

NEA ARTS

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HEALING PROPERTIES

ART + HEALTH

A prosthetic knee designed by the nonprofit product development company D-Rev. STORY ON PAGE 5

THIS ISSUE

At some point in our lives, all of us have felt the healing properties of art, even if in subtle ways. Maybe it's a certain song or album we listen to when in need of a pick-me-up, or a particular movie we watch that somehow always manages to comfort. Or maybe it's a book we've read that has helped us make sense of the world, and realize that we are not alone.

But these properties, when writ large, are capable of doing far more than cheer us up after a down-and-out day. When used to its maximum potential, art has the power to ease the symptoms of trauma, to change the dynamics of the aging process, and alleviate emotional and physical symptoms of chronic illness.

In this issue, we'll look at some of the innovative ways that organizations are using art as an instrument of healing. At the Fort Belvoir Community Hospital, art therapy is helping service members grapple with the complex issues behind post-traumatic stress disorder and traumatic brain injuries. At the nonprofit D-Rev, creative product design is forging solutions for medical issues plaguing third-world countries. AIDS Quilt workshops provide an outlet for grief and mourning, while working toward HIV/AIDS prevention and awareness. COSACOSA, based in Philadelphia, uses public art to heal communities fractured by poverty and illness, and in California, EngAGE is challenging the concept of what retirement communities should look like.

As you read through this issue, we hope you'll see the potential art has to heal, in equal measure, the mind, the body, and the spirit.



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BENEATH THE SURFACE

CREATIVE ART THERAPY AT FORT BELVOIR, VIRGINIA

BY DON BALL AND REBECCA GROSS / PHOTOS BY SALLY GIFFORD



“THERE’S ALWAYS SOMEBODY WHO’S GOT IT WORSE THAN YOU,” SAID MASTER SERGEANT EARL I. Covell, talking about his 12 overseas combat deployments as a member of the Special Operations Tactical Air Control team. “If you just got a little bit of shrapnel, you don’t want to get medevaced out. You suck it up. It was more important to stay with my team. I let a series of incidents compound on each other. I let them accumulate. You can only fix Humpty Dumpty so many times before it can’t be fixed any further.”

▲
Air Force Master Sergeant Earl Covell working on an art piece at Fort Belvoir in Virginia.



“Engaging in art-making is inherently relaxing. It has been shown to decrease cortisol so people become relaxed, their anxiety goes down, and they feel more comfortable.”

▲
Creative arts therapist Jackie Biggs at the National Intrepid Center of Excellence satellite location at the Fort Belvoir Community Hospital.

WHEN HE RETURNED HOME TO WORK at the Air Force headquarters at the Pentagon, he found that the toll wasn't just physical, but psychological. “I was such a shell, getting progressively harder and harder,” said Covell. “I was shut off from my family and my friends. I was becoming more reclusive.” In addition to meeting with psychiatrists and social workers, he began working with Melissa Walker, the creative arts therapist at the National Intrepid Center of Excellence (NICoE) at Walter Reed Military Medical Center in Bethesda, Maryland. He then transferred to the NICoE satellite location at Fort Belvoir in northern Virginia, where he resumed treatment with art therapist Jackie Biggs.

The Creative Arts Therapy program at the Fort Belvoir Community Hospital—a state-of-the-art hospital designed to be an instrument of healing, hope, discovery, and learning for service members and their families—was started in September 2013 through a partnership with the National Endowment for the Arts. The Fort Belvoir program uses visual and literary arts to treat military service members dealing with psychological health conditions such as post-traumatic stress disorder (PTSD) and traumatic brain injuries (TBI). The program is administered as an outpatient clinic so that the therapy can continue on a long-term basis, without patients having to leave their units or families for extended periods of time.

Although art had brought Covell joy in his youth—he frequently drew and participated in his school's drama program—he initially rejected art therapy, and didn't participate in the first few sessions. “I was in a totally different place at my life,” he said. “I wasn't allowing myself to have any enjoyment at that time.” Eventually, with gentle prodding by Walker, Covell began to create, and the walls he had carefully built to block out both people and memories began to tumble down. “I found art was more a vessel that allowed me to open up to the world,” he said.

One of the reasons Biggs believes patients like Covell find success in art therapy is the effect it can have on the stress hormone cortisol. “Engaging in art-making is inherently relaxing,” Biggs said. “It has been shown to decrease cortisol so people become relaxed, their anxiety goes down, and they feel more comfortable.” Feeling comfortable and less anxious is especially important in therapy for military service members, many of whom have been in high-stress situations for much of their careers, and are trained to be hyper-vigilant of their surroundings. “Patients can walk in here really angry, really frustrated with something that happened on their way in, and as they're engaged in art making you'll see them calm down. And when they leave, they'll make comments like, ‘This is like medicine. I feel way better.’”

The service members Biggs works with exhibit “moral dilemmas and existential topics and shame and guilt, and survivor’s guilt, and, a lot of times, fear of one’s self.” In addition, Biggs’s patients often engage in isolating behaviors, which can make them feel further estranged and out-of-synch with society. Biggs combats this with group art therapy sessions, as well as by hanging patient artwork along the walls of the art room. “The writing’s on the wall in the artwork that they’re not alone, and that other people are dealing with these things internally,” she said.

Of course, the goal is to eventually externalize these internal struggles. As service members create and then describe their work, they often find themselves discussing an incident or emotion that they’ve repressed for years, whether intentionally or not. “Sometimes patients call it trick therapy,” Biggs noted. “We’re not really tricking them, but just getting beneath the surface in a different way.... Sometimes patients wind up feeling so overwhelmed that it’s hard to sort through what exactly is overwhelming them and what really is underlying all those emotions. Through creating the artwork and then talking about it later, they’re usually able to identify and pinpoint really what’s underlying what’s going on, and what they can target in therapy moving forward.”



▲
A detail of MSgt Covell's artwork *How Much Does a Hero Cost?* showing one of the pistols he created using a collage of words.

◀
MSgt Covell's artwork *How Much Does a Hero Cost?*



▲ MSgt Covel talks about the self-portrait he is working on.

Biggs noted that for many patients, talking about artwork is often easier than engaging in a face-to-face “stare down” with a psychologist or psychiatrist, which can put people on guard and raise their defenses. Instead, Biggs tries to work around the inner censors that patients may have put in place. “Patients are encouraged to be really spontaneous and follow their gut and really engage in intuitive art-making,” she said. “I think that combination of de-stress, relaxing, and spontaneity often results in artworks that shed light on the subconscious.”

For Covel, the art therapy program helped him “to visualize something that’s in my head and to process something into words,” he said. “I’m not somebody who likes to write things down. I’m not a person who likes to outwardly talk. And I guess that’s why I want my art to be perfect is because I want it to be self-expressive where it should answer all the questions.”

One of his artworks, *How Much Does a Hero Cost?*, is a collage-piece inside a recycled fruit box. “I have a thing, maybe it’s because I grew up in Portland, Oregon, that I like to recycle things. I try to do that as much as possible with my art.” Inside the box is a collage, with a picture of Covel at the center, and other photos of him hidden among the images. Overlaid on the collage are two foam-cut pistols pasted with either negative or positive words.

“There’s kind of a yin-yang sort of thing going on with the pistols in there,” said Covel. “Just making those pistols alone with the words took me a really long time. It was

emotionally draining just to do the semi-positive one. I had to force myself to do that one, because that was at the beginning of our therapy. I was in a place that I did not feel real highly of myself. But at the end I was able to breathe a bit of relief and know that in the end, things were done for a reason in that given moment. It doesn’t necessarily make me a bad guy.”

Covel was working on a self-portrait as he came close to his impending retirement from the service. “Jackie suggested that since I’m retiring that I create something to kind of culminate my career. I always jokingly said I wanted a big, cheesy velvet painting like they have of the generals, like me on a big white steed and everything, with a sword, and hang it above my fireplace. That’ll probably never happen, but Jackie suggested that I come up with something, so I thought I’d give it a shot.”

So Covel began working on the piece, drawing and using watercolors. “It’s supposed to be me in my service dress uniform. I’m going to pencil draw it. The decorations are actually in watercolor that I’m going to have bleed down when I have the watercolor. I’m going to have a saying go across the whole thing: “The soldier may leave the valley, but the valley never leaves the soldier.”

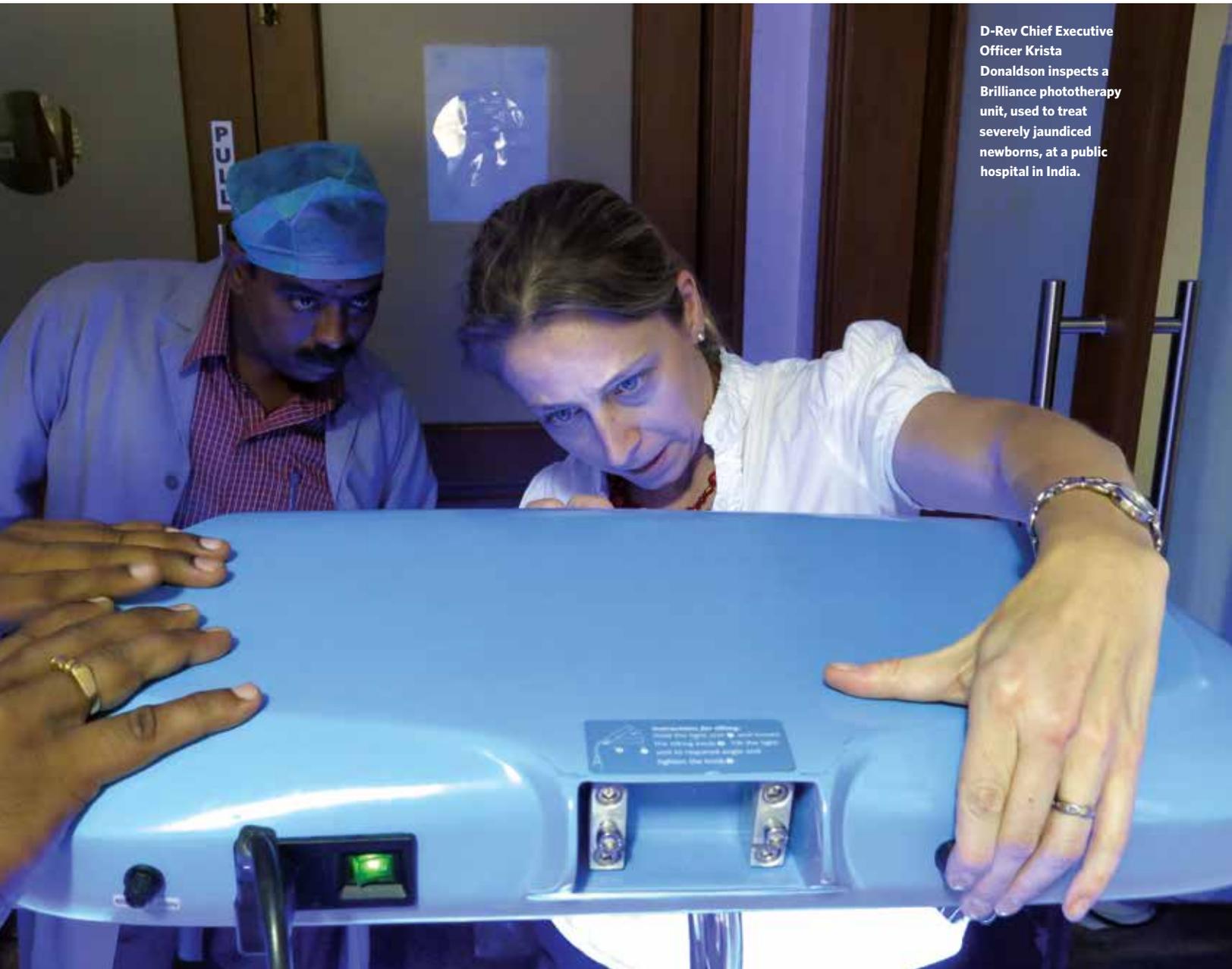
Even when the piece is finished, Covel doesn’t plan on putting down his paintbrush. “I look at it as an ongoing process,” he said. “Art has been given back to me. It’s been a gift. I’ll get to take this with me and utilize it to process anything in the future.”



Focusing on the Impact

D-REV BRINGS FUNCTIONALITY AND AESTHETICS
TO LOW-INCOME MARKETS

BY PAULETTE BEETE / PHOTOS COURTESY OF D-REV



D-Rev Chief Executive Officer Krista Donaldson inspects a Brilliance phototherapy unit, used to treat severely jaundiced newborns, at a public hospital in India.

A baby is treated with a Brilliance phototherapy unit in India.
▼

A MOTORCYCLE ACCIDENT LEADS TO the amputation of a leg. If it happens in, say, Washington, DC, the hospital might offer several choices of prosthetic limbs, most likely covered by insurance. If, however, you live in a poorer country where the average income is \$4 a day or even less, the options are much more limited—most likely one choice that works inefficiently and is, well,

ugly. And it's that situation that the design firm D-Rev is working to address.

D-Rev has a mission: to make a difference with the products it develops, not just in terms of the people who use their wares but in the very approach designers take to their work. The company currently has two products in full production. Brilliance is a phototherapy device used to treat jaundice in newborns. The second product, the



ReMotion Knee, is a prosthetic knee that was piloted at the Jaipur Foot Organization in India.

D-Rev is one of a growing number of design practices focusing on social impact design. So, what is social impact design and why does it matter? According to *Design and Social Impact*, a white paper developed by the NEA in partnership with Cooper Hewitt and the Lemelson Foundation, social impact design refers to the practice of design for the public good, especially in disadvantaged communities. The field includes not only product designers like the D-Rev team, but a number of practices, including graphic design, urban design, and architecture.

Krista Donaldson, who heads D-Rev, confesses, however, that she doesn't see much difference between design and social impact design. "I think about design as following a problem. So in that case there is very little difference," she explained. "I guess what clarifies social impact is that the problem that you are focused on relates to a social issue or a problem that may not get addressed through standard for-profit entities."

D-Rev was founded in 2007 by designer Paul Polak and technologist Kurt Kuhlmann. (Donaldson was hired as CEO in 2009.) According to Donaldson, the original idea was that the company would "develop a bunch of technology and send it off and help people and save lives." But it quickly became clear that traditional models of design and production wouldn't work. The team realized that in order to make a measurable impact with its products, they would have to put the user—and not the design—at the heart of the process, and also develop clear feedback mechanisms along every step of the way. "If you truly want to solve a problem, you have to take more of a systems approach to solving it," said Donaldson. "You have to understand that designing a product is maybe 25 percent [of the process] but you still have to figure out how the

“With this combination of beauty and functionality, we really want to shift away from [the idea of] a poor person’s product to an affordable, high-quality product, because regardless of your income you want the most beautiful and the best product you can get.”

product gets made and you have to figure out how the product gets to the people who need it and how they are going to use it.”

This user-centric approach means that D-Rev goes through multiple iterations of every step of bringing new products to market. They also maintain a particularly flexible production timeline. “We could be designing for impact assessment in the earliest stages of product development even though impact assessment comes after the product has scaled and reached customers,” Donaldson said.

While functionality is an important goal for D-Rev designs, as with any well-designed product, aesthetics also have a key role. Donaldson said, “Beauty, functionality, everything is totally entwined because at the end of the day you are designing the best possible products for the users.” She noted that, particularly in healthcare environ-

D-Rev continues to improve the design of the ReMotion Knee using feedback from users, having gone through three versions of the prosthetic knee.



V-1



V-2



V-3

ments, “it’s almost like [there’s] an absence of beauty. And the reality is everybody wants something beautiful.”

Donaldson said that beauty can be a palliative aid in hospital or clinical settings. “Having more sunlight in a room [helps] people get better faster. And having more thoughtful, beautiful-type things makes people better. And I think that’s something that’s been totally overlooked...so we have really prioritized designing beautiful products, and products that meet the needs of [the patients.]”

The desire for beauty and utility probably doesn’t sound unusual to first-world dwellers, but it’s an atypical approach for companies whose products are targeted to low-income markets. According to Donaldson, the typical strategy for those countries has been, “You are poor; we are giving you something; you should be really grateful for it, putting aside what the quality of what we’re giving you is.” She characterizes that as a dinosaur mentality. “We need to treat people like customers. They should have choices,” she asserted.

The preliminary design for the ReMotion Knee resulted from a project by graduate students at Stanford University. Fine-tuned with the help of continuous feedback from Indian users—complaints included that the knee was noisy, too heavy, bulky—as well as experiments in mass production, ReMotion is now in its third iteration, boasting, according to D-Rev’s website, an 86 percent satisfaction rating overall across more than 6,000 users.

Perhaps even more remarkable than the high functionality and aesthetic quality of ReMotion Knee is its affordability. Most of the amputees who are treated with the product live on only dollars per day. Donaldson doesn’t think that poor patients should have to sacrifice quality of any sort because of economics. By paying fierce attention to emerging technologies and eschewing the typical mark-up for such devices, D-Rev keeps its designs at a manageable price point.

“With this combination of beauty and functionality,” Donaldson said, “we really want to shift away from [the idea of] a poor person’s product to an affordable, high-quality product, because regardless of your income you want the most beautiful and the best product you can get.” The goal is not to constantly remind ReMotion users of a disability that has most likely left them unemployable and economically dependent but to use the design to help them feel powerful so they can return to work and self-sufficiency.

While D-Rev is rightfully proud of the high level of satisfaction reported by users of both the ReMotion Knee and the Brilliance phototherapy device, that is only part of the equation. The company also wants to share its best practices with the design community at large and to mentor the next generation of designers.

With help from NEA funding, one way in which D-Rev shares its work is through impact dashboards, which give an in-depth, qualitative look at how a par-

ticular product has affected its target audience. For example, a quick glance at the dashboard for Brilliance shows that nearly 28,000 newborns have been treated with the device, preventing more than 550 deaths. Donaldson considers this transparency a crucial part of the company’s practice. “You have to put yourself out there and say this is a solution and we’re going to measure how well we think we are solving that problem and use it as a tool to iterate the product or iterate the approach.” The dashboards invite the greater design community to not only replicate D-Rev’s processes, but also to innovate traditional design tools to solve their own design challenges in other areas of practice.

Donaldson hopes that the dashboards, as well as other deep content on the D-Rev website, also help to educate non-designers about the field and change the media conversation. “We disseminate a lot of our findings and I feel like there is a gap in the knowledge of product design even here in the U.S. For example, media stories tend to tell the same story and they focus very much on the product and they tend to forget focusing on the impact.”

In addition to inspiring current practitioners, D-Rev also aspires to reach the next generation of designers. Donaldson said their mission is to teach youth that “design is very powerful for solving all sorts of problems.” The company currently works with youth from a nearby neighborhood center, teaching them the principles of design and ultimately encouraging them to consider design careers.

“I feel very passionately about diversifying the design community because I do feel we look quite a lot alike or for the most part tend to be white upper middle class,” said Donaldson. “We’re not going to have greater diversity and design if we just leave youth out.” ▲



Nesa, a prosthetic technician and a ReMotion user, rides his motorbike in Bali, Indonesia.



Marquetta Bell-Johnson facilitates a Call My Name workshop to prepare panels for the AIDS Quilt. ▶

GRIEF KNOWS NO COLOR

ADDING DIVERSITY
TO THE AIDS QUILT

BY REBECCA GROSS /

PHOTOS COURTESY OF THE NAMES PROJECT FOUNDATION

IN 2002, JADA HARRIS RECEIVED A CALL FROM A STUDENT AT EAST Carolina University, who was returning panels of the AIDS Memorial Quilt that had been temporarily displayed at his school. Harris, director of programs at the NAMES Project Foundation, which manages the Quilt, vividly recalls the conversation. The young man, who represented an African-American student group, nervously asked whether next time, the organization could send over panels that didn't just represent "old white guys," as he had phrased it.







▲ Some of the panels from a Call My Name workshop in Georgia.

LATER, AS HARRIS LOOKED THROUGH THE Quilt's database, she realized that there were less than 300 individual panels made for African Americans who had died from HIV/AIDS. "I was just flabbergasted," she said.

Like the disease, the Quilt had emerged within the white, gay, male community, which suffered the overwhelming majority of AIDS deaths during the early years of the epidemic. The first panels were sewn in San Francisco in 1987, each one bearing the name of a life lost to AIDS. The Quilt had been developed as a way to memorialize loved ones, and to salvage some sense of creation and beauty from the devastating loss.

But the demographics of the disease had shifted by the 21st century. By 2000, African-American and Hispanic gay and bisexual men were diagnosed at higher rates than their white counterparts, and African Americans made up 57 percent of all new infections in the United States. Infection rates had also begun to skyrocket within the female community: by 2004, HIV would become the leading cause of death for African-American women between 25–34 years old, and the third leading cause of death for African-American women between 35–44 years old.

And yet, new quilt panels continued to predominantly reflect the disease's original demographics. "We as a nation weren't necessarily recognizing that HIV and AIDS were impacting every sector of society," said Julie Rhoad,

executive director of the NAMES Project, which moved its headquarters from San Francisco to Atlanta in 2002. "And the Quilt was a reflection of that."

In response, the NAMES Project launched Call My Name in 2003, which was later funded by the NEA. Although the Names Project has always hosted panel-making workshops, Call My Name workshops specifically target the African-American community, bringing people together to collectively grieve while creating a tribute for a loved one. While the workshops raise awareness in and of themselves, the panels they produce help ensure the Quilt remains a relevant and effective public health tool.

"It's important that people see people that look like themselves, so they will understand that this disease doesn't have any respect of person," said Harris. "Everybody is represented on the Quilt, but unless the Quilt tells your story, it's hard for people to see that there is a possibility that they could be at risk."

Rhoad said that getting the program off the ground "took many years and a lot of women working in church basements across Atlanta and around the South." Part of the process required simply spreading the word, and letting communities know that the Quilt existed. The more difficult barrier was the layer of stigma that continued to surround HIV/AIDS, particularly in communities where religion is deeply embedded. Whether the issue was sexual behavior or intravenous drug use, many families were reluctant to publicly associate their loved ones with these stereotypes, either in conversation or through the creation and display of a quilt panel.

But Harris, who estimates that she has led 50 to 60 Call My Name workshops, has used her position as workshop facilitator to help break down these walls. "I simply don't give in to whatever shame there was before," she said. "I'm going in there acknowledging the humanity of people that they know."

Turning feelings of shame over a loved one's death into a sense of pride over their life is a major part of the workshop process, and often begins before a single stitch is sewn. Many Call My Name workshops begin by having participants read off the names of loved ones who have died, a practice which is also done at every public display of the Quilt. "It's very meaningful, because many of these people have not had their names repeated since they passed, because so many of them died in a veil of shame," Harris said. "It serves as some degree of salve for people in their grief process."

This act of collective grieving is compounded once people begin to sew, which is done communally in keeping with quilting bee traditions. Tables are set up around the room with scraps of material, some with half-constructed panels that can be worked on if the idea of designing and sewing a panel from scratch seems too daunting.

Harris said that typically, trepidation falls away as people become more immersed in the project. Quilting, which has strong roots in African-American culture, often resonates with participants, and can infuse the room with a sense of comfort and familiarity. Throughout the workshop, which can range from one day to several, this comfort allows participants to build a sense of fellowship, sometimes creating an atmosphere that Harris describes as magical. “It’s really a kitchen table environment, and people start talking about some of the most intimate aspects of their lives,” Harris said. “There’s something about a needle and thread and some cloth that allows them to express themselves in a very intimate way.”

Giving people the opportunity to share their story can prove incredibly affirming, Harris said, because “rarely are they asked to tell their story.” She remembers one woman who attended a workshop years ago at the church where she was a congregant. At that time, the woman, who was HIV-positive, had kept her status from her



church community. The workshop helped initiate a deeper change, and today, she is an HIV/AIDS health educator, and leads Call My Name workshops of her own. “When you see that kind of growth for someone who did not want her church to know that she was HIV-positive, and now she’s one of my go-to facilitators—that’s an incredible arc,” Harris said. “I don’t think I’ve ever been anywhere [with her] that she hasn’t told someone of her status in an attempt to make sure that they were keeping themselves safe.”

Although the effects of participating in workshops aren’t always this dramatic, Harris emphasized that even small gestures can generate a sense of empowerment—no small feat when dealing with the emotional and physical havoc wrought by HIV/AIDS. “I make a point of letting [people] know that whatever they’re here to contribute today, even if it’s just a stitch, that they’re here to do a mighty work, and that their work will travel all around this country and in some cases, around the world,” she said. “So it’s not a little thing that they’re engaged in. They’re doing something that can have an impact on people’s lives in ways that are immeasurable.”

Today, hundreds of panels have been produced by Call My Name workshops. Through the cathartic process of creating panels, participants have in turn enhanced the Quilt’s ability to show that this is not a disease of “the other,” but a disease that touches, and demands attention from, every one of us. “Once you can see yourself in that human story, you begin to care about it,” said Rhoad. “Any number of touchstones transform that barrier of stigma and shame and phobia into understanding. We know that our job with the Quilt is not only to help the maker in their grief process, but to then use that memory effectively to teach the living.”

▲ Workshop participants at Spelman College hold up a completed AIDS Quilt panel.

“It’s important that people see people that look like themselves, so they will understand that this disease doesn’t have any respect of person. Everybody is represented on the Quilt, but unless the Quilt tells your story, it’s hard for people to see that there is a possibility that they could be at risk.”



COSACOSA's Journey project at St. Christopher's Hospital for Children (seen here before and after) was a three-year design and wayfinding project that led to the establishment of the Healing Art Project.

A Community Built on Healing

PHILADELPHIA'S COSACOSA BRINGS ART TO HOSPITALS

BY REBECCA GROSS / PHOTOS COURTESY OF COSACOSA ART AT LARGE, INC.

WHEN ST. CHRISTOPHER'S HOSPITAL for Children moved from its historic home in Philadelphia to a former industrial site almost two miles away, the hospital faced two challenges: how to make a white, sterile environment appealing for children, and how to re-engage the community it had served for more than 100 years.

St. Christopher's eventually reached out to the local nonprofit organization COSACOSA art at large, Inc., a longtime NEA grantee. Founded in 1990, COSACOSA develops community-made public art projects designed to initiate positive social change. Working primarily with children from high-poverty neighborhoods, the organization guides participants as they plan and create multidisciplinary works, with the aim of bringing people together and promoting dialogue.

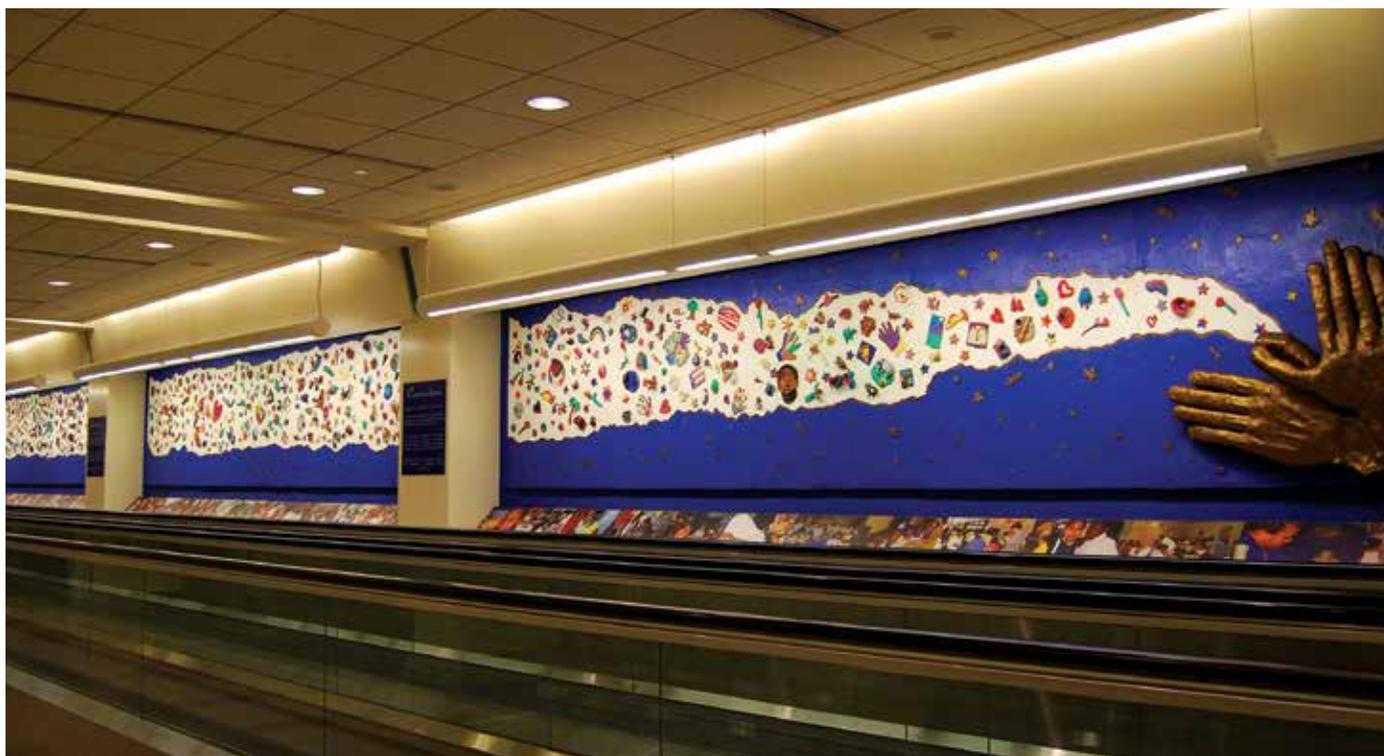
Although the organization had never operated within a hospital setting before, founder and Director Kimberly Niemela agreed to help St. Christopher's create artwork for a colorful, engaging wayfinding system—or directional landmarks—for the hospital's different floors. Wayfinding, while helpful in any scenario, can prove especially important for hospitals, where straightforward directions can alleviate anxiety by helping families literally navigate a stressful situation. The resulting project, made between 1995 and 1997, was called *Journey*, a play on the idea of journeying through this new facility. Neighborhood children worked with pediatric patients as they transformed different areas of the hospital into various types of voyages. Now as patients made their way through hallways—and their illness—they could take an African safari, a shuttle through space, or a journey around a Native-

American medicine wheel. By the end of the project, St. Christopher's looked more like a playroom than a medical center, and the hospital was beginning to settle back into its familiar community role.

"Journey empowered the patients to take ownership of the facility, to be able to frame permanent pieces of themselves in the artwork," said Niemela, noting that it added an element of control for patients and families in uncontrollable circumstances. But this sense of ownership spread beyond those who filled the beds: by integrating children who weren't necessarily patients, the entire neighborhood left pieces of themselves throughout the institution. "It brought the community back into the hospital," said Niemela. In the process, the cheerful designs made a potentially terrifying hospital experience less frightening for future patients.

The project was ultimately so successful that COSACOSA established its Healing Art Project, which will celebrate its 20th anniversary in 2015. Working in healthcare facilities, schools, and community organizations, the program promotes physical and emotional healing for those suffering from illness, physical or developmental disabilities, and poverty. Art-making has been found to lower acute stress symptoms in hospitalized children, and can lower cortisol levels, a hormone that triggers stress, in children living in poverty. It can also help children express and process traumatic experiences, whether physical or emotional. Through the years, COSACOSA's program has planted healing gardens, created large-scale mosaics, murals, and sculptures, and given children too sick to leave their beds an opportunity to create a piece of art.

COSACOSA's installation, *Connection*, explored connections among people of diverse backgrounds in more than 1,500 small ceramic sculptures created by pediatric hospital patients, while connecting two terminals at Philadelphia International Airport.





▲ **COSACOSA's Healing Garden transformed an abandoned lot in one of Philadelphia's most challenged neighborhoods into a public green space filled with medicinal plants and mosaics, paintings, sculptures, and sound art created with community residents.**

With every project, building and healing the community remains the central guiding force. Many times, said Niemela, children will find themselves working side-by-side with peers from different cultural backgrounds, or with different mental or physical abilities. For a few hours, “differences that in another place—on the street or in the waiting room—might seem very great disappear because you’re working on this art project,” said Niemela.

She remembers one project a few years ago where “a fellow who was newly paralyzed created collaborative art with a shy six-year-old who had just arrived in the country for treatment of brittle bone disease. The young child shaped and held clay pieces for an older youth to paint. The teen, learning that the child dreamed of becoming a scientist, shared the story of Stephen Hawking—illustrating that his dream was not an impossibility,” said Niemela. “It’s inspiring to see how people can come out of their shell and really gain that interpersonal and intercultural kind of competence.”

For children facing challenges, this sense of belonging and camaraderie can be a rare and precious gift, especially at an age when peers are quick to point out when someone is too small, too frail, too ill, or too slow. Fully utilizing art’s ability as social equalizer, COSACOSA projects are designed “so that everybody’s individual little piece is necessary to complete the whole of the project,” said Niemela. This process also ensures that every contribution, no matter how small, can fuel a sense of pride.

“That sense of empowerment, that sense that, ‘I can do this, I thought this through, I designed this, I created it’ is enormous,” said Niemela. “And how they take that sense of can-do attitude back into other aspects of their life is really amazing.”

COSACOSA projects can even help heal the smallest, but most essential units of community: families. This is particularly true in hospital settings. Working on a piece of art offers families a chance to come together and re-create the usual equilibrium between patients, anxious parents, and siblings who might feel overlooked in the face of a brother or sister’s illness. “Working together to design and create a beautiful piece of artwork I think normalizes, as much as one can, family life at that moment,” said Niemela.

Since the Healing Art Project began, COSACOSA has initiated a number of projects that have brought together its many partners—hospitals, schools, community centers—to work on a single piece. But Niemela remembers the first project that did so as a particularly special collaboration. The piece was created for the Philadelphia International Airport, where it would connect two adjoining terminals. Children across the city made over 1,200 small ceramic sculptures, which represented ideas, desires, or needs that they felt were shared by people globally, and in turn, connected them with one another. The final piece, called *Connection*, measured 80-feet-by-5-feet long, and portrayed these objects flowing from a pair of hands entwined to form the shape of a bird.

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Betsy Leschinsky, a teacher and artist who worked on *Connection*, remembers how relieved children at St. Christopher’s seemed to be when she’d come by, offering them an opportunity to break from their routine of bed rest, needles, testing, and television. Learning that their work would be on display at the airport also offered a glimmer of what lay ahead after discharge. “It lifted their spirits; it was such a hopeful moment for them,” said Leschinsky. “Just having that carrot, that ‘Once I get out of here, maybe I’ll be able to see this.’”

In time, the piece was seen by millions. *Connection* hung between the two terminals for 11 years as part of the airport’s exhibition program. The hope was that travelers, whether arriving, departing, or sprinting to

make a connection themselves, would pause for a moment to consider their own role within the community, and to remind them that regardless of which place or culture they had flown in from, that we are all still connected through a shared human experience. Relocated earlier this year, the piece is being refurbished with new sculptures, created by both children and seniors at two of COSACOSA’s partner organizations in North Philadelphia.

“We like to think of ourselves as reclaiming the original role of the arts, which was to empower people and bring them together,” said Niemela. “If the process is therapeutic that’s great, but, ultimately, it’s about building community wherever we find ourselves.”

▲ A COSACOSA clay workshop for hospital patients and families.



An EngAGE musician
shows his skills
to the young.

A PLACE OF POSSIBILITIES

ENGAGE PROVIDES ARTS
PROGRAMMING IN SENIOR HOUSING

BY KATIE LYLES LEVY /
PHOTOS COURTESY OF ENGAGE

WHEN CAROLINE MCELROY MOVED INTO THE NOHO SENIOR ARTS Colony, she never imagined it meant speeding up, rather than slowing down. Although in the golden years of retirement, she teaches school on-site at Universal Studios, recently had an art exhibit open up in the NoHo gallery, and was planning an upcoming flight to Paris with friend and *Nebraska* film star, Angela McEwan. While there, McElroy hoped to find inspiration and pick up a few vintage Parisian magazines from the flea markets for her next creative endeavor.



HER LIFESTYLE IN MANY WAYS HAS been made possible by the nonprofit organization EngAGE. Based in Burbank, California, EngAGE provides arts, wellness, lifelong learning, and intergenerational programs to affordable senior apartment communities throughout southern California. It attempts to even the playing field so that seniors can remain active, vibrant, and grow, giving them the control to age the way they want to age. Gone are images of patio homes, shuffleboard, rocking chairs, golf carts, and bingo in the common room. Instead of slowing down and taking it easy, EngAGE has revitalized the aging process by providing free arts programming for apartment communities that contain performing arts theaters, visual arts studios, literary studios, and digital arts/business labs.

The idea for EngAGE developed when founder and Executive Director Tim Carpenter was working in the healthcare and aging industry, trying to change a broken system. Yet he did not see the social transformation he so desired. When he met developer John Huskey from Meta Housing Corporation, who, as Carpenter stated, “was building really good-looking senior apartment communities,” the two partnered up to try something new. “We started experimenting and doing stuff and throwing lots of spaghetti against the wall, and some of it stuck. And we continue to do it that way. We try almost everything. We say yes to everything,” said Carpenter.

The first experiment was a writing class at a senior apartment building. The class ended with a public read-

An intergenerational drum circle at the Burbank Senior Artists Colony, led by Clarence Johnson (right), a resident at the NoHo Senior Arts Colony.



“Having a building without programs is like having a computer without software. You have to program what you want to have happen there.”

ing of the participants’ work. The older students felt their stories were cool and worth telling as they presented them at the local community center to fellow residents, family members, housing developers, and community members. This culminating event was the important catalyst for what would eventually become EngAGE. It was a hit. It changed the dynamic. It got people talking. It got people engaged. The students were involved in something new, personal, and meaningful, and had brought their community together to share in their creative experience.

With NEA support, the organization today provides a wide range of free on-site lifelong learning opportunities in three established senior artists colonies—Burbank Senior Artists Colony, NoHo Senior Arts Colony, and the Long Beach Senior Arts Colony—and at more than 30 senior apartment communities across southern California. Ninety-five percent of the population EngAGE serves is low-income, spanning various ethnic backgrounds. Arts activities include writing and performing plays, claymation, filmmaking, graphic novel writing, sculpting, painting, storytelling for radio, language class, art shows, dance classes, social media, gardening, cooking, and chorus. Residents are surrounded by quality arts programming, learning opportunities, and state-of-the-art facilities.

Research studies have shown that staying active as we age, as McElory has, means we will lead healthier lives. Participation in arts programming by older adults has been linked to improved cognitive functioning, memory, and overall well-being. Paraphrasing the late Gene Cohen, primary investigator of the 2006 NEA-supported Creativity and Aging study, if you could bottle up the benefits of arts participation—which include disease prevention, health promotion, and maintaining independence—into a digestible pill, it would save billions in Medicare costs. Further, as Carpenter said, the arts can serve as a “starter

drug” for other good habits, like eating healthier and exercising. Further, the layout and design of residential facilities for older adults can impact the social interaction, physical activity, cognitive stimulation, and emotional well-being of the residents, as discussed in the NEA publication *The Arts and Aging: Building the Science*.

EngAGE and the senior artist colonies combine both arts participation and facility design to provide stimulating, interesting, and social living environments for older adults. Colonies are thoughtfully designed by Meta, and then allowed to thrive through EngAGE’s high-quality and diverse artistic programming. People want to get up, go out, and join in. As Carpenter explained it, “having a building without programs is like having a computer without software. You have to program what you want to have happen there.”

“You have this great synergy of the physical amenities with the intellectual ones,” Carpenter continued. “And so that tends to be powerful within the community itself. It also becomes an attractor to people from the outside community...to have a place where people want to go to learn because it’s a beautiful building and there are interesting people living there.”

Case in point: Caroline McElroy. McElroy is not only an artist in “permanent residence” at NoHo with a designated studio space in her apartment, but also a teaching artist. Each week she teaches a collage class for fellow residents at NoHo. McElroy intends for this class traditionally to go for an hour and a half, but “then other days when I have the class we can go for hours,” she said. “We get lost in our work. Because you know it’s also a good time for us to chitchat and get to know each other, and visit and share ideas.”

Located in North Hollywood, NoHo Senior Arts Colony boasts classes and amenities traditionally only available at universities or major arts organizations. This includes a stadium-style performing arts theater located in NoHo’s lobby that also serves as the second home for the Road Theatre Company. The Road Theatre, a professional theater company, was selected through an arts retention program by the City of Los Angeles to occupy the site. The public enters the NoHo lobby’s gallery, waiting to see a show, and mingles in front of the exhibits and artwork of residents

and collaborators. McElroy joked about how when seeing a Road Theatre production at the NoHo, she just happened to sit next to Rita Wilson and Tom Hanks. On the other side of her was friend McEwan, about whom she stated, “If it wasn’t for all of the programs that were offered here and this place didn’t exist, I never would have met her.”

You don’t have to be a professional artist to live or participate in the EngAGE’s programming at one of the senior residential communities or artists colonies—they offer a flexible and collective learning experience for all involved: novices and artists alike. In Carpenter’s view, retirement is like college. It’s a new phase in one’s life when you are trying to figure out what to do next. It is a time to try, and potentially fail, at new things. It can be a launching point, with the spare time to attempt something different, revisit an old passion, or continue a life-long endeavor. For EngAGE, having college-style semester classes, with culminating events such as exhibits or performances, provides the students a sense of growth and mastery. Students can build on their knowledge of a subject, or start from scratch. It is only the beginning of something, not the end.

McElroy summed it up: “It is a place of possibilities. My son-in-law goes, ‘So how long do you plan on living here?’ and I said, ‘Honey, they’re going to have to carry me out of here.’”

Residents at NoHo Senior Arts Colony enjoy a computer arts class.





ONLINE



As part of our online content for this issue, which you can find by scanning the QR code or visiting arts.gov, we look at the Alzheimer's Poetry Project, which helps people

with Alzheimer's learn (or re-learn) a classic, well-loved poem and create new poems; examine the Houston Methodist Center for Performing Arts Medicine, which specializes in afflictions common to performing artists; and experience how art and healthcare organizations in Cleveland, Ohio, are

coming together to develop innovative ways to positively impact public health.

Don't forget to check out our Art Works Blog (arts.gov/art-works) for daily stories on the arts around the country.

(Above) Poet Gary Glazner working with a participant of the Alzheimer's Poetry Project, which uses poetry recitation to trigger brain activity and help people suffering from memory loss. PHOTO BY MICHAEL HAGEDORN



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