

Project ARTISAN: Aspiration and Resilience Through Intergenerational Storytelling and Art-based Narratives

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Background

1. Loneliness has become a major public health concern around the world, prevalent among both young and old.¹ According to recent statistics, 51% of Singapore seniors reported feelings of loneliness, with 19% feeling lonely most of the time.² Research has consistently found that loneliness was associated with numerous comorbid health conditions at old-age including cardiovascular disease, disability, cognitive decline, depression and premature mortality.^{3,4,5,6} Similarly, Singaporean youths often find themselves feeling lonely and unsupported with mounting pressure to succeed in a highly competitive education system and labour market; and while they aspire to find meaningful connections through social media, most are left disappointed with hollow relationships and negative social comparisons.⁷ The psycho-socio-emotional impact of loneliness on youths can be devastating, leading to increased risk for illness, anxiety, depression and suicide.⁸

2. **Overcoming Loneliness through Arts, Heritage and Storytelling.** Citizen empowerment, which involves the promotion of active participation and compassionate actions in civic and community life⁹, via the cultivation of resilience and social connectedness¹⁰, is one of the most sustainable means to overcome loneliness.¹¹ Psychological hardiness coupled with supportive relational bonds can nurture a strong sense of identity, one that helps in navigating the increasingly complex modern social life, initiating compassionate civic engagements, and contributing to a caring and inclusive society. Such a society of empowered citizens is what Singapore's Ministry of Culture, Community and Youth (MCCY) aims to help build through its range of policies and programmes¹². The arts and heritage are vital for attaining this goal. Research around the world including those from Singapore have generated a wealth of evidence that supported the efficacy of the arts and heritage for building resilience and social connectedness.^{13,14,15} The Arts for Ageing Well Study¹⁶, a 2016 national survey conducted by Dr Andy Ho and the National Arts Council (NAC) found that arts engagements significantly enhanced psychological health, social integration and spiritual wellbeing among Singaporean seniors. Study findings also revealed that storytelling was one of the most treasured art forms locally, enabling seniors to construct their life experiences into meaningful identities and narratives that can be shared with others for establishing authentic and empathic relationships.

3. **ARTISAN: Addressing Loneliness via Citizen Empowerment.** Developed by Dr Andy Ho in partnership with NAC and the National Museum of Singapore, ARTISAN (**A**spiration and **R**esilience **T**hrough **I**ntergenerational **S**torytelling and **A**rt-based **N**arratives) involved a 5-week, 15-hour group-based intervention that focused on building resilience and social connectedness among the young and old through a structured and holistic multimodal framework. Specifically, ARTISAN combined the

distinct integrative elements of 1) Reflective self-expression and communal sharing of personal narratives through professional facilitated storytelling; 2) Narrative identity processing and meaningful intergenerational bonding through guided art-making and creative-writing, and 3) Immersive and creative environment for self-discovery and social-transformation through curated art spaces illuminated by social artefacts and stories of national heritage. This converges upon a one-of-its-kind multimodal intervention framework that is intricately structured and uniquely holistic for instilling positive and impactful changes in participants' lives. (A short video of the ARTISAN pilot study is available here - <https://blogs.ntu.edu.sg/arch/2018/07/27/artisan/>).

Research Objectives

4. The objectives of this project were of 1) *Empowerment*: to systematically develop and evaluate a culturally-specific intergenerational arts programme designed to enhance participants' resilience, social cohesion, sense of place and identity as well as quality of life; 2) *Engagement*: to actively engage participants, their social networks as well as the public through active and passive arts engagement in community and heritage spaces – this was achieved via ARTISAN exhibitions held during and after the interventions; 3) *Social change*: to create a platform for intergenerational interactions and knowledge exchanges, encouraging the cultivation of positive public social dialogue and change through the development of Project ARTISAN; 4) *Sustainability*: to develop an empirical foundation for a future Population Health study that aspires toward large-scale implementation of Project ARTISAN in greater community, which can in turn benefit more older adults and youths from different walks of life.

Methodology

5. The ARTISAN intergenerational arts programme was developed with a Participatory Action Research (PAR) approach. This interventional study adopted an open-label waitlist randomized controlled trial design (RCT) design comprising of two groups: 1) an intervention group [n=35] and 2) a waitlist-control group [n=33]. The trial was registered on ClinicalTrials.gov [ID: NCT03593967]. 34 youths and senior dyads (N = 68) were recruited and randomly paired after consent was obtained. Ethical approval was received from Nanyang Technological University's Institutional Review Board [IRB-2018-01-005] prior to the commencement of the study. All study participants were assessed on a battery of standardized self-reported psychometric measures on wellbeing, personhood and nationhood at three time points: [T1] baseline; [T2] immediately post-intervention/second baseline; and [T3] 5-weeks follow-up/ immediately post-intervention. Primary outcome measures included: *Ego-resilience*, assessed by the 10-item Ego-Resilience Revised Scale (ER-89)¹⁷; *perceived loneliness*, assessed by the 4-item Revised UCLA Loneliness Scale – Short Form (ULS-4)¹⁸; and *National identity*, assessed by a modified version of the 12-item National Identity Scale (NATID)¹⁹. Secondary outcome measures included: *Life satisfaction*, assessed by the Single-item Satisfaction with Life Scale (SWLS)²⁰; *Quality of life*, assessed by the 8-item World Health Organization Quality of Life Scale-8 (WHOQoL-8)²¹, as well as the *social support*, assessed by the 14-item Social Support Survey – Emotional, Affectionate, Interaction Subscales (MOS-SS)²². Basic demographic information such as age, gender, education, religion, living composition were also recorded. Between- and within group comparisons were performed on the quantitative data using mixed effects model. Upon completion of the intervention, participants were further invited to participate in a focus group discussion for programme evaluation. Qualitative data produced during each intervention session were recorded and transcribed for framework analysis.

Results

6. **Demographics of Participants.** Senior participants were between the ages of 60 – 83 (M = 73.1, SD = 6.53), predominantly female (82.4%) and Chinese (100%). Youth participants were between the ages of 19 – 29 (M = 22.2, SD = 2.34), mostly female (76.5%) and Chinese (92%). There were no statistically significant differences between intervention group and control group in terms of demographic information.

7. **Overall Quantitative Findings.** Between-group analyses reveal participants in the ARTISAN group experienced significant increase in life satisfaction compared to participants in the waitlist-control group (3.45 vs 3.13; 95% CI: 0.22 to 0.77, $p < 0.001$, Cohen's $d = -0.53$) immediately after the completion of ARTISAN. Within-group analyses revealed that at the 5-week follow-up, the intervention group participants experienced significantly elevated levels of life satisfaction (3.06 vs 3.29; 95% CI 0.04 to 0.42, $p = 0.017$, $d = -0.47$), further significant improvement in resilience (5.17 vs 5.48; 95% CI: 0.07 to 0.55, $p = 0.011$, $d = -0.46$), as well as significant reduction in loneliness (2.12 vs 1.19; 95% CI: -0.34 to -0.08, $p = 0.001$, $d = 0.61$) compared to baseline levels. These findings reflect the robust maintenance and positive residual effects of the ARTISAN intervention.

8. **Findings from sub-group analysis with youth participants.** Between-group analyses with youth participants revealed that compared to waitlist-control, intervention group participants experienced significant increase in quality of life (4.24 vs 3.59; 95% CI: 0.16-0.52, $p < 0.001$, $d = -1.31$), life satisfaction (3.31 vs 2.90; 95% CI: 0.09-0.85, $p = 0.015$, $d = -0.68$), and self-reported national identity (4.24 vs 3.96; 95% CI: 0.18-0.80, $p = 0.002$, $d = -0.44$) and upon ARTISAN completion. Within-group analyses showed that at the 5-week follow-up, youths in intervention group not only experienced significantly elevated levels of quality of life and life satisfaction, but also further enhancements in affectionate support of (3.81 vs 4.09; 95% CI: 0.03 to 0.53, $p = 0.028$, $d = -0.47$) and emotional support (3.66 vs 4.01; 95% CI: 0.10 to 0.59, $p = 0.005$, $d = -0.57$) compared to baseline. Moreover, significant reduction in loneliness was observed for the intervention group for youths at the 5-week follow-up compared to baseline levels (2.25 vs 2.06; 95% CI: -0.34 to -0.05, $p = 0.010$, $d = 0.48$). Again, these findings reflect the clinical sustainability of the ARTISAN intervention in uplifting youths' quality of life and sense of social wellness.

9. **Findings from sub-group analysis with senior participants.** It is important to note that senior participants recruited for the pilot study were active members of their communities, and thus they already possessed relatively high levels of wellbeing. Nonetheless, between-group analyses show that ARTISAN was still effective in enhancing the life satisfaction (3.55 vs 3.39; 95% CI: 0.12 to 0.94, $p = 0.011$, $d = -0.49$) among seniors in the intervention as compared to those in the controlled group. Within-group analyses further reveal that at the 5-week follow-up, seniors in the intervention further experienced significant reduction in loneliness (1.97 vs 1.75; 95% CI: -0.44 to -0.02, $p = 0.034$, $d = 0.80$) and enhancing resilience (5.04 vs 5.65; 95% CI: 0.19 to 1.04, $p = 0.005$, $d = -0.77$) compared to baseline. However, there was a significant reduction in life satisfaction among the intervention group for seniors between the time the intervention programme was completed, and at the point of the 5-week follow-up (3.59 vs 3.30; 95% CI: -0.58 to -0.01, $p = 0.044$, $d = 0.50$), highlighting the possible need for booster sessions and/or other activities such as programme outreach and volunteering for ARTISIAN to sustain meaningful engagement.

10. **Qualitative Findings.** The qualitative data generated through expressive writing and group sharing among ARTISAN participants provided further evidence of the intervention's efficacy in citizen empowerment. Specifically, the art-based narratives of one of the youth-senior dyads eloquently described the programme's ability to foster nationhood: "Our art represents Singapore in the past and present, and that although the buildings and infrastructure have changed, the roots and spirit of the people remain the same across generations." The words of a 23-year-old youth participant echoed this view, "I get to learn about the past of Singapore, our forefather's contributions and how hard it was for Singapore to get here. I like the touching stories told by all of them (older participants)." In terms of resilience and capacity building, one 71-year-old senior participant, who was hesitant to the creative process at the start of intervention, wrote in the final session, "I realize that even at this age, there is still so much I can learn, and find more confidence in trying new things, creating new things." A 24-year-old youth participant shared the same sentiment, "Previously I was more individualistic and shy... now I learnt that I have the capacity to try out new forms of art and work with someone very different from me." Finally, in terms of inspiring social connectedness and gratitude, a 23-year-old youth participant wrote about the ARTISAN journey, "I feel that these five weeks has taught me how to better communicate with the elderly and not to disregard our differences but to celebrate them. It has also made me aware of how different the times when we were growing up and made me more appreciative." The sharing of a 64-year-old senior participant resonated this perspective, "I have a greater appreciation of working together with youths... ARTISAN has broken the intergenerational barrier."

Conclusion

11. This first-of-its-kind study fills a critical gap in knowledge and practice between the arts, health and citizenship, paving the way for further research in enhancing societal wellbeing, identity creation and social cohesion. Through an innovative, locally developed, empirically-driven, holistic and multimodal intervention framework that integrates stories, arts and heritage for illuminating, bridging and empowering lives, a scaling up of ARTISAN and its comprehensive programming will form a social movement that reach many in creating a more caring and inclusive society.

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