Evaluating the Fine Arts Program at the Center for Excellence in Disabilities

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Abstract

Art programs for people with disabilities may encourage creativity, promote engagement, emphasize inclusion, and extend access and opportunities for community involvement. This mixed-method study utilized quantitative and qualitative data, repeated measures, action research, and stakeholder collaboration to develop and implement an evaluation tool that would enable a fine arts program to become a self-improving system. Participants viewed the program favorably and reported improved artistic and professional skills, social integration, self-esteem, and sense of purpose. The evaluation model described in this article can be adapted to a variety of art therapy and arts-related programs to assess the efficacy of interventions or program features.
Evaluating the Fine Arts Program at the Center for Excellence in Disabilities

Approximately 56.7 million people in the United States (18.7%) are living with a disability, and 12.6% has a severe disability (Brault, 2012). Although labeling an individual with a disability provides access to necessary accommodations, it can also become the foundation for stigmatization (Ho, 2004). Art provokes thought on issues related to disability, allowing individuals with disabilities to challenge the stigmas of society (Metcalf, Gervais, Dase, & Griseta, 2005). An increased utilization of community arts programs over the last 20 years has improved the lives of people with disabilities (Heenan, 2006). The current study aimed to create and utilize a valid and reliable questionnaire to evaluate the effectiveness of an ongoing fine arts program at the Center for Excellence in Disabilities in Morgantown, West Virginia.

Studies of various populations have supported the premise that inclusion in the arts improves quality of life despite other negative life circumstances. Involvement in the arts has improved the life quality of people with physical disabilities, chronic medical conditions (e.g., McGraw, 1995), and developmental disabilities (Lister, Tanguay, Snow, & D’Amico, 2009), and has empowered people who are living with mental illnesses (e.g. Thompson, 2009). Specific art therapy interventions have improved social relationships and language comprehension among people with disabilities (Got & Cheng, 2008) and social behavior of children with disabilities (Banks, Davis, Howard, & McLaughlin, 1993). Among adolescents with posttraumatic stress disorder, an art therapy treatment protocol was found to be more effective than a traditional treatment protocol in reducing symptom severity (Lyshak-Stelzer, Singer, St. John, & Chemtob, 2007). Children with autistic spectrum disorders, developmental disabilities, and learning disabilities have all
benefitted from art programs through increases in communication, understanding of the physical world, and development of cognitive skills (Durham, 2010; Furniss, 2008; Wexler, 2011).

Although art therapy and arts programs have a positive impact on a variety of populations, evaluating the efficacy of arts-related programs can be challenging. Flexible, multi-method evaluations are well suited for art therapy and arts-related programs, which produce a variety of quantitative and qualitative outcomes.

The Fine Arts Program at the Center for Excellence in Disabilities

The Center for Excellence in Disabilities (CED) at West Virginia University founded the Fine Arts Program in 2005 to enhance community inclusion, socialization, and employment for people with developmental and other disabilities by improving access to and participation in the arts. The program facilitates access to the arts as a profession, a hobby, or for personal exploration. Participants gain physical and programmatic benefits while connecting to state-wide social networks for people with disabilities. These networks include arts educators, arts organizations, and recreational and fine arts programs. More than 100 individuals with disabilities have been served through art instruction, artwork sales consultation, juried exhibitions, and development of skills and resources to establish themselves as professional artists.

Arts projects are a relatively new approach to community involvement and, therefore, lack substantial resource support. A variety of methods have been used to study the impact of arts involvement and art therapy on people with disabilities, including experimental (e.g. Banks et al., 1993) and qualitative (e.g. Spaniol, 1998, 2005)
approaches. Because data-driven evaluation often is used to determine resource allocation (Fiske, 1999) and to evaluate program efficacy, the authors decided to evaluate the Fine Arts Program outcomes. The aim was to create and utilize a valid and reliable evaluation tool to gain information about participants’ changes in activities outside the home, improvements and/or declines in specific aspects of their lives, satisfaction with the program, and their hopes for the program’s future.

Method

Evaluation Design

This mixed-method evaluation study utilized quantitative and qualitative data, repeated measures, and stakeholder collaboration, which followed an action research model (Dick, 2006) to develop the evaluation process. In participatory action research, researchers work collaboratively “with” the participants as opposed to “for” them to combine knowledge for social change (Whyte, 1991). Consumer collaboration may involve their participation in planning, designing, data collection, and reflection, offering feedback, and taking action in ways that influence the research, thereby promoting the community relevance of the research. The evaluation model in this study comprised four general components of action research: (a) planning, (b) action, (c) observation, and (d) reflection, which corresponded with the specific phases of evaluation described below and represented in Figure 1.

The evaluation process for the study uses collaborative methods to develop program evaluation (Dick, 2006) conducted in three consecutive phases, each of which builds on the previous phase. The first phase is process evaluation, which can be
conceptualized as part of the planning component of action research. During process evaluation, Fine Arts program collaborators (co-authors of this manuscript) developed a comprehensive understanding of the program and evaluation plan by identifying links among resources, activities, effects, predetermined goals, and long-term vision. Collaborators developed a description of an ideal future and identified program targets being pursued. The vision statement of the University Centers for Excellence in Developmental Disabilities, the CED’s statement of philosophy and areas of emphasis, and the program description were examined to identify ideals and targets of the Fine Arts Program.

The second phase of the evaluation process is the outcome evaluation, which corresponds with the action component of action research. During the outcome evaluation, the ideals and targets generated by the process evaluation are used to identify program indicators. Program indicators in this study were a sample of the program’s ideals drawn from program activities, resources, and effects, which were used to develop a questionnaire based on the existing CED Positive Behavior Support evaluation (Center for Excellence in Disabilities, 1998), National Endowment of the Arts evaluation (National Endowment for the Arts, 2004), and the Baldrige Criteria for Performance Excellence (National Institute of Standards and Technology, 2013). Prior to administering the questionnaire to program participants, an advocate for people with disabilities collaborated with researchers to provide feedback on the questionnaire from a consumer’s perspective.

The third phase of the evaluation process is a short-cycle evaluation, which corresponds with the observation and reflection components of action research. The
intent of the short-cycle evaluation was to create a system for annual evaluation to generate feedback from consumers. The questionnaire developed in the outcome evaluation was administered, allowing data to be collected and an evaluation report to be presented. Feedback was then collected from stakeholders based on the presentation of the evaluation report, which is an important predictor of quality in outcome evaluation (Poole, Davis, Reisman, & Nelson, 2001). The study’s method and results were derived primarily from activities that occurred during the short cycle evaluation phase.

**Participants**

Participants were a convenience sample of artists with disabilities enrolled in the Fine Arts Program at the CED, consisting of eight people (five men and three women), ages 27–63 years. Participants had been enrolled in the Fine Arts Program for an average of two years, and their interest in fine arts varied; four participants were interested in the fine arts as a profession, one as a hobby, and three as both a profession and a hobby. Participants had a variety of disabilities, including autistic spectrum disorder, Down’s syndrome, cerebral palsy, and other motor disabilities. Participants were randomly selected from the Fine Arts Program; there were no selection criteria other than being an artist with a disability enrolled in the Fine Arts Program. All participants provided informed consent by signing a consent form. This study was reviewed and approved by the Institutional Review Board at West Virginia University.

**Evaluation Materials**

A cover sheet, instructions, and a letter expressing appreciation for participating was included in the Fine Arts Program evaluation packet, which consisted of a
questionnaire about demographics and three broad open-response baseline questions, and
three surveys (Appendix). The questionnaire pertained to participants’ daily activities
outside the home prior to involvement in the Fine Arts Program, involvement with the
arts, and changes in daily activities since becoming involved with the program.

The Quality of Life survey consisted of eight unfinished statements regarding the
participant’s quality of life since enrolling in the Fine Arts Program (e.g., “Your self-
confidence is . . . ”). Participants responded using a 5-point Likert-type scale ranging
from 1 (“much worse”) to 5 (“much better”). The Quality of Life Survey also included
one open-ended response question that allowed participants to expand on anything related
to their quality of life.

The Outcomes survey consisted of two parts; a qualitative open-response part, and
a quantitative scale. Qualitative data was obtained from three open-ended response
questions on how and why the participant came to be involved in the program. The
quantitative scale consisted of eight unfinished statements regarding how the participant’s
artistic abilities and skills had changed since enrolling in the program (e.g., “Your skills
as an artist are . . . ”). Participants responded on a 5-point Likert-type scale ranging from
1 (“much worse”) to 5 (“much better”).

The Satisfaction survey consisted of a quantitative scale and qualitative open-
response questions. The survey began with 10 statements pertaining to participant’s
satisfaction with the program (e.g., “The CED staff activities reflect your desires.”).
Participants responded to each item on a 4-point Likert-type scale ranging from 1
(“disagree”) to 4 (“agree”). The survey continued with three qualitative open-ended
response questions that focused on the participant’s degree of satisfaction with the program. A final open-ended question asked participants to describe the single best thing that had happened for them since they began attending the program.

**Procedure**

**Observation 1.** An initial round of data collection (Observation 1) was conducted by a facilitator (a co-author of this manuscript). The facilitator used the introduction materials to briefly describe the purpose of the evaluation and components of the questionnaire, and then read each item from the evaluation packet to the participant, providing unbiased clarification when necessary and recording each participant’s responses to both quantitative rating scales and qualitative open-ended questions. Five questionnaires were facilitated over the phone and three were facilitated in-person at the Center for Excellence in Disabilities. Participants took between 30 minutes and one hour to complete the questionnaire.

**Reflection and Feedback.** The Fine Arts Program Evaluation report was written and presented by a co-author of this manuscript to staff and participants approximately 6 months following Observation 1. The report described the project design, evaluation process, questionnaire, and results from Observation 1. Feedback collected during an open forum in response to the presentation indicated willingness and interest from the program participants to repeat the program evaluation in order to help determine the test-retest reliability and face validity of the evaluation tool.

**Observation 2.** A second round of data collection (Observation 2) was completed approximately 6 months after the Reflection and Feedback forum. Observation 2 used the
same questionnaire and procedure as in Observation 1. Of the total eight participants from the original sample, seven participated in the second round. To avoid interviewer bias, questionnaires were facilitated for each participant by a different facilitator, who was not otherwise involved in the project. Six questionnaires were facilitated over the phone; one questionnaire was completed in-person at the Center for Excellence in Disabilities.

**Results**

Data were labeled as collected from either Observation 1 or Observation 2. A $t$-test for dependent groups revealed no statistically significant difference in participants’ quantitative responses between the first and second observation; however, the sample size was small. Figure 2 shows that participant responses to the quantitative measures were high across surveys and observations. Thus, the results from Observation 2 were similar to those reported during the Reflection and Feedback that occurred following Observation 1.

**Baseline Questions**

Qualitative responses to the baseline questions describing daily activities outside the home, involvement with the arts, and changes in daily activities since becoming involved with the Fine Arts Program, were consistent across observations. The most common daily activities outside the home were: art, family, therapy/doctor’s appointments, or “nothing.” No activity was described to be important. Results from Observation 1 showed that three of the seven participants referenced their disability or effects of their disability to explain why activity was minimal, compared to no mention of
disability in Observation 2. Prior to involvement with the program, four participants had been involved with art as a hobby, two participants had been involved with art in some way their entire lives, and one participant had no prior involvement with art. Participants reported changes in daily activity after becoming involved with the program that included opened doors, new ideas, opportunities to socialize, spending more time on their art, better self-esteem, and more self-confidence.

**Quality of Life Survey**

Across both observations, participants reported life circumstances to be the same or better since becoming involved with the Fine Arts Program. The mode response at each observation was 4 (“Better”). The mean response at Observation 1 was $M = 3.91$ ($SD = 0.43$), whereas Observation 2 was $M = 4.25$ ($SD = 0.44$). This difference was not statistically significant.

Four of the participants in Observation 1 rated their relationship with the community, willingness to try new things, and self-confidence as “better” or “much better” since their initial engagement with the Fine Arts Program. Additionally, all participants at Observation 1 rated their emotional stability and general happiness as “better” or “much better.” In Observation 2, relationships with family, friends, and the community; willingness to try new things; and general happiness were rated as “better” or “much better” by five participants. Self-confidence and emotional stability were ranked as “better” or “much better” by all participants. In each observation, income generation received the lowest rating, but no participant reported a decrease in income since being involved with the program and one participant reported income as “much better” at
Observation 2. When comparing ratings from Observation 2 to those from Observation 1, there were 1-point improvements for four participants in their relationships with family members and for three participants in their relationships with friends, emotional-stability, and willingness to try new things.

Qualitative data identified the most commonly mentioned quality of life improvements as exposure to other artists’ work, meeting new people, increased self-esteem and self-confidence, and an improved sense of purpose and self-worth. In Observation 1, one participant responded, “I’m not a useless human being like I felt before. [At a Conference] I socialized a lot more. I’d never done that before. People like me—I’ve never felt that before!” Similarly, another participant noted, “It’s really helped my self esteem and given me a sense of value in something I can do.” A participant in the second observation shared, “I don’t feel alone anymore. Before I was alone; now, I’m not. My circle of friends is because of the CED.”

Outcomes Survey

Quantitative data from the outcomes survey indicated that participants generally experienced positive changes after enrolling in the Fine Arts Program (Figure 2). Scores were high, ranging from 3 (“the same”) to 5 (“much better”). The mode for both observations was 5. The mean rating of outcomes for Observation 1 was 4.39 ($SD = 0.69$); for Observation 2 the mean was 4.45 ($SD = 0.52$). Five participants during Observation 1 and six participants during Observation 2 rated each item as “better” or “much better” as a result of being involved in the program. Five participants rated access to and knowledge of art activities, skills, satisfaction with individual progress, and art
abilities as “much better.” During Observation 2, all participants indicated that their relationships with other artists, self-respect for abilities in the arts, and knowledge of fine arts activities were “better” or “much better” after involvement with the Fine Arts Program.

The first item on the qualitative portion of the survey asked, “How did you find out about the CED Fine Arts Program?” No two participants found out about the program in the same way—participants mentioned referrals to the program by friends, family, staff at the CED, and a community-affiliated organization. When asked, “What prompted your involvement with the CED Fine Arts Program?” participants generally reported feeling enthused and excited, and that they saw the program as a way to “get out some.” Many responses referenced intent for self-improvement; for example, “to be independent” and a “desire to show people I can do something.” The most frequent response (5) named the program manager, speaking positively about her ideas, attitude, and helpfulness. For example, “Once I met [her] that was it, it just sort of took off,” “[I] was referred to [her and] there was a connection there,” and “She cared for every client and went overboard to do anything she could. Seeing her do her part made me want to do mine.”

The third item asked, “Are you interested in the fine arts as a hobby or as a profession?” During Observation 1, three participants reported interest in the fine arts as a profession, and three said it was a hobby and a profession. During Observation 2, four participants reported interest in fine arts as a profession, and two said fine arts interested them as both a hobby and a profession. The seventh participant did not respond definitively to the question in either observation, saying, “Fine arts is my life. That’s it… I can make money doing it but it’s just one of the benefits.” Participants described the
benefits of relaxation, emotional expression and extra money. For instance, one noted “[art] relaxes me…it’s the only thing that relaxes me.” Another participant underscored how art assists with emotional coping, saying, “[art] helps me—if I’m depressed, I can paint and get my emotions out.” Others noted a desire to do well, that art was a way to increase income, and families who influenced their interest in fine arts as a profession.

**Satisfaction Survey**

Average responses indicated generally high levels of satisfaction with the program (Observation 1 $M = 3.71$, $SD = 0.52$, Observation 2 $M = 3.58$, $SD = 0.57$). During Observation 1, only one statement, “The CED staff activities reflect your desires,” received a rating less than 4 by more than one participant.

Participants first were asked “What do you like most about being involved in the CED Fine Arts Program?” The most common responses were related to meeting new people, and having social opportunities, support from the program, and an opportunity to create art and develop skills. One participant expressed optimism (“things are moving up!”), whereas another referenced the role of the program in fostering personal development: “[the] encouragement it’s given me to push myself and try harder to do things I didn’t think I was capable of doing. [The] exhibit . . . was sensational.” When asked what they liked least about the program, participants cited nothing (i.e., no dislikes or complaints), lack of funding (3 responses), and distance (4 responses). The perception that there is not enough funding support reflects the fact there is only one CED staff member for the program and future funding plans are unknown to participants. The third question asked, “Are there any other supports you have received for fine arts activities
(money to take classes, etc.) that have not been mentioned?” Most participants either did not report any additional supports, or reported having received supplies, equipment, support for shows, stipends for conferences, mileage for events, opportunities with affiliate programs, and emotional support.

The final question asked participants to identify “the best thing that has happened” since starting the program. This item yielded detailed responses and significant qualitative data from each participant. For example, one participant noted:

[I like] getting recognized for my art. The main thing to realize, [is] I’m not the only one handicapped. There are [people who are] a lot worse off… I’ve made a lot of friends, and I appreciate [the Fine Arts Program Manager]. She’s out there fighting for us.

Another participant said, “I enjoy encouragement from [the Fine Arts Program Manager]. I consider [her] a very good artist. Hopefully it will expand opportunities for me in the future. I do get to show a few pieces publicly now” One participant commented:

[I enjoy] meeting new people, and meeting [the program manager]. She has just been awesome. Learning more about other people’s disabilities, selling more of my artwork at different outlets; it is an excellent program; it has been A-1. I appreciate 100% of everything they’ve done to help me.

Another participant noted enjoying the “chance to leave the house and do things out of the ordinary.” He said that it gave him “something to look forward to” and made more
responsible. He also said he had become an artist, improved his technique, and sold a lot of paintings.

Other participants had difficulty determining the one thing that they liked the most about their involvement in the fine arts program, as illustrated in this participant’s response:

It’s hard to name one thing, there’s too many best things. I’ve met a bunch of very good artists in the same situation as me. Other people similar to myself with ability and the gift to do what we do. A lot of good advice from staff.

This participant went on to comment on how the program helped in his ability to be an advocate for himself and, saying that he had gained “courage and strength” to educate others on disability issues. “My confidence level in the art world—I think the CED is responsible for that happening. I could go on, and on. Now I’m a respected artist in the area. I’m back.”

**Discussion**

Results indicated that participants felt they were benefiting from being involved in the Fine Arts Program. Two key factors in finding and engaging consumers also are implicated by the results: public knowledge about the program, and positive characteristics of the staff who coordinate the program. Once interest was sparked about the program through publicity, personal connection with the program staff seems to have maintained the participation of the consumers. These results suggest initial steps to improving the Fine Arts Program.
Qualitative responses to the Quality of Life survey appeared to match the quantitative results, and were high at both Observations 1 and 2. Results ranged from the same to much better, implying high quality social relationships, happiness, and self-confidence among most, if not all, participants. Qualitative responses centered on the social network that the program provided, exposure to other artwork, and increased self-esteem. This is consistent with the quantitative data that represented increased quality of relationships with family, friends, and the community, and increases in general happiness. Friends are a key source of happiness (Myers, 2000), and an arts program can foster an environment capable of removing people from social isolation (Marriott & White, 1991). Support and inclusion are target outcomes of the Fine Arts Program, and these data suggest that the program is fulfilling its mission. These data also support the recent art therapy literature that argues community-based art therapy may serve as an effective alternative to the traditional medical model in improving aspects of quality of life (Elmendorf, 2010; Kapitan, Litell, & Torres, 2011).

For the outcomes survey, qualitative responses indicated that most of those surveyed considered the arts to be a profession when they began to participate, or intended to turn their interest into a profession following involvement in the program. Some indicated they initially hoped the program would facilitate their independence and showcase their capabilities to others. The program may facilitate these goals because art allows individuals with disabilities to produce something that is their own, and creates a safe social environment where there is never a “wrong” answer (Abedin, 2010). Participants also reflected positively on the program coordinator, indicating she was a prominent reason for their involvement in the program. Although the quantitative
responses seemed to capture different aspects of the program, they were consistent with qualitative responses, reporting high scores across all questions.

Qualitative satisfaction survey responses indicated that the participants enjoyed meeting new people, learning about others’ disabilities, and getting support for their art. They also liked having their art recognized and appreciated, and being exposed to other arts. The major negative issues with the program were the travel, lack of funding, and future plans for the program. Quantitative responses reported generally high satisfaction with the program. The positive qualitative responses about meeting others may be directly connected to the high quantitative scores because social engagement is associated with life satisfaction among individuals with disabilities (Jang, Mortimer, Haley, & Graves, 2004).

The mean level of satisfaction reported in the participants’ responses improved slightly in the second observation, but this improvement was not statistically significant and may be due to a lack of power, given the small sample. The small improvements in quantitative and qualitative ratings of quality of life were primarily found in the questions about relationships with others, which may have improved between the two observation time points as new friendships and social networks were strengthened. Thus, even with a larger sample, differences may suggest normal within-subject improvements as a result of participating in the program for a longer period of time. Quantitative responses to the outcomes and satisfaction surveys were also high at both time points and not significantly different between observations. Qualitative responses to the questions also were consistent at both time points, supporting the reliability of the scale for evaluation.
Most participants referenced their disability during Observation 1. Interestingly, this reference did not appear during Observation 2. Engagement with the program between the observations may have influenced participants’ level of focus on their respective disabilities. Opportunity and accessibility are goals of the CED and the program, which may explain why involvement with the program would empower participants to not be limited by their disability. Another possible explanation could be that the program provided a social network of others with disabilities who may have improved their quality of life, and resulted in decreased salience of participants’ focus on their disabilities.

**Limitations**

The results are constrained by the small size and homogeneity of the sample. All participants were individuals with disabilities living in a single rural area and all had a high level interest in the fine arts. Although the sample represented the population served by the Fine Arts Program, replication with a larger and more heterogeneous sample would allow for stronger statements to be made about these measures and arts programs in general.

The reliability of the survey may have been hindered by the use of the within subjects design, and error variance associated with the passage of time between observations. Answers on some measures may have changed between observations because of participation in the program for the extended period of time. This may account for the slight improvement in quality of life scores between observations; however, there were no statistically significant differences on any measures between observations.
Conclusion

The lack of significant differences across surveys between observations, consistency of the qualitative data, and general correspondence between the qualitative and quantitative data support the notion that a valid and reliable evaluation tool was developed and administered. Furthermore, evaluation results were consistent with art therapy interventions that have demonstrated the benefits of the arts among individuals with disabilities. On-going cycles of evaluation, response, and feedback for this program have been implemented. It is hoped that the process outlined in this paper will allow other organizations to become self-evaluative, and may be used by art therapists to assess the efficacy of a range of art therapy interventions.
References


List of Figures

Figure 1. Program Evaluation Model (Outer Ring = Evaluation Process; Inner Cycle = Action Research)

Figure 2. Mean rating of participants across two observations of Quality of Life and Outcomes (5-point scale), and Satisfaction (4-point scale). *Note:* Error bars represent standard error of the mean.
Appendix

A. Quality of Life Survey: Interview

For this section, indicate by circling the appropriate response whether the following aspects of your life are Much Worse (1), Worse (2), the Same (3), Better (4), Much Better (5), or Not Applicable (NA). Answer each question based on your life circumstances since you started working with the CED Fine Arts Program.

1. Your relationships with family members (i.e., parents, siblings, etc.) are . . . (1) (2) (3) (4) (5) (NA)
2. Your relationships with friends are . . . (1) (2) (3) (4) (5) (NA)
3. Your relationship with the community is . . . (1) (2) (3) (4) (5) (NA)
4. Your willingness to try new things . . . (1) (2) (3) (4) (5) (NA)
5. Your self-confidence is . . . (1) (2) (3) (4) (5) (NA)
6. Your emotional stability is . . . (1) (2) (3) (4) (5) (NA)
7. Your general happiness is . . . (1) (2) (3) (4) (5) (NA)
8. The amount of income you are generating is . . . (1) (2) (3) (4) (5) (NA)
9. Is there anything else about your quality of life since you started working with the CED Fine Arts Program that you would like to share?

B. Outcomes Survey

1. How did you find out about the CED Fine Arts Program?
2. What prompted your involvement with the CED Fine Arts Program?
3. Are you interested in the fine arts as a hobby or as a profession? Please explain.

Please indicate by circling the appropriate response whether the following items are Much Worse (1), Worse (2), the Same (3), Better (4), Much Better (5), or Not Applicable (NA) after participating in the CED Fine Arts Program.

1. Your relationships with other artists are now . . . (1) (2) (3) (4) (5) (NA)
2. Your participation in community activities related to the fine arts is . . . (1) (2) (3) (4) (5) (NA)
3. Your skills as an artist are . . . (1) (2) (3) (4) (5) (NA)
4. Your satisfaction with your own progress as an . . . (1) (2) (3) (4) (5) (NA)
artist is . . .

5. Your access to art activities that are personally stimulating is . . .

6. Self respect for your abilities in the arts is . . .

7. Your knowledge of community services for people with disabilities is . . .

8. Your knowledge of fine arts activities is . . .

C. Satisfaction Survey

Please indicate whether you Disagree (1), Slightly Disagree (2), Slightly Agree (3), Agree (4), Strongly Agree (5), or Not Applicable (NA) with the following statements by circling the appropriate response.

1. The CED staff consistently meets identified timelines.

2. The CED staff activities reflect your desires.

3. You are able to collectively problem solve with CED staff.

4. The CED staff is effective in supporting your plans for the future.

5. Your vision for a positive future has improved.

6. You have received financial support to travel to art activities.

7. You have received financial support for art supplies.

8. You have learned about opportunities in the community that you did not know about before.

9. You have received instruction in how to improve yourself as an artist.

10. You are respected for being an artist by people who matter to you.

11. What do you like most about being involved in the CED Fine Arts Program?

12. What do you like least about being involved in the CED Fine Arts Program?
13. Are there any other supports you have received for fine arts activities (money to take classes, etc.) that have not been mentioned?

D. Additional Questions

Please circle one of the bolded options to complete each sentence according to your feelings on each issue.

1. There **is** / **is not** awareness of the CED Fine Arts program beyond those directly participating in the program.

2. There **is** / **is not** enough local, statewide and national publicity surrounding the program.

3. Do believe the program was a drain on public resources? **Yes** / **No**

4. Do you believe that the program should continue? **Yes** / **No**

5. Do you hope that there will be additional sources of funding for similar programs in the future? **Yes** / **No**

If yes, do you think future funding will come from the federal or state level? **Yes** / **No**

Finally, what has been the best thing that has happened since starting with the CED Fine Arts Program?