

CONFIDENTIAL SURVEY
SURVEY OF AESTHETIC AND CULTURAL HEALTH (SACH)

Section 1 Arts interests

This section asks about your most important arts interests.

Q 1.1 Have you attended these events in the last 12 months (in Ireland or elsewhere)? And in the last 10 years? Please tick if you have attended these events.

Arts events attended in the last year	In the last 12 months	In the last 10 years
1.1.1 Mainstream film (e.g. cinema)		
1.1.2 Play		
1.1.3 Rock or Popular Music event		
1.1.4 Traditional Irish or Folk Music event		
1.1.5 Stand-up Comedy		
1.1.6 Musical		
1.1.7 Variety show/Pantomime		
1.1.8 Art exhibition (for example, paintings, sculpture, photographs)		
1.1.9 Circus		
1.1.10 Country and Western music event		
1.1.11 Traditional/Folk Dance event		
1.1.12 Jazz/Blues Concert		
1.1.13 Classical Music Concert or Recital		
1.1.14 Readings (e.g. literature or poetry)		
1.1.15 Art house film		
1.1.16 Opera		
1.1.17 Modern dance event		
1.1.18 Ballet		
1.1.19 Other – please name		

Q1.2 Have you taken part in any of these activities in the last 12 months (in Ireland or elsewhere)? And in the last 10 years? Please tick yes if you have participated in these activities.

Arts activity participation	In the last 12 months	In the last 10 years
1.2.1 Play a musical instrument for your own pleasure, rehearse or for an audience		
1.2.2 Painting/drawing/sculpture		
1.2.3 Sing in a choir		
1.2.4 Set dancing		
1.2.5 Perform or rehearse in play/drama		
1.2.6 Other dancing (not fitness class)		
1.2.7 Other Irish traditional/folk dancing		
1.2.8 Photography		
1.2.9 Writing (e.g. poems, stories or plays)		
1.2.10 Writing any music		
1.2.11 Making artworks or animations on a Computer		
1.2.12 Perform or rehearse in light opera/musical		
1.2.13 Making films as an artistic activity		
1.2.14 Perform or rehearse in opera		
1.2.15 Other singing to an audience or rehearsing (not karaoke)		
1.2.16 Other – please name		
1.2.17 I have stopped to look at any art (i.e., a sculpture) in a public place (e.g. in a park, on a street) within the last 12 months/10 years		

Q1.3 Do you currently find it difficult to take part in the arts activities which interest you? Please tick yes or no.

- Yes
- No If you answered no, please move on to Section 2

Q1.4 If yes, please tick which difficulties you currently have:

Difficulties accessing arts and leisure interests	Yes	No
Physical health issues (for example, too much pain, physical difficulties)		
1.4.2 Access to venue		
1.4.3 Cost		
1.4.4 Family commitments		
1.4.5 Transport difficulties		
1.4.6 Fear of going out		
1.4.7 Too far away		
1.4.8 Nobody to go with		
1.4.9 Inadequate information on event		
1.4.10 I might feel uncomfortable or out of place		
1.4.11 Difficult to find time		
1.4.12 Loss of confidence		
1.4.13 Low mood		
1.4.14 Lack of motivation		
1.4.15 Other (please specify)		

Section 2 Arts in hospital

Q 2 This section asks questions about your hospital stay.

Q 2.1 Receptive arts in hospital

Please answer the following statements with Agree or Disagree or mark if 'Don't know' or 'not sure'.

	Agree	Disagree
2.1.1 In hospital I watched TV/DVD of my choice		
2.1.2 In hospital I used a computer		
2.1.3 In hospital I listened to radio programmes of my choice		
2.1.4 In hospital I watched films of my choice		
2.1.5 In hospital I listened to music of my choice		
2.1.6 In hospital I read for pleasure		
2.1.7 In hospital I used e-reading devices		

Q 2.2 Noise

Please answer the following statements with Agree or Disagree

	Agree	Disagree
2.2.1 I had control over whether the TV was on or off while in hospital		
2.2.2 Sounds from TV or radio disturbed me when I was in hospital		
2.2.3 I had control over whether the radio was on or off while in hospital		
2.2.4 Music being played on the ward disturbed me when I was in hospital		
2.2.5 Sounds from other patients disturbed me when I was in hospital		
2.2.6 Sounds from machines or equipment disturbed me when I was in hospital		
2.2.7 Sounds from staff disturbed me when I was in hospital		
2.2.8 I was able to choose whether to share a room with other patients while in hospital		
2.2.9 I had access to a quiet place when I needed it in hospital		
2.2.10 I had access to company and conversation when I needed it in hospital		

Q 2.3 Most popular art forms - music, dance, art, writing, film

Please answer the following statements with Agree or Disagree

	Agree	Disagree
2.3.1 I listened to music while in hospital		
2.3.2 I listened to live music when I was in hospital		
2.3.3 I played a musical instrument in hospital		
2.3.4 I wrote in hospital		
2.3.5 I painted or drew in hospital		
2.3.6 I watched films in hospital		

Q 2.4 Visual art in hospital

Please answer the following statements with Agree or Disagree

	Agree	Disagree
2.4.1 I noticed the visual art, pictures or photographs on the wall in my room or ward		
2.4.2 I put my own art, pictures or photographs on the wall in my room or ward		
2.4.3 I was satisfied with the visual art on display in the hospital		
2.4.4 The visual art in hospital was interesting and varied.		

Q 2.5 Access to arts activities in hospital

Please answer the following statements with Agree or Disagree

	Agree	Disagree
2.5.1 continued the arts activities I enjoy while in hospital		
2.5.2 My arts interests were important to me when I was in hospital		
2.5.3 Arts programmes are important in hospital		
2.5.4 I did not access arts in hospital because I was too ill		

Section 3

This question asks you some background information. This will be anonymous and confidential.

Q3.1 Are you:

- Male
- Female

Q3.2 Your date of birth _____

Q3.3 Your marital status

- Single
- Married
- Divorced/Separated
- Widowed

Q3.4 Your _____ occupation _____ or _____ former _____ occupation

Q3.5 Your current working status

- Retired
- Working Full-time
- Working Part-time
- Self employed
- Unemployed (seeking employment)
- Fulltime Homemaker
- Student
- Full-time farmer
- Part-time farmer
- Other (please state)

Q3.6 What education did you complete?

- No formal education
- Primary Level
- Attended 2nd Level
- 3rd Level Undergraduate
- 3rd Level Postgraduate
- Still at 3rd Level

Q3.7 Do you have children living with you under the age of 18?

- Yes
- No

Q3.8 What is your ethnic or cultural background?

- White Irish
- White Irish Traveler
- Any other white background
- Black Irish
- Any other black background
- Chinese
- Any other Asian background
- Other, including mixed background, please write in description

Q3.9 During your hospital stay were you:

- In a private room
- In a shared ward
- Both

Q 3.10 During your hospital stay were you:

- A private patient
- A public patient

Section 4

There are 2 more brief tests we need you to answer for us. Please circle the correct answer in each section

BARTHEL ADL INDEX		PATIENT'S NAME:					
		HOSPITAL NUMBER:					
		DATE					
BOWELS	0 = Incontinent 1 = Occasional accident (1 per week) 2 = Continent						
BLADDER	0 = Incontinent or catheterised & unable to manage 1 = Occasional accident (max 1 x per 24 hours) 2 = Continent for over 7 days						
GROOMING	0 = Needs help 1 = Independent, face, hair, teeth, shaving.						
TOILET USE	0 = Dependent 1 = Needs some help but can do something. 2 = Independent (on and off, dressing, wiping).						
FEEDING	0 = Unable 1 = Needs help cutting, spreading butter etc. 2 = Independent.						
TRANSFER	0 = Unable 1 = Major help (1-2 people, physical). 2 = Minor help (verbal or physical). 3 = Independent						
MOBILITY	0 = Immobile 1 = Wheelchair independent including corners etc. 2 = Walks with help of 1 person (verbal or physical). 3 = Independent (but may use any aid, eg. stick).						
DRESSING	0 = Dependent 1 = Needs help but can do half unaided. 2 = Independent						
STAIRS	0 = Unable 1 = Needs help (verbal, physical, carrying aid). 2 = Independent up and down.						
BATHING	0 = Dependent 1 = Independent						
TOTAL							

Geriatric Depression Scale (short form)

Instructions: Circle the answer that best describes how you felt over the past week.

- | | | |
|---|-----|----|
| 1. Are you basically satisfied with your life? | yes | no |
| 2. Have you dropped many of your activities and interests? | yes | no |
| 3. Do you feel that your life is empty? | yes | no |
| 4. Do you often get bored? | yes | no |
| 5. Are you in good spirits most of the time? | yes | no |
| 6. Are you afraid that something bad is going to happen to you? | yes | no |
| 7. Do you feel happy most of the time? | yes | no |
| 8. Do you often feel helpless? | yes | no |
| 9. Do you prefer to stay at home, rather than going out and doing things? | yes | no |
| 10. Do you feel that you have more problems with memory than most? | yes | no |
| 11. Do you think it is wonderful to be alive now? | yes | no |
| 12. Do you feel worthless the way you are now? | yes | no |
| 13. Do you feel full of energy? | yes | no |
| 14. Do you feel that your situation is hopeless? | yes | no |
| 15. Do you think that most people are better off than you are? | yes | no |

Total Score _____

Thank you for completing this survey.