

**CAPTURING A QUIRKE EXPERIENCE: USING
COLLABORATIVE VIDEO TO EXPLORE COMMUNITY
ART PROGRAM IMPACTS**

by

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Abstract

This investigation provides insights into the significance of community art in community development through a case study investigation of the Queer, Imaging, and Riting, Kollektive of Elders (Quirke). I use collaborative documentary video as both a method and a text to address two research aims. First, I explore Quirke members' experiences as part of the Arts, Health, and Seniors Project. Second, I examine significant outcomes of using collaborative documentary video as a research and communication tool. I argue that individual and collective empowerment through building skills, interconnections, and confidence is of central significance to Quirke members' experiences. I also argue that documentary video informed by a collaborative, structured process may produce mutually beneficial outcomes for researchers, participants, and program administrators. While this study is limited by its context specific nature, it nonetheless contributes to our collective understanding of community art programs and collaborative video.

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1. Introduction

Prologue

My personal and academic interest in the relationship between individual well-being, community development, and community art led me to meeting with Jil P. Weaving (sic), the Coordinator of Arts and Culture at the Vancouver Parks Board (VPB). After discussing the intersections between my interests and VPB initiatives Jil said, “you really have to meet Quirke.” I soon learned that Quirke was a group of queer¹ seniors that meet as part of the Arts, Health and Seniors Project (AHS).

The following week, I attended an AHS progress report meeting where I was introduced to Claire Robson, one of two host artists for Quirke, and three Quirke members. I was impressed by the group’s energy and intellect. I asked whether they would be interested in making a collaborative documentary about their experiences in community arts programming. Claire indicated that the group had a longstanding desire to create a promotional video. Based on our shared interests, we decided I should make a formal proposal to the entire Quirke group.

I offered to produce a 10-15 minute collaborative documentary video as a case study for my master’s thesis, and a 2-5 minute promotional video designed for their use. The group would have co-ownership and non-profit distribution rights of both videos. After a few meetings and correspondence to establish our collaborative working agreement, Quirke agreed to participate. As a complement to the two videos that we created, this document elaborates the process and outlines the significance of my research.

¹ ‘Queer’ is a socially accepted blanket term that refers to lesbian, gay, bisexual, and transgendered individuals.

Thesis Context and Organization

There is considerable debate as to the role of community art in participants' social, spiritual, and cognitive health (Cherbo et. al 2008, 93). Despite the quantity of publications that suggest tangible benefits of community art initiatives, some critics consider such initiatives as development strategies with limited impact (Lowe 2001, 469). This suggests that both ideology and data availability factor into the divergent perspectives on the role of community art in community development. Therefore, I elected to undertake further research in this area to better understand the impact of community arts programming.

The **Queer, Imaging, and Riting, Kollektive of Elders (Quirke)** provided my case study and I used collaborative documentary video as both a method and a text to address two research aims. First, I explored Quirke members' experiences as part of the Arts, Health, and Seniors Project (AHS). Second, I examined significant outcomes of using collaborative documentary video as a research and communication tool. In-line with these aims, a 13-minute documentary video is the primary component of this thesis. This essay complements the video with a critical reflection of the research process.

To briefly outline the essay, I will begin by situating my investigation within a social-ecological health model. I use this lens to review literature on community art and health. I will also explain the significance of collaborative documentary video as it relates to my investigation. I will then describe my research methodology. Finally, I will discuss significant project outcomes. I will argue that individual and collective empowerment² through building skills, interconnections, and confidence is of central significance to Quirke members' experiences. I'll also argue that documentary video informed by a collaborative, structured process may produce mutually beneficial outcomes for researchers, participants, and program administrators.

² Gurstein (2010) explains empowerment as defined by the World Bank: "empowerment is 'the process of increasing the assets and capabilities of individuals or groups to make purposive choices and to transform those choices into desired actions and outcomes.'"

2. Key Findings From Literature Review

Community Art: Useful Definitions

The words ‘community’ and ‘art’ have diverse uses and interpretations (Cherbo et. al 2008, 40). Although there are possible variations in meaning, defining ‘community,’ ‘art,’ and ‘community art’ provides a working frame for this investigation. Understanding that communities exist on a global, regional, familial, and/or individual scale is useful when considering the many nuances of ‘community.’ However, an overarching characteristic of communities is the sharing of culture, history, and support networks that aim to enrich the quality of people’s lives (Kay 2000, 421). In addition, Racher stresses the importance of interpersonal relationships: “participation is an inherent quality of a community. Without participation there is no community, only the potential for it” (2008, 183).

‘Art’ may be broadly defined as “active expressions of creativity using a practical skill to produce artifacts that can be appreciated” (Kay 2000, 421). One description of community art is: “Any form or work of art that emerges from a community and consciously seeks to increase the social, economic and political power of that community” (Goldbard 2006, 57). In community art, what counts as ‘art’ is expansive and inclusive, “from esoteric crafts to comic books – whatever resonates with community members’ desires to achieve full expression” (*ibid*).

Although diverse in practice, community art has common underlying principles. The foundational ideas of John Dewey (1934) suggest: “art, if closely tied to people’s everyday lives, is a form of communication through which people learn about each other’s similarities and differences, break through some of the barriers to understanding and awareness, and develop some of the commonalities that define community” (Somdahl-Sands 2008, 332). Although Dewey does not refer explicitly to ‘community art,’ his ideas are noteworthy in calling attention to art’s potential as a catalyst for self-learning, relationship building, and civic engagement (*ibid*). Cherbo and colleagues build on Dewey’s ideas: “through making art – amateur and professional formal and informal – communities preserve, invent, and assert their identities; transmit heritage; and comment on their existence” (2008, 92). These authors suggest that community art is shaped by both ideological principles and craft based practice.

Another fundamental characteristic of community art is the genuine commitment to “participants’ joint authorship of the experience and equality in choosing [the art project’s] direction, in controlling the uses to which it will be put, and in articulating its meaning” (Goldbard 2006, 83). Lowe suggests it is important for participants to share decision-making control in all stages of the art project. Distinct from ‘high-art,’ everyone is viewed with the ability to make valuable artistic contributions. The environment of community art often involves individuals working side-by-side and making collective decisions (Lowe 2001). This approach exemplifies a common view held by researchers in support of community art – that the process is as important as the end product (Goldbard 2006, 83). Many researchers agree that a high degree of participation causes community members to claim ownership of the project, and increases the likelihood of meaningful outcomes (Kay 2000, 419).

Social Ecological Health and Community Art: A Brief History

Since the 1990s, approaches to health research and practice have shifted from “the overarching authority of biomedicine” towards a more social ecological health model (Payne et. al 1998; Honari 1999, 1; Smith 2006, 3). Carson, quoting Stokols, explains the reasoning behind this shift:

“Personal and collective well-being are influenced by multiple facets of the physical environments (e.g., geography, architecture, and technology) and the social environments (e.g. culture, economics, and politics) that interact in a dynamic way with personal (biogenetic, psychological behavioural) attributes” (Stokols 1992, in Carson et. al 2007, 367).

This suggests the social ecological health model positions ‘health’ as independent from a state of illness, and puts greater emphasis on holistic well-being (Putland 2008, 267).

Extending from the social ecological model, community health may be defined as:

“The ability of a community to generate and effectively use assets and resources to support the well-being and quality of life of the community as a whole in the face of challenges and barriers within the context of their environment. Community health involves reciprocal relationships between people and their environment with the goal of sustainability (Ryan-Nicholls & Racher, 2004 in Racher 2008, 183).”

In the broad field of health practice, the adoption of a social ecological model led the way for a greater acceptance and application of community art for health promotion (also referred to as the development of healthy communities) and treatment (Smith 2006, 3). Community arts in a health context complement the view that “personal and social identity, human worth, communication, participation in the making of political decisions, celebration and responsibility” are all-important determinants of health (White 2006, 129).

Summary of Themes from Peer Reviewed Articles on Community Art and Health

Investigations into community art’s contributions to the social ecological health of communities are wide-ranging in form, intent and application. Researchers examine community art projects in the form of: murals, theatre, choirs, puppetry, festivals, and photography exhibitions (Burnham 2000; Goldbard 2006; Somdahl-Sands 2008, Howells 2009; Newman 2007; Purcell, 2009).³ The majority of the reports focus on the positive outcomes of participants’ experiences. Some publications do not make explicit references to health promotion or treatment, but still fit within the social ecological health model (Kay 2000). Other publications have a direct research focus on health and illness (Smith 2006). Researchers’ case studies differ in temporal scale, and were conducted in a range of community settings. Those articles that examined one-on-one art therapy in a clinical setting were beyond the scope of investigation and therefore excluded from review.

Overall, dominant themes in the literature suggest that community art programs may contribute to (i) individual and group empowerment, (ii) an increase in social cohesion (iii) a means for social justice and (iv) indirect benefits such as employable skills and/or more widespread community connectedness (Lowe 2001; Carey and Sutton 2004; Matarasso 2007; Meade and Shaw 2007). In more direct relation to health promotion and prevention, community art is reviewed as a component of treatment strategies for biomedical and psychosocial illnesses. Examples from the literature include case studies on community art in relation to depression, drug addiction, bipolar disorder, and schizophrenia (Howells

³ These publications are a few notable examples from a more extensive body of literature on art and community development.

2009; Lloyd et. al 2007). Studies suggest that community art makes a positive contribution to the livelihoods of individuals with mental health issues.

The Politics and Practicality of Evaluation

Despite both anecdotal and published claims for the benefits of community art programs, this medium struggles to establish legitimacy in the eyes of health and government based institutions. This section addresses a key factor influencing this discrepancy – the credibility of evidence on the impacts of community art programs. In the following sections, I highlight key aspects of this discussion by addressing the difficulties of evaluating community art programs. I then present evaluation strategies that address these challenges.

Approaches to Evaluation: How ‘Credible’ is the Evidence?

A central area of contention in relation to health based community art program assessment relates to political context. Putland explains, “as governments strive to improve health while containing expenditure, the obsession with ‘evidence-based everything’ has taken hold in the health sciences” (Putland 2008, 266). She states that compared to growing evidence since the 1990s for art in clinical and health care settings, support for health driven arts programming in community settings is a relatively new phenomena in which “convincing evidence for the effectiveness of these approaches is said to remain elusive” (Hamilton, Hinks, & Petticrew, 2003 in Putland 2008, 266). As an example, in response to the evaluation of Healing Arts, a health program delivered by the Isle of Wight NHS Health Care Trust, funders required “further detailed cost–benefit, cash–efficiency, and quantified health–gain analysis on the role of arts and creativity as part of healthcare for it to become integrated into NHS healthcare delivery” (Eades 2008, 62).

Another key issue is the type of information available. There are numerous small case studies of positive benefits as well as individual reports in unpublished ‘grey literature’ -- the websites of government agencies, not-for-profit and publicly funded organizations. However, such reports do not meet academic health sciences criteria for ‘credibility’ (Smith 2006, 130). The lack of credibility hinges on the limited verifiability of the data. Rutland

explains that many reports focus on ‘unique summary moments’ from individual projects, which make results non-transferable to other scenarios, or difficult to generalize to a larger scale (Putland 2006, 266). Even in peer-reviewed publications, small sample sizes, largely qualitative data, and a lack of longitudinal investigations, all contribute to the criticism that community art program evaluations do not possess scientific rigor (Lloyd 2007; Carsen 2007). Standards of investigation often privilege applied interventions and quantitative data collected in randomized controlled trials (Sibbald 1998), or synthesized into meta-analyses or systematic reviews.

Similarly, after a comprehensive review of community art program evaluations Putland states, “many participants in community arts activities report ‘micro’ level effects such as increased social engagement, levels of self-esteem and development of skills; attributing these to specific interventions is difficult enough, but linking them to changes at a community level compounds the uncertainty” (Matarasso, 1997; White, 2006 in 2006, 269). This level of evidence may not convince a health program deliverer or funder to provide program support.

Gene Cohen’s investigation on the impact of professionally conducted cultural programs on the physical, mental and social health of older adults contributes important knowledge relating community arts and health (2006). It is the first study of its kind published in a peer-reviewed journal and a rare example of an applied science model of evaluation for arts based community programming (Phinney 2010, 1). Cohen’s study has been well received by health professionals and perhaps garnered more credibility for arts in health. However, this study may still be criticized on the basis that participants were not randomly assigned to the control or intervention groups (Cohen 2006, 733). Lack of randomization raises the question of whether or not those participants in the chorale “were in a different health and well-being trajectory than the comparison group even prior to the beginning of the study” (Cohen 2006, 733).

While some may view Cohen’s quasi-experimental approach as a positive advancement in the arena of community arts in health, Newman challenges the move towards more scientifically rigorous evaluations of community art.

He argues that empirically-based research interventions are not well suited to community art project evaluations (Newman et al 2003, 142):

“because of the typically large number of stakeholders and the multiplicity of possible outcomes, experimental models of research which compare individuals or groups who have received an intervention with those who have not – are often impractical, partly because of the level of complexity and partly because of the extreme dissonance that often exists between demands for numerical accuracy and artistic temperaments” (Newman et al 2003, 142).

His statement illustrates how traditional approaches to health science research may be not the most effective method of evaluation.

The Epistemology of Evaluation

A meta-analysis of these discussions calls attention to the epistemological roots of the debate. Sandercock contends that one must question *who* or *what* decides what counts as knowledge (2003, 60) and the iconic empiricist Albert Einstein made a similar comment – “not everything that can be measured counts and not everything that counts can be measured.” Given that community art may have benefits that cannot be readily measured, one must acknowledge the power dynamics that have supported the domination of analytic-rational scientific knowledge since Descartes (Flyvberg 2005, 142). Putland argues that without an expansion of ‘what counts’ as evidence for community based health promotion “there is no guarantee that an increase in the volume of data will either provide the categorical proof that is sought, or necessarily convince non- arts sectors of the need to support arts approaches” (Putland 2008, 268). She argues that until there is a shift in epistemological orientation, evaluation research will have limited influence in health policies and practices (*ibid*).

Moving from philosophical to practical discussions, some authors offer insight into how to effectively advance discussions of community arts in health. Adams and colleagues state, “ the diversity of the programmes that are being evaluated means that there is no one best evaluation approach, but there are calls to ensure that the evaluation design fits with community realities” (Becker, 2006 in Adams et. al 2006, 142). This suggests that the effectiveness of the evaluation technique is not dependent on either a scientific or non-

scientific model, but rather on its context specific appropriateness.

Avenues for Advancement

Taken together, academic and public discourses on the role of community art in health indicate an early stage of establishing common ground. Some researchers therefore call for an even more holistic approach “to soften boundaries, to integrate disciplines, to comprehend complex issues, and to develop strategies for non-linear problems” (Honari 1999, 1). In this vein, one may contend that there are multiple solutions for progressing our collective understanding of the impacts of community art in community development. Here I highlight three possible (and not mutually exclusive) avenues for advancement.

Many health-based researchers suggest the need for establishing greater transdisciplinary dialogue to strengthen a verifiable evidence base. This includes developing a common methodology to accumulate data that “allows comparative studies and some basic statistical analysis to be attempted” (Smith 2006,132). This may clarify “the processes of arts in health projects in order to posit the causal links that can result in health benefit to individuals and their communities” (White 2006,129). These data may then be used to inform future directions of arts in health, and to lobby policy makers and funders for more support for community arts programming.

In contrast, in line with those researchers who view quantitative measurements as “insufficient to measure the individual and collective impact of an artistic experience” (Newman et. al 2003, 219), there is a crucial need for the “reappraisal of forms of knowledge implied in conceiving and implementing evidence” (Putland 2008, 274). Putland states, “ if science is a creative doing of knowledge, then the way that we can do knowledge about being human is not restricted to instrumentation through machines, rather, knowledge is something that can be sung, or played, or danced or acted” (Aldridge 1995, 51 in Putland 2008, 274). Smith states that ‘arts need help and money, but most of all the arts need respect. And it's all a question of political will’ (Smith 2006, 1433). This avenue of advancement calls for efforts that challenge the hegemony of positivist methods of proof and certainty to secure funding for community arts programming (Putland 2006, 269). Carey and Sutton emphasize the importance of generating continuous support when they state “the real value of community development is only served if projects are sustainable

[over time]” (Carey and Sutton 2004).

A third strategy for furthering our collective understanding of the relationship between community art and health emphasizes using contextually appropriate, and multi-faceted techniques to adequately evaluate community art programs. Carson states, “multilevel interventions that tap intrapersonal, interpersonal, institutional, community, society, and policy domains will have greater impact than the more traditional approach of working on behavioral changes in isolation from life context” (2007, 367). This strategy may incorporate a multi-method approach that triangulates data in attempt to capture the many dimensions of community art program impacts. It also emphasizes a return to the fundamental principles of community art, which is that the programs should be evaluated based on how well they meet community identified objectives and indicators (Newman et al 2003, 319). This approach is useful to consider since it does not suggest the superiority of one research method, but rather stresses the importance of using, and adapting techniques that are appropriate for the research context. For further discussion of one research tool relevant to this investigation, I now turn my attention to collaborative video.

Collaboration and Video in Social Science Research

Multimedia based research techniques are relatively new in the social sciences. Sandercock and Atilli (2010, 26) suggest a central strength of incorporating multimedia into research practices is its ability to capture polyphonic information that may be processed through multiple human senses. As a sub-category of multimedia, effective videos convey the intricate dimensions of thoughts, actions and emotions that comprise individual and community experience (Sarkissan 2010). Video is therefore a useful tool for communicating the impacts of community art programs as multiple researchers suggest that community art program participants’ experiences are comprised of multiple layers of actions and emotions.

As my research involved not only video but collaborative video, I discuss the significance of collaboration. A helpful definition of collaboration is “a recursive process where two or more people or organizations work together toward an intersection of common goals — for example, an intellectual endeavor that is creative in nature—by sharing knowledge, learning and building consensus” (Reference.com, 2008). This

definition outlines the key principles of collaboration but also allows for flexibility in the structural aspects of any particular collaborative relationship. These aspects may include:

1. Leadership/management structure
2. Degree/rate of contact between collaborators
3. Method of information sharing

In defining ‘collaboration,’ it is important to highlight that while the breadth, depth, and nature of the relationship may take different forms, fundamental to any collaboration is that there is an exchange and integration of ideas, skills and/or materials that contribute to a common aim.

The movement towards more collaborative forms of research practice gained momentum in the 1970s. In the field of planning, Sandercock and Attili characterize this movement as termites that “ate away at the Enlightenment foundations of modernist planning, anchored as it was in an epistemology that privileged scientific and technical ways of knowing” (2010, 25). The theoretical shift beyond the stronghold of Enlightenment thinking is referred to as the ‘post-positivist movement.’ Paulo Freire’s *Pedagogy of the Oppressed*, and Gayatri Chakravorty Spivak’s *Can the Subaltern Speak* are two prominent examples of the many scholarly works that comprise this movement. These and other post-colonial and feminist critiques advocated for a disruption of the hegemonic norms of authorial voice in Western culture (Sandercock 2010, 25). They argued for greater representation from historically marginalized actors, and an increase in the value placed on a diversity of narratives. Cottrell and Parpart explain an outcome of this movement:

“Researchers have become far more reluctant to speak for the ‘other’...it is now recognized that [researchers/experts] cannot assume that [they] know the ‘other.’ Consequently academic researchers are increasingly expected to collaborate with community researchers and activists in order to adequately understand and reflect a complex, multi-voiced world” (2006, 16).

The authors suggest that the growth in acceptance of multiple perspectives laid the foundation for an increase in collaborative research relationships.

Stemming from these understandings, developing video in collaboration with community partners involves an ongoing exchange of information that influences video development. By working in collaboration with community partners, video producers seek

to create a product that accurately reflects community experience. My investigation design incorporated these principles as it aimed to contribute to the existing knowledge bases of both collaborative video based research and community art and health. The following sections detail the context, process, and preliminary project outcomes of my case study on Quirke and the AHS.

3. Arts, Health, and Seniors Project Background

As a significant portion of Canada's population is aging, seniors' health promotion strategies are of increasing importance. By 2026, one in five Canadians will have reached age 65 (Health Canada, 2002). A substantial rise in seniors' healthcare expenditures is predicted in conjunction with the growth of this population cohort (Ackermann 2008, 1459). Considering these factors, both health and economic interests are motivators for the development of programs aimed at increasing seniors' quality of life. The AHS is one example of such a program.

AHS is a community-based program that promotes seniors' health through the arts. The program mandate is to "[explore] how involvement in the arts can improve the health and wellbeing of vulnerable seniors" (Vancouver Parks Board, 2010). 51 seniors (aged 55-91) were engaged in AHS from 2007-2009 (Phinney 2010, 3). Administered by the Vancouver Parks Board (VPB), the program operates in 4 different community centre locations.⁴ Each location has a group of 9-17 individuals, and 1-2 host artists. The host artists develop a curriculum based on their training and the interests of their particular group. Activities may involve written, print, performance and multimedia art. Each year the host artists obtain feedback from the group and modify activities based on skill development or participant enjoyment.

The case study for this thesis focuses on the self-titled 'Quirke.' This AHS group operates out of the Britannia Community Centre (BCC). Quirke has 17 members with a mean age of 65 years. There are 14 women and 3 men, most with university degrees (Phinney 2010, 3). Claire Robson and Nancy Strider are the two host artists responsible for co-teaching and facilitating activities. The following section explains my research approach while working with Quirke.

⁴ Three community centres (Renfrew, Strathcona, and Britannia) are in Vancouver. The fourth, (Silver Harbor) is in North Vancouver. In 2010 the program was expanded to include an additional group that operates out of the Roundhouse Community Centre.

4. Methodology

Methods

This thesis draws on multiple social science research methods. First, to gain insight from current academic perspectives, I conducted two literature reviews using academic and Internet databases.⁵ The first literature review focused on the relationship between community art and health, and second on the significance of collaborative video in the social sciences. The critical areas for consideration identified during this research are highlighted in the preceding section titled *Key Findings From Literature Review*.

Methods of primary data collection I used include: (i) one facilitated focus group session with Quirke members (ii) 4 semi-structured on-camera interviews with Quirke members (iii) Post-rough cut and final cut screening facilitated discussions (iv) 14 months of ongoing casual verbal discussion and email correspondence with Quirk-e members and; (v) 1 semi-structured interview with VPB Arts and Culture Coordinator.

To supplement this information, I took observational and reflective field notes. This included recording visible and verbal statements and emotions of the study participants. I also logged my personal feelings and developing thoughts in relation to my research questions and the project process.⁶

Assumptions

This research study assumes that participants provided accurate accounts of their experiences. There is potential that the presence of outside researchers and taped video recording sessions may have affected the verbal histories and individual and group actions captured during the course of research.

⁵ Databases I used include: Academic Search Premier, Geobase, PubMed, and Web of Science.

⁶ The overall project process design was developed with guidance from the training I received as an intern at Ear to the Ground Planning.

Limitations

A primary weakness of this study is its limited generalizability. A central factor contributing to this limitation is that participants' experiences are context specific. Participant perspectives may differ depending on their past and more recent experiences. This includes their specific role in interpersonal and group dynamics.

In addition, as participants were selected through a non-randomized process, their experiences may not be representative of the entire group. My recruitment method of group and self-selection may increase research bias by over-emphasizing the significance of program impacts. This is based on the assumption that those individuals that chose to participate in the study were more enthusiastic about their program involvements than those individuals that did not participate.

It is also important to note that since I was the primary author of the video treatment and editor of video content, my interpretative frame (of material generated in both the focus group session and during the on-camera interviews) heavily influences the final videos. Also, as approximately 5 hours of video footage was omitted from the 13-minute video,⁷ one must consider that there are multiple ways to compile the material into a final product. The exclusion or inclusion of different footage may affect the audience's interpretation of the video content. Thus, despite implementing measures to ensure accurate representation of the research cohort, there is still possibility for variations in analysis.

Bearing in mind these limitations, the video should not be considered a comprehensive assessment of participants' experiences. This perspective is supported by the wide acceptance among researchers that data presentation in a visual medium involves a high degree of data construction (Parr 2007, 116). More specifically, these factors suggest that one must be cautious when relating my research findings to the experiences of other community based arts groups.

⁷ Due to time and resource constraints, I was unable to make an effective longer documentary video.

5. Critical Reflection of Research Process

This section details the pre to post production activities of making the collaborative documentary video. All events occurred during April 2009 to July 2010. The structure of the process plays an influential role in the final project outcomes.

Pre-Production Activities

A series of discussions established my collaborative working relationship with Quirke. As mentioned in the prologue, Claire and 3 Quirke members were introduced to me via jil, the Arts and Culture Coordinator at the VPB. Claire then asked Quirke if they were interested in working collaboratively on a documentary video as a case study for my master's thesis. Based on group interest, I was invited via email to deliver a formal written and verbal proposal to Quirke during one of their regular weekly meetings.

The invitational email from Claire revealed important insights about Quirke's initial sentiments towards the research project. She indicated that the group had numerous questions and also noted that some group members were hesitant about the project. She wrote,

“...If you are sensing some slight resistance in the group, you're partly right, but this is quite usual. They are a sparky bunch, and occasionally crusty, and as you know, when folks feel marginalized, they can become suspicious of anyone making requests, and particularly when they're connected with a privileged institution like UBC. These suspicions are what we are addressing right now...” (Email correspondence June 5, 09).

Based on these sentiments, our subsequent meeting was important for working through certain negative assumptions and building our relationship. Thus, in my verbal proposal I explained the project aims, video making process and ethical protocols. I also responded to both logistical (my skills as a film maker and possible lengths of the videos) and personal (my sexual identity and relationship with queer rights activism) questions.

Taking Claire's email into account, during the meeting I communicated that I viewed the issues underlying Quirke's resistance as ones of trust and integrity. Particularly, the trust placed in me to be both respectful and representational in telling their stories. In response to their questioning, although I did not label myself as either queer or straight, I

shared information about the ‘fluidity of my sexual identity,’ my personal and political perspectives on ‘queerness,’ and my overall intentions of engaging in this research project. From the standpoint of a traditional researcher-participant relationship, disclosing personal sexual information may be considered irrelevant. However, since Quirke convenes around sexual identity, understanding my views on sexuality discourse proved to be integral for establishing our relationship. Furthermore, the vulnerable and intimate nature of our discussion created a foundation of openness and honesty. Apart from the subject matter of sexualities, this discussion provided us with the opportunity to engage in meaningful dialogue.

Another noteworthy outcome from this first meeting was the group’s request to reduce the degree of collaboration I had outlined in the draft project process. Quirke wanted to minimize the allotted time for idea development and feedback meetings. The vocal majority stated that they did not want a substantial degree of ‘work’ added to their existing livelihoods. Distributing draft project objectives and timelines during this meeting therefore proved to be beneficial project development tools. Working from these draft documents, we amended and developed the project aims, deliverables, and collaboration structure in an efficient manner. From my perspective, clarifying the project aims and working relationship dynamics at the project outset was especially important if we were going to reduce the degree of direct collaboration throughout the course of the project. Restructuring the process was also a significant moment of personal learning. I realized that more collaboration does not necessarily mean a ‘better’ project. Rather, it was more important that I be responsive to the group’s interests while also keeping in mind the project aims.

At this stage we also clarified the various degrees of project participation. We agreed that some individuals would have more active involvement as focus group members or on-camera interviewees, while others would assume more passive roles by only participating when I filmed as a ‘fly on the wall’ during regular group work sessions, and/or used their artwork as b-roll footage. I also provided the option of no involvement.

After discussing all of the important project details, the group was given one week to deliberate and sign ethical consent. One week later, Claire indicated via email that all Quirke members agreed participate (to varying degrees) if I could commit to making a short promotional video with shared non-profit distribution rights. Quirke and I held a

subsequent meeting to further revise project details. At this meeting, we solidified the following project deliverables:

- A. 7-15 minute video documentary that explores the significance of Quirke member's experience as part of AHS
- B. 2-4 minute promotional video documentary
- C. Written component as required by my academic program

As follow-up from this meeting, I distributed a revised collaborative project work-plan and collaborative work-agreement (See Appendix I). Quirke provided final feedback and approval of these documents via email. The remaining part of this section elaborates on the work plan activities.⁸

After receiving general consent from Quirke, I worked with self-selected representatives on the documentary pre-production activities. The central aims of this stage were the identification of: (i) key issues and themes that comprised participants' experiences of AHS and (ii) the tone and intent of the promotional video. I took multiple steps to achieve these aims. I first facilitated a semi-structured focus group session with 8 Quirke members. These questions explored the significance of Quirke on an individual and community level. In more direct relation to the development of the promotional video, I also asked the following questions:

1. What key issues about Quirke are important to communicate?
2. What is the single most important thing we want the video to say?
3. To whom is this information important to communicate (i.e. program funders, peers, family, young audiences)?
4. What is the desired effect of the video on the audience(s)?
5. What type of information supports this message?

⁸ As the initial work plan was intended as a guide, there are slight variations between the written sequence of events and the events that actually occurred.

I captured information from the focus-group session in multiple ways. I audio recorded the discussion and also collected participants' self-written comments on post-it notes. Before moving forward from each response, I verbally summarized the conversation and asked if what I said was accurate and complete. This approach ensured that a common understanding was generated from the discussion and no important information was overlooked. As a third method to record information, I took written notes.

After the focus group session, I transcribed the audio recording and the written notes. I then synthesized this information and classified it into key themes. These issues surfaced as prominent discussion themes:

1. Although Queer is their 'umbrella' there is significant diversity within the group.
2. Queer seniors are often 'invisible' to the general public.
3. Participation in Quirke has contributed to participant feelings of increased well being and self-confidence.

The synthesized notes were then distributed via email to focus group participants for feedback. Participants responded via email that these findings accurately represented the thoughts and ideas expressed during the focus group session.

As a next step, I developed the focus group data into a video treatment.⁹ Since Quirke and I had similar perspectives of the desired content and intended audiences of the videos¹⁰ I found it unnecessary to make two separate treatments for the short and the long videos. Instead I structured the material so that the promotional video could be a shortened version of the longer video. I planned to achieve this by cutting out the individual interviewees' stories in the body of the longer video. I explained this in the email I sent to Quirke along with a copy of the treatment.

I then facilitated a discussion with 10 self-selected Quirke members to receive their feedback of the treatment. Their comments included making small changes to the structure,

⁹ A treatment is explained as a "written condensation of a proposed film or TV production. It covers the basic ideas and issues of the production as well as the main characters, locations, and story angles." (Reference. Com, 2010)

¹⁰ We both wanted to make it relevant for program administrators and funders, but also accessible and engaging to the general public.

and working out visual details such as the ‘supplementary b-roll footage’ and interview locations.

Details discussed during this feedback session were significant in both setting the tone for the documentary and negotiating our collaborative working relationship. For example, we engaged in lengthy discussion and compromise to identify the interview locations. I asked Quirke if they wanted to have interviews take place at the Britannia Community Centre (BCC), or in the interviewees’ homes. I explained that I would prefer conducting the interviews in the participants’ homes. I thought this was a more intimate environment, and on a technical level, easier to prevent external sound and activity from disrupting the filming. However, the large majority of Quirke members said that they would prefer that the interviews take place at BCC. They wanted to highlight the environment where they meet and work collectively, rather than the more individualized environments of their home. I considered their argument and agreed with their rationale. We discussed the logistics and aesthetic implications of this decision. We then established consensus to shoot the interviews in four different locations at BCC.

Choosing the interview locations is a good example of how collaborative decision-making influenced the video content. I changed my initial perspective based on input from Quirke. This demonstrated my openness to developing the documentary in concert with Quirke.

Another expression of the shared decision-making was choosing the interviewees. We agreed that Quirke members should decide who the 4 interviewees should be; this aligned with my belief that Quirke members had intimate knowledge of each other’s capabilities to represent the group. Also, since the interviewees have a critical role as representatives, I felt that my choosing interviewees would give me too much power in controlling the content of the final video products. Through group discussion (and with my planned absence) the host artists, and Chris Morrissey, a representative from the AHS partner organization Q-munity, were selected to identify the four interviewees. Quirke members nominated themselves and/or other members. They narrowed down the nominees based on:

1. Diversity of representation
2. Ability to articulate ideas on camera

Interviewee selection proved to be one of the most politically charged aspects of pre-production. Some members expressed concern that although predominantly female, the group had historically been over represented by their male members. Notably, the work and image of Douglas Bacon had been highlighted during past AHS promotional initiatives and in popular media. Although Claire, Nancy, and Chris M. agreed that he was the most articulate male member, Douglas was hesitant to participate based on past experience. However, after private deliberation and conversation with Douglas they elected him as an interviewee. In contrast, since Gayle Roberts was the only transgendered member, the selection committee easily agreed that she should be interviewed. They viewed her participation as important to raise visibility of transgendered issues.

Due to the large percentage of female Quirke members, there were the most nominations for this gender category of interviewee. Chris M, Claire, and Nancy narrowed the nominee list down to two individuals and asked me to make the final decision. I chose Chris Spencer based on how I heard her articulate ideas during the focus group session. Claire Robson was selected as the fourth interviewee since she was the founder of the group and viewed as an articulate spokesperson. Many people agreed with the selected individuals, while some did not. Multiple Quirke members expressed that many different individuals could have made good ‘spokespeople.’

The issues encountered during the interviewee selection process reveal a challenge in attempting to capture the many dimensions of this community based art group in a short video. Quirke’s interviewee selection criteria indicated that they wanted to show the breadth of the group’s diversity rather than represent it proportionally. I supported this decision, as it was consistent with ideas generated in the focus group. However, we all viewed it as important to include work and/or images of a large expanse of group members in b-roll footage to compensate for having only 4 interviewees.

After the interviewees were announced, I began final pre-production activities. I coordinated the interviewee schedule and generated a shot list. I also used the focus group session notes and treatment to guide my interview questions. Finally, I felt it would be challenging for me to control both the technical aspects of video production and facilitate an interview simultaneously. Thus, I hired a video assistant, Jessica Hallenbeck from Ear to the Ground Planning who had experience with community planning related video projects.

Production Activities

The majority of filming took place over a two-week period. Although Jessica filmed all interviews, both Jessica and I shot video and still camera images of a regular Quirke group session. In addition, I shot footage of a Quirke story-reading public event and took supplementary still photographs of the interviewees in community-based locations.

Additional b-roll footage was provided by Nancy who lent me Quirke's digital archive. This archive included scanned copies of Quirke's artwork and photographs from past group events. I reviewed the footage and uploaded images that emphasized how diversity, cohesion, skill building, and joy were all important elements of Quirke.

During the assembly stage, I compiled all interview and supplementary b-roll footage into Final Cut Pro. Using the treatment as a guide, I organized the interview footage into coherent themes. As I was organizing the dense footage into a 15-20 minute rough-cut, it was essential that I also constructed a storyline for the audience to follow. This task was complicated by the need to balance screen time of the interviewees.

After the rather laborious process of reviewing and editing interviewee footage into rough themes and a storyline, I began to layer the video content with b-roll footage in select areas. My inclusion of b-roll footage was based on (i) strengthening the message content expressed by the interviewees (ii) including numerous Quirke members and (iii) strengthening visual interest. I further reviewed and compiled material until I considered the video appropriate for a rough cut screening.

Post-Production Activities

Rough Cut

12 Quirke members and both host artists attended the rough cut video screening. I wanted to assess if the documentary accurately portrayed key aspects of Quirke members' experiences. I explained that the session was to discuss suggestions, thoughts, and feelings generated from viewing the video. I reaffirmed that any Quirke member could dictate the removal of footage she or he was not comfortable sharing with the broader public.

Although I had planned to facilitate a longer discussion, Quirke's overwhelmingly positive response shifted my plan. When the video finished, there was resounding applause, and many people got up to leave right after clapping during the video's credits. Despite asking the remaining 5 individuals questions to generate more in-depth feedback, the group primarily responded with short remarks like, "good" or "great." Claire even commented that she got teary eyed with joy at seeing the group on screen. However, one participant stated "too much Douglas" in response to the amount of screen time Douglas had in relation to the other participants. Reflecting on how some other members noted his 'over-representation' in the past, I took particular note of this comment.

Overall, the rough-cut feedback session demonstrated the subjective nature of audience perception. While the overall feedback was positive, individual perspectives varied on specific details of video aesthetic. I discussed these specific video elements with the group and invited participants to send comments via email.

Final Cut

After a four-month break from viewing the footage, I incorporated the suggestions from both Quirke and my academic review committee into a final version of the video. The most substantial changes during this phase were:

1. Incorporating more of "the struggle" of the characters into the story
2. Adding more information about the wider political context of Queer seniors
3. Increasing the visual interest with additional supplementary b-roll¹¹
4. Reducing footage of Douglas and adding footage of Chris S.

Upon completion of both the long and short versions of the videos, I held a final cut screening with Quirke. This time the feedback was even more positive and the group indicated they were happy with the changes. They also greatly enjoyed the promotional video. Notably, Claire stated, "you captured the essence of the group." I gave opportunity for the group to send any criticism to me via email, or via personal discussion with Claire but I did not receive any. This validated my revisions.

¹¹ 1-3 were the most substantial suggestions from my academic review committee

7. A Synopsis of Quirke: A Learning Collective

As this document supplements viewing of the 13-minute video, I provide a brief synopsis. I highlight the key individual and community level impacts of Quirke members' involvement in AHS as captured in the video. The video content themes were brought forward from the focus group session and individual interviews.

It is important to acknowledge that although a structured production process guided me, elements of artistry contribute to documentary video making. I aimed to integrate content with visual interest while also creating a captivating story arc. Further, to make a cohesive documentary it was necessary to provide the audience with context details. This included background and logistical details about Quirke. As such, the video includes both functional and historical details about the group's 4-year existence.

Another important context element included in the video was the broader social significance of Quirke's work in relation to both queer and seniors' rights. This was captured through footage that highlights how Quirke members were raised in an era where it was not acceptable to be open about one's 'queerness.' This notion was further reinforced on a personal level through the interviewees' stories of private and public realizations about their sexuality.

In more direct relation to Quirke members' experiences, interviewees shared stories that identified the following personal and collective impacts of group member involvement:

1. Feelings of personal achievement through technical and artistic skill building
2. Recognition of the importance of building community through accepting diversity *within* the group
3. Increased confidence formed within the group, which then transferred into greater confidence when performing activities or learning new skills outside the group
4. Strengthening familial relationships through both self acceptance and public expression
5. Forming relationships with other groups such as UBC students
6. Being spokespeople for their generation about queer-seniors rights
7. Understanding the broader value of creative opportunities for seniors to encourage cognitive activity and decrease isolation

In addition to these ideas that are prominent in the video, the overall video tone and b-roll footage also communicates important information about the group. First, how trust and respect are fundamental group characteristics. Second, how humor and love are elements infused into their work, which adds to personal motivation and group cohesion. Taken together, the findings captured in the video indicate that AHS promotes the social-ecological health of Quirke members.

8. Conclusions

Critically reflecting on the video content and production process of *Quirke: A Learning Collective* reveals insights into both the nature of collaborative work and using video to demonstrate community art program impacts. As a final consideration, I illustrate how this investigation effects participants, program administrators, and myself. I also suggest avenues for future research. Although information is limited by the early stages of post-video completion, evidence suggests multiple beneficial preliminary project outcomes.

Preliminary Project Outcomes

The first significant project outcome is the positive response I received from Quirke in relation to their project involvement. Quirke demonstrated their appreciation in numerous ways. First, a reference letter I received from Quirke expresses their positive sentiments towards both our collaborative work process and final video products. An excerpt from the letter co-authored by Quirke members states, “[Callista] is a collaborative worker and was able to calmly adapt to the changing needs and desires of the group. She is motivated, mature, professional, cooperative and able to bring out the best in everyone.” The quotation is significant as it demonstrates that I was able to respond to and work with the dynamic interests of the group. Further, given that the principles of social inclusion and community participation guided my research, I greatly value this response from Quirke.

In more direct relation to video content, the letter states,

“The promotional DVD and the longer documentary both show evidence of a very skillful filmmaker and community worker. The final products are upbeat, impeccably filmed, cleverly edited, followed a clear storyline which was rich with humor and pathos, and which ultimately emerged as a cohesive, entertaining and informative reflection of our 4 year old group...’

This suggests that I was effective in representing the group in an accurate and effective manner.

This participant feedback contrasts with some of the resistance I experienced at the project outset. This result illustrates the importance of working with research participants to clarify project intentions and articulate and agree upon principles for working together. This may be especially important when working with marginalized groups that may have negative perspectives of institutions including UBC. In the case with Quirke, building our relationship involved establishing open and ongoing dialogue to create space to express differences in opinion, generate common understandings, and create a project process that would produce mutually beneficial outcomes.

From my perspective, both Quirke and I benefitted by creating an intimate and trusting relationship. In addition to strengthening my skills as a researcher and facilitator, Quirke's wholehearted participation allowed me to capture the intricate and deeply emotional aspects of their experiences as community art program participants.

Although only speculative, Quirke may have benefited from our relationship since the videos provide effective funding, promotional and educational tools. Claire stated that the group plans to do outreach in high schools and that the videos may serve as useful discussion tools. Also, the group is using the video as part of their funding application to The Canada Council for the Arts.¹² Further research into the benefits (or harm) of individual participant participation is outside the scope of my research but nonetheless important to consider for future investigations.

A second significant outcome of the research project, also related to Quirke's positive view of their project involvement, was Quirke's decision to screen the long version of their documentary at the 2010 Quirke Cabaret. The Quirke Cabaret is an annual event of individual and group performances.¹³ As it was my understanding that this event showcases *their* work to immediate and extended community members, I did not propose screening my video at their event. However, Nancy informed me that the group wanted to screen the 13-minute video as the event finale. This embracing of the video suggests that the group viewed it as representative of their experiences, and thus, was proud to share it with their community.

¹² Quirke wants to obtain funds that are additional to what they receive from AHS.

¹³ It is important to distinguish this event from the AHS annual event that involves performances from all 4 AHS groups. The Quirke Cabaret is planned and executed by Quirke members independent of official AHS programming.

A third significant outcome of this project relates more directly to the AHS program administration. Specifically, it involves the video's potential to raise awareness and provide funding support for AHS as a whole. Post-screening discussions with Jil support claims of the video's potential. From her perspective, the video may serve as a complementary element to the AHS program evaluation research conducted by the UBC School of Nursing. Jil stressed that in addition to providing statistical evidence to funders, it was important to "capture people's hearts" to build support for programs such as AHS.

Jil also indicated that she wanted to use the video in these specific ways to share information about Quirke and AHS:

1. As part of the AHS grant application to the Canada Council for the Arts
2. On the Parks Board website
3. On the networking site community art.net
4. At conferences where she discusses AHS program model, delivery, and impacts

Jil's desire to use the video in these ways suggests its usefulness as a tool to demonstrate program impacts and facilitate discussions about arts and health. However, a limitation of these statements is that since we are at an early stage of project completion, the effectiveness of the video is unknown.

Further research is necessary to evaluate the video's effectiveness. This may involve interviewing program funders after they have viewed the video and asking how the video impacted their decision making process, or hosting a discussion at an arts and health symposium to gather information about the audience response. Further, to complement the web based postings of the video, an online survey may be useful to learn about people's reactions. These actions are important to consider in order to produce more substantive evidence about the video's strengths and limitations as a tool to communicate program impacts.

Contribution to Discussions on Community Art in Health

I will conclude by commenting on this research project in relation to the academic discourse on the significance of community art as a healthy community development tool. While this study is limited by its context specific nature, it nonetheless contributes to our

collective understanding of what participants view as beneficial aspects of community art programs. The structure of this collaborative research process provided study participants with the opportunity to identify those aspects of their involvement in Quirke that were most impactful. Quirke demonstrated ownership of the research findings and acknowledged that they accurately reflected the group's character. In addition, considering the need for establishing greater common ground in arts and health, the video format may be accessible to diverse audiences and used as a tool to stimulate discussion.

In summary, this investigation provides insight into the significance of Quirke members' AHS program involvement. It may also serve as a foundation for future collaborative video projects. As AHS operates in 4 locations, a similar collaborative video making process may be undertaken at the other locations. Comparing the video project process and outcomes at various sites would help with understanding the degree that context plays in shaping research findings. This is one example of how building on both the successes and challenges of this project has potential to produce even more meaningful insights into the significance of the arts in contributing to individual and community health.

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Appendix I: Collaborative Working Agreement

Statement of Intent

This contract outlines the terms and conditions of agreement between Callista Haggis and Quirk-e to collaboratively develop and execute:

- D. 2-4 minute promotional video documentary about Quirk-e

- E. 7-10 minute video documentary that explores the significance of Quirk-e member's experience as part of the Arts, Health, and Seniors project.

The intention of the document is to ensure that both parties have a clear understanding of the roles, responsibilities, and outcomes of this project. Both parties will have ownership and (non-profit) distribution rights of the material.

Part I: Pre-Production

Brainstorming and Project Objectives

Callista agrees to facilitate an idea development session that will explore and identify key video elements. This discussion will focus on: use, audience, take-home message, representation (including spokespeople and artwork) and tone. These elements will be hereinafter referred to as 'project goals.'

Quirk-e members agree to offer ideas and explore feasible options for how to best meet the project goals. Decisions will be made based on consensus. In cases where consensus cannot be reached, decisions will be made by a majority vote.

If Quirk-e members do not attend this idea development session, they agree that other Quirk-e members represent their interests during this in-depth (1- 2 hour) discussion of the project goals.

Callista agrees to listen, discuss and record all ideas.

Callista agrees to present an overview (15-30 minutes in length) to the entire group of the information collected during the smaller group brainstorming session.

Callista agrees to discuss with all group members how to choose interviewees, and make further revisions to notes if there is strong opposition to any idea.

Treatment

Callista agrees to expand upon and compile ideas into a 1- 2 page document –“the treatment.” The treatment will detail the narrative progression of the material and include descriptions of audio and visual components. It will outline the key themes and approach in delivering the project goals. If it is decided (at the brainstorming session) that the two videos will be quite different, Callista will write, and disseminate two treatments.

Callista agrees to distribute the treatment to all Quirk-e members and facilitate a feedback session. The feedback session will be 30 minutes -1.5 hours outside of regular group time.

Quirk-e members in attendance agree to offer suggestions to amend the treatment as to best meet the project goals.

Part II: Production

Interviews

(3-5) Quirk-e members who consent to interviews, agree to meet outside of group time for 1- 2 hours to discuss group-identified themes during a one-on-one on camera interview. They also agree to have additional ‘b-roll’ footage taken if it supports interview content.

Callista agrees that interview questions are in-line with project goals and that the shooting schedule is accommodating and efficient for all parties.

Quirk-e consents to Callista's judgement in the inclusion or exclusion of all video and archival footage.

Part III: Post-Production

Assembly Screening

Callista agrees to compile footage into a 10 -15 minute 'rough-cut' to be privately screened for all Quirk-e members. The rough-cut will not contain extensive video or sound editing or titles. Clips and archival footage will be assembled into key themes and provide a structure that aims to communicate the project goals.

At the rough-cut screening, Quirk-e members agree to provide feedback and offer suggestions on improvements to the rough-cut. This may include changes to the structure, tone, or content.

Quirk-e members will have the right to remove any footage they do not feel comfortable showing to the wider public.

If a Quirk-e member chooses not to attend the rough-cut screening they agree to let other Quirk-e members represent their interests on their behalf.

Quirk-e members agree to allow Callista to have a rough-cut screening with Callista's academic advisors to provide further direction on how to best meet project goals.

Once Quirk-e is satisfied with the agreed upon changes, Callista agrees to further edit footage into the fine-cut versions.

*It is important to note that after this stage major changes to the videos will not be made.

Fine-Cut Screening

Quirk-e agrees to a fine-cut screening to provide feedback on details corrections, such as sound levels, music titles, and credits.

Quirk-e agrees to Callista showing the videos to her academic advisory committee to provide additional feedback.

Post-Production Screening

Quirk-e agrees to Callista showing the videos as part of her thesis defence at the School of Community and Regional Planning, UBC.

Callista agrees to provide a copy of the videos for the use and dissemination by Quirk-e members. Quirk-e retains authority to decide the location of future screenings.

Quirk-e agrees to a discussion with Callista on if, how and where they would like a partnership showing of the final video product(s) and additional screenings for the program administrators of the Arts, Health and Seniors Project, conferences, film-festivals, and for any community members identified by Quirk-e.

If you are satisfied with this contract, please sign and date this copy and return it to Callista Haggis. If there is anything you do not agree with, or if there is anything you would like to discuss please contact Callista Haggis, who assumes authorship of this document.

I have read this contract carefully and I agree with it.

Per: _____

Callista Haggis

(Quirk-e member name)

(Quirk-e member signature)

Appendix II: Project Process Outline

Project Description

My ideal vision is creating a video that speaks to both the emotional and practical significance of Quirk-e member's experience as part of the Arts, Health, and Seniors project—something that would be meaningful to participants, could be used to provide support for the program; and on a broader scale communicate the significance of community engaged art in building healthy communities.

The 'deliverables' are a video of 7- 10 minutes, and a shortened promotional version of 2- 4 minutes.

Timeline

September 23rd **book the senior's centre

- **Receive consent and working agreement forms**
- **1.5 hrs- Facilitate 5-15 people brainstorming session to come up with description of:**
 - Introduce collaborative working agreement
 - Intended audience
 - Key themes/ what are we promoting about the group? How can this provide support for the Arts, Health and Seniors program as a whole?
 - “This video is about...”
 - Cali writes-up notes

September 30th

- **15- 30 min in group -- reintroduce project to whole group**
 - Discuss outcomes of smaller group meeting
 - Hand out consent
 - Hand out collaborative working agreement
 - Receive feedback of who would like to participate and to what degree.

October 5th

- Cali send out treatment

October 07 *** book seniors centre

- Review treatment and have a feedback session with working group
- **Schedule interviews**

October 10-21st

- Conduct interviews/ personal b-roll
- Develop interview questions / shot list/ conduct interviews
- Oct 28th - **Capture 'b-roll' of group work (I would film a weekly session, maybe two if a lively event is planned, but people would carry on 'business as usual')**

October 29th- November 20th

- Capture and log footage
- Compile into rough cut

November 25th

- **Rough cut screening in group/feedback session**
- Will compile into 10 -15 min piece to leave room for discussion about what people want in the promo piece and make sure people are comfortable with everything that may be included in the longer piece.

November 26th or 27th

- Screening with academic advisory committee

December 1-15th

- Mental break from project to let ideas settle

December 15-20th

- Compile extra imagery if necessary
- Work on editing down to final cut of long and short piece

December 20-January 4th

- Winter break

January-May

- Work on final cuts (have a heavy course load so not sure how long will take to finish)
- Add final music
- **Attend session for final screening feedback/ approval**
- Academic feedback session
- Decide on next steps for viewings

*no interview/shot list

Appendix III: Ethics Certificate of Approval



The University of British Columbia
Office of Research Services
Behavioural Research Ethics Board
Suite 102, 6190 Agronomy Road, Vancouver, B.C. V6T 1Z3

CERTIFICATE OF APPROVAL - FULL BOARD

PRINCIPAL INVESTIGATOR: Leonie Sandercock	INSTITUTION / DEPARTMENT: UBC/College for Interdisciplinary Studies/Community & Regional Planning	UBC BREB NUMBER: H09-01721
INSTITUTION(S) WHERE RESEARCH WILL BE CARRIED OUT:		
Institution		Site
N/A		N/A
Other locations where the research will be conducted: Brittania Community Centre, subject's home		
CO-INVESTIGATOR(S): Leonie Sandercock Callista A. Haggis		
SPONSORING AGENCIES: N/A		
PROJECT TITLE: A Quirk-e Collaboration: Using video to explore participants experience of the Arts, Health and Seniors Project		
REB MEETING DATE: July 23, 2009	CERTIFICATE EXPIRY DATE: July 23, 2010	
DOCUMENTS INCLUDED IN THIS APPROVAL:		DATE APPROVED: August 25, 2009
Document Name	Version	Date
Protocol: Research Proposal	N/A	July 7, 2009
Consent Forms: Main Consent Form	2	August 11, 2009
Questionnaire, Questionnaire Cover Letter, Tests: Interview Questions	N/A	July 7, 2009
Letter of Initial Contact: Letter of Initial Contact	N/A	July 7, 2009
The application for ethical review and the document(s) listed above have been reviewed and the procedures were found to be acceptable on ethical grounds for research involving human subjects.		
<p>Approval is issued on behalf of the Behavioural Research Ethics Board and signed electronically by one of the following:</p> <hr/> <p>Dr. M. Judith Lynam, Chair Dr. Ken Craig, Chair Dr. Jim Rupert, Associate Chair Dr. Laurie Ford, Associate Chair Dr. Anita Ho, Associate Chair</p>		

Appendix IV: Supplementary Materials

Quirke: A Learning Collective, DVD