

Just Dip
it in Blue



Introduction

Care and Creativity in Context is a capacity building and creative project exploring how creativity can support well-being, connection, and personal expression within diverse care environments.

It focused on equipping artists with the skills and support necessary to deliver creative sessions in health care settings. It brings together artists, participants, and facilitators to experiment with playful, inclusive approaches to making and experiencing art. Before exploring the specific care settings where this work took place, it is helpful to understand the ethos that shapes the project, an ethos captured, perhaps most simply, in the phrase that became its title.

The title *Just Dip It In Blue* emerges from a moment within the Care and Creativity in Context project that perfectly captures the spirit, methodology, and gentle philosophy of the work. During a discussion with the project's artists, Emma Brennan described how some participants approached the creative process with hesitation, unsure where to begin, doubtful of their own creativity, or feeling the weight of expectation before a single mark had been made. In these moments, Emma would offer a simple, grounding invitation: "Just dip it in blue there," guiding the participant to the palette. The phrase became more than instruction; it offered an accessible entry point into creativity. It acknowledged that beginning is often the hardest part and that creativity need not be complex, intimidating, or perfect. Even the smallest action, a brush touching paint, was enough. More than enough: it was the start. This approach embodies the ethos of the project: creativity as care, care as encouragement, encouragement as invitation, and participation as being enough.

The phrase captures the project's commitment to gentle guidance, playful experimentation, and the belief that each next step only becomes possible once the first is taken. It removes the pressure that art must be brilliant or perfect to be meaningful.

Just Dip It In Blue serves as a metaphor for openness, possibility, and trust in the process. It reflects the courage of beginning, the significance of small actions, and the transformative potential of a single creative gesture. It is both instruction and invitation, one that lies at the heart of the project and the experiences of all who took part.

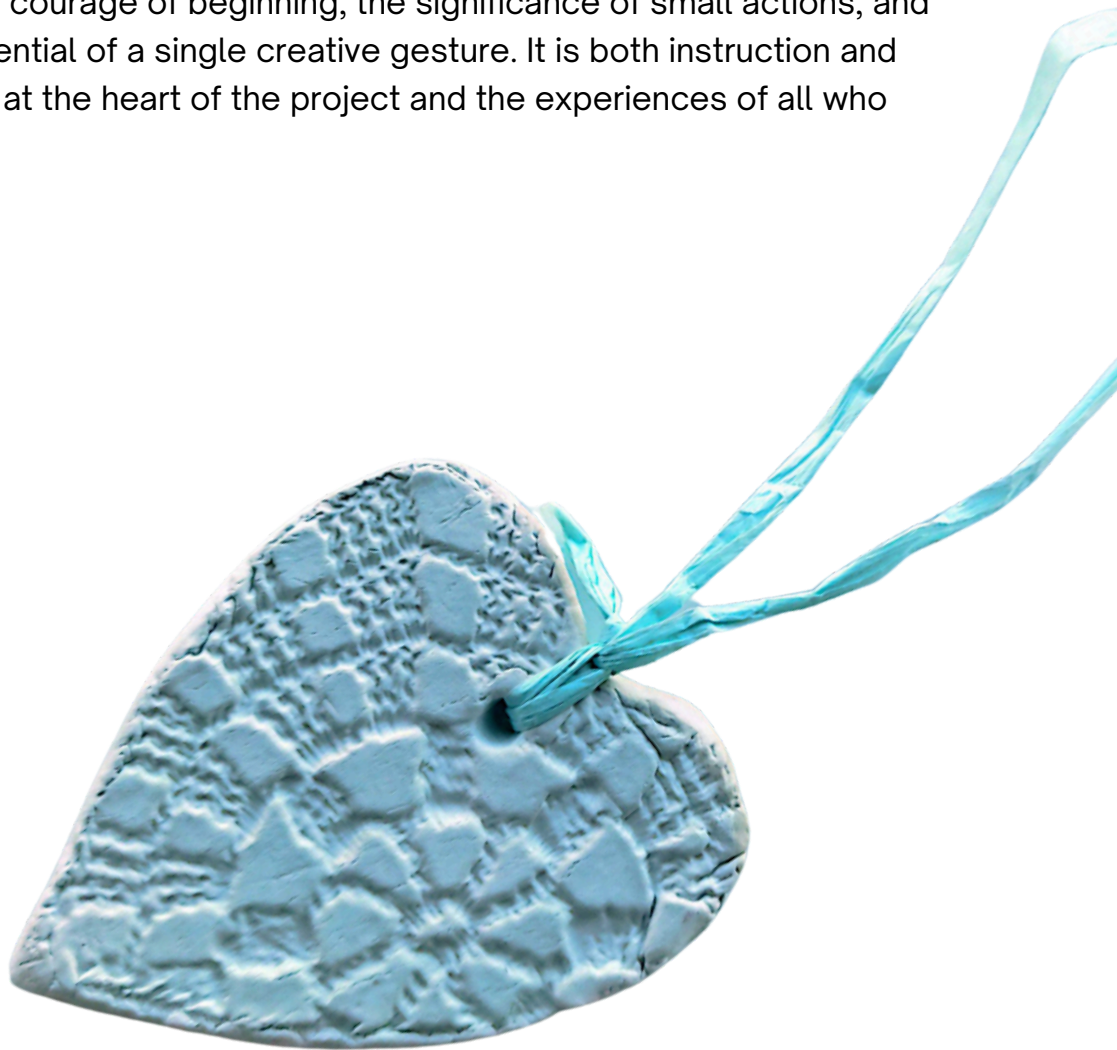


Table of Contents

Introduction	1
Care Settings	4
The Artists	5
In Discussion With the Artists	8
Collaboration	11
Turning Points	14
Finding Freedom Inside Care	17
Relationships	19
The Participant Experience	28
Endings	29
What the Artists Learned	32
Care and Creativity in Context	33
Observations by Patricia Blighe	34
Participant Agency and Creative Engagement	38
Group Dynamics and Social Connection	38
Collaboration and Care Setting Relationships	39
Impact, Community, and Legacy	39
Reflection	40
The Artist's Experience	42
Adapting the Two Worlds	43
Reflection: The Value of Two Worlds Together	45
Conclusion	48

Care Settings

The project facilitated the delivery of group sessions in care settings in both counties. The venues for these were identified through the project engaging with care managers of the respective care setting to determine interest in hosting sessions. Those venues thus selected were as follows:

- Roscommon Hospice, Roscommon
- Roscommon University Hospital
- Sacred Heart Hospital & Care Home, Roscommon
- Áras Mháthair Phóil Nursing Home, Castlerea, Co. Roscommon
- Plunkett Community Nursing Unit, Boyle, Co. Roscommon
- Mayo Hospice, Castlebar, Co. Mayo
- Sacred Heart Hospital, Day Care Centre, Castlebar, Co. Mayo
- The Mac Bride Community Nursing Unit, Westport, Co. Mayo
- D'Alton Community Nursing Unit, Claremorris, Co. Mayo



The Artists

Pamela Gray, Visual Art

Maggie Morrisson, Visual Art

Norah Brennan, Visual Art

Catherine Donnelly, Creative Movement & Dance

Catherine Gannon, Multidisciplinary Art and Design

Bianca Fachel, Music

Breda Mayock, Visual Artist & Project Coordinator

Bernie Garvey O Mara, Visual Art

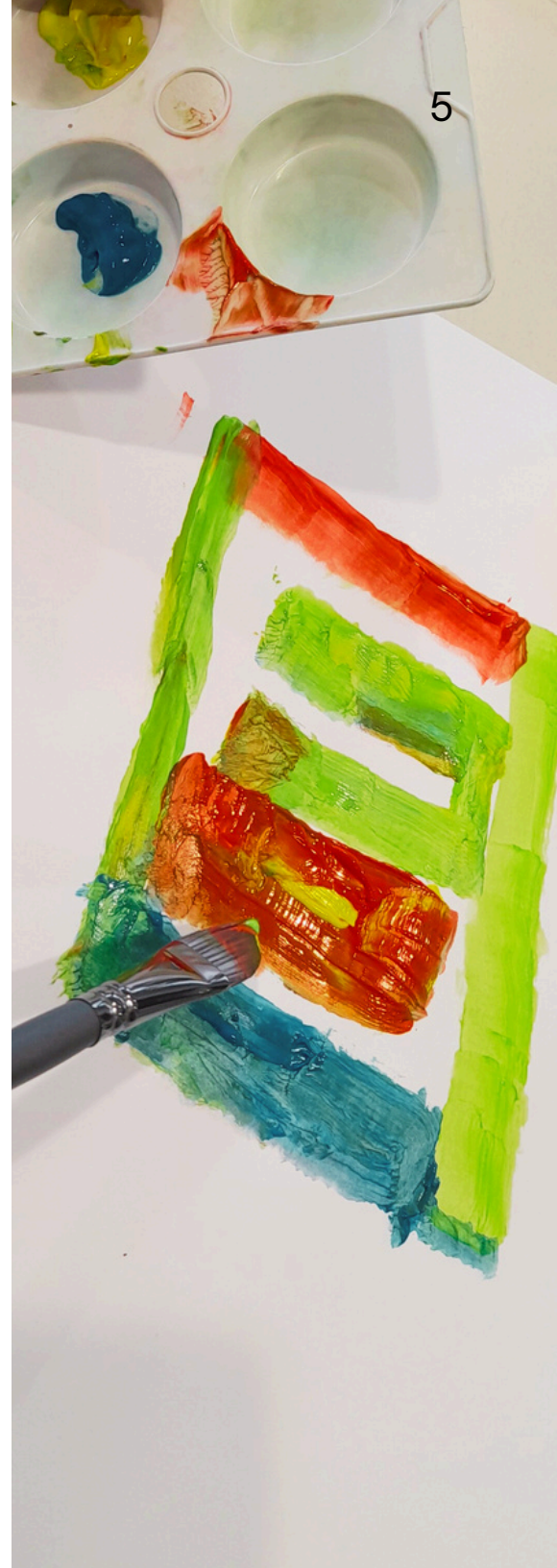
Flin Keane, Multidisciplinary Art

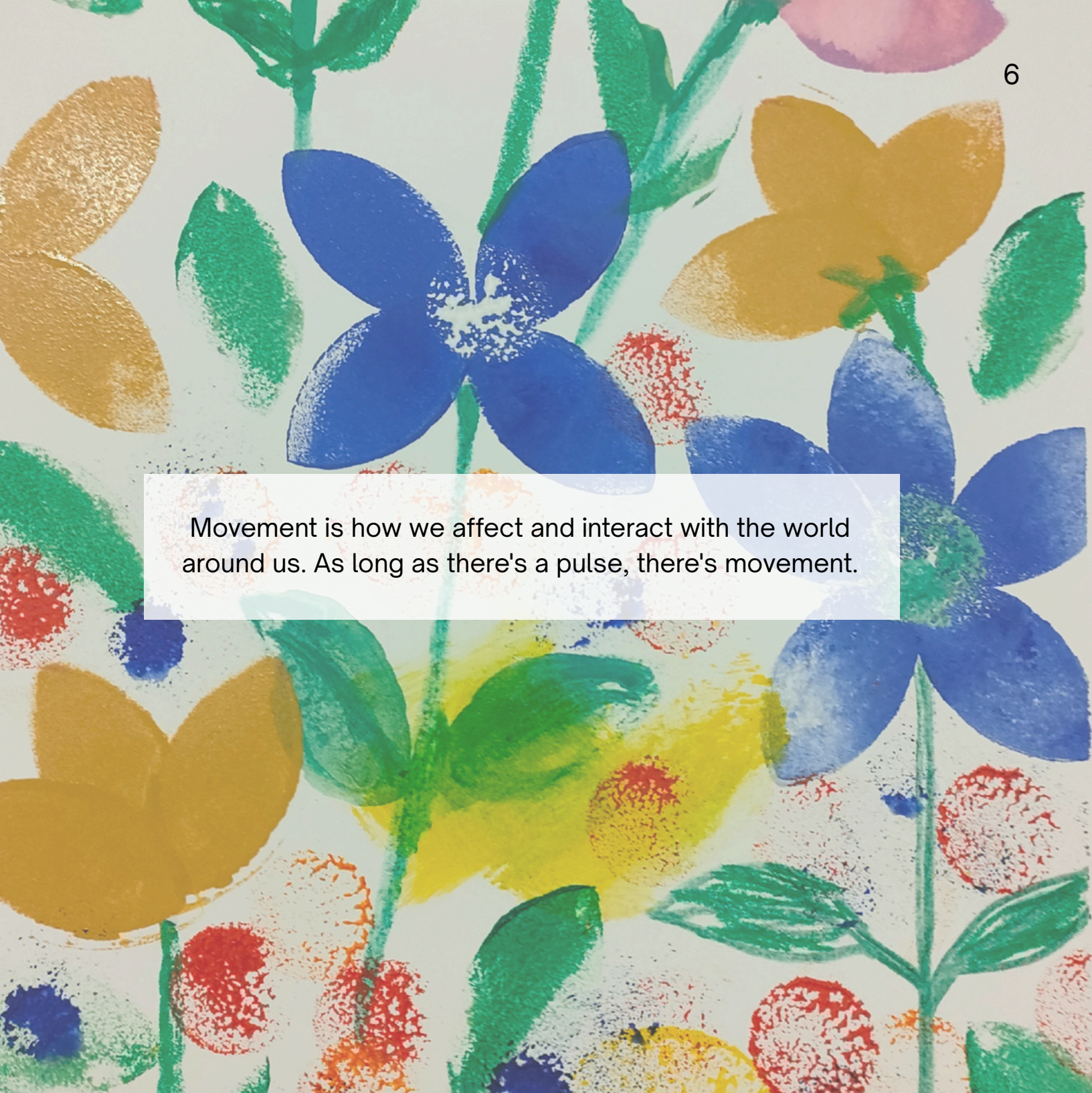
Mags Duffy, Visual Arts

Emma Brennan, Multidisciplinary Art

Sarah Ellen Lundy, Visual Art

Patricia Blighe, Therapeutic Creativity



A vibrant, abstract floral pattern featuring various colors like blue, yellow, green, and red, with a central white text box.

Movement is how we affect and interact with the world around us. As long as there's a pulse, there's movement.

“At the start of the project, finding our footing was challenging. When one patient chose to participate, the joy she expressed was incredibly uplifting and really showed me how important this project is.”



In Discussion with the Artists

For many of the artists, entering care settings was a mixture of excitement and apprehension. One artist reflected on being new to working with older adults, having only previously worked with people with special needs. Shadowing a more experienced colleague in a nursing home helped build confidence, offering insight into protocols, room layouts, and care hierarchies. “I learned so much from her about protocols and things like that, from the hierarchy to layout of the rooms, to how things are done. This gave me a little bit more confidence for going over to my own residency,” she recalled.

Even for those with some prior experience, the first encounter with a hospital or care facility could be jarring. Another artist described the initial shock of moving from the outside into the highly regulated, unfamiliar environment. “I was happy that I had acting skills, I was able to prepare myself, to ground myself like going onto a stage. It’s the same kind of thing; you’re going into a place where you’re not fully comfortable with the unknown,” she said.



Tús maith leath na hoibre

Creating the right environment was essential to the success of the sessions. Music played a central role for some artists, helping to set a calm, welcoming atmosphere. One artist noted how classical tracks, carefully chosen with participants' preferences in mind, "did a lot of the work for me..." However, music was not always the right fit for every situation. The same artist reflected that, "People were all coming in in wheelchairs... If I tried to move, they started laughing... So, I brought it back to just working on the painting. But the music was great to set it up."

Physical space and logistics were another challenge. In a large residential unit with daycare participants, one artist adapted the room layout, arranging tables in a U-shape to ensure everyone could see and participate. Staff support was crucial, helping to manage numbers and facilitate individual engagement, particularly for participants with mobility challenges or cognitive impairments. "It's making sure that everyone is comfortable, space is very important," she explained.

Visiting participants in their own homes introduced a different kind of challenge. The intimacy of someone's personal space required sensitivity, patience, and a willingness to adapt. One artist described the initial discomfort of sitting at a cold kitchen table, gradually gaining comfort as small routines, like making tea, helped her settle into the space. "You have to be brave to step into that space, and be relaxed... You have to put aside a lot of stuff, and just go in there," she said.

For many, the most meaningful moments came from observing participants engage fully with the creative process. One artist reflected on the quiet power of attention: "There's only so many times that you can chat about what colours they would like... It's really about attention in a way. It's also about the process and their relationship to what they're doing. I found for the first four sessions I was just encouraging, then they were off to the races. You don't have to talk to them; they're so involved in their process and interested in what they're doing."

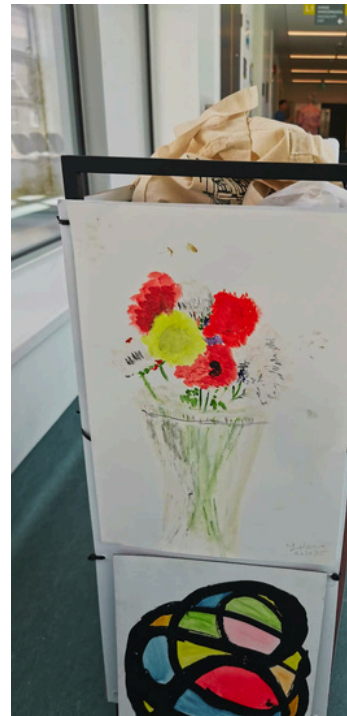


Collaboration

Collaboration between artists and movement practitioners was a central part of the project, often creating entirely new ways of working. One visual artist described how the partnership began: “We chatted, and figured out each other’s strengths. We found a way to collaborate. She explained how she used lines and movement in her practice, and that’s how it all began. Week after week, we worked together, taking it into the hospital. At first, staff thought we were a little unusual, but that’s where the idea of the ‘Moving Art Cart’ came from. It wasn’t really a trolley, more like a mobile exhibition. We were making art, showing people what we’d been doing. We’d knock on doors, explain what we were about, and though people were initially hesitant, they’d soon be bouncing around with excitement.”

The other artist reflected on the emotional resonance of their collaboration:

“I liked to call it the ‘Moving Art Cart’ because it’s about movement—moving someone, stirring emotions. We hardly knew each other before this, but we created our space together and used it as an anchor. Vibrations from that work would seep out and land wherever they needed to land. It’s unseen, you don’t know the effect, but you have to have confidence, because you’re doing what you do best, even when you’re out of your comfort zone. That’s all you can do.”





Another artist spoke about the transformative quality of the work, particularly the abstract, responsive nature of the pieces: “I’m fascinated by the images because they’re limited but mysterious. There isn’t logic to them, they make the invisible visible, the unknown known. Every image carries so much of the atmosphere: the space, the participants’ engagement, the vibe from the staff, the music they chose, even what’s happening that day. Sharing these images is pleasurable for participants, it brings back pleasant memories. It’s inspiring to witness the change.”

Another participant opted for home visits, and her husband said it changed her life. The collaboration between a visual artist and a movement artist is crucial. We’ve never done anything like this before, it’s not quantifiable, but it’s profoundly qualifiable.”

Collaboration also created deeply personal experiences:

“One piece started as printmaking, and everyone who passed by added something, their name or a phrase. Family members would see their mother’s handwriting and were visibly moved. Many participants had never met anyone outside medical staff who could engage them this way. One woman with dementia eventually loved to write, contributing names and marks that were precious to her.



Turning Points: When Participants Take the Lead

One of the most powerful moments in the residencies came when participants began to take ownership of the creative process for themselves. As one artist reflected:

“The turning point comes when they start doing it for themselves. I didn’t realise that offering them a choice of colours was what really got them interested. It gives them a sense of autonomy, and suddenly they’re much more engaged. The same goes for tools, I’d show them different brushes and rollers and let them choose what they wanted. It takes more time, but it’s absolutely worth it. I learned to limit the options, maybe three instead of six. It’s the sense of choice that matters.”

For others, the shift became clear over weeks of sustained engagement:

“I underestimated how long it would take to build confidence. We got along from the start, but real ownership took time. By the twelfth week of the first residency, the participants were just beginning to grasp it. After a short break, when I returned for the second residency, their confidence had grown immensely. They were choosing their own materials, directing their own work. My role was simply to provide paint and supplies. A huge turning point came with the art auction books another artist gave me. The participants drew so much inspiration from the artwork in those books, more than from photographs or still life exercises. The books sparked conversations: ‘Why would you paint that? Why would you hang that up?’ They became curious and engaged in ways I hadn’t anticipated. For most, this was their first real exposure to art, and suddenly it wasn’t intimidating anymore, it was for everyone.”

Some turning points arose when participants began teaching the artists themselves: “I’m a painter, but on home visits, I had to let go of expectations. One participant did digital drawing and painting and ended up teaching me his tools and colours. That was a massive turning point, I was learning from him!”

Other turning points came through group dynamics and experimentation:

“Initially, my tables were segregated, three women’s tables and one men’s table. They just painted and drew and took it to another level. They mastered it individually, but there was also a group dynamic developing alongside that.”

“The turning point for me was when we took the art trolley on the road. Staff were apprehensive at first, but once they saw what was happening, they immediately recognised its value.”

For some artists, subtle, quieter shifts marked the moment participants claimed ownership:

“There were different levels of participation. The small talk often revealed so much more than the activity itself. People were dying, families were grieving. By the second residency, our approach had become quieter. We simply invited people to paint or draw, and they engaged at their own pace. We were witnesses rather than guides, and that made a difference.”



Learning to balance individual attention with group cohesion also emerged as a key insight:

“At first, I focused on one-to-one interactions, giving participants choices and guidance. Later I noticed that if I spent too much time with one person, others could feel jealous. It taught me the importance of integrating individual learning with creating a connected group. That’s something I’d focus on more next time.”

Across the residencies, these turning points reveal a simple truth: the moment participants claim agency, the work transforms. It becomes theirs, not just in the materials they use, but in the confidence, joy, and ownership they bring to every mark, brushstroke, or movement.

“A truly memorable moment occurred with Michael, a patient who was initially very quiet, staring at the floor and showing no visible engagement with anyone in the room. When I approached him and invited him to sing, I began playing and singing My Lovely Leitrim. Almost instantly, his face lifted. He smiled, sang every word of the song, and finished by clapping with pure joy. It was a beautiful moment, one I will never forget.”

Finding Freedom Inside Care



What quickly became clear was that people did not want to talk about illness. They wanted to talk about weather, families, memories, poems, songs, and places they had loved.

“It’s not about their health,” one artist said. “You’re walking through stories and memories.”

These creative spaces allowed participants to bring more of themselves to remember living, going to dances, good memories of happy times. In these moments, the hospital or hospice faded. For a while, they were not patients, they were simply people, being together. One participant described the weekly sessions as his “day job.” Another said quietly, “You brought me back to life.”

Through writing, music, textile, conversation and image-making, participants began to take ownership of the space. Confidence grew. A woman wrote her first ever haiku. Others worked together on a tapestry that was later left behind in the centre, a small but powerful legacy.

“They begin to feel it’s theirs,” an artist observed.

“And then there’s a complete change.”

“In the Hospice, visiting family members were deeply moved when they saw their loved one’s handwriting, names or short written contributions, stitched into cloth. This tangible trace of presence often encouraged them to express themselves and become part of the creative process. On one occasion, a daughter gently invited her mother, who was at end of life, to respond to the prompt ‘leave a mark, message, or image.’ The mother added a profound contribution to the textile piece. The act of creating together opened space for a conversation about her approaching death. The daughter later expressed deep gratitude for this opportunity, recognising through their shared creative moment that her mother was at peace.”



Relationships

These sessions were not just creative encounters, relationships developed.

Participants shared life stories, grief, humour and memory.

“You open a part of life they had closed away,” one artist reflected.

Families often expressed gratitude and had a sense of the care giving that the artists provided is emotional care rather than the medical care provided by the health care staff.

“Families know their loved ones are being taken care of,” another artist said.





“One of my participants is living with dementia. During our time together, I learned that her mother had taught her a children’s poem when she was young. I happened to have the same poem in a children’s poetry book, and on our art visit days she was able to revisit it, reminiscing and reciting the verses aloud. It became a meaningful bridge between past and present.”



“I remember the commotion caused when I brought a taxidermy fox into the Plunkett Home in Boyle. It was a large specimen, poised in a strikingly lifelike stance, an imposing presence as I carried it through reception and past tea trolleys, prompting startled jumps and delighted exclamations. Once introduced to the residents, each person reached out to touch its fur and glassy eyes. Almost immediately, stories began to flow, tales of foxes stealing hens and ducks from their farms, memories of rural life, and even journeys into Irish mythology and the banshee. It became a rich and rewarding session, one I remain deeply grateful to have experienced.”



“One man loved to draw the same house, session after session. I wondered if he might be bored, but it was simply his thing, he was completely absorbed in it. When I began asking about the house, he started telling stories: ‘There’s a fire on in there,’ he’d say, and we’d imagine what was happening inside. That sparked laughter and conversation with the others; it became a different kind of interaction, full of humour and connection. It showed me that there’s much more invested than just a drawing, it really matters. Later, he developed dementia, and when I returned for the next residency, I could see he had deteriorated. I could even sense a change in the way he painted the house.”



“During the penultimate session of the residency, while chatting with one of the wonderful Healthcare Assistants, he unexpectedly picked up a paintbrush and began to paint. It was the first time he had ever engaged in making art, and he was visibly proud of what he created. It became a memorable moment, not only for him, but for the entire team.”



Cold Christmas is gone
White snowdrops are appearing
Spring is in the air

Participant Haiku

“During a one-to-one session focused on creative writing, I invited the participant to try composing a haiku, a three-line poem. Neither of us had written one before, but I trusted the creative process. As it was winter, I suggested we set the poem in that season. When I asked about subjects she enjoyed, she immediately spoke about her love of gardening, and we began from there.”



“When I see rainbows in the skies
Reminds me their smile
When the sun and rain
Dance like crystal leaves”

Song lyrics from It's All I Can Dream by artist Bianca Fachel, written in response to and inspired by her experience on the project.

The outcomes of the residencies were often described not in clinical terms, but in the language of lived experience. Artists repeatedly heard how the sessions shifted the rhythm and texture of daily life for participants. As one artist reflected, “I have been told how much the painting sessions have changed the quality of people’s lives.”

The act of creating space, both physically and atmospherically, proved central to these outcomes. One artist described how something as simple as turning off a television transformed the environment:

“Originally, we set up in the living room where the residents always were. The television was always on, and the first thing I’d do was ask if I could turn it off. It’s hard to make art with a TV on. In the Sacred Heart, we were lucky to have an empty room because of renovations. It became our dedicated art space. We could leave work up on the walls each week. It created continuity. Some residents came down just to spend time there, even if they didn’t want to make art. There was room for that too.”

Having a consistent, intentional space allowed the work to accumulate and settle. The studio presence, however temporary, gave shape and recognition to participants’ efforts.

Exhibitions further deepened that recognition. One artist observed how surprised and proud many of the older participants were of their own achievements:

“They’re humble, but also surprised by what they’ve produced. At one exhibition, families attended and one woman’s family printed photographs of all her work. The participants talked about it for a long time afterwards. It was a real celebration, and it had a lasting effect on their daily lives.”

These shifts, whether through conversation, observation, or exhibition, extended beyond the sessions themselves. The emotional dimension of the work was equally significant for the artists. As one artist expressed:

“Across settings, hospice, care homes, hospitals, and private residences, the outcomes were not always dramatic or immediate. Often, they were subtle but sustained: a weekly rhythm, a quiet space, a shared joke, a displayed painting, a remembered poem, a conversation that continued after the session ended.”

Taken together, these accounts suggest that the true outcome of the project was not simply the artworks produced, but the shift in atmosphere, identity, and connection that creative engagement made possible.



The Participant Experience

The creative sessions gave participants a sense of freedom, agency, and reconnection with life beyond illness or care routines. They offered moments of joy, self-expression, and personal engagement, whether through music, visual art, writing, or storytelling. Participants were able to reminisce, explore memories, share humour, and connect with others in ways that went beyond clinical or family interactions.

The work fostered confidence and pride, as seen when participants created art for the first time, contributed to collective projects, or took ownership of their creative choices. Families witnessed these expressions, sometimes gaining reassurance or closure, especially in end-of-life contexts. For some, the sessions became a meaningful routine, a source of purpose, or a “day job,” offering structure and joy in their week.



Endings

If beginnings required courage and adaptation, endings required something else again: care. The close of each residency was rarely abrupt, but it carried emotional weight for participants, families, and artists alike. By the time the final sessions arrived, the work had woven itself into the rhythm of everyday life.

Artists spoke of how deeply embedded the sessions had become. One reflected that participants described the painting sessions as “the metronome of his week.”

The final weeks were not simply a conclusion to activity, but a shift in routine and identity. In some settings, the physical space itself held the memory of what had taken place there. One artist described how transforming a communal room into a temporary studio, sometimes as simple as turning off a television, created a different atmosphere, one that allowed attention and presence to settle. In one care home undergoing renovations, an empty room became a dedicated art space. Work was left up on the walls from week to week, creating continuity and quiet pride. As the residency drew to a close, that room carried the imprint of shared effort: images layered over time, conversations embedded in the walls, a space temporarily reshaped by creativity.



Exhibitions not only signaled a conclusion but also served as moments of recognition and validation. Families came together, photographs were shared, and participants, often modest about their accomplishments, expressed genuine pride and surprise at what they had achieved. One artist reflected that the sense of celebration extended well beyond the event, with participants continuing to talk about the experience and carrying that affirmation with them into everyday life. The ending, in this sense, became a moment of consolidation rather than loss.

Other endings were quieter. A conversation sparked by watching animals outside, which led to stories, photographs, and eventually paintings, became part of a participant's ongoing narrative. These small arcs of engagement, observation, memory, imagination, did not disappear when the sessions stopped. They had shifted something internally: confidence, curiosity, voice.

For the artists, departure was often the most complex moment. As one reflected: "Leaving is very emotional. You develop friendships that go beyond a job. Going into people's homes is a huge privilege. Most of the time, you're listening. It's therapeutic for people to be listened to, not just by family, who may feel the need to give advice. It is the most extraordinary project."





Endings underscored the relational nature of the work. What had developed was not simply a programme delivered over a set period, but bonds formed through listening, witnessing, and making together. In hospices, care homes, hospitals, and private residences, the work sometimes unfolded alongside profound life transitions, illness, deterioration, even death. In those contexts, the end of a residency could feel especially tender.

And yet, the artists' reflections suggest that what remained was not solely a sense of absence. The weekly rhythm, the quiet studio space, the shared laughter, the exhibited paintings, the remembered poem, these endured in memory and, in many cases, in the participants' sense of themselves. The endings revealed what the residencies had truly created: not just artworks, but moments of connection and recognition that outlasted the formal life of the project.

What the Artists Learned

For the artists, this work became an extension of their own creative practice.

“It’s an extension of what I do now. It adds value to my art,” one artist shared.

They learned to adapt, to be flexible, to wear many hats.

“You’re constantly learning and adapting,” another said.

They also learned the importance of boundaries and care.

“You have to detach yourself,” one artist reflected. “But it’s not easy.”

With training, mentorship and strong coordination, they believe many more artists could step into this work safely and meaningfully.

“Good training and mentorship really help,” one artist noted.

“So people know how to begin. And how to leave.”



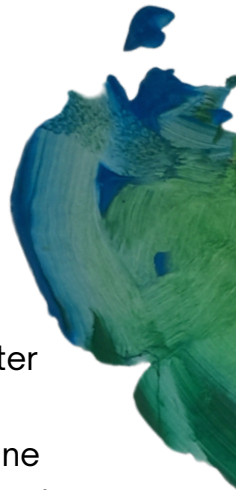
Care and Creativity in Context: Partner Reflections

Across hospitals, hospices and community services in Mayo and Roscommon, the Care and Creativity in Context Project brought colour, connection and renewed possibility into everyday care environments.

Partner organisations consistently described the programme as thoughtfully delivered and deeply worthwhile. Artists worked with sensitivity and flexibility, adapting to clinical and community settings with ease. Their gentle, inclusive approach allowed patients, residents, families and staff to engage at their own pace.

The impact was widely felt. Participants experienced improved wellbeing, brighter mood, increased social engagement and renewed confidence. In healthcare settings, staff witnessed patients rediscover abilities they believed were lost. One post-stroke patient created artwork using their non-dominant hand and was moved to tears on seeing the finished piece. In another instance, a patient who thought they could no longer create was supported to produce artwork through collaborative facilitation, a powerful reminder of the resilience that creativity can uncover.

Exhibitions and corridor display transformed care spaces into shared galleries, fostering pride and visibility. Coffee mornings celebrating residents' work offered moments of joy and accomplishment. In hospice settings, the open, opt-in nature of the sessions allowed families and visitors to participate gently, respecting the emotional landscape of the space. All partner organisations expressed strong interest in future collaboration and would recommend similar projects to others. Together, their reflections affirm the vital role of creativity in care, supporting wellbeing, inclusion and dignity, and leaving a meaningful legacy within each setting.



Observations by Patricia Blighe, Artist Participant

Patricia was engaged to work alongside the artists at their sessions to provide a creative therapy and wellbeing perspective and to feed back an evaluative contribution on the impact that the creative sessions had on participants.

I had the privilege to visit some talented artists who brought their creativity and passion to residents in care homes, doing home visits and taking their workshops also to hospices and hospitals. Their work and commitment to this project spread joy and positivity to the people they worked with. The experience for those participating was truly uplifting. Overall, I was impressed by the impact of the various artists' work and how engaging each artist was while interacting with the residents they met.

Key Highlights:

Personal Connections: The artists took the time to engage with residents and patients, by listening to their stories and tailoring their performances to meet individual needs. This personal touch created a sense of connection and community. All who were willing and able to participate were invited in to do so where there were appropriate space and facilities to do so.

Therapeutic Benefits: The art sessions had a beneficial impact on the mental and emotional well-being of the participants. I witnessed residents and patients laughing, smiling, engaging in banter and even singing along to the music. Others enjoyed the craic and became more animated and curious for the duration of the artists visits.

Creative Expression: The artists' talents were diverse, ranging from music and dance to visual arts and storytelling. Their creativity was inspiring, and it was wonderful to see the residents and patients responding to different forms of artistic expression, creating items by stitching, painting, collage or nature inspired art, while all the while telling their stories and conversing with the artist.

Staff Engagement. In some of the care homes staff were actively involved with the residents which helped a person to get more out of the art sessions. I thought this involvement helped to create a sense of teamwork and collaboration. This also ensured that the sessions were well-integrated into the existing care programmes.

Personal Connections:

Improved Mood: The art sessions had a noticeable impact on the mood and atmosphere of the Care homes, private homes and hospitals. Residents and patients seemed more relaxed, happy, and engaged.

Social Interaction: The sessions encouraged social interaction among residents, artists and patients, helping to break down barriers and build worthwhile connections.

Sense of Community: The art sessions created a sense of community and belonging, which is essential for the well-being of those in care homes, hospitals and homes.

Artist Reflection and Programme Outcomes:

Peer support and artist meetup sessions brought together artists working across residential care units, hospitals, hospices, and private homes, reflecting on their participation in the programme and its impact on older adults, families, staff, and the artists themselves. While artists entered the programme with varying levels of experience, all highlighted the programme's depth, complexity, and significance.

Preparation, Mentorship, and Professional Development:

Mentorship and peer learning were identified as critical components of the programme's success. Artists new to working with older adults benefited significantly from structured mentoring, shadowing opportunities, and the generous sharing of practical knowledge by more experienced practitioners. This support enabled artists to understand care environments, care setting protocols, and staff structures, while building confidence and professional capacity.

Artists with prior healthcare or community arts experience noted that the programme strengthened and extended their practice, providing opportunities to reflect, adapt, and develop new methodologies within complex care settings.



Creating Supportive and Accessible Environments:

Artists worked across a wide range of physical and care setting contexts, requiring flexibility and responsiveness. Considerable attention was given to creating calm, accessible, and dignified art-making spaces, including managing noise, room layouts, mobility needs, and sensory environments.

Where dedicated art spaces were available, they provided continuity, visibility, and a sense of value for participants. In more constrained settings, artists developed innovative, mobile approaches to ensure access and inclusion. These adaptive strategies were instrumental in engaging participants and gradually building staff understanding and support.



Participant Agency and Creative Engagement

A key outcome of the programme was the increased agency and autonomy experienced by participants. Artists highlighted the importance of offering choice, of materials, colours, tools, and processes, as a means of empowering participants and sustaining engagement. Over time, participants demonstrated increased confidence, focus, and ownership of their creative work.

The introduction of visual art reference materials, such as auction catalogues, proved particularly effective. These resources stimulated discussion, critical thinking, and curiosity, helping to demystify contemporary and historical art practices. Participants who had little prior exposure to art became actively engaged in conversations about value, meaning, and personal response, extending the impact beyond art-making alone.

Group Dynamics and Social Connection

While much of the work focused on individual engagement, artists observed significant social benefits emerging within group contexts. Informal conversations, shared looking, humour, and storytelling fostered connection between participants. Even seemingly simple or repetitive creative actions held deep personal meaning and supported communication, particularly for participants experiencing cognitive decline.

Artists identified opportunities for further development in group integration and peer exchange, recognising this as a valuable area for future programme growth.

Collaboration and Care Setting Relationships

Artist collaboration was described as a major strength of the programme. Working in pairs or across disciplines provided emotional support, reflective space, and creative innovation. Cross-disciplinary collaboration, particularly between visual arts and movement-based practices, expanded the scope and impact of the work. In contrast, inconsistent communication with care staff was identified as a challenge in some settings. Artists emphasised that strong relationships with at least one key staff member significantly enhanced programme delivery, sustainability, and participant outcomes.

Impact, Continuity, and Legacy

The programme had demonstrable positive impacts on participants' wellbeing, confidence, and quality of life. Artists reported meaningful feedback from families and care staff, including evidence that creative activities continued beyond the residency period. Ensuring continuity through staff capacity-building and access to materials was considered essential.

Artists also highlighted the programme's broader human impact. By positioning the artists to create rather than provide medical care, the work created space for dignity, expression, and meaning in contexts of ageing, illness, and end-of-life care.



Reflection

More often than not, artists work behind closed doors. The public encounters the finished exhibition, book or performance, but rarely the uncertainty of the process itself. Artists often describe their practice as stepping into the unknown, intuitive, non-linear, guided as much by instinct as intention.

The care settings in this project could not be more different: visible, time-bound, highly regulated environments shaped by structure and hierarchy. At first glance, creative practice might seem at odds with such spaces.

Yet the intention from the outset was simple, that participants might benefit from creative engagement at whatever level was possible. That they might experience play, expression and agency. That they could become active contributors rather than passive recipients of care.

This creative evaluation traces what unfolded. Artists spoke of the initial culture shock of entering care environments, meeting someone at their kitchen table, adapting spaces for wheelchair users, working within clinical routines. As sessions progressed, relationships developed, conversations deepened and engagement grew. Ambitious plans often softened; when participants found materials they loved, the artists learned to follow rather than lead.

In the end, what stayed with the artists were not the outputs alone, but the relationships formed, the breakthroughs, the shared moments, the human connections that emerged along the way.

The creative sessions extended beyond the participants themselves, positively shaping the wider care environment. Moments such as a Healthcare Assistant picking up a paintbrush for the first time illustrate how staff were drawn into the creative process, experiencing pride, joy, and engagement alongside participants. This shared participation strengthened team cohesion, fostered a sense of community, and modeled inclusive creativity for families and visitors. By creating an environment where both staff and residents could explore, express, and connect, the sessions enhanced the emotional and social atmosphere of the care setting, leaving a lasting impact on everyone involved. Overall, the sessions transformed spaces into environments of engagement, play, and human connection, allowing participants to be seen as people first, creative, expressive, and fully present.



The Artists' Experience

For the artists, this project offered both professional growth and personal transformation. Entering highly structured care settings required them to adapt their creative practices to unfamiliar environments, navigating physical constraints, clinical routines, and participants' diverse needs. Many artists described initial culture shock, but gradually discovered the value of flexibility, patience, and active listening.

Turning points often emerged when artists shifted from leading the sessions to following participants' interests. When individuals took ownership of their creative work, choosing colours, tools, or subjects, the artists observed heightened engagement and autonomy. These moments reinforced the importance of responsiveness over pre-planned instruction, deepening the artists' understanding of collaboration and co-creation.

Artists also reported profound emotional resonance in their work. Witnessing breakthroughs, shared laughter, and participants' pride in their creations strengthened the artists' connection to their own practice, revealing new dimensions of creativity that extend beyond traditional studio or performance contexts. Many reflected that these experiences enriched their artistic approach, encouraging them to embrace unpredictability, human connection, and relational depth in their ongoing work.

The programme is fundamentally relationship-based. Artists consistently described the trust developed with participants as central to meaningful engagement. Whether working in group settings or one-to-one in private homes, artists emphasised the privilege and responsibility of being invited into personal spaces and life stories.

Active listening emerged as a core element of the practice, contributing significantly to participants' emotional wellbeing. Artists noted that the work often provided a non-clinical space for expression, reflection, and connection, distinct from family or medical relationships. While endings were acknowledged as emotionally challenging, clear communication and professional boundaries supported ethical and responsible engagement.

Adapting the Two Worlds: Arts and Healthcare

The success of the project relied on mutual adaptation between artists and care settings. Artists adjusted their methods to meet the physical, cognitive, and emotional needs of participants, from reconfiguring furniture to ensure accessibility, to modifying materials, pace, and session structure. In turn, staff and care teams learned to accommodate creative work, making space for exploration, supporting participants, and engaging in the process themselves.

This collaboration required negotiation and flexibility. In larger group sessions, staff helped manage logistics, enabling artists to focus on facilitation and creative engagement. In home visits, artists navigated intimate personal spaces with sensitivity, balancing presence and respect for participants' routines. Across contexts, both worlds, art and healthcare, found a rhythm that allowed participants to thrive creatively without compromising care standards.

Innovative approaches, such as mobile art trolleys or dedicated creative spaces, exemplified this co-adaptation. The environments became not just sites for care, but sites for expression, learning, and connection. By meeting each other halfway, artists and healthcare teams created conditions where creativity could flourish, relationships could deepen, and participants could fully engage in the process.



Reflection: The Value of Two Worlds Together

What became clear through this project is that the artists did not need to become healthcare providers, and the healthcare professionals did not need to become artists. Each brought their own expertise to the space, and it was the combination of these worlds, art and care, offered side by side, that created the most meaningful experiences.

This distinction is important: the project was not art therapy, which has its own methodologies and objectives. Instead, artists facilitated moments as artists, responding to the creative impulses, choices, and interests of participants, while healthcare professionals ensured the environment was safe, supportive, and responsive to individual needs. Together, they created conditions where participants could explore, express, and connect.

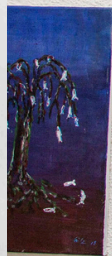
It is in this shared, complementary presence that the value lies. Small gestures, a song, a line of poetry, a brushstroke, became moments of connection and agency. Memories, humour, and curiosity were stirred. Dignity and selfhood were acknowledged. This interplay between creativity and care, between professional expertise and human attention, produced the quality of experience that was the heart of the project. The lessons of this work are subtle but profound: the artists and healthcare professionals each retain their unique roles, yet by working in concert, they open up possibilities that neither could achieve alone. It is in that shared space that participants, families, staff, and artists alike experience something rare, human, and deeply sustaining.

“In the Hospice, visiting family members were moved when they saw their loved ones handwriting (name or written contribution) stitched into cloth and this in turn allowed them to express themselves and contribute to the process. A daughter asked her mother (end of life patient) to contribute to the 'leave a mark, message or image' prompt. The mother left a profound addition to the textile piece. It also enabled her to talk to her daughter about her death. The daughter was very grateful to have this chance and to realise through this shared creative act that her mother was at peace.”



'It's been challenging, and a revelation to me. I never really thought I was any good at art. Its an amazing feeling to make something permanent, to catch it at it's best'

Hearth Participant, Co. Mayo



Conclusion

The programme established a strong foundation for high-quality, artist-led engagement with older adults in care and community settings. While its outcomes are not easily quantifiable, they are deeply qualitative, evidenced through participant engagement, sustained creative activity, and meaningful human connection. The programme demonstrates the vital role of professional artists in enhancing wellbeing, fostering autonomy, and enriching care environments through creative practice.

Why It Matters...

Care and Creativity in Context showed that creativity at the end of life is not an extra, it is essential. It brings joy, dignity, connection and a sense of self at a time when so much else is taken away.

“It’s part of being human,” an artist said. “Sharing fragility. Having a quality of life.”

One participant said simply, “I was free for a while.”

That freedom, even briefly, is what this project made possible. And it is something worth carrying forward.



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