felt more at ease and comfortable to engage socially with the class facilitators and each other.

Because of its success, I repeated the playlist from the second class in the third class. By the end of the third class, the participants were reluctant to leave, which the MAP director and I took as an indication of their preference for the atmosphere of our classroom.

Consistency and repetition

Even given the small number of classes in this study, I saw signs of the repetition of the class having positive effects on the participants. When the participants were all slow to leave the third class, the MAP director and I interpreted their reluctance as a sign of their enjoyment of the class and of being together in that room. Mr. R. showed an exceptional amount of enthusiasm when he came to class on the last day. He walked in the room at a faster pace than usual and seemed excited to begin working. I interpreted his excitement as partly due to his comfort in the room and the rapport that we had established in the previous two classes.

Tyler (2002) noticed that over time his clients with dementia would appear to be more comfortable in the classroom, even though they wouldn't necessarily remember attending the art experience from the previous week. Mr. B. was the only participant who talked to me about previous classes, showing that he had memories of the previous class. All the other participants seemed to be comfortable in the space, except for Ms. M. However, she had developed comfort through her consistent habit of sitting in the same area of the main room when she attended the center. If the study had included more classes over a longer period of time, then Ms. M. may have become more comfortable coming to the class. Across the board, consistency and repetition only appeared to affect the participants in positive ways.

WELL-BEING

In this section, I have examined the question: how was well-being supported by social and cognitive engagement? The participants in this study all demonstrated some of the twelve indicators of well-being described by Kitwood and Bredin (1992). First, I have described the six indicators related to social interactions and ended with listing the six related to cognitive engagement.

Kitwood and Bredin (1992) emphasized how social interdependence needs to be considered when designing person-centered care for those with dementia. De Medeiros and Basting (2014) also found social interactions to be extremely important in dementia interventions. Therefore, I intentionally designed the art viewing time at the beginning and the reflection time at the end of the class for the entire group of participants and facilitators to engage in a group conversation together. After reflecting upon feedback of the facilitators and my study's supervisor, I determined that the art viewing time at the beginning of class was not as effective in engaging all the participants. On the other hand, the observations and feedback I received on the reflection time at the end of class was positive. Other moments of social engagement occurred informally during the class between participants and each other and the class facilitators.

Kitwood and Bredin's (1992) six indicators of well-being related to social engagement are the following: initiation of social contact, affectional warmth, social sensitivity, helpfulness, acceptance of others, and humor.

As for initiation of social contact, Mr. B. frequently started conversations with the class facilitators in all three classes, by asking for feedback on his project and introducing topics of conversation. Mr. R. initiated a conversation with me in the first class, however I did not observe him do this in either of the following classes. His social interaction may have been affected by not feeling completely well in either the second or third classes.

Mr. B. also demonstrated helpfulness in offering to assist with cleaning up the room after the class and assisting me with wiping up the spilled grout. In the category of social sensitivity, I observed Mr. B. comment to me that he felt sorry for Ms. M., as it must be hard for her to not understand English very well.

Although the other participants did not initiate any social interactions, they did show other signs of social engagement related to well-being. Mr. E. and Mr. D.'s conversation about Mr. D.'s artwork in the reflection time of the third class was a remarkable example of social interaction. Mr. E. actively listened to Mr. D.'s story about his time in Singapore and verbally affirmed hearing the story by saying "yes" and "uh huh," and asking questions. In this interaction, Mr. E. and Mr. D. showed acceptance of each other by participating in a conversational exchange that went back and forth between the two of them.

Mr. B., Ms. A., and Mr. D. consistently demonstrated a good humor in the class. All three laughed and smiled often, and Mr. B. and Ms. A. added their own humorous comments to our conversations. Mr. R. and Mr. E. also smiled and had pleasant demeanors, but were less enthusiastic.

In the short time period of the art classes, I did not expect to see all six examples of well-being related to social engagement. For example, I didn't see any noticeable examples of affectional warmth. This lack may have been due to the fact that the participants all worked on their own individual projects and, therefore, were each seated with some space between them and the next participant, occupying their own workspace at the table.

Kitwood and Bredin's (1992) six indicators of well-being related to cognitive engagement are the following: assertion of desire or will, signs of self-respect, creativity and self-expression, expression of emotion, demonstration of pleasure, and relaxation.

In making decisions regarding their artwork, each of the participants expressed their own desires for their artwork. In fact, decisions were inherent in the art making process. Mr. B. had very specific ideas on how he wanted to approach his artwork. For instance, in the second class, he did not want to start with collaging the paper as I suggested. Instead, he asked to start with the paint, to do the background color first. Other participants relied more on the suggestions and assistance of the class facilitators but still made decisions regarding their artwork. Although Mr. R. sometimes replied “whatever you think” when I asked him to choose an element to add to his artwork, he responded decisively when I would ask for his approval for one of my suggested elements or placements of a collage paper. In addition, he specifically chose the bird featured in his self-portrait from a group of other bird images, and he declined the use of the images of the western landscapes in his shadow box. Mr. E. was determined to not overcrowd his shadow box with many more items than the toolbox. Not surprisingly, I learned the toolbox was the only item that held some personal significance for him.

Included with the assertion of artistic decisions was the participant’s creativity and self-expression. Mr. B. demonstrated creativity in his decisions regarding his artwork, which were uniquely his. Mr. D. notably deviated from drawing a realistic portrait in the first project and instead repeated a short, energetic mark across his image. In the reflection time, he enthusiastically described how the quality of his marks pleased him the most. His creativity and unique artistic decisions brought him pleasure and pride in his work. Ms. A.’s choice to include papers and paint with gold colors aligned with her own personal aesthetic preferences, reflected in the color of her sweater.

All the participants showed signs of self-respect in the way they dressed and interacted politely with the class facilitators and each other. Mr. B., Mr. R., Mr. D., and

Mr. E. all came dressed in collared shirts and pants each day. Ms. A. looked pleased when I complimented her on her gold sweater.

Lastly, I observed expression of emotion, demonstration of pleasure, and relaxation. In the first class, Mr. B. seemed very pleased with his finished pieces and showed enjoyment throughout the class. He hummed and sang quietly along with the music. He expressed that he was feeling tired and overwhelmed, so we encouraged him to take a break. Later he returned to his work with enthusiasm and created a second painting. Mr. R. also experienced periods of relaxation in the class when he took breaks to drink some water in both the second and third classes. At the beginning of the second class, he told the MAP director he was feeling nauseous. However, he told her he was feeling better at the end of class. In the last class, he relaxed to the point of dozing off several times. Ms. A. stayed after the second class to express her gratitude and pleasure with the class to me and the other class facilitators. Ms. A., Mr. B., and Mr. D. all smiled, hummed along with the music, and laughed often in the classes, which appeared to indicate their enjoyment of the class. Mr. R. and Mr. E. were more quiet and reserved but also smiled during the class.

CONCLUSION

After analyzing my observations, lesson revisions, photographs of the class environment and participants' artwork, and interviews with the MAP director and volunteer for the emerging themes within the categories of social and cognitive engagement, I found a number of contributing elements. Within social engagement, the significant elements were the following: personal objects and stories, collaboration, music and mood, and consistency and repetition. To support cognitive engagement, I found the following contributing elements: stimulating materials, repetitive movements,

multiple steps, individualized assistance and breaks, minimizing distractions, and limiting options. In the observations of the class participants, I also found many indicators of well-being, as defined by Kitwood and Bredin (1992). These indicators demonstrated how the class supported the well-being of the participants through social and cognitive engagement.

Chapter 6: Conclusion

SUMMARY OF STUDY

In this action research study, I examined my own teaching practice through designing and facilitating three consecutive experiences of art making for a group of adults with Alzheimer's disease. My aim in undertaking this research was to examine the practice of facilitating art making activities and specific ways to support the social and cognitive engagement of those with Alzheimer's disease. I hoped this study would benefit art educators and the caregivers of people with Alzheimer's disease, from family members to care center employees, as it demonstrated tangible additions and recommendations for ways art making could be facilitated with this population.

People living with Alzheimer's disease generally experience diminished verbal and cognitive capabilities, usually beginning with memory loss (HHS, 2015). These symptoms limit their ability to engage in social activities and self-expression, leading to isolation, loss of identity and sense of purpose, and feelings of depression and frustration (Seman, 2011; Tyler, 2002; Waller, 2002). Art making provides an opportunity for those affected by the disease to increase their social and cognitive engagement, as a way of sustaining their abilities in these areas and improving their quality of life (Abraham, 2005; Hattori et al., 2011; Osborn, 2012; Seman, 2011; Tyler, 2002; Waller, 2002).

I focused on answering the following question: As a teacher in the Mobile Art Program (MAP), how can I facilitate art making to support the cognitive and social engagement of a group of individuals with Alzheimer's disease, and what are the implications of the practices I develop and implement for those working with people who have the disease?

I employed a methodology of action research for this study, as it was defined by Cohen et al. (2011): "a form of disciplined inquiry, in which a personal attempt is made

to understand, improve, and reform practice” (p. 345). In using the methodology of action research, I progressed through the repeating cycle of “planning, acting, observing, reflecting, and re-planning” (McNiff, 2002, p. 7). I treated each of the three classes as a cycle and developed a list of revisions after each class was complete. These revisions were based on my analysis of the data consisting of my own written observations, photographs of the created artwork and class environment, and interviews with the two other class facilitators: the MAP director and the MAP volunteer. I also reflected on the revisions through discussion with my thesis supervisor. After completing the three action research cycles, I conducted a thematic analysis of all the data to draw out contributing themes within the two categories of social and cognitive engagement. Lastly, I also connected observations of social and cognitive engagement with indicators of well-being, as defined by Kitwood and Bredin (1992).

SUMMARY OF FINDINGS

In encouraging social and cognitive engagement, the art making activities in this study were intended to support the well-being of the participants who were living with Alzheimer’s disease. The observations of participants in this study indicated that they were all, to varying extents, experiencing a moderate stage of the disease. Individuals in the moderate stage of Alzheimer’s disease typically have difficulties in learning new things, doing tasks with multiple steps, and becoming easily distracted (HHS, 2015). I found that the cognitive engagement of the participants was best sustained through art making activities that included stimulating materials, repetitive movements, multiple steps, individualized assistance and breaks, minimal distractions, and limited options. These elements enabled the participants to have a role and purpose in the activities at a time of their life when they would typically have decreased opportunities to engage in

social activities and self-expression due to the effects of Alzheimer's disease (Seman, 2011; Tyler, 2002; Waller 2002). Throughout these activities, the participants were encouraged by the facilitators to make their own artistic decisions and do as much as they could on their own, as a way of stimulating cognitive engagement. Many of the projects were personally meaningful for the participants, as evidenced by the stories they shared and the way they were attached to the finished work and desired to show it to others. For supporting social engagement, the following themes emerged: personal objects and stories, collaboration, music and mood, and consistency and repetition. These elements contributed to the cultivation of a fun, open, and welcoming atmosphere within the classroom. The resulting social interactions included many pleasant interactions between the facilitators and the participants in the collaborative process during the class and one remarkable interaction of a back-and-forth conversation between two participants in the group reflection time.

SUGGESTIONS FOR FUTURE RESEARCH

The results of this study, combined with the theory of person-centered care described in Chapter 2, could provide some guidance for the development of an art making curriculum specifically for individuals living with Alzheimer's disease. A written curriculum could give a starting point for art educators, caregivers, or family members who wish to implement a similar program.

Many opportunities for future research remain within the topic of providing art making experiences for those with Alzheimer's disease. Future research could look at the specific meanings underlying participant's artwork and how making personally significant pieces of art can be encouraged. I recorded many meaningful associations that

the participants in this study made with their artwork, and this subject seems to be a rich topic for exploration.

A future study could collect and analyze the various purposes and results of studies regarding art making experiences with this population, in order to clarify the similarities and differences between the fields of art therapy and art education. This type of study would assist in clarifying the practice of each field and show what each might learn from the other.

In this study, I saw how participating in making art doesn't require memory and verbal skills, which are decreased in those living with the disease. Therefore, I propose that engaging in art making re-affirms the participant's personhood and identity not only to themselves, but also to the people around them. A future study could examine the question: How does an individual's engagement in art change the perceptions of them among their caregivers and family members?

As most of the participants in this study demonstrated comfort in the repetitive motion involved in using a brush, a future study could measure the success of using other repetitive actions from an individual's past within activities to sustain their engagement. This might involve doing some research on their past hobbies, jobs, and interests before formulating the activity.

I would like to see a longitudinal study conducted on how best to address the changing needs of an individual, as they go through all of the stages of Alzheimer's disease. This type of study could provide insight on how to support individuals in each stage of the disease.

FINAL THOUGHTS

In our work-focused culture, those who are no longer able to contribute in this way are easily written off and isolated, especially adults with Alzheimer's disease. Many are also separated from their families and friends, as they may live in assisted living facilities or nursing homes. As I found in this study, if we pay attention, they are communicating with us, echoing the title of Zeisel's (2009) book: *I'm Still Here*. For these adults with Alzheimer's disease, art making provides them an opportunity to come together with others to share and collaborate in meaningful ways that re-affirm their personhood.

In facilitating the art making activities, I had the privilege of meeting people with delightful, unique personalities. The process of making art with them revealed their individual abilities and preferences to me and the other facilitators, leading to the development of rich relationships based on mutual respect. I treasure the time we spent together, and I am very grateful for their openness to share their stories and artwork.

Appendix

CLASSROOM SET-UP



Figure 1: Appearance of Classroom Before Set-up



Figure 2: Classroom Set-up for First Class



Figure 3: Example of Set-up of Materials for Each Participant

PHOTOS FROM FIRST CLASS ON OCTOBER 20, 2015



1. *Improvisation 9* (Kandinsky, 1911) 2. *Improvisation 5 (Park)* (Kandinsky, 1911)



3. *Yellow Red Blue* (Kandinsky, 1925) 4. *White Centre* (Kandinsky, 1925)

Figure 4: Images from Slideshow in the Order Shown to Participants



Figure 5: Sample Project Created by the Researcher



Figure 6: Textural Objects for Painting



Figure 7: Mr. B.'s First Painting



Figure 8: Mr. B.'s Second Painting



Figure 9: Mr. R.'s First Painting



Figure 10: Mr. R.'s Second Painting

PHOTOS FROM SECOND CLASS ON NOVEMBER 3, 2015



Figure 11: Set-up of Paper and Frames



Figure 12: Sample Project Created by the Researcher



Figure 13: Ms. A.'s Self Portrait



Figure 14: Mr. R.'s Self Portrait

(The final with glass plate added is on the right.)



Figure 15: Mr. B.'s Self Portrait



Figure 16: Mr. D.'s Self Portrait

(The final with glass plate added is on the right.)

PHOTOS FROM THIRD CLASS ON NOVEMBER 17, 2015



Figure 17: Example of Materials Grouped into Containers



Figure 18: Sample Project (Left) and Example Project in Process (Right)



Figure 19: Mr. R.'s Shadow Box



Figure 20: Mr. B.'s Shadow Box



Figure 21: Mr. D.'s Shadow Box



Figure 22: Mr. E.'s Shadow Box

References

- Abraham, R. (2005). *When words have lost their meaning: Alzheimer's patients communicate through art*. Westport, CT: Praeger Publishers.
- AGE of Central Texas. (n.d.). Retrieved from <http://www.ageofcentraltx.org/>
- Alzheimer's Association. (n.d.). Retrieved from <http://www.alz.org>
- Alzheimer's Association. (2015). Alzheimer's disease facts and figures. *Alzheimer's & Dementia*, 11(3), 332-384. doi:10.1016/j.jalz.2015.02.003
- Alzheimer's Foundation of America. (2014). *Dementia Care Professionals of America* [Website]. Retrieved from careprofessionals.org
- Alzheimer's Foundation of America. (2015). Retrieved from alzfdn.org
- Art Therapy Credentials Board, Inc. (n.d.). *What is art therapy*. Retrieved from <http://www.atcb.org/Public/WhatIsArtTherapy>
- Ayres, L. (2008). Semi-Structured Interview. In Lisa M. Given (Ed.), *The Sage Encyclopedia of Qualitative Research Methods* (pp. 811-812). Thousand Oaks, CA: SAGE Publications, Inc. doi:10.4135/9781412963909.n420
- Beard, R. L. (2012). Art therapies and dementia care: A systematic review. *Dementia*, 11(5), 633-656. doi:10.1177/1471301211421090
- Bird, A. (2013). *I Want to See Pulaski at Night* [MP3]. Ypsilanti, MI: Grimsey Records.
- Brooke, S. L. (Ed.). (2006). *Creative arts therapies manual: A guide to the history, theoretical approaches, assessment, and work with special populations of art, play, dance, music, drama, and poetry therapies*. Springfield, IL: Charles C. Thomas.

- Cohen, L., Manion, L., & Morrison, K. (Eds.) (2011). *Research methods in education* (7th ed.). Hoboken: Taylor and Francis. doi:10.4324/9780203720967
- Cohen-Mansfield, J., Dakheel-Ali, M., & Marx, M. S. (2009). Engagement in persons with dementia: The concept and its measurement. *The American Journal of Geriatric Psychiatry*, 17(4), 299-307. doi:http://dx.doi.org/10.1097/JGP.0b013e31818f3a52
- Dana, N. (2013). Why do teacher research anyway. In N. Dana (Author), *Digging deeper into action research: A teacher's inquiry field guide* (pp. 1-9). Thousand Oaks, CA: Corwin.
- de Medeiros, K., & Basting, A. (2014). "Shall I compare thee to a dose of donepezil?": Cultural arts interventions in dementia care research. *The Gerontologist*, 54(3), 344-353. doi:10.1093/geront/gnt055
- Dewey, J. (1938). *Experience and education*. New York, NY: Macmillan.
- Efron, S. E., & Ravid, R. (2013). *Action research in education: A practical guide*. New York: Guilford Publications.
- Falk, B. (2002) A narrowed sense of space: An art therapy group with young Alzheimer's sufferers. In D. Waller (Ed.), *Arts therapies and progressive illness: Nameless dread* (pp. 107-121). Hove, East Sussex: Brunner-Routledge.
- Hattori, H., Hattori, C., Hokao, C., Mizushima, K., & Mase, T. (2011). Controlled study on the cognitive and psychological effect of coloring and drawing in mild Alzheimer's disease patients. *Geriatrics & Gerontology International*, 11(4), 431-437. doi:10.1111/j.1447-0594.2011.00698
- Hutzel, K., & Anderson, T. (2005). *Learning from community: A participatory action research study of community art for social reconstruction* (Order No. 3198223). Available from ProQuest Dissertations & Theses Full Text. (304996937). Retrieved from <http://ezproxy.lib.utexas.edu/login?url=http://search.proquest.com/docview/304996937?accountid=7118>

I remember better when I paint: Treating Alzheimer's through the creative arts [Motion picture]. (2009). Paris, France: French Connection Films.

Judge, K. S., Camp, C. J., & Orsulic-Jeras, S. (2000). Use of Montessori-based activities for clients with dementia in adult day care: Effects on engagement. *American Journal of Alzheimer's Disease and Other Dementias*, 15(1), 42-46. doi:10.1177/153331750001500105

Junge, M. B. (2010). *The modern history of art therapy in the United States* (1st ed.). Springfield, IL: Charles C Thomas Publisher.

Kandinsky, W. (1911). *Improvisation 5 (Park)*. Retrieved from <https://dase.laits.utexas.edu/>

Kandinsky, W. (1911). *Improvisation 19*. Retrieved from <https://dase.laits.utexas.edu/>

Kandinsky, W. (1921). *White Centre*. Retrieved from <https://dase.laits.utexas.edu/>

Kandinsky, W. (1925). *Yellow Red Blue*. Retrieved from <https://dase.laits.utexas.edu/>

Killick, K., & Schaverien, J. (1997). *Art, psychotherapy, and psychosis*. London, England: Routledge.

Kitwood, T., & Bredin, K. (1992). Towards a theory of dementia care: Personhood and well-being. *Ageing and Society*, 12, 269-287.

McNiff, J. (2002). *Action research: Principles and practice*. London: Routledge.

McNiff, J., & Whitehead, J. (2009). *You and your action research project*. Retrieved from <http://www.ebilib.com>

Mobile Art Program. (2014). Retrieved from www.mobileartprogram.org

- National Art Education Association Research Commission. (2012). Vision Statement. Retrieved from <http://www.arteducators.org/research/commission/about-research-vision-statement>
- National Institute on Aging. (2015). *Caring for a person with Alzheimer's disease: Your easy-to-use guide*. Retrieved from <https://www.nia.nih.gov/alzheimers/publication/caring-person-alzheimers-disease/about-guide>
- O'Connor, M. (1996). *Appalachia Waltz – Solo Cello Version* [Recorded by Y. Y. Ma]. On Solo [CD]. Sony Classical. (1999)
- Osborn, R. (2012). *Enhancing life with Alzheimer's: How the arts and art-making benefit persons with Alzheimer's disease*. Retrieved from The University of Texas Libraries. (OCLC Number 795241921).
- Phinney, A., Moody, E. M., & Small, J. A. (2014). The effect of a community-engaged arts program on older adults' well-being. *Canadian Journal on Aging / La Revue canadienne du vieillissement*, 33, 336-345. doi:10.1017/S071498081400018X
- Sauer, P. E., Fopma-Loy, J., Kinney, J. M., & Lokon, E. (2014). "It makes me feel like myself": Person-centered versus traditional visual arts activities for people with dementia. *Dementia*, 1-18. doi:10.1177/1471301214543958
- Seman, D. (2011). Now what? Including art in caring for patients with memory loss. In B. Huebner (Ed.), *I remember better when I paint* (pp. 110-115). Glen Echo, MD: Bethesda Communications Group and New Publishing Partners.
- Stout, C. J. (2006). With all due respect: A second look at action research. *Studies in Art Education*, 47(3), 195-197.
- Tyler, J. (2002). Art therapy with older adults clinically diagnosed as having Alzheimer's disease and dementia. In D. Waller (Ed.), *Arts therapies and progressive illness: Nameless dread* (pp. 68-83). Hove, East Sussex: Brunner-Routledge.

- University of Bradford School of Dementia Studies. (2015). *Introduction to dementia care mapping (DCM)*. Retrieved from <http://www.brad.ac.uk/health/dementia/dementia-care-mapping/>
- U.S. Department of Health and Human Services, National Institutes of Health, National Institute on Aging. (2015). *Alzheimer's disease fact sheet* (NIH Publication No. 15-6423). Retrieved from <https://www.nia.nih.gov/alzheimers/publication/alzheimers-disease-fact-sheet>
- Verity, J., & Kuhn, D. (2008). *The art of dementia care*. Clifton Park, NY: Thomson Delmer Learning.
- Vetter, J. M. (2007). *The power of art: Using art therapy to minimize agitation: A case study of an adult male with Alzheimer's disease*. (1442111 M.A.). Ann Arbor: Ursuline College.
- Waller, D. (Ed.). (2002). *Arts therapies and progressive illness: Nameless dread*. Hove, East Sussex: Brunner-Routledge.
- Zeisel, J. (2009). *I'm still here: A breakthrough approach to understanding someone living with Alzheimer's*. New York, NY: Avery.
- Zuber-Skerritt, O., & Fletcher, M. (2007). The quality of an action research thesis in the social sciences. *Quality Assurance in Education*, 15(4), 413-436. doi:10.1108/09684880710829983

Vita

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