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Re-imagining the care home: a spatially responsive approach to arts practice with older people in residential care

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Abstract

This paper considers some of the spatial challenges of doing arts projects with older people in care homes, including those living with dementia. It reflects on the author's own experience of running a performance project with residents with at a care home in North London. Drawing on Lefebvre's concept of socially produced space, it argues that repetitive and task-oriented nature of care-giving can create particular challenges for artists who are bringing new activities in. However, rather than seeing the routine practices of a care home as a hindrance to creative activity, this paper suggests that an aesthetic engagement with the space itself can support artists and residents to re-imagine care homes as creative spaces in their own right. This argument is illustrated through an analysis of a sound project that took place in a care home dining room. In describing how the author worked with residents to explore the acoustic properties of the space, it suggests some ways in which artists may find inspiration from the care home environment. In particular, it considers the significance of atmosphere when doing arts practice in care homes as something which can create a shared sense of place. The paper concludes by considering the particular contribution of the artist to the culture of care in light of emerging concepts of relationship-centred care. It suggests that an aesthetic engagement with care homes can draw attention to the relational nature of care-giving, and the wider network of spaces that make up a care home environment.

Introduction

Arts practices with older people who live in care homes have increased significantly in recent years. In the UK, a study conducted by the Baring Foundation in 2011 indicated more than 80% of not-for-profit care homes in England now offer arts activities as part of their services (Baring Foundation 2013, p6). In 2013 Arts Council England announced a £1 million grant to support new arts projects in residential care. This increase in capacity is matched by a new commitment to develop artists' work and reflects an international trend. During a recent investigation into arts practices in dementia care settings in North America, I found that many care homes are now offering regular arts activities for their residents on a long

term basis (Hatton 2013). This commitment is also reflected in Europe. In Finland, for example, David Cutler observed that arts activities are now being integrated into care plans for older people who are transitioning to residential care, and that many older people 'will be interviewed along with family and friends to create a 'culture plan' of their tastes' (Cutler, 2013, p1).

This paper extends current research on the arts in residential care settings by addressing a particular aspect of practice. I am interested in questioning the particular set of challenges that are emerging in relation to the ways in which space is practised and conceptualised. A care home is a unique space in that it exists simultaneously a public space for staff and visitors and a private space for its residents. From my experience of working in care homes I have found that sensitivity is required in introducing new activities while respecting the privacy and domestic routines of the residents. Additionally, in the UK, State-funded care-giving is often task-oriented, and the demands on care staff to support large numbers of residents at the same time often means that residents are woken, dressed, bathed and put to bed at the same times every day. This means that care spaces are characterised by repetition and regulation. The presence of artists will cause disruption a care home's routine and raises particular challenges of how they negotiate the routine practices of the home as they introduce new activities.

In 2012 I was part of a research and evaluation team for Age Exchange Theatre Trust's *Hearts and Minds* programme - a creative arts and reminiscence project for older people living in residential care¹. As part of the evaluation I interviewed two artists who had been working in NHS care homes in South London. Both spoke of the spatial challenges they had

¹ http://age-exchange.org.uk/projects/current/hearts_minds/index.html

encountered at different homes, and the affect it had on the project. In one home, the workshops took place in the day room, which was the only communal space for all the residents in the care home. This meant that their workshops were competing with a number of other activities, and a continuous movement of people in and out of the room. Their stories resonated with own experience of running arts projects in residential care. I'll always remember my first visit to a care home where I was shown into a lounge with a row of long, heavy armchairs which were positioned to face the television. There was no other space to work in, so I shouted above the noise of the television, inevitably disturbing the residents who did not want to take part in the workshop.

These spatial factors impose a set of restrictions on creative practice but they also raise questions about how artists may respond creatively to the space in which they are working, rather than seeing the habits and routines of the care home as a hindrance. As a theatre practitioner who works in care homes my research is focused on how I might be responsive to the spatial dynamics of the care home environment. By becoming familiar with the routine activities of a particular care space, I am interested in whether it is possible to work alongside them and in finding ways to make the space integral to the creative process.

This paper attends to these issues by exploring the idea of a care home as a performative space. I will suggest that performative readings of care homes can demonstrate how care spaces are constructed not just through their architectural properties, but through the activities and people that inhabit them. On the one hand, an understanding of the care home as a performative space can lead to a recognition of how care homes are constructed through the repetitive and task-oriented nature of care-giving. However, I suggest that it

can also challenge the perception care homes as institutional spaces, and help artists and residents to re-imagine them as creative spaces in their own right.

To illustrate my argument, and to consider the particular role of the artist in this context, I shall discuss a performance and sound project which I led at a care home called Springbank in 2014. The workshops, which took place in the dining room of the home, involved a sound designer, three theatre practitioners and fourteen residents, some of whom were living with dementia. The project involved a creative exploration of the sounds of the care home and culminated in a performance and sound installation in the space. In describing some of the ways in which we worked with the everyday sounds of the dining room, I will consider how it enabled me to re-consider the care home in terms of its sensory affordances. I shall also reflect on some of the specific challenges of applying theatre to care spaces and the limitations of an approach that is spatially responsive.

The article is structured into three parts. The first introduces the concept of the care home as performative space and explores how State-funded care homes are brought into being through the routine practices of care-giving. Drawing on Lefebvre's concept of repetitive space, it suggests that performative readings of care homes can shed light on how they are constructed, not just through their physical properties, but through the performance of 'repetitive acts and gestures' (Lefebvre, 1991: 70), which are associated with care-giving and safety management. These perspectives can help us to understand how care spaces are brought into being through the activities and procedures that take place there on a daily basis. However, I also suggest that the repetition of everyday activities can support the possibilities of a care home as a creative space in its own right. I expand on this idea using the idea of 'spatial becomings', as proffered by the cultural geographer David Crouch. I then

turn my attention to creative practice in care homes and analyse some of the key moments from the sound and performance project. In describing some of the ways in which we worked with the everyday sounds of the room, I consider the value of a 'spatially responsive' approach for care homes and suggest that a 'joining in' with the routine practices of the space may support the concept of a care space as 'becoming'. The final section of this paper considers the relational properties of care spaces and how a care home constructed from a range of different spaces from inside and outside the home. I consider the significance of atmosphere when doing creative practice in care homes as something which can create a shared sense of place.

The care home as a performative space

The concept of performed space was applied to eldercare spaces in the doctoral work of gerontologist Janine Wiles. Her thesis, which explores of the adaption of family homes as sites of care, suggests that the notion of performed space is useful in understanding 'the process under which homes as produced as places of care' (Wiles, 2001: 61). Her argument draws on Lefebvre's concept of socially produced space, and alludes to the way in which domestic homes adapt, perform or are manipulated by family members as spaces for informal caregiving. In considering the transformations that these homes undergo, Wiles focuses particularly on Lefebvre's concept of appropriated and dominated space. She suggests that the tension between appropriated and dominated space is comparable to the tension that exists when families adapt their homes as spaces of care, specifically, the struggle between the desire to continue caring for relatives at home, and the expectation that relatives *should* care for their loved ones at home. She explains: 'the home is

dominated as a place for care of elderly persons through the assumption that families will (and should) provide care and by pushing more responsibility onto them, rather than assisting people to *appropriate* their homes as a place to provide care to people whom they love' (Wiles, 2001: 24, emphasis in original).

Wiles' application to family care spaces raises important questions in turn about the production of care home spaces, and how far this process is a result of pre-existing expectations of the space. The success of care homes in the UK is often measured by their ability to complete a certain number of tasks, such as bathing and dressing residents, within a fixed time period. This is especially true of State-funded care homes, where staff are particularly accountable. As Helen Nicholson argues, the performance of an individual home reflects 'paradigms of performance management in the health system that echo business models of efficiency and productivity rather than the immaterial labour of compassionate care' (Nicholson, 2011: 48). The prioritisation of primary care tasks and the expectation that care staff meet targets contributes to the construction of a care home as an institutional space.

The spatial dynamics of a care home are not only determined by generic expectations of task-based care procedures that can be measured. They also determined by a lack of variation within a care home's *routine*. This is particularly true of a care home dining room which is characterised by a structured routine of mealtimes. At Springbank, the dining room was a multipurpose space which was used for group activities. However, the fact that mealtimes and tea breaks took place at the same time every day meant that the space was geared almost exclusively towards food preparation, eating and cleaning up afterwards.

Tables were arranged for residents to eat in groups of four or five, and kitchen staff would frequently be in the space in between mealtimes to prepare for the next meal.

Lefebvre's concept of repetitious space is useful in considering the extent to which the care home dining room is regulated by its routine. Applying Marxist concepts of productive labour, he distinguishes between works of creation such as art works, which are unique and irreplaceable, and products, which can be reproduced exactly. 'Repetitious spaces' he says, 'are the outcome of repetitive acts and gestures' and 'associated with instruments which are both duplicable and designed to duplicate' (1991: 70). In many ways, the routine of the dining room at Springbank was regulated by the productive labour of the care staff. The repetitive act of preparing, serving and cleaning up after meals created an expectation of order that was difficult to disrupt. However, I believe this expectation was also due in part to the historical legacy of care homes as places of discipline and order. The image of a workhouse dining room is largely associated with groups of people sat at long tables, eating the same food *en masse*. While the design of care home dining rooms have evolved significantly since this, the expectation that the space perform its designated function as a dining room still seemed to haunt the space, and was reflected in the embodied behaviour of the residents. For example, I observed that some residents would choose sit in the same chair at the same table every day during mealtimes. Furthermore, one of the participants in the performance project was keen that we restore the dining room to its original state each week, immediately after the session had finished.

The individual routines of the residents at mealtimes prompted me to consider the wider possibilities of these daily repetitions with regard to a care space as 'becoming'. This requires, I suggest, an appreciation of how the daily routines of a care home may be

understood as creative acts, rather than productive labour. The cultural geographer David Crouch offers a useful perspective here in his description of on how outdoor spaces are brought into being through everyday activities. He argues that 'though the potential existence of so called mundane activities for becoming may seem limited' a discussion of the 'apparently mundane' can help us to realise the possibility of unremarkable, embodied activities as 'becoming remarkable for the individual subject' (Crouch, 2003: 1948). Using the examples of caravanning and working on an allotment as practices that could be considered mundane, but are also embodied and repetitive activities, Crouch suggests that these outdoor spaces 'become' something else through 'what he does and the way he does it' (2003: 1953), suggesting that these spaces are made remarkable through the actions of the people who inhabit them. In other words, caravan and allotment sites 'become' not just through their physical properties, but through the embodied behaviour of their inhabitants. Applied to the care home, this implies that within the mundane repetitions of the dining room there may also be potential for creativity and difference. For example, the embodied routine of preparing food and eating together can draw attention to the possibility of the dining room as becoming. The choice of different foods, the process of preparing it and the decision to eat alone or at a table with a group of people are examples of embodied activities that help us to consider mealtimes as creative 'works' rather than manifestations of production. Rather than considering care homes as exclusively institutional spaces which are 'prefigured and determinate' (2003: 1947), the notion of spatial becomings enables me to consider how care spaces are constituted through the embodied practices of the residents. Additionally, it suggests that domestic or creative activities that occur in the space may signify the 'disruption of the everyday' (2003: 1955). For example, domestic activities

such as knitting, reading and listening to music disrupt the primary institutional function of the dining room and draw attention to its possibility as a creative space.

The notion of a care space as *becoming*, as opposed to a space which is produced exclusively by its work-related activities, or by the expectations of the State, also makes me consider that it is not sufficient to analyse the dining room space in dualistic terms, as an institutional space which may be 'transformed' in some way through participatory arts activities. As I have suggested, care home spaces are unique in that they enable different activities to co-exist simultaneously. The co-existence of work and domestic activities such as sleeping, eating and watching television draws attention to a care home's potential as a creative space, or as a space which at least embodies both production *and* creation. As Crouch argues, it is the repetition of these everyday activities which creates opportunities for creativity. This is particularly relevant to developing a creative awareness of care spaces. By understanding the creative potential of the everyday activities of a care home, artists may start to consider how creative practice can support these daily routine as creative acts rather than trying to change or disrupt them. This is not to say that every activity in a care home can be interpreted as a creative act, but that a more detailed attention to how care spaces performs can open up new possibilities for applying theatre to care homes. I would like to develop this idea through an audio exploration the dining room at Springbank.

An aural exploration of a care home dining room

Care homes are complex audio environments and sound can be a particular institutional signifier. Indeed, there is evidence to suggest that the continual audio overload in a care home can be one of the most disorienting changes in the transition from a family home to

residential care. The environmental gerontologist Rosemary Bakker observes that 'many people living in care homes and nursing facilities are subjected to loud and disturbing sounds of alarms, call bells, and overhead paging systems throughout their day' and that noise can be 'a known stressor, especially to people with dementia (Bakker, 48: 2003). Similarly, in her study of one-to-one arts practices in care homes, Caoimhe McAvinchey observed that: 'the sounds of televisions on different stations, radios, doors closing and the hum of conversation were a constant soundscape' (McAvinchey 366). The prominence of the care home 'soundscape' was a key factor in my decision to work with sound. From my experience of working in care homes, it is often noise which creates the biggest distraction in the space. I was interested in how we might engage directly and creatively with the sounds of the dining room at Springbank, and whether this might enable us to experience them in a different way. Additionally, by working alongside the other activities in the space, I wanted to explore how the project may sit comfortably within the everyday routine of the home. This intention feels particularly relevant to working in a spatially responsive way. By joining in with the everyday activities of the space, rather than disrupting them, there is greater potential for creative activity to become a routine part of the space.

The workshops ran straight after lunchtime which meant we were usually setting up as residents were finishing their meals. This was an interesting time to work in the space as the acoustic characteristics of the room were most prominent. As the sound designer set up his speakers and played music to encourage residents to stay for the workshop, the voice of Frank Sinatra would get swallowed up by the clatter of cutlery and the blare of the television.

This set up time enabled me to familiar with these noises and the relationship they had to the room, for example, how sound travelled across different surfaces, the level of echo and the presence of background noise from outside the space. By identifying the different sounds of the room, I could then consider how we might use them in the project. The hum of the kitchen fan, the noise of traffic outside, voices from the corridors, cutlery, and shoes on the laminate floor, were all sounds that we heard over the six weeks, and though these sounds were distracting at times, the audio practices of lunchtime at Springbank became a familiar part of our workshops. This is not to say that they only sounds of the room were unpleasant sounds. There were also some everyday sounds which challenged the association of the room as an institutional space. These included conversations between friends, music, and the sound of birds singing outside the patio doors. However, I was keen to engage with the less 'palatable' environmental sounds to see if we could engage with them in a different way. The clattering of pots and pans in the adjoining kitchen for example were a distraction, but they also evoked associations with home and domestic activities. By engaging directly with this everyday sounds, I hoped that we would be able to cultivate an awareness of their aesthetic potential.

One of the ways we did this was to make soundscapes from everyday objects in the room. The use of everyday objects to create musical sounds was developed primarily by the American composer John Cage in the 1950s. In *Water Walk* Cage (1959) uses, among other things, the sound of ice cubes in a blender, a sauce pan lid being pushed into a bathtub of water, and five portable radios being pushed off the edge of a table onto the floor. Writing on Cage's early work with household objects, the sound artist David Dunn (2001) observed that 'through the 'musical' manipulation of the noises of everyday life, they achieved an

understanding of the meaning of these sounds as an aesthetic phenomena, opportunities for a deepened awareness of the world we live in' (Dunn 3). Cage's dedication to the aesthetic and acoustic value of household objects inspired my decision to explore the household objects of the dining room at Springbank. I was interested in how these ordinary objects, which belonged to the everyday world of the care home, may be seen as creative objects in their own right, but also how they could be used to create new audio experiences within the room.

At the beginning of the workshop we assembled a selection of noisy objects from the space, including a bag of lentils, a porcelain cup and saucer, a set of keys, a paper bag and a coke can. Participants were invited to choose an object and to explore the sounds that it made with a partner. We then went round the circle and heard every object individually. Some participants chose to make 'big noises' with their objects and others made very small sounds that were barely audible without amplification. The sound designer recorded each of the objects as they were played and played them back to the group, increasing the volume so that everyone could hear them. After some discussion about what the objects reminded us of, we explored playing the objects as a group. The exercise seemed to foster at first a sense of playfulness and gradually a collective focus as the objects fell into a sort of rhythm. One woman said that the sounds reminded her feet tapping on the dance floor and the group continued to play their objects, we encouraged them to add bodily sounds such as clapping, talking, singing, foot tapping and whistling. The piece was recorded and played back in the space during the final session.

The exercise, on the one hand, had been an opportunity to engage differently with the everyday sounds of the room and to explore the potential of everyday objects beyond their intended function. It also drew attention to the creative possibility of these everyday sounds and how they may be understood as aesthetic phenomena in their own right. However, there were moments when this task was much more challenging. The sounds of the adjoining kitchen often dominated the space and there was one session when we could barely hear what each other was saying. On several occasions where we attempted to record the residents speaking, the recording was interrupted by the sound of a cash register being emptied on the serving hatch. Furthermore, there was evidence to suggest that external sounds, sounds which came from outside the world of the care home, were more popular with the participants. For example, when the sound designer played an airport soundscape, it triggered a very personal response from a resident who had been an RAF pilot in the war. One of the limitations of responding to the sounds of the care home was that it didn't immediately provide opportunities to connect with other spaces and times in the lives of the participants. Over the course of the project I realised that the spaces were integral to creating a sense of place. The sound of planes taking off and landing were strange to the dining room but created a feeling of familiarity for the participant who had 'a special relationship with planes'. Similarly, several participants responded positively to sounds of the sea, as they reminded them of childhood holidays.

Bringing the weather indoors

This project illustrated that the task of responding creatively to a care home environment does not just require an aesthetic engagement with the space itself. It also calls for a more subtle appreciation of how care spaces are constructed relationally, through a range of

different spaces. This raises interesting questions for artists in terms of how they recognise and respond imaginatively to the spaces that originate beyond the world of the care home but nevertheless have an affective presence in the space.

In considering the relational nature of space at Springbank I have found the concept of atmosphere particularly instructive. In his book *Feeling Theatre*, the theatre scholar Martin Welton uses the term 'bringing the weather indoors' to describe the sensory properties of the rehearsal room, and what they can offer the performer. He uses the notion of an indoor climate as a way of describing the changing atmosphere of a rehearsal space and how these changes are registered by the performer. Welton proposes that 'getting a feel for how it goes', in the rehearsal room involves a process of attuning to atmospheric shifts as much as material ones (Welton, 2012: 126). Considering the overlap of climate with felt experience, he describes the significance of weather as something that is both ever-present and 'an experience which can be shared between humans' (126). However, rather than considering the affective capacity of weather in terms of climatic extremes, it is the everyday-ness or mundaneness of weather, he argues, which creates a shared sense of place, and can help us to understand its affective potential in terms of more subtle atmospheric shifts:

As well as those intensifications of atmosphere which seize hold of or sweep over the body, there are also those which are simply, and rather lazily there, and which, like mist, drizzle or a faint whiff of perfume, do not disrupt the flow of the mundane, but float idly by it. (127)

His suggestion prompts me to consider the nature of a care home's atmosphere and it can be explored through creative practice. When considering the atmosphere of a care home, I often think of its sensory characteristics. The noise of the television, bad smells, and a feeling of stuffiness or airlessness are commonly associated with residential care, and care homes are often judged on the basis of these sensory characteristics. However, Welton's description of the everyday 'weather' of a rehearsal room raises questions about the atmospheric potential of a care space, and how this may be supported through creative practice. This possibility was apparent during a singing exercise.

In the first session we taught the residents a song. The piece was an old folk song called *The Water is Wide*. We had intended to use the song as a vocal warm up which would lead to a sea themed workshop. However, it proved so popular with the group that it became a regular feature each week and was performed in the final session. One of the students sang the whole piece through before teaching it line by line to the group in a call and response. During the first few times, the participants' voices were barely audible although I could see their lips moving as they followed the words on the song sheet. As the tune became more familiar the volume increased slowly and the voices became more audible. During the third time a man who had watched the group in silence the first two times surprised everyone by joining in with a deep strong baritone which resonated around the space.

The singing had an effect on the space in a way which was different to the soundscapes. The density of the voices singing together with their different pitches and timbres seemed to travel further around the room and filled the space in a way that the sound of the objects did not. However, what was particularly interesting about the song was the way that it shifted over the course of the project from being a new and unfamiliar type of sound, to a

familiar sound in the space. By the end of the project it was so familiar that it had almost become a routine sound which had become 'embedded' with the other everyday sounds of the dining room. This was particularly apparent during the final session when one of the participants with dementia sang it quietly to herself, almost absent-mindedly during a tea break.

This idea of an indoor climate, which is characterised by subtle changes in atmosphere, is useful in considering the relational character of sound and space within the project.

Weather was a recurring theme in our workshops, in the soundscapes that we created together, as a topic of conversation and a tangible presence in the space each week. Over the six weeks the temperature became milder and the daffodils came out outside the window. This was a big talking point for the residents and when I greeted the group each week and asked how they were, people would often talk about the change in weather.

Welton suggests that the weather can create a shared sense of place as it is ever-present and an experience which is shared between humans: 'People have always talked about the weather, particularly in England and the process of feeling or imagining atmospheric conditions is a shared experience' (2012: 126). The process of imagining atmospheric conditions was inherent to our use of sound and presented itself in different ways: in our conversations about the weather, in the soundscapes we created, and when rain hammered down on the skylights in the performance during the quietest monologue.

The concept of internal weather is valuable in understanding the relational character of space in a care home. Rather than thinking about the project as an attempt to transform the audio environment of the dining room, the weather encourages me to engage with the aural environment of a care home in a relational way, less in terms of a transformation and

more in terms of a shifting climate of space. One thing that did emerge in the final week was not so much how the sound piece transformed the space, but how the 'event' of the performance changed the atmosphere of the room. It was the spaces in between and around the performance itself where these shifts were most palpable. For example, there was a stillness and quietness as residents gathered to watch the performance, uncertain of what to expect and a hum of conversation afterwards which drifted into the corridor outside the room. The notion of an indoor climate raises opens up new possibilities for creative practice in care homes. Not only as to how we can cultivate different atmospheres in the room, but how the creative context of the workshop may enable us to tap into the range of different atmospheres that circulate in and around the space.

A creative culture of care

Engaging directly with the routine practices of a care home offers artists some imaginative ways of addressing their spatial challenges, rather than seeing them as a barrier. It also raises a broader set of questions about the contribution the artist can make to the culture of care. Historically, the value of arts practices in care homes has largely been attributed to health outcomes, particularly in the context of dementia care. While these outcomes are undoubtedly important, there has been little research that considers the aesthetic value of the work beyond its health benefits. As Caoimhe McAvinchey (2013) observes, 'if we only ask questions about the social, economic and health value of the arts with older people, we continue to develop an evidence base that reiterates particular, already known outcomes' (2013: 361). As the person-centred model of dementia care is being extended by relationship-centred approaches, greater attention is being paid to wider network of other spaces that make up the care-giving environment. This requires, as the gerontologist Mike

Nolan suggests, a re-thinking of the care setting as a 'milieu' of 'multiple care environments' (Nolan et al, 2004: 47). This interest in the relational aspects of care opens up exciting set of possibilities for theatre artists who are working in care settings in terms of how they can use creative practice to engage with a care home as a place, which is constructed through a multitude of different environments. This may involve, for example, an engagement with public and outdoor spaces such as gardens and community spaces, or an exploration of different spaces within the care home. Residents in care homes often choose to sit or socialise in waiting areas, corridors and bedrooms, and the creative potential spaces is worthy of investigation. By attending to the sensory properties of care home environments, as well as recognising the broader network of spaces that make up the care setting, artists may support a culture of care that goes beyond the performance of primary care tasks towards to one which values creativity and reciprocity.

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