

# Prescribing Arts as a Health Care Tool in Forsyth County

Initial Findings, Next Steps 11-11:45



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Wake Forest University



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Counseling Program,  
Associate Professor, Gerontology and Geriatrics, Wake  
Forest University School of Medicine

# *A Feasibility Approach - From Clinical Trials to a Testing an Arts on Prescription Pilot*

Rather than *only* considering pharmaceutical products in treatment plans, physicians might prescribe dance, music, art or creative writing experiences as a social behavior that can improve their health and wellbeing.



# Ask your doctor if *the* **ARTS** are right for you



# ARTS on Prescription *research study*

Are you feeling lonely, isolated or disconnected? Looking for an easy and free way to try something new?

*The arts\** may be what the doctor ordered! Whether you participate yourself or join the audience, *the arts* can uplift, energize, and inspire.

Ask your doctor today about opportunities to connect through creativity.



*\*side effects may include joy, laughter, movement, inspiration, and a sense of connection.*



# Arts on Prescription - believing in its purpose, power and possibility

Having a regular arts practice has been proven to be a tool that can help individuals:

- increase **quality of life**
- decrease apathy, depression, and loneliness
- increase **social connections**
- inspire **creativity and purpose**



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# Criteria for Inclusion

- Older adults in Forsyth County who may benefit from engaging in an arts-based activity due to isolation, mood disorders, or any other condition deemed appropriate by their referring physician.
- Age  $\geq$  60
- English speaking
- Understand and provide consent
- Have reliable transportation or is able to use transportation provided by the study



# Criteria for Exclusion

- Current diagnosis of a major neurological disorder (Alzheimer's disease, Lewy body dementia, Frontotemporal dementia, Parkinson's disease, amyotrophic lateral sclerosis, etc.)
- Unwilling or unable to provide consent
- *Regularly participating in arts-based activities (receptive or participatory events at least quarterly)*



# Arts on Prescription Advisory Board

These five clinicians are members of the advisory council that was formed specifically for this project:

- Dr. Kate Callahan
- Dr. Jo Cleveland
- Dr. Nancy Denizard-Thompson
- Dr. Christina Hugenschmidt
- Dr. Sandhya Nallu





John R. Beck



Kathryn E. Callahan



MaryJo Lynn Cleveland



T. Lee Covington



Nancy Denizard-Thomas



Renee Griffin



Adina Harper



Christina Hugenschmidt



Ana Iltis



Aly Maier Lokuta



Aimee Mepham



Betsy Messick



Ashley Morgan



Sandhya Nallu



Issis Kelly Palmarol



Christina Soriano



Shannon Stokes

# Local Arts Organizations

- Narrative Medicine at WFU
- Arts Council Theatre
- Camel City Jazz
- Heart of the Triad
- HealthRHYTHMS®
- Little Theater
- Music Carolina
- NC Black Rep
- Piedmont Opera
- Piedmont Wind
- Salem Band
- NC Black Rep
- Salem Band
- Sawtooth Center for Visual Arts
- Stained Glass Playhouse
- Theater Alliance
- WS Symphony

® Drumming



# Testimonials

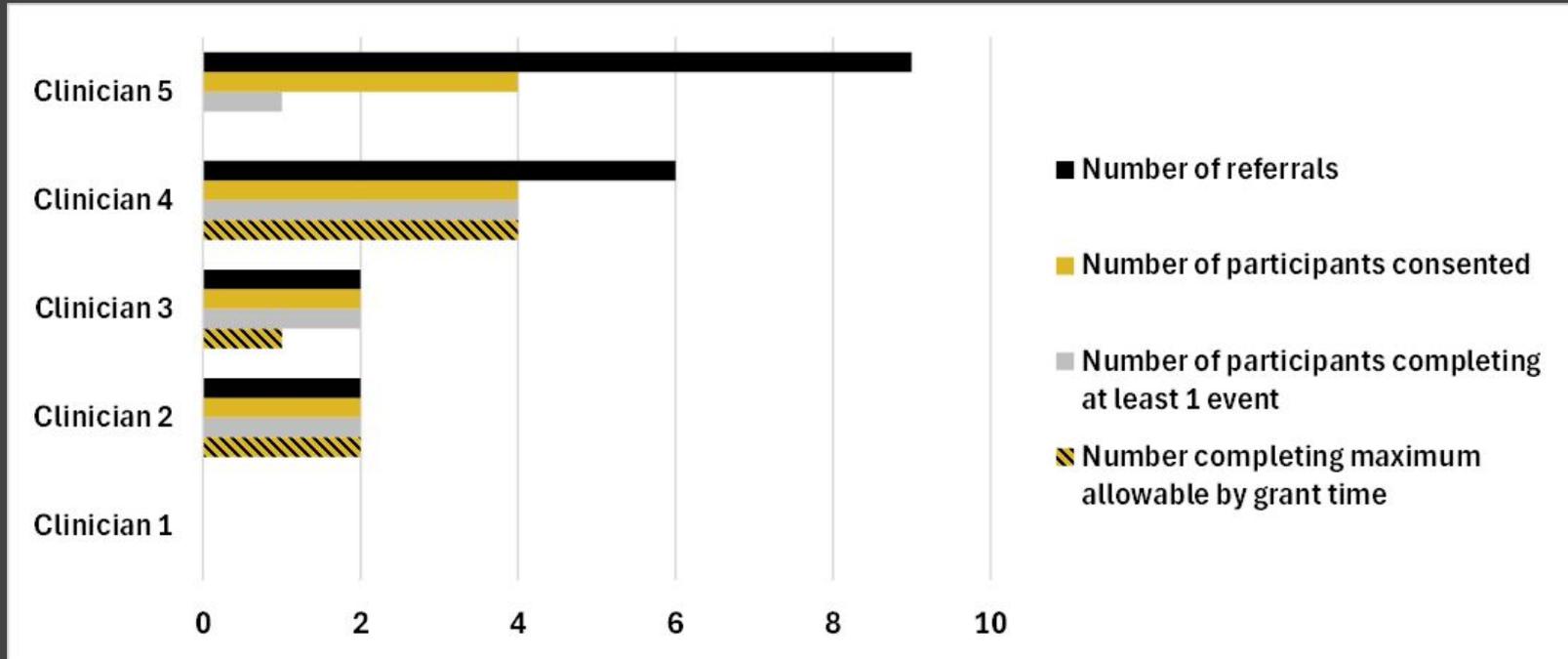
“Uplifting to be out and about. The performance was excellent—probably wouldn’t have gone without encouragement.”

“It was really good to get out and do something that she wouldn’t have had time to identify on her own. There are a lot of resources in W-S that you don’t get in other places.”

“It was a lot of fun. The place (Generations Center) was very nice, good environment.”  
“Instructor was very engaging, accessible, and fun.”



# Referral Outcomes



# Sample Characteristics

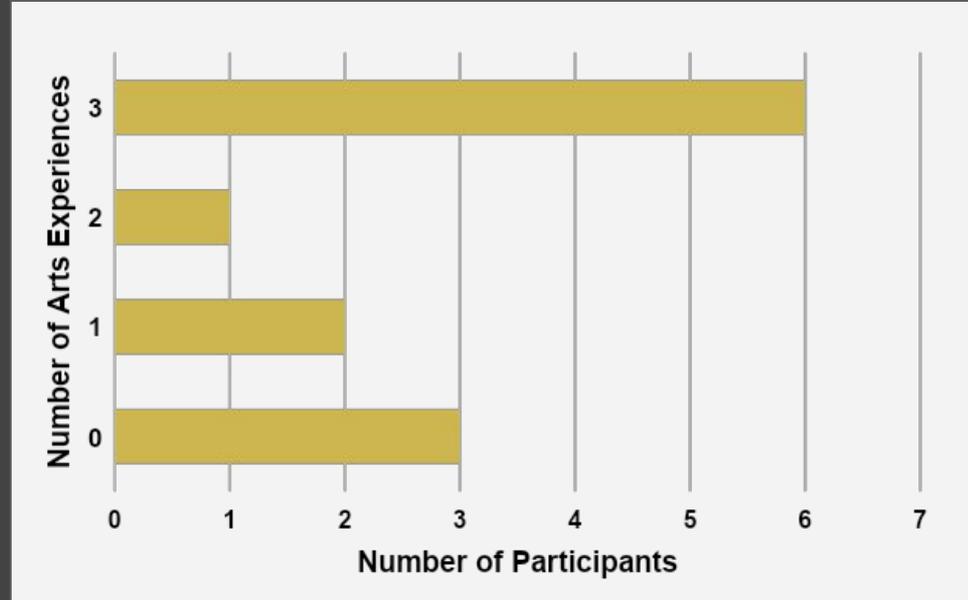
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|                       |                |
|-----------------------|----------------|
| <b>Age (years)</b>    | 71 ± 7.4 years |
| <b>Women</b>          | 10 (83%)       |
| <b>Race/Ethnicity</b> |                |
| <b>Black</b>          | 5 (42%)        |
| <b>Hispanic</b>       | 1 (8%)         |
| <b>White</b>          | 6 (50%)        |
| <b>Transportation</b> | 3(25%)         |

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# Attendance

- People completed multiple events
  - 66% completed 3 events
  - 78% completed the maximum number of events possible based on when they enrolled



# Attendance: Participatory vs. Receptive

- People were interested in both\*
  - Participatory: 21 experiences scheduled
  - Receptive: 18 experiences scheduled
  - Overall, people showed up equally well to both
- People requested more additional tickets for receptive than participatory events

# Why did people miss classes?

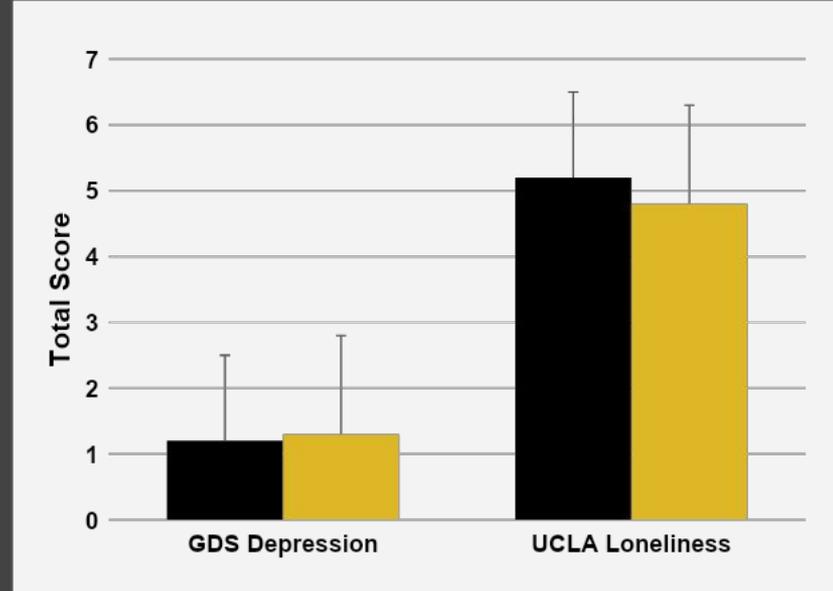
- Overall, 17 events were scheduled but not attended
  - 3 times, the event was not completed as scheduled due to constraints from the arts partner (class full or canceled)
  - 14 events were not completed due to participant constraints
  - 8 missed events were participatory
  - 9 missed events were receptive

# Attendance Take-Homes

- **Most people had to be rescheduled at least once**
  - 2/3 of people who attended 3 events had to be rescheduled at least once
  - Estimated time for link workers to schedule events
  - Budgeting for cancellations or missed events
- **Most people attended most of their scheduled events**
- **Patterns of attendance varied widely; there were 10 different patterns of attendance for 12 people.**

# Main Outcomes

- The GDS and UCLA Loneliness appeared to lack sensitivity in this population.
- Most participants:
  - Had low GDS scores at baseline (45% had 0 at baseline; only 33% (n=3) had 2 or higher)
  - 56% were not lonely on the UCLA Loneliness Scale
- The SCS may not be a good choice for administering over the phone



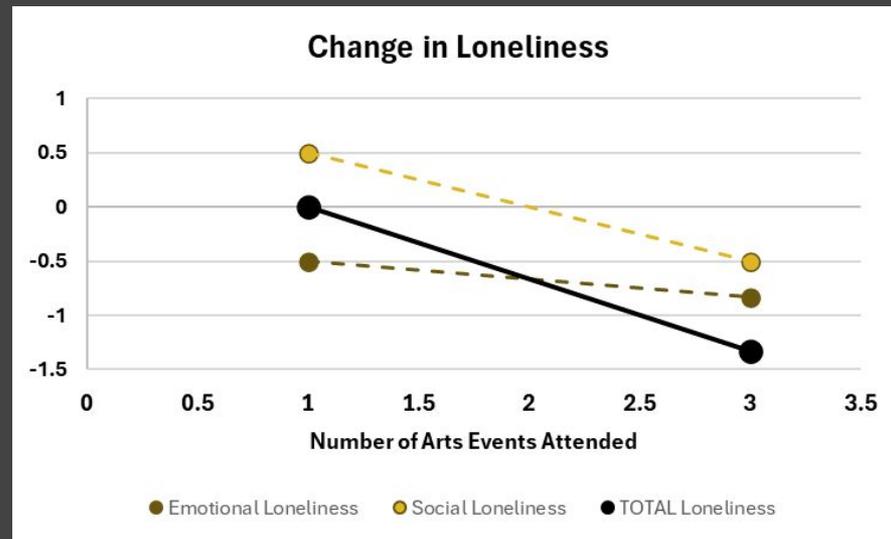
# Secondary Outcomes

- Loneliness (DeJong Gierveld scale)
- Expectations Regarding Aging Survey (Ageism)
- Arts Self-Efficacy
- Follow-up Survey

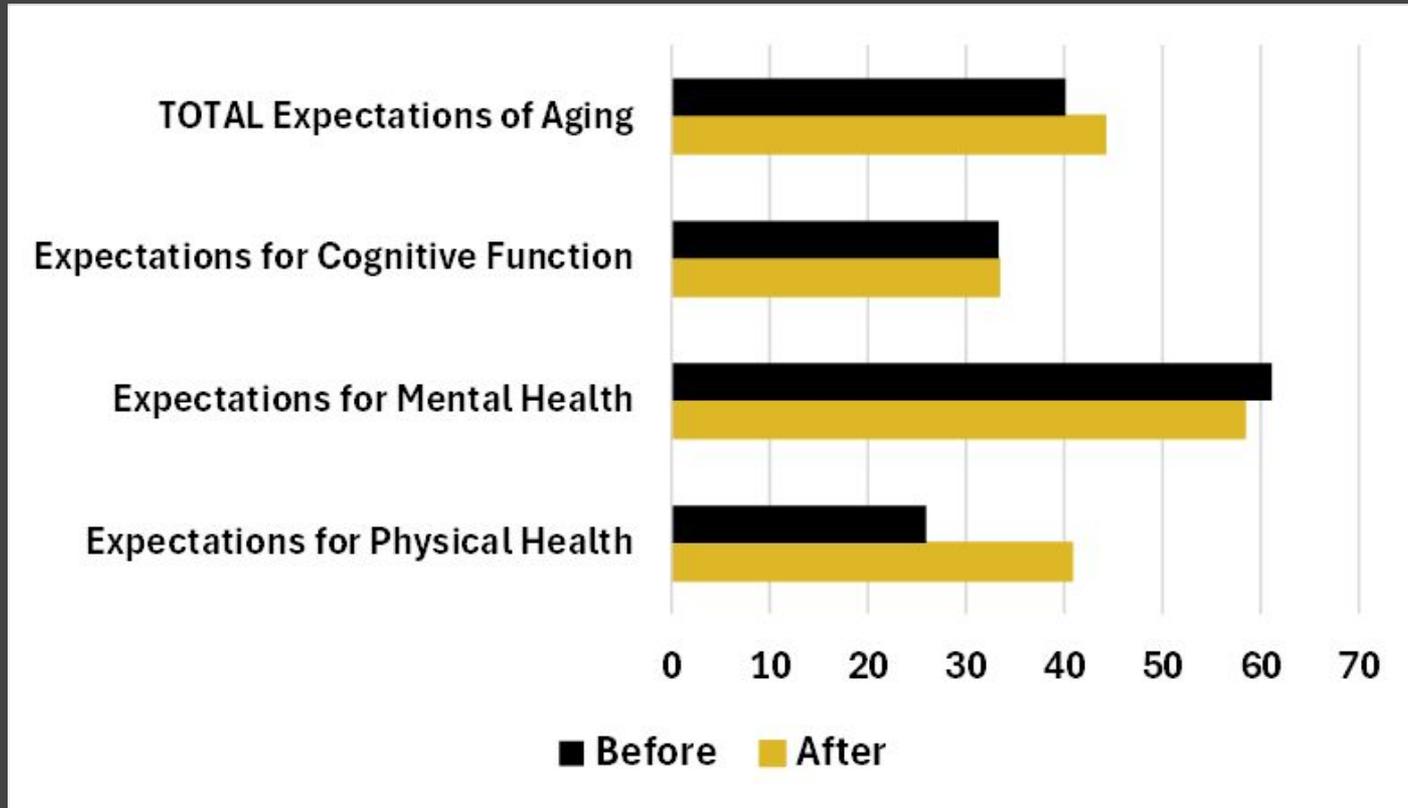
# Loneliness

- Overall, there was not a significant decrease in average loneliness
- However:
  - The number of severely lonely people decreased from 2->0 (17% to 0%)
  - Change in social loneliness was significantly correlated with the number of arts experiences completed, driven by receptive experiences

|                        | NUMBER OF COMPLETED EVENTS |         |                         |              |                         |              |
|------------------------|----------------------------|---------|-------------------------|--------------|-------------------------|--------------|
|                        | Participatory Events       |         | Receptive Events        |              | TOTAL Events            |              |
|                        | Correlation Coefficient    | P-value | Correlation Coefficient | P-value      | Correlation Coefficient | P-value      |
| Δ Emotional Loneliness | 0.33                       | 0.38    | -0.52                   | 0.15         | -0.20                   | 0.61         |
| Δ Social Loneliness    | -0.09                      | 0.82    | <b>-0.66</b>            | <b>0.05*</b> | <b>-0.69</b>            | <b>0.04*</b> |
| Δ Total Loneliness     | 0.10                       | 0.79    | -0.54                   | 0.13         | -0.43                   | 0.25         |

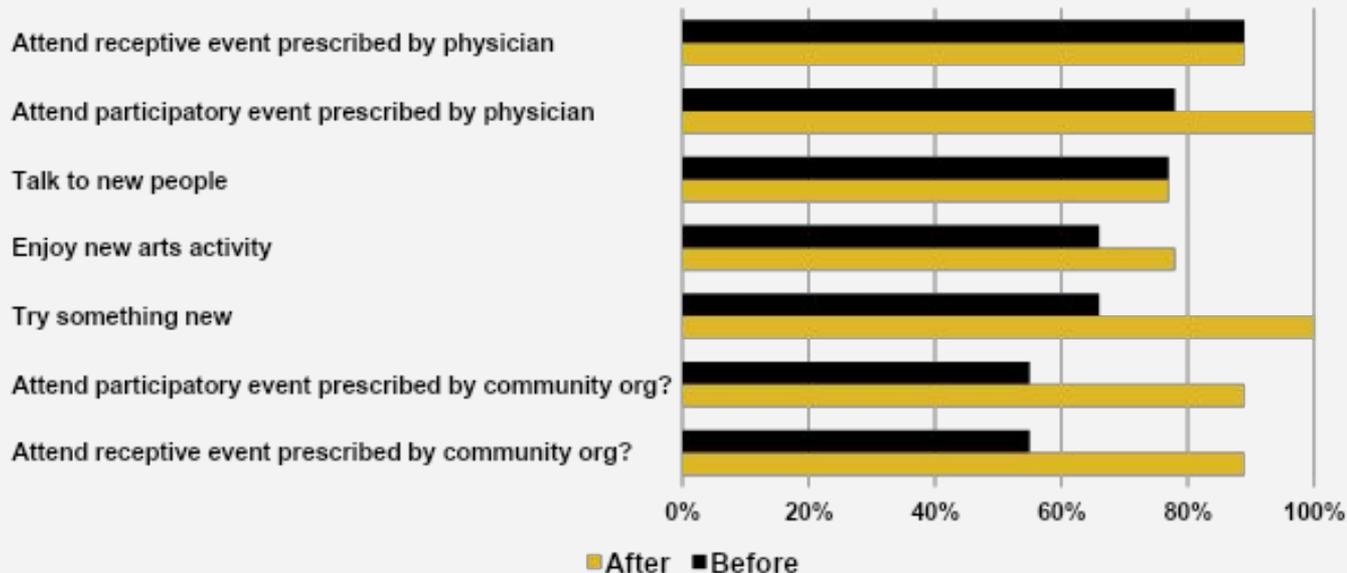


# Expectations Regarding Aging (ERA)

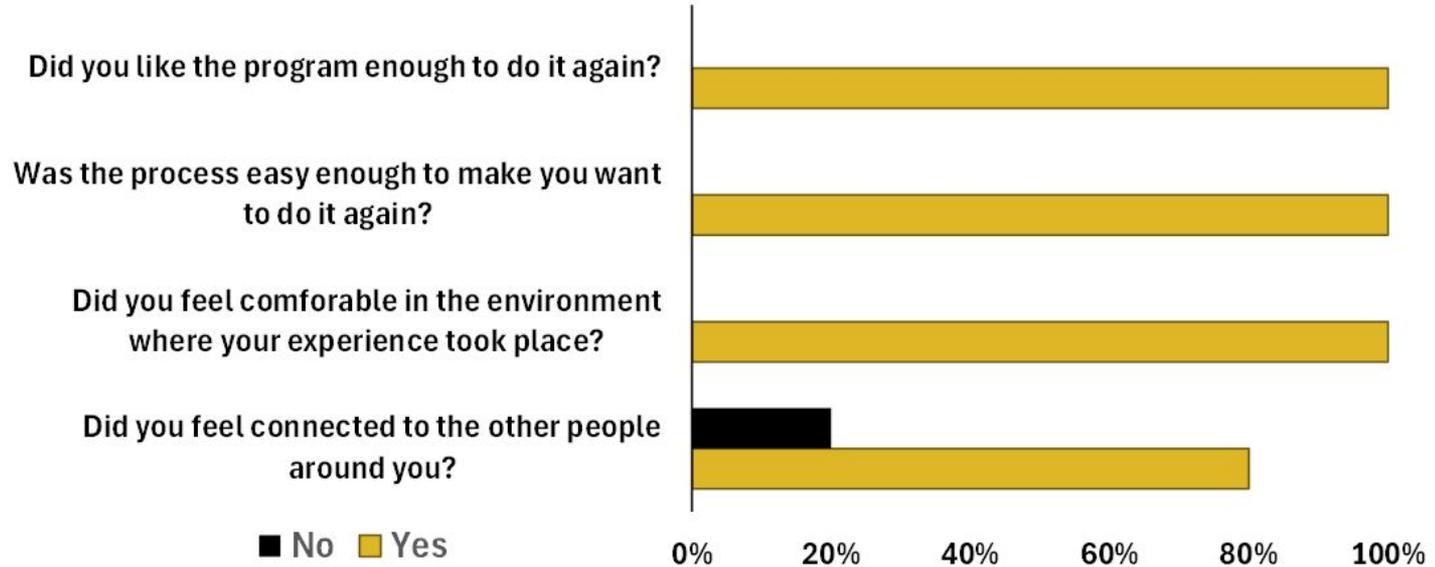


# Self-Efficacy

## How confident are you that you can . . .



# Program Evaluation



# Prescribing Arts as a Health Care Tool in Forsyth County

Panel discussion #2



**Kathryn E. Callahan, MD, MS**  
Geriatrician, Wake Forest Baptist Health



**Shelia Grissard**  
Generations Center arts participant



**Brenda Hunter**  
Generations Center arts participant



**Ashley Morgan**  
Project Manager, Wake Forest University  
School of Medicine



**Sandy Smalling**  
Generations Center arts participant

Let's imagine a future in Forsyth County where physicians regularly and easily *prescribe* the arts to their patients as part of their healthcare and wellness.

What *opportunities* do you imagine here?

What *challenges*?

Can you imagine this future in Forsyth County? Why or why not?

Ask your doctor  
if *the* **ARTS**  
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