evaluation report

Dr Anneli Haake, May 2014

This project was funded by

[Logos of National Foundation for Youth Music, Arts Council England, Derbyshire County Council, and Arts Derbyshire]
‘I don’t think you can over-estimate how powerful music is…’

Care Home Manager
aims

for the young people
• To increase engagement of young people in youth-led musical activity, leadership and decision making
• To improve young people’s transferable skills, including in music, leadership and decision making
• To build intergenerational community links, supporting young people to be able to take a full part in improving their own and others’ wellbeing, through the leadership and delivery of musical activity

for the older people
• To increase subjective wellbeing during youth led music session
• To increase engagement during youth led music session
• To build inter-generational community links

outcomes

for the young people
• Increased engagement in youth led music activities
• Improved skills in music, leadership and decision making
• Improved skills in dealing with emotions
• Increased reported confidence throughout the project
• Increased awareness of dementia and older people’s care
• Insight into another aspect of the music industry
• A wish for the music interactions to continue after the end of the project

for the older people
• Increased engagement in youth led music activities
• Enjoyment through meeting young people and sharing experiences with them
• Improved energy levels as a result of taking part in the music sessions
• Positive responses to the music activities
• Connecting with their personality, individual preferences and memories
the project

background
In 2013, the project Taking the Lead on Music for Wellbeing was set up by Arts Derbyshire. Three groups of young Derbyshire musicians developed their musical performance and leadership skills specific to taking this work into older people’s care settings in their community. The project was funded by a grant from Youth Music, but also by funds from Arts Derbyshire and Derbyshire County Council.

The Mighty Creatives (TMC) is a charity working across the East Midlands to champion young people’s creativity and innovation. They work both with and for children and young people, encouraging them to play an active role in everything they do. TMC has identified that there is a need for young people to be involved in leadership activities, as young people are then seen by adults and each other as effective change agents in their communities, they feel more empowered, skilled and supported to make positive change happen.

An important concept behind this project is that music can give young people a powerful voice, and can also help us to learn about, and become engaged in the lives of others, building understanding and solidarity between young people as they support each other with creative solutions.
The project aimed to pass on leadership and team working skills to young people, to help them in today’s tough job market. In September 2011 there were 5,780 young unemployed in Derbyshire (aged 16-24), which is 35.2% of all unemployed people, compared to 30.9% as a national average. Derbyshire scores worst, out of the seven different domains on the Education, Skills and Training Domain of the national indices of deprivation (2004). There is also a need for interventions addressing the mental health and wellbeing of older people in care settings as secondary beneficiaries of this project. This project focused on enabling increased social inclusion and mental wellbeing for these vulnerable and often neglected groups.

participants and recruitment

Participants in the project were: a) Young musicians, b) Care home residents, c) a Music leader, d) Music teachers, e) Care home staff, f) a Project leader, and g) an Evaluation Consultant.

The young musicians were recruited by approaching schools/youth groups with an interest in music, arts projects or inter-generational activity. The network of arts officers in Derbyshire and the county council’s Inter-generational Officer helped in suggesting who to approach. The teachers or youth leaders then recruited young people to join the project. In one case, taster sessions were provided after which 10 students put themselves forward to take part. This proved to be the most successful method and had the lowest drop out rate. Some young people dropped out because they decided the project was not for them and one young person quit for personal reasons. Some could not make the start of the project but joined later on.

Three groups of young musicians were recruited, one in a community group setting and two in a school setting. Group 1 included young people from The Drop Inn (community) centre in Belper. Group 2 included young people from Springwell Community College in Staveley, and group 3 involved young people from Ormiston Ilkeston Enterprise Academy. Each group of young musicians had preparatory sessions in their local school or community building, with the project’s music leader and with the support from music teachers/community group leaders. The young musicians were supported to develop musical performance and leadership skills and how to facilitate participatory music making with others. After identifying the need during group 1, pre-visits to the care home were organised for group 2 and 3, which included dementia awareness talks by care home staff.

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The care homes were recruited once the young musician group had been identified and signed up (group 1: Ada Belfield House Care Home in Belper, group 2: The Staveley Centre in Staveley, and group 3: Victoria Court Care Home, Ilkeston). A care home near to each school/base was essential so that the students could easily walk there after school. Each care home approached was immediately very responsive and keen to be involved.
evaluation tools
Each group of young musicians filled in three questionnaires – one at the start of the project, one at the middle point and one at the end. Each questionnaire asked them to reflect on their wellbeing, and an adapted short version of the Warwick-Edinburgh Mental Wellbeing Scale was used for this purpose. The young musicians were also asked to rate their musical development, as well as providing additional qualitative comments (questionnaires can be found in the associated Toolkit for this project). Time constraints (and time required at the beginning of projects to establish the groups) limited the time available to explore the evaluation process with young people. However, personal reflection and group discussion was maintained as an integral part of the project during the music sessions, which was then incorporated into the evaluations via the qualitative comments and via a video diary after the last session.

Qualitative data was also collected from the music teachers and care home staff. The care home staff provided illustrative comments on how the music sessions had affected the residents. This approach was perceived as most appropriate for groups 1 and 2, given that some residents were ill (dementia and other age related health problems). Direct comments from the older people were collected for group 3. In order to further capture the older people’s reactions to the music sessions, pictures were taken and audio recordings were gathered.

The quantitative data was thematically analysed to detect wellbeing and music development trends in the groups, and the qualitative data was analysed to identify themes. Statistical data from groups 2 and 3 was used for the analysis, as group 1 did not fully complete the last set of questionnaires. Group 1 was therefore considered a pilot study. Only data from young people completing the start and the end surveys were included in the analysis of wellbeing and leadership skills.

ethics
The young musicians’ parents were given information about the project and gave written consent for their children to take part in the project. Consent was also obtained for the use of photos and sound recordings as a part of the project, from the young people as well as from the care homes.
Many skills and competencies were explored and developed during the Taking the Lead project. Rather than trying to 'transmit' these skills to the young musicians, an approach was taken which supported young people in discovering these skills for themselves through musical activities, allowing them to enhance those already known, and supporting them in gaining new skills where required. The areas of training can be broken down into four categories; i) music, ii) interventions, iii) attitudes and behaviours, and iv) professional interactions with staff.

**Areas of training in Taking the Lead on Music for Wellbeing project**
Learning did not finish once the project moved into the residential care home - this was a training ground for testing skills and afterwards reflecting on further developments required. It was seen as crucial that the project was set up in such a way that the residential care homes also understood this process, and supported this learning development throughout the programme.

The training sessions were appreciated by the young people (‘I loved it and want to do it again’, ‘I enjoyed making my own music’). Some expressed nervousness to start with but described how they soon settled into the sessions, and felt ‘able to share opinions and thoughts’ with each other, something which many enjoyed and found interesting.

Areas of training in Taking the Lead on Music for Wellbeing project

**ATTITUDES and BEHAVIOURS**
- position in the space
- body language
- respect of care home rules
- way of introducing different musical ‘tools’

**PROFESSIONAL INTERACTIONS WITH STAFF**
- discussions/arrangements in advance of visits
- arrival in the care home
- meetings/exchange with staff
- departure from the care home
impact on the young people

The young people overall reported positively to being part of the project. They felt that their relationships with the older people improved, they felt more confident around them. In the beginning of the project, some of the young people felt nervous and self-conscious, but also curious and excited. At the end of the project, most of the young people felt more confident, stating that they enjoyed the interactions with the older people, felt proud and asked for the project to continue.

interest

‘I’ve had some chats with the residents during music playing and it’s nice to hear their stories’

‘I like helping people doing music as it brings back memories of my nan’

relationships

‘Whenever we left the nursing home we felt a buzzing inside of us and we all felt really proud of ourselves that we made somebody else smile’

leadership & confidence

‘I feel really comfortable around the older people now’

‘I think that they have benefited me for all the skills that I needed for this course’

‘I feel like I could take part and make music with the people’

emotions

‘When we finished we were upset (because the project was over), happy (because we did something positive and we made some new friends along the way), proud (because we all had achieved something we all thought we couldn’t do).’

‘I would like to do it again please! I would love to do this at a different care home!’

‘It gives the young people confidence, we could see that’ (Older resident at care home)
Young people presented themselves within the project primarily as musicians, using music as a starting point for interactions (both musical and verbal). The music leader who trained the young people in the project spoke of the impact of them presenting their own music, saying that it ‘cannot be overestimated; had the young people only presented music assumed to make a connection to the lives of the care home residents, perhaps music from their era or background, the impacts would have most likely been different’. He felt that the young musicians presented themselves with integrity, an openness and honesty, sharing their musical identities thus making a stronger personal connection with the residents. In this way, music became a meeting point for understanding and dialogue with no pretence, ego or ‘performance’, and what can be described as ‘musical honesty’ was seen as vital for creating personal connections during the project.

Throughout the project, young musicians practised the ability to engage others in music-making through modelling musical behaviours and actions, and passing the music (and instruments) to others, including care home residents, to continue. During observations, some young people were noticeably shy, whereas others took a lead on creating musical structure to support interactions, while others initiated and supported the interactions themselves. ‘Musical delegation, offering suggestions and accepting variations of these as being as valid their own ideas was seen as very important’, said the music leader.

A key to communication in this project was for the majority of this communication to take place through music-making. Much practice in advance of residential care home visits focussed on creating musical connections with others with the help of the music leader, often on a one-to-one basis, communicating intentions, ideas and an offer of engagement through music-making rather than verbally. The music leader argued that ‘communication channels that developed through this approach supported later verbal engagement’. According to him, groups of young people discovered new ways of communicating and enjoyed new levels of deep engagement with each other through their activities. The observations supported this notion; no verbal ‘instructions' were required to be given during the music sessions as young people modelled potential musical involvement and then supported and engaged with resulting interactions.

This project demanded on-going commitment from all young musicians involved, but not all the young people were able to fully commit. There were issues with some people dropping out and at times low attendance numbers, due to school and general life demands (‘illness, not being able to get home’, ‘my mum’s work shifts’), which were hard to avoid. However, for those who were able to give this commitment, the rewards were often the greatest as they became self-supporting teams of musicians with a shared history of experiences. On-going commitment allowed for ideas to be built upon session after session, supporting incremental increases (often rapid) in musical skill and confidence in their own ability, something which was noted and mentioned by both the music leader and the project leader during music sessions.
One of the main outcomes from this project for young people was expressed as an increase in confidence to engage with others, noticeable in many comments in the evaluation surveys (‘it was scary at first but I felt more comfortable after attending more sessions’). With all groups involved, initial confidence, both to make music and to engage others in this was low. Music-making to most was primarily about creating a performance with only one correct way to play. Exploring music as a tool for engagement and communication where many paths could be taken was a new approach for many of the young participants, and took a leap of faith to try. Once in this new ‘mode’ of thinking, confidence seemed to increased. The reactions of the care home residents, engaging musically in this new approach alongside the young musicians supported this increase in confidence further (see comments on p 9).

An attitude of ‘can do’ was required throughout this project for all involved. The young musicians took a risk to push themselves a little further, to try and initiate a new musical interaction with a care home resident, or to present their own music in a new setting. Care home residents were also being asked to move away from the usual musical performance or sing-a-long, to a more interactive, personally engaging approach to music-making. Those with positive, have-a-go attitudes were the first port of call for creating musical engagement and quickly 'infected' others, which was observed during the music sessions.

Judging each situation, each personality and the needs of each setting at every moment was challenging during this project. Young people had to quickly become used to reading body language of each other and of care home residents and staff to ascertain where to go next with the music-making sessions. The music leader noted that as they became more familiar with the practice, they began to trust their own intuition, and to trust each other in making judgements. Whilst this was supported by experienced practitioners at every step, the nature of individual connections created during a musical encounter meant that young people were required to make their own decisions based on their experience and feelings.

By presenting music ‘from the heart’ - music to which the young people themselves had a personal connection - the care home residents were inspired to participate. According to the music leader and the project leader, this process created a strong community of music-making where equal relationships could exist, rather than that of a performer/listener. Young musicians inspired care home residents to take part in their music, and the residents were empowered to share their own musical ideas and identities within a supportive environment.
Many times throughout this project, smiles between young musicians, and between young musicians and care home residents were evident as musical 'jokes' were created. Whether it was the shared enjoyment of that one 'weird' sounding note that they both played on a shared xylophone, a misplaced or made-up word in a song still not quite known, or simply the enjoyment of finding rhythmic synchronicity while playing a similar instrument, music-making carried with it a sense of humour which was shared with equal joy and with complete understanding between the two parties involved. Music intimately connected people through often fleeting but recurring moments of recognition of similarities and differences.

creativity
Young musicians were supported by the music leader in finding new ways to present familiar material, or to find new ways of engaging others in playing along with the music. In order to create music to suit each individual, circumstance or setting, the young musicians needed to be able to constantly mould their musical offering to create an opportunity for engagement. This required that each musical encounter be a 'world premier', created for that particular moment, and never to be repeated. While the musical possibilities were many, these were explored and rehearsed in advance in order that everyone be accustomed to this way of working, and ready and able to support each other and to change together to suit the circumstances.
wellbeing and leadership

The adapted short version of the Warwick-Edinburgh Mental Wellbeing Scale was used for all groups but only groups 2 and 3 completed the surveys in the start, middle and end and so only the data from these groups was possible to present.

**group 2**
Both measurements of wellbeing and leadership increased overall throughout their project duration. Self-reported wellbeing increased with 15%, 59%, 71%, and 85% from start to end for four participants, whereas it decreased 16% for two participants. Self-reported music leadership skills increased for four participants (4%, 8%, 12% and 32%) and decreased for two participants (-10% and -16%). This suggests that the majority of young people experienced an increase in their wellbeing and leadership skills during the project, but that some young people did not. Overall, wellbeing and music leadership skills increased from start to beginning.

There are several possible reasons for why not all participants experienced an increase in wellbeing and leadership skills, and they are not necessarily related to the music project itself. There were only 7 people in the group, which means that one should be very cautious to draw firm conclusions from this data. There are most likely many factors outside of the project that will influence their ratings of wellbeing and how they feel about themselves, and this ‘noise’ could affect the evaluation data.

It is interesting to note that there seems to be a slight dip in the measures in the middle of the project. The data at this point was collected not long after their first care home session, and it is possible that the overall lower reporting illustrate an initial nervousness and lower levels of confidence at the beginning of the care home sessions. These then increased after more care home sessions, and at the end of the project the reported wellbeing and music leadership levels are slightly higher than at the start.

**group 3**
Both measurements of wellbeing and leadership increased slightly overall throughout their project duration. Self-reported wellbeing increased with 4%, 10%, 38% from start to end for three participants, whereas it decreased 13% and 53% for two participants.
Self-reported music leadership skills increased for four participants (27%, 29%, 32% and 40%) and was unchanged for one participants (0%). Similarly to group 2, this suggests that the majority of young people experienced an increase in their wellbeing and leadership skills during the project, but that some young people did not. Again, wellbeing and music leadership skills increased from start to beginning.

As discussed on previous page, there are several possible reasons for the results, and they are not necessarily related to the music project. In this group there were only 5 people, so it is difficult to interpret any numbers as more than simply a representation of the group values, with variations in the numbers having a large impact on the figures due to the small numbers of participants.

Yet, it is interesting to note a similar shape in the data to that of group 2 - a slight dip in the measures in the middle of the project, as is also evident when looking at the averages for group 2 and 3 together. One interpretation could be that this strengthens the idea of initial nervousness and lower levels of confidence at the beginning of the care home sessions (in the middle of the project), which is then followed by increased levels after more care home sessions. More data from more similar projects are needed to confirm this, but it might be useful to take this into account when designing a similar project. This might for example involve organising extra support at this time in the project, to help the young people through the period.
‘I felt quite apprehensive about joining in and settling into my role towards the start of the care home sessions. I did eventually feel more comfortable in the environment and talking to and interacting with the residents.’

young musician
Reflections after the project were captured on video camera with some of the participants in groups 2 and 3, as well as with one member of the music staff from the school who worked alongside group 2.

The following questions were used as prompts:

- What did you gain from taking part in this project?
- What has been the most successful thing about this project and why?
- How have you changed, if at all, throughout the project?
- What has been the most difficult part of the project?
- Do you think this activity is worthwhile, and if so – why?
- Would you like to do more music work in care homes?

The edited interviews, along with photos and audio recordings of parts of the sessions, can be viewed by visiting:

- https://www.youtube.com/watch?v=-QQoCAxwCY
The residents at the care homes enjoyed their sessions. In Group 3, they stated that the music was ‘divine’, had a ‘lovely beat’ and that they ‘liked the rhythm’. They appreciated how music seemed to bring a sense of togetherness: ‘(Music) brings you into it playing instruments, taking part, not just listening’, it ‘takes you out of yourself’, and ‘brings you together’.

They spoke of how the music had direct impact on their energy levels (‘by the end I feel more lively’), helped them to relax (‘helps you forget your worries’) and that it often could ‘bring back memories’. They enjoyed spending time with the young people, stated that they ‘liked their enthusiasm’ and that the music sessions ‘encourages old to go along with them (the young people)’.

In groups 1 and 2, residents were sometimes not well enough to provide meaningful data in terms of quotes, but the care staff noted down their impressions and experiences (presented below).

**enjoyment**

‘She loved the music and dancing – she enjoyed it so much she took hold of the trolley (with the musical instruments on) and followed us upstairs.’

‘One resident didn’t join in until the later visits - warmed up as the sessions progressed “she got more involved over time… she tried to give .. (one of young people) her ring – she wanted to pay her!’

**identity**

‘P liked talking to M as well, she said ‘you remind me of my brother/cousin’. She liked his face. Another resident was quite giggly and girlish with him smiling. It makes them seem young and takes them back to when they were younger.’

‘The music session had a profound effect on her... normally depressed, in her bedroom… won't join in… but they got her up and she sat and played the xylophone, joined in the singing... laughing... started/initiated her own song and reciting nursery rhymes. This effect lasted all day… she started saying poetry... the next morning she was back like her old self, in her room, depressed… care staff were amazed...’

**energy**

‘(One lady) had her hair done for the young people’s final visit – thought she should get smartened up… and gave them all a chocolate bar at the end.. This shows how important the visits must have been to her – she wanted to look nice for company coming’
After the first group, it was identified that a key role at the care homes were Activity Co-ordinators. During the second and third groups, they became crucial in terms of supporting the events, once the manager had been approached. The young people in groups 2 and 3 visited the care homes once before playing music there, and were also given a dementia awareness talk by the care home staff. These visits were reported as positive by the care home staff, it was described as ‘good practice along with the introductory visit to the care home’. The young people were ‘very emotional’ sometimes, and the care home staff felt that there was a need for ‘plenty of adults to support them at first’. Another key element identified and developed further throughout the project was verbal feedback from the care home staff to the young people, either after a session or before the next one. This approach seemed successful in terms of building confidence and motivation among the young people.

The care home staff reported enjoying the music sessions and how it impacted positively on them to see the older people’s reactions. They also described how it had given them inspiration to initiate other music related activities in the future:

‘It (the project) has made me do things differently. I can put music in the quiz. It’s a good way to engage with more people and may bring fresh faces (to quiz sessions)’

Music had a clear impact on the older people, regardless of levels of illness (‘a high level of engagement generally from the old people’), and care home staff attributed this to the universal aspect of music – that music can create a platform for people to interact and spend time together:

‘Music is something everyone can relate to. We had a good audience and people didn’t wander off or not turn up. The turnout was higher than some other art projects, I think because it was music.’

Some care home staff felt that it was equally significant that the music was played by young people. They commented on how the residents ‘liked seeing young faces’, and how the interaction between younger and older people seemed effective – whether it was all joining in together, copying each other or young people interacting musically on a more one-to-one basis.

The care home staff also all commented on the informality of the visits and how well they felt that worked. They described how ‘the sessions were built around the residents, it was spontaneous – (the young people were) moving around to different groups.’ This meant that the ‘residents could choose to join, rather than all being formally arranged round a room’, and it was seen as a useful format for the music sessions. Young people in one (two-storey) care home played music on both floors with different audiences, and the care home staff there felt it was a good decision even though it cut the time down with each group. They felt that the sessions could have been longer on each floor and they realised it was difficult to achieve within an hour – which was the normal visiting length of the care home sessions. Care home staff reported that they would like the partnership to continue, and some had talked about ‘carols with young people from the school coming before Christmas’, and also linking up with drama students at the same school.
Music staff involved in the project noted how the young people’s confidence in their music making had grown as a result of taking part in the project. One member of staff described how lovely it had been to see ‘relationships blossom between the young and older people’, and that ‘their musical and social skills have developed very well’. One noted a ‘carry-over’ effect onto other lessons at school:

‘More confidence has been a particular success in some of them which has also had an impact on their other lessons as well as music lessons’

‘In terms of the GCSE the key change has been for the students to gain more confidence in preparation for their performance coursework’

Another member of the music team noted how the project had broadened ideas of a music career:

‘It’s given the students an insight (and experience) into another aspect of the music industry’

Music staff indicated that the young people had been able to develop a leadership role in their music activities in the project, here described by one of the music staff:

‘Rather than being the leader I have taken part as the follower which makes a lovely change!’

Although the young people did take a leadership role, the music staff also described having to do some ‘persuading and nagging to make sure they did show the commitment that it needed’, and in this sense the music staff could be described as having a key role in keeping the young people going when motivation might have flagged through the course of the project.

Other aspects that the music staff commented on were how much more aware the student (and themselves) had become of issues surrounding dementia and how this process had ‘made all of us stronger in terms of dealing with emotion’.

‘It’s been very enjoyable and extremely emotional. I think some students did struggle with the visits because it upset them. However the majority of them, once the initial emotions had settled down, have really enjoyed it.’

The staff at the care homes were perceived by music staff as having been ‘supportive and friendly and put the students at ease’. The music staff described how they wanted to keep building links with the care homes in the future, and how they felt inspired to explore similar work, including in different art forms.
Three days of Continuing Professional Development (CPD) were run as a part of the project, in May 2013, July 2013 and March 2014. The first two days were aimed primarily at people working with young people either as musical leaders, individual musicians, arts or youth workers. The third and final day had a broader aim and targeted the care sector, schools, youth and arts workers as well as musicians. Participation was initially low, with 4 participants during the first session, 2 during the second, but 9 during the last session. Low participant numbers were mainly due to lack of time for recruiting and recruiting more narrowly in the beginning, but improved during the third occasion due to the wider recruitment of participants and an improved marketing strategy.

The aims of the CPD days were to explore the principles of the ‘Taking the Lead’ project, the role of music in developing (youth) leadership, the role of music in supporting wellbeing, and develop a shared understanding of how projects such as this should be established and managed.

The feedback from these sessions was positive overall, with participants describing it as ‘worthwhile’ and ‘valuable’. The most valuable parts of the training according to participants were having opportunities to meet others to discuss, share ideas and think more deeply about the concept of leadership.

‘I feel like I now know about music in healthcare and the job opportunities that are available. I know the roles and responsibilities of working in care homes and hospitals and I am fully aware of the implications that may arise. It has given me an overall understanding of what is involved in music and healthcare and I will be researching further into this kind of practice. I would be very interested in attending another training day in the future.’
conclusions

Results showed that overall the project was seen as positive by the young people, the older people, care staff and music staff involved. The main skills developed among the young people were honesty, ability to delegate, communication, confidence, positive attitude, commitment, intuition, ability to inspire, sense of humor and creativity.

Some of the young people were also very shy and struggled to take an active part throughout the project. In these cases, the music leader and project leader took the approach that it was acceptable for these young people to take a less active role and at least stay in the group, even if it meant mainly watching and/or join in on group singing. However, most of the young people became increasingly confident and inspired each other to take part. They described how they felt they had gained confidence to deal with new people and new situations, and this was echoed by music staff, care home staff and even the care home residents. This was mainly evident in the qualitative comments, and less pronounced in the quantitative data, which highlights the dangers of interpreting quantitative data with a very small sample, as many other influencing factors can have an impact on the statistical data. Therefore, one should consider the qualitative and quantitative data together for this project, to fully understand the overall impact on the participants.

The older people felt energised and enjoyed taking part in the music sessions. They enjoyed the music, but also interacting with the younger people in particular. The informal nature of the music sessions was appreciated and seemed to suit the purpose of the project. The young people were also able to see and experience a different music profession than the ones often portrayed in popular media.

The project saw some challenges. Data collection was sometimes difficult. Among the older people, direct comments/survey responses were not always deemed appropriate to collect, due to some of them being mentally and physically frail. In those cases, importance was placed on collecting observational responses from the care staff describing the impact on the older people. Among the young people, wellbeing and leadership measurements (before, during and after the project) could only be collected for the second and third groups, due to attendance and data collection issues. This meant that wellbeing and leadership could not be compared between all three groups. However, all groups provided qualitative quotes and comments to the evaluation, which all illustrated a similar picture of a successful and inspiring project to be a part of.
recommendations

There were several aspects throughout the project that could be changed for future projects, in hindsight. The music leader and co-ordinator identified several key aspects that could have improved the project as a whole, which together with the evaluation form the basis for recommendations for future projects.

**timescales**
The time that it takes to recruit and start up a project is often underestimated. Recruitment and the early stages, as well as time for reflection and evaluation, are sometimes accidentally miscalculated. This is frequently a combination of trying to satisfy funders and overall organisers with an ‘as efficient as possible’ approach in order to secure funding and a positive, supportive attitude from decision-makers, but also a genuine uncertainty as to how long certain aspects of a project might take, such as, for example, the recruitment phase. Therefore, building in longer development stages into the project could be very beneficial, and allow more time to recruit participants and project workers. Also, throughout the project, it became clear that it was very useful for the young people to visit the care home beforehand and receive some dementia awareness training, which was not originally planned. However, a balance needs to be struck between allowing more time that would benefit the project, and satisfying funders and partnering organisations so as not to put them off because the project becomes too large and drawn out.

- **recommendation:** Allow extra time for recruitment and development stages throughout a project.
- **recommendation:** Allow time specifically for young people to visit the proposed care home in advance and liaise with care home staff for young people to receive dementia awareness training.
- **recommendation:** Be careful that by allowing more time for the project, the project does not become too long, which could jeopardize funding and external support.

**recruitment**
It would have been beneficial to have developed a wider recruitment programme for young people to be involved. This worked for the second group where students were given an opportunity to have a taster session, and then freely chose to participate. In the other groups, young people were handpicked for the project by adults, and possibly not as committed to the project due to this fact. Again, pressures of time meant that this process was too short and resulted in 'evolving groups' over the first few weeks of each programme (i.e. people dropped off and other people were added to the group). This also had an impact on the evaluation of the project, since only participants who submitted data in the beginning and end could be included in the measurements of wellbeing and leadership skills.

- **recommendation:** Provide, if possible, taster sessions so that the young people can see what is actually involved. If this is not possible, show them video clips of similar work; for example, the post-project video diaries from this project.
- **recommendation:** Allow young people to participate freely. If possible, avoid them being handpicked by staff or teachers, as this can undermine the idea of leadership among young people and can results in lower levels of motivation and young people dropping out.
CPD days
The CPD days aimed to connect with staff, teachers and other professionals interested in this kind of project to explore how to support youth-led inter-generational projects. However, the first two occasions saw low participant numbers, where the activities were mainly directed at music leaders and youth workers. Opening up CPD opportunities to more stakeholders earlier on would have been beneficial for the project. The third CPD day achieved this to a greater extent than the first two. Another aspect that would have further strengthened the idea of youth-led activities would have been to involve the young people in the CPD days, and also having the whole stakeholder group (including young people) involved throughout the project to aid the development of the programme, rather than simply reflecting on the programmes and sharing the outcomes.

- **recommendation**: Include all stakeholders in any CPD opportunities.
- **recommendation**: Include young people in the CPD activities, including in a leadership role.
- **recommendation**: Build the outcomes of the CPD days into the development stages of the programme.

roles involved in the project
The project seemed to work best when the group of young people/musicians had a leader or supporter embedded in the group, such as a music leader from the school. This person was able to attend the sessions, keep the project going at the young people’s base (in this case the school), encourage them and help with practice and developing ideas between the training sessions and care home sessions. A person in this role is also a useful contact person who can liaise back with the overall music leader and co-ordinator, if any issues arise. The co-ordinator not only set up the project and found ways to recruit, but also developed the project throughout in an organic way that responded to need. Therefore, it would be beneficial when appointing a co-ordinator to recruit someone with prior knowledge of the local arts/music/care/school sectors who already has good contacts in place. The project also identified the important role of the care home activity co-ordinator for the success of the project, as they became an important point of contact at the care homes.

- **recommendation**: Identify someone (leader, teacher, youth worker) who works closely with the young people, who can liaise with the other stake holders and be a point of contact.
- **recommendation**: Appoint a project co-ordinator who has prior knowledge and local contacts.
- **recommendation**: Identify an activity co-ordinator at the care home, who can help with organising visits, dementia awareness training and collect evaluations from care home staff.

reflections
When timescales are cut short, a project can also suffer from lack of time for reflection. Reflecting on ongoing work is an important aspect of development work, and crucial for the project to be able to develop throughout. This project could have benefited from more opportunities for reflection among young people between visits to care homes.
This approach was originally planned but largely cut due to the protracted programmes and pressure to get as many visits to care homes as possible. There was possibly some confusion involved due to different agendas involved in this programme (wellbeing and leadership skills for young people vs. wellbeing for older people). Again, it is important in a project like this to achieve a level of balance, involving enough time to reflect on practices and on the emotional experiences of the activities, yet not allowing the project to become too drawn-out.

- **recommendation:** Build in time for reflection throughout the project. This could be in the form of ongoing video diaries, as long as there is sufficient funding to pay for evaluating and editing such material. Qualitative data analysis is always much more time-consuming than quantitative data analysis.

- **recommendation:** The young people may need extra support at certain stages during the project, where they need help to reflect on their journey and their reactions. Situations identified in this project that may require extra support:
  - Early visits to the care home, in and around any dementia awareness training
  - Mid-point during the project

- **recommendation:** Whereas it is good to have a project with broad scope and many stakeholders, it could be more efficient to have a more narrow agenda, which lowers the risk of confusion about what the main goals are for the project.

**data collection**

One important learning point from the first group was to not use surveys to capture the impact of the music on residents, when they were ill with dementia and other age-related health issues. Although the residents commented on how they enjoyed the music, the best way to capture the effects of music in these situations was to ask the care home staff to provide illustrative accounts on how the residents behaviour changed during a music session, and analyse this qualitative data through, for example, thematic analysis.

- **recommendation:** If residents in a care home are unwell, do not use surveys for data collection purposes. Instead, explore audio and video recording options, as well as third-person accounts by care home staff.

Despite the challenges discussed, the overall experiences throughout the project have illustrated that inter-generational arts projects that allow young people to take a leading role can have an overall positive impact on all parties involved. Therefore, an overall recommendation is to set up similar projects in the future. More detailed recommendations on how to set up future projects can be found in the ‘toolkit’.
Taking the Lead
on Music for Wellbeing

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