

Arts & Health – Collaborative Community Plan

This document outlines a framework for developing a cross-sector collaboration that leverages the power of the arts to address specific health and well-being challenges within a community.

1. Project Title

2. Collaborating Organizations

- **Lead Arts Organization:** [Name of Arts Organization]
- **Lead Health Sector Collaborator:** [Name of Health Organization/Collaborator]
- **Supporting Community Partners (if applicable):** [e.g., Local Senior Center, Schools, Community Foundations]

3. Community Health Need / Problem Statement

Clearly articulate the specific community health need that can improve through social connectedness and belonging practices. Provide any relevant statistics or observations.

4. Goals and Objectives

Overall Goal:

i.e. To improve the health and well-being of [Target Audience] by integrating arts-based interventions into existing health support systems.

Specific Objectives (SMART):

- **Objective 1 (Partnership Building):** By [Date], establish clear communication channels and joint planning processes between [Arts Partner] and [Health Collaborator] to ensure seamless program delivery.
- **Objective 2 (Health Issue/Need):** By [Date], demonstrate a [measurable change] among participants, as measured by [specific tool or survey].
- **Objective 3 (Planning Engagement):** By [Date], engage at least [Number] participants from [X number of organizations] in [Number] planning sessions.

5. Intended Audience

- **Primary Audience:** [Specify demographic, e.g., "Seniors aged 65+ living in the Downtown district," "Adolescents experiencing anxiety," "Caregivers of individuals with dementia."]
- **Secondary Beneficiaries (if any):** [e.g., "Family members of participants," "Healthcare staff," "Community volunteers."]
- **Plans/Methods of Reaching Audience(s):** [Describe how project activities are highly accessible due to location, low cost, and/or ability to serve those with disabilities; facilities are ADA accessible.]

6. Arts Integration & Interventions

Evidence of arts integration, direct leadership and participation of arts/artists as the core element of the project. Detail the specific arts-based interventions and how they will be integrated into the health context.

- **Program Name:** [e.g., "Melodies of Memory," "Canvas for Connection"]
- **Activities:**
 - **Art Form(s):** [e.g., Group singing, visual art workshops, storytelling, movement/dance, creative writing, therapeutic drumming.]
 - **Frequency & Duration:** [e.g., "Weekly 90-minute sessions for 12 weeks," "Bi-monthly workshops."]
 - **Location:** [e.g., "Community room at the senior care facility," "Hospital common area," "Local arts center."] – Be sure facilities are ADA accessible.
 - **Integration with Health Goals:** Explain *how* the arts activities contribute to the health objectives.
 - *Example (for loneliness):* "Group singing sessions will foster social connection and reduce isolation through shared creative expression. Participants will learn new songs, share personal stories related to music, and engage in collaborative vocal exercises, building camaraderie and a sense of belonging."
 - **Facilitators:** [e.g., "Professional teaching artists trained in therapeutic arts," "Certified music therapists," "Healthcare professionals co-leading with artists."]

7. Roles and Responsibilities

- **[Arts Organization]:**
 - Program design and curriculum development (arts content)
 - Recruitment and training of teaching artists/facilitators
 - Artistic supplies and equipment
 - Marketing and outreach to artistic communities
 - [Other specific responsibilities]
- **[Health Sector Collaborator]:**
 - Identification and recruitment of participants (health criteria)
 - Provision of program space and logistical support
 - Health data collection and analysis (pre/post surveys, clinical observations)
 - Integration of program into patient/client care plans
 - [Other specific responsibilities]
- **Joint Responsibilities:**
 - Overall project management and oversight
 - Securing funding and grant writing
 - Evaluation design and implementation
 - Public relations and communication strategy
 - Regular progress meetings and reporting

8. Timeline / Phases

Outline the key phases and milestones of the project.

- **Phase 1: Planning & Development ([Month] - [Month])**
 - Formalize partnership agreements (MOU)
 - Detailed program curriculum development
 - Staff training (arts and health teams)
 - Participant recruitment strategy
- **Phase 2: Program Implementation ([Month] - [Month])**
 - Launch of arts-based sessions
 - Ongoing participant engagement and support
 - Regular progress meetings
- **Phase 3: Evaluation & Reporting ([Month] - [Month])**
 - Data collection and analysis
 - Final report generation
 - Dissemination of findings
- **Phase 4: Sustainability & Future Planning ([Month] onwards)**
 - Grant applications for continuation
 - Exploring new partnership opportunities
 - Scaling the program (if successful)

9. Budget Projections (High-Level)

Identify key cost categories. A detailed budget would be developed separately.

- **Personnel:** Teaching artist fees, program coordinator salary, health professional time.
- **Materials & Supplies:** Art supplies, instruments, printed materials.
- **Space Rental/Utilities:** If not provided by a partner.
- **Marketing & Outreach:** Flyers, digital ads, community events.
- **Evaluation:** Survey tools, data analysis software/consultant.
- **Contingency:** (e.g., 10-15% of total budget).

10. Evaluation Plan

How will the success of the collaboration be measured?

- **Quantitative Data:**
 - Number of participants, attendance rates.
 - Pre/post surveys on well-being indicators (e.g., loneliness scales, mood questionnaires).
 - Clinical data (if applicable and ethical, e.g., reduction in medication, hospital readmissions).
- **Qualitative Data:**
 - Participant testimonials and feedback (interviews, focus groups).

- Facilitator observations and reflections.
- Partner feedback on collaboration effectiveness.
- **Reporting:** Regular progress reports to partners and funders, a final comprehensive evaluation report.

11. Sustainability

How will the program continue after initial funding or pilot phase?

- **Diversified Funding:** Pursue grants from arts, health, and community foundations; corporate sponsorships; individual donors.
- **Institutional Integration:** Advocate for the program to be integrated into the core services or budget of the health partner.
- **Volunteer Engagement:** Develop a volunteer program to support activities.
- **Scalability:** Design the program with potential for replication or expansion to other locations or populations.

12. Communications

How will partners communicate with each other and with external stakeholders?

- **Internal Communication:**
 - Regular (e.g., bi-weekly) meetings between core project teams.
 - Shared online document repository for resources and progress tracking.
- **External Communication:**
 - Joint press releases and media outreach.
 - Social media campaigns.
 - Presentations at conferences or community events.
 - Creation of a project website or dedicated section on partner websites.