



Universiteit
Leiden
The Netherlands

Keeping the mind in mind: Assessing what art museums can learn from Alzheimer's and dementia initiatives for the future of community-focused programming

Lambert, Róisín

Citation

Lambert, R. (2024). *Keeping the mind in mind: Assessing what art museums can learn from Alzheimer's and dementia initiatives for the future of community-focused programming*.

Version: Not Applicable (or Unknown)

License: [License to inclusion and publication of a Bachelor or Master Thesis, 2023](#)

Downloaded from: <https://hdl.handle.net/1887/4108831>

Note: To cite this publication please use the final published version (if applicable).

Keeping the mind in mind:

**Assessing what art museums can learn from Alzheimer's and dementia initiatives for the
future of community-focused programming**



Róisín Lambert

s3242838

r.n.lambert@umail.leidenuniv.nl

Supervisor: Dr. M. Keblusek

Second Reader: Dr. K. de Wild

Master Arts and Culture: Museums and Collections

Academic year 2023-2024

Universiteit Leiden

Submitted 26 January 2024

Word count: 16,724

Abstract

This thesis explores the future of community-focused programming in art museums, emphasising the potential of art for psychological healing, digital tools for social sustainability, and participatory design. Examining two primary case studies: the *House of Memories* and *Meet Me at MoMA* programs, it analyses their approaches towards inclusion, participation, and accessibility whilst drawing lessons for connecting theory with practice. It explores the ideas behind participatory museology through concepts such as ‘third space’ theory, and its influence on each initiative. The *Meet Me at MoMA* program, focusing on the soothing power of art for Alzheimer's patients, exemplifies successful inclusivity and accessibility in the museum. The *House of Memories* program serves as a participatory and community-focused model that uses digital museology to its advantage. The thesis assesses the museums' social responsibility, particularly when it comes to co-collaboration with underrepresented groups and those with unique needs. Delving into the therapeutic nature of art, it argues that art museums can be recommended as ‘social prescriptions’. It contends that this approach is a form of intersectional care, as an improvement of wellbeing is a common need across all communities, specifically those who have been historically underrepresented in museums. The complexities concerning the museum's status as a ‘custodian’ of memory and identity are addressed, as well as the many challenges regarding diversification. It highlights the role of digital tools in museum evolution, advocating for digital innovation as an essential instrument for the future of community programming. The concluding remarks emphasise the need for art museums to introspectively use lessons from each case studies' program, and assesses the role of the therapeutic nature of art for creating relevant community initiatives for diverse audiences. The thesis provides a comprehensive assessment of the evolving role of art museums, offering insights into community intersection, and possible paths for shaping inclusive, accessible, and community-focused institutions through the examination of Alzheimer's and dementia initiatives already in circulation.

Key terms: Participatory museology, museum responsibility, social responsibility, mental health, disability, third spaces, art museums, digital museology, community, community programming, social prescription, *Meet me at MoMa*, *House of Memories*

Table of Contents

Introduction	1
Chapter 1 - Art as therapy: The art museum as an agent of care	8
<i>1.1 The therapeutic nature of art and art museums.....</i>	<i>8</i>
<i>1.2 Art, Alzheimer's, and dementia</i>	<i>12</i>
<i>1.3 The Meet Me at MoMA program</i>	<i>14</i>
Chapter 2 - Community values: Museum responsibility towards communities	18
<i>2.1 The evolution of museum responsibility</i>	<i>18</i>
<i>2.2 The museum as the custodian of memory and identity</i>	<i>21</i>
<i>2.3 Museums and their communities</i>	<i>25</i>
<i>2.4 The House of Memories program.....</i>	<i>28</i>
Chapter 3 - Using the tools at your disposal: The future of community programming in art museums	32
<i>3.1 Inclusion and accessibility.....</i>	<i>32</i>
<i>3.2 Persuading participation</i>	<i>34</i>
<i>3.3 Prescribing art museums as intersectional care</i>	<i>38</i>
<i>3.4 Digital futures and social sustainability.....</i>	<i>41</i>
Conclusion.....	46
Illustrations.....	50
Illustration credits	56
Bibliography	57
<i>Secondary Literature</i>	<i>57</i>
<i>Websites</i>	<i>66</i>

Introduction

From the mid-sixteenth century *Wunderkammer* to the national and ethnographic museum of the nineteenth century, museums and collections have always been focused on the exhibition of culture, identity, and community.¹ Despite this, it is clear that museums often do not serve as welcome spaces for certain demographics, whether that be due to how particular communities or identities have been represented in the museum, or how they are treated during visitation. In 2012, the American organisation National Endowment for the Arts (NEA) found that adults with disabilities only made up only 7 percent of adult attendees of art museums and galleries in the US.² Although there are many reasons as to why such a low percentage could exist, it is important to note that studies on the experience of those with disabilities in museums have been found to be less than adequate.

For example, Yaniv Poria, Arie Reichel and Yael Brandt - in their study of the experience of disabled people in Israeli museums - gathered that many of the visitors they interviewed not only had issues with physical accessibility, but with communication with staff and other visitors. One interviewee noted that if they were to ask a question, museum staff would answer their non-disabled wife as if they were incapable of answering themselves, whilst another found that if they were spoken to, it was often with raised voices or slowed speech; a communication process that another interviewee remarked upon as humiliating.³ When it comes to the representational side of the coin, the University of Leicester's Rethinking Disability Representation (RDR) project found that museums in the UK, with their very few exhibitions inclusive of disabled persons, had stereotypical representations.⁴ These depictions ranged from the hero overcoming and transcending their disability, to the freak and the passive recipient of care.⁵ This was found to mirror media depictions at the time (2008) and served as the driving force for the RDR's existence.⁶

¹ See Carrier, "The Display of Art," for more information about the Wunderkammer and Salon.

² Bienvenu, "Museums and ADA@25," 30.

³ Poria, Reichel, and Brandt, "People with disabilities visit art museums," 23.

⁴ Dodd, Sandell, Jolly, and Jones, *Rethinking the Representation*, 10.

⁵ Ibid.

⁶ Ibid.

Not only an issue for those with disabilities, museums — especially ethnographic — have histories of representations that are met with disdain from the communities they attempt to exhibit. Taking The British Museum’s display of *Hoa Hakananai’a* (see fig. 2.) in London as an example, a statue that Easter Islanders called for the return of in 2019, the issue taken with their ‘ownership’ of the statue did not only arise due to discussions regarding problematic provenance.⁷ Carlos Edmunds (the president of the Council of Elders within the Easter Islander community) stated that from the perspective of his community, the *Hoa Hakananai’a* inhabits an ancestor, likening the statue to a grandfather.⁸ As such, the primary reason as to why it is problematic that the statue lives inside The British Museum is due to cultural differences regarding the way *the Hoa Hakananai’a* is viewed.⁹ For the British Museum, it is an artefact, for Easter Islanders, it inhabits an ancestor, so the latter does not feel respected by the former.

With this in mind, it is fair to say that there is work to be done when it comes to the treatment of visitor communities and their cultures. The aforementioned cases are good examples as to how museums have failed communities, particularly when it comes to understanding their culture, welcoming their presence in the museum, and respecting their communal values and needs. Thus, in order to continue to both display and invite communities into the museum, there is much to be done to ensure this fits in with the contemporary ideal of community-museum relationships. This is where Alzheimer’s and dementia initiatives come in, proving as worthy and inspiring examples of community outreach, participation, and care. This thesis aims to analyse and investigate dementia and Alzheimer’s programs to the end of extracting what it is about these programs that makes them effective community projects, and ascertain how this can be applied for the future of art museum initiatives geared towards all forms of community outreach.

The recent change of the ICOM definition is important if we are to understand how art museums should function in the contemporary world. The previous definition (from 2007) was:

“A museum is a non-profit, permanent institution in the service of society and its development, open to the public, which acquires, conserves, researches, communicates

⁷ Bartlett, “Easter Islanders.”

⁸ Ibid.

⁹ Ibid.

and exhibits the tangible and intangible heritage of humanity and its environment for the purposes of education, study and enjoyment.”¹⁰

The new definition (changed in 2022) is as follows:

“A museum is a not-for-profit, permanent institution in the service of society that researches, collects, conserves, interprets and exhibits tangible and intangible heritage. Open to the public, accessible and inclusive, museums foster diversity and sustainability. They operate and communicate ethically, professionally and with the participation of communities, offering varied experiences for education, enjoyment, reflection and knowledge sharing.”¹¹

As is clear, the 2022 definition is a significant departure from its 2007 counterpart. This is particularly true when looking at its focus on accessibility, inclusivity, and communal participation. As argued by Laurant Bonilla-Merchav and Bruno Brulon Soares during their evaluation of the definition change: “The current definition is... not a top-down guideline for what museums should do. Rather, it expands what they can do by increasing their potential to impact societies”.¹² In other words, as museums look towards the new definition for a guideline, they may find inspiration by assessing what their roles can be and will be moving forward.

As the ICOM definition is itself inspired by the progress museums have made, there is much inspiration to be found within community-based programming already implemented in cultural institutions. One large target community has been those suffering from Alzheimer’s and dementia, as well as their caregivers. To understand why they have become such a focal point, one must investigate their prevalence within society. The number of people living with Alzheimer’s and dementia has been on a steady incline worldwide and is currently set to continue doubling every twenty years.¹³ This upward trend is exacerbated by a global ageing population, with the number of people over the age of sixty expected to increase twofold by

¹⁰ ICOM Nederland, *The Museum Definition*, 1.

¹¹ ICOM, “Museum Definition.”

¹² Bonilla-Merchav and Soares, “Arriving at the Current Museum Definition,” 146.

¹³ Alzheimer's Disease International, “Dementia Statistics.”

2050.¹⁴ Dementia, a generalised term for the group of brain disorders which Alzheimer's falls under, is an ailment that affects memory, language, visuospatial function, and executive function to the point of interfering with a person's everyday life.¹⁵ Alzheimer's disease, which makes up approximately 70 percent of all dementia cases, is a progressive, fatal disorder that currently has no cure, and has a particularly harmful effect on a person's mood, personality, and daily behaviour.¹⁶ Unsurprisingly, depression, anxiety, and other mental health disorders are common amongst people with Alzheimer's and dementia.¹⁷ This extends to the carers of those suffering, reporting higher rates of depression than that of the general population.¹⁸

As we face the growing challenge of physical and mental health, in all its causes, cultural institutions have seen themselves become a part of the tapestry of social care. Most museum programs geared towards Alzheimer's and dementia patients specifically focus on improving the mental health of both patient and carer, encouraging connection and communication to the end of improving patient-carer relationships. As explored by Rachel Thompson, Jessica Sack, and Angel Duncan in their review of their multidisciplinary program *Arts in Mind* — designed for those with early-onset Alzheimer's and their caregivers — museums can be used as a form of 'social prescription' for Alzheimer's patients, a complementary form of care that aims to enhance the overall quality of life for those prescribed.¹⁹ Thompson, Sack and Duncan, an art therapist and two museum educators, launched this program with the aim of normalising art therapy programs within museums as a form of supplementary care.²⁰ As a healthcare approach social prescribing is well-established, with some disorders (specifically mental health disorders) calling for 'social prescriptions' ranging from — but not limited to — artistic exploration, personal study, and physical exercise.²¹

The concept of the 'social prescription' underpins the connection between care and museology, and is relevant to all community-based approaches that are to be explored throughout this thesis. Museologists Jocelyn Dodd and Ceri Jones, whilst exploring the intersection between

¹⁴ World Health Organization, "Ageing and Health."

¹⁵ The following description of Alzheimer's and dementia is based on The MoMA's *Meet Me at MoMA* report: The Museum of Modern Art, *Meet Me: Making Art Accessible to People with Dementia*, 12-15.

¹⁶ Amongst Alzheimer's disease, other types of dementia include vascular dementia, Lewy bodies and frontotemporal dementia, all of which also involve the symptoms described above.

¹⁷ Mental Health Foundation UK, "Dementia."

¹⁸ Huang, "Depression among caregivers of patients with dementia," 60.

¹⁹ Thompson, Duncan, and Sack, "Arts in Mind," 62.

²⁰ Ibid.

²¹ GOV.UK Office for Health Improvement & Disparities, "Social prescribing."

mental health and museology, emphasise the museum's ability to not only reach visitors on an intellectual level, but on an emotional and spiritual one too.²² Dodd and Jones found that museum spaces and exhibits can have a positive impact on visitors' cognitive functions, emotional state, and social interactions.²³ When paired with a program tailor-made for one specific group, the museum has the potential to become an effective, and commonplace, form of 'social prescription'. In regard to dementia and Alzheimer's initiatives, they make the mentally and emotionally stimulating aspects of the museum more accessible to those who may be unable to access them ordinarily, working as an example of how to attune a museum toward a specific community. In terms of the wider implication of 'social prescriptions', when connected with art museums, they exist as a form of intersectional care. This is because almost all visitors can benefit from these institutions focusing on the therapeutic aspect of art.²⁴

Connected to their position as agents of care, museums have been described as the 'custodians' of memory and identity by art historian Nicole Meehan.²⁵ This is primarily due to the crucial role they play in shaping historical narratives and preserving cultural identities.²⁶ However, identity representation within museums has historically favoured certain demographics over others, leading to representational inequalities within museum structures, visitation, and display.²⁷ Despite some improvements, there still exists identity disparities today.²⁸ This thesis will explore the ways in which memory and identity are interconnected, and how they form the foundation of individual and collective histories intrinsic to museology. Especially valuable for Alzheimer and dementia sufferers due of the effect that the illness has on memory and identity, the programs explored are well-connected to this facet of the museum's societal role.

Another key concept relevant to this role is 'participatory' museology. Inarguably a product of the participatory turn within museums, Alzheimer's and dementia programs almost always centre audience engagement in their set-ups.²⁹ Nina Simon, author of 'The Participatory

²² Dodd and Jones, *Mind, Body, Spirit*, 43.

²³ Ibid.

²⁴ See: Government of the Netherlands, "MHPSS worldwide: facts and figures," for more information as to the prevalence of mental illness worldwide, especially when it comes to people living in difficult circumstances.

²⁵ Meehan, "Digital Museum Objects and Memory," 431.

²⁶ Ibid.

²⁷ Coffee, *Museums and Social Responsibility*, 104-107.

²⁸ See the following studies: Topaz et al., "Diversity of Artists in Major U.S. Museums," Artforum, "Museum Leadership," and On the Move, *Time To Act*, 10.

²⁹ In both of the primary case studies discussed throughout this thesis, the Meet Me at MoMA program and House of Memories initiative, audience engagement is central to their approach. See: The Museum of Modern Art, *Meet Me*, 111-120, and Wilson, "Advancing the Role of Museums," 3-19.

Museum’, describes the ‘participatory museum’ as a place where visitors are not passive consumers but active participants.³⁰ Simon presents a range of strategies and practical examples for implementing participatory approaches in museums, emphasising the importance of co-creation, collaboration, and audience input.³¹ By analysing current dementia and Alzheimer’s initiatives, this thesis assesses the way participatory approaches work in action. With this knowledge, other programs for other communities have a practical basis that provides them with a solid foundation to work upon. Deliberately or not, many Alzheimer’s and dementia initiatives also incorporate ‘third spaces’ into their programs. Another pivotal term, the ‘third space’ — according to critical theorist Homi K. Bhabha — works to mediate connections between two or more subjects to the end of producing a previously non-existent meaning between them.³² This connection enables people to participate in intercultural exchange, thus turning their surroundings into a ‘third space’ absent from the usual boundaries of belonging that stifle authentic self-representation.³³ The ‘third space’ has recently found itself a point of interest within discussions surrounding exhibition management. Museologist Simona Bodo believes that the future of the museum lies in the integration of ‘third spaces’ within common museological practice.³⁴ The case studies will be used to study the effectiveness of ‘third spaces’ throughout this text, with specific focus on how the creation of a ‘third space’ affects the connection between those living with a mental affliction and their caregivers.

The Alzheimer’s and dementia programs to be explored throughout this thesis, although unique and of different scopes, have well-formed structures, multidisciplinary backing, and promising results, begging the question as to how they can be used as inspiration for the creation of future forms of tailored programming. This is especially pertinent when it comes to any other community that suffer from afflictions of the mind. Although there is a wealth of literature that is focused on Alzheimer and dementia initiatives in museums, as well as the effect of the arts on mental health, there is a gap in what this could mean for the future of museum programs for other communities.³⁵ The way in which these programs are designed fall in line with multiple

³⁰ Simon, *The Participatory Museum*, 350.

³¹ Simon, *The Participatory Museum*, 231-232.

³² Bhabha, *The Location of Culture*, 36.

³³ Bodo, “Museums as Intercultural Spaces,” 184.

³⁴ Ibid.

³⁵ See: Hendriks, Meiland, Gerritsen, and Dröes, “Implementation and impact of unforgettable,” and Hoffmann, “Adult learning enrichment,” for information on the impact of art and museum programs on treating Alzheimer’s

advancements in museological thought and exhibition-making over the years, all whilst offering a unique practical approach to programming. The Alzheimer's and dementia initiatives central to this research continually work with professionals from various disciplines as well as their communities, something that programs for other communities — as well as museums as a whole — could learn from. As the main case studies for this thesis, they will be assessed as possible blueprints for the future of community-based programming in art museums. This will be predominantly geared towards art museums, as the programs explored throughout exist primarily within this paradigm, and the concept of art as therapy is key to the central argument of this thesis. Consequently, it is only fair to apply this to institutions of the same or similar scope, whilst keeping within the sector of museology that these approaches seem to thrive best.

and dementia. For insight into the effects of art on mental health in general, see: Liu, "The psychological impact of art mental health teaching," and Hacking, Secker, Spandler, Kent, and Shenton, "Evaluating the impact of participatory art projects."

Chapter 1 - Art as therapy: The art museum as an agent of care

1.1 The therapeutic nature of art and art museums

Art has been long used as a therapeutic medium, whether that be through the making of or the experiencing, having been used in many cultures as a way to heal psychological pain.³⁶ As an example, British artist and collector Edward Adamson (1911-1966) made art and advocated for viewing art as an approach to psychological healing before art therapy explicitly existed.³⁷ He was described as having a special ability to help struggling individuals find healing through the creation of their own art, as well as the viewing of other's artworks.³⁸ This is because, as a creative practice, art often can speak to the parts of us that cannot be accessed in any other way. In their book 'Art is Therapy' philosophers Alain de Botton and John Armstrong investigate this phenomenon through what they call "the seven functions of art": "Remembering", "Hope", "Sorrow", "Rebalancing", "Self-understanding", "Growth" and "Appreciation".³⁹ In following with their theory, just as we use knives to supplement our inability to cut, art can be used as a tool to supplement our psychological inadequacies and impairments.⁴⁰ Although remembering would be assumed to be most important — regarding the case studies central to this thesis — all functions have their place concerning the therapeutic aspect of art and artistic initiatives for those suffering from Alzheimer's and dementia. As a result, art and therapeutic techniques not only complement each other well, but should be seen as a useful instrument.

Art therapy is but one example of the intersection of art and therapy. As a sometimes difficult to define concept, there have been debates within the field of psychology as to what it entails, and whether it refers to making art, viewing art, or both. One definition, as described by American Art Therapy Association, is as follows: "Art therapy is based on the idea that the creative process of art making is healing and life enhancing and is a form of nonverbal communication of thoughts and feelings", focusing entirely on making art as therapy.⁴¹ In another all-encompassing definition of the discipline, editor and creator of the *Bulletin of Art*

³⁶ See: Fernández-Olmos and Paravisini-Gebert, *Healing Cultures*, as an example.

³⁷ Adamson and Timlin, *Art as Healing*, 47.

³⁸ Ibid.

³⁹ De Botton and Armstrong, *Art as Therapy*, 7.

⁴⁰ Ibid.

⁴¹ Malchiodi, *Handbook of Art Therapy*, 1.

Therapy (created in 1961) Elinor Ulman wrote that art therapy takes both aspects of art and therapy as seriously as one another, never stretching one too far to the point of losing its meaning entirely.⁴² What this means in practice is obviously both non-specific, up to interpretation, and foreseeably includes the viewing of art. As the debate has continued, it has been effectively centred on what would be the ‘dominant parent’ between art and therapy, causing splits in terminology and disconnecting the field into offshoots of ‘art psychotherapy’ and ‘art *as* therapy’.⁴³ As could be discerned logically, each of these offshoots choose a primary focus for their approach, with the former having a focus on making art and the latter a focus on viewing art. This chapter, named art *as* therapy, therefore takes an approach that focuses predominately on the therapeutic aspects of viewing art, but never without taking its art-making counterpart into account.

The reason why art takes such a pivotal role in this discussion is because, even without deliberation, art alone has been proven to have a positive effect on a person's wellbeing. Museologist Jennifer Binnie conducted a study on the effect of art on anxiety using Leicester Museum and Art Gallery as a case study. Leicester Museum and Art Gallery is a free to visit institution that has art collections spanning from Ancient Egypt to German Expressionism, as well as a collection on local histories.⁴⁴ Focusing on their art collections, Binnie asked the following question: does simply *viewing* art lead to a decrease in anxiety? She tested this on both museum staff and visitors to the museum, finding that there was a decrease in anxiety post-museum visit, particularly for the museum visiting population.⁴⁵ Similar conclusions can be found when looking into personal stories regarding the use of art as therapy. An anonymous essay posted in *The Lancet* in 2022, details the experience of ‘Carla’ and the ways she has used art to lessen psychological pain. Throughout her struggles, she found herself soothed by art throughout her life, stating that it was the most effective solution for conciliating her psychological disturbance.⁴⁶ With these two examples, one a personal account and the other results from a study pool, it can be assumed that there is something inherent in how art functions that reduces psychological pain.

⁴² Ulman, “Art Therapy: Problems of Definition,” 19.

⁴³ Rubin, *Introduction to Art Therapy: Sources & Resources*, 25.

⁴⁴ Leicester Museums, “Leicester Museum & Art Gallery.”

⁴⁵ Binnie, “Does Viewing Art,” 198-199.

⁴⁶ Carla, “Art as therapy,” 352.

Taking the social role that museums have into consideration, they make for a suitable platform for explorations into art as a therapeutic asset. Following this line of thought, museologist Lois Silverman has catalogued specific ways in which museums play a role in improving mental health. Amongst these were the ability to promote relaxation and encourage introspection, both of which have a positive effect on a person's mental health.⁴⁷ Paired with how museologists Helen Chatterjee and Guy Noble categorise the museum as agents of social cohesion, they have the capacity to bring people together in a way that they may not experience elsewhere whilst providing relaxation.⁴⁸ A side effect of having positive and supportive social relationships is an improvement of one's mental wellbeing, particularly for people suffering with disabilities.⁴⁹ With social isolation being a big issue for those suffering, particularly people who are in need of hospitalisation, the possible ramifications of this are significant.⁵⁰ Since art exploration can be used as a form of 'social prescription' for those in need of mental health care, the contribution that artistic cultural institutions have made has been part of a natural progression.

Frances Kaplan, an art therapist, incorporates aspects of social action into her approach of using art within therapy, pairing together two concepts that have been of contemporary focus within museums: social activism and the therapeutic function of art. Kaplan writes that although the two — meaning art therapies and social action — may seem disparate due to their inherent differences in approach (art therapies attempt to affect the interior of a singular person whilst social action attempts to affect change for communities and society at large) the two do have a base commonality, as they both aim to improve the lives of people in difficult positions.⁵¹ When it comes to Kaplan's so-called 'social action art therapy', she poses the following as a definition:

“Social action art therapy operates outside the usual box of individual illness (mental or physical) and addresses societal problems by providing services to perpetrators, victims (potential or actual), or people who work with members of these groups.”⁵²

⁴⁷ Silverman, *The Social Work of Museums*, 43.

⁴⁸ Chatterjee and Noble, *Museums, Health and Well-Being*, 4.

⁴⁹ Tough, Siegrist, and Fekete, “Social relationships,” 17.

⁵⁰ Chatterjee and Noble, *Museums, Health and Well-Being*, 49.

⁵¹ Kaplan, *Art Therapy and Social Action*, 11-14.

⁵² *Ibid.*, 13.

In being social institutions that, in their contemporary iteration, usually wish to have both a personal and societal effect, it could be said that using the art museum as a tool to soothe psychological pain is inherently a form of social action.

The *Art is Therapy* exhibition (see fig. 3. and fig. 4.) that was put on at the Rijksmuseum in 2014 followed these lines of thinking, seemingly focusing on the art museum's power to affect their visitors on both a personal and societal level. Taking inspiration from the text 'Art is Therapy' by de Botton and Armstrong mentioned at the beginning of this sub-chapter, the exhibition was co-curated by de Botton himself. Its purpose was to provide additional texts — in the form of post-it notes — to the permanent collection. These texts outlined the therapeutic function of the artwork alongside its historical, intending to appeal to the visitors struggles with personhood. The post-it notes, common and a part of everyday life, attempted to engage the everyday person through familiarity. The purpose of this was to give the audience a chance to gain a new perspective of the paintings on view whilst connecting with them in a manner they may have not before. For example, Rembrandt van Rijn's (1606-1669) *The Night Watch* was endowed with a caption that addressed the crowding often experienced around the popular painting. This was to strike at the desire one may have to gaze upon the painting alone, left to ponder without the distraction of human interference.⁵³ This itself could be striving to conjure up some feeling of community between the disconnected visitors, or it could work to soothe the feelings of anxiety that can arise in these situations by simply, and ironically, professing: you are not alone.

In a talk about the exhibition, de Botton likened the museum to the cathedral as the assistance people traditionally looked for from religion, they have too looked for within art; for example, community, morality, and consolation for their suffering.⁵⁴ This is in following with Carol Duncan's exploration of the art museum as ritual, where she stated that there was always a comparison to be made between museums and ritual spaces, with museums beginning to resemble temples and churches by the eighteenth century.⁵⁵ This comparison is strengthened by the ritualistic aspect of museum visitation, with patrons frequenting museums for contemplation and education, and their behaviour moulded to institutional expectation.⁵⁶ If we are to view the

⁵³ Monocle Films, "Art is Therapy - Rijksmuseum, Amsterdam."

⁵⁴ Rijksmuseum, "Alain de Botton on Art Is Therapy."

⁵⁵ Duncan, *Civilizing Rituals: Inside Public Art Museums*, 7.

⁵⁶ *Ibid.*, 10.

museum as a ritual space where people gather for specific purposes, there are a multitude of purposes that the museum can take on for their patrons and their unique needs, backgrounds, and interests.

Overall, the idea that art *is* therapy is really a very loose view of the term therapy.⁵⁷ What can be therapeutic may not then go along with what a psychologist would consider a therapy session, but it may have ability to soothe in an equivalent way despite this. The flexibility that comes along with art interpretation then suits this idea of the therapeutic, as it allows all in its arena to have a fluid, ever-changing and unpredictable experience with each museum visit. Museums, such as the *Rijksmuseum*, have been paying more attention to this, seemingly wanting to give visitors different experiences of places they have been once before. Even without having programs or exhibitions that decidedly tap into the therapeutic nature of museums and art, therapeutic outcomes often do occur from a museum visit anyway.⁵⁸ As demonstrated by Lois Silverman in her exploration of the therapeutic role of museums, although there may be an assumption that we are only referring to those diagnosed with a specific mental disorder when we talk about the museum as a place for therapy, the likelihood is that everyone will be affected by mental health issues in their lifetime in some way or another.⁵⁹ As a result, museums and museum programs that tap into this aspect of their institution can cater towards the entirety of their community and visitor pool by virtue of addressing a universal complaint.

1.2 Art, Alzheimer's, and dementia

With that said, a primary function of using art as therapy is to tailor it to the mental disorders or physical ailments of specific communities. As mentioned in the introduction, the rate of Alzheimer's and dementia is not only on the rise, but a type of brain disorder that many of us will have experience with during our lifetimes. When it comes to artistic interventions, they have proven themselves to be effective in treating symptoms of Alzheimer's and dementia.⁶⁰ This is especially true regarding the mental health disorders that are comorbid with the disease.⁶¹ These

⁵⁷ Referring to psychotherapy, for the definition see: American Psychiatric Association, "What is Psychotherapy?."

⁵⁸ Silverman, "The therapeutic potential of museums," 75.

⁵⁹ *Ibid.*, 75-76.

⁶⁰ See: Schröder, "Changing Perspectives."

⁶¹ See: Garcez, Falchetti, Mina, and Budni, "Alzheimer's Disease associated with Psychiatric Comorbidities," for information about psychiatric disorders comorbid with Alzheimer's and dementia.

interventions also tend to aid in improving the mental health of carers, all whilst bringing awareness of the disease into everyday life. To understand the positive effect programs in art museums can have on those suffering from Alzheimer's and other dementias, it is important to explore the many ways in which art and dementias have crossed paths. As stated by Bree Chancellor, Angel Duncan, and Anjan Chatterjee, the contention that art therapies may be helpful for those suffering from dementia finds its roots in the fact that those suffering have and continue to produce art themselves to cope with the disease.⁶²

One particularly well-known example of this is the artistic life of William Utermohlen (1933-2007). Diagnosed with Alzheimer's in his later life, Utermohlen continued to paint as his illness progressed (see fig. 5. and fig. 6.). Through his art, viewers are given the unique possibility to see Alzheimer's through Utermohlen's eyes, allowing them to see the full extent of his symptoms in all its disturbing consequences. As pointed out by art historian Patrice Polini, a common state of being amongst those with dementia is *anosognosia*, which is an inability to recognise your own symptoms of your dementia.⁶³ Uncharacteristically, Utermohlen showed an awareness of his disease several years before he was diagnosed, keeping this awareness for much longer than the average patient.⁶⁴ It is Polini's assertion that Utermohlen was able to retain this awareness by expressing his symptoms visually, perhaps to the end of using it as a tool for self-soothing and introspection.⁶⁵ This gives credence to the view that the creation of art can be used as an instrument for dealing with dementia, even to the point of decreasing the prevalence of certain symptoms such as *anosognosia*. There are countless other examples of how creation of art can be a therapeutic process, a noteworthy one being that of Hilda Gorenstein. Her experience with Alzheimer's as an artist is explored in the aptly named documentary: *I Remember Better When I Paint*, a significant creation for those who wish to understand Alzheimer's, practitioners, and laymen alike.⁶⁶

In his aforementioned exploration of art as therapy, de Botton positions art as a way of remembering and states that it is in human nature to be forgetful — an aspect of humanhood that frequently causes distress and is in need of being soothed.⁶⁷ In some way, it may persuade

⁶² Chancellor, Duncan, and Chatterjee, "Art therapy for Alzheimer's disease," 2.

⁶³ Polini, "Conveying the experience," 298-299.

⁶⁴ Ibid.

⁶⁵ Ibid.

⁶⁶ Scheidt, "I Remember Better When I Paint," 968.

⁶⁷ De Botton and Armstrong, *Art as Therapy*, 8.

empathy for the disease if non-suffers were to realise that the primary symptom of Alzheimer's and dementia — forgetting — is but a heightened version of a problem that universally troubles all of us. Additionally, a greater comprehension as to why these holistic methods are useful in dementia care may materialise if we recognise that forgetting is something that we have tried to remedy through the arts for as long as the discipline has existed. Encouraging this is beneficial as empathy, according to artist and researcher Ruth Mateus-Berr, is a majorly effective and priceless tool central to dementia care.⁶⁸ One way to garner empathy between people is to get them to reflect on images, symbols and objects together as learning of each other's perceptions can garner deeper connections and increase empathy.⁶⁹ This may be one reason as to why using art as therapy — viewing and making art — is a successful treatment when it comes to dementia sufferers and their caregivers. In order to care for one another, we must first understand each other. In a study of the efficacy of art therapies for dementias, Andrielle Cowl and Joseph Gaugler found that art-based approaches to care provided patients with mental stimulation, a sense of self-efficacy, and support from the community around them.⁷⁰ These were the most powerful outcomes for artistic care methods, with the latter two already existing as health predictors in the elderly in general.⁷¹ As a result, the overlap between art, Alzheimer's and other dementias almost seems a necessary one. What we know about the needs of a dementia patient and what the arts can provide us with, the fact that there are proven results when the arts are employed as a form of care should not come as a surprise. Neither should it come as a surprise that art museums are an effective and useful arena for this. As familiar institutions that exist in the service of their community, it has been proven that it is within their field of expertise to be a part of the care tapestry for this social issue, and social issues analogous to these, with the tools they already have.

1.3 The Meet Me at MoMA program

A successful example of a program that has used its status as an art museum for Alzheimer's care is the *Meet Me at MoMA* program. Launched in 2006, it was created as an educational

⁶⁸ Mateus-Berr, "Creating an Empathetic Society," 107.

⁶⁹ Ibid.

⁷⁰ Cowl and Gaugler, "Efficacy of Creative Arts Therapy," 283.

⁷¹ Ibid.

program catered towards people with Alzheimer's and their caregivers.⁷² As a monthly initiative, it aims to provide continuous, structured support outside of the medical care Alzheimer's patients are already receiving. The program recognises the potential that art has to evoke memories, persuade conversation, and foster connections, specifically for those facing cognitive challenges. This is achieved through the use of trained guides that lead participants and their caregivers through curated exhibitions, and encourage them to share their thoughts, emotions, and any personal connections they have related to the artworks. The discussions and activities follow the participants' needs, and thus promote a sense of agency and empowerment. The *Meet Me* program has had a significant impact on Alzheimer and dementia programs in museums across the US and Europe, continuing to influence developments today.⁷³

In their own publication on the program, the organisers included some reviews of the experiences those involved had. One participant commented on how different they felt during their participation of the *Meet Me* program, as compared to their usual experience of museums in general, stating the following:

“Even on the telephone the staff are different. They are not at all, ‘Oh, what are you bothering me for?’ It is quite different here. The whole program from the beginning, from the first telephone call, has been extraordinary. You feel totally welcome.”⁷⁴

Paying special attention to the last sentence, the review implies that it is out of the ordinary to feel welcome at museological institutions as someone with Alzheimer's or dementia, a sobering remark for those working in museums. Another visitor commented on the *Meet Me* program's use of name tags, expressing that this created an atmosphere where everyone was spoken to on a first-name basis, their individuality addressed and respected.⁷⁵ They discussed how this made them feel more comfortable, especially when it came to creating connections with each other, the guides, and their caregivers.⁷⁶ Alienation and social isolation due to lack of understanding is a common consequence of a dementia diagnosis, leading to suffers having an

⁷² The following description of the Meet Me at MoMA program is based on The MoMA's Meet Me at MoMA information page: The Museum of Modern Art, "Meet Me at MoMA: MoMA Through Time."

⁷³ See: The Museum of Modern Art, *Meet Me*, 47, and Heesbeen, *Unforgettable*, 71.

⁷⁴ The Museum of Modern Art, *Meet Me*, 22.

⁷⁵ *Ibid.*, 23.

⁷⁶ *Ibid.*

inability to be as honest about their condition as they perhaps should be.⁷⁷ Therefore, it would be logical to say that openness regarding the disease should be taken into account when caring for dementia sufferers. The *Meet Me* program is preoccupied with this, attempting to break down the barriers of communication that often exist between those suffering from Alzheimer's, their caregivers, and the museum. The focus on personhood within the *Meet Me* initiative is particularly interesting when considering the de-personalising effect that Alzheimer's and dementia has on a patient, as well as MoMA's status as a modern art museum. It is apparent whilst assessing the predominant symptoms of dementia and their development: problems with memory that often lead to issues within interpersonal relationships and in regard to their own identity, a major threat when it comes to a diagnosis is a loss of personhood.⁷⁸ In being a modern art museum, the MoMA exhibits the effect of modernity on art. A major facet of modernism is embracing the 'self-identity', something that, convincingly argued by Anthony Giddens, simultaneously moulds, and is moulded by.⁷⁹ As such, the process of connecting someone struggling with their identity and personhood to these facets of themselves would, foreseeably, be effective in a modern institution focused on modern art.

Scott Selberg, researcher of communication, media, and visual culture, visited the MoMA to see how the *Meet Me* program functioned. Recounting the interactions he saw, the effect that it had on participants, and what this meant for contemporary approaches to Alzheimer's care, Selberg states that the program reveals what could be understood as either a 'modern personhood' or possibly a 'universal personhood'.⁸⁰ The idea behind 'universal personhood' is the assumption that it exists within us all, and that interiority is an inherent function that we can use relate to one another with despite our differences.⁸¹ This view of the program is supported when looking at the previously mentioned review of the program that praises their first-name basis approach. Whilst observing, Selberg noted down instances of laughter and conversation, expressing that the educators at the MoMA seemed to focus more on creating atmospheres where participants could speak freely over pointing out so-called right or wrong answers, therefore affirming them in their right to an opinion of the artworks in front of them.⁸² It wouldn't be

⁷⁷ Schröder, "Changing Perspectives," 47.

⁷⁸ Selberg, "Modern Art as Public Care," 475.

⁷⁹ Giddens, *Modernity and Self-Identity*, 1-2.

⁸⁰ Selberg, "Modern Art as Public Care," 476.

⁸¹ Ibid.

⁸² Ibid., 484.

unfair to assume that, in the daily life of someone suffering from a cognitive disorder, your perceptions become less trust-worthy to those around you. Considering that Alzheimer's and dementia frequently has a devastating effect on executive function, especially in the later years, it too would not be unreasonable to assume that the lack of trust a carer or family member may carry is warranted. Programs like *Meet Me* provide both patient and caregiver an arena to understand and converse with each other in a way that may not be possible in daily life, an invaluable consequence to a focus on a so-called 'universal personhood'.

Supported by the findings of Chancellor, Duncan and Chatterjee, who studied the after-effects of the *Meet Me* program through post-interviews with participants, the program improves the mood of the majority of those suffering from Alzheimer's, with their carers self-reporting better social connections and less emotional turmoil in the days following each session.⁸³ Its reported efficacy may be why the program has taken off the way it has, influencing museums all over the world to follow the same path. In 2007, just a year after the *Meet Me* program launched, the *MoMA Alzheimer's Project* was created to prioritise outreach and research in collaboration with other institutions who were looking to offer tailored programs to Alzheimer patients in their own museums.⁸⁴ An example of this is the *Onvergetelijk* (Unforgettable) initiative in the Netherlands, a program that started in 2013 and takes place in the Stedelijk Museum in Amsterdam, as well as the Van Abbemuseum in Eindhoven. Based on the *Meet Me* program, *Onvergetelijk* produces tours for those suffering from Alzheimer's and dementia, is partnered with medical institutions, and provides training for other museums wanting to get involved.⁸⁵ As such, the structure and content mirrors that of *Meet Me*, bringing its successes into the Netherlands. As the popularity of this type of intervention increases, so does the possibility that art museums will become increasingly suitable and effective agents of care. In being a form of 'social prescription', artistic exploration and art therapy outside of the remit of creating art are becoming increasingly popular for a reason. The *Meet Me* program is but one particularly well-done example of this.

⁸³ Chancellor, Duncan, and Chatterjee, "Art therapy," 4.

⁸⁴ Meet Me, "The History of The MoMA Alzheimer's Project."

⁸⁵ Heesbeen, *Unforgettable*, 71.

Chapter 2 - Community values: Museum responsibility towards communities

2.1 *The evolution of museum responsibility*

Since museums came into existence, there have been discussions as to how the museum ought to function and what its responsibility is as a cultural institution. As can be imagined, this has changed throughout the years, with the term ‘museum responsibility’ evolving from the late eighteenth century until now. For example, if we are to look back to 1896 at the musings of the Smithsonian Museum administrator George Browne Goode, his ideas regarding the responsibility of museums have some overlap with contemporary perceptions. In his time, Goode wrote a text named ‘Museums of the Future’, putting forth his ideas as to what museums should and could be.⁸⁶ Thus, he is a good example of a museum administrator that was both successful and a forward-thinking individual, aware of the need to evolve the museum to keep it socially relevant. Where Goode’s ideas differ lie primarily within their end goal. Goode saw the museums as a faculty for learning, as well as object and art preservation, but saw this as a means of ensuring the enlightenment of its country's citizens.⁸⁷ Additionally, Goode stated that the museum should work similarly to a lecture room that imparts expert information upon its viewers, arguing that the public museum is a necessary import for the creation of a civilised community.⁸⁸ Being an unmistakably hierarchical, class-based view of how information should be disseminated in the museum, thus mirroring the societal hierarchies and systems of the time, this approach to museum education would not be taken with such acceptance in the contemporary world.

The manifestation of this sort of view of museology can be sought by looking at *The Great Exhibition* of 1851. This was a British showcase put on at the Crystal Palace in Hyde Park that was as vast as it was eclectic.⁸⁹ Described as “Part trade fair, part festival, part shopping mall, part art gallery and museum” by art historian Jonathon Shears, the Great Exhibition was an entirely new way of exhibiting cultural artefacts.⁹⁰ Existing a few decades before his own text, Goode stated that: “the great Exhibition of 1851...marked an epoch in the intellectual progress of

⁸⁶ See: Goode, “The museums of the future,” 427–445.

⁸⁷ Goode, “The Relationships and Responsibilities of Museums,” 198.

⁸⁸ Ibid., 200–201.

⁸⁹ Shears, *The Great Exhibition*, 1–2.

⁹⁰ Ibid., 1.

English-speaking peoples”.⁹¹ As a colonial intervention, the goal of *The Great Exhibition* was to display artworks and objects from other cultures for the purpose of portraying British economic and cultural superiority over them, all whilst selling the British empire as the moral, civil giant they saw themselves as.⁹² As such, the ‘responsibility’ of *The Great Exhibition* follows in line with Goode’s estimation of what museums and exhibitions should be held responsible for: the education of specialist knowledge for the persuasion of a ‘civilised’ community. This focus on creating civilised, enlightened communities, although relevant in some regard, is not quite the focus of museum responsibility today. The progression of the twenty-first century museum has been marked by a ‘for the community, by the community’ approach, and therefore a less top-down system as before.

As previously mentioned in the introduction, ICOM updated their definition for museums in 2022. The section of the definition pertinent to museological responsibility is as follows:

“Open to the public, accessible and inclusive, museums foster diversity and sustainability. They operate and communicate ethically, professionally and with the participation of communities, offering varied experiences for education, enjoyment, reflection and knowledge sharing.”

Therefore, the contemporary museum differs greatly to its forefather when it comes to focusing on accessibility, inclusivity, diversity, sustainability, and community input. Museologists Robert Janes and Gerald Conaty believe that as society has progressed into becoming more complex and diverse, so has the museum, moving away from the monolithic entity it once was.⁹³ With that said, this change has not come without pressure from the public. Movements such as the advocacy campaign ‘Museums are Not Neutral’, which started as a hashtag in 2017, garnered attention by pointing out issues such as the dominance of white-centred colonial views within the foundation and hierarchies of museums, indicating how these bleed into their displays and exhibition themes.⁹⁴ It is voices such as these that have come to shape the way we view museum responsibility contemporaneously. This is one reason as to why

⁹¹ Ibid., 208.

⁹² Ibid., 77-78.

⁹³ Janes and Conaty, “Introduction,” 3.

⁹⁴ Art Museum Teaching, “Museums are not Neutral.”

there is a growing prevalence of narrow storytelling within exhibitions, wherein the focus is put on specific communities within a larger theme or narrative.⁹⁵ This is usually used as a method to represent communities that have traditionally been underrepresented in museums (such as people of colour, women, or people with disabilities).⁹⁶ Often, the goal here is to position the visitor less as a voyeur looking upon a ‘foreign’ culture, and more as an invitee that has the chance to experience, relate to, and educate themselves about the inner workings of either their own or another culture.

In their exploration of what they refer to as: “the necessary emergence of museum activism”, Robert Janes and Richard Sandell state that museums in general must lean into their authority as a trusted institution and use their voice for good.⁹⁷ Although, according to research done by the American Alliance of Museums (AAM), museums are ranked higher than the Government, local papers and academics in terms of trustworthiness, this sentiment is not carried over to many minority groups.⁹⁸ For example, in newer 2021 study done by the AAM found that white people in the US consider museums significantly more trustworthy than people of colour.⁹⁹ In regard to the group at the centre of this thesis, the aforementioned and continual feedback that has been received is that those with disabilities, physical and mental, also do not feel welcome in the museum. It is within this feedback that we can see where the work needs to be done, as well as which communities should be privileged when it comes to encouraging museological practices that fall in line with encouraging community inclusion.

With that said, there are obstacles in the way. This is particularly true when addressing the current hierarchies in museums that tend to champion monetary gain over social responsibility.¹⁰⁰ As convincingly argued by Janes and Sandell, this is due to the pervasive museum myth that growth (whether that be regarding money or visitation) is synonymous with being a successful institution.¹⁰¹ As supposedly non-profit organisations — if we are to follow the current ICOM definition — positioning making money as a focal point is a troubling, albeit

⁹⁵ Janes and Conaty, “Introduction,” 3.

⁹⁶ Ibid.

⁹⁷ Janes and Sandell, “Posterity Has Arrived,” 14.

⁹⁸ Ibid., 6.

⁹⁹ American Alliance of Museums, “Museums and Trust 2021.”

¹⁰⁰ Janes and Sandell, “Posterity Has Arrived,” 10.

¹⁰¹ Ibid.

understandable, symptom of our time.¹⁰² Although community engagement is important, and aspiring for growth in this area is reasonable, the quality of the engagement unequivocally matters more. As institutions that should operate, in the words of Elaine Heumann Gurian: “for the public good”, the effect these institutions have on their public should be of top priority.¹⁰³ Therefore, how effective a museum is in its ability to serve society has been deemed the marker of success in the twenty-first century institution.¹⁰⁴ At least for academics, this falls under the principal obligations of the museum more so than monetary gain does.

Discussions surrounding community have become a focal point across the majority arguments concerning the responsibilities of the contemporary museum — the current ICOM definition being a result of this. Whether this is regarding local or identity-based communities, it appears they have taken centre stage in recent years. Most museums today have an appointed ‘community outreach officer’, or an analogous position, whose job it is to be a voice of the community.¹⁰⁵ It is also commonplace for museums to have standard community policies to minimise negative impact on the communities they wish to advocate for, work with, or exhibit.¹⁰⁶ As such, just as the view of museum responsibility mirrored its society in the nineteenth century, it does so too today. It appears that this is partially due to an increase in museological introspection regarding their own colonial origins, and partly a consequence of increasingly diverse populations due to globalisation. In the path to becoming more empathetic and anti-discriminatory within ourselves, this research shows that the museum is able to affect positive change towards this end. Ultimately, the academic discourse on the subject characterises this as the primary responsibility of the twenty-first century museum.

2.2 The museum as the custodian of memory and identity

¹⁰² See: Alcaraz, Hume, and Mort “Creating Sustainable Practice,” for further exploration of the overlap between money, museums, and their status as non-profit organisations.

¹⁰³ Gurian, *Centering the Museum*, 1.

¹⁰⁴ Gurian expertly explores all the museum could be in her chapter: “Museum as Soup Kitchen: Museums as Venues for Social Service, 2009,” in *Centering the Museum: Writings for the post-Covid age*. See for further understanding of the ways in which museums can affect engagement and serve their community.

¹⁰⁵ Crooke, *Museums and Community*, 8.

¹⁰⁶ Ibid.

As expressed by Nicole Meehan, museums are the so-called ‘custodians’ of memory, responsible for codifying object memory.¹⁰⁷ Another word for memory in this context is history. Simply put, this is because history becomes history through processes of remembrance, rendering it parallel to and at the mercy of memory.¹⁰⁸ As the house of history, the museum is also parallel to and at the mercy of memory. As put by Philippe de Montebello, former Metropolitan Museum of Art director, "A museum is the memory of mankind".¹⁰⁹ It is the place where the entanglement between history and memory is made clear. Furthermore, according to Didier Maleuvre, there is hardly anything in the museum that is not historical, even if its historical value primarily lies in the narrative they form for the ‘idea’ of history.¹¹⁰ In other words, museum objects are almost always put into a historical or cultural context, used as a mode of understanding cultural and community memory, identity, and the past as we see it today. When this comes to the art museum — where artistic expression and museological memorialisation intersect — the status of being a custodian of both memory and identity plays an especially pivotal role. This is because it is their task to create historical memory narratives whilst emphasising the significance of the unique identities behind the work displayed, making it a place where the role of memory and identity is particularly significant.

Inarguably a difficult job, it is the burden of the museum to house the ever-changing nature of our identities, communities, and memories. This begs the question: Whose memories have museums decided need to be taken care of? And which identities has become championed in the process? Historically speaking, it is fair to say that white, European, cis-heterosexual, male, and able-bodied identities have been the predominant voices within art US and European museums. This is true in regard to artists exhibited in art museums, within the hierarchies of the institution, and the paradigms that museum displays are viewed through.¹¹¹ A deep-rooted issue, the problem of identity representation within museum collections has been brought into public discourse by groups such as the Guerrilla Girls, who shed light on representational gender disparities within museums in 1989 through billboards with the following phrase: “Do women

¹⁰⁷ Meehan, “Digital Museum Objects and Memory,” 431.

¹⁰⁸ Maleuvre, *Museum Memories*, 59.

¹⁰⁹ Mondello, “A History Of Museums,” NPR.

¹¹⁰ Maleuvre, *Museum Memories*, 9.

¹¹¹ There are three sources pertinent here. For more information about systematic racism and identity-based discrimination in the museum, see: Li, “An Incomplete History of Exclusion,” 795-825, Berger, “Are Art Museums Racist?,” 143-170, and Coffee, *Museums and Social Responsibility*, 104-135.

need to be naked to get into the Met. Museum? Less than 5% of artists in the Modern Art sections are women, but 85% of the nudes are female”.¹¹² Although this movement was conceived in the 1980s and matters have improved, these improvements have been slow and insufficient. As of 2019, a report into diversity within US museum collections found that 85 percent of artists represented were white and 87 percent were men.¹¹³ Additionally, a 2018 study into museum leadership found that 12 percent of directors in museums are people of colour, an increase of just one percent from 2015, and only 16 percent of curators were non-white.¹¹⁴ Similarly, a 2021 study by On the Move (a research group focused on cultural mobility and inclusivity) found that 87 percent of art venues and festivals in over 40 countries do not include any disabled people in their teams, and 31 percent of arts organisations do not seek out work by disabled artists.¹¹⁵ The continuance of accentuating certain identities over others means that many art museums are not fulfilling their duties as the custodians of memory and identity, but instead choose to mirror inefficacious societal hierarchies that need not exist within their walls.

Memory and identity are intrinsically linked, with memory informing our identities and society shaping our memories.¹¹⁶ As stated by Maurice Halbwachs: “One may say that the individual remembers by placing himself in the perspective of the group, but one may also affirm that the memory of the group realises and manifests itself in individual memories”.¹¹⁷ In following this argument, there is an inherently social aspect to memory, even in concern to individual memories. As a result, we are unable to escape the sociological aspects of both our personal and collective histories as they are far too intertwined with each other. In Kathrin Bachleitner’s assessment of Halbwachs theories on memory, she states that when Halbwachs states that we but echo our memories, the chambers that these echoes find themselves within are our social frameworks.¹¹⁸ With that, both Halbwachs and Bachleitner take the individual out of isolation and places them within a wider framework.¹¹⁹ It is in this individual but social formation of memory that identity and community finds its foundation. This also affects cultural development, where memory too plays a pivotal role. According to anthropologist Jan Assmann,

¹¹² Guerrilla Girls, *Guerrilla Girls*, 23-24.

¹¹³ Topaz et al., “Diversity of artists in major U.S. museums,” 1.

¹¹⁴ Artforum, “Museum Leadership.”

¹¹⁵ On the Move, *Time To Act*, 10.

¹¹⁶ Bachleitner, *Collective Memory*, 167-168.

¹¹⁷ Halbwachs, *On Collective Memory*, 40.

¹¹⁸ Bachleitner, “Collective memory,” 168.

¹¹⁹ Ibid.

‘cultural memory’ is essential to identity, inextricably connected to traditions and institutions, affecting the foundation on which we create monuments, museums, and archives.¹²⁰ The museum — as a social institution — is where we consolidate, grapple with, and understand identity, community, culture, and different forms of memory. Therefore, whilst identity, community, and culture find their foundation in memory, museums find their foundation cyclically locked into social discourses of collective and cultural memories, as well as the identities that form within them.

When it comes to social discourses on identity, nationality has been central. Museums, borne of nationalism, are the institutional manifestation of what Benedict Anderson categorises as an ‘imagined community’.¹²¹ Anderson classifies national identities as imagined because, although the members of a nation will never truly know or connect with one another on a meaningful level, there is a curated image of communion between them.¹²² It is through the museum that the existence of this ‘imagined community’ was perpetuated and conceptualised.¹²³ Perhaps it is the condition of the contemporary cultural institution to move away from the imagined community and into the real. As expressed by Susanne Leeb, international cooperation has overtaken nationalism and globalisation as a method of framing art and culture.¹²⁴ This change can be assessed by contemplating the recent emphasis that has put on oppressed identity groups and their right to a voice. With the Black Lives Matter movement, LGBT+ pride, feminist movements, disability rights activists and a wider, more accepted acknowledgement of the importance of mental health has come demands that respect be paid to identities outside of the ‘dominant’ classifications. This includes institutional representation, specifically when this comes to-representation.¹²⁵

This is in keeping with the society and communities we live within. Art historian Ace Lehner posits the increase of “self-imaging” — a form of self-representation — in the contemporary world as a defining aspect of our time due to the emergence and ubiquitous nature of the selfie.¹²⁶ Lehner argues that just as artists such as Albrecht Dürer (1471-1528) painted

¹²⁰ Assmann, “Communicative and Cultural Memory,” 10-11.

¹²¹ Anderson, *Imagined Communities*, 5-6.

¹²² *Ibid.*

¹²³ Leeb and Samuel, *Museums, Transculturality, and the Nation-State*, 8.

¹²⁴ *Ibid.*

¹²⁵ For more on the importance of institutional representation, see: Wajid and Minott, “Detoxing and Decolonising Museums,” 25-35.

¹²⁶ Lehner, *Self-Representation in an Expanded Field*, 3.

self-portraits, the everyday person partakes in a similar practice today through the dissemination of the selfie.¹²⁷ Their similarities can be seen within the composition of the selfie when compared the self-portrait (see fig. 7. and fig. 8.).¹²⁸ From then to now, the primary difference lies in who we are looking at. As pointed out by visual studies academic Mieke Bal, the canonisation of the Caucasian and masculine is never clearer than looking at, what she calls: “the cult of portraiture”.¹²⁹ Therefore, although some would view the selfie as a newer form of self-centred public display, the self-portrait was the first iteration of aesthetic self-representation. It was just reserved for the ‘dominant’ class. With the increase in communication opportunities via the internet and globalisation, self-representation has become more attainable and even — to some extent — expected. Alongside this has come expectations for cultural institutions to follow suit and allow people to represent themselves in a way the museum has previously failed to.¹³⁰ As the designated custodians, today’s museums are on their way to adapting to these societal changes, allowing varied self-representation to form innovative ideas about memory and identity, as well as the communities in existence due to their intersection. Particularly when this comes to Alzheimer’s and dementia suffers, the housing of memories and identities is especially important, working as a stimulating documentation centre for those who have lost their own pathways to their pasts.

2.3 Museums and their communities

As mentioned, the term ‘community’ continually comes up in reference to the museum today, museum policies and public expectation. Therefore, to understand its significance, it is important to define the word as accurately as possible. As a contextually important term, it is fair to say that ‘community’ only takes true meaning when put into a framework. These frameworks could be anything, long-established or situationally relevant. As a definition, I find sociologist Gerard Delanty explanation as to what makes a community to be quite convincing:

¹²⁷ Ibid., 4-5.

¹²⁸ Ibid.

¹²⁹ Bal, “Visual essentialism and the object of visual culture,” 22.

¹³⁰ See: Lenore Manderson, “Humans on show,” 257-271, specifically her exploration of the treatment of Saartje Baartman and humans on display in museums, for further information on the history of representational inadequacies in museums.

“Communities have been based on ethnicity, religion, class or politics; they may be large or small; ‘thin’ or ‘thick’ attachments may underlie them; they may be locally based and globally organised; affirmative or subversive in their relation to the established order; they may be traditional, modern and even post-modern; reactionary and progressive.”¹³¹

Here, Delanty both gives order and interpretation. There are guidelines to follow, but they can exist for a multitude of reasons and in a multitude of ways. In other words, it is up to us to decide what a community may be and could be, leaving us some autonomy as to which communities we align ourselves with. On a personal level, this is freeing, on an institutional and museological level, this makes the idea of catering towards communities all the more confusing. Even so, the museum has been said to itself be central to its communities’ culture (community here referring to the local, geographically based communities that the museum resides within), a part of community development and social cohesion.¹³² This development or perception of a museum’s place in its community is unsurprising considering its birth right as an institution for societal betterment.¹³³

With that said, although the museum has found itself central to the so-called ‘local community’ in the past few decades, there exists multiple communities within a localised community, making its place as a conduit for ‘social cohesion’ a difficult one. As expressed by Elaine Hooper-Greenhill, when trying to consider visitor needs as a museum it is important to consider the multi-cultural make-up of modern society, especially as there is evidence to suggest that people of divergent backgrounds have different perceptions, interests, and interpretative processes when it comes to exhibitions.¹³⁴ Differences in needs and interests also arise with community markers outside of the cultural, ethnic, and religious. Research into the elderly for example, has found that museum workshops geared towards older groups understandably have much more of a social function when compared to workshops for other demographics.¹³⁵ There is also more of a general demand for workshops when it comes to older communities, as their need for a slower pace, quiet surroundings and breaks is more easily met within a workshop

¹³¹ Delanty, *Community*, 2.

¹³² Crooke, *Museums and Community*, 41.

¹³³ Ibid.

¹³⁴ Hooper-Greenhill, *Museums and Their Visitors*, 100.

¹³⁵ Ibid., 111.

setting.¹³⁶ As is clear, different tactics are needed for different groups, which is why communicating with people within the community the museum wishes to serve has been deemed the natural next step into addressing visitor needs. Jody Stokes-Casey, in her exploration of meaning-making in museum education, states that collaboration with visitors is the way to make meaning in museums and strike a chord with your visitors.¹³⁷ According to Stokes-Casey, through collaborating with their communities, the museum builds up and sustains culture as it should.¹³⁸ This, therefore, ensures the sustainability of your institution too, persuading the trust of the communities you wish to exhibit, serve, and welcome.

The development of these ideas has culminated in museologists pointing towards new systematic approaches to the museum. One pertinent example of this is Nina Simon's *The Participatory Museum* which acts as a call to action and a proposed switch up of traditional, stagnant institutional systems. Simon states that the idea of participatory museology is not new, having over a hundred years of backing.¹³⁹ This means that her ideas are, in many ways, just reiterations of what communities have been asking for ever since the dawn of the museum. We just need to listen. The main ideas that underpin her approach to participation are centring the audience, understanding that visitors each construct their own meanings, and accepting that visitor input works only to rejuvenate public programs and exhibitions.¹⁴⁰ Simon pairs together the needs of the audience and the institution, seeing the two as extensions of one another. In other words, to meet institutional goals and retain core values, there is a need to ensure the active engagement of your visitor pool.¹⁴¹ Applying this to the community being used as an example for this thesis, sufferers of Alzheimer's and dementia, the participatory approach is relevant. As a disease previously overlooked by museums, it is with the collaboration of experts in the field, those with dementia, and museum professionals that initiatives such as the *Meet Me* program and the *House of Memories* have come along.

¹³⁶ Ibid.

¹³⁷ Connolly and Bollwerk, *Positioning Your*, 10-12.

¹³⁸ Ibid.

¹³⁹ Simon, *The Participatory Museum*, ii.

¹⁴⁰ Ibid.

¹⁴¹ Ibid.

2.4 *The House of Memories program*

The *House of Memories (HoM)* program is unique in the sense that it takes place both in the museum and at home. This program was launched in 2013 by the National Museums Liverpool and has been implemented into all seven of the museums under the group's care.¹⁴² These seven museums are as follows: Museum of Liverpool, World Museum, International Slavery Museum, Maritime Museum, Walker Art Gallery, Sudely House, and Lady Lever Art Gallery. As is clear, although art museums take up a large percentage of the museums that the *HoM* program operates in, it is an initiative used in various cultural institutions across Liverpool. Therefore, it not only utilises the therapeutic strength of the art museum, but the personal connections that can be made through any historical artefact or culturally relevant object. The primary aim of the *HoM* program is to create a space where individuals living with dementia can try to access and share their own memories. The program aims to do this whilst also connecting people with their cultural heritage. From interactive memory workshops, where the museums involved use their own collections to trigger memories and stimulate conversations, to training for caregivers and community engagement efforts, the *HoM* program tries to improve the quality of life for participants through a variety of means. The initiative also offers a range of digital resources that can be used outside of the museum space, such as online training modules, memory resources and apps. These tools enable caregivers and individuals with dementia to continue engaging with memory-triggering activities and discussions beyond the museum setting. The initiative uses reminiscence therapy techniques, an intervention that aims to help people with dementia recollect their own histories with the aim to improve their mood and wellbeing.¹⁴³ Whilst researching the program, social scientists Rafaela Neiva Ganga and Kerry Wilson found it to enhance caregivers' understanding of dementia, support them in their role, and strengthen their relationships with those under their care.¹⁴⁴

Throughout its time, it has been subject to various outside evaluations. As the program initially focused on formal caregivers (medically trained, rather than familial), early reports found significant improvements in this area.¹⁴⁵ For example, an evaluation from 2013 (the year

¹⁴² The following description of the House of Memories Liverpool program is based on the 'About' page on the House of Memories website: Liverpool Museums, "About House of Memories."

¹⁴³ Saragih, Tonapa, Yao, Saragih, and Lee, "Effects of reminiscence," 883.

¹⁴⁴ Ganga and Wilson, "Valuing family carers," 583-584.

¹⁴⁵ Ibid., 574.

of the program's inception) found that after participating in the program, participants were left with a deeper understanding of dementia and its effects, were able to assess their own attitudes and preconceived ideas in care situations, and demonstrated an ability to provide more responsive, tailored care rather than just following the 'textbook' approach.¹⁴⁶ In the report, they chalk this success down to the "powerful empathetic qualities of the programme".¹⁴⁷ As mentioned in the previous chapter, empathy is a powerful tool when it comes to Alzheimer's and dementia care. Here it is proven effective in ensuring a positive patient-carer relationship. A later, more in depth, report of the program ten years in shows it to have sustained its value, whilst also providing more focus to areas they may have previously overlooked. In 2016 the *HoM* initiative launched their family caregivers' program to give more attention to informal caregivers.¹⁴⁸ This iteration of the program focuses on giving informal caregivers tools that they may not have been given elsewhere. For this they also partnered with institutions across the UK, including the Leicester Museum and Art Gallery (formerly known as New Walk Museum) and The British Museum in London.¹⁴⁹ After this iteration of the program ended, the participants had overwhelmingly positive feedback across all areas targeted through the program. For example, the vast majority of attendees found the program to combat loneliness and isolation, finding that getting to know other carers was beneficial for their feelings of social exclusion.¹⁵⁰

Currently, according to the 2021-2022 report, the focal points of the program moving forward are as follows: "Social Prescribing", "Loneliness, Exclusion, and Isolation", "Digital Inclusion", and "Prevention, Education and Training".¹⁵¹ As defined in the introduction, a primary concept that underpins this intervention and leads to its success in these areas is the 'social prescription'. The *HoM* program takes on this approach, acting as a way to combat health inequality by aiding sufferers of dementia, as well as their caregivers, another way to seek care.¹⁵² 'Social prescriptions' have become popular across the UK specifically, the result of a nationwide strategy to combat loneliness put into effect in 2017.¹⁵³ The *HoM* is an example of this idea coming to fruition, proving successful in its goal to target loneliness.

¹⁴⁶ Institute of Cultural Capital, *An Evaluation*, 23.

¹⁴⁷ *Ibid.*

¹⁴⁸ Ganga and Wilson, "Valuing Family Carers," 574.

¹⁴⁹ Ganga, Whelan, and Wilson, *Evaluation*, 7.

¹⁵⁰ *Ibid.*, 18.

¹⁵¹ Wilson, *Advancing the Role of Museums*, 15.

¹⁵² *Ibid.*

¹⁵³ Mercer, "Primary Care Providers," E1463-E1464.

When it comes to ‘digital inclusion’, the *HoM* program uses digital approaches to make the program more accessible. The main aspect of the initiative relevant to this is the *My HoM* app, which anyone with a smartphone or tablet can use. This is both for carers and Alzheimer’s and dementia patients, as it makes their training programs and heritage resources accessible remotely.¹⁵⁴ In order to provide for people without access to the equipment needed to access the app, the *HoM* program developed their *Connect My Memories* service in 2021 which loans out tablets to those who need them.¹⁵⁵ Although digital iterations of programs can be a tool for accessibility, there is a digital gap that exists depending on income, geography, gender etc.¹⁵⁶ By providing their users with iPads, the *HoM* program provides a solution for at least one problem concerning digital accessibility. Another, particularly innovative, sub-program that the initiative has recently launched is *On the Road*, an experience that brings the museum to the participant (see fig. 9.). This is particularly useful for care homes or in-patient groups with limited ability to do physical visits. Described as a mobile museum, it functions as an immersive cinema that brings the visitor into the past to various scenes.¹⁵⁷ Some examples include a 1950s style shop, an older version of a city street, and the Liverpool Overhead Railway.¹⁵⁸ The aim here is to bring a person with Alzheimer’s, and perhaps a family member or carer, back to a time in the past as to provide comfort, trigger reminiscence, and provide stimulation for the memory centres.

In an increasingly digital world, it could be said that it is the duty of programs such as the *HoM* to use the digital to their advantage by utilising it as a mode of democratisation. This is especially pertinent when it comes to situations wherein a person is limited in their ability to move, gather, or otherwise socialise. As a global inhibitor, the COVID-19 pandemic brought greater focus onto the possibilities of the ‘digital museum’ as a way to experience heritage. An example of this is the ICOM solidarity project AVICOM, which aimed to investigate the best strategies for developing digital formats for museums, as well as the role that the internet plays in contemporary society.¹⁵⁹ Digital spaces within the realm of museology are often met with criticism, usually concerning authenticity, but have proven useful when it comes to accessibility

¹⁵⁴ Wilson, “Advancing the Role of Museums,” 14.

¹⁵⁵ Ibid.

¹⁵⁶ There are two relevant sources that explore digital divides. See both: Hawkins, “Beyond the Digital,” and Signé, “Fixing the global digital divide.”

¹⁵⁷ National Museums Liverpool, “House of Memories On The Road.”

¹⁵⁸ Ibid.

¹⁵⁹ Faber, Henkel, and Eulenstein, *The COVID19–Challenge*, 2-3.

and participation.¹⁶⁰ This is certainly the case for the *My HoM* app, as it not only allows participants of the program to access its content whenever, but also allows them to upload their own content and share memories with one another.¹⁶¹ These interventions could also function to help older people suffering from technology anxiety feel more comfortable in the contemporary world.¹⁶² Through their training opportunities, available in person and digitally, the *HoM* program not only directly provides care for people suffering from Alzheimer's and dementia, but also gives their caregivers and family members the tools to provide different, improved forms of care via the use of museum archives.

¹⁶⁰ Taher et al., "Reuse and Appropriation," 124.

¹⁶¹ National Museums Liverpool, "My House of Memories App."

¹⁶² See: Czaja et al., "Factors Predicting the Use of Technology," for more information about technology anxiety in older people.

Chapter 3 - Using the tools at your disposal: The future of community programming in art museums

3.1 Inclusion and accessibility

Inclusivity has become an essential part of contemporary museum discourse. But what do we mean when we talk about inclusivity? And what does it look like in practice? Specifically, when it comes to curators and museum staff, there are multiple well-formed methods as to how to approach inclusivity in a cultural institution. This takes on many names, such as ‘the participatory museum’ or ‘community co-curation’, all to the same end of inclusivity.¹⁶³ Particularly relevant when it comes to curating in contemporary art institutions, museum professional Jade French states that there has always been an incentive to push boundaries and experiment with different modes of curation within art museums.¹⁶⁴ Since museum curators have the power to shape our understanding and perception of cultures and communities, there is a need to invite new ways of approaching the craft to properly represent communities and culture.¹⁶⁵ Through being flexible with this, museums can find new and innovative ways to ensure visitors feel welcomed into their space. Since the *Meet Me* program is an especially good example of how to ensure inclusivity and accessibility, it will function as the primary case study for this section.

In following with Eilean Hooper-Greenhill’s exploration of museums and their visitors, there is great importance in considering each visitor’s needs, preferences, and expectations when designing museum programs, as well as understanding that each person’s individual background influences their perception of the same thing.¹⁶⁶ The important take-away from the *Meet Me* program specifically, and from efforts to tap into the therapeutic potential of art museums, is the idea of creating inclusive and accessible atmospheres within museums for those who often do not feel welcomed ordinarily. As expressed by David Fleming in 2002, written a few years before the *Meet Me* program existed, the reasons as to why museums have not been considered inclusive is down to four reasons: “who has run them; what they contain; the way they have been

¹⁶³ See: Mutibwa, Hess, and Jackson, “Strokes of Serendipity,” 157-177 and Simon, *The Participatory Museum*, 349-352.

¹⁶⁴ French, *Inclusive Curating in Contemporary Art*, 4.

¹⁶⁵ Ibid.

¹⁶⁶ Hooper-Greenhill, *Museums and Their Visitors*, 100-101.

run; and what they have been perceived to be for”.¹⁶⁷ According to Fleming, museums have been run by and for the elite, deliberately made to be socially exclusive institutions.¹⁶⁸ When putting the *Meet Me* program up against these criteria, there are differences to be found in the way it has been put together, who it has been put together by and for, and the thematical choices they make during sessions. The *Meet Me* program is funded by the MetLife foundation, an organisation that focuses on encouraging economic mobility for all through providing aid to underrepresented or underprivileged groups.¹⁶⁹ One way they do this is through reinforcing resilience through arts and culture, and prioritising physical and mental wellbeing.¹⁷⁰ By connecting with other institutions, another example being the New York University Center of Excellence for Brain Aging and Dementia, the people behind the *Meet Me* program have sought out the knowledge of those outside of the field of museology, acquiring knowledge from experts who are especially familiar with the community their initiative is tailored towards.¹⁷¹

Simply by stepping outside of their own perceptions and expertise, the MoMA utilises collaboration for the purpose of gaining multiple perspectives. Positioned by Sandell and Janes as self-serving institutions often unable to concern themselves with issues outside of their own purview, the approach taken by the MoMA for this program acts as a departure from older museum hierarchies.¹⁷² As explored by Laura-Edythe Coleman in her exploration of inclusion in American museums, museums frequently refuse to attach themselves to social organisations or agencies, thus declining to become channels for social change in the process.¹⁷³ There are a few reasons as to why this is. The most important being that it does not act in accordance with traditional museum structures, wherein the myth of museum neutrality still has its place.¹⁷⁴ The *Meet Me* program, by virtue of aligning itself with an institution for social change, chooses not to stand upon the mythical, neutral ground that it was built upon. This, paired with the often ironically forgotten demographic it has positioned itself in service of, separates the institution from its traditional iterations.

¹⁶⁷ Fleming, “Positioning the Museum,” 213.

¹⁶⁸ Ibid.

¹⁶⁹ Metlife Foundation, “Sustainability.”

¹⁷⁰ Ibid.

¹⁷¹ Meet Me, “The History of The MoMA Alzheimer's Project.”

¹⁷² Janes and Sandell, “Posterity Has Arrived,” 14.

¹⁷³ Coleman, *Understanding and Implementing Inclusion in Museums*, 4-5.

¹⁷⁴ Ibid., 4.

In terms of what the program guides show their participants during sessions, the artworks and the themes selected generally act in accordance with the goal of social inclusion (e.g. ‘The Portrayal of Women in Art’). This also extends to the manner of which the artworks are presented to the group, as their specific needs are accounted for. The guides are instructed to pick only five to six artworks per session to ensure the participants are not overwhelmed or left with little time to express their input.¹⁷⁵ They are also directed, if they are working with the same group multiple times, to get to know their groups' personal interests so they can cater to them specifically.¹⁷⁶ As such, participants are not lectured, spoken over, nor deemed below the instructor. Instead, their wishes are used as inspiration, and they are actively involved in the curation of their own programming. As stated by Fleming, “creating the socially inclusive museum is not an overnight job”.¹⁷⁷ The MoMA proves this by deciding to focus one of its earliest paths towards inclusion and accessibility on just one group. Thankfully, both the *Meet Me* program and the *HoM* initiative are well-rounded exemplars of how to implement innovative practices for community inclusion and accessibility. It is through efforts such as these that museums can take inspiration and effect change in their own institutions.

3.2 *Persuading participation*

As a remedy to institutional inadequacies regarding inclusion and accessibility, efforts to persuade audience participation have become a central point of deliberation within academic discourse and museum management. Although this has already been made a point of relevance for the *Meet Me* program, the participatory approach is particularly pertinent to the *House of Memories* initiative. Therefore, it will act as the principal case study for this section and lead the discussion into this approach further. In regard to how the *HoM* functions as a participatory program, there are several sociological and museological concepts that are relevant. Assessing it through the lens of these concepts' aids in a greater comprehension the initiative, and a better understanding as to how its format can be implemented elsewhere. Moreover, the process of audience engagement within the structure of *HoM* is relevant to groups that may not, at face value, have any overlap with the Alzheimer's and dementia community. One particularly

¹⁷⁵ The Museum of Modern Art, *Meet Me*, 112-113.

¹⁷⁶ Ibid.

¹⁷⁷ Fleming, “Positioning the Museum,” 221.

interesting facet of *HoM* is the way the organisers have — deliberately or not — incorporated ‘contact zones’ and ‘third spaces’ into their program. By creating a cross-cultural dialogue between the museum and program participants, the organisers encourage active participation.¹⁷⁸ This is especially true when looking into how the *HoM* has used its platform to accommodate Yemeni elders, a newer iteration of the initiative that puts less emphasis on dementia. The ‘contact zones’, ‘third spaces’, and interactive design come together for the primary purpose of participation, succeeding in turning the museums involved into participatory institutions.

In her guidebook on what it means to be a participatory institution, Simon explores the ‘social object’. These objects spark conversation, often referring to artworks, objects, or experiences that encourage people to share personal experiences, and allow visitors to focus on something outside of themselves and each other.¹⁷⁹ Therefore, they are a way to connect to one another and make interpersonal encounters more comfortable.¹⁸⁰ By making conversation easier, ‘social objects’ persuade participation through lowering the inhibitions that usually serve to distract us from connecting with the content in front of us and each other. An example of how ‘social objects’ are used within the *HoM* program is found within the content uploaded to the *My HoM* app. Ranging from familiar sounds to images of old cinema tickets, the app prioritises objects pertinent to the users’ pasts, encouraging them to make digital ‘memory trees’ of objects relevant to them (fig. 10.). This allows those with dementia to connect with their caregivers, each other, and personal memories that may have faded into obscurity.

Simon regards ‘social objects’ such as these as pivotal to participatory museology. This is because they allow tour guides or museum educators to personalise the museum experience, which invites visitors to engage with the program genuinely and actively.¹⁸¹ Spotlighting these objects grants communities a voice, allowing them to endow the museum object with their personal experiences. As a result, this gives them the power to change the museum landscape through processes of interpretation. When shared with tour groups, this becomes all the more powerful.¹⁸² As expressed by Richard Sandell, museums have the ability to empower individual

¹⁷⁸ For further exploration about how contact zones and participation interact, See: Askins and Pain, *Contact zones*, 803-121.

¹⁷⁹ Simon, *The Participatory Museum*, 127-128.

¹⁸⁰ Ibid.

¹⁸¹ Ibid, 152.

¹⁸² The Museum of Modern Art, *Meet Me*, 19-52.

and communal self-determination, as well as act as a catalyst for inter-community respect.¹⁸³ By persuading communication through objects, artworks, or experiences of social significance, programs such as the *HoM* empower their participants to express themselves freely, connecting with one another in the process. Sequentially, this enables the museum to become a place of understanding between different demographics; in this case: between the museum, sufferers of dementia, and their carers — three groups of differing communal perceptions.

The inter-communal exchanges garnered through the *HoM* program additionally exist as an exchange within a ‘contact zone’ or ‘third space’. As defined in the introduction, Homi K. Bhabha states that ‘third spaces’ exist as conduits for the creation of meaning between two or more people that previously would not have existed without connection within the ‘third space’.¹⁸⁴ In the confines of the ‘third space’ exist ‘contact zones’. ‘Contact zones’ were initially associated with museums through James Clifford’s 1997 essay: ‘Museums as contact zones’, but the term originates from visual artist Mary Louise Pratt who described them as spaces where two formerly separated subjects meet and grapple with each other, becoming entwined in the process.¹⁸⁵ As a result of Clifford’s essay, the ‘contact zone’ has become synonymous with collaborative, inclusionary museology, especially in Europe.¹⁸⁶ It is important to note that the ‘contact zone’ and the ‘third space’ originally and solely referred to inter-cultural exchange between colonised cultures and their colonial oppressor.¹⁸⁷ Despite this, it is applicable to any inter-communal exchange, and therefore works as a way to explore and understand any community-based program.

The first iteration of the *HoM* program works as a ‘third space’ that connects two communities primarily: dementia sufferers and carers. Perhaps this is why the program has been so easily re-attributed for other means, with a primary example coming from their *Connecting with Yemeni Elders’ Heritage* project. Abdulwase Sufian, a young boy of Yemeni descent that has a grandmother with dementia, was first to see the potential in the *My House of Memories* app for the Yemeni community.¹⁸⁸ After contacting the *HoM* team with his idea, the Yemeni elders project was created, aiming to repurpose the app for older Yemeni’s living with or without

¹⁸³ Sandell, “Social inclusion,” 45.

¹⁸⁴ Bhabha, *The Location of Culture*, 36.

¹⁸⁵ Pratt, *Imperial Eyes*, 6.

¹⁸⁶ Boast, “Neocolonial Collaboration,” 56.

¹⁸⁷ Pratt, *Imperial Eyes*, 6, and Clifford, “Museum as contact zones,” 190-194.

¹⁸⁸ National Museums Liverpool, “Connecting with Yemeni Elders Heritage.”

dementia.¹⁸⁹ The organisers of the initiative then began working with Sufian, the local Yemeni community and five relevant organisations (such as the Liverpool Arabic Centre) to create a section of the app dedicated to Yemeni heritage.¹⁹⁰ As of June 2022, there were over 100 digitised objects, sounds, films, and music to browse upon, and the app became available in both English and Arabic.¹⁹¹ As a result of using the app to care for his grandmother, Sufian acted as a catalyst for the app's digital 'third space' becoming reappropriated for cross-cultural collaboration and intracultural remembrance. Since there is an inherent mental strain that comes along with immigration and cultural displacement, with immigrant children at high risk of developing psychopathological conditions due to the stress caused by acculturation, mental illness is a common concern for immigrant communities.¹⁹² With this comes barriers, particularly cultural barriers in the form of mental health stigmatisation.¹⁹³ This stigmatisation tends to affect formal forms of care more so than informal forms of care.¹⁹⁴ By connecting Yemeni elders with their culture and enabling them to share objects socially relevant to them, the *My HoM* app was repurposed to soothe those struggling to assimilate to another culture, whilst acting as a site of collective memory to connect people with their heritage. In being an informal manifestation of mental health care where mental health issues need not be disclosed, there is less cultural stigma for an intervention like this compared to traditional psychotherapies.¹⁹⁵

Art historian Nicole Meehan posits the digital museum object as a polyvocal instrument.¹⁹⁶ As such, the objects on the app give all who interact with them different perspectives depending on their own background, making it a digital 'third space' packed full of different perspectives. With community input becoming a significant expectation of the contemporary museum, the *HoM* online and offline replications can provide a better understanding of how to persuade active and wilful participation for museums overall. As stated by Jenkins et al, when speaking on participatory cultures: "not every member must contribute, but all must believe they are free to contribute when ready and that what they contribute will be

¹⁸⁹ Ibid.

¹⁹⁰ Ibid.

¹⁹¹ Ibid.

¹⁹² Jensen, "Understanding Immigration," 28.

¹⁹³ El Khatib, Alyafei, and Shaikh, "Understanding Experiences," 1-2.

¹⁹⁴ Ibid., 17.

¹⁹⁵ Ibid.

¹⁹⁶ Meehan, "Digital Museum Objects and Memory," 431.

appropriately valued”.¹⁹⁷ This is exactly what the *HoM* program does. By inviting their participants to contribute whenever they feel ready, whether through the app or in person, and valuing these inputs to the point of creating entirely new iterations of the initiative based on these suggestions, participants are given incentive to speak their mind.¹⁹⁸ Subsequently, through replicating the methods used by the *HoM* program (and the *Meet Me* initiative), community participation in museums can be approached more carefully and thoughtfully.

3.3 Prescribing art museums as intersectional care

In the contemporary understanding of community and identity, intersectionality is key. Just as we overlap and connect with each other, so do our identities. This process is also internal, as the different facets of our identities interact and become entwined with one another. Art is one way to investigate the different parts of ourselves and each other, making art museums a suitable forum for these interactions. Paired with the therapeutic nature of the arts, art museums have multiple tools at their disposal to reach various communities simultaneously. The aforementioned ideas surrounding ‘social prescriptions’ are becoming a more popular way to engender mental health improvement. It is with inspiration for this that the concept of ‘prescribing art museums’ has come to fruition. According to the American Psychiatric Association, racial/ethnic, gender, and sexual minorities tend to suffer from higher rates of mental illness when compared to the rest of the population.¹⁹⁹ The reasons for this span from problems such as lack of access to high quality care, cultural stigma, and discrimination.²⁰⁰ In regard to those suffering from dementia, research conducted by Maastricht University and the University of Exeter found a link between mental health issues — particularly depression — and early-onset dementia.²⁰¹ This means that it is possible that the link between mental health and dementia may be even deeper than once thought, a part of the foundation of the disease as much as it is a consequence. There is also evidence to affirm the mental health strain put on dementia caregivers, with Japanese caregivers reporting lower quality of life when compared to non-

¹⁹⁷ Jenkins, Clinton, Purushotma, Robison, and Weigel, *Confronting the Challenges of Participatory Culture*, 7.

¹⁹⁸ In reference to the Yemeni Elders program, discussed above.

¹⁹⁹ American Psychiatric Association, “Mental Health Disparities.”

²⁰⁰ Ibid.

²⁰¹ Hendriks et al., “Risk Factors for Young-Onset Dementia.”

caregivers with matching personal attributes and backgrounds.²⁰² Consequently, when it comes to under-represented groups in the museum, mental health is a major concern to account for when putting the focal point on communities in museum practice. Considering the emphasis that the updated ICOM definition put on communities and inclusivity, curating informed procedures for communities is currently of tantamount importance. Although this is not new, the change in the ICOM definition — as well as the increase in museums positing their institutions as agents of care — marks a global change in museum priorities.

Intersectionality, a concept borne of feminist ideology, refers to the complex intersection that occurs between multiple forms of identity discrimination, particularly the convergence between different schools of differentiation — whether that be economic, psychological, or cultural.²⁰³ As explored by Rita Kaur Dhamoon and Olena Hankivsky in their assessment of intersectionality at the Canadian Museum of Human Rights, all traumas in this context are interlinked due to the wider systems of domination they belong to.²⁰⁴ Therefore, there are existing connections between oppressed groups, particularly when this comes to the effect of alienation on mental health. Although taking an intersectional view of identity can become convoluted — due to the endless variations that can exist within identity groupings — perceiving identity through this lens offers a solution to this through the attention the concept pays to relational aspects.²⁰⁵ Intersectionality thrives on the idea that although we are individuals — a unique mix of identity categorisations and personal experience — we continue to be a part of communities that, too, overlap with one another. In other words, the concept asks us to walk a tightrope between the collective and the independent, all whilst remaining cognizant about the ways they converge.

As mentioned in chapter two, there is a lack of trust between minority groups and museums when compared to other populations. Considering that early European museology did not regard the heritage nor culture of the communities they exhibited as anything other than colonial capital — their homes used as places to procure objects to the end of educating their own societies — it is no surprise that there is a relationship to repair, if any relationship at all.²⁰⁶

²⁰² Koyama et al., “Mental health among younger and older caregivers,” 112-113.

²⁰³ Brah and Phoenix, “Ain’t I A Woman?,” 76.

²⁰⁴ Dhamoon and Hankivsky, “Intersectionality,” 262.

²⁰⁵ Ibid., 262-263.

²⁰⁶ See: Ariese and Wróblewska, “Increasing Inclusivity,” 37-50, for an exploration of the treatment of cultural objects and their home countries by early museums.

When thinking of what this means for ‘intersectional care’, inter-community care is of great significance; primarily because this means finding ways to cater towards multiple communities at once by striking at a core similarity between them. A focus on ‘social prescriptions’ for mental health could work as a form of intersectional care by appealing to a shared need. It is possible to do this whilst utilising the therapeutic nature of art, making the museum a more inviting place in the process. Championing mental health and empathetic design may also motivate museum practitioners to use other means to relate to the groups they aim to represent, further inform themselves, and approach under-represented museum groups in a more thoughtful manner.

As previously mentioned, mental health is a chief concern for minority racial/ethnic, gender and sexuality groups, people with disabilities, and immigrants. According to a 2018 CDC study — although a diverse group with different needs, symptoms, and diagnoses — 32.8 percent of adults with physical and/or mental disabilities report frequent emotional distress, much higher than those who are able-bodied.²⁰⁷ In regard to LGBT+ individuals, a survey by Stonewall UK (2018) found that although 52 percent of LGBT+ people have experienced depression within the last year, one in seven did not reach out to their healthcare provider — due to fear of discrimination — and one in eight reported experiencing healthcare provider discrimination.²⁰⁸ Research done into the racial and ethnic disparities in American mental health care too found that healthcare provider discrimination was a primary cause of said disparities, as well as lack of access due to economic inequality.²⁰⁹ Here, we see where different minority groups intersect with one another. In this case, between LGBT+ groups, those with disabilities, racial/ethnic minorities, and economically disadvantaged groups. Therefore, tapping into the therapeutic nature of art may help those struggling with reaching out find alternative ways to cope, particularly when other options fail them.

There are art museums utilising their tools towards this end already, with a notable example being the *Open up with Vincent* program at the Van Gogh Museum in Amsterdam. In this program, the work of Vincent Van Gogh (1853-1890) — an artist that famously struggled with mental illness — is used to help those struggling with their mental health.²¹⁰ This is done through mindful art sessions, yoga classes, and meditation videos inspired by Van Gogh

²⁰⁷ Centers for Disease Control and Prevention, “The Mental Health of People with Disabilities.”

²⁰⁸ Bachmann and Gooch, “LGBT in Britain: Health Report,” 5-11.

²⁰⁹ McGuire and Miranda, “New Evidence,” 3-4.

²¹⁰ Van Gogh Museum, “Open Up with Vincent.”

artworks that can be viewed online.²¹¹ There is also teaching material for schools, as well as painting workshops directed in collaboration with healthcare institutions.²¹² The variation of groups targeted for this program, ranging from school children to those seeking treatment within healthcare institutions, sheds light on the reach that initiatives like this can have.

Referring back to the *Meet Me* program, visitor reviews provide evidence for the effectiveness of these types of initiative. One participant expressed their excitement at the change it caused in their husband's (a sufferer of dementia) behaviour, stating that he began to invite family members — whom he would not ordinarily reach out to himself — to join him in the experience.²¹³ Another, a dementia sufferer themselves, expressed that they feel more connected to the world after each session.²¹⁴ Considering that social isolation and a feeling of disconnection are major complaints for those suffering from dementia, this is a major step towards better quality of life. Although particularly necessary for those suffering from cognitive disabilities, there is something to be said for the universal need for therapeutic spaces for everyone. As something that most can benefit from, prescribing art museums for better emotional wellbeing is inherently intersectional.

3.4 Digital futures and social sustainability

In an increasingly digital world, the museum needs to continue to adapt to render it a sustainable institution. Otherwise, it is at risk of losing its status as a societal asset. In general, museums have done a good job of adapting to the contemporary world, with the *HoM* program as a particularly good example of this. By creating access outside of physical visitation through their app and travelling immersive experience, the *HoM* program has shown the many paths a museums can travel when using digital tools to their advantage. Taking the effect COVID-19 had on older people — especially those with Alzheimer's and dementia — using digital solutions as a mode of connection has been of tantamount importance during lockdowns and quarantines.²¹⁵ It is also essential to mention the democratic aspect of online museology. This mirrors a core

²¹¹ Ibid.

²¹² Ibid.

²¹³ The Museum of Modern Art, *Meet Me*, 28.

²¹⁴ Ibid., 37.

²¹⁵ See the following two studies: Rainero et al., "The Impact of COVID-19," and Merla, "COVID-19 Accelerated Cognitive Decline."

intention that most museums share: to educate the masses in an accessible manner.²¹⁶ As such, although the motivation of museums has evolved, this core ideal remains fundamental.

Currently, as indicated by cultural theorists Theopisti Stylianou-Lamberta, Nikolaos Boukasb, and Marina Christodoulou-Yeralia, museums are simultaneously cultural definers and tourism products, creating spaces to be educated about other cultures as well as your own.²¹⁷ As such, to remain relevant, using digital tools within the museum and creating digital archives for access outside of physical visitation is a valuable investment. In 2019, the member states of the EU signed a declaration of cooperation for the digitisation of cultural heritage, emphasising its use in the preservation of culture.²¹⁸ This was at the third iteration of the ‘EU Digital Day’, which forms annually to discuss the digital future of EU member states.²¹⁹ Signifying the importance of digital solutions, the existence of ‘Digital Day’ — which includes political agreements on the advancements of digital heritage — exemplifies how vital it is to ensure that museums are taking the necessary steps to keep up with digital advancements. The limelight put on digital museology became particularly useful when the COVID-19 pandemic caused a closure of over 90 percent of museums and galleries globally in March 2020.²²⁰ Becoming the focal point of ‘EU Digital Day’ 2020, COVID-19 closures revealed the importance of digital inclusion around Europe. The ‘Prize for Digital Coexistence’ for digital heritage projects had three categories to win within: engagement, participation, and the “corona special prize”, identifying the value of digital heritage in the wake of the pandemic.²²¹ As is clear, digital solutions became fast and readily available answers to many of the problems caused by COVID-19. Because of this, it could be said that digital access saved the museum during a time of closure, rendering it important and accessible in a time it could have been completely unavailable.

Along with digital archives and online collections, social media became another way in which museums could connect with their visitors. A 2020 ICOM report found that over half of museums self-reportedly had turned to social media as a solution to their closure.²²² By July 2020, The American Alliance of Museums found that 75 percent of US museums had added

²¹⁶ See 2022 ICOM definition: ICOM, “Museum Definition.”

²¹⁷ Stylianou-Lamberta, Boukas, and Christodoulou-Yeralia, “Museums and Cultural Sustainability,” 566.

²¹⁸ Van Saaze, Rasterhoff, and Archey, “Imagining the Future,” 1.

²¹⁹ European Commission, “Digital Day 2018.”

²²⁰ UNESCO, *Museums Around the World in the Face of COVID-19*, 4.

²²¹ European Commission, “Digital Day 2020 in Germany.”

²²² Giannini and Bowen, “Museums and Digital Culture,” 194.

virtual education programming to their repertoire, continuing their responsibility as an educational entity despite the restrictions placed upon them.²²³ In regard to visitors, Colleen Dilenschneiders' research on the increase in digital engagement during the global quarantine stage of the pandemic found that by September 2021, more people were engaging with cultural institutions online than prior to the pandemic, or compared to the earlier stages of museum closures.²²⁴ What we can see here is not only an institutional leaning on digital solutions, but a public one too. Elisa Giaccardi, in her exploration of heritage and social media, states that social media has the unique ability to have us rethink our understanding of heritage through the lens of participation.²²⁵ Via our omnipresent smart devices, or as put by Giaccardi: "personal memory devices", we are given relatively low barriers for interaction, opinion, and creative output.²²⁶ This lands us in a participatory culture that gives us the unique ability to cooperate despite geographical, language, or cultural barriers.²²⁷ Although participatory cultures are not new, social media acts as an incomparably far-reaching conduit for them — the COVID-19 pandemic reiterating their potential.

Digital museology not only refers to online content, but interactive and digital displays within museums too. Curator Erkki Huhtamo visited Manchester's Museum of Science and Industry (MOSI), a museum that utilises many interactive displays, but found himself disappointed by their lack of depth. Huhtamo stated that: "It was as if there had been nothing at all to be gained beyond the momentary acts of punching and tapping, pushing and pulling".²²⁸ Unfortunately, for Huhtamo, the digital displays used at *MOSI* acted purely as an attraction, rather than a new way of disseminating rich information.²²⁹ This, of course, need not be the case when it comes to interactive and digital design, the use of such proving to be extremely valuable when used thoughtfully. Taking the *HoM: On the Road* interactive museum as an example, the digital reproductions were specifically tailored towards the target group. The program made use of the fascination surrounding digital museology whilst providing a connection with the visitors' cultural heritage, memories, and childhood.²³⁰ The reactions to the initiative — from the visitors

²²³ March, "COVID-19 and Museum Social Media Content," 2.

²²⁴ Dilenschneider, "Increased digital engagement."

²²⁵ Giaccardi, *Heritage and Social Media*, 1.

²²⁶ *Ibid.*, 3.

²²⁷ *Ibid.*

²²⁸ Huhtamo, "Museums, Interactivity," 65.

²²⁹ *Ibid.*

²³⁰ National Museums Liverpool, "House of Memories: On the Road."

to the museum workers seeing it in action for the first time — were very telling. During a video interview, one elder commented: “It did take me back...to when I was a kid”, remarking upon how the immersive display aided in her ability to remember.²³¹ As for the museum workers experiencing their efforts come to fruition, Operations Director Audrey Tan commented that the portable museum gave her and her colleagues a new perspective too, stating that the dialogue brought up by the interactive display reminded them to not take the visitors' life histories for granted.²³² Consequently, digital displays such as these not only allow for new ways of connecting and exploring heritage but have the potential dialogue between visitors and the museum. This method lends itself towards a participatory museology and into the territory of ‘third space’ interactions.

With that said, the *HoM* program not only uses art and art museums for their initiative, but uses an ethnographic, object-based approach too. As such, some of the tactics that they use (specifically when it comes to the *My HoM* app and the *On The Road* museum) are different from comparable initiatives available in art museums. If art museums were to take inspiration from this initiative specifically, they would have the opportunity to gain the varied, mixed-museological and digital perspective the *HoM* has. Other relevant tools — especially those regarding the power of cultural objects and art relevant to personal/cultural background that are primarily found in the digital iterations of the *HoM* initiative — could, too, be incorporated into their own tailored programs. Although the *Meet Me* program does employ some digital tools within their program, especially when it comes to the dissemination of their guides for the purposes of training, much of the actual program is done within the museum with non-digital tools and resources.²³³ Especially when it comes to the *My HoM* app, which has already been made useful for groups outside of those suffering from dementia, the foreseeable use of technical solutions for the purpose of connection and participation for a multitude of communities are plentiful. In the world we live in today, one marked by the ubiquity of technology, incorporating these tools both within and outside of the museum has proven effective. Serving as an effective apparatus towards the goal of becoming truly inclusive, participatory, and accessible entities —

²³¹ Ibid.

²³² Ibid.

²³³ See the following for more information about the set-up of the *Meet Me* at MoMA program: The Museum of Modern Art, *Meet Me*, 19-52.

something many have voiced a desire for — it seems that digital solutions may be pivotal in keeping museums socially sustainable.

Conclusion

In summation, when it comes to the future of community-focused programming in art museums, focusing on the therapeutic nature of art, employing digital tools, and using participatory designs seems to be the way forward. When thinking of this in reference to the *HoM* and *Meet Me* programs, the approach they use works towards the inclusion of communities that are often overlooked in museums. By exploring their methods and effectiveness, it has become clear that there are lessons that can be learnt from the way each of these programs go about connecting with their communities. The methods of inclusion each program uses overlap with one another and academic explorations of the subject. As practical examples of these academic approaches to the subject, the cocktail of inclusive action each program utilises can be assessed to the end of discerning what happens when theory meets practice.

The ideas behind Nina Simon's participatory museum, and the approaches Simon suggests museums take to become participatory institutions, are particularly relevant for both initiatives. In regard to the *HoM* program, its primary focus being on community outreach across Liverpool rather than community outreach in a single institution, the program has taken on many different forms, giving various communities a voice. The program's use of 'third spaces', interactive design and participatory methodology has revealed the importance of empathy in ensuring the health of your community. The methods of inclusion that the program uses aids in a mutual understanding between the museum and their target community, something contemporary museums should strive for. Paired with the approach taken by the *Meet Me* program, both prove the importance of empathy and participatory design. Where the *Meet Me* program differs is in the fact that it focuses on the healing ability of art, rather than objects that trigger remembrance.

This thesis first discussed how art and art museums can be used for therapeutic means, and how this specifically interacts with Alzheimer's and dementia care. Notably, the *Meet Me* program stands out as a successful initiative that brings art into the lives of those affected by Alzheimer's. By creating inclusive and accessible spaces within museums, this program not only provides a platform for thought expression but also fosters meaningful connections, easing the emotional burdens faced by both individuals with dementia and their caregivers. As a program specifically made for these groups, it speaks to the methods that some museums have implemented to ensure their institutions are as accessible and inclusive as possible. It is through these examples that we can understand the power art can have as a form of therapy, the way art

programs in museums can be used as a conduit for this, and what art museums can do to ensure their visitors feel welcomed and understood.

This is especially important for groups such as those suffering from Alzheimer's and dementia, as well as any other group whose needs may differ due to their condition. With their unique perspective, the art museum can provide a form of healing that may not be found elsewhere. Going beyond the purview of Alzheimer's and dementia sufferers, this thesis argues that using the power of the art museum as a place of psychological healing is not only a facet of their social responsibility, but the path towards an accessible and inclusive future. As museums increasingly recognize their social roles and strive for inclusivity, the intersection of art and therapy offers a promising avenue for addressing broader societal issues. The positive outcomes observed in programs like *Meet Me* emphasise the potential of art institutions to contribute meaningfully to the well-being of diverse communities. The ongoing evolution of these programs reflects a shift toward a more inclusive and socially engaged understanding of the role that art and museums can play in enhancing the human experience.

This evolution has a binding connection to the evolution of the concept of museum responsibility. Earlier perspectives, exemplified by figures like George Browne Goode and events like *The Great Exhibition* of 1851, emphasise a hierarchical, class-based approach to disseminating specialist knowledge for the enlightenment of society. However, the contemporary understanding, reflected in the 2022 update of the International Council of Museums (ICOM) definition, places a strong emphasis on accessibility, inclusivity, diversity, and community participation. The shift in museum responsibility is marked by a move towards a 'for the community, by the community' approach. Museums today are challenged to address issues of representation, diversity, and inclusivity, driven in part by public movements. Activism has become a facet of contemporary museum responsibility, with institutions recognizing the need to use their authority and voice for the betterment of society, especially among minority communities where trust in institutions may be lacking.

The *HoM* program serves as a notable example of a participatory and community-focused initiative. It addresses the specific needs of individuals with Alzheimer's and dementia, providing a platform for them and their caregivers to engage with cultural heritage. The program's success lies in its emphasis on participatory museology, incorporating interactive elements, 'social objects', and 'third spaces'. Furthermore, its adaptability is evident in initiatives like *Connecting*

with Yemeni Elders, showcasing how the participatory approach can be extended to diverse communities, addressing any mental health concerns or issues connected to them. As the twenty-first century museum navigates the complexities of an increasingly diverse and globalised society, the responsibility of museums is characterised by a commitment to actively engage communities, foster inclusivity, and act as agents of positive change. The *HoM* stands as a compelling model, demonstrating the potential of participatory approaches in creating meaningful connections contributing to the overall well-being of diverse communities.

The significance of audience participation within art museums specifically lies in their status as custodians of memory and identity, which reveals a complex interplay between historical representations, societal frameworks, and the evolving nature of cultural institutions. The persistent challenge of underrepresentation within museum collections, as highlighted by movement groups like the Guerrilla Girls, underscores the need for these institutions to reassess and diversify their narratives. The concept of the ‘national identity’ as an imagined community, prompts us to always consider the evolving sociological landscape in regard to the museum, as well as the currently relevant imperative for museums to evolve beyond traditional paradigms. The contemporary call for increased self-representation, as exemplified by the rise of self-imaging and demands for inclusivity from marginalised groups, challenges museums to re-evaluate their role as arbiters of cultural memory. Intersectionality emerges as a key lens through which museums can navigate the intricate web of identity, acknowledging the interconnectedness of various forms of discrimination.

As museums increasingly adopt a role in intersectional care, there is an opportunity to bridge gaps, foster trust, and engage with underrepresented communities through the therapeutic nature of the arts. The digitalization of museums presents both a challenge and an opportunity. The *HoM* program showcases the potential of digital tools in creating accessible, inclusive, and participatory experiences, especially crucial in times of global crises like the COVID-19 pandemic. Embracing digital futures not only ensures social sustainability but also expands the reach and impact of museums beyond physical confines. In the ever-evolving landscape of cultural institutions, museums must continue to adapt by embracing diversity, intersectionality, and digital innovation. By doing so, they can fulfil their duty as custodians of memory and identity, ensuring that the narratives they preserve and present reflect the richness and plurality of the societies they serve. Ultimately, the art museum stands at the intersection of tradition and

innovation, offering a dynamic space for the continuous exploration of who we are, where we come from, and where we may collectively journey.

If art museums are to take all of these lessons and use them for the future of community-focused programming, their main takeaway should be to ensure that all the tools at their disposal are being used. After all, that is what they're there for. For an institution that has historically been at odds with the communities they display or attempt to represent, the museum has an abnormally high chance for redemption. By looking for inspiration through their own programs and using what they have learnt for the betterment of the multiple communities they are in service to, art museums could create a new generation of relevant and effective community programs. They just have to continue working introspectively, a journey many have already begun to embark upon.

Illustrations



Fig. 1. (Title page) Photo of a 2024 *Meet Me at MoMA* session, pictured in front of artwork: Jackson Pollock, *One: Number 31*, 1950, oil and enamel paint on canvas, 269.5 x 530.8 cm (New York, Museum of Modern Art, inv. nr. 7.1968).



Fig. 2. Rapanui, *Hoa Hakananai'a* ('lost, hidden or stolen friend'), 1000 -1200 (approx.), Carved, inlaid, and painted basalt, coral, and stone, 242 x 96 x 47 cm (London, The British Museum, inv. nr. Oc1869,1005.1).

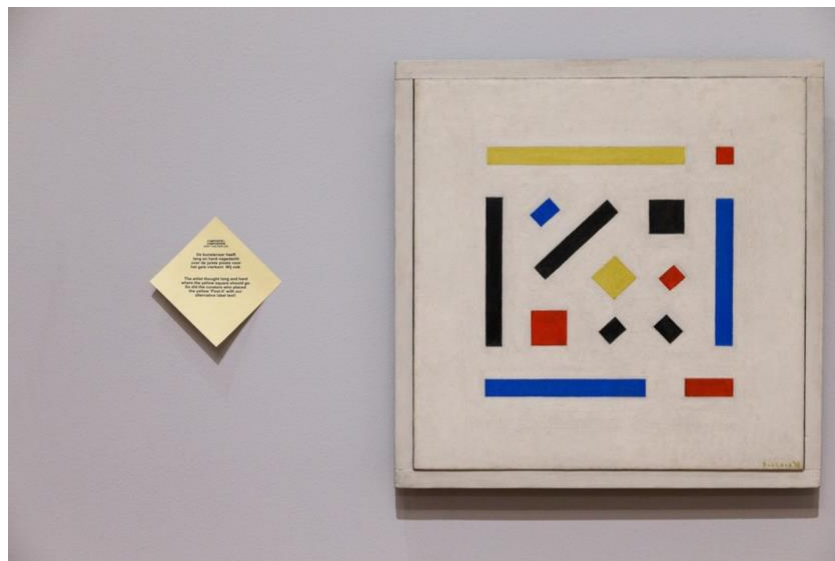


Fig. 3. Photo of a Post-It from the *Art is Therapy* Exhibition (2012), pictured next to artwork: Bart van der Leek, *Composition*, 1918, oil on canvas, 52.2 x 52.2 cm (Amsterdam, Rijksmuseum, inv. nr. SK-A-5022).



Fig. 4. Photo of a Post-It from the *Art is Therapy* Exhibition (2012), pictured next to: Rembrandt van Rijn, *Isaak and Rebekka*, c. 1665 - 1669, oil on canvas, 121.5 x 166.5 cm (Amsterdam, Rijksmuseum, inv. nr. SK-C-216).

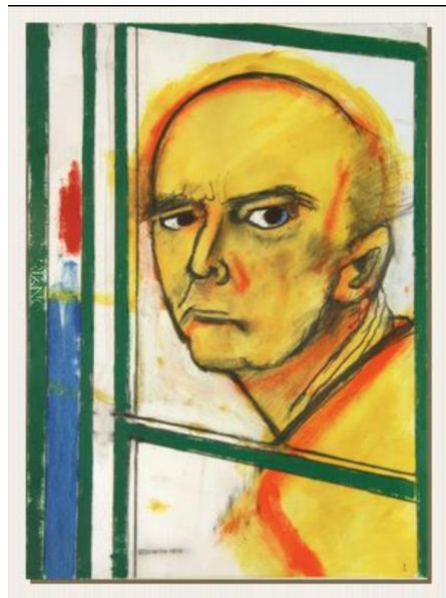


Fig. 5. William Utermohlen, *Self Portrait (With Easel Yellow and Green)*, 1996, oil and pencil on paper, 46 x 35 cm (Private collection owned by the Estate of William Utermohlen)

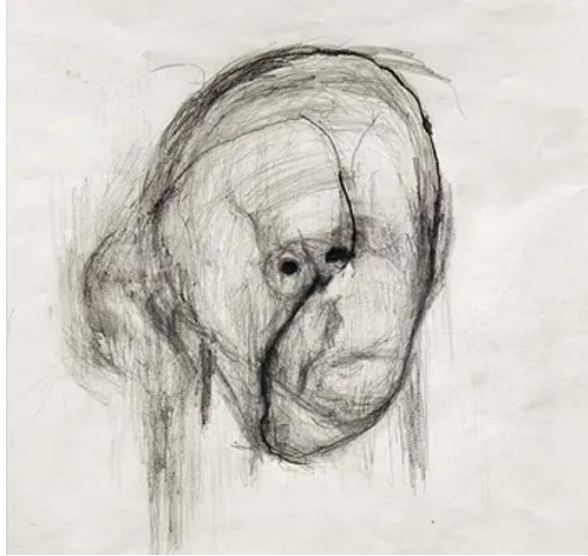


Fig. 6. William Utermohlen, *Head I*, 2000, pencil on paper, 40.5 x 33 cm (Private collection owned by the Estate of William Utermohlen)



Fig. 7. Albrecht Dürer. *Self-Portrait in Furred Coat*, 1500, oil on lime panel, 67.1 x 48.9 cm (Munich, Alte Pinakothek, inv. nr. 537)



Fig. 8. Cindy Sherman, *Selfie*, 2018, digitally altered photograph, 27.1 x 10.3 cm (personal Instagram post)



Fig. 9. *House of Memories: On the Road* participant interacting with a digital replica of a typical 1950s shop, 2021, digital photograph, 17.2 x 28.6 cm (Liverpool, House of Memories)



Fig. 10 *My House of Memories* app, example of a digital memory tree, app screenshot, 18.7 x 25.5 cm (UK, Disability Collaborative Network)

Illustration credits

Fig. 1. Downloaded 19 October 2023. <https://www.moma.org/calendar/events/8963>.

Fig. 2. Downloaded 8 November 2023.
https://www.britishmuseum.org/collection/object/E_Oc1869-1005-1.

Fig. 3. Downloaded 18 October 2023. <https://www.volkskrant.nl/nieuws-achtergrond/alain-de-botton-in-het-rijksmuseum-een-drievoudige-belediging~b6d482bf/?referrer=https://www.google.com/>.

Fig. 4. Downloaded 20 October 2023. <https://www.volkskrant.nl/nieuws-achtergrond/alain-de-botton-in-het-rijksmuseum-een-drievoudige-belediging~b6d482bf/?referrer=https://www.google.com/>

Fig. 5. Downloaded 21 October 2023. <https://www.williamutermohlen.com/1991-2000-late-self-portraits?pgid=lm96rcmy3-205eba31-ba10-4a89-a7b0-06c4d4a5fa5c>.

Fig. 6. Downloaded 2 November 2023. <https://www.williamutermohlen.com/1991-2000-late-self-portraits?pgid=lm96rcmy3-a4a22266-66c2-4fa9-abbf-33c47d66698d>.

Fig. 7. Downloaded 2 November 2023.
<https://www.sammlung.pinakothek.de/en/artwork/Qlx2QpQ4Xq/albrecht-duerer/selbstbildnis-im-pelzrock>.

Fig. 8. Downloaded 26 October 2023.
<https://www.nytimes.com/interactive/2018/10/05/magazine/instagram-cindy-sherman-ugly-beauty.html>.

Fig. 9. Downloaded 19 October 2023. <https://www.liverpoolmuseums.org.uk/house-of-memories/on-the-road>.

Fig. 10. Downloaded 23 October 2023. <https://www.musedcn.org.uk/2015/09/14/my-house-of-memories-app/>.

Bibliography

Secondary Literature

Adamson, Edward, and John Timlin. *Art as Healing*. London: Coventure, 1984.

Alcaraz, Celeste, Margee Hume, and Gillian Sullivan Mort. "Creating sustainable practice in a museum context: adopting service-centricity in non-profit museums." *Australasian Marketing Journal* 17, no. 4 (2009): 219-229.
<https://doi.org/10.1016/j.ausmj.2009.06.003>.

Anderson, Benedict. *Imagined Communities: Reflections on the Origin and Spread of Nationalism*. Rev. ed. London, New York: Verso, 2006.

Ariese, Csilla E., and Magdalena Wróblewska. "Increasing Inclusivity." In *Practicing Decoloniality in Museums: A Guide with Global Examples*, 37–50. Amsterdam: Amsterdam University Press, 2022. <https://doi.org/10.2307/j.ctv23dx2pf.5>.

Askins, Kye, and Rachel Pain. "Contact Zones: Participation, Materiality, and the Messiness of Interaction." *Environment and Planning D: Society and Space* 29, no. 5 (2011): 803-821.
<https://doi.org/10.1068/d111109>.

Assmann, Jan. "Communicative and Cultural Memory." In *Cultural Memory Studies: An International and Interdisciplinary Handbook*, edited by Astrid Erll and Ansgar Nünning, 109-118. Berlin, New York: De Gruyter, 2010.
<https://doi.org/10.1515/9783110207262.2.109>.

Bachleitner, Kathrin. *Collective Memory in International Relations*. Oxford: Oxford University Press, 2021.

Bachmann, Chaka L., and Becca Gooch. *LGBT in Britain: Health Report*. London: Stonewall, 2018.

Bal, Mieke. "Visual essentialism and the object of visual culture." *Journal of Visual Culture* 2, no. 1 (April 2003): 5-32. <https://doi.org/10.1177/147041290300200101>.

Bartlett, John. "Easter Islanders call for return of statue from British Museum." *The Guardian*, June 4, 2019. <https://www.theguardian.com/culture/2019/jun/04/easter-islanders-call-for-return-of-statue-from-british-museum>.

Berger, Maurice. "Are Art Museums Racist?." *Art in America* 78, no. 9 (September 1990): 68-77.

Bhabha, Homi K. *The Location of Culture*. London: Routledge, 1994.

- Bienvenu, Beth. "Museums and ADA@25: Progress and looking ahead." September/October, 2015. https://www.aam-us.org/wp-content/uploads/2018/01/2015-Sept_Oct-Museums-and-Accessibility.pdf.
- Binnie, Jennifer. "Does Viewing Art in the Museum Reduce Anxiety and Improve Wellbeing?." *Museums & Social Issues* 5, no. 2 (July 2013): 191-201. <https://doi.org/10.1179/msi.2010.5.2.191>.
- Boast, Robin. "Neocolonial Collaboration: Museum as Contact Zone Revisited." *Museum Anthropology* 34, no. 1 (Spring 2011): 56-70. <https://doi.org/10.1111/j.1548-1379.2010.01107.x>.
- Bonilla-Merchay, Laurant, and Bruno Brulon Soares. "Arriving at the Current Museum Definition: A Global Task and a Decentralising Exercise." *Museum International* 74, no. (July 2023): 134-147. <https://doi.org/10.1080/13500775.2022.2234200>.
- Brah, Avtar and Ann Phoenix. "Ain't I A Woman? Revisiting Intersectionality." *Journal of International Women's Studies* 5, no. 3 (2004): 75-86.
- Carla. "Art as therapy." *The Lancet Psychiatry* 9, no. 5 (May 2022): 351-352. [doi:10.1016/S2215-0366\(22\)00117-1](https://doi.org/10.1016/S2215-0366(22)00117-1).
- Carrier, David. "The Display of Art: An Historical Perspective." *Leonardo* 20, no. 1 (1987): 83–86. <https://doi.org/10.2307/1578216>.
- Chancellor, Bree, Angel Duncan and Anjan Chatterjee. "Art therapy for Alzheimer's disease and other dementias." *Journal of Alzheimer's Disease* 39, no. 1 (2014): 1–11. <https://doi.org/10.3233/JAD-131295>.
- Chatterjee, Helen, and Guy Noble. *Museums, Health and Well-Being*. London: Routledge, 2013.
- Clifford, James. "Museums as Contact Zones." In *Routes: Travel and Translation in the Late Twentieth Century*, edited by James Clifford, 188–219. Cambridge: Harvard University Press, 1997.
- Coffee, Kevin. *Museums and Social Responsibility*. London: Routledge, 2022. <https://doi.org/10.4324/9781003222811>.
- Coleman, Laura-Edythe. *Understanding and Implementing Inclusion in Museums*. Lanham: Rowman & Littlefield, 2018.
- Connolly, Robert P., and Elizabeth A. Bollwerk, eds. *Positioning Your Museum as a Critical Community Asset: A Practical Guide*. Lanham: Rowman & Littlefield Publishers, 2016.

- Cowl, Andrielle L. and Joseph E. Gaugler. "Efficacy of Creative Arts Therapy in Treatment of Alzheimer's Disease and Dementia: A Systematic Literature Review." In *Activities, Adaptation and Aging* 38, no. 4 (October 2014): 281-330.
<https://doi.org/10.1080/01924788.2014.966547>.
- Crooke, Elizabeth. *Museums and Community: Ideas, Issues and Challenges*. London: Routledge, 2007.
- Czaja, Sara, Neil Charness, Arthur D. Fisk, Christopher Hertzog, Sankaran N. Nair, Wendy A. Rogers, and Joseph Sharit. "Factors predicting the use of technology: findings from the Center for Research and Education on Aging and Technology Enhancement (CREATE)." *Psychology and aging* 21, no. 2 (2006): 333-52.
<https://doi.org/10.1037/0882-7974.21.2.333>.
- De Botton, Alain, and John Armstrong. *Art as Therapy*. New York: Phaidon Press, 2013.
- Delanty, Gerard. *Community*. 3rd ed. London: Routledge, 2018.
<https://doi.org/10.4324/9781315158259>.
- Dhamoon, Rita Kaur, and Olena Hankivsky. "Intersectionality and the Canadian Museum for Human Rights." *Review of Education, Pedagogy, and Cultural Studies* 37, no. 2-3 (2015): 261-263. <https://doi.org/10.1080/10714413.2015.1028853>.
- Dodd, Jocelyn, Richard Sandell, Debbie Jolly, and Ceri Jones, eds. *Rethinking the Representation of Persons with Disabilities in Museums and Galleries*. Leicester: University of Leicester Research Centre for Museums and Galleries, 2008.
- Dodd, Jocelyn, and Ceri Jones. *Mind, Body, Spirit: How Museums Impact Health and Wellbeing*. Leicester: University of Leicester Research Centre for Museums and Galleries, 2014.
- Duncan, Carol. *Civilizing Rituals: Inside Public Art Museums*. London: Routledge, 1995.
<https://doi.org/10.4324/9780203978719>.
- El Khatib, Hania, Aisha Alyafei, and Madiha Shaikh. "Understanding experiences of mental health help-seeking in Arab populations around the world: a systematic review and narrative synthesis." *BMC Psychiatry* 23 (May 2023): 1-26.
<https://doi.org/10.1186/s12888-023-04827-4>.
- Faber, Michael, Matthias Henkel, and Michael Louis Eulenstein. *The COVID19–Challenge: Museums and their digital engagement in times of crises*. Germany: ICOM-AVICOM, ICOM-MPR, ICOM Germany, 2023. https://drive.google.com/file/d/1X-zGj860WWLurjyf_3x9_fJ4DpJLjN8n/view.
- Fernández-Olmos, Margarite and Lizabeth Paravisini-Gebert. *Healing Cultures: Art and Religion As Curative Practices in the Caribbean and Its Diaspora*. New York: Palgrave, 2001.

- Fleming, David. "Positioning the Museum for Social Inclusion." In *Museums, Society, Inequality*, edited by Richard Sandell, 206-218. London: Routledge, 2002.
- French, Jade. *Inclusive Curating in Contemporary Art: A Practical Guide*. Arc Humanities Press, 2020. <https://doi.org/10.2307/j.ctv15d7zjc>.
- Ganga, Rafaela Neiva, Gayle Whelan, and Kerry Wilson. *Evaluation of the House of Memories Family Carers Awareness Day*. Liverpool: Institute of Cultural Capital, 2017. <https://www.artshealthresources.org.uk/docs/evaluation-of-thehouse-of-memories-family-carers-awareness-day/>.
- Ganga, Rafaela Neiva, and Kerry Wilson. "Valuing family carers: the impact of House of Memories as a museum-led dementia awareness programme." *International Journal of Care and Caring* 4, no. 4 (2020): 573-593. <https://doi.org/10.1332/239788220X15966470811065>.
- Garcez, Michelle L., Ana Carolina B. Falchetti, Francielle Mina, and Josiane Budni. "Alzheimer's Disease associated with Psychiatric Comorbidities." *Anais da Academia Brasileira de Ciencias* 87, no. 2 (2015): 1461-73. <https://doi.org/10.1590/0001-3765201520140716>.
- Giaccardi, Elisa, ed. *Heritage and Social Media: Understanding heritage in a participatory culture*. London: Routledge, 2012. <https://doi.org/10.4324/9780203112984>.
- Giannini, Tula, and Jonathan P. Bowen. "Museums and Digital Culture: From Reality to Digitality in the Age of COVID-19" *Heritage* 5, no. 1 (2022): 192-214. <https://doi.org/10.3390/heritage5010011>.
- Giddens, Anthony. *Modernity and Self-Identity: Self and Society in the Late Modern Age*. Stanford: Stanford University Press, 1991.
- Goode, George Brown. "The museums of the future." In *Report of the United States National Museum for the year ending June 30, 1889*, 427-445. Smithsonian Institution United States National Museum, 1889.
- Goode, G. Brown. "The Relationships and Responsibilities of Museums." *Science* 2, no. 34 (1895): 197-209.
- Guerrilla Girls. *Guerrilla Girls: The Art of Behaving Badly*. San Francisco: Chronicle Books, 2020.
- Gurian, Elaine Heumann. *Centering the Museum: Writings for the Post-Covid Age*. London: Routledge, 2021. <https://doi.org/10.4324/9781003096221>.

- Hacking, Sue, Jenny Secker, Helen Spandler, Lyn Kent, and Jo Shenton. "Evaluating the impact of participatory art projects for people with mental health needs." *Health & social care in the community* 16, no. 6 (2008): 638-48. <https://doi.org/10.1111/j.1365-2524.2008.00789.x>
- Hawkins, Stephanie. "Beyond the Digital Divide: Issues of Access and Economics." *Canadian Journal of Information and Library Science* 29, no. 2 (June 2005): 171-89.
- Heesbeen, Anouk. *Unforgettable: How to Make Art and Culture Accessible to People with Dementia and Their Loved Ones*. Amsterdam: The Stedelijk Museum Amsterdam, The Van Abbemuseum, and VU Medical Centre, 2017. <https://www.onvergetelijkmuseum.nl/wp-content/uploads/2018/02/EN-Onvergetelijkmuseum-PDF.pdf>.
- Hendriks, Iris, Franka J. M. Meiland, Debby L. Gerritsen, and Rose-Marie Dröes. "Implementation and impact of unforgettable: an interactive art program for people with dementia and their caregivers." *International psychogeriatrics* 31, no. 3 (2019): 351-362. <https://doi.org/10.1017/S1041610218000959>.
- Hendriks, Stevie, Janice M. Ranson, Kirsten Peetoom, Ilianna Lourida, Xin You Tai, Marjolein de Vugt, David J. Llewellyn, and Sebastian Köhler. "Risk Factors for Young-Onset Dementia in the UK Biobank." *JAMA neurology* (2023): e234929. <https://doi.org/10.1001/jamaneurol.2023.4929>.
- Hoffmann, Edye. "Adult learning enrichment for people living with dementia and their caregivers: Early observations of introducing andragogic principles in adapting an existing museum-based program." *Alzheimer's & Dementia* 18, no. S9 (2022): e066042. <https://doi.org/10.1002/alz.066042>.
- Hooper-Greenhill, Eilean. *Museums and Their Visitors*. London: Routledge, 1994.
- Huang, Si-Sheng. "Depression among caregivers of patients with dementia: Associative factors and management approaches." *World journal of psychiatry* 12, no. 1 (January 2022): 59-76. <https://doi.org/10.5498/wjp.v12.i1.59>.
- Huhtamo, Erkki. "Museums, Interactivity, and the Tasks of "Exhibition Anthropology"." In *Museum and Archive on the Move: Changing Cultural Institutions in the Digital Era*, edited by Oliver Grau, 65-82. Berlin, Boston: De Gruyter, 2017. <https://doi.org/10.1515/9783110529630-005>.
- ICOM Nederland. *The Museum Definition: a Fact Sheet*. July 2020. https://icom.museum/wp-content/uploads/2021/01/10-07-29_fact-sheet-museum-definitie_ENG.pdf.
- Institute of Cultural Capital. *An Evaluation of House of Memories Dementia Training Programme: Northern Model*. Liverpool: National Museums Liverpool, 2013.

- <https://images.liverpoolmuseums.org.uk/2020-06/hom-evaluation-northern-model-2013.pdf>.
- Janes, Robert R., and Gerald T. Conaty, eds. "Introduction." In *Looking Reality in the Eye: Museums and Social Responsibility*. Calgary: University of Calgary Press, 2005.
<https://doi.org/10.2307/j.ctv6cfpwc>.
- Janes, Robert R., and Richard Sandell. "Posterity Has Arrived: The Necessary Emergence of Museum Activism." In *Museum Activism*, 1st ed., 1–22. London: Routledge, 2019.
<https://doi.org/10.4324/9781351251044-1>.
- Jenkins, Henry, Katie Clinton, Ravi Purushotma, Alice J. Robison, and Margaret Weigel. *Confronting the Challenges of Participatory Culture: Media Education for the 21st Century*. Chicago: The MacArthur Foundation, 2006.
- Jensen, Bryant T. "Understanding Immigration and Psychological Development." *Journal of Immigrant & Refugee Studies* 5, no. 4 (2007): 27-48.
https://doi.org/10.1300/J500v05n04_02.
- Kaplan, Frances F., ed. *Art Therapy and Social Action: Treating the World's Wounds*. London: Jessica Kingsley Publishers, 2006.
- Koyama, Asuka, Masateru Matsushita, Mamoru Hashimoto, Noboru Fujise, Tomohisa Ishikawa, Hibiki Tanaka, Yutaka Hatada, Yusuke Miyagawa, Maki Hotta, and Manabu Ikeda. "Mental health among younger and older caregivers of dementia patients." *Psychogeriatrics : the official journal of the Japanese Psychogeriatric Society* 17, no. 2 (2017): 108-114. <https://doi.org/10.1111/psyg.12200>.
- Leeb, Susanne and Nina Samuel, eds. *Museums, Transculturality, and the Nation-State: Case Studies from a Global Context*. Bielefeld: transcript Verlag, 2022.
<https://doi.org/10.1515/9783839455142>.
- Lehner, Ace, ed. *Self-Representation in an Expanded Field: From Self-Portraiture to Selfie, Contemporary Art in the Social Media Age*. Basel: MDPI, 2021.
- Li, Tiffany. "An Incomplete History of Exclusion: Modern and Contemporary Black Art and the US Art Museum." *Southern California Interdisciplinary Law Journal* 30, no. 3 (2021): 795-826.
- Liu, Aoxiang. "The Psychological Impact of Art Mental Health Teaching on Students Suffering from Traumatic Stress Disorder." *CNS Spectrums* 28, no. S2 (2023): S62–S62.
<https://doi.org/10.1017/S1092852923004066>.
- Maleuvre, Didier. *Museum Memories: History, Technology, Art*. Stanford: Stanford University Press, 1999.

- Manderson, Lenore. "Humans on Show: Performance, Race and Representation." *Critical African Studies* 10, no. 3 (May 2019): 257-271.
<https://doi.org/10.1080/21681392.2019.1610009>.
- March, Laura. "COVID-19 and museum social media content." *Arts Education Policy Review* (2023): 1-9. <https://doi.org/10.1080/10632913.2023.2240930>.
- Mateus-Berr, Ruth. "Creating an Empathetic Society for Dementia through Art: Art, Social Design and Artistic Research." In *Arts & Dementia: Interdisciplinary Perspectives*, edited by Ruth Mateus-Berr and L. Vanessa Gruber, 100-153. Berlin, Boston: De Gruyter, 2021.
- McGuire, Thomas G., and Jeanne Miranda. "New evidence regarding racial and ethnic disparities in mental health: policy implications." *Health affairs* 27, no. 2 (2008): 393-403. <https://doi.org/10.1377/hlthaff.27.2.393>.
- Meehan, Nicole. "Digital Museum Objects and Memory: Postdigital Materiality, Aura and Value." *Curator: The Museum Journal* 65, no. 2 (April 2022): 417-434.
<https://doi.org/10.1111/cura.12361>.
- Mercer, Caroline. "Primary Care Providers Exploring Value of "Social Prescriptions" for Patients." *CMJ* 190, no. 49 (December, 2019): E1463-E1464.
<https://doi.org/10.1503/cmaj.109-5689>.
- Merla, Lucia, Maria Cristina Montesi, Jessica Ticali, Bruno Bais, Alessandro Cavarape, and GianLuca Colussi. "COVID-19 Accelerated Cognitive Decline in Elderly Patients with Pre-Existing Dementia Followed up in an Outpatient Memory Care Facility." *Journal of Clinical Medicine* 12, no. 5 (2023). <https://doi.org/10.3390/jcm12051845>.
- Mutibwa, Daniel H., Alison Hess, and Tom Jackson. "Strokes of serendipity: Community co-curation and engagement with digital heritage." *Convergence* 26, no. 1 (April 2018): 157-177. <https://doi.org/10.1177/1354856518772030>.
- On the Move. *Time To Act: How Lack of Knowledge in the Cultural Sector Creates Barriers for Disabled Artists and Audiences*. British Council, 2021.
<https://www.disabilityartsinternational.org/wp-content/uploads/2022/01/TIMETO2.pdf>.
- Polini, Partice. "Conveying the experience of Alzheimer's Disease through art: the later paintings of William Utermohlen." In *Looking into Later Life*, edited by Rachael Davenhill, 289-318. London: Routledge, 2007.
- Poria, Yaniv, Arie Reichel, and Yael Brandt. "People with disabilities visit art museums: An exploratory study of obstacles and difficulties." *Journal of Heritage Tourism* 4, no. 2 (January 2009): 117-129.

- Pratt, Mary Louise. *Imperial Eyes: Travel Writing and Transculturation*. 2nd ed. London: Routledge, 2007. <https://doi.org/10.4324/9780203932933>.
- Rainero, Innocenzo, Amalia C. Bruni, Camillo Marra, Annachiara Cagnin, Laura Bonanni, Chiara Cupidi, Valentina Laganà, et al. "The Impact of COVID-19 Quarantine on Patients With Dementia and Family Caregivers: A Nation-Wide Survey." *Frontiers in aging neuroscience* 12 (2021): 1-13. <https://doi.org/10.3389/fnagi.2020.625781>.
- Rijksmuseum. "Alain de Botton on Art Is Therapy in the Rijksmuseum." Youtube Video, 1:01:46. May 12, 2014. <https://www.youtube.com/watch?v=ZMb5mik9H7w&t=194s>.
- Rubin, Judith A. *Introduction to Art Therapy: Sources & Resources*. 2nd ed. New York: Routledge, 2010.
- Sandell, Richard. "Social inclusion, the museum and the dynamics of sectoral change." *Museum and Society* 1, no. 1 (2003): 45–62.
- Saragih, Ita Daryanti, Santo Imanuel Tonapa, Ching-Teng Yao, Ice Septriani Saragih, and Bih-O Lee. "Effects of reminiscence therapy in people with dementia: A systematic review and meta-analysis." *Journal of psychiatric and mental health nursing* 29, no. 6 (April 2022): 883-903. <https://doi.org/10.1111/jpm.12830>.
- Scheidt, Rick J. "I Remember Better When I Paint." *The Gerontologist* 56, no. 5 (October 2016): 968–969. <https://doi.org/10.1093/geront/gnw122>.
- Schröder, Brigitta. "Changing Perspectives: How Art Can Enhance Quality of Life in People Living with Dementia." In *Arts & Dementia: Interdisciplinary Perspectives*, edited by Ruth Mateus-Berr and L. Vanessa Gruber, 42-53. Berlin, Boston: De Gruyter, 2021.
- Selberg, Scott. "Modern Art as Public Care: Alzheimer's and the Aesthetics of Universal Personhood." In *Medical Anthropology Quarterly* 29, no. 4 (December 2015): 473-91. doi:10.1111/maq.12199.
- Shears, Jonathon, ed. *The Great Exhibition, 1851: A Sourcebook*. Manchester: Manchester University Press, 2017.
- Silverman, Lois H. "The therapeutic potential of museums as pathways to inclusion." In *Museums, Society, Inequality*, edited by Richard Sandell, 66-81. London: Routledge, 2002.
- Silverman, Lois H. *The Social Work of Museums*. London: Routledge, 2009.
- Simon, Nina. *The Participatory Museum*. Santa Cruz: Museum 2.0, 2010.
- Stylianou-Lambert, Theopisti, Nikolaos Boukas, and Marina Christodoulou-Yerali. "Museums and cultural sustainability: stakeholders, forces, and cultural policies." *International*

- Journal of Cultural Policy* 20, no.5 (2014): 566-587.
<https://doi.org/10.1080/10286632.2013.874420>.
- Taher, Hassan, Giuseppina Addo, Pille Pruulmann Vengerfeldt, Maria Engberg, and Åsa Harvard Maare. "Reuse and Appropriation: Remediating Digital Museum Collections and Digital Tools for a Participatory Culture in Transition." *Baltic Screen Media Review* 10, no. 1 (April 2022): 122-138. <https://doi.org/10.2478/bsmr-2022-0009>.
- The Museum of Modern Art (MoMA). *Meet Me: Making Art Accessible to People with Dementia*. New York: The Museum of Modern Art, 2009.
https://www.moma.org/visit/accessibility/meetme/_assets/momaorg/shared/pdfs/docs/meetme/MeetMe_FULLL.pdf.
- Thompson, Rachel, Angel Duncan, and Jessica Sack. "Arts in Mind: A Multidisciplinary Approach to Museum Programs for Persons Living with Young-Onset and Early-Stage Alzheimer's Disease." *International Journal of Lifelong Learning in Art Education* 4 (2021): 61-73. <https://doi.org/10.25889/w9pt-fp36>.
- Topaz, Chad M., Bernhard Klingenberg, Daniel Turek, Brianna Heggeseeth, Pamela E. Harris, Julie C. Blackwood, C. Ondine Chavoya, Steven Nelson, and Kevin M. Murphy. "Diversity of artists in major U.S. museums." *PLOS ONE* 14, no. 3 (March 2019).
<https://doi.org/10.1371/journal.pone.0212852>.
- Tough, Hannah, Johannes Siegrist, and Christine Fekete. "Social relationships, mental health and wellbeing in physical disability: a systematic review." *BMC public health* 17, no.1 (May 2017): 1-18. <https://doi.org/10.1186/s12889-017-4308-6>.
- Ulman, Elinor. "Art Therapy: Problems of Definition." *Bulletin of Art Therapy* 1, no. 2 (Winter 1961): 10-20.
- UNESCO. *Museums around the world in the face of COVID-19*. Paris: UNESCO, 2020.
<https://unesdoc.unesco.org/ark:/48223/pf0000373530>.
- Unruh, Leanne. "Dialogical Curating: Towards Aboriginal Self-Representation in Museums." *Curator: The Museum Journal* 58 (January 2015): 77-89.
<https://doi.org/10.1111/cura.12099>.
- Van Saaze, Vivian, Claartje Rasterhoff, and Karen Archey. "Imagining the Future of Digital Archives and Collections – Editorial." *Stedelijk Studies Journal* 10 (2020), 1-12.
<https://doi.org/10.54533/StedStud.vol010.art01>.
- Wajid, Sara, and Rachael Minott. "Detoxing and Decolonising Museums." In *Museum Activism*, edited by Robert R. Janes and Richard Sandell, 25-35. London: Routledge, 2019.
- Wilson, Kerry. *Advancing the Role of Museums in Health and Social Care*. Liverpool: National Museums Liverpool, 2022.

Websites

- Alzheimer's Disease International. "Dementia Statistics." Accessed January 22, 2024. <https://www.alzint.org/about/dementia-facts-figures/dementia-statistics/>.
- American Alliance of Museums. "Museums and Trust 2021." Last modified September 30, 2021. <https://www.aam-us.org/2021/09/30/museums-and-trust-2021/>.
- American Psychiatric Association. "Mental Health Disparities: Diverse Populations." Accessed January 19, 2024. <https://www.psychiatry.org/psychiatrists/diversity/education/mental-health-facts>.
- American Psychiatric Association. "What is Psychotherapy?." Accessed January 20, 2024. <https://www.psychiatry.org/patients-families/psychotherapy>.
- Art Museum Teaching. "Museums are not Neutral." Last modified July, 2020. <https://artmuseumteaching.com/2017/08/31/museums-are-not-neutral/>.
- Artforum. "Museum Leadership Remains Predominantly White in 2018, Study Finds." Last modified January 29, 2019. <https://artforum.com/news/museum-leadership-remains-predominantly-white-in-2018-study-finds-242060/>
- Centers for Disease Control and Prevention (CDC). "The Mental Health of People with Disabilities." Last modified November 20, 2023. <https://www.cdc.gov/ncbddd/disabilityandhealth/features/mental-health-for-all.html>.
- Dilenschneider, Colleen. "Increased digital engagement is a "new normal" for cultural entities (DATA)." IMPACTS. Last modified September 29, 2021. <https://www.colleendilen.com/2021/09/29/increased-digital-engagement-is-the-new-normal-for-cultural-entities-data/>.
- European Commission. "Digital Day 2018." Last modified March 8, 2021. <https://digital-strategy.ec.europa.eu/en/events/digital-day-2018#:~:text=Digital%20Day%202018%20took%20place,Council%20of%20the%20European%20Union>.
- European Commission. "Digital Day 2020 in Germany." Last modified June 30, 2020. <https://data.europa.eu/en/news-events/news/digital-day-2020-germany>.
- GOV.UK Office for Health Improvement & Disparities. "Social prescribing: applying All Our Health." Last modified January 27, 2022. <https://www.gov.uk/government/publications/social-prescribing-applying-all-our-health/social-prescribing-applying-all-our-health>.
- Government of the Netherlands. "MHPSS worldwide: facts and figures." Accessed January 18, 2024. <https://www.government.nl/topics/mhpss/mhpss-worldwide-facts-and-figures>.

- ICOM. "Museum Definition." Accessed January 23, 2024.
<https://icom.museum/en/resources/standards-guidelines/museum-definition/>.
- Leicester Museums. "Leicester Museum & Art Gallery." Accessed January 20, 2024.
<https://www.leicestermuseums.org/leicester-museum-art-gallery/>.
- Liverpool Museums. "About House of Memories." Accessed January 20, 2024.
<https://www.liverpoolmuseums.org.uk/house-of-memories/about>.
- Meet Me. "The History of The MoMA Alzheimer's Project." Accessed January 18, 2024.
<https://www.moma.org/visit/accessibility/meetme/resources/#history>.
- Mental Health Foundation UK. "Dementia," Last modified 15 February, 2022.
<https://www.mentalhealth.org.uk/explore-mental-health/a-z-topics/dementia>.
- Metlife Foundation. "Sustainability." Accessed January 21, 2024.
<https://www.metlife.com/sustainability/MetLife-Foundation/>.
- MoMA. "The History of The MoMA Alzheimer's Project." Accessed January 20, 2024.
<https://www.moma.org/visit/accessibility/meetme/resources/#history>.
- Mondello, Bob. "A History Of Museums, 'The Memory Of Mankind'." NPR. Last modified July 31, 2009. <https://www.npr.org/2008/11/24/97377145/a-history-of-museums-the-memory-of-mankind>.
- Monocle Films. "Art is Therapy - Rijksmuseum, Amsterdam." Youtube Video, 7:16. January 27, 2015. <https://www.youtube.com/watch?v=GmFRDWBUaoY>.
- National Museums Liverpool. "Connecting with Yemeni Elders Heritage." Accessed January 19, 2024. <https://www.liverpoolmuseums.org.uk/house-of-memories/connecting-yemeni-elders-heritage>.
- National Museums Liverpool. "House of Memories: My House of Memories App." Accessed January 21, 2024. <https://www.liverpoolmuseums.org.uk/house-of-memories/on-the-road>.
- National Museums Liverpool. "House of Memories: On The Road." Accessed January 20, 2024.
<https://www.liverpoolmuseums.org.uk/house-of-memories/on-the-road>.
- Signé, Landry. "Fixing the global digital divide and digital access gap." Brookings. Last modified July 5, 2023. <https://www.brookings.edu/articles/fixing-the-global-digital-divide-and-digital-access-gap/>.

The Museum of Modern Art (MoMA). "Meet Me at MoMA: MoMA Through Time." Accessed January 19, 2024. https://www.moma.org/interactives/moma_through_time/2000/meet-me-at-moma/.

Van Gogh Museum. "Open Up with Vincent." Accessed January 19, 2024. <https://www.vangoghmuseum.nl/en/about/organisation/inclusion-and-accessibility-policy/open-up-with-vincent>.

World Health Organization. "Ageing and Health." Last modified October 1, 2022. <https://www.who.int/news-room/fact-sheets/detail/ageing-and-health>.