



our lives

Evaluation Report by Paul Swift
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outsidein
pathways to learning in museums and galleries

**our lives is an archive
of the lives of people
with learning disabilities,
produced by people with
learning disabilities**

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summary

Our Lives is an archive of the lives of people with learning disabilities, produced by people with learning disabilities. It was developed as a collaborative project between galleries and museums in Central London, Outside In Pathways and the London Borough of Bromley. Supporters, artists, facilitators and curatorial staff all talked about the inspiration they had derived from the project and how it would influence their future work. Most importantly, the evaluation highlighted important outcomes for the participants themselves. Some of these were:

- The acquisition of new skills and developing existing talents as writers, interviewers, film-makers and actors
- A heightened interest in heritage in general, the 'hidden' heritage of people with disabilities and the particular histories of the older people in the group
- Improved self-confidence and self-esteem resulting from having a valued role, taking responsibility for travel and coordination and producing high-quality materials for public consumption
- Changes in the mood, emotional state and sense of well-being of some of those taking part
- The formation of strong social bonds within the group, as witnessed by the low attrition rate (people dropping out) from the project, the mutual support and advice offered to one another and the respect shown to older members of the group
- Above all, everyone agreed that the project was fun because of the variety of settings and activities undertaken, the people facilitating those activities, and the food and drink offered.

The evaluation also identified some of the factors that helped make *Our Lives* a success:

- Good preparation and planning with each of the museums and galleries to provide them with an understanding of the aims of the project and how it would meet their own aspirations around accessibility and diversity
- The friendly and welcoming attitude of staff at the various venues
- A clear, well-balanced and realistic programme that took account of the intellectual capacities within the group and the time required to generate the oral histories
- High quality technical, artistic and educational support
- The commitment and drive supplied by key care support staff in Bromley.



introduction

Our Lives created a living archive of how society has viewed and treated people with a learning disability over the past 60 years. It did so by training a group of people with learning disabilities to capture the life stories of older people with learning disabilities. Outside In Pathways (OIP) helped the groups to access collections of four museums and galleries – The Science Museum, The National Portrait Gallery, The Handel Museum and The Foundling Museum – to explore the stories and experiences of a range of disabled people throughout the ages. *Our Lives* builds upon a tradition of using life stories in learning disability services to inform person-centred planning¹, but also to capture the experiences of older people with learning disabilities, especially those with experience of living in long-stay hospitals.

There is some evidence that life story work in health and social care services can have a significant effect upon the way that care staff work with people with learning disabilities², especially where the approach is targeted, for example to find out what older people with learning disabilities need to make their lives ‘meaningful and comfortable’³ or in reminiscence work with people with learning disabilities who have dementia⁴. Life stories have been put to use in planning the future support for people with learning disabilities. At the height of the hospital closure programme in the 1990s life story work became a vital component in transition arrangements by helping community-based care staff understand the former hospital residents they were working with⁵. Former residents of long-stay hospitals have also contributed to the training and education of care workers who as well as enjoying this type of experiential learning, report a new

¹ Hewitt, H. (2003) ‘Tell it like it is’ *Learning Disability Practice*, 6(8); 18-22.

² McKeown, J., Clarker, A. & Repper, J. (2006) ‘Life story work in health and social care: systematic review’ *Journal of Advanced Nursing*, 55(2); 237-247.

³ Hamilton, C. & Atkinson, D. (2009) “‘A Story to Tell’: learning from the life-stories of older people with intellectual disabilities in Ireland’ *British Journal of Learning Disabilities*, 37, 316-322.

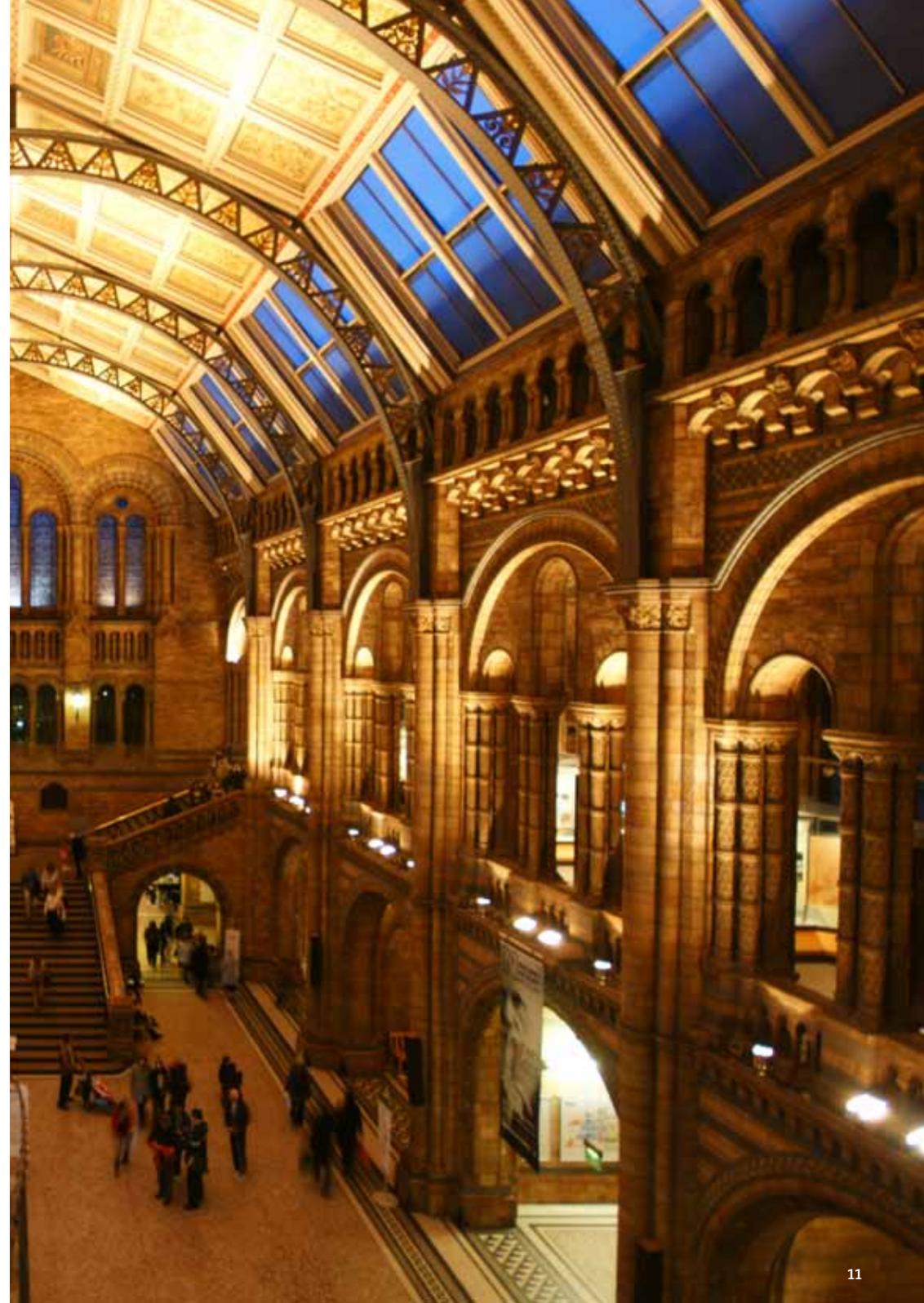
⁴ Dodd, K. (2010) ‘Psychological and other non-pharmacological interventions in services for people with learning disabilities and dementia’ *Advances in Mental Health & Intellectual Disabilities*, 4(1); 28-35.

⁵ Feryad, H. & Raczka, R. (1997) ‘Life story work for people with learning disabilities’ *British Journal of Learning Disabilities*, 25(2); 73-76.

found respect for people with learning disabilities who had experienced long-stay hospitals⁶. Research into these approaches suggest that they can help people with learning disabilities achieve a stronger sense of their own identity^{7,8,9}, feel more socially included^{10,11}, and improve their self-confidence and self-esteem^{12,13}.

Oral history and life story techniques are also potentially powerful tools for people with learning disabilities to take ownership of their heritage in a way that challenges professional 'truths' about their lives¹⁴. Life stories of former residents of long-stay hospitals can provide vivid accounts of the daily routines of such regimes^{15,16}, the abuse and neglect suffered by the people they were intended to serve^{17,18}, the strategies they adopted to escape¹⁹ and the resilience they displayed to survive²⁰.

- 6 Mee, S. (2010) 'You're not to dance with the girls' *Journal of Intellectual Disabilities*, 14(1); 33-42.
- 7 Ineland, J., Rikke, G.G. & Sauer, L. (2010) 'The Story about Theater Organizations, the Public's Approval, and the Actors' Identity Formation in Nordic Disability Theater' *Journal of Social Work in Disability & Rehabilitation*, 9:254-273.
- 8 Ware, L. (2011) 'When art informs: inviting ways to see the unexpected' *Learning Disability Quarterly*, 34(3) 194-202.
- 9 Brown, J., Dodd, K. & Vatore, A. (2009) "I am a normal man": a narrative analysis of the accounts of older people with Down's syndrome who lived in institutionalised settings' *British Journal of Learning Disabilities*, 38; 217-224.
- 10 Hall, E. (2010) 'Spaces of social inclusion and belonging for people with intellectual disabilities' *Journal of Intellectual Disability Research*, 54(1); 48-57.
- 11 Van Puyenbroeck, J. & Maes, B. (2008) 'A Review of Critical, Person-centred and Clinical Approaches to Reminiscence Work for People with Intellectual Disabilities' *International Journal of Disability, Development and Education*, 55(1); 43-60.
- 12 Hreinsdottir, E., Stefansdottir, G., Lewthwaite, A., and Ledger, S. & Shufflebotham, L. (2006) 'Is my story so different from yours? Comparing life stories, experiences of institutionalization and self-advocacy in England and Iceland' *British Journal of Learning Disabilities*, 34, 157-166.
- 13 Meininger, H. (2006) 'Narrating, writing, reading: life story work as an aid to (self) advocacy' *British Journal of Learning Disabilities*, 34, 181-188.
- 14 Ellem, K. & Wilson, J. (2010) 'Life Story Work and Social Work Practice: A Case Study With Ex-Prisoners Labelled as Having an Intellectual Disability' *Australian Social Work*, 63(1); 67-82.
- 15 Cadbury, H. & Whitmore, M. (2010) 'Spending time in Normansfield: changes in the day to day life of Patricia Collen' *British Journal of Learning Disabilities*, 38, 120-126.
- 16 Delancey, P. & O'Driscoll, D. (2010) "A Working Man's Life" working inside and outside Leavesden hospital: an oral history account' *British Journal of Learning Disabilities*, 38, 110-111.
- 17 Manning, C. (2009) 'Imprisoned in state care? Life inside Kew Cottages 1925-2008' *Health & History*, 11(1); 149-171.
- 18 Clement, T. (2010) 'Review of Bye-Bye Charlie: Stories From the Vanishing World of Kew Cottages' by Corrine Manning' *Australian Social Work*, 62 (1); 113-115.
- 19 O'Driscoll, D. & Walmsley, J. (2010) 'Absconding from hospitals: a means of resistance?' *British Journal of Learning Disabilities*, 38, 97-102.
- 20 Roberts, B & Hamilton, C. (2010) "Out of the darkness into the light": a life-story from Ireland' *British Journal of Learning Disabilities*, 38, 127-132.



how the evaluation was carried out

The evaluation sought to answer three principal questions about the *Our Lives* project:

- 1 Did the project do what it set out to do? This is sometimes referred to as the 'Ronseal' test.
- 2 What was the impact of the project upon the different groups taking part or contributing to it?
- 3 What were the factors that helped and what were the factors that limited the conduct of the project?

Evidence to support the evaluation was collected in four ways. Firstly, by attending and participating in one third of all the sessions run by OIP, including at least one session in each of the venues. This helped the evaluator understand how the project was delivered, to assess the quality of the artistic and educational content, and to monitor the impact of the project as it progressed. Secondly, interviews were carried out with a selection of the different stakeholders to the project, including the researcher/interviewers (younger group of people with learning disabilities), the interviewees (older group), their respective supporters from Bromley, social care managers from Bromley, curatorial staff at the museums and galleries, contributing artists, and the OIP personnel. Interviews were conducted on the basis that views and opinions would be used anonymously in the evaluation report. Thirdly, written submissions were made by support workers in Bromley to capture the impact of the project upon the home lives and daily routines of the participants. Fourthly, the evaluator also reviewed a rough edit of the film produced by the project.

This report focuses on the outcomes experienced by the people with learning disabilities who took part in the project and summarises the key factors that influenced the way the project was carried out. It should be noted that *Our Lives* achieved the main objectives that were set out at the commencement of the project, which were to recruit and train a group of younger people with a learning disability to participate in the project as archivists (referred to in the report as 'the younger group') and to recruit and prepare a group of older people with learning disabilities to interpret and work with the collections of participating museums during site visits and workshops (referred to in the report as 'the older group'). An archive of oral testimonies relating the life experiences of people with learning disabilities has been produced and will be held at the V&A. A catalogue for the archive and a film summarising the work undertaken during the project will be available to the public.

outcomes: younger group

To understand the scale of impact of the project the evaluator established a baseline profile of relevant experience amongst the younger group (the researcher/interviewers). This showed that the group:

- 1 All had mild learning disabilities
- 2 All had good verbal skills, although the group was split 50:50 between those who were natural extroverts and ready to speak out, and those who were shy and retiring
- 3 All had experience of travelling on public transport locally – some independently – but none made frequent trips into Central London
- 4 All were engaged in some form of paid work or volunteering
- 5 All had experience of being interviewed but not of interviewing others
- 6 Had limited social contact with each other
- 7 Had a mixture of domestic arrangements with some younger members living with their families, while others lived in supported living arrangements
- 8 Had little or no experience of visiting museums and galleries
- 9 Were familiar with using cameras.

The most commonly cited outcome in relations to this group was an improvement in **self-confidence** and **self-esteem**. Although this was not rated psychometrically, there was unanimity that the scale of the impact was greater in this respect compared to any other therapeutic benefit associated with *Our Lives*. All of the members of the younger group talked about being more confident as a result of their participation and this manifested itself in a number of ways. The work colleagues of a shy young woman noticed how she had offered to mentor someone on a work placement, something they would not have expected her to do prior to her involvement with *Our Lives*. Support staff for another woman realised that her willingness to travel beyond previously tightly defined routes was attributable to the confidence gained during her weekly trips into London for *Our Lives* sessions.

A number of factors were believed to have influenced this shift. Firstly, the project represented a journey that had started with the younger group signing up for something that they did not fully understand. The physical and social aspects of the project – travelling to unfamiliar destinations and meeting a new people – were challenging, but as the journey progressed the group began to both understand what *Our Lives* was trying to achieve, but also their contribution to it.

‘It was scary at first to find out where we was going – it was all new. But now we’ve built up our confidence. The interview training was the scary part – it’s what to do first, because it is all new to us... The more you practice, the more you get your confidence.’



Secondly, the project raised expectations of the group; they had a role which was crucial to the completion of the project and which challenged them to try new activities. Some reported that they had surprised themselves by doing things that previously they would have been too cautious to have attempted. For example, several spoke of the delight they took in finding ways to continue filming, urged on by OIP personnel, even when challenged to stop by staff in the National Gallery.

Thirdly, group members felt empowered by being in control of the process; devising questions, asking them and operating

recording equipment. All of them had experience of being interviewed for jobs and recalled how it made them feel nervous and shy. But none had asked questions of other people before. Being listened to, being taken seriously and eliciting responses to their questions helped the more reserved members of the group to find their voice. As the project progressed the participants became excited by the interest generated in *Our Lives* beyond their own circle and several spoke of their pride at the idea of making a film about their work. Indeed the continuous recording of the sessions invested their work with a legacy that was unfamiliar to the group.

Supporters also reported a correlation between burgeoning self-confidence and a willingness of group members to reveal previously hidden **creative talents**. Several contributors to the evaluation noted that by incorporating a range of creative media – painting, drawing, poetry, music, and drama – the curriculum for *Our Lives* had encouraged participants to find and explore favoured ways of expressing themselves;

‘I’ve got to know some of them more because it is less like work, more friendly and they open up to you. One of the woman who I didn’t know before was really shy, but she has grown as we’ve gone along. Now she is giving me things that she has written.’

‘They are all more confident – like Jonathon. We had no idea he played the violin.’



Like others in the group, one young woman who admitted to being intimidated by the project at the outset felt that the project had taught her that disability was something to be celebrated and valued. Sharing her experiences with others affirmed her sense of her own worth and demonstrated the power of reciprocity;

‘We can learn from other people and they can learn from us.’

Another important outcome reported by the younger group and their supporters was **the acquisition of skills for generating oral histories**. The work undertaken in the museums and galleries

about the lives of famous people who had overcome disabilities helped participants to understand the value of constructing a narrative about their own lives. The group talked about what being a good interviewer entailed: thinking about the key issues, asking questions in the right way, good eye contact, sitting up straight, good body language, being relaxed, not fidgeting, listening. By the end of the project they could appreciate who were the best interviewers in the group:

‘Jonathan is more confident, he knows what he is saying, and he’s done lots of things at his work like interviewing. He keeps the question in his head and he asks the question again if they don’t understand it.’

‘Dennis is really good with the camera. He puts people at ease.’

All members of the group felt the skills and experiences gained through *Our Lives* could be put to use in other areas of their lives (such as their jobs or in a self-advocacy group) and all expressed interest in being involved in similar projects in the future.

Putting their newly acquired interviewing skills to use helped the younger group **understand more about the hidden history of people with learning disabilities and how this shaped their own identity**. For some the testimony of the older group had a direct resonance with their own experience of special schools or residential care. They were also

able to compare their own lives to those of the older group. One supporter said;

‘A lot of our conversations take place on the journeys, so we get quite a lot of feedback travelling up and back. It certainly opened their eyes to how people’s lives were back then and how they have so many more opportunities now.’

Several of the support staff noticed how the younger group had become more protective of the older group as their stories unfolded. They asked about members of the older group when they did not attend sessions, they would help them



access buildings, move chairs for them and fetch their food at lunchtime.

‘Having the older group brings out the caring side and they all look out for each other. It has been made them more thoughtful of other and more considerate. I hope that this will develop a bit more and they have friendships outside of Tuesdays.’

This **spirit of cooperation** and ‘looking out for one another’ reflected the younger group’s appreciation of teamwork as a means of accomplishing the tasks set for them during *Our Lives*. This started with

the travelling into London and fed into subsequent activities. A member of the support staff recalled how,

‘When we started we were just a group that met up at Bromley South. Now there is a real bond between them. When we saw the objects at the Science Museum and we couldn’t work out what they were for – they helped each other.’

Another saw how interactions within the group had changed over time,

‘They’ve become friends on this journey. The confidence may come from learning the art of conversation, of speaking out which they hadn’t done in the past.’

This was echoed by members of the group:

‘I really like travelling together going up to London.’

The evaluation also found evidence that the project had affected the **mood and emotional well-being** of the younger group. Several said that by feeling more

confident they also felt more relaxed and less anxious – this was often linked to feeling more comfortable about going out.

‘[My family] think it is a good idea instead of me sitting at home all day. And the manager where I live says that I haven’t been upset since I started. I used to get upset – very – and angry, but not now. It has changed me as a person. Now I want to get a job... I enjoy doing things more than I used to and I want to get a job rather than come to the day centre. I used to sit at home and sulk, get the hump. I still do that, but not so often.’

All of the members of the younger group said that they had **greater interest in museums and galleries** as a result of their involvement with *Our Lives*. Supporters praised the role of curatorial and community access staff in making the museums welcoming and interesting places to visit. Some supporters confessed that their own prejudices against museums and galleries – ‘I assumed they would be stuffy and boring’ – had been confounded during the project. Several of the group had subsequently visited galleries and museums in Central London independently of the project (the Science Museum was the favourite destination), while others had either visited or planned to visit local facilities.

‘I went to the Horniman Museum two weeks because I brought it up in my house and said I wanted to go. They took pictures and a video of me on the day. What can I remember about it? Fish – tropical fish. I love tropical fish.’



‘They’ve learned that places like the Science Museum are for them. Several have been there on their own. Its widened their horizons and they realise they don’t just have to come there with us.’

Many of the contributors to the project (OIP staff, artists and supporters) spoke about the sessions at the Foundling Museum as decisive for the group's appreciation of the connection between their lives and those represented in the collections;

'Because the Foundling Museum was a focused project, after the first couple of weeks you really understood what the aims and objectives were for the project as a whole and for the individuals. So everyone came away with an understanding of what the Foundling Museum was about – the beginnings of social services in this country – but also linking it to everyday situations and people's experiences. You could see the parallel and how people have moved on to something much better than where they were 20, 30, 40 years ago.'

At a more basic level, the younger group talked about how enjoyable the project had been; a leitmotiv of the testimony from participants in the younger group was the **fun** they had experienced during *Our Lives*. And while participants sometimes struggled to recall the content of sessions, specific activities and incidents stood out.

'Dennis in the Portrait Gallery when he was sitting on the chair and people thought he was one of the staff – pretending to be a security guard because we weren't supposed to be filming. That was one of our highlights!'

'The thing I like about it best is when I went to the Science Museum and I learned to pick up those artefacts. That's what I like to do; feel things with my hands. It was very interesting. I like the man who helped me do it – Philip – with the things in boxes.'

'We drew a picture of... a man with one eye and one arm... [Nelson?] Yes, that's him. He was drunk. They brought him home in a barrel of beer!'

The highlight of the whole project for many was the performance at the Foundling Museum:

'It has been brilliant. The best bit was at the Foundling when we did all the acting.'

'We went to the Foundling School – it was great, the best time ever. Annette gave me her phone number so that I could let her know how we are getting on. I've done that already.'



outcomes: older group

The older group were recruited later on in the project and comprised four principle members who each contributed stories about their lives.

All were happy and confident talking about their experiences even though some of the memories evoked were quite painful ones. They recalled being interviewed about the war, about life in the long-stay hospitals, their families and the friends they had made (and lost) over the years. Despite initial reservations about the purpose of the project, the older group's supporters soon realised the positive effect upon their self-esteem of being asked to contribute their life stories and being listened to in a respectful way. Supporters also came to appreciate the importance of the testimony provided by the older group and to place it in a wider context:

'I think that it's really important because the younger generation are not really aware of these hospitals – it is not part of the history that is taught in schools. It's part of social history that has been neglected or pretended that it is not there. I think for them to be able share some of their experiences along with the others – whether they are fun stories, such as cricket matches or the jobs that he used to do, or some of the negative stories about how people were abused and ill-treated – that is a very important part of our social history and it is wonderful that people like George and Bill are still around to communicate them.'

The impact of the testimony also had implications for the way the supporters thought about their relationships with members of the older group:

'The knock-on effect has been that, because I work with him throughout the rest of the week, a lot of our conversations now is about what has happened on a Tuesday. So he will discuss with me some of the experiences he has had and we will talk through them and on the whole it is all happy memories. It has opened up a whole new world of conversation and topics that wasn't there before... It helps you to appreciate where people are coming from, it helps me to understand my job better, but also it is important to capture these memories or they will be lost. It's very easy to always be looking forward, but you are looking forward on the building blocks from the past. For people who have been in hospital, who were institutionalised, it is important to understand how that has affected them. You can then plan forward hoping not to repeat some of the mistakes that have been made in the past.'

Like the younger group, a significant outcome for the older group was a widening of their social circle. For two members of the group the project was an opportunity to renew an acquaintance from their days in hospital which both had left more than 20 years previously. Like the younger group, new bonds of friendship were formed during the journeys into London every Tuesday, albeit during a taxi journey rather than on the train. Indeed, one of the men talked about how his week was shaped by the journey into London's including shopping for his packed lunch on Mondays. His supporter recounted how the taxi drivers would share the bag of sweets they bought along for the journey and ask questions about the project. Supporters were also pleasantly surprised by how well the two groups had worked together during the sessions at the Foundling Museum;

'I think it's very interesting that such a mixed age group has blended quite well together; you have quite young people right up to George's venerable age, and yet they have all bonded well together. There is a real sense of being part of a group and they miss each other if one of them isn't there.'

The other major outcome highlighted during the evaluation related to the older group's interest in heritage in general and museums in particular. Although all of the group members had made infrequent trips into London in the past, none could recall visiting any museums or galleries. Their involvement in *Our Lives* stimulated an interest that has since been followed up by working with curators at the Science Museum. One supporter commented,

'It has opened up new opportunities. We went not knowing what to expect. It's given him a lot of confidence... It has amazed me that he has the energy to enter into everything that has been going on – in some senses he has more energy than I have on a Tuesday!'

other outcomes

Managers in Bromley Adult Services were able to identify the benefits that had accrued to the service through their association with *Our Lives*. There was the prestige of working with world-class museums and galleries – ‘It is something out of the ordinary for both us and our clients’. One manager pointed out that it showcased services for people with learning disabilities in a positive light at a time when they had become tarred by the scandal at Winterbourne View. It also fitted with the direction of Government policy for social care services to make greater use of mainstream facilities:

‘The legacy of the project will be future work with the Dulwich Gallery and the Horniman Museum. It would be good to establish a relationship with them. It has provided us with a model for working with museums and indicates that we could be doing more to access venues in London.’



Curatorial staff at all of the venues expressed positive sentiments in relation to their role in *Our Lives*. Some had limited experience of working with people with learning disabilities, but felt that the experience of working with both groups had been positive and less problematic than they had anticipated. The project prompted the Science Museum to engage some of the participants in further work as demonstrators.

helpful factors

The various stakeholders were asked to comment of the factors that had helped make the project work.

All mentioned the commitment and willingness of the host venues and their staff to engage with the project. There was a recognition that the venues were well prepared for the needs of the participants both physically and in terms of the content of the sessions. Participants and supporters were surprised at the level of access they were allowed to facilities and collections and particularly enjoyed handling the medical collections at the Science Museum. A number of comments were made by supporters, OIP personnel and the artists about the respectful attitude of the educators and staff at the venues. Philip Loring at the Science Museum was praised for his calm, patient manner, for encouraging the participants to explore the medical collection in their own time and for eliciting their ideas about the possible uses of the various pieces of equipment. The balance between articles which highlighted different aspects of institutional care – diagnostic, restrictive and creative was also appreciated. Annette McCartney's sessions at the Foundling Museum also had a profound effect on participants. Several mentioned how much they had enjoyed using the costumes designed

specifically for the project, developing a script based on the picture of Gin Lane and acting out the final performance.

The flexibility and adaptability of care support staff from Bromley were crucial elements in making the project happen. This relied upon having a local coordinator who could persuade staff of the value of taking part in the project and could find solutions to practical problems about transport. She also encouraged measured risk-taking to ensure that people from both groups could take part. A manager in Bromley suggested that a good outcome for the service had been that different staff had opportunities to support the group.

'It is good for staff to see a side of the service users that they don't normally see and we will find out more about what they are able to do.'

But this required support staff to step outside some of their normal routines and working practices such as supporting people for whom they have no formal caring responsibilities:

'There was no plan for support, we went with the flow. Everyone has just mucked in.'



One supporter said,

‘We have to be flexible and adaptable because we start before our normal working hours and we finish late. But I’m glad I’ve been part of this project. I absolutely love it. What makes me happy and glad to be part of it is seeing their reactions and knowing that they are really enjoying it and feel really important. They have a chance to do something they don’t normally do.’



She went on to describe how support staff need to find the right balance between attending to people’s care needs, guiding and prompting their involvement in the project, and stepping back,

‘to encourage their independence at the sessions, to try things for themselves, to speak out... and sometimes the opposite, reining them back in so others get the opportunity to talk. Some of them were quite shy at the beginning and it was important to ensure they had a turn at talking. They thought their opinion didn’t count as much, but now they will speak up.’

Several of the contributors to the evaluation mentioned how well the project had been managed by OIP. Their comments touched upon OIP’s handling of the difficulties (outlined below) experienced in recruiting some of the participants, the complexity of bringing together a diverse range of people and roles, the calibre of the artists employed, the balance of the curriculum between different art forms, and even the quality of the refreshments. OIP staff felt that the quality of the curatorial input had made the task of managing the project in the session much easier than it might have been.

An indicator of the success of *Our Lives* was the low attrition rate amongst participants as the project progressed. Despite some early doubts about the nature of the project or what was expected of them, the younger group in particular ‘stuck with it’. One supporter noted that a young man had to make a pre-arranged trip to the United States in the middle of the project, but requested that his place be kept open. His enjoyment of and commitment to *Our Lives* was confirmed when he attended a session only hours after arriving back in the country. This undoubtedly reinforced the drive and commitment of those charged with delivering the project.

limiting factors

Managers in Bromley expressed frustration at colleagues who seemed less enthusiastic about the project than they were. This proved especially problematic when recruiting the older group. There seemed to be several elements to this. Firstly, there was a lack of understanding by some staff about the aims of *Our Lives* and the benefits that might accrue to people with learning disabilities from Bromley. Secondly, there was a concern about equity of access to the project. One manager commented that,

‘The impact on staff has been more good than not good - like the service users, some enjoy it, others don’t. Some of the seniors have questioned whether we should be doing it. There is a tension because they believe that more able people get to do things that the less able are not able to do. However, many of these people have 1:1 support and the challenge is to find ways that they can have the same opportunities.’

Thirdly, some staff had concerns about health and safety aspects of the project, including those associated with older people travelling into Central London for the sessions. In a similar vein, some staff also wondered whether the people they support had the capacity or interest to take part. Fourthly, some support staff were unable to offer the flexibility in their working arrangements to make the project work, perhaps because of domestic commitments. In addition, at least one carer who attended a session expressed their discomfort with their role in the project, explaining that ‘it is not what I’m employed to do’.

These staffing issues are mentioned in some detail because they were the direct cause of a significant delay in moving to the second phase of the project; engaging the older group. This hiatus was eventually overcome by the project visiting Bromley to talk directly to potential participants, their supporters and social care managers. In speaking

about their experiences to that point the younger group’s enjoyment of and enthusiasm for the project made an impression on the audience. For example, the work colleagues of one member of the younger group who was known to be extremely shy, declared themselves astonished at her ability to speak publicly about the project. The presentation was successful in persuading key decision-makers of the need to support the project and with some rescheduling it was able to proceed.

Reflecting upon the episode, the OIP coordinator acknowledged the crucial role that care support staff play as gatekeepers to projects like *Our Lives* and the need therefore to ensure that they understand what such projects are trying to achieve and the role that they can play in helping people make the most of them. It also emphasised the need for a brokerage role, like that played by OIP, to bridge the gap that sometimes exists between the social care world and mainstream cultural

conclusions

The *Our Lives* archive provides one of the most marginalised groups in society with its own voice and makes a significant contribution to our understanding of care for people with learning disabilities during the 20th century. It serves to redress the imbalance in the way that the history of that care has been told and how as a result people with learning disabilities have been viewed by society. It is also important because of the way it was devised and carried out as an innovative collaboration between two great civilising forces; the welfare state and iconic cultural institutions. This affords *Our Lives* the sort of prestige and prominence that is not always associated with projects led by people with learning disabilities.

The project has proved the benefits of adopting a diverse approach to heritage by stimulating and challenging curatorial staff to use their collections in new and exciting ways. It has also confirmed previous findings about the positive impact of oral history and life-story telling upon people who have lacked a voice in the past. The evaluation suggests that *Our Lives* has demonstrated that access to mainstream cultural institutions can unlock hidden talents for people with learning disabilities and introduce them to new interests and activities. Good imaginative care support and active brokerage are key to making sure that this pattern of outcomes can be repeated.

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