

Inclusive Memory

INCLUSIVE MUSEUMS FOR WELL-BEING AND HEALTH THROUGH THE CREATION OF A NEW SHARED MEMORY

PR1.A3

Identification of target groups for which
Museums may promote Health and Wellbeing



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PR1.3. Identification of Target Groups for Which Museums May Promote Health and Wellbeing

Results 1 Activity 3	
Title: <i>Identification of Target Groups for Which Museums May Promote Health and Wellbeing</i>	
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Methodology


1. The identified target groups

Taking into consideration the results of the *Desk Research on the Use of Museums as Inclusive Spaces and Learning Contexts for Health and Wellbeing Development* (see PR1.A1 report here <https://piattaformaintellect.it/portale/wp-content/uploads/2022/09/Download-PR1-Report.pdf>), as well as their fields of expertise and working experiences, the project partners identified the following seven (7) main target groups for which museums may promote their health and well-being:


Target groups (TGs) for which museums may promote health and wellbeing	Partners identifying TGs' needs and possible actions
TG 1 Protected characteristic: disability (1) Users with mobility, physical and sensory (vision, hearing, tactile) impairments	UNED, UAb and Zètema
TG 2 Protected characteristic: disability (2) Users with cognitive or learning disabilities	UNIMORE
TG 3 Users marginalized due to lower socioeconomic status (poverty; lack of education; homelessness; unemployment)	UNIMORE, Inter Alia
TG 4 Migrants and refugees	Inter Alia
TG 5 Users with Alzheimer's or dementia	Haskoli Islands
TG 6 Users with Autism Spectrum Disorders (ASD)	UNED, UAb
TG 7 Culturally diverse women (immigrants) with Complex PTSD diagnoses	ICS

2. The empathy map

As listed in the table above, partners worked together to analyze the needs and the possible actions for the identified target groups with the use of the following Empathy Map template:


Empathy Map Template

Who are we empathizing with?
Who is the target group we want to understand?
What is the situation they are in?
What is their role in the situation?

What do they think and feel? <i>What are they thinking and feeling? What thoughts and feelings might motivate their behavior?</i>		
What do they hear? <i>What are they hearing from family, friends, colleagues, and others?</i>	 <small>Icon: "Balance" by Jack Sullivan Source: The Noun Project, License CC BY 3.0</small>	What do they see? <i>What do they see in their immediate environment and in the marketplace? What are they watching and reading?</i>
What do they do? <i>What are they doing? What can we imagine them doing? What do they need to do differently?</i>		What do they say? <i>What are they saying? What can we imagine them saying?</i>
PAINS <i>What are their fears, frustrations and anxieties?</i>		GAINS <i>What are their hopes, wants and needs?</i>
ACTIONS <i>What are the possible actions museums can take to promote their health and wellbeing?</i>		



The Empathy Map was selected as a tool because it is divided into several sections with questions that help empathize with the selected target groups. Partners were advised, when filling in the empathy map:

- to not get too specific and spend too much time imagining what each target group thinks, feels, sees etc, since the primary aim of the activity was to find out what each target group experiences as pains, and how museum actions can help relieve that pain (gains); and
- to bear in mind the social model of disability and the intersectionality of identities.

Main Findings

1. Users with mobility, physical and sensory impairments

Profile summary

Users with mobility, physical and sensory impairments:

- suffer sensorial and architectural barriers;
- cannot access the correct information;
- often get lost;
- cannot move around everywhere they desire;
- cannot be fully independent in their daily lives, and, usually, they need help;
- hear that they cannot do anything they want on their own without help.

Pains (fears, frustrations, anxieties)	Gains (hopes, wants, needs)	Possible museum actions
<ul style="list-style-type: none"> - not accessing the correct information; - not being able to travel alone; - getting lost; - being excluded from positive experiences, sensorial and aesthetic. 	<ul style="list-style-type: none"> - to have life experiences like the rest of people; - to have pieces of information in different formats; - to use their personal devices that are fully adapted for their specific needs. 	<ul style="list-style-type: none"> - provision of accessible paths and multi-sensory experiences for all; - provision of content for personal devices (mobiles, tablets); - design of WCAG-accessible websites; - museum staff training.

2. Users with cognitive or learning disabilities

Profile summary

Users with cognitive or learning disabilities:

- are generally aware of their characteristics;
- need mediation tools and teaching activities designed in relation to their educational needs;
- may feel excluded because they are defined as "unintelligent" or unable to understand everything.

Pains (fears, frustrations, anxieties)	Gains (hopes, wants, needs)	Possible museum actions
<ul style="list-style-type: none"> - not understanding and not being understood; - high levels of anxiety, irritability, nervousness due to being in situations of incommunicability. 	<ul style="list-style-type: none"> - to be understood, - to understand the context and information received; - to be actively involved in the activities implemented; - to be autonomous in terms of communication. 	<ul style="list-style-type: none"> - design of accessible mediation tools; - provision of personalized technological tools; - design of engaging (hands-on) activities; - museum staff training.

3. Users marginalized due to lower socioeconomic status

Profile summary

Users marginalized due to lower socioeconomic status (e.g. due to poverty; lack of education; homelessness; unemployment):

- don't have (easy) access to services (e.g. education, health care etc.) which negatively impacts their overall health and well-being;
- are usually excluded from cultural activities, which can negatively influence their sense of self;
- usually, hear that they are individually responsible for the situation they are in.

Pains (fears, frustrations, anxieties)	Gains (hopes, wants, needs)	Possible museum actions
<ul style="list-style-type: none"> - to cover their basic needs. The low level of cultural and, consequently, social inclusion causes few opportunities for social interaction as well as isolation, and social tensions. 	<ul style="list-style-type: none"> - to improve their social status, especially from an economic (or employment) point of view. This could include participating in cultural exchange / community engagement opportunities. 	<ul style="list-style-type: none"> - consideration of providing professional training or opportunities to cultivate and improve soft skills (e.g. digital skills, entrepreneurial skills etc.).

4. Migrants and refugees

Profile summary

Migrants and refugees:

- don't have (easy) access to public services to apply for legal identity, travel, work and health documents;
- experience a dual pressure: to prove their worthiness in the hosting societies; to stand for the life-changing trip to Europe they did in their countries of origin.
- form their own communities to fight for their rights, to preserve their cultural identities, and to communicate their cultures to the hosting communities.

Pains (fears, frustrations, anxieties)	Gains (hopes, wants, needs)	Possible museum actions
<ul style="list-style-type: none"> - in transit or in limbo for long periods of time without any perspective of improvement; - stigmatized and treated as a threat / 2nd class citizens; - to survive and cover their basic needs. 	<ul style="list-style-type: none"> - to build a better life for themselves and their families; - to get a job, and a fair treatment; - to be acknowledged and respected. 	<ul style="list-style-type: none"> - organization of activities focused on migrants and refugees; - decolonisation of collections and exhibitions via crowdsourcing migrants' and refugees' stories and objects.

5. Users with Alzheimer's or dementia

Profile summary

- Different degrees within the Global Deterioration Scale (GDS).
- The 4 characteristic A's: aggressivity, agitation, anxiety, apathy.

Users with Alzheimer's or dementia:

- are usually motivated by whatever reaches their emotional memory.
- are often considered inactive society members after diagnosis.
- cannot communicate easily since their communication skills gradually deteriorate (which greatly affects their ways of communication along with maintaining social relationships).

Pains (fears, frustrations, anxieties)	Gains (hopes, wants, needs)	Possible museum actions
<ul style="list-style-type: none"> - The gradual loss of memory deprives users with Alzheimer's or dementia from their identity and personal history, awareness and freedom. 	<ul style="list-style-type: none"> - To be respected. 	<ul style="list-style-type: none"> - educators' training; - setting up structured and specially aimed programs where issues related to the AD are focused on and responded to.

6. Users with Autism Spectrum Disorders

Profile summary

Users with Autism Spectrum Disorders:

- may behave, communicate, interact, and learn in different ways from most other people;
- have abilities that can vary significantly;
- may have difficulties developing and maintaining friendships, communicating with others, or understanding what is expected in different settings.
- may attempt to "camouflage" themselves in social situations.

Pains (fears, frustrations, anxieties)	Gains (hopes, wants, needs)	Possible museum actions
<ul style="list-style-type: none"> - difficulty in asking for help to deal with situations they are not comfortable with or cannot respond to. - difficulty in doing new things or putting knowledge into practice (hence, lack of initiative / interest) - problems in self-regulation, accessing / maintaining a job. - crowded and loud places; violence; unclear information can cause pain and anxiety. 	<ul style="list-style-type: none"> - to have life experiences like the rest of people. - to be included and develop peer friendships as non-autistics. - to be employed and live independently. 	<ul style="list-style-type: none"> - provision of quiet rooms. - provision of touchable items for users to touch and release anxiety. - placement of iconographic signaling in the itineraries. - development of pre-guides with images and icons to help with the itinerary and the visit. - museum staff training.

7. Users with Complex PTSD diagnoses with a special focus on migrant women with complex PTSD caused by sexual abuse

Migrant women with complex PTSD caused by sexual abuse:

- feel as being sunk in a black hole or locked up;
- can't trust others, and don't open up easily.
- (in new environments) may feel strange or anxious, disoriented, lost, or out of place.

Pains (fears, frustrations, anxieties)	Gains (hopes, wants, needs)	Possible museum actions
<ul style="list-style-type: none"> - fear of relapsing; - frustration when having high expectations of a fast recovery. 	<ul style="list-style-type: none"> - to keep improving their mental health situation and feel better; - to continue with their treatment. 	<ul style="list-style-type: none"> - establishment of a formal "arts in health" strategy; - museum staff training; - provision of feedback to hospitals. - establishment of a formal agreement with a medical partner; - creation of a museum ambassadors' programme.

Conclusions and next steps

After the detailed review of the target groups based on the field of expertise and the working experience of each partner, we came to identify certain differences, but also similarities among the needs and the possible museum actions in meeting the concrete needs. At this point, we would like to highlight the existence of other target groups (for example, users with mental health problems and Caregivers), to which our research doesn't extend, while their further study is recommended with the aim of achieving the *inclusive museum* as an institution.

By focusing on similarities, we tend to highlight the need for specialized museum staff who in turn receive updated and customised training. As a recommendation, it would benefit the target groups and their museum experience, if Museum actions and their respective educational programmes are based on the principles of Differentiated Instruction (DI) and Universal Design for Learning (UDL), such as focus on essential knowledge and skills based on children's characteristics; and connection with prior experiences and daily life experiences.

Another area for exploration with significant potential for the achievement of the inclusive museum, is the use of technology in museum actions and educational programs. (To be explored in detail in PR2).