In advance of the White House Conference on Aging (WHCoA) in 1981, 1995, and 2005, the arts and aging communities held mini-conferences to ensure that arts, culture, and livability were part of larger public policy discussions. This article takes a historical look at recommendations from the 2005 WHCoA Mini-Conference on Creativity and Aging in America, including arts in health care, lifelong learning, and livability through universal design. Overarching recommendations in 2005 requested investments in research, including cost-benefit analyses; identification of best practices and model programs; program dissemination to broaden the availability of arts programs. The “Arts” is a broad term encompassing all forms of arts including music, theater, dance, visual arts, literature, multimedia and design, folk, and traditional arts to engage the participation of all older Americans; promotion of innovative public and private partnerships to support arts program development, including workforce development (e.g., artists, social workers, and health care providers); and public awareness of the importance of arts participation to healthy aging. Through the leadership of the National Endowment for the Arts and U.S. Department of Health and Human Services, thinking about the arts and aging has broadened to include greater emphasis on a whole-person approach to the health and well-being of older adults. This approach engages older adults in arts participation not only as audience members, but as vital members of their community through creative expression focusing on life stories for intergenerational as well as interprofessional collaboration. This article reviews progress made to date and identifies critical gaps in services for future consideration at a 2015 Mini-Conference on Creativity and Aging related to the WHCoA area of emphasis on healthy aging.

**Key words:** Quality of life, Humanities, Public policy
Since 1961, the federal government has shown its commitment to improving the lives of older adults by holding periodic White House Conference on Aging (WHCoA) to shape public policy for aging in America in the coming decade. In advance of each of these convenings, the arts and aging communities have held mini-conferences to produce recommendations for the larger WHCoA to ensure that arts, culture, and livability are part of the broader discussions on aging. These mini-conferences, held prior to the 1981, 1995, and 2005 WHCoAs, played an important role in fostering a robust field of aging, arts, and health among practitioners, researchers, and organizations that serve older adults through participation in all arts forms, including music, theater, dance, visual arts, literature, multimedia and design, folk, and traditional arts.

The most recent mini-conference in 2005 focused on the importance and value of professionally directed arts programming for, by, and with older Americans as an important element of the quality of life for older adults. The mini-conference was hosted and sponsored by the National Endowment for the Arts (NEA) in partnership with AARP, the National Center for Creative Aging (NCCA), and the International Music Products Association. A select group of 44 leaders in the fields of aging, the arts, education, philanthropy, government, and research developed recommendations on three issues important to older Americans: lifelong learning and building community through the arts, designing for the life span, and arts in health care. This information was then compiled into a report and submitted to the 2005 WHCoA for review by its Policy Committee (Boyer, 2005).

The WHCoA delegates considered more than 3,000 recommendations submitted by groups across the aging field, and only 50 were selected as WHCoA resolutions. It is therefore significant that 2 of the final 50 resolutions were drawn from the Creativity and Aging mini-conference: (a) Encourage Community Designs to Promote Livable Communities to Enable Aging in Place and (b) Expand Opportunities for Developing Innovative Housing Designs for Seniors’ Needs.

**Support for Aging and the Arts by the NEA**

In the years following the 2005 WHCoA and mini-conference, the creative aging field has significantly expanded and deepened in practice, research, and policy arenas, with leadership and support from the NEA. The following brief description of initiatives funded and/or initiated by the NEA illustrate the progress that has been made.

In 2009, the NEA developed a funding initiative designed to actively engage older Americans as creators in the disciplines of literature and music and to promote lifelong learning in the arts. It was the first grant-making program of its kind that did not look upon older adults only as passive audience members. The NEA awarded 14 grants to organizations representing a wide range of genres within each discipline, including programs that engaged older adults in activities such as poetry writing, songwriting, and mentoring of younger musicians in both urban and rural settings; these programs were delivered by professional artists and teaching artists. Evaluation reports were produced and are available upon request.

The NEA later partnered with the NCCA (2012) to develop two important resources for the field. First, NCCA worked with organizations across the country to develop the Directory of Creative Aging Programs in America (NCCA, n.d.a). This searchable directory of more than 100 arts programs for older adults in urban, suburban, and rural communities was designed to provide a comprehensive list of programs that: engage older adults as creators; are conducted by professional artists and teaching artists; and have evidence of their effectiveness as promising practices, field-tested best practices, and/or research-validated best practices. A guiding rubric was developed by a task force of leading practitioners in creative aging, education, and health to assist with vetting arts and aging programs in the national directory. A framework of evolving stronger methodologies for program evaluation is included to build organizational capacity as well as encourage the development of evidence-based programming.

Second, NCCA developed an online tool to help build a pool of professional artists and teaching artists trained to deliver high-quality arts programs that engage older people themselves as creators in the arts and humanities (NCCA, n.d.b). This free, self-guided online course offers an introduction to key concepts, methods, and current research from the field of arts in aging. It introduces learners to several approaches and techniques for teaching older adults who are interested in lifelong learning, using exercises and case studies that reflect current practice in arts education. The training covers topics such as the aging process, the creative potential of older adults, and how to identify community partners in aging, arts, and health-related services. It also provides information on how to adapt instructional techniques for different populations of older adults, including those who live independently, those who live in long-term residential care settings, and those with Alzheimer’s disease and related neurocognitive disorders. Lastly, it provides guidance on how to plan, implement, and evaluate arts programming for older adults. Since its launch in June 2013, more than 250,000 learners from 153 countries around the world have used the online training. Although developed for professional and teaching artists, user data show the tool has also engaged learners from fields such as social work, life enrichment, and health care.

Recognizing the power of national networks to disseminate models of practice, the NEA and NCCA turned to a network of 50 U.S. state arts agencies, 6 territorial arts agencies, and 6 regional arts organizations. In 2013 and 2014, the NEA...
funded NCCA to develop statewide communities of practice for 30 state arts agencies, and it continues to support their expansion. Through this network and in partnership with the National Assembly of State Arts Agencies, NCCA has supported the development of statewide infrastructures for creative aging and communities of practice involving leaders in the arts, education, and health and human services. These states have engaged in activities such as professional and resource development, asset mapping, expanded grant-making policies, and technical assistance for state and regional leaders working in the arts, health, and aging. The work of these 30 state arts agencies in both rural and urban settings throughout the country includes folk and traditional artists establishing new models for arts programming that serves adults throughout later life. With related state-level agencies in health and aging, those involved in the communities of practice will be engaged in the WHCoA on both the state and national levels.

The NEA also recognizes the need for research evidence of the impact of the arts on human development and lifelong learning. In 2012, the NEA began convening a Federal Interagency Task Force on the Arts and Human Development, with the goal of encouraging more and better research on how the arts can help people reach their full potential at all stages of life. Task force members represent agencies from across the federal government, including the NEA, U.S. Department of Health and Human Services (HHS), National Institutes of Health (NIH), National Science Foundation, National Endowment for the Humanities, Institute of Museum and Library Services, and U.S. Department of Education.

The Interagency Task Force meets quarterly to share ideas and information about research gaps and opportunities for understanding the arts’ role in improving health and educational outcomes throughout the life span. It has also conducted a series of public webinars on compelling research findings and evidence-based practices. In September 2012, four Task Force member agencies hosted the first convening at the National Academy of Sciences to review the current state of research on the arts, health, and well-being in older Americans (Hanna, Patterson, Rollins, & Sherman, 2011). As a result of this convening, new NIH research funding opportunities include arts-based programs as eligible interventions for empirical investigation. A recent example is the announcement of NIH support for research in arts therapy for symptom management in palliative care settings.

In addition to these activities, the NEA continues to award numerous grants supporting projects and research on creativity and aging and arts programming in health care settings. As the NEA, NCCA, and their federal and private-sector partners plan the Mini-Conference on Creativity and Aging in conjunction with the 2015 WHCoA, the NEA will showcase these achievements and the growth of the field since the 2005 convening.

**Progress on the 2005 Recommendations**

Immediately following the 2005 mini-conference, several key goals were accomplished. In 2006, NCCA and the New Jersey Performing Arts Center held *Creativity Matters!*, the first national conference focused on improving the quality of life for older adults through creative expression. The National Guild for Community Arts Education published *Creativity Matters: The Arts and Aging Toolkit* in 2007 (Boyer, 2007), and Americans for the Arts published a monograph, *Creativity Matters: Arts and Aging in America*, in 2008 (Hanna & Perlstein, 2008).

This resulted in the building of a platform, which grew substantially for the rest of the decade, for arts programs serving older adults and supporting professional development.

Although not originally selected in 2005 as WHCoA recommendations, those that pertain to *lifelong learning, building community through the arts, and the arts in health care* merit further consideration in the 2015 mini-conference. The central premise of these recommendations was that the arts are a national and human resource and participating in them is vital to healthy aging. Each issue area called for three key actions. The first was to invest in research, including cost-benefit analyses to establish the impact and economic value of arts programs and interventions. The second called for identifying best practices and model programs in arts services and disseminating them to make them accessible to older Americans from all socioeconomic, ethnic, and cultural backgrounds. The third was to promote creation of innovative private and public partnerships to support program development and public awareness of arts services across the aging, arts, and health sectors. The following sections review each of these specific recommendations and progress made to date.

**Arts in Health Care**

Contemporary arts in health care practices began as a movement to integrate arts interventions in clinical settings in the 1990s. The mini-conference recommendations included providing professional development to health care providers on the use of the arts in geriatric services, as well as building a workforce of professional artists to team with health care providers across health care settings. This highlighted a paradigm shift from focusing on a medical model of aging as a time of functional loss to one focused on the whole person’s strengths and abilities. Special attention was given to the growing demographic of Baby Boomers and their role as caregivers for relatives with memory loss and other neurocognitive disorders. These teams would have a dual purpose: professional development of clinicians in the area of arts and health care and development of a professional artist workforce. Accreditation standards
for artists working in health care settings similar to those accrediting expressive arts therapists are being developed through a coalition of university-based medical centers with long-standing arts programs (e.g., Shands Hospital at the University of Florida, University of Michigan Medical Center, and Texas Medical Center).

During the past 10 years, there have been accomplishments related to all three key recommendations. HHS, through its Health Resources Services Administration, awarded substantial funding to Geriatric Education Centers (GECs), including the New England GEC and the Washington Area Geriatric Education Center Consortium (WAGECC), to integrate the arts into geriatric education and evaluation. The New England GEC initiative includes partnerships with state and local arts councils featuring the work of older artists and highlighting the accomplishments of older people in later life. It also strives to inspire health care providers to engage in self-care by participating in the arts and humanities. The WAGECC’s initiative involves older artists, teaching artists, related arts therapists, and arts professionals supporting health care professionals to engage older adults in developing life stories, which improve health care quality by promoting person-centered care with the arts and humanities. This unfolding and sharing of life stories enables health care professionals to know their patients beyond illness, learn what motivates them to heal, and gain context for family caregiver support.

Although limited according to an informal survey in 2012 conducted by NCCA, GEC programs are utilizing the humanities and the arts to illustrate the potential of older people to be engaged later in life as role models of successful aging. The National Institute on Aging conducted a multi-year evaluation study (2006–2008) to measure the change of attitudes in medical students toward older people through art-making projects at museums located across the country. The research showed positive results, not only in changed attitudes of the medical students toward the older adults but also in the attitudes of older adults toward the young medical students (Gonzales, Morrow-Howell, & Gilbert, 2010). These findings suggest that intergenerational activities may be efficacious in encouraging medical students to enter the field of geriatric care. Innovative regional arts-based training programs for artists, health care providers, and community workers have been developed by ArtSage (2012) in Minneapolis, MN, and the Creative Center of the University Settlement (2011) in New York, NY. Designed to equip professional teams to work together across the spectrum of health care settings, including home, acute care, and continuing care, the curriculum of each organization is based on the aforementioned Creativity Matters! Toolkit and the NCCA Artists online training resource.

Programs have developed through innovative university and artist collaborations such as the Research Center for Arts and Culture’s ART CART: SAVING THE LEGACY, which focuses on meeting the needs of older artists to preserve their legacy. This intergenerational project teaches undergraduate and graduate students in arts, social work, occupational therapy, and other helping professions about positive aging, while assisting older artists in cataloging their art work. Miami University’s Opening Minds through the Arts partners older adults with Alzheimer’s disease with college students to create art together, thereby improving the quality of life for both groups. George Washington University’s Theater Department launched The Creative Age, a playwriting project produced in partnership with older adults and theater students, which tackles difficult topics around aging with humor and grace to break down isolation and build community.

The NIH has released funding to encourage research in the basic science of arts interventions. Dr. Gene Cohen’s research produced important findings on the health benefits of a chorale program for community-dwelling elders, a preliminary report of which was released at the 2005 mini-conference (Cohen, 2006). This research is now being broadened and expanded by newly funded research conducted at the University of California San Francisco’s Institute for Health & Aging (Johnson, 2013). A meta-analysis of the impact of these types of participatory arts on the health and well-being of older adults demonstrated significant results within this small but growing field of research (Noice, Noice, & Kramer, 2014).

From 2010 through 2014, the MetLife Foundation funded NCCA to facilitate a grantmakers partnership project. Affinity groups—Grantmakers in the Arts, Grantmakers in Aging, and Grantmakers in Health—held regional issues forums, national strategy sessions, webinars, and presentations at each other’s conferences. More than 200 grantmakers learned about the importance of leadership efforts in funding aging, arts, and health care. White papers were produced by Grantmakers in the Arts and Grantmakers in Health, and a family foundation guide was produced by Grantmakers in Aging that includes funding in creative aging programs. New funders, especially family foundations, have now focused attention on this philanthropic area including Aroha Philanthropies focusing on healthy aging older adults and art participation, Pabst Charitable Foundation for the Arts focusing on support for caregivers’ use of the arts, and the Helen Bader Foundation broadly funding in the arts especially to serve people with Alzheimer’s.

Substantial progress has been made in the development of evidence-based arts interventions for family caregivers and people with memory loss and other neurocognitive disorders. It is particularly noteworthy that over a third of the Association of Art Museum Directors’ members provide arts programs for people with Alzheimer’s and caregivers, whereas half provide programming to nursing home
The programs and services developed over the past 10 years need to be made more accessible to rural and underserved communities and to diverse populations. Technology promises to help close some of these gaps through the use of iPods and web-based programming. The model programs and best practices in arts, aging, and health tend to be concentrated on the east (New York, Washington, DC, and Florida) or west coast (California), with strong hubs also in Minnesota and Wisconsin. It should be noted that although the involvement of local government is growing, state governments are taking the lead more than local governments. Gaps in service still abound in arts programs in clinical settings serving older adults, especially in long-term care and assisted living in other parts of the United States and in rural areas. Making the case for the value of the arts in health care continues to be a challenge in terms of developing sustainable business models that balance the earned income from older adults who can afford to pay with sufficient underwriting for those who cannot.

**Lifelong Learning and Community Engagement**

The founding principles for this key issue are that accessibility to and active participation in the arts is essential to a community’s economic vitality, and increases the quality of life across the life span, thus reducing the costs of health and long-term care. Because there is no formal structure for lifelong learning in the arts, recommendations centered around building upon existing institutions and organizations providing arts education, such as higher education, museums, libraries, and senior centers. Recommendations also proposed mentorship programs and intergenerational activities, along with a public awareness program to promote brain health through the arts.

Accomplishments made to date in lifelong learning and the arts include robust partnerships among community-based arts, aging services, and other community organizations. One example is New York-based Lifetime Arts, Inc., a nonprofit organization that promotes professionally conducted arts programs for older adults. With support from the AARP Foundation and the Institute of Museums and Library Sciences, Lifetime Arts administers the Creative Aging Libraries Project in a number of cities around the nation, offering free instructional arts workshops for older adults in public libraries. The workshops are designed to foster older participants’ sense of mastery and social engagement, both vital to quality of life.

Museums and performing arts organizations are expanding arts education opportunities to include summer camps for older adults and evening continuing education classes. Hybrid creative arts organizations continue to grow rapidly, such as Encore Creativity for Older Adults, which offers professionally led music instruction and performance in chorale groups throughout the Washington, DC, area and at sites in Ohio, Pennsylvania, Utah, and Florida. Another, New Horizons International Music Association, offers musical instruction and performance in bands and orchestras to adults aged 50 and older. Established in Rochester, NY, by the Eastman School of Music, New Horizons now has partner organizations throughout the nation as well as a broad commitment to educating older adults in music making and community building. Stagebridge Senior Theatre, a senior theater company in Oakland, CA, and Elders Share the Arts, a pioneer in Living History Arts methods in Brooklyn, NY, offer intergenerational programs nationally and internationally.

The Kenneth A. Picerne Foundation supports programs that promote healthy human development such as the Artists Outreach Project. This project funds retired K-12 arts teachers to work with underserved populations and help integrate the arts into at-risk communities such as detention centers and substance abuse programs. The Intergenerational School, Cleveland, OH, public charter school, developed a mentorship program between at-risk students and people with early-stage Alzheimer’s disease. This program, in the only charter school to receive State
of Ohio ratings of “excellent” for eight consecutive years (The Intergenerational Schools, n.d.), has enabled students to attain high-level scores on core tests. Other Lifelong Learning Institutes have been established at more than 100 universities and colleges since 2001 to offer noncredit courses to adults aged 50 and older for continuing education and life enhancement. The NEA, along with many state and local arts agencies, has expanded from funding from only K-12 arts education to funding lifelong arts education, leading the way for innovative partnerships among stakeholders in the arts, aging, and educational services, and for other private and corporate funders.

The challenging opportunities in lifelong learning and community-building through the arts that should be addressed in the upcoming mini-conference are to: (a) broaden the concept and rationale for lifelong learning in the arts to encompass life enrichment for its own sake and (b) expand workforce development to include encore careers in the arts. If opportunities for older adults’ participation in the arts are to expand, a skilled workforce of artists and committed arts organizations are needed to support growing demand. New business models and marketing plans for arts organizations and community services are needed to fully engage the older population and to support sustainability of arts and educational institutions.

Universal Design

The recommendations in Universal Design underscored the importance of designing and creating homes, neighborhoods, and communities that support choice and livability throughout the life span. The goal was to improve the quality of life for all and contribute to reduced long-term care costs by expanding opportunities to age in place. Professional development in the area of universal design was viewed as essential to progress on this major issue, encouraging designers, builders, and developers to strengthen business and marketing plans. Other recommendations addressed revisions to zoning laws to allow multifamily dwellings. Innovative partnerships between arts organizations and senior living companies were promoted, as well as work with the U.S. Department of Housing and Urban Development to examine policies on building and design for meeting growing demographic needs beyond basic Americans with Disabilities Act requirements.

Progress over the last 10 years has produced many innovative housing solutions for older adults and their families. One example is the Village movement, where people living in naturally occurring retirement communities pool resources to help retro-fit homes for residents to help them age in place and encourage social engagement through the arts (Fitzgerald, 2012). Community senior services such as Iona Senior Services in Washington, DC, incorporate the arts fully into their Adult Day Services by employing a full-time art therapists and multiple partnerships with arts organizations (e.g., The Phillips Collection, AFTA) and internship programs (Howard University, American University, and George Washington University) as well as maintain a robust community arts program with an older artists in residence program and classes in music, dance, poetry, and the visual arts. Groups such as EngAGE, Inc. are working with builders and developers to embed high-quality arts programming for both older adults and intergenerational audiences in well-designed, accessible, low-income senior living facilities (Perry, 2014). Intentional senior living communities, such as continuing care retirement communities, are enlisting artists and arts organizations to integrate the arts into their portfolio of programs for life enrichment and community engagement. Thus, over the past 10 years, universal design has evolved from a physical asset only for older adults to a broad-based community asset for creating age-friendly communities. New York City leads the country in establishing innovative arts programs to create age-friendly communities, including development of Seniors Partnering with Artists Citywide, a program that partners senior centers with artists and arts organizations to share space and develop programs for older people, especially diverse multicultural populations. Other cities across the country, including Portland, OR, and Washington, DC, are including the arts in their age-friendly city services to meet the World Health Organization’s goals of creating social inclusion and breaking down barriers of isolation.

Challenging opportunities in development of universal design and age-friendly communities include finding ways to link older adults and their families to information about alternative ways for older adults to remain in their homes and continue to be vitally engaged in their communities through the arts and design. Building age-friendly communities with a focus on the arts and the living history of older people will help turn these challenges into opportunities for all residents of a neighborhood. However, it will take broad-based commitments to public policies and business development from all sectors of the community to make vibrant neighborhoods through arts and design a reality for all.

Conclusions and Recommendations

This article was intended to review the progress made in the field of the arts, aging, and health since the 2005 arts and aging mini-conference and lay out areas where challenges remain in anticipation of the 2015 mini-conference. Since 2005, the field has advanced due to extensive collaboration across agencies and institutions and cultivation
of a growing body of empirical evidence. It is anticipated that the work of the 2015 mini-conference on the aging, arts, and health will be instrumental in charting the course for the future development of the field, taking it to the next crucial phase.

An evidence based generated through rigorous scientific research including descriptive qualitative research that identifies essential qualities of the artists, programs, behaviors, and settings where the biggest positive effects are demonstrated, must provide a sound basis for the development of informed public policy. Although significant strides have been made in the number and quality of research investigations since the last mini-conference, there is considerable room for improvement. Calls have been issued for new theoretical approaches focused on art as facilitating adaptation in later life and its long-term effects on aging outcomes, as well as study designs involving mixed methods, and developmental and quasi-experimental designs that capture a broader range of outcomes using standardized measures (Kent & Li, 2013). Future efforts should build upon the accomplishments of the Federal Interagency Task Force on Arts and Human Development, continuing public webinars on the latest research findings and evidence-based practices and national convenings to review and critique the state of the field. In addition, special NIH initiatives to fund training programs in the arts, aging, and human development, and research initiatives for new investigators to promote interdisciplinary collaboration can produce a steady stream of scientists committed to innovation and advancement in this area. These scientists will need outlets to feature their work, including new scientific journals and special sections in current journals, and greater opportunities in national and regional professional societies and associations. In the past, criticisms about the quality of this research and questions about its real place in scientific investigation have hampered the growth of the field. Cultivation of more enlightened members of scientific review panels and editorial boards may help overcome these barriers. Lastly, establishment of a national arts and culture research network has been proposed for better understanding of public policy with the greatest impact on vigorous and vital arts and culture for facilitating healthy aging across the life span. The specific mechanisms and approaches that will gain the widest support have yet to be identified, but ongoing discussion of the options holds promise for moving the field forward.

References