



The UK's Ageing Population: Challenges and opportunities for museums and galleries

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University of Oxford

The British
Museum

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AGE FRIENDLY
MUSEUMS NETWORK

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The British
Museum

The British Museum was founded in 1753, the first national public museum in the world. From the beginning it granted free admission to all 'studious and curious persons'. Visitor numbers have grown from around 5,000 a year in the eighteenth century to nearly 6 million today. The collection of the British Museum comprises over 8 million objects spanning the history of the world's cultures: from the stone tools of early man to twentieth century prints. Partnerships and learning are central to the Museum's work, making the collections accessible to as wide an audience as possible, locally, nationally and internationally.

More information about the British Museum can be found at www.britishmuseum.org

The Oxford Institute of
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The Oxford Institute of Population Ageing, University of Oxford was established in 1998, funded by a grant from the National Institute of Health (National Institute on Aging - NIA) to establish the UK's first population centre on the demography and economics of ageing populations. The Institute's aim is to undertake multi-disciplinary research into the implications of population change.

More information about the Institute can be found here: www.ageing.ox.ac.uk

Acknowledgements

The following people have been extremely helpful in compiling this report:

Claire Benjamin, House of Memories National Museums Liverpool

Piotr Bienkowski, Paul Hamlyn Foundation

Rachel Cafferty and Daisy Hythe-Clayton, Stroke Association

Helen Chatterjee, University College London and the National Alliance for Museums Health and Wellbeing

Alexandra Coulter, All Party Parliamentary Group on Arts, Health and Wellbeing/ Arts & Health South West

Lorna Cruickshanks, the Geffrye Museum

Andrea Donner, Manchester Jewish Museum

Ruth Edson, Manchester City Galleries and Manchester Art Gallery

Helen Fountain, Museum of Oxford

Danielle Garcia, IWM North

Karen Garvey, Bristol Museums, Galleries & Archives

Jessica Harris, NVCO

Perdita Hunt, Watts Gallery

Kara Jarrold, Sense

Michelle Kindleysides, Beamish Museum

Louise Lanigan, Manchester City Council

Rachel Leckie, Riverside Museum Glasgow

Naomi Lewis, Salford Museum and Art Gallery

Diana Morton, City of Edinburgh Council

Alex Nicholson-Evans, Birmingham Museums Trust

Mark O'Neill, Glasgow Life

John Orna-Ornstein, Arts Council England

Ian Oxley and Marcus Pitt, National Trust

Laura Phillips, The British Museum

Effie Phillips, Dulwich Picture Gallery

Helen Shearn, South London and Maudsley NHS Foundation Trust

Aileen Strachan, Glasgow Museums

Jane Turner, Age-Friendly Museums Network and the British Museum

Domenico Sergi, Horniman Museum and Gardens

David Slater, Entelechy Arts

Esme Ward, Manchester Museum and The Whitworth

Ed Watts, The Whitworth

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PHOTO: SHARED EXPERIENCE PROGRAMME AT THE BRITISH MUSEUM. PHOTOGRAPHER – BENEDICT JOHNSON

Foreword

Laura Phillips
Head of Community Partnerships
The British Museum

The British Museum is a founder member of the Age Friendly Museums Network generously funded by the Baring Foundation. The need for this report was apparent, as network members wanted to know what demographic change would mean for the museum sector - a sector which often underestimates the value of older stakeholders including visitors, staff, members, volunteers and donors and yet is reliant on their knowledge, skills, experience, finances and time.

Museums are constantly being asked to do more with less, but this report indicates that there can be a double dividend – where museums and older people enrich each other and their local communities.

This report's impressive raft of case studies illustrate the way a range of museums have reflected on their practice and adapted their work to ensure older people find value and relevance in their interactions with them. These museums are considering the opportunities an ageing population brings, rather than simply working out how 'business as usual' will be sustained as the population ages.

Please read and reflect upon this report, and find colleagues doing the same in the Age Friendly Museums Network. Contact communities@britishmuseum.org for more information.

Thank you to the Oxford Institute of Population Ageing and in particular Dr Kate Hamblin and Professor Sarah Harper, for the breadth and quality of this report. I must also thank the Community Partnerships team at the British Museum, and the participants in the Shared Experience older peoples' programme, whose generosity and curiosity regarding the museum's collections over the last eight years inspired the Age Friendly Museum's Network.

Introduction

Following the seminar series 'Art, Museums, Wellbeing & Ageing', and building upon the work to date carried out by the Age Friendly Museums Network (formerly Age Collective, funded by the Esmée Fairbairn Foundation), the Oxford Institute of Population Ageing and the British Museum began discussions regarding a project to explore the impact of demographic ageing on the museum and gallery sector. This report examines not only issues related to the fact that people living longer, but also to the changes in pension arrangements and resources, health and caring responsibilities which too will impact on the role of older people in the museum and gallery sector. It also considers the changes within this sector and how they too will affect the way museums and galleries can and will engage with a population that is changing.

This report aims to provide balance to the pessimistic picture of population ageing frequently presented in the media, generally related to concerns around rising health and social care costs. While the ageing of the population will produce change, there will be opportunities as well as challenges. Older people are key stakeholders in the museum and gallery sector as visitors, staff, volunteers, members, donors and trustees. A clearer understanding of population ageing and its impacts will allow the museum and gallery sector to both embrace these opportunities and prepare for any challenges ahead.

From the outset, then, it is important to define what is meant here by 'older people'. The Eurobarometer survey found that 63.9 is the average age when a person starts to be considered as old in Europe, with a difference of more than 10 years between countries (70.4 years in the Netherlands and 57.7 years in Slovakia). In the UK, according to popular opinion, older age begins at 61.9 (EC, 2012). Yet for some, in the context of the work environment, those over the age of 50 are included in this definition, whilst others take the entry into the category of 'pensioner' as the start of old age. However, with increased longevity, retirement does not generally accompany a period of decline as it once did. Retirement for some therefore has become the third stage in the life course, after education and employment and before

dependent old age. The term 'third age' was coined to apply to this period of relative good health and social participation. For the purpose of this report, 'older' will be defined as those 65 and older, and therefore beyond the current state pension age. At the same time, it acknowledges that 'older people' as a cohort are not a homogenous group and nor do they experience ageing and social policy in the same way. As will be explored in Section 1.2, health has an important role to play in the experience of ageing and as such chronological age is becoming less relevant as a marker of ability than biological age. This report will principally focus on the role of older people as visitors, volunteers and to some extent donors. They also play a key role as trustees and museum and gallery staff but due to a lack of data, these areas will not be the focus of this reportⁱ.

This report begins by exploring the macro-level changes to the UK population in terms of its age structure and composition, before addressing issues such as health and social policy which too have a role to play in both how older people engage with museums and galleries and in turn how museums and galleries can engage with them. The broad changes in the museum and gallery sector will also be addressed in relation to the expansion of their remit beyond the preservation and presentation of art and artefacts to include goals such as social inclusion, health and wellbeing. However, this shift is occurring as funding is becoming increasingly scarce and hard to access. Museums and galleries are now expected to do more and engage an increasingly diverse population with fewer resources in the form of public investment, presenting somewhat of a paradox. Both these population-level changes and the shifts within the museum and gallery sector in terms of focus and funding present challenges but also opportunities for creative and innovative work, involving a wider range of partners and social actors. Throughout this report, examples of programmes and projects from museums and galleries, with some reference to heritage organisations and archives, from across the UK are included to demonstrate how these challenges have been embraced and turned into opportunities.

ⁱ Data and research related to museums, galleries and trustees are limited, but from conversations with the sector, it is clear older people are often key stakeholders in this area. Part of the issue relating to the lack of data concerns the diversity within the sector. There are different types of trustees according to different types of museums and galleries, from those on boards for national museums and galleries, museums and galleries which have a charitable or company status, and those for unincorporated, independent organisations (including some regional federations or Friends organisations). These different types of organisations in turn confer different responsibilities and liabilities on their boards of trustees. Older people are a key group which often become trustees of museums and galleries, reflecting both their free time after retirement and their accumulation of knowledge and skills. However, there is a risk that museums and galleries approach 'the usual suspects': older people who are already engaged as volunteers with an interest in their organisations. These individuals, though keen and enthusiastic, may not have the relevant expertise needed by the organisation they are a trustee of, and this is a key issue for the governance and sustainability of these museums and galleries. The skills needed by particular organisations – accounting, fund-raising, marketing, human resources – should be the starting point when appointing trustees, rather than the person's availability and interest. However, appointing skilled trustees is not enough; museums and galleries need to convey to their trustees what the role entails, and what their responsibilities are. Those museums and galleries which are registered as charities are subject to the rules of the Charity Commission; with independent museums and galleries there is greater variation in the guidance and expectations of the role of trustees. As older people make up a larger share of trustee boards, these issues have a disproportionate effect on them as a group. In terms of museum and gallery staff, data on the creative and culture industry more generally has found that nearly half of the workforce is under 40 years of age. It is argued that many leave this sector in their 30s and 40s due to a combination of low levels of pay, insecure employment and limited career progression opportunities (Creative and Cultural Skills, 2011).

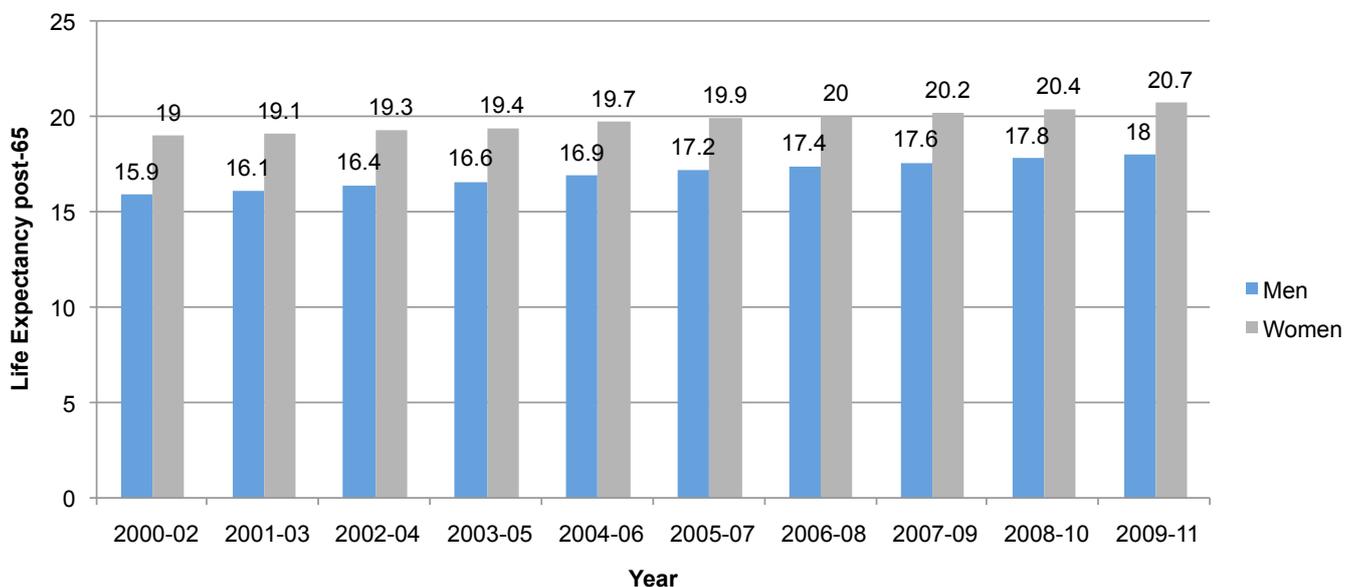
1. Changing context: UK population and policy

1.1. Ageing

The UK population is changing, becoming both older and more diverse. In terms of the former, our population is ageing at a rapid rate due to increased longevity but also changes to fertility rates. The media has often focused on the former when discussing population change, characterising the growing numbers of older people as problematic. This however ignores the other side of the ageing population coin: there are less young people due to reduced fertility rates. Though the fertility rate has been rising (1.90 in 2012) in the UK since the low levels in the 1990s, it is still below the replacement level (2.075) (World Bank, 2014). At the same time, people are living longer as the life expectancy at birth is rising every decade. Life expectancy at birth for women in England was 83.1 years and 79.4 for men in 2013; for men it has risen by 2.5 years per decade and for women by two years per decade, levelling out the differences that have existed between

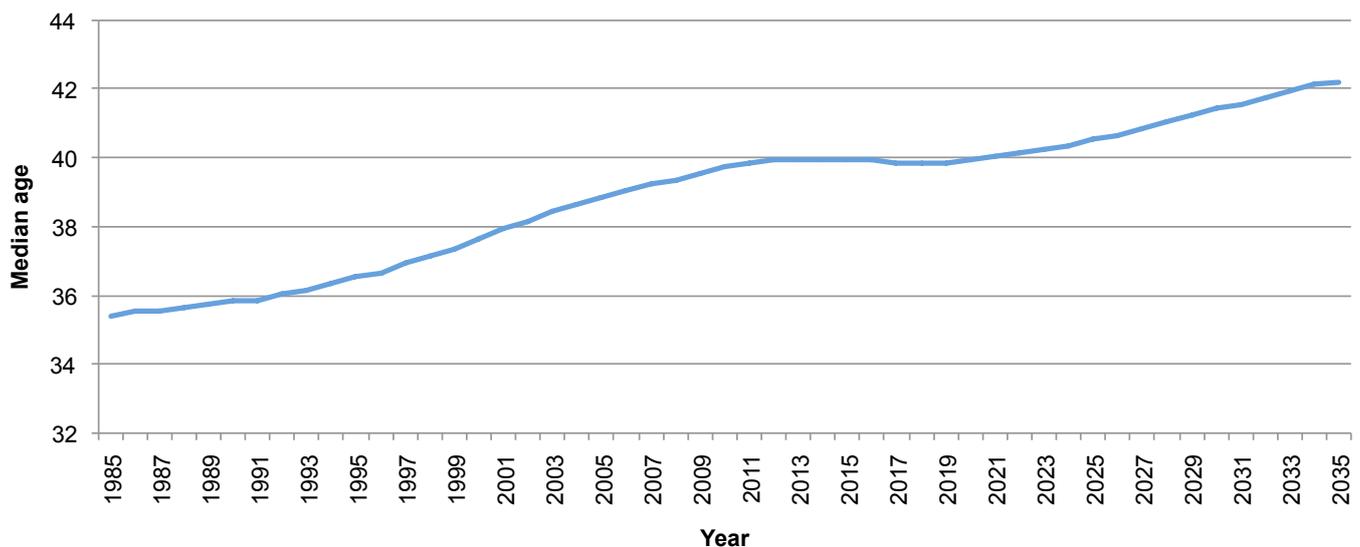
the genders. When looking at the situation for earlier cohorts, for those reaching state pension age in 2011, life expectancy was 18 years for men and 20.7 years for women. These figures have been steadily increasing as successive birth cohorts are living longer, as Figure 1 shows (ONS, 2014a). The greatest increase has been seen among the 'oldest old' (those aged 85 or above), whose numbers rose from almost 660,000 in 1984 to 1.4 million in 2009. In the future, this age group is also projected to grow even faster, rising to 3.5 million people by 2034 and making up 5% of the total population (ONS, 2010). As a result of comparatively low fertility and this increased longevity, the average age of the UK population is also rising. Between 1974 to 2014, the median age of the UK population has increased from 33.9 years to 40.0 years, and it projected to rise even further to exceed 42 by 2035 (see Figure 2).

Figure 1 Life expectancy post-65



Source: ONS, 2014a

Figure 2 Median age in the UK



Source: ONS, 2012b

Undoubtedly, then, museum and gallery audiences and stakeholders will change: the balance between the proportion of older and younger people will shift. This change in the population age structure can be viewed by the museum and gallery sector in one of two ways: pessimistically in the language of 'challenges' and 'time bombs', or optimistically as a period of opportunity for new types of engagement with different audiences. Older people contribute to and engage with museums and galleries as volunteers, visitors and through donations (and increasingly through other creative ways as will be outlined later in this report). In terms of the first, volunteers are crucial to the museums sector, with a survey conducted by the Museums Libraries and Archive Council revealing that 95% of museums engaged with volunteers, and nearly a third were run entirely by volunteers (IVR, 2005aⁱⁱ). Ellis-Paine and Davis-Smith (2006) argue that estimates on the total number of volunteers in the museum sector vary hugely from 11,000 to 100,000 (IVR, 2005b). Of all adults, in 2014 7.9% volunteered in the Department of Culture, Media and Sport (DCMS) sector (arts, museums or galleries, heritage, libraries, archives, sportⁱⁱⁱ) which again is a similar rate to 2005/6 but a slight fall on 2012/3 (9.3%). Those volunteering in the museum sector did so on average for seven hours and two minutes in the preceding four weeks, the lowest of all sectors (heritage sector: 12 hours, 59 minutes; the arts sector: 12 hours, 30 minutes;

the sport sector: 7 hours, 38 minutes; the library sector: 7 hours, 14 minutes). There is therefore scope for museums to encourage and support their volunteers to contribute more hours to their organisations, or as will be explored in Section 2.4, in more flexible ways. In 2013/14, 1.5% of adults who volunteered did so in museums and galleries, compared to 8.5% in the arts, 4.4% in heritage, 19.1% in sport, 0.8% in libraries and 0.7% in archives (and 73.7% in any other sector). The rates have been fairly consistent across time, with a slight peak in 2012/13 for sports, reflecting the Olympic and Paralympic year. It should be noted that within the museum and gallery sector, there is variation in the level of volunteering between national, civic and independent museums, with the latter argued to be heavily reliant on volunteers (Babbage, 2009).

Age is a characteristic along which voluntary activity varies^{iv}, with those aged over 75 volunteering the least, both on a monthly and annual basis. Those aged 16-24 and 65-74 have comparably high rates for volunteering generally, as Figure 3 shows. When examined over time, Figure 4 shows the volunteering rates by age across all sectors. The 65-74 age group had in the mid-2000s provided the highest proportion of all volunteering but were then surpassed by the 16-24 age group in 2011/12 and 2012/13. This spike in the involvement of those aged 16-24 could reflect the 2012 Olympic and Paralympic year (DCMS, 2015b).^v

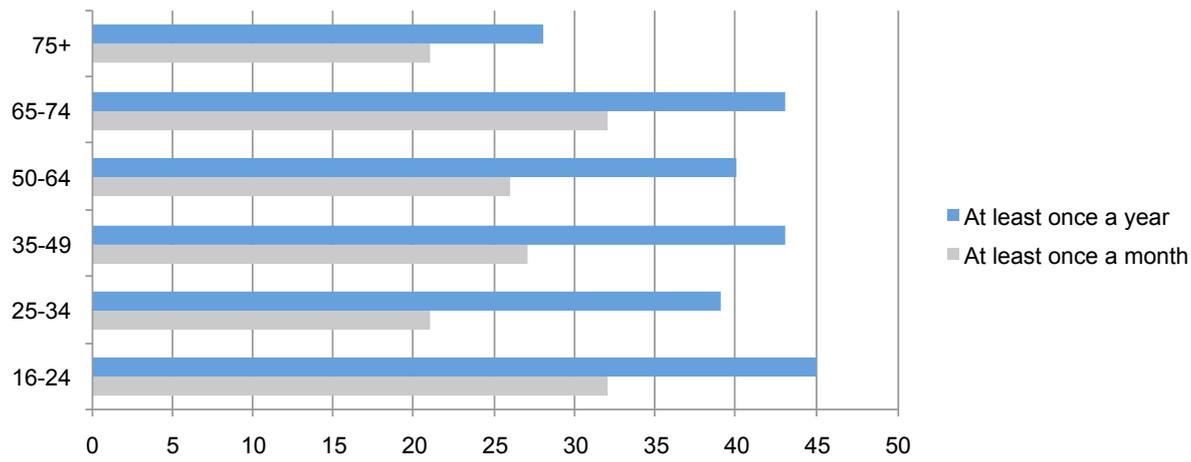
ⁱⁱ This research involved a survey to a random sample of museums, libraries and archives across England in 2005. In total, 585 organisations completed the survey, 296 of which were museums.

ⁱⁱⁱ The DCMS distinguishes museums or galleries from heritage as follows: heritage sites refer to 'Historic parks and gardens; Historic places of worship; Monuments, castles and ruins' (DCMS, 2014: 16) whereas the survey separately includes questions on visits to museums and galleries.

^{iv} Volunteers do not represent a homogenous group, and there are differences in the level of participation, the sector and the type of activities people are involved in along socio-demographic characteristics. Though this report considers the impact of population ageing, this means more than focusing attention on older age groups. There are other important characteristics which are related to volunteering which intersect and interact with age categories. For example, when looking at gender differences, women tend to volunteer more than men, with the 2014 Taking Part survey recording 26% of women and 21% men volunteering (DCMS, 2015). Low et al. (2007) using data from the Helping Out survey found that women were more likely to volunteer in education than men were (37% and 23% respectively), or with organisations related to health or disability (26% of women and 17% of men surveyed). Women also were more prevalent among organisations concerned with overseas aid or disaster relief (14% women and 7% men). Men had a preference for volunteering in sport (nearly double the proportion of women: 30% to 16%).

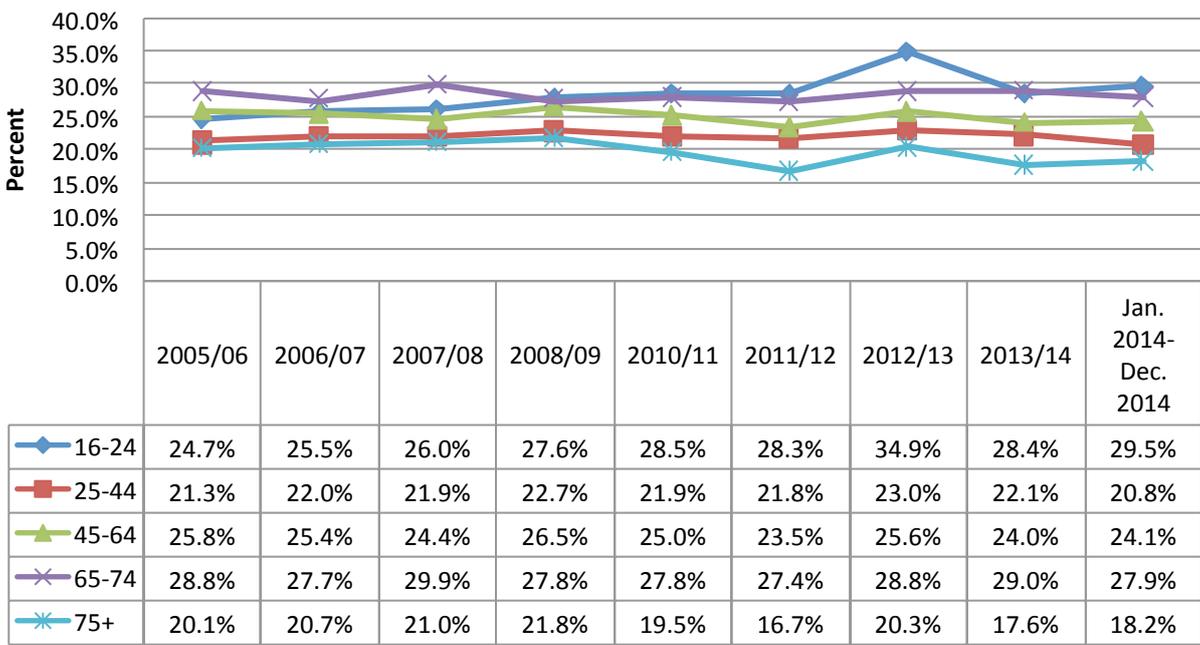
^v Indeed, the 2013/14 release of the Taking Part surveyed revealed 19.6% of 16-24 year olds said the UK hosting the 2012 Olympic and Paralympic Games was a key motivation for them to do more voluntary work (in comparison to 10.2% of 25-44 year olds; 6.9 % of 45-64 year; 6.9% of 65-74 year olds and 3.7% of those ages 75 years and over) (DCMS, 2015b).

Figure 3 Proportion of formal voluntary activity by age group



Source: Cabinet Office, 2015

Figure 4 Proportion of adults who had volunteered in the previous year by age, 2005-2014



Source: DCMS, 2015b (data for 2009/10 unavailable)

When looking at specific sectors, in a survey of 296 museums, people over the age of 65 made up a large share of museum volunteers (45%, in 2005 IVR, 2005a), and therefore the ageing population could be seen as an opportunity for museums. Low et al. (2007)^{vi} also found that age may impact on preferences in volunteering with a larger proportion of younger people volunteering in education

(36-43% of those aged 16-54 compared with 13–18% of those aged 55 and over) whilst those over 55 were also most likely to volunteer in religious organisations, in organisations supporting elderly people (14%) and in local community, neighbourhood and citizens groups (21–22%). D'Souza et al. (2011), using Taking Part data^{vii}, found age was a predictor of volunteering in the museums, libraries and arts sector.

Table 1 Types of organisation helped, by age (%)

	Age of current volunteers					
	16-24	25-34	35-44	45-54	55-64	65+
Education- schools, colleges, universities	43	36	41	37	18	13
Religion	25	20	21	24	20	32
Sports, exercise	26	18	28	27	17	16
Health, disability	16	20	19	26	21	27
Children, young people	30	23	23	19	11	6
Local community, neighbourhood, citizenship group	6	12	16	20	21	22
Hobbies, recreation, social clubs	14	12	12	9	13	19
Overseas aid, disaster relief	17	9	8	12	10	11
Animal welfare	7	13	11	6	11	9
Elderly people	2	5	4	8	14	14
Conservation, environment, heritage	3	10	7	9	9	7
Arts, museums	10	7	6	5	9	11
Social welfare	4	6	4	11	5	9
Politics	4	4	1	4	4	6
Safety, first aid	2	5	3	4	3	4
Justice, human rights	4	5	4	2	4	4
Trade unions	0	4	5	5	3	1
Other	4	3	1	3	3	5
Base (unweighted)	66	164	320	261	290	271

Source: Low et al. 2007: 26. Note: Percentages sum to more than 100 as respondents could help more than one type of organisation.

vi Low et al. (2007) used findings of a national survey of volunteering and charitable giving. The survey, 'Helping Out', was carried out by the National Centre for Social Research (NatCen) in partnership with the Institute for Volunteering Research (IVR) in 2006/07 for the Office of the Third Sector in the Cabinet Office. Initially 2,156 respondents were interviewed with an additional minority ethnic boost sample added to increase the sample by 549 respondents.

vii The Taking Part survey is conducted by the Department of Culture, Media and Sport with three partners (Arts Council England, Historic England and Sport England). It has been conducted in 2005/6, 2009/10, 2011/12, 2012/13 and 2013/14.

Table 2 Predictors of volunteering in specific culture and sport sectors

Variable	Sport	Arts	Heritage	MLA
Age	Younger	Older	Older	Older
Sex	Male	Female		
Religion		Practicing a religion	Practicing a religion	Practicing a religion
Marital status	Single/ separated	Single	Single	
General health	Good health	Good health		
Long-term illness	Has an long-term illness, not limiting	Has an long-term illness, not limiting		
Smoke	Non-smoker			
Drinking	Drinks alcohol	Drinks alcohol	Drinks alcohol	
NS-SEC category	Student/ Professional/ Managerial	Student/ Professional/ Managerial		
Employment status		Works part-time	Works part-time	Works part-time or not working
Highest qualification	Academic qualifications	Academic qualifications	Higher education	Academic qualifications
Acorn category		Advantaged	Advantaged	
Access to a car	Yes		Yes	
Internet access	Yes	Yes		Yes

Source: D'Souza, 2011: 14. Note: Bold type indicates a particularly strong relationship, i.e. had the largest coefficients in the model. Sample size for MLA (Museums, Libraries and Archives) was small which may have affected ability to identify relationships.

The current picture of volunteering in general and in the museum and gallery sector indicates that older people are more likely than the middle age groups to volunteer. However, the data indicates that by 'older', we are referring to those in the 'third age' (generally conceptualised as the period following retirement characterised by good health and social participation). Those over the age of 75 are less likely to volunteer generally, and in DCMS sectors specifically. At the same time, however, those aged 16-24 are as likely to volunteer as those aged 65-74, as the younger age group has seen significant increases in this activity since the 2000s. Volunteering, as we will explore below, has a

positive role to play not only for the recipient organisation, but the individual providing the service in terms of health and wellbeing promotion. With the UK's changing demography, museums and galleries which are heavily dependent on volunteers should consider how they can engage with a volunteer population which is also ageing in that there will not only be more older people, but fewer younger cohorts who currently provide a significant amount of volunteering. Programmes which embrace an ageing population, like the one included from the Manchester Jewish Museum in Box 1, cater for both the older and younger age groups so as not to exclude the latter by focusing purely on the former.

Box 1 Case Study: Manchester Jewish Museum

There is a potential issue with specifically targeting any age group to engage in voluntary activity: it may alienate others by doing so (LEM, 2013). The Manchester Jewish Museum developed a programme for volunteers with an intergenerational focus. The Building Bridges project ran from 2012-2013, funded by the Big Lottery Fund. The project recruited ten young unemployed people to work alongside the museum's existing volunteers who were typically over 60, retired and skilled. This intergenerational programme aimed to increase the skills and confidence of the younger participants and build relationships between old and young. The project commenced with a consultation of existing volunteers. Workshops and focus groups revealed how best to integrate the younger participants and develop a guided tour for all participants – young and old – to deliver. Object handling was included in the tour to make the sessions more engaging. The younger volunteers

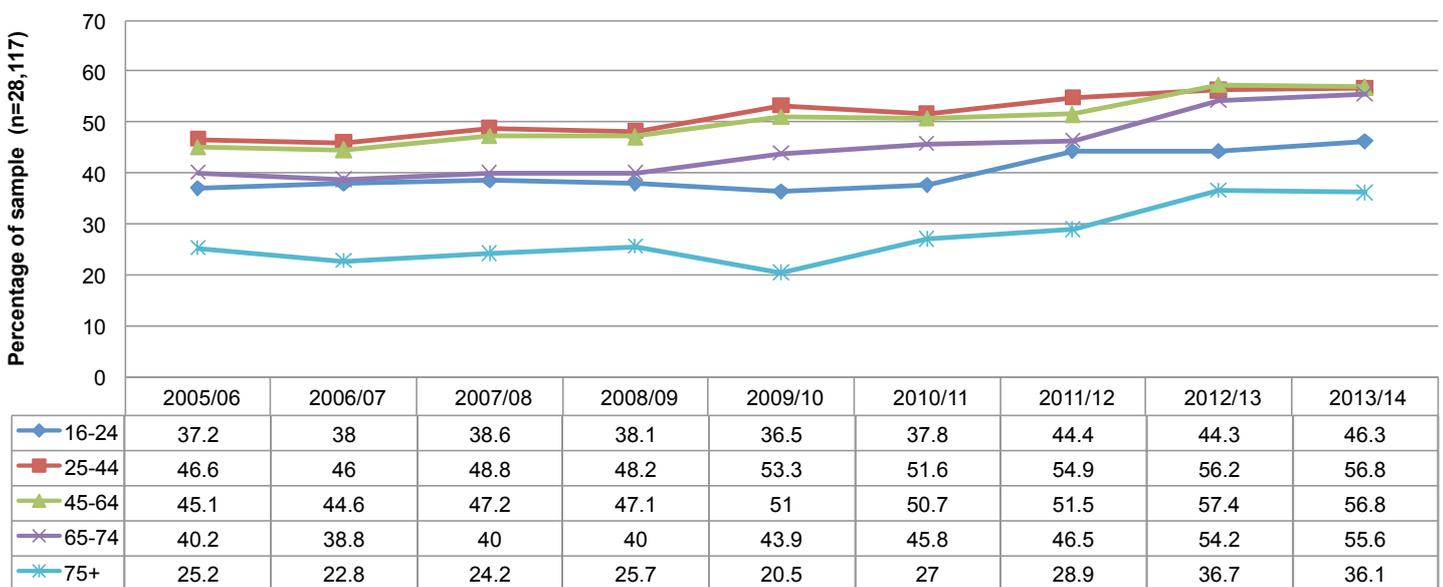
'shadowed' the existing volunteers and received specialist training and all learnt and delivered the new tour. The new tour was launched at a special event where 65 people provided feedback on the new experience.

In addition, the museum also wanted to attract a younger audience to the museum, and hoped the participants could provide insight as to how to make the collection more accessible. Prior to the project, the museum had no volunteers aged 16-25. Four of the younger participants remained volunteers after the programme finished. All participants reported that they felt the project had improved their skills and self-confidence, providing them with a more positive outlook. Though a small-scale and short-term project, this is an interesting example of integrational volunteering which produced benefits for both the younger and older participants, and the cultural organisation.

Age too appears to be a determinant of visiting museums and galleries. When looking at the data on museum and gallery attendance by age over time, Figure 5 shows there has been a general rise across all age groups since 2005/6, with the largest increases amongst those aged 65-74. Older people aged between 45-74 are also more likely to visit a museum or gallery than younger age groups, with 55.8% of those aged 45-64 and 56.4% of those aged between 65-74 visiting in the year 2014. For those in the younger age group, these proportions are lower (46.3% of those aged 16-24). However, those over the age of 75 have the lowest

rates of museum and gallery visits (33.2%) (DCMS, 2015b). The lower rates for those over 74 are also reflected in other DCMS activities, and in particular digital engagement with cultural sectors with only 12.9% of those aged 75 and over becoming involved in this way compared to 33.8% of those aged 65-74. It would seem that as with volunteering, more advanced older age is related to limited attendance in DCMS sectors. This age group, and indeed, the 'oldest old' aged over 85 are projected to rise dramatically in future and therefore museums and galleries need to consider ways to encourage engagement with these people.

Figure 5 Proportion of adults who have visited a museum or gallery in the last year by age category 2005-2014



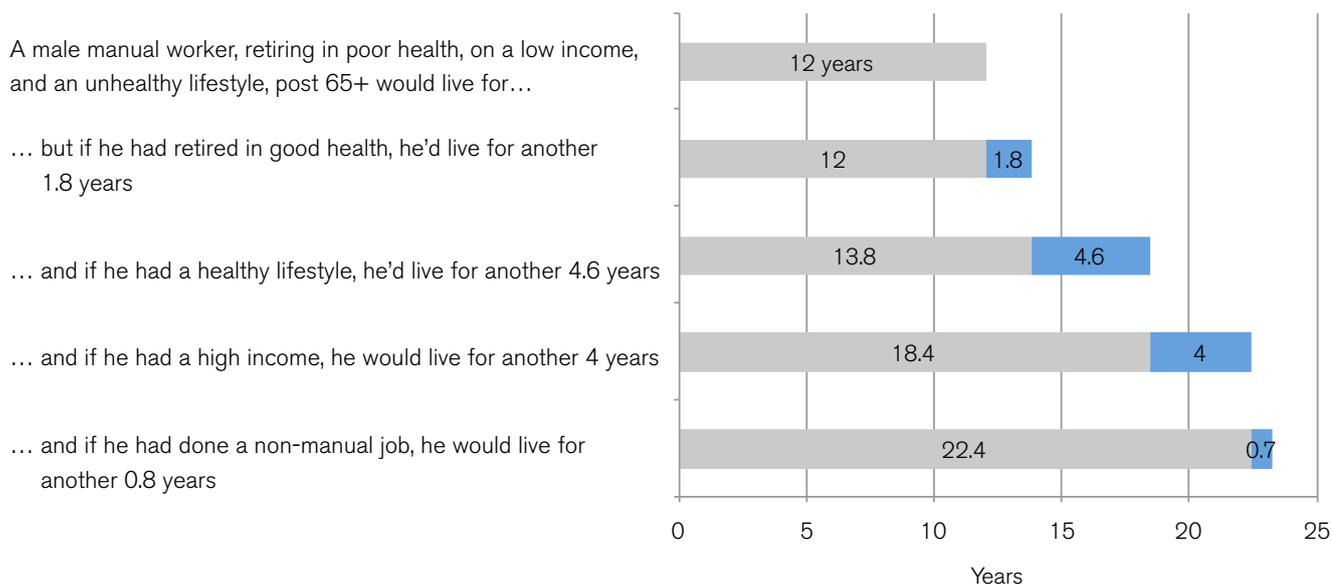
Source: DCMS, 2015b

1.2 Health and wellbeing

When discussing demographic change in the UK, it should be noted that not everyone is living longer or indeed healthier lives as there are differences in life expectancy across gender, occupational, income and health lines. Figure 6 provides an

example: the post 65 life expectancy (LE) for males is 23.1 years but this is almost halved if that man worked in a manual occupation, retired in poor health, on a low income with an unhealthy lifestyle.

Figure 6 Post-65 Life Expectancy for Males



Harper et al., 2011: 27

In addition to the complexities around socio-demographic characteristics and their impact on unequal life expectancy, there is also the issue of how many of these additional years are healthy and disability-free. Though in general life expectancy is increasing, healthy and disability-free life expectancies have not kept pace (Jagger, 2015), and this in turn will have implications for museum and gallery audiences and volunteers. Older ages are correlated with chronic diseases such as diabetes, arthritis, congestive heart failure and dementia, and with disability. When increases in

healthy life expectancy do not rise at the same rate as life expectancy generally, this expands the period of ill-health at the end of life. Healthy life expectancy in 2013 was 63.3 years for men and 63.9 for women, which means that the proportion of life spent in good health was 79.7% for men and 76.9% for women. Therefore although women live longer than men, they spend a higher proportion of their lives in poor health. When we look at disability-free life expectancy, men have less than a year in poor health before they also become disabled, and women become disabled as their health fails.

Table 3 Disability-Free Life Expectancy (DFLE) and Life Expectancy (LE) at birth, England, 2009-11

	LE	DFLE	Expected years with a disability	Proportion of life disability-free	Proportion of life with a disability
Women	82.9	64.4	18.4	77.8	22.2
Men	78.9	63.9	15.0	81.0	19.0

Source: ONS, 2014b

Both gains in life expectancy and the increases in healthy and disability-free life expectancy are not evenly distributed. For example, just looking at regions within England, there is a great deal of variation with men in the South East living 2.4

years longer than men in the North East, with even greater differences in healthy life expectancy (65.6 years compared to 59.3 years in the North East, see Table 4).

Table 4 Life Expectancy (LE) and Healthy Life Expectancy (HLE) for males and females at birth by English regions, 2011 to 2013

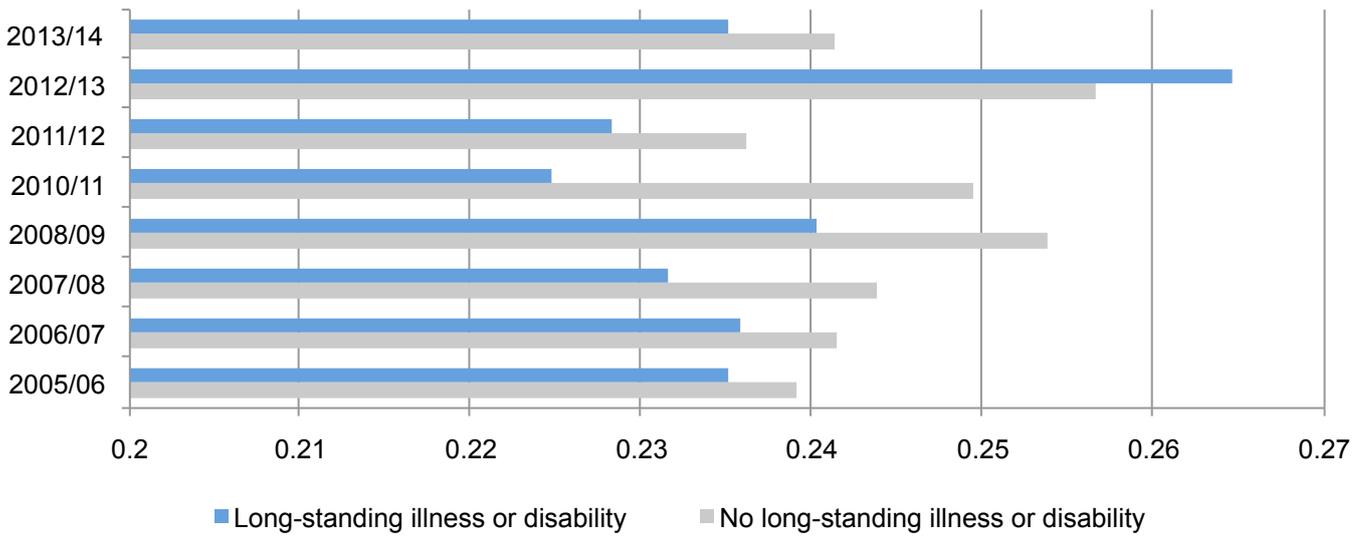
	Men		Women	
	LE	HLE	LE	HLE
South East	80.4	65.6	83.9	66.7
South West	80.1	65.3	83.8	65.5
East	80.3	64.6	83.8	65.4
London	80.0	63.4	84.1	63.8
East Midlands	79.3	62.7	83.0	63.5
West Midlands	78.8	62.4	82.8	62.8
North West	78.0	61.2	81.8	61.9
Yorkshire and The Humber	78.5	61.1	82.2	61.8
North East	78.0	59.3	81.7	60.1

Source: ONS, 2014a

Poor health has an impact on volunteering as Figure 7 below shows (with the 2012/13 Olympic and Paralympic year proving to be an exception). Similarly, those with long-term illnesses or disabilities were significantly less likely to engage as visitors with all of the sectors included in the Taking Part survey, as Figure 8 demonstrates. Research based on the English Longitudinal Survey of Ageing found older people are culturally excluded and that the lower visiting rates for those over the age of 74 outlined in Section 1.1 could be

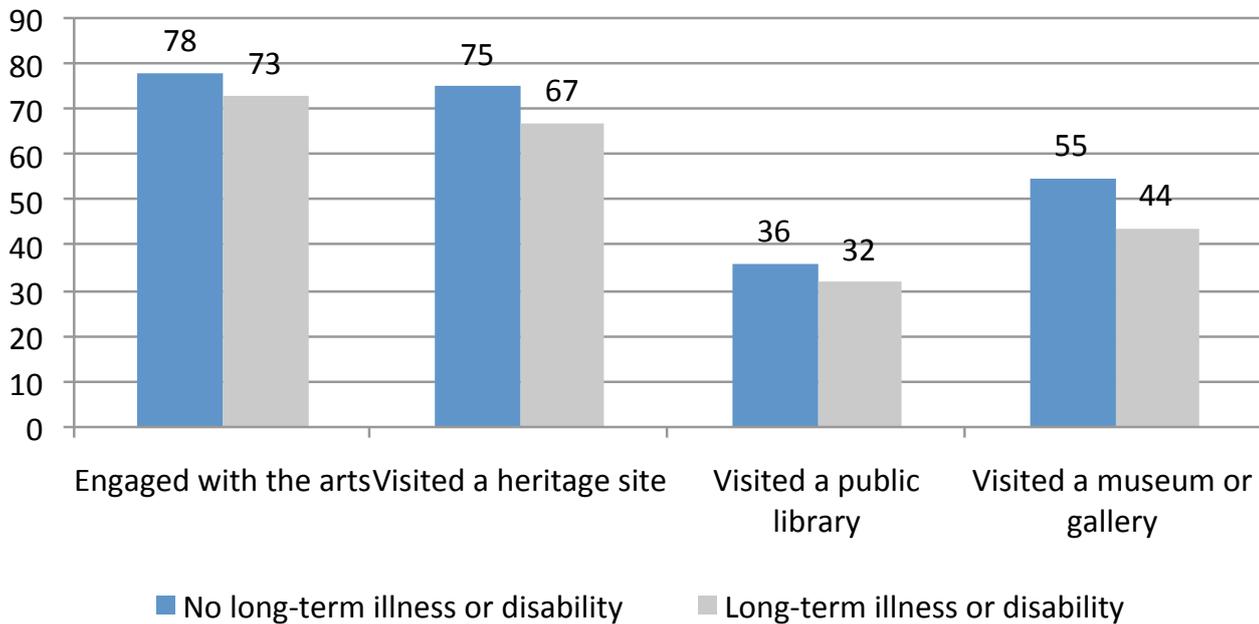
linked to health reasons (DCMS, 2015a). In line with the 2010 Equalities Act, positive action can be used to encourage the wider community to engage with services, in particular those who are disadvantaged or under-represented. Many museums and galleries have policies and schemes focused on equality and disability which reflect the introduction of the Act. However, as the data indicate below, there still appears to be progress to be made in encouraging the engagement with museums and galleries of those with disabilities.

Figure 7 Proportion of general volunteering by health and disability (%)



Source: DCMS, 2015b

Figure 8 Proportion of disabled and non-disabled people visiting heritage sites, museums, libraries and galleries (%)



Source: DCMS, 2015b

Older age is correlated with chronic diseases such as diabetes, arthritis, congestive heart failure and dementia and with disabilities such as sensory impairment. In terms of age-related conditions, some 750,000 people in the UK had dementia in 2010 (Knapp et al., 2007b). As dementia and older age are closely correlated, the incidence of dementia is expected to increase with population ageing. Less than 1% of people aged under 65 have the condition, whereas frequency is estimated to be far higher among those over 95, with estimates ranging from 30% (Glover, 2008) to 45% (Brayne et al., 2006), and therefore as the proportion of the 'oldest' old increases, so too will the prevalence of dementia. It is estimated that by 2021 there will be about 940,000 people with dementia in the UK, rising to over 1.7 million people by 2051 (Knapp et al., 2007a). As such, dementia is a focus of both national and international policies, with the 2013 G8 summit committing to finding a cure by 2025 and Prime Minister David

Cameron launching his 'challenge on dementia' in 2012, which included the creation of 'dementia friendly communities'. These communities should encourage the independence and choice of people with dementia and this includes access to museums and galleries. In addition, the benefits of engagement with arts and museums for people with dementia and also their carers has been documented through a number of empirical studies, including improved wellbeing, mood, self-confidence and cognition (Zgola and Coutler, 1988; Chatterjee and Noble, 2009; Eeklaar et al., 2012; Camic and Chatterjee, 2013; de Medeiros and Basting, 2014; Camic et al., 2014; Camic et al., 2015; Pienaar and Reynolds, 2015). Box 2 outlines an approach taken by National Museums Liverpool to engage with people who have dementia and their carers. Their approach takes into account the resources available to meet a growing demand from the increasing numbers of people with dementia.

Box 2 Case Study: National Museums Liverpool, House of Memories

National Museums Liverpool (NML) have been exploring the best ways of engaging with older people for the past 15 years. Their first reminiscence project, Generations Apart, was launched in 2000 and led to the development of memory boxes designed to provoke discussion available on loan. Taking this work further, in 2009 NML in partnership with Liverpool Primary Care Trust (PCT) and mental health centre Mary Seacole House created the Gateway to Active Living Project, aimed at making culture in Liverpool more accessible to BME older people. Over 250 people were engaged in weekly events, using reminiscence art and cultural activities. The project was recognised at the 2010 Guardian Public Services Awards.

Building upon this legacy NML developed the internationally-renowned 'House of Memories' programme. The scheme started life within the general programme for older people, before the focus shifted more to engage more with people who have dementia. This was partly influenced by the Prime Minister's 2012 'Challenge on Dementia' and conversations with the Department of Health around the contribution of arts and museums to mental health and wellbeing. There was recognition from the Department of Health that there was a need to develop something for care workers to increase their awareness of both dementia and the impact of the arts on wellbeing, and they provided funding for House of Memories. Aside from meeting the need to address the challenges of an ageing population, and the associated increase in age-related conditions such as dementia, the House of Memories model also had a very practical rationale. NML looked at the services they offered and the potential demand related to an ageing population, and tailored a training day for care workers which would be easy to scale up in the future. This free dementia-awareness training programme is aimed at health and social care professionals as whilst it would not have been possible for the NML to deliver outreach directly to ever-increasing numbers of people with dementia, these professionals are better able to spread reminiscence through the community, once they have the confidence and expertise to lead sessions.

House of Memories has expanded to include a number



of other elements beyond the training sessions for health and social care workers. Participants on House of Memories training days are given a 'memory toolkit' which acts as a 'how to' guide for developing their own reminiscence sessions. The programme also includes the opportunity to borrow a memory suitcase which are themed around the following topics which aim to address a diverse population of older people: African and Caribbean memories; the Liverpool Irish Community; Lesbian, Gay, Bisexual and Transgender (LGBT); Seafarers and Dockers; Nature Watch; and Feast on Art.

In addition, there have been a number of spin offs from the House of Memories programme, including guided 'Memory Walks' around the museum and drop-in reminiscence sessions for older people ('Meet me at the Museum'). To promote intergenerational learning, the 'When I was little' scheme loans backpacks to children aged 3-7 and their grandparents to help them to explore the Museum of Liverpool and share memories together.

The House of Memories programme has been very successful- it has exceeded its target of the number of care workers who have received the training three-times in the North-West. The programme is now in its fourth year and to date, around 10,000 care workers have received the training. The scheme also provides toolkits to enable other museums

and galleries to create memory suitcases, walks and other resources. NML have found that most of the care workers had not received any dementia-specific training. Many had not visited a museum or gallery so the House of Memories programme has been a great success in developing the knowledge and skills of care workers in relation to dementia and reminiscence, as well as opening the museums up to a new audience.

In 2012, a quantitative and qualitative evaluation was undertaken with 1200 participants (NML, 2012). Methods including ethnographic observations, focus groups and qualitative and quantitative surveys were used to examine the impact of the House of Memories training sessions. Pre-questionnaires established the demographic composition of the sample, their knowledge and experience of delivering reminiscence activities, and their opinions on the role of these sessions in the provision of care for people with dementia. Post-session questionnaires revisited some of these issues, and participants were also able to contribute post-it notes with their reflections on the session. After the sessions, the participants overwhelmingly shifted from around 45% feeling able to provide reminiscence sessions to almost 90%. Focus groups were used to validate the findings of the surveys, but also included members of museum staff who had been delivering the sessions. Those involved in the delivery of the session were also engaged in in-depth qualitative interviews. The participants reported overwhelmingly that the training increased their awareness and understanding of dementia, and in turn the importance of effective listening and communication with people with the condition to improve their wellbeing and quality of life. Participants said they felt more confident to explore new approaches with the people they cared for. The way practical and interactive way the training was delivered, with drama elements delivered by the commissioned drama provider was found to be an important factor.

By the second evaluation, more than 3,000 care workers had taken part in the programme (NML, 2013). The purpose of this evaluation was to gain feedback on elements such as the memory suitcases and also involved interviews four weeks after the training was delivered to assess the extent to which the activities were being rolled out in the community. A third round of evaluations took place in 2014 in the Midlands to explore the economic impact of the programme in terms of their Social Return on Investment (SROI), as well as the impact on the subjective wellbeing of the participants. The evaluation found that for the Department of Health's investment of £132,500 to train 1,000 carers in dementia awareness and care, a total of £1,148,290 of social value was created. Key learning outcomes identified were:

- Increased awareness and understanding of dementia
- Skills development including listening, communication and empathy
- Improved capacity for [individual and collective] critical, reflective care practice
- Confidence in trying new approaches to dementia care
- Improved knowledge, skills and access in relation to memory activities
- Appreciation of creative and interactive training approach

- Enhanced appreciation of the relevance and value of museums in dementia care (NML, 2014).

The 'My House of Memories app' has also been created. It allows people to explore objects from the past and share memories. Carers and people with dementia can browse through objects from across the decades to spark reminiscence and it is possible to create personal profiles for different people, so that they can save the objects which are most salient to them, which is particularly useful in a residential care setting. Additional content has been added by the British Museum, the Cinema Museum, Brighton Pavilion and Museums, Bexley Museum and Heritage Trust, and by the Royal Liverpool Philharmonic Orchestra. The app was launched at the House of Commons and it has been featured in the all-party Challenge on Dementia. Additional funding has been received to add more content to the app, which to date has been downloaded over 6,000 times. There is demand from museums and galleries internationally to include parts of their collections on the app. Care homes in the North West are now looking into investing in tablet devices and televisions which are compatible with the app.

The House of Memories aims to 'look after people's memories'. The ethos very much sees museums as an asset for the community- whether people would like to attend the training borrow a suitcase, use the app or organise a group visit to the museums. The premise is that every town with a museum could establish a programme of training for local care workers, and the House of Memories has recently provided training in the Midlands and South East, aside from the North-West. A strategic priority of NML is engaging older people- this has been adopted at director level which allows the museums to allocate staff and resources to the House of Memories programme. Cross-sector working and partnerships with local health authorities and third sector organisations have been a key feature of its success. The Museums of Liverpool is part of a network called 'Happy Older People' (HOP), instigated by NML which includes representatives from acute and primary care, mental health, social care, care homes, housing associations and the third sector. They hold quarterly network events to encourage organisations to work together and test out new ways to engage older people with culture. Engaging with other sectors has also helped NML secure funding for the programme. The House of Memories has received funding in excess of £1 million from sources including the Department of Health and the Liverpool Clinical Commissioning Group. Initially the Department of Health provided seed money in 2011, and the House of Memories programme made evaluation a priority which in turn helps to encourage further funding.

Looking ahead, the House of Memories programme is expanding to include training for family carers and health professionals working in acute care settings. They have piloted a Buddy programme in Liverpool and have secured funding to roll the model out nationally. This programme will take the House of Memories approach to unpaid carers of people with dementia. Also, in terms of sustainability, a current development is the creation of a licensed 'train the trainer' commercial programme, and a research programme exploring the positive impact of House of Memories delivered across the whole health economy.

Another condition with a relationship to ageing is stroke. There are currently around 152,000 strokes in the UK every year, and age is one of the most substantial risk factors for stroke. By the age of 75, 1 in 5 women and 1 in 6 men will have a stroke (Stroke Association, 2015). As the population ages, the prevalence of the condition is projected to increase. Again, there are differences along socio-demographic characteristics such that people from black and minority ethnic groups are twice as likely as those from white groups to have a stroke and the stroke incidence per 1,000 population ranged from 1.33 in South London to 1.58 in East Lancashire (Saka et al., 2009). Stroke is the second most common cause of death and the leading cause

of disability in Europe. There are around 1.2 million people in the UK who have survived a stroke, and half of all survivors have a disability and a quarter will die within a year of having a stroke. A third of all survivors will suffer from aphasia, which affects the way a person can communicate as it can impair the ability to speak, comprehend what others are saying, and/or the ability to read or write (Stroke Association, 2015). The example below demonstrates how a partnership between the Stroke Association provided therapeutic activities for those suffering from aphasia. This example demonstrates a 'double-dividend' in that those participating felt more confident in communicating, but at the same time, the museum was opened up to a new audience.

Box 3 Case Study: The Stroke Association and the Horniman Museum and Gardens

Part of the work of the Stroke Association is to assist people following a stroke. They offer a range of activities, such as discussion and reminiscence groups, to aid people who have had a stroke and have developed communication problems such as aphasia. The Communication Support Service in Lewisham receives referrals from local speech and language therapists and runs regular groups to promote communication. In 2013, the group planned to visit the Horniman Museum and Gardens and this then led onto a regular partnership programme, with monthly sessions at the museum. The Horniman Museum and Gardens engages extensively with the local community, and invites community groups (including those for older people) to special events to encourage their engagement. With the Stroke Association, the new project 'Communicating Through Objects' has now been running for almost two years. The sessions have included a diverse range of activities with a communication focus including object handling, mime, Balinese dancing, photography, singing and other forms of language which rely on clicks and whistles. These activities encourage participants to explore alternative means of communication, aside from regular speech, but also aim to raise their confidence and reduce social isolation. The participants are asked to provide regular feedback and are involved in planning sessions. They have reflected that they find the programme uplifting and that it has helped to raise their confidence. It has also

brought them into contact with the museum, some for the first time. Others had visited with their children, but had not returned since. Now many participants visit independently regularly, inviting friends and family to meet them there at 'their museum'. The participants are involved in more than the monthly sessions, also contributing to the programming of other events such as the key event in Stroke Awareness month. Stroke survivors programmed activities for the wider public and in doing so, felt empowered and confident. Some of the participants have progressed onto volunteering roles at the museum.

The relationship between the museum and the Stroke Association has been mutually beneficial. The Horniman offers community worker training, which has been invaluable for members of the Stroke Association team but also delivers the creative input for the project, while the charity provides the referrals, and both parties offer volunteers and logistical support for the programme. The Stroke Association has also provided training in supported conversation to staff and volunteers at the museum. A further part of the work the Stroke Association does is awareness-raising and the partnership with the museum has also assisted with this. The self-portraits produced by the photography element of the project were used to form a trail for younger visitors to the museum, raising awareness of stroke, in addition to the key event of May's Stroke month.

Disability and impairment are also related to age. In 2011/12, 6% of children were disabled, 16% of working age adults and 45% of those over the age of 65 (ONS, 2012a). Focusing in particular on sensory impairments as for a variety of reasons hearing and sight decline with age, it is estimated that one in nine people over the age of 60 have some form of visual impairment, and 66% of partially sighted and 64% of blind people are aged 75 or over. It is also estimated that over 6.3 million people over the age of 65 have a hearing impairment (Papworth Trust, 2012) and there are around 350,000 people with dual-sensory impairment (DSI) in the UK, of whom 222,000 are over 70 years of age. By 2030 the numbers of people with DSI will reach nearly 570,000 (a 60% increase, with 418,000 will be over the age of 70) (Robertson and Emerson, 2010). Box 4 below

outlines a particular programme which aimed to promote artistic activities for older people with DSI. This group, it has been argued, are at particular risk of social isolation as the individual with DSI often withdraws due to their inability to participate in 'regular' conversation, and tends to engage in more solitary leisure pursuits (Scharf et al., 2007). A third of people aged over 75 surveyed with DSI wanted more social contact in comparison with around one fifth of people without impairment. They were also less likely to socialise with friends, go out to restaurants, attend church or go to the cinema, compared with those with visual or hearing impairments alone and those with no sensory impairment (Crews and Campbell, 2004). As will be explored in Section 2, museums and galleries increasingly have a role to play in reducing social isolation and loneliness.

Box 4 Case Study: Sense and Islington Museum

Sense, the charity for people with sight and hearing problems (dual-sensory impairment, DSI), is working with older adults to engage them with arts activities. In partnership with Islington Museum, Sense organised a twelve-week sensory art group. Sense focused on recruiting participants over the age of 50, acknowledging the importance of reaching people with single or dual sensory impairment before they reach later life when many have already become isolated and withdrawn. The average age of the group was around 60 years. Using textiles and other types of tactile techniques, the participants created artworks with a biographical focus which were then combined in a patchwork quilt, telling individual and group stories. The finished quilt was then displayed at the museum and visitors were able to touch the memory quilt, while listening to first-hand recordings of the group member's stories. The organisers also employed sensory

techniques in the workshops to draw on new inclusive ways of engaging the group, such as through touch, smell and taste. Museum staff took the group on tours of the museum, considering how the building was experienced by people with DSI and also offered an object handling session to enable the members to physically engage with the collection for the first time.

In terms of sustainability after the 12-week programme, Sense also organised a workshop session for Islington Museum staff and local practitioners working with older people which included simulating DSI conditions and arts activities to assist them with the future planning of sessions and also to provide learning about the accessibility of the museum in general. As a result of the project, Islington Museum have started a monthly sensory art class for local residents.

An additional change with an impact on health and wellbeing is the prevalence of solo-living in the UK, which is projected to increase in the future. By 2033, 11.3 million people will be living on their own – 41% of all households in England and nearly 30% higher than in 1961 (see Table 13, DCLG, 2010). Solo-living will increase dramatically for those over the age of 85 in particular, rising by 145% from 2008 to 2033. Though living alone is not the same as being lonely, English Longitudinal Survey on Ageing (ELSA) data indicate that one-fifth (20%) of those aged 52 and over who lived on their own reported being lonely often and an additional 39% said they felt lonely some of the time. Leaving aside solo-

living, age is also related to loneliness generally, with just over a third of all of those over the age of 52 surveyed as part of the ELSA study said they felt lonely some of the time or often, compared to 46% of those over 80; of those over 80, 17% reported being lonely often compared to an average of 9% of all respondents (Beaumont, 2013). Two fifths people over 65 (about 3.9 million) say the television is their main company (Age UK, 2014) and almost a quarter of this age group do not go out socially at least once a month (Age UK, 2014). A study also found that 41% of those over 65 felt out of touch with modern life, and 12% said they felt cut off from society more generally (Age UK, 2014).

Table 5 Household projections by age of head of household, one person households

Age	2008 (thousands)	2033 (thousands)	Total change 2008-2033 (%)
Under 25	268	299	12%
25-34	897	1338	49%
35-44	1049	1657	58%
45-54	999	1640	64%
55-64	1097	1530	39%
65-74	1035	1487	44%
75-84	1398	1923	38%
85+	573	1407	145%

Source: DCLG, 2010

Isolation, then, is an increasingly important issue for our society, in part because of its growing prevalence, but also because of its impact on health and wellbeing. Loneliness and health have a two-way relationship in that poor health can lead to a loss of social roles and loneliness and in turn, loneliness can result in poor health and wellbeing (Bennett, 2002; Duane et al., 2013). Loneliness has been related to high blood pressure, increased risk of cardiovascular disease, stress, anxiety and depression (Hawkey et al., 2003; Steptoe et al., 2004; Hawkey and Cacioppo, 2010; Bolton, 2012) and a study has indicated that loneliness has a similar detrimental effect on health as smoking 15 cigarettes a day (Holt-Lunstad, 2010). Loneliness has also been related to the development of Alzheimer's disease, with research indicating it can double an individual's risk of developing the condition (Amieva et al., 2010; Nyman et al., 2010). It has also been found to be one of the top three concerns of

older people, as well as bodily pain and memory loss (Philip, 2014). Research has also related loneliness to poor lifestyle behaviour such as alcohol and drug abuse and disordered eating (Griffin, 2010; Imonen et al., 2011; Lauder, 2004; Wadd et al., 2011). It is unsurprising therefore that loneliness is now on the policy agenda, with the Secretary of State for Health commissioning the Marmot Review which found that socially isolated individuals are between two and five times more likely to die prematurely and that social networks are key to recovery following illness (Marmot et al., 2012; Camic and Chatterjee, 2013). Museums and galleries can play a role in mitigating loneliness, and in turn the negative impact on health and wellbeing. Section 2.1 will explore the impact of museums and galleries on isolation, and present an example of a social prescription programme which has sought to tackle the issue.

1.3 Policy

When considering these caveats related to uneven and not necessarily healthy gains in life expectancy, an ageing population does not automatically mean increased numbers of older stakeholders for museums and galleries without some strategic programming to encourage and enable this group to engage. In addition, changes to policy also have a role in determining the resources available to this group to interact with museums and galleries. The first resource which policy affects is time. Time is a crucial factor in influencing participation in museums and galleries as a volunteer or visitor. Low et al. (2007) also looked at the reasons why people stopped volunteering and overwhelmingly the most cited reason was 'not enough time due to changing home or work circumstances' (41%). Interestingly the third most cited reason (after the activity no longer being relevant) was 'health problems or old age' (14%). When these reasons are broken down by age group (see Table 4) below, there are some key differences. Spare time is less of an issue for those over the age of 65 (42% of this age category cited this as a reason for not volunteering), but for those approaching retirement (age 55-64), a lack of time was still an issue (87% cited this as a reason, which is comparable with those in younger age categories). When

looked at in reverse, 56% of those over the age of 65 arguing spare time was a key motivation for volunteering, whereas for those pre-retirement (16-64), this was cited in 26-45% of cases (Locke, 2008). On the other hand, improved health was cited by 18% of those over the age of 65, whilst no one under the age of 25 argued this would increase their chances of volunteering (Low et al., 2007). Illness and disability, and 'feel I am too old' were more likely to be cited by those over the age of 65, with the latter more than doubling from 27% for the 55-64 category to 62% for those over this age. Feeling too old also seems to emerge after the age of 65, with those 19% of those aged 55-64 citing this as a reason for not volunteering, compared to 69% of those over the age of 65. Similarly, time is a crucial factor affecting visitors to museums and galleries. Using the data from the 2013/14 Taking Part survey, the reasons why people visited museums or galleries more or less since their last visit can be examined. More free time, more exhibitions of interest and taking children to new activities were the three most cited reasons for visiting more often than the previous year. When looked at in reverse, less free time was cited as the main reason for visiting a gallery or museum less in the current year in over a quarter of all cases (DCMS, 2014).

Table 6 Reasons for not volunteering

	Age of non-volunteers who would like to start volunteering (%)					
	16-24	25-34	35-44	45-54	55-64	65+
Not enough spare time	93	88	92	89	87	42
Put off by bureaucracy	43	42	53	58	57	42
Worried about risk/liability	51	46	51	47	46	39
Don't know how to find out about getting involved	56	42	45	35	29	26
Not got the right skills/ experience	47	40	39	39	34	35
Wouldn't be able to stop once got involved	32	35	38	39	41	31
Worried about threat to safety	22	30	27	26	26	31
Worried I might end up out of pocket	34	28	29	22	18	17
Worried I wouldn't fit in with other people involved	25	24	24	25	17	24
Illness or disability	9	8	13	18	27	62
Feel I am too old	3	5	8	17	19	69
Family/partner wouldn't want me to	6	22	25	20	20	25
Worried about losing benefits	5	9	11	3	6	9

Source: Low, 2007: 69

Table 7 What factors would facilitate volunteering?

Occasional and non-volunteers who would like to help more (%)						
	Age					
	16–24	25–34	35–44	45–54	55–64	65+
More spare time	45	34	42	37	26	6
Working less	6	12	15	14	12	2
More information	22	14	10	6	8	2
Health improvement	0	1	6	7	11	18
Fewer other commitments	8	7	5	5	9	3
If I was asked	9	6	6	2	5	3
Child-related – childcare, fewer childcare responsibilities	3	11	6	2	1	0
More money	4	4	4	1	1	1
If someone I knew got involved too	4	2	3	1	1	1
Driving licence/ transport	4	*	1	3	1	4
More convenient location	4	3	1	1	0	1
More convenient timings	0	3	1	1	1	0
Other things	9	11	10	12	11	10
Nothing	9	9	6	18	22	52

Source: Low, 2007: 71. Note: * indicates low response rate.

Recent policy developments may mean that the notion that population ageing in the UK would result in more retired people with time to dedicate to museums and galleries needs to be re-evaluated. Changes to UK pension system introduced in 1995 are now coming to fruition, with the age at which women can access the state pension gradually rising from 60 to 65 from 2010 to 2020. Further changes are ahead, with the age at which the state pension is accessible for both genders increasing to 67 from 2026 and 2028. Older people are increasingly encouraged to remain in paid employment for longer, and employers are no longer permitted to have a default retirement age (unless in certain occupations where a compulsory retirement age can be objectively justified). As a result of these changes, museums and galleries need to consider the possibility that their potential pool of retired volunteers will now be older, and not necessarily all will be in good health, as explored in Section 1.2.

Also, older people do not exist in a vacuum; they are interdependent on other generations and the ageing population may mean those entering retirement could still have parents of their own who require care and support, limiting their time and resources available for leisure and volunteering. In 2011, Census data indicated there were 1.2 million people over the age of 65 caring for an ill or disabled family member, friend or neighbour in England. This number is projected to rise to 1.8 million by 2030. The proportion of older carers has risen at a far greater rate than any other age group; the number of people aged 65 and over providing care has risen by 35% in ten years whilst for those aged

25–64, the rate has risen by 4%. The average for all age groups is 11%. Generally unpaid carers are more likely to be female, but three-fifths of carers over the age of 85 are male. These carers who are themselves among the oldest old (over 85) have grown in number by 128% in five years, and over half of this group provide care for more than 50 hours a week, which in turn has an impact on health with nearly three-quarters rating this as poor. In addition, almost half of carers over 85 who care for 20 hours a week or more say they feel anxious or depressed. Of those carers over the age of 75, 45% provide support for someone who has dementia. Perhaps linked to carers' poor physical and mental health is a reported lack of free time insofar as 61% of carers surveyed by the Personal Social Services Survey of Adult Carers in England reported that they did not time to do enough of the things they enjoy and 1 in 7 (15%) do not do anything they value or enjoy with their time (Carers UK and Age UK, 2015). Aside from caring for elderly, sick or disabled adults, older people also provide child care, ranging from emergency support to guardianship. For over a third of families with children aged nine months, grandparents were the main child care arrangement. Another survey (the Childcare and Early Years Survey, 2009) found that just over a quarter of children under the age of 14 had been looked after by their grandparents in the previous week. While most enjoy providing care for grandchildren, those who provide the most care are more likely to report a negative effect on their health and wellbeing (Statham, 2011). Museums and galleries that aspire to engage with carers will need to consider these issues related to their lack of free time, and potentially

poor mental and physical health resulting from the strain of providing care. Below is an example which has embraced the role of grandparents in providing care and created a

resource to encourage intergenerational relationships within a museum context.

Box 5 Case Study: Glasgow Museums

It was apparent to staff at the museums in Glasgow that part of their audiences were grandparents and their grandchildren attending the museums together. To promote these relationships and provide a more structured intergenerational experience at the museums, the Grand Day Out scheme was created. The programme involves activities which foster intergenerational work, such as building 'soapbox' go-karts or 'bogies' which were common in the past but were generally unknown to the younger children. The skill required in parts was slightly beyond the children, and therefore everyone had to work together to produce the final product.

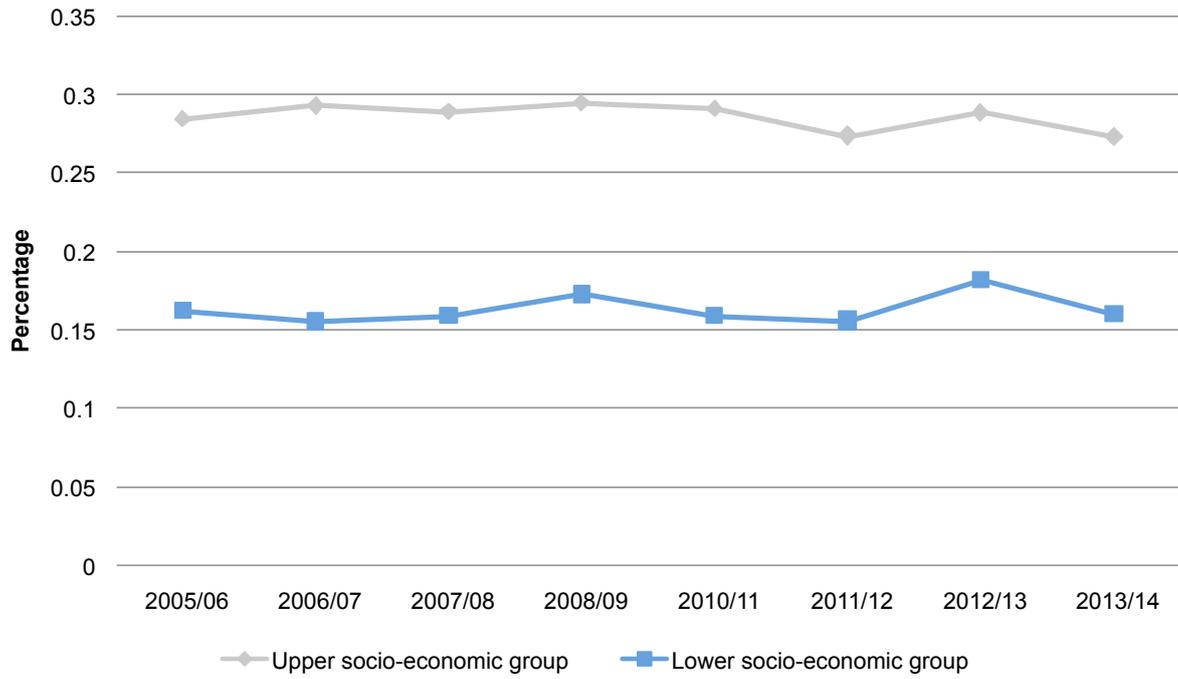
More broadly, the contributions of older adults are

key to the work of in particular the Riverside Museum. The personal stories of the older adults with experience of shipping, transport and city life in Glasgow provide a resonance to the collection and are woven into the education programme for schools. Museum staff have learnt a lot about the collection from older people who visit the museum and have clear memories of particular objects or photographs. This then enhances the information the museum can provide about their collection. The Riverside Museum also engages with a significant number of older volunteer guides, many of whom are from engineering backgrounds or worked in industries relevant to the museum's content.

Leaving aside time as a resource required to engage with museums and galleries as visitors and volunteers, the successive age cohorts may also find they do not have the financial resources to do so. Though many museums and galleries do not charge an entrance fee, those who volunteer forego paid employment and while governments are encouraging older people to work longer, they may also increasingly find it financially necessary. A report by the International Longevity Centre (ILC, 2013) found that between 2008-10, one-fifth of all households (21%) headed by someone aged 50 or over had outstanding mortgage borrowing on their main home, and the rate for those aged 65-69 year olds was one in ten. The average amount owed by the 65-69 age group was £55,200, which would suggest that for some, working later in life will be a necessity. Also, this age group is increasingly likely to be providing financial support for adult children. In 2013, 26% of those aged 20-34 were living with a parent (3.3 million), the highest level since records began in 1996. Almost half of those aged 20-24 lived with their parents (49%). The percentage of unemployed people who live with their parents (13%) is more

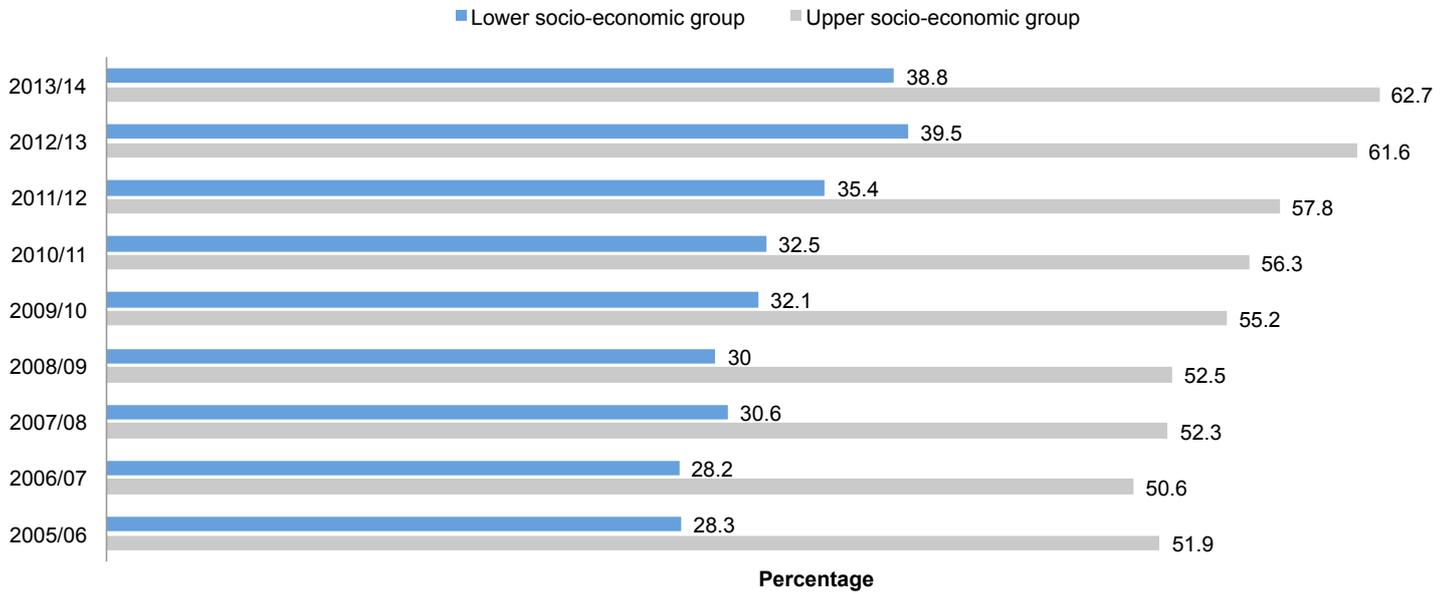
than twice that of those who live independently (6%) (ONS, 2014c). Income influences engagement with volunteering, with the 2014/15 Taking Part survey demonstrating that higher socio-economic groups engage in voluntary activities more than those from lower-socio-economic groups. As Figure 9 shows, the proportion of those volunteering from lower socio-economic groups is just over half of the percentage of those who are more wealthy. Again, there was an upswing in 2012/13, especially for the lower socio-economic group which may be related to the Olympic and Paralympic Games. However, in the past ten years, increasing numbers of people from lower socio-economic groups have engaged in voluntary activities (DCMS, 2015a). Higher socio-economic groups are also more likely to visit museums and galleries, with 62.7% in the upper socio-economic group having visited a museum or gallery in 2013/14, a significantly higher proportion than the lower socio-economic group (38.8%) (Figure 10). Both lower and higher economic social groups have increased their attendance by around 10% since 2005/6.

Figure 9 General volunteering by socio-economic group (%)



Source: DCMS, 2015b

Figure 10 Proportion who have visited a museum or gallery in the last year-socio-economic status 2005-2014

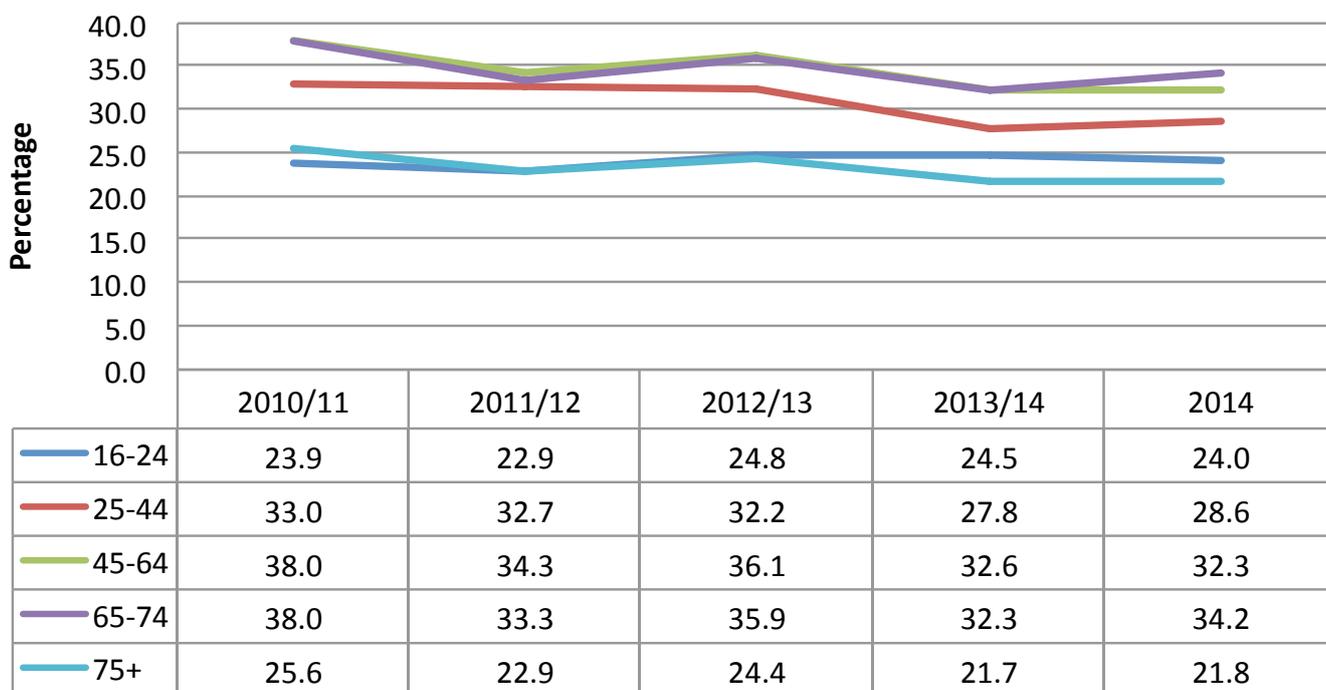


Source: DMCS, 2015b

A further means of engaging with museums and galleries is through donations, which too could be affected by financial resources. The Taking Part survey for 2014/15 found that the vast majority of adults (86.7%) had made a charitable donation in the previous year. In 2014, 37.9% of adults donated less than once a week but more frequently than once a month, which is an increase from 2010/11 when the figure was 32.8%. Just over a third (34.3%) donated less regularly than once a month but at least four times a year. There was a slight decrease in the proportion donating to the DCMS sector, down from a third in 2010/11 to 29.8% in 2014/15. Of these, 14.8% of adults had donated to museums or galleries, compared to 13.4% who had donated to the heritage sector (a fall from 16.0% in 2010/11), 5.7% to sport (another fall from 7.4% in 2010/11), 5.2% to the arts (a decrease from 6.9% in 2010/11) and 0.6% had donated to libraries (no significant change from 2010/11)

(DCMS, 2015b). Though museums and galleries have seen a dip in donations since 2010/11 when it received 15.2% of donations, this fall (-0.6%) is comparatively modest when compared to the declines in the heritage (-2.9%), arts (-1.6%) and sport (-1.5%) sectors. In terms of age, there was no change in the 16-24, 65-74 or the over 74 categories, but there were falls in charitable giving for those aged 25-44 (from 33% to 28.6%) and 45-64 (38% to 32.3%) (Figure 11). The 65-74 age group currently donates the most to the DCMS sector yet though the share of the older population may increase, for the reasons outlined above this may not necessarily mean increased revenue for museums and galleries as these groups balance other financial demands^{viii}. In addition, there are differences in the direction of donations, with national museums perhaps receiving more than independent and civic museums and galleries.

Figure 11 Proportion of age categories making charitable donations to DCMS Sectors



Source: DMCS, 2015b

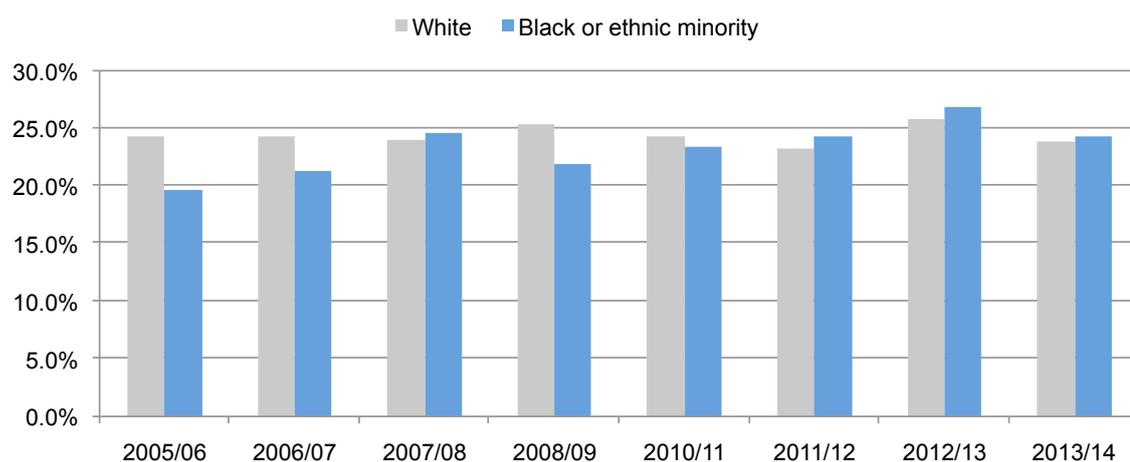
viii It should also be noted that donations can be made in the form of objects for display or auction. Data on these donations are however unavailable.

1.4 Diversity

Not only is the UK population growing and ageing, it is also becoming more diverse ethnically. By 2051, the UK population is projected to increase to around 78 million with the ethnic minority share increasing from 8% in 2001 to around 20%. So while the population increases, White British, White Irish and Black Caribbean groups are projected to experience slowest growth whilst the categories of Other White (Australia, US and Europe) and Mixed will experience the biggest rise (Rees et al., 2012). It is projected that by 2051, in England and Wales there will be 3.8 million black and minority ethnic (BME) people aged 65 and over and 2.8 million aged 70 and over (Lievesley, 2010). This increase from 2001 when 93.4% of those over the age of 65 were White British is something museums and galleries will need to consider when exploring ways to engage with an ageing population (Katbam and Matthews, 2006). Authors have argued that despite efforts to engage with a broader range of groups at risk of social exclusion, as it stands there tends to be a low representation from minority ethnic groups or people with disabilities, whilst older people who are white are comparatively over-represented in both volunteering in and visiting galleries and museums (Ellis-Paine and Davis-Smith, 2006; Low et al., 2007). In Davis-Smith and Gray's study (2005), they found people from minority ethnic groups were under-represented amongst volunteers and though

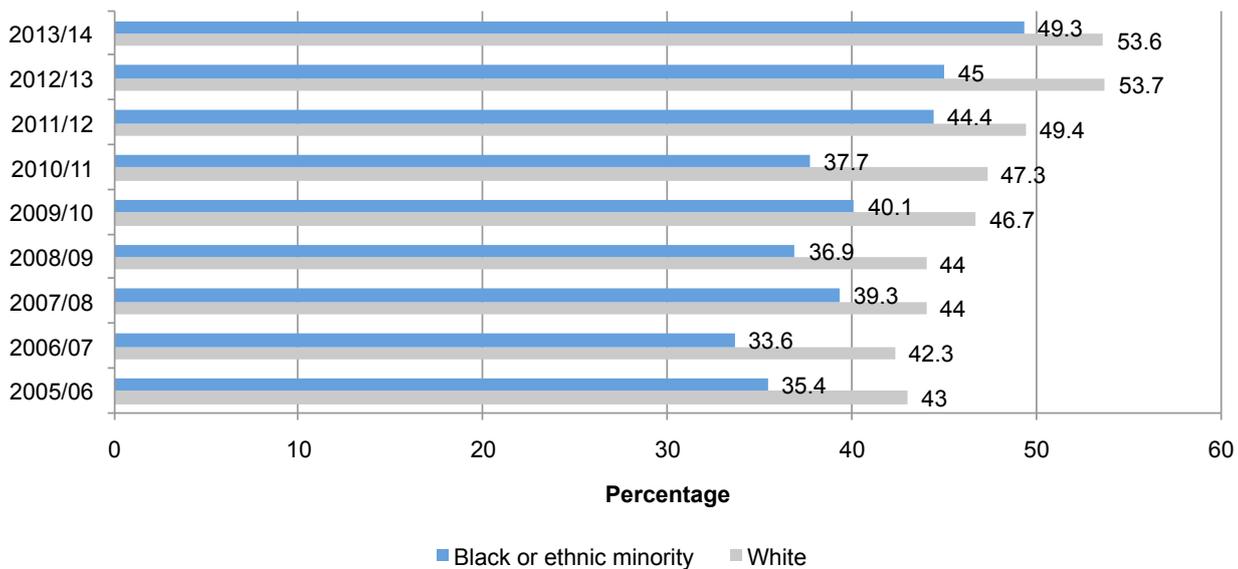
organisations had tried to widen participation, there was limited success. A lack of resources for outreach and more deep-seated issues around the image of volunteering acted as barriers. Partnership working with community leaders from minority ethnic groups was identified as one way to encourage more diverse volunteering. However, as Figure 12 shows, volunteering among BME groups between 2011/12 and 2013/14 rose beyond that of white groups. Low et al. (2007) also found differences in the type of organisation volunteered for by ethnicity. Almost half of Asian volunteers and 41% of black volunteers helped in religious organisations, compared to one-fifth of white volunteers. Likewise only 10% of white volunteers helped in disaster relief and overseas support compared to 24% of Asian and 18% black volunteers. White volunteers were on the other hand more prevalent in sports organisations (24%), compared to 12% Asian and 8% black volunteers. In general, the visitor rates for people from minority ethnic groups were lower than for white people across all of the sectors included in the Taking Part survey, as demonstrated by Figure 13. However, people from BME groups are more likely to have used libraries in comparison with white people (47.5% compared to 32.9%). There have also been substantial increases in the numbers of BME people visiting museums and galleries since 2005/6 (rising from 35.4% to 43%).

Figure 12 General volunteering by ethnic group (%)



Source: DMCS, 2015b

Figure 13 Proportion who have visited a museum or gallery in the last year-ethnicity 2005-2014



Source: DMCS, 2015b

A further issue related to the increasing diversity of the UK's population is around cohort effects. As noted in the introduction, 'older people' are not a homogenous group and this is in part due to cohort or generational effects insofar as there are differences between groups born at different points in history. Different cohorts will experience different social and cultural context which in turn shape their attitudes, behaviour and expectations (Mannheim, 1997). One particular cohort which has captured the attention of the media is the 'baby boomer' generation. More accurately, however, in the UK there are two waves of baby boomers, those born between 1945-54 and 1961-65 (Leach et al., 2008). Some of the people in these generations will have spent their teenage years in the 1960s, some in the 1970s and their experiences will shape how they age. These cohorts have been argued to identify more strongly with succeeding as opposed to preceding generations, and therefore see themselves as more allied with younger rather than older characteristics, attitudes and behaviours (Biggs

et al., 2008). Consumption has an influence on identity, and therefore the consumer habits of those seeking to position themselves as 'not old' may reflect this. This could have implications for organisations with an audience or support base which traditionally has been seen as older. As such, organisations like the National Trust whose membership has traditionally been popular with those over the age of 50 are now considering ways to positioning their organisation to attract people who may not identify as being in the category of 'older'. As an organisation, they are beginning to observe increasing numbers of grandparents visiting their properties with grandchildren and are starting to think about how they need potentially to differentiate these grandparents from their other senior members and communicate with them accordingly. These issues may also present challenges to museums and galleries as forthcoming generations may not wish to engage in activities which have traditionally been characterised as for 'older people'

1.5 Summary

Section 1 has examined the various ways the UK context for museums and galleries is changing, related to the ageing of the population, but also important issues related to healthy- and disability-free life expectancy, the role of policy and broader issues around diversity. While we can say that the population from which museums and gallery audiences, volunteers and other stakeholder will be drawn is ageing, it is important to highlight the inequalities around issues such

as health, disability and income which the data has shown, mediate the ability to engage with museums as visitors, donors and volunteers. Case studies have demonstrated how museums and galleries are confronting some of these issues. The next section will explore the way the context is also shifting within the museum and gallery sector, and how these changes intersect with issues related to population ageing.

2. Changing sector: priorities, audiences and funding

2.1 Changing priorities - beyond education and preservation

As explored in Section 1, the context within which museums are located is changing as the population becomes older and increasingly diverse. At the same time, the museum and gallery sector is also undergoing changes. No longer is the focus of museums and galleries' work to preserve history and art and present it to their audiences. They are now shifting their focus to provide additional benefits such as community engagement, social inclusion, health and wellbeing gains, and also to demonstrate value for money (Sandell, 1998; O'Neill, 2002; Holden, 2004; Scott et al., 2014). While some (Scott et al., 2014) argue the policy imperatives of the New Labour era meant museums were often appraised in terms of whether they delivered social inclusion, community renewal or lifelong learning, others argue some museums were already focused on social justice, and did not then abandon this cause with the shift to a Conservative-led coalition government in 2010 (Fleming, 2013). It is argued by some that by assigning social goals to arts and cultural organisations, governments have sought to reduce the autonomy of these organisations. However, others argue museums have a social responsibility to adapt to the needs of the wider community (Sandell, 2002). Within the past ten years and influenced by Arts Council England and the Royal Society for Public Health, museums' remit has expanded beyond education and the preservation of history to promote wider concerns of social inclusion and cohesion (Jung, 2011; Coffee, 2008) and health and wellbeing (Shaer, 2008; Roberts et al., 2011; Camic and Chatterjee, 2013). Nonetheless, with cuts in funding, these ambitions are becoming increasingly difficult to actualise, as will be explored in Section 2.2.

Taking this agenda further, museums and galleries have been advocated as sites of public health interventions (Camic and Chatterjee, 2013), supported by a growing evidence base^{ix} related to the positive impact of engagement on health and wellbeing. It also heralds a shift away from a reductive overly-medicalised model to consider 'mind, body and spirit' in the field of healthcare (RSPH, 2013). Systematic reviews have explored the effectiveness of arts related interventions as part of reminiscence therapy for dementia (Spector et al., 2002), and possible psycho-physiological causal pathways linking music therapy with clinical outcomes have been described (Watkins, 1997; Hamilton et al., 2003). Financial values have been applied to these wellbeing benefits with Fujiwara (2013) using the data from the Taking Part survey to explore the wellbeing value of museums for individuals. He argues people value visiting museums at £3,200 per year in terms of wellbeing^x. This is higher

than the wellbeing value for participation in the arts or sport (both £1,500). However, Fujiwara acknowledges that the causal relationship may be reversed insofar as those with better levels of wellbeing are more likely to visit museums. Qualitative studies have found a positive impact of visiting museums on wellbeing. Packer (2008) for example, found that people who visit museums have an opportunity to relax in a restorative environment. Museum visiting has also been found to reduce anxiety and increase wellbeing (Binnie, 2010). Museums and galleries offer the potential to tackle issues of isolation and loneliness, and therefore the associated health and wellbeing effects, as were explored in Section 1.2. Participation in cultural activities generally has been found to have a positive effect on mental and physical health, life satisfaction, anxiety and depression (Chatterjee and Noble, 2013). Silverman (2010, in Camic and Chatterjee, 2013) argues museums can enhance health and wellbeing in a number of ways: (1) helping with relaxation; (2) an immediate change in physiology, emotions or both; (3) inspiring self-examination, which is good for mental health; (4) promoting health education; and (5) enriching health-care environments.

Perhaps as a sign of recognition of the role arts and museums can have in promoting health and wellbeing, increasingly museums and galleries are working in collaboration with other sectors, in particular health and social services, to offer a wide range of activities 'on prescription'. There are examples of schemes from the UK and further afield where GPs and health professionals have prescribed non-medical interventions for patients, known as 'social prescribing' with a particular focus on the voluntary sector (Brandling and House, 2009; White and Kinsella, 2010). There too are examples of medical professionals recommending courses with an arts-focus (e.g. 'Art on Prescription, City Arts Nottingham [Stickley and Hui, 2013], further examples are listed in Bungay and Clift, 2010). Involvement in these programmes has been found to reduce social isolation and promote wellbeing. Engagement in museums and galleries provides an opportunity to embody a more positive role, even if only temporarily, with positive effects (Newman and McLean, 2002). To further develop the evidence-base, a major AHRC-funded research project has been launched by UCL and Canterbury Christ Church University to look at the value of social prescribing from museums ('Museums on Prescription'). Box 6 explores an early fore-runner in the world of social prescription and arts from the Dulwich Picture Gallery.

^{ix} However, there is debate in the field as to the availability and robustness of this evidence base on the benefits on engaging with museums and galleries, with some arguing that rigour can only be achieved through experimental design to prove causality, whilst others advocate a broader range of methods (de Medeiros and Basting, 2014). Some argue that though there have been Cochrane systematic reviews of the role of arts and museums in promoting health and wellbeing, proper recognition of the health effects of interventions will only follow from good evidence that they achieve their intended health and wellbeing outcomes (Hamilton, 2003). In the absence of evaluation there always will be much uncertainty over benefits, harms, and value for money, and as such health and social care providers will be reluctant to include arts activities in their core programmes. However equally it could be argued those involved in searching for evidence of the impact of arts and health are making the assumption that there is a piece of evidence which will "prove" that the arts are good for your health, and this is unlikely to be the case due to the difficulty in establishing causal relationships untainted by other external factors (Matarosso, 1997: 16-7). Evaluating artistic activities is intrinsically difficult due to inherently complex nature of artistic and creative endeavours, as well as the possibility that the individuality of different healthcare and community settings and the diversity of individuals participating in such projects may confound the findings and limit generalisations (Hamilton, 2003; Clift et al., 2009).

^x This measure of wellbeing is calculated by comparing the life satisfaction scores of visiting versus not visiting a museum, and then calculating the amount of monetary compensation that they would need to maintain the same level of wellbeing if the person did not visit.

Box 6 Case Study: The Dulwich Picture Gallery

'Prescription for Art' is part of the broader 'Good Times: Art for Older People programme' at the Dulwich Picture Gallery. The Good Times programme includes a range of activities including both in-reach (guided tours of the Gallery's Permanent Collection with specially trained storytellers, art workshops, lectures at the Gallery) and out-reach (art workshops and lectures at external venues). The Prescription for Art programme is the result of collaboration between the gallery and local doctors' surgeries. GPs and practice nurses identify those most at risk of social isolation and offer them access to the tailor-made classes run by the Dulwich Picture Gallery. These individuals are older people, living with illness or bereavement as well as those engaged in care for a family member. They are also identified as not belonging to groups that may have prevented social isolation. They then invited to take part in monthly art workshops, designed to introduce them to a range of materials and techniques. Local artists ran these sessions, with support from voluntary workers. Activities include silk painting; poly-brick (where designs are impressed

into blocks), mono and lino printing; glass painting; poetry; sewing; sketching; felt work; clay work; collage; and painting with watercolours and acrylics.

Participants reported their confidence has increased and that they had developed a new, positive outlook. The programme also allowed them to engage with other people from the local community in a safe and supportive environment, and develop important friendships and networks. In approaching those at risk of isolation, the Prescription for Art was able to reach those who would usually have slipped through the cracks of conventional outreach sessions with local community groups. The participants would not typically respond to posters and advertisements for art classes, but their involvement in the project added a different facet to their lives (Harper and Hamblin, 2010). The programme has been so successful that demand has led to the creation of the 'Repeat Prescription for Art' programme which also holds sessions once a month.

Increasingly, museums are expected to deliver outreach in the community. This is partly driven by the acknowledgment that they are a resource for that community which may include members who may be unable or reluctant to enter the museum building itself. As explored in Section 1.2, those over 75 are the least likely to visit a museum or gallery, perhaps due to issues of transportation, health and accessibility. Outreach, therefore, is a way to allow these older people to engage with museums and

galleries. Studies have found outreach to be an important way to engage with groups who recognise that museums and galleries are important, but see them as elitist spaces which 'aren't for them' (Ruiz, 2004). However, traditional outreach sessions led by museum staff are resource-intensive activities. The examples below demonstrate how organisations have been able to meet the growing demand from the local community for engagement with the museum in care settings.

Box 7 Case Studies: Meeting the demand for outreach

Salford Museum and Art Gallery

Salford Museum and Art Gallery's 'Memories Matter' scheme was established around ten years ago, originally with a Link Age Plus grant, then sustained with a Social Care Reform grant. Memories Matter involved a joint commissioning process with the PCT, health authority and the city council which funded a number of projects, including Memories Matter. In that regard, it was a forward-looking grant insofar as it recognised the wellbeing role of the arts and museums sector. Since this funding stream ended, Memories Matter has become part of the core provision of Salford's Heritage Services, part of Salford Community Leisure, a community benefit society.

The Memories Matter programme has three elements: first, reminiscence boxes which contain items to spark discussion and memories, and are available to loan for two week periods for free. The boxes have particular themes and as the programme has developed, Salford Museum has found that the World War II home front box is becoming less relevant to the individuals they

work with and so have replaced it with a 'teenage kicks' box, focused on growing up in the 1960s. The scheme also loans four pop-up exhibitions, designed to fit along hallways or in lounge rooms of residential care facilities. The exhibitions also include a handling box, tailored to the theme. Finally, the Memories Matter programme also loans picture packs. The local population have to a large extent remained in Salford and the surrounding area so photographs of the city prompt many memories. It became apparent that though these facilities were available to loan, some groups were not sure how to use them and so the museum began to provide training to carers in how to deliver reminiscence sessions. As with the House of Memories programme in NML, it was clear that the Salford Museum did not have the capacity or resources to match the demand for outreach sessions, and so training carers themselves to deliver the sessions was a way to meet a need in the community within practical confines. These two hour sessions explained what reminiscence is and what the

benefits are including raising self-confidence for both the older people and the care workers delivering the sessions, making older people feel valued and respected, supporting care plans and helping staff to empathise with those they care for. These sessions are run twice a year. Currently Memories Matter has expanded to include 15 resources available to loan to a huge range of organisations including residential care services, sheltered housing, the third sector and day centres. To date, Memories Matters has linked in with over 350 organisations and are loaned thousands of times each year.

More recently, a new programme aimed at bringing art activities to those with dementia was launched. ArtBox

Creative Dementia Resources has created four boxes to encourage care providers to be creative when they engage with people with dementia. As with Memories Matter, the boxes are themed ('afternoon tea', 'adventures', 'sports day' and 'the great outdoors') and encompass a wide range of activities to include storytelling, gardening and movement based activities, as well as more traditional arts materials. Again, as with Memories Matter, training is provided to give care providers the confidence to organise their own arts-based sessions, and in time to create their own resource boxes.



PHOTO: SALFORD MUSEUM AND ART GALLERY

Edinburgh Museums and Galleries

Edinburgh Museums & Galleries provides an example of the importance of volunteers, particularly in a period when funding is limited. The Museums Alive programme was established in 2011 as a partnership between the Edinburgh Museums & Galleries Outreach Service and Health and Social Care's Volunteer Development Team and Older Peoples' Services. The aims of the programme are two-fold: to promote volunteering at the museums and galleries and also to engage with older people who may be unable to visit, but could still benefit from activities designed to improve their health and wellbeing.

A pilot was established, working with day centres where volunteers were trained to provide reminiscence, art and music activities. Co-production was also a theme, with participants and facilitators together creating songs and artworks. The pilot was a success, and the project was expanded to other day centres, sheltered housing and care homes. Working in care homes in particular necessitated a different approach as the participants were frailer, and some had conditions such as dementia and hearing problems. As a result, more volunteers were needed to

provide additional support to ensure all participants were able to contribute to the sessions. The aim was to have a volunteer to every three participants; this would be extremely costly if a conventional outreach programme, run exclusively by museum or gallery staff.

The volunteers are actively involved in all stages of planning, developing and delivering sessions. Many of the volunteers have moved on to paid work in related sectors. Many have also spoken of how rewarding they find taking part. In the first three years, the volunteers gave approximately 1,243 hours of their time to the project and have led 124 sessions with older people's groups with an average of 11 people attending each session. From January 2015 until August 2015, 24 sessions had taken place, with an average of 11 participants per session and 236.5 volunteer hours given. The volunteers tend to either be retired individuals, or those who are younger and seeking to develop skills for careers in museums and galleries. The former are currently more prevalent, and tend to be the longest-serving volunteers.

Engagement through volunteering too has been found to have positive impacts on health and wellbeing. The promotion of volunteering therefore could help galleries and museums achieve their wider social goals of improving health and wellbeing. The individual wellbeing value placed on volunteering has been placed at £13,500 (Fujiwara et al., 2012).^{xi} Volunteering in later life has been found to have a positive effect on individual wellbeing and health generally, with some additional complexities (Luoh and Herzog, 2002; Warburton, 2006). Positive health effects have been reported in terms of better self-reported health (van Willigen, 2000; Thoits and Hewitt, 2001), lower mortality rates (Musick et al, 1999; Lum and Lightfoot, 2005) fewer depressive symptoms (Rietschlin, 1998; Lum and Lightfoot, 2005); higher self-esteem (Thoits and Hewitt, 2001); and improved functional abilities (Lum and Lightfoot, 2005). However, it has been noted that it is difficult to disentangle cause from effects, with it hard to establish as to whether volunteering promotes health, or healthy people are more likely to volunteer. Wilson (2000: 232), for example, notes that “[v]olunteering improves health, but it is also most likely that healthier people are more likely to volunteer. Good health is preserved by volunteering; it keeps healthy volunteers healthy”. Therefore people in better health are more likely to volunteer, and in turn engaging in volunteering will sustain their good health. Yet Onyx and Warburton (2003) used longitudinal data to demonstrate that voluntary work did indeed have a positive impact on health but also that health decreased with the more hours volunteered. Volunteering, they also found, has an

adverse effect on health for those who had fewer resources. The type of activity, and whether it met the ambitions of the volunteer also had an impact on health outcomes. Research has also been conducted in how volunteering improves health. Warburton (2006) found that as isolation is linked to poor health, the social element of volunteering is key. She also found increased self-esteem and reduced depression amongst the volunteers. Volunteering provided a sense of purpose, and among the older people in the sample this was important as it came at a time when other roles, such as an employee, were changing. The key positive impacts of volunteering for older people highlighted by this study included reduced isolation, increase self-esteem, feelings of autonomy, a sense of purpose at a time when other roles (for example work) are ending and the ability to ‘give back’ to the community. Influenced by these positive outcomes, volunteering, and its promotion amongst those who are at risk of social inclusion has been advocated through policy. Indeed, “Volunteering has been found to promote social inclusion and social capital ‘which in turn generate certain ‘goods’ such as satisfaction, achievement and rewards” (Slight, 2002: 61). As discussed above, museum and galleries now focus on a broader social agenda, including the promotion of health and wellbeing. Increasing volunteering therefore presents a ‘win-win’ for galleries and museums and the wider public: museums and galleries need additional support in a period of reduced funding and by engaging in volunteering, individuals can increase their health and wellbeing (which is also part of many museums’ broader remit for their communities).



PHOTO: NATIONAL MUSEUMS LIVERPOOL

^{xi} This wellbeing value takes the increase in an individual's subjective (self-reported) wellbeing associated with frequent formal volunteering (a 1.9% higher life satisfaction than non-volunteers) and then calculates the amount of monetary compensation that they would need to maintain their level of wellbeing if they stopped volunteering.

2.2 Changing resources

A further pressure on museums is related to funding. Since the abolition of museum admission charges in many museums in 1999-2001, these organisations are increasingly reliant on external funding, which is increasingly hard to come by even though museums and galleries provide a benefit to the national economy. The current economic climate has reduced the promised financial support from government (RSPH, 2013). Some museums reliant on local authority funding are moving back towards charging for admittance. However, the museum and gallery sector generates £1.5 billion per annum for the UK economy, using turnover (estimated at £900 million) and visitor expenditure. This then means that £1 in every £1,000 is related to the museum and gallery sector. There are 42 million visits each year to major museums and galleries (Travers, 2006) and the numbers of people visiting have risen in the past decade. In 2014, over half of all adults surveyed (52%) had visited a museum or gallery, a significant rise when compared to the 2005/6 Taking Part survey data. The rise was evenly spread across the UK, with the exception of the East Midlands where the rates were similar to those of 2005/6. Almost a third of all adults (31%) had visited a museum or gallery between 1-2 times in a year, a 5% increase from 2005/6. 17% had visited 3-4 times in a year, which again had risen from 13% in 2005/6 (DCMS, 2015a).

Therefore though visitor numbers have increased, at the same time the funding allocation to the sector has not kept pace, and as discussed above, museums are encouraged to engage with diverse groups, address wider issues such as health and wellbeing and thus spread their resources even more thinly. Museums are also subject to pressures in the wider economy such as pay increases; if average wages are rising elsewhere, museums will need to keep up (Travers and Glaister, 2004).

Will then, museums increasingly turn to volunteers to allow them to engage with wider and wider audiences in a time of financial austerity? In terms of the broader context, the current economic climate has been argued to have an impact on volunteering generally. In 2013/4, the Institute for Voluntary Research estimated that there were 15.2 million people volunteering at least once a month in the UK, and 23.1 million volunteering at least once a year. Data from the 2014 Taking Part survey found that almost a quarter (24.2%) of all adults had volunteered in the previous year, a similar rate to 2005/6 (23.8%) (DCMS, 2015a). Volunteering is important both to society and the economy generally, to the organisations which benefit from the contributions of their volunteers and also for the individuals who take part. In terms of the first, Low et al. (2007) estimates the economic value of formal volunteering was £38.9 (±2.5) billion. It is clearly an area of policy focus, the UK government published a Giving White Paper in 2010, with commitments to invest over £40 million in volunteering and social action over 2011 and 2012. There were reports that volunteering had 'flourished' during the most recent recession, but Hill (2011) argues these claims were in fact premature and rates in reality declined. There is the general assumption that people who become unemployed will engage in voluntary work as a route back into employment but the data

would suggest this did not happen during the 2008 recession. Though the Institute of Volunteering Research reported that 87% of Volunteer Centres recorded an increase in the number of enquiries, the national data from the Citizenship Survey indicates a decline in the volunteering figures. Hill attributes the difference to be between a rise in people expressing an interest in volunteering versus a fall in those actually volunteering. Hill argues that while a rise in unemployment may provide people with more time to volunteer (and as we have already seen, time is cited as the biggest barrier to volunteering), the volunteering rates for those who are unemployed are lower than for those in employment. The dynamics between recessions, volunteering and unemployment are relatively under-researched, with Hill arguing different scenarios could apply: that employer-supported volunteering could increase as employers have less paid work for their employees; that it could decrease as employees are more concerned about taking time off during a period of high unemployment; demands on the voluntary sector will increase whilst funding decreases, which affects the ability to formally involve volunteers effectively. In terms of the latter, there has not been a corresponding increase in informal volunteering.

Another factor which may alter the way museums and galleries need to engage with volunteers is related to the idea that motivations for volunteering are now changing with the rise of modernity accompanied by 'individualisation' and self-interest. These issues are argued to be more influential amongst the younger generations. As education and income levels have risen while the rise of global communication and mobility has made the local context less important, traditional social ties along class, family and community lines have weakened. As such, "Individualisation' refers to this process of liberation from predetermined biographies and identities" (Hustinx, 2001: 60). The younger generation have been typified as "apolitical, egocentric, indifferent, materialistic and captured by a television or computer screen" (Hustinx, 2001: 58), and those that do volunteer have been characterised in some quarters as 'problematic', and transformative of traditional volunteering. Whereas previous generations made an unconditional and long-term commitment to volunteering, the volunteering of younger generations is characterised as temporary and instrumental. Hustinx (2001) makes the distinction between classic and new volunteers. Classic volunteers contributed along the lines of their social ties, motivated by ideology and therefore display a great deal of loyalty. In comparison, the motivations and behaviours of young volunteers have changed in that they are no longer loyal to a particular organisation, tend to be more selective and have expectations that there will be a benefit from engaging. Younger volunteers are also argued to be drawn to 'fashionable' causes. However, Hustinx argues that individualisation and youth volunteering are not mutually exclusive. She argues that individualisation does not necessarily equate solely with self-interest: "Young people may have greater freedom of choice, but this does not mean that a desire for expressing solidarity is excluded from their range of possible options" (Hustinx, 2001: 58).

Whilst Hustinx's study was in the Finnish context, data from the UK demonstrates that younger volunteers still retain altruism as a motivation for volunteering, yet with a degree of instrumentalism. Hutin (2008) looked at data from the Helping Out survey related to those aged 16-24 years old and found differences in the types of organisations they volunteer for (educational, sport and religious organisations are the three most popular) yet their motivations are characterised as a mix of altruism and instrumental reasons insofar as the majority said they volunteered in order to help people but at the same time, younger people were more likely to get involved to enhance their skills and employability. 27% of those aged 18-24 surveyed were volunteering to improve their career compared to only 7% for all age groups. Similarly, 46% of those in this younger age group volunteered to learn a new skill compared to 19% more generally. Young people, however, have similar rates for volunteering as a means to meet new people as those volunteering aged over 65. For older groups,

volunteering has the potential also to allow people to form social contacts to replace those they lose at retirement (Davis-Smith and Gray, 2005). Age also made a difference as to whether or not people were motivated by the needs or interests of friends and family, with 16–24 year olds and those aged 65 and over the age groups least likely to identify this as a motivation and those aged 35–44 the most likely to do so. Bernard (2000) found that there were a variety of motivations for volunteering in older age, some of which were age-specific (creating a structure for free time in retirement, a means to use skills acquiring during working life, and a way to engage in activities previously prevented by paid employment) and others which were more general (the desire to help, feel useful, make friends). The case study featured in Box 8 demonstrates how one museum has bridged the gap between younger and older volunteers by providing the former group with the skills that are often a motivation for volunteering.

Box 8 Case Study: Imperial War Museum North (IWMN), Manchester Museum and Museum of Science & Industry

if: Volunteering For Wellbeing is an example of a volunteer training and placement programme which caters for both younger and older volunteers. As explored in the section above, motivations for younger and older people may vary in terms of volunteering, with the former more likely to be concerned with gaining skills for employment while the latter view it as an opportunity to engage socially. The *if*: Volunteering For Wellbeing programme, delivered by IWM North, part of Imperial War Museums, Manchester Museum and Museum of Science & Industry, aims to provide participants with transferrable skills and an opportunity for isolated individuals to widen their social networks, and therefore attracts participants from all age groups.

The *if* programme builds on the HLF-funded In Touch Volunteer Programme which ran from 2007-2010 by IWM North and Manchester Museum. The In Touch project helped over 180 individuals from a diverse range of backgrounds in Greater Manchester access heritage, re-engage with learning and develop key transferable skills leading towards increased employability. The feedback from the project was that it provided an important early-intervention opportunity to prevent long-lasting unemployment and social isolation.

The *if* programme involves a ten-week training course (one day a week) where participants learn new skills and have the opportunity to undertake accredited training on subjects such as customer service and conservation skills. The course is also accredited and delivered using the ASDAN Volunteering short course, which recognises 60 hours of volunteering. After their training, participants then undertake work experience under the mentorship of regular volunteers. Mentors themselves are generally those who have also been through the *if* programme. Often these are older volunteers, and IWM North finds

that they view they have similar motivations in that their engagement with the museum is to improve their skills or reduce their isolation and provide a new sense of purpose. Once they have completed their work experience, they are then offered the opportunity to 'graduate' and volunteer with one of the project partners (Manchester City Galleries, Manchester Jewish Museum, Museum of Science and Industry, National Trust Dunham Massey, Ordsall Hall, People's History Museum and the Whitworth). Participants' out of pocket expenses such as travel and childcare are reimbursed to remove some of the barriers which may prevent them taking part.

Aside from advertising for participants via the museums' and project webpages, the museums also work closely with local key workers, health and social care professionals and local Job Centre's to recruit potential volunteers who are then invited to attend a taster session. Those who would like to take part then have a one-to-one meeting the volunteer coordinators at their chosen venue (IWM North, Manchester Museum or Science and Industry). This enables the museums to recruit those who will gain the most benefit from the programme. Of the 160 people who have engaged in the *if* programme, to date, the mix of ages has been fairly evenly spread, with 53 from the 16-25 age group taking part and 63 aged from 26-49 and 44 aged over 50. The project website includes a guide for other museums who may wish to create a similar scheme, including templates for recruitment materials (www.volunteeringforwellebeing.org.uk).

The project was evaluated using a Social Return on Investment methodology and in its second year it was estimated, without accounting for future longitudinal benefit periods for stakeholders, the programme has generated added social and economic value between £278,000-£310,000.

The dual trends of reduced funding at the time of increased awareness of the role of museums and galleries in promoting health and wellbeing present the sector with challenges, but also opportunities. While reduced resources are being spread increasingly thinly, the recognition that museums and galleries can contribute to broader social goals provides the opportunity

to engage with partners from other sectors to share expertise and resources. New opportunities for funding, such as funding through personal budgets and Clinical Commissioning Groups, are emerging (RSPH, 2013). Box 9 below includes some examples of cross-sector partnerships which have allowed museums to widen their impact.

Box 9 Case Studies: Cross-Sector Partnerships South London and Maudsley NHS Foundation Trust

The Journeys of Appreciation programme (JOAP) is an example of cross-sector partnerships, funded by the Maudsley Charity. Previous research (BMA, 2011) has indicated that boredom on inpatient wards is a one of six main factors which contribute to unsafe wards, and arts and humanities programmes have been found to have a positive impact on patients in terms of their reducing the length of hospital stay, reducing level of medication consumption, promoting positive relationships between staff and patients and having a positive effect on clinical outcomes (Staricoff et al., 2003).

With these potential outcomes in mind, a partnership was formed, facilitated by South London and Maudsley NHS Foundation Trust's (SLAM) Head of Arts Strategy to provide creative activities for older adults with mental health problems and dementia. In the first year of the programme, The Mental Health Older Adults Clinical Academic Group in the Trust joined with the Dulwich Picture Gallery, Horniman Museum and Gardens, Tate Modern and Tate Britain to engage with inpatient service users and staff from the Maudsley Hospital, Ladywell Unit at Lewisham Hospital and the Bethlem Royal Hospital in monthly visits to the museums and galleries, and with follow-up creative and therapeutic workshops. These workshops are led by artists and museum engagement staff, drawing on the museum and gallery visits. The programme also aims to encourage the wards to use Life Story Work to enhance care plans. Life Story Work is an approach which aims to develop an understanding of the person receiving care in terms of their biography to promote a more person-centred care approach thus and promoting positive relationships between patients and staff. Later in the project, a partnership was formed with the Cinema Museum.

The programme was initially piloted in 2009 with older users of day services at the Tate Modern, before a second pilot 'Art into Life' was launched with inpatient wards at the Maudsley Hospital. The pilots revealed a demand for the activities, but also highlighted important issues such as transport and the cost of staffing (often one-to-one and to "backfill" the staff on the wards). The Art into Life project was evaluated using the Mental Well-being Impact Assessment (MWIA) methodology (Shearn, 2012). The main findings from the evaluations were that there was a positive impact on the participants who were able to access the Tate Modern as a positively regarded and prestigious



PHOTO: NHS LIBRARY

shared public space (Shearn, 2012: 2). For inpatients, access to public spaces is restricted, and the visits also provided an opportunity to interact with members of the public. Staff also were inspired to think more creatively about activities on the ward and care plans.

An evaluation with service users and staff after year 1 of the Journeys of Appreciation programme. In all, seven main themes emerged:

1. The visits were a joint learning opportunity (We all learnt something).
2. They were also an opportunity to share an experience.
3. For members of staff, the visits provided an opportunity to see their service users in a different way.
4. Relationships with, and knowledge of service users was also improved.
5. An activity which allowed service users to get off the ward was also valued.
6. For some of the staff and service users, the visits provided a new experience. Many staff did not know the richness of the local area.

7. The visits allowed staff to find out about service users hobbies and interests, which may not have been known before (Shearn, 2014).

These positive findings from the MWIA helped to secure further funding from the Maudsley Charity for a further four years and the expansion of the programme to three additional wards and more galleries and museums, including the Cinema Museum. The cost per gallery or museum visit is around £1,000 in order to fund one-to-one support, provide ward staff cover/ back filling and transport.

JOAP has provided the catalyst for new work in the area of arts, culture and museums. the partnership has

provided individual members with greater networking opportunities. For example, the NML House of Memories programme recently provided training at the Cinema Museum in partnership with SLAM. The Horniman Museum and Gardens is also taking its work with SLAM forward by providing training on object handling with staff from the health trust. JOAP has also engaged in other opportunities for sharing activity and practice, such as with the Older People's Arts Network in Lewisham and at the 2014 Older People, Isolation and Civic Engagement Symposium at the Albany.

Beamish Museum

Beamish Museum has been developing its Health and Wellbeing programme, which includes working with older people since 2009, with a dedicated Active Ageing officer post created in 2011. One of the aims of the museum's Community Participation Team is to engage with as many people as possible, but for some people, coming to the museum site is difficult. The museum began to take objects out to local care homes to run reminiscence sessions, as part of its Community Engagement Programme. There was a huge demand for these sessions, which outstripped the resources of the museum. In addition, the museum staff did not have the contextual information about the participants to be able to tailor sessions to their needs, which residential care staff had. In order to take this reminiscence and engagement work forward, workshops are now held to share experience and practice around using objects and activities inspired by collections with older adults. The increasing prevalence of dementia has brought a lot of groups who work with people who have this condition, including third sector organisation and housing providers. The workshops are a learning experience for the museum as well as they learn from the other groups attending. They also expanded their collection of loan boxes to 15. The focus has shifted away from pure reminiscence work with the realisation that some people may not want to talk about their pasts, or be unable to. So, for example a suitcase containing dresses and make up could equally be used for a reminiscence session as it could for a story telling activity or inspiration for another activity such as gardening, baking, music or art. Object handling exercises like these have been found to have positive impacts on both physical and mental health (Staricof, 2004; Chatterjee and Noble, 2003). The ability to hold 'precious' objects can enhance self-esteem.

As such, the museum no longer takes objects out to care homes, partly for the practical reasons outlined above but also because of the opportunity to visit Orchard Cottage, a 1940s cottage at the museum. This cottage provides an immersive experience of a typical 1940s home, but the activity coordinators are careful not to contextualise

it as such. It is more presented as a cosy location, which can spark memories and discussions of the 1940s and 1950s, but equally could prompt broader activities. The activities at Orchard Cottage are not purely reminiscence-focused. For example, an activity of making scones is not designed to elicit memories of baking scones in the past but more about the activity itself. It removes the pressure on the participants to produce memories which they may find difficult and where it is not possible, may produce feelings of failure. In partnership with the health trust, a specific men's group has been created with assistance from an occupational therapist who realised this service user group would benefit from meaningful activity with other men. The confidence of the men in this group has grown and some now volunteer at the Beamish Museum and many still attend after discharge from NHS services.

A new group has also been established in partnership with the Alzheimer's Society. Sessions are available to people with dementia and their carers. In the planning stages, it was anticipated that the carers would attend the first session and then use subsequent sessions as an opportunity to take a break and do something else. However, the carers have enjoyed the sessions and continue to attend. Michelle Kindleysides, Beamish's Active Ageing Officer, has observed that the pairs of people with dementia and their carers tend to gravitate to different activities, generally along gender lines and interests. The pairs then naturally split into two groups with a mix of carers and people with dementia who did not necessarily know each other prior to the sessions. The group also interacts with other museum visitors. These interactions have increased the confidence of attendees, with one lady who said she did not like to go out in case people noticed she had dementia feeling more confident and able to talk to other people.

Cross sector partnerships have been crucial to the success of the work at the Beamish. The sharing of knowledge and skills across sectors has been extremely beneficial, with museum staff gaining an insight into particular health conditions which has then helped with

planning other sessions. For example, on the advice of an Occupational Therapist that repetitive tasks were better for certain people with dementia, an activity was designed around building a dollhouse as it involved such tasks. The funding for the Alzheimer's project was provided by the local council and a cross-sector approach strengthened the application. Partnership working also helps with signposting the various stakeholders to other organisations that might be of help. Members of the museum staff also visited Den Gamble By (The Old Town), an open air museum in Århus,

The Geffrye, Museum of the Home

The Geffrye Museum has been engaging with older people for more than a decade, both within the museum and in outreach sessions at health and social care settings. However prior to 2010, the Geffrye Museum was running a series of short-term projects that generally engaged active older people. There was an acknowledgement that a shift to focusing on securing funding for a larger project for older adults who were more vulnerable, isolated and 'hard to reach' would be valuable. As a result, Evergreen Gardeners was established as a pilot and funded by the Calouste Gulbenkian Foundation.

In the beginnings of this project, the Geffrye used 13 outreach 'taster' sessions to recruit older adults with additional needs and their carers, visiting day and support centres, dementia services, group projects and care homes. Flyers were also circulated in GP surgeries in an effort to reach older people who were not engaged in group activities already and perhaps then at greater risk of social isolation. The project gained a lot of momentum and was oversubscribed. Around 170 people attended the taster sessions which resulted in 22 core members of the Evergreen Gardeners project from a variety of ethnic backgrounds with a range of abilities and disabilities including stroke survivors, those living with dementia, physical and sensory impairments, and learning difficulties. The group met weekly in an accessible space with specially-designed raised beds, accessible via a bespoke-created ramp, to engage in gardening and garden-related craft activities. The project involved working in partnership with Thrive, an organisation committed to making gardening a more accessible and multi-sensory experience, who acted as consultants, helping the Geffrye Museum to tailor the activities to the participants' needs. The project also included a personal care support assistant who was a trained social care worker, which made the programme more accessible to those with a wide range of needs. The sessions cost around £750 each to cover staff, resources and transportation costs. At the end of the project, a skills-sharing day was held for colleagues working in similar areas and the project also produced an activity pack which is publicly available for free on their website, including inclusive and adaptable activities developed through the project and selected by the group.

Denmark which also runs reminiscence sessions in their 'House of Memories' (a house furnished in the style of the 1950s) (LEM, 2013). Beamish Museum is currently involved in an Erasmus+ funded project (2015-2017) to explore the impact of reminiscence sessions in Open Air Museums and to develop a range of resources and support for formal and family carers. This is in partnership with Open Air Museums in Denmark, Sweden, Norway and Hungary.

An independent evaluation involving participant observation, surveys and qualitative interviews found that participants and carers benefited from learning or reusing skills, socially engaging with new people and improvements to their health and wellbeing. When the Evergreen Gardeners project's funding came to an end in 2014, the Geffrye Museum sought to expand upon the success of this project. Their application to the City Bridge Trust was successful, which allowed them to launch Feeling at Home, which is a multi-strand project engaging local vulnerable and socially isolated older adults, particularly over 75s and those living with Alzheimer's and other forms of dementia. The aims of the project are to:

- Make the Geffrye and its collections inclusive and accessible, and take it out to those who can no longer get to it;
- Use building, gardens and collections to inspire informal lifelong and creative learning;
- Use building, gardens and collections to support older adults' wellbeing;
- Include older adults' voices and other representatives in decision making across the museum.

The first element of the project is the continuation of the Evergreen Gardeners project, now through monthly sessions, but also the addition of more outreach sessions and monthly tea parties, held at the museum in partnership with Contact the Elderly. In terms of outreach, the museum now provides 15-20 sessions a year to care homes, hospitals, resource centres, housing schemes, clubs and other groups. The tea parties typically involve around 15-20 members of Contact the Elderly groups who engage in craft activities, object handling and tours of the museum. Fourteen of the original Evergreen Gardeners have returned to the project; for many, the monthly club is the only time they leave their home as transport is coordinated by the museum and in this regard, the partnership with Hackney Community Transport and other local transport providers is key in supporting participants to attend the sessions. The continuation of the Evergreen Gardeners Club was also felt to be important to sustain the relationships that were created during the pilot and ensure the participants did not become isolated once more.

The Feeling at Home programme is being evaluated

using a mix of surveys and the UCL Museum Wellbeing Measures Toolkit. Some of the impacts observed to date include a positive impact of their partners' support staff who are able to engage on a more social level with their groups as the project provides their only volunteers to provide more practical support. Though the more art-based activities can make some participants nervous about their skills at the outset, they are generally positive about the experience and these creative activities allow people to gain in confidence. Being able to take pieces home also provides a lasting sense of accomplishment. Part of the project also involves the recruitment of volunteers to support each of the strands of Feeling at Home. There was a drive to recruit more volunteers from a mix of different ages and backgrounds, including older people. Training has been provided for volunteers so they feel confident in helping participants engage with activities, led by experienced Geffrye staff as well as external partners such as Age Exchange.

Partnership is key to the work of the Geffrye Museum insofar as the sessions and activities they provide are created in collaboration, taking into account their partners' service users' needs and preferences. Partners to date have included: Contact the Elderly, Family Mosaic, Notting Hill Housing, The Alzheimer's Society, TLC Stroke Project (Haggerston, Dalston, Queensbridge, Stoke Newington), Hackney Older People's Day-care Services (Marie Lloyd Centre, Sam and Annie Resource Centre), Peabody Trust (Sundial Centre) and Outward and Hackney Libraries. The museum also has an advisory panel to guide the project and the wider work they do. The panel includes members of the Evergreen Gardeners group and outreach partners including Family Mosaic who provide supported housing as well as Contact the Elderly. So far, this panel has played a key role in securing funding and shaping the evaluation process included in the project. The expertise of these partners is key to the way the project moves forward and the broader work of the museum.



PHOTO: NATIONAL MUSEUMS LIVERPOOL

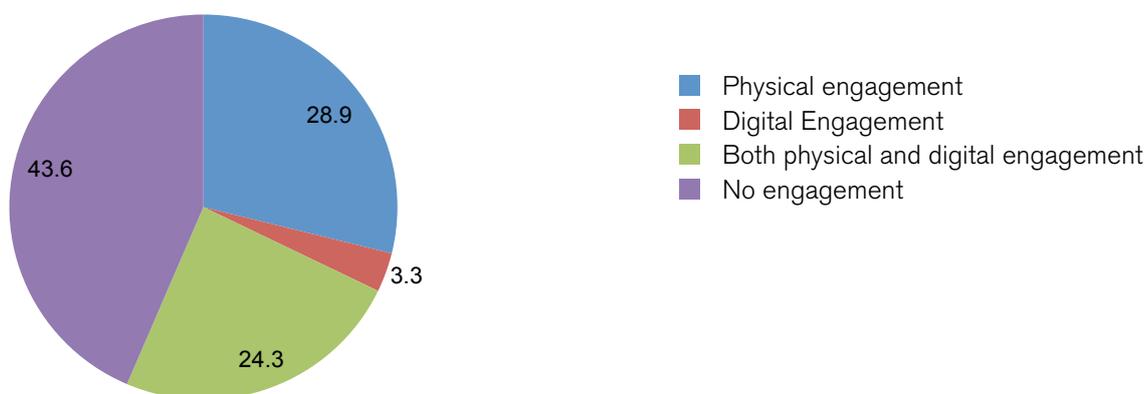
2.3 Digital technology

A further change in the museum and gallery sector is the emergence of digital technology. When exploring the literature, it is clear that the advent of new technologies offer opportunities but also challenges for museums. Scott et al. (2014) note that new technologies are changing the ways we communicate, access information and culture, and form identities. Museum and gallery websites have the potential to widen museum audiences both geographically and temporally as they are unencumbered by geography or opening hours (Camic and Chatterjee, 2013). Increasingly people are engaging with museums and galleries through digital technology. In 2013, 27.5% of adults had visited a museum or gallery website in 2013/14, a significant increase since the Taking Part survey was launched in 2005/06 when the figure was 15.8% (DCMS, 2015c). D'Souza (2011) found that internet access was a predictor of volunteering in sport and cultural sectors. It is not surprising that the Taking Part data revealed that a large proportion (63.3%) of adults who

had visited a museum or gallery website did so to find out about or order tickets for an exhibition or event in 2014. In the space of a year, however, the numbers of people taking virtual tours on museum and gallery websites had decreased from 16.4% to 12.8%, and the proportion visiting a museum or gallery website to view or download an event or exhibition also fell from 13.5% to 10.4%. Perhaps there is merit to the increasing concerns of authenticity and museum experiences in a technological age (Anderson, 1999), and possibly confirms that viewing objects within museums contexts is important as it is argued they can take on new meaning, and stimulate memory and discussion (Chatterjee and Noble, 2013).

However, as outlined in Box 10, museums and galleries are exploring new ways of using digital technology as a means to engage with people who may find accessing their collections in person challenging.

Figure 14 Digital and physical participation in museums and galleries (2013/14).



Source: DCMS, 2015b

There have been concerns that the advent of digital technologies and the internet will exclude older age groups who are less accustomed to and familiar with ICT, or do not have access to the equipment required. Older people have been argued to be left behind in this 'digital divide'. There is a distinction between first and second-level divides (Kim et al., 2009 in Berry, 2011). The first-order digital divide refers to access to technology such as computers and internet connections which will enable people to go online, whilst the second-level relates to the skills necessary. While it is true that the some groups of older people are less likely to use the internet, every successive generation is more likely to be

familiar with ICT. Work environments have changed such that ICT is commonplace, and income and educational attainment increase with each generation, potentially challenging these first and second-order digital divides. Data indicate that while less than a quarter of those aged 65-74 (23%) have access to the internet at home, more than two-thirds (69%) of those approaching retirement (55-64 year olds) do (Ofcom, 2010). In addition, internet access at home is growing faster for the older age groups (55-64 and 65-74 year olds) than that of all other age groups (rising by 6% and 7% respectively) (Ofcom, 2010). However, as with issues related to visiting and volunteering, there are other characteristics along which

internet use varies. Internet access is also less amongst those with low incomes and education attainment, those who are disabled, single parents and people living in rural areas (Berry, 2011; Räsänen, 2006; Wong et al., 2009). Age and these other categories are not mutually exclusive and therefore not necessarily age which acts as a barrier to some older people's use of the internet, but their other characteristics.

Museums and galleries are exploring other means of digitally engaging with their audiences, aside from their websites. Many have digital engagement strategies in place which go beyond ensuring their websites are accessible and engaging to include innovations such as apps and

utilising social media. Box 10 explores an example from the Whitworth who have created an tablet app for older people with dementia to enable them to engage with and access their collection. In addition, as explored in Section 1.2, time is a key issue determining whether people contribute to volunteering activities and the rise of digital technology can provide the opportunity to engage volunteers in more flexible ways. The future will see more technology-savvy older people, who potentially have other demands on their time such as caring and paid employment, therefore making digital volunteering a new opportunity for museums and galleries to embrace. Box 10 provides an example of Birmingham Museum and Art Gallery's digital volunteering programme.

Box 10 Case Studies: Digital Engagement

The Whitworth

The Whitworth has created an ipad app for use by people with dementia. The gallery was exploring digital arts and ageing as a wider area of focus but the idea for the app was partly influenced by Ed Watts' (Engagement Manager) own experience of caring for someone with dementia. He had found that a lot of sensory tools and apps used with older people with cognitive impairment were actually for early-years education and therefore tended to have child-like content. He felt mismatch between the older person and this content needed to be addressed, feeling that the current apps infantilised the person with dementia. The project was an opportunity to develop a new app which was more adult-focused but intuitive and engaging enough for people with cognitive impairment to use. In addition, the gallery has a large digital repository of their art works and the app was a means to put this to use. It also offers people the opportunity to interact with the collection in a more sustainable, flexible way; visits require a great deal of organisation and can only take place during gallery opening hours whereas the app can be used at any time. As mood affects the symptoms of dementia, this flexibility is particularly useful as the app can be used at time that suits them.

All of these elements acted as a driving force for a pilot. Working with an app design agency, co-design sessions were set up with the Workers' Educational Association. Older members of the association took part in sessions to select the content for the app, and then provided feedback on the end product. This was important as rather than arts curators selecting the content they felt was important, older service users instead decided which artworks they felt

were the most engaging. The Whitworth also liaised with artists in America who were using ipads.

The ipad app has two elements: a 'touch-based' side and a 'sound-based' side. The former has pattern-focused, featuring wallpapers and textiles in black and white which become coloured when the screen is touched. It also allows the users to move and interact with the fabric. The sound-based element includes narratives and stories behind particular parts of the gallery's collection. The ipad app is simple, user-friendly and intuitive and is currently being trialled in a number of care settings as well as in partnership with the artist Claire Ford who uses it as a starting point for discussions in her ipad engAGE project. So far, it has become apparent that in designing a dementia-friendly app, the Gallery have also produced a product which is also stroke- and disability-friendly more generally.

Future plans for the Art Sense app include a more systematic evaluation approach. The feedback so far has been overwhelmingly positive, and the Whitworth feels that a structured evaluation could help secure further funding and use of the app. The app has been found to be soothing for some people with dementia during periods of agitation. The Whitworth would also like to trial it with informal carers as well as in residential care settings. Intuitively the app could act as a 'conversation starter' for people with dementia and their carers which does not rely on the recall of memories. The Whitworth would also like to integrate the app into the Arts and Health work they do in terms of using it in hospital settings.

Birmingham Museums Trust



PHOTO: BIRMINGHAM MUSEUMS TRUST

Unlike many organisations in the sector, Birmingham Museums Trust receives more volunteering applications from younger people. As a result, the average age of their volunteer applications is 29, which is unusual for the sector. Increasingly, the museums trust were approached by young people who were typically working part time as their part-time work provided them with the time to engage in volunteering, or who were on holiday (be it from University or school) and looking for something to do. This inspired the Trust to consider other more flexible avenues for volunteering, including digital options to encourage increased engagement from groups who were finding traditional volunteering roles difficult or unappealing.

From this starting point, the Trust introduced a project with the Portable Antiquities Scheme, whereby four volunteers working on-site photographed artefacts from a variety of different angles. These photographs were then uploaded for digital volunteers to edit in their own time to effectively 'stitch' a three-dimensional image together using an online app. The app is simple to use, only requiring a brief written guide and the museum has engaged via this medium with volunteers around the world who edit the photographs in their free time. This allows for a greater

degree of flexibility than traditional volunteering roles and removes the cost of travel too. The Trust has also provided an opportunity for younger volunteers who only want to engage during vacation periods for one-week volunteering placements thus allowing them to contribute to the museum but in a way that seems to suit them better than traditional approaches. A further benefit of another non-traditional volunteering project is that a great many of the museum's artefacts are now available to view in online thanks to volunteers working on the Google Art Project, taking their collection to a wider audience both by potentially encouraging people to visit and enabling those who are unable to do so to still interact with the objects.

The Trust also established a second project to encourage digital volunteering. To coincide with an exhibition at the gallery and to increase their digital presence, a role for bloggers was created. These volunteers conducted phone interviews with the artists and posted blogs online, taking the exhibition to a wider audience. As a piece of ongoing work, the Trust also has volunteers supporting their social media with both the Weoley Castle and Thinktank Planetarium Twitter feeds being updated by volunteers remotely.

2.4 Reciprocity: Museums and their audiences

While in the sections above, the role of museums in supporting older people has been explored with some case study examples, older people can in turn contribute to the resilience of museums in more ways than through volunteering. Returning to the traditional role of museums and galleries as preservers of history and culture, older people have a contribution to be made to their collections. Older people can contribute to rather than simply be recipients or beneficiaries of museum and gallery content. Box 11 includes five examples of museums which have engaged with older people to create exhibitions and add to their collections. These projects undoubtedly benefited the museums, but there too were benefits for the participants who felt valued through the inclusion of their reminiscences in exhibitions. They can also contribute by providing a context for museum and gallery collections. For example, older adults have contributed to the Watts Gallery's guide book through reminiscence interviews. These contributions created a greater understanding of the social history of the gallery and added an interesting dimension for visitors.

This recognition that their memories were important could be an important way of promoting wellbeing and resilience in older age. Ageing, and the changes associated with it (retirement, new health conditions, loss and bereavement), have been identified as a potential catalyst for an 'identity crisis' or at least, a change of self-perception whereby the person adapts to a new identity of 'an older person'. This role as an 'older person' can be argued to create 'stigma' or 'spoiled identity' (Goffman, 1963). Finding new roles, or making active contributions to society can be a form of 'resilience' which is the dynamic process whereby people adapt to adverse situations, and in relation to stigma, how they manage spoiled identities. Programmes that utilise the expertise of older people have the potential to provide them with a new role as 'experts', potentially providing a form of resilience and a way of avoiding stigma. As Lynch (2011) notes, engagement with older people can tend to view them as passive beneficiaries rather than active partners and the examples below shift that balance of power.

Box 11 Case Studies: Reciprocity between museums and their older stakeholders

The Museum of Oxford

An example of where older people have made an important contribution to the museum sector is the Museum of Oxford's Morris Motors Centenary project. To celebrate 100 years of car manufacturing in Oxford, the Museum of Oxford worked in partnership with Hands On Oxfordshire's Heritage, the Museum of Oxfordshire, Oxford Bus Museum, Oxfordshire History Centre, MINI Plant Oxford, Banbury Museum, The National Trust (Nuffield Place), Modern Art Oxford and BBC Radio Oxford to deliver a series of Morris Motors themed reminiscence events in order to collect memories of the car industry in the county. The sessions took place at a variety of locations in Oxfordshire with a connection to the car industry and utilised the museum's collection related to the Morris Motors plant. Participants also brought in their own objects. The sessions were recorded and fed into the displays at the museum and formed the basis of a BBC Radio

Oxfordshire documentary and featured in an episode of BBC Countryfile. They are now preserved in the archives at the Oxfordshire History Centre. The project engaged with 274 older people who had associations with the car industry in Oxfordshire.

The project included the opportunity for participants to feedback about their experiences. They felt the programme allowed them to preserve their memories of the car industry and valued their contributions. Their memories of the motor industry and its impact on the county have been preserved for future generations to enjoy. The Museum of Oxford reflected that the contribution of older people in the local community had uncovered previously unknown information. In addition, the project also attracted a high proportion of male participants (over 50%), which is unusual for reminiscence activities.

Salford Museum and Art Gallery

Another example of reciprocity between museums and older people is the Stories of Chat Moss project by Salford Museum, which involved both the museum preserving older people's memories, and those memories in turn generating resources for the museum and community. The project received funding from the Heritage Lottery Fund in 2011 and sought to capture the memories of a specific area – Chat Moss, an area of fertile peat known for its market-gardens – from the perspective of the older people who grew up and farmed there. The advent of supermarkets and imported fruit and vegetables in the 1980s has meant the area no longer generates produce and many of the younger members of the community were unaware of its history. Oral histories of those living in the area were collected and excerpts from these were used by local artists in their work in schools. The aim was not only to preserve these memories, but to help the local children to understand how the area has changed, and reconnect with their environment. Seven junior schools were involved in the project, and one senior school. A variety of creative arts were used including mosaic, story telling, films and drama and the final results were showcased to the local community and to many of those who had provided the original oral histories.

Entelechy Arts

Entelechy Arts is a participatory arts company based in south-east London (Lewisham) that engages with people of all ages, abilities and backgrounds to produce theatre, music, dance and video events and performances. In particular, they focus on including isolated and physically frail older people and young people who have profound and complex disabilities. Reaching out to those who are isolated is often difficult as by nature of their disengagement, they are rarely part of other groups who could act as a source of referral. Entelechy Arts works closely with the health and social care sectors to ensure those who typically would not encounter organised social groups are provided with the opportunity to engage with them. Every week in partnership with the Albany, older isolated people can take part in the 'Meet me at the Albany' art club. Older people are engaged as co-curators, creators and authors, and in doing so, this group who are often 'invisible' become visible. The referral process means that the participants are reflective of the local population, with BME older people part of the activities. The facilitators are also recruited from a variety of backgrounds to reflect the diversity of the local area.

Central to the work of Entelechy Arts is a participatory approach. An example of this is the Little Boxes project. In collaboration with the Museum of London, the project focused on the life experiences of isolated older Londoners. Inspired by the work of Entelechy's Brazilian sister company Casa das Fases, designers worked with these participants to create multi-sensory artefacts



PHOTO: SALFORD MUSEUM AND ART GALLERY

The event was emotional for some of the older people, who appreciated the understanding the younger generation demonstrated and felt that their memories had been worth listening to. The oral histories have been conserved in an archive and in a publication available at local libraries. A learning resource pack has also been created for schools to use with future generations.

which embodied their memories. Poets, weavers, filmmakers, dancers and musicians built rapport and trust with isolated older people who shared their life stories and experiences and from these artefacts such as poems, woven objects, carvings and drawings were created. The artefacts were displayed and toured schools for children with special educational needs. Participants were recruited from the stroke units at local hospitals, residential care homes and those living on their own in the local communities. The project had a strong intergenerational focus, and was designed to create a link between frail, isolated older people and younger people with special educational needs and disabilities. In addition to the partnership with the Museum of London, Little Boxes also involved Lewisham Hospital's Arts Committee and multi-disciplinary health teams from Beech Ward (a stroke unit), students and teaching staff from Greenvale, Richard Cloudesley and Cherry Gardens Schools, Lewisham Adult Social Care Re-enablement Teams and residents and staff from Glebe Court and Manley Court care and nursing homes. The project had an outreach of around 500 people directly through performance and touring exhibitions, and more through its website which provides a lasting legacy of the project. The older participants who co-designed the objects in some cases became engaged with the Albany and Entelechy arts, reducing their social isolation in the longer term.

Bristol Record Office & Museum of Bristol

The Bristol Black Archives Partnership (BBAP) was established in 2006 jointly by Bristol Record Office & Museum of Bristol and local residents. It was important from the outset that the record office and museum were not establishing a programme for the local community, but with them. The project was funded by the Heritage Lottery fund and though the main activity took place in 2006-8, it has a lasting legacy through the preservation of memories and objects which reflect Bristol's diverse history. The programme was officially launched in 2007 by veteran politician Tony Benn and included a partnership of African-Caribbean organisations and individuals, Bristol Museums, Galleries and Archives Service, Bristol Libraries, the University of the West of England and England's Past for Everyone, HM Lord Lieutenant of Bristol and others. The aim was to protect and promote the history of African-Caribbean people in Bristol and participants were invited to contribute via local community groups. Members of the community were offered the opportunity to donate objects as a gift or deposited with ownership retained. Donations were also made by other organisations, including documentaries on the Windrush generation, deposited by the BBC and Trevor Phillips, former chair of the Commission for Equality and Human Rights. The core

group used to meet once a month, chaired by a member of the African-Caribbean community, and produced an annual calendar celebrating icons in the community. Archived material related to many key events in Bristol's past, including the race riots, the bus boycott and the St Pauls carnival.

In terms of the project's lasting legacy, some objects are now displayed at the MShed museum which opened in 2011. The project also created My Legacy Journals to offer African-Caribbean people an opportunity to record their own stories and family histories. These journals are preserved at Bristol Record Office. The project also created a learning resource in partnership with Bristol's Children and Young People's Service (CYPS), the Ethnic Minority Achievement Service (EMAS) and Firstborn Creatives. The resource, 'People Who Make a Difference', profiles 25 African-Caribbean achievers. In addition, a resource pack was also developed using the objects and information deposited as part of the project on the Bristol bus boycott for local schools. The project also helped to raise awareness of the archives in the city, and a guide was created to assist people who wanted to locate sources related to African-Caribbean sources in the museum, galleries and archives in the city.

Age Friendly Manchester

Manchester as a city is bucking the UK's demographic ageing trend as older people were moving out of the city, and in doing so taking their expertise and skills with them. The Valuing Older People partnership was established in Manchester in 2003 with an aim to improve life for older people in the city. The partnership was launched by Manchester City Council, NHS Manchester and community and voluntary organisations. The programme – now known as 'Age Friendly Manchester' following Manchester's appointment as the UK's first Age Friendly city in 2009 – has a senior strategy group which includes representatives from all sectors across the city, including culture, transportation, health and social care all working together to make Manchester a better place to grow old.

From this starting point, the Valuing Older People Cultural Offer (VOPCO) was established in 2007 with a partnership of Valuing Older People team at Manchester City Council, the Audience Agency and Library Theatre. The aim was to connect older adults with Manchester's cultural providers. The VOPCO programme is run by Age Friendly Manchester, with a working group of 19 cultural organisations from Manchester and Salford including the Manchester Museum, Hallé Orchestra, People's History Museum, Royal Exchange Theatre and the Whitworth. A consultation then led to the creation of the Culture Champions scheme which encourages older people to become ambassadors for arts and culture in their local

communities. The scheme was established in 2011 and within a year, 80 ambassadors had been recruited who in turn had an estimated reach of 1689 people (The Audience Agency, 2013). The aim was to ensure a good geographical spread of Culture Champions. In the first year, Culture Champions were recruited from half of Manchester's 32 wards. Currently there are 135 Culture Champions and future plans include increasing the support for these individuals and expanding the scheme further. The aims of the programme are to firstly inform local older networks and communities about cultural activities and events in Manchester and secondly to encourage their participation. A new element, 'Vintage FM', involves the creation of a radio station, produced and programmed by Culture Champions in partnership with a local radio station to deliver information and cultural content to those who are isolated and perhaps unable to attend museums and galleries in person.

The programme works in two ways: the cultural coordinator alerts the Culture Champions to cultural events including through the VOP Culture Bulletin and activities in their locality, and in turn the Culture Champions tend to focus on particular cultural organisations they are closest too or feel the greatest affinity with. They then pass on this information to their communities and encourage participation. The Champions are also invited to special events such as Cultural Tours to give them an insight into

the upcoming events at local cultural organisations, and the Culture Champions Annual Celebration which brings them together to network and provide feedback on the scheme. Culture Champions can also access discounted tickets and are invited to take part in specific projects the cultural venues are hosting. Aside from disseminating information, the champions also play a key role in the programming and delivery of activities and events. This marks a shift for arts and museum engagement activities as something that is 'done with' rather than 'done to' older people (Ward and Winn, forthcoming).

The Culture Champions have also provided insight into barriers older people face when accessing culture. The evaluation, conducted by the Audience Agency (2013), included surveys, in-depth interviews and focus groups found transport and costs were key, but poor health and a lack of confidence were also issues. A lack of information and an unease about accessing these cultural venues were also highlighted, which the Culture Champions themselves can assist with, disseminating events and reassuring people that these venues are 'for them too'. Culture Champions were motivated to get involved by a desire to find out what was happening in their local community, and to encourage people to become more engaged. The Champions themselves also reported benefits, including increased confidence and happiness, feeling more knowledgeable and more connected to their local communities. They also felt a great sense of ownership when programming and delivering activities, and their membership on the Age Friendly Manchester senior strategy group enhances this. The benefits of the Culture Champions also reached the cultural organisations who recorded increased engagement with older people directly through the volunteers' actions.

An example of the Age Friendly Manchester and Culture Champions includes work at the Manchester Art Gallery, which has formed an Age Friendly team of volunteers. Participants were invited from the Culture Champion network, local mental health organisations and the LGBT older people group. Around half of the participants are Culture Champions and publicise an event to their networks. In turn, some of the group members have gone on to become Culture Champions. For three years, the gallery has invited this group to co-produce an event. 'The gallery is open to 9pm every Thursday and has a Thursday Lates' events programme, and the group programme and produce artworks and activities for one evening. The older participants co-produce an event for people of all ages, and not just their peers. In 2013, the theme was 'Between the Wars' and the older volunteers organised an evening of activities, including debate, curators talks, object handling, creative workshops and dance. The second and third events focused on specific sculptures selected by the participants from the gallery and the Lost Gardens of Manchester respectively and resulted in events which included music, drama and illustration. The participants select and lead the activities, and the most recent programme included intergenerational sessions. These events have been very well attended by the groups' friends and family, other older adult groups and networks and the general public; 2015's event was attended by over 600 people. There are challenges when co-producing events, including the need to balance personalities, manage expectations and ensure that all are involved, and to address some of these issues, the gallery evaluates each project and will hold an away day for participants and staff to develop new ways of co-producing events together.

2.5 Summary

This section has examined the changes occurring within the museum and gallery sector. For some time now, museums and galleries have expanded their remit to consider wider issues such as wellbeing, health, social cohesion and inclusion. At the same time as this expansion however, resources are becoming increasingly finite. When considered in conjunction with the changes outlined in Section 1, this could be cause for optimism or pessimism. On the one hand, an ageing population could in turn bolster museums' volunteer, visitor and donor populations as 'younger' older people are prevalent in these groups. On the other, as people live to increasingly older ages, certain illnesses are more likely, policy changes are encouraging them to work longer and caring responsibilities increase, all of which have a potential impact on the way they can engage with museums

and galleries. Museums and galleries may therefore need to finally consider new ways and means of engaging with an increasingly diverse range of older people. Finally, perhaps a shift away from the pessimism around population ageing is possible by considering other ways that older people can contribute to museums and galleries, aside from the traditional routes as volunteers, visitors and donors. Box 11 has presented some interesting examples of where older people have contributed to museum and gallery collections, and also worked with museums to attract new visitors. These contributions are valuable and where museums and galleries consider adding them to their portfolio of activities, the impact of population ageing on the sector could become a 'double dividend' where mutual benefits are enjoyed by both cultural institutions and older people engaging with them.

3. Conclusions and recommendations

Engagement with museums and galleries as visitors and volunteers is beneficial for older people in a number of ways highlighted throughout this report, including in terms of promoting social engagement, health and wellbeing and reducing isolation. Older people too are beneficial to museums and galleries as visitors, volunteers, staff, donors and trustees, and also can be engaged as creators of museum content. The ageing of the population could then be cause for celebration in the sector, despite the fact that it is often couched in pessimistic 'demographic time bomb' terms in the media. It could be the case of a double-dividend, as older people reap the rewards of museums' and galleries' expanded remit to focus on issues related to health and wellbeing in the community, while the sector also sees an increase in the number of potential stakeholders from this age group.

However, there are several caveats which are important considerations. First, our ageing population is living longer, but not necessarily healthier lives. Healthy and disability-free life expectancies are not rising at the same rate as general life expectancies, and differences are more pronounced along divisions such as wealth, education, geography and occupation. Our ageing population is going to be a diverse one, not only in terms of health and disability but also ethnicity when compared with previous generations. It will also be an ageing population with increasing responsibility in terms of extending their working lives and the provision of care. Museums and galleries therefore need to consider these issues when they seek to engage with older people.

At the same time, museums and galleries too are facing their own opportunities and challenges. On the one hand their remits are expanding while resources are shrinking, but on the other, the increased recognition of their role in health and wellbeing has opened up new possibilities for collaboration and expansion. Again, this is an area where there are both challenges and opportunities, with potential 'win-win' scenarios for all involved.

In order to exploit these opportunities, museums and galleries need to **view older people as an asset, rather than purely an audience**. Where programmes are 'done with' rather than 'done to' older people, the greatest rewards are reaped. By focusing on older people as purely an audience, it would be easy to see an increasingly diverse ageing population as a problem in a time of reduced resources. However, if viewed as stakeholders, whose contributions to collections, to volunteering, as staff, donors and members are encouraged, the benefits of an ageing population for the sector increase.

Even so, audience engagement is still a core part of the work of museums and galleries and they will need to **adapt their approach to an ageing population** which is becoming increasingly diverse at a time when museums are being expected to do more, with less. The case studies have provided a number of examples of interesting work in museums and galleries which navigates some of these issues. Where people are unable or unwilling to attend museums and galleries in person, outreach can be important. This **outreach can come in of different forms**, from lectures to object handling to artistic activities, and museums and galleries will need to be increasingly creative to reach wider audiences with potentially less resource. The provision of resources such as 'memory boxes' and apps can also bring museum and gallery collections to audiences who may be unable to attend in person. The opportunities to **engage digitally** with new audiences will expand both as the technology improves but also as successive generations become more familiar with smart technologies.

Partnership with and training of colleagues and stakeholders from other sectors, such as carers and health and social care professionals, provides a sustainable way of reaching the widest audience. In a period of reduced resources, **partnerships are key**. They allow organisations to share resources and expertise and a means to achieve wider goals. The increased recognition of the role arts and museums can play in health and wellbeing will provide the opportunities to work with health and social care professionals, enhancing the experience of patients and service users but also providing the opportunity for professional development and cross-sector learning.

Intergenerational work is also important, as it allows museums and galleries to engage with younger people as well as older and therefore does not risk marginalising and excluding the former by focusing on the latter. It also has increased the likelihood of engaging those who fall into a museum's profiling of an 'older person' but may not apply that profile to themselves.

Museums and galleries have a great deal to offer older people – as diverse a group as they are – in terms of their wellbeing, health and social engagement. At the same time, older people have a contribution to make to museums and galleries, and in turn their wider communities. The pessimism about the 'demographic timebomb' and concerns about resources needs therefore to be tempered with recognition of the value of older people as active participants in galleries and museums, and the wider community.

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