

Learning Through Process: Elevating Process Evaluations for Arts in Health Initiatives at Arts Organizations

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Introduction:

There is a demonstrated rise in the use of the arts as a tool for health and well-being across the United States and around the world, ranging from general arts participation in a variety of settings, clinical and non-clinical, to the design of those settings (Daykin, 2019), and the establishment of social prescribing — connecting individuals with “non-clinical support and services within their communities” (Marshall et al., 2025). In recent years, the arts have been noted to “empower health communication, support health literacy, provide direct and measurable health benefits to individuals and communities and support coping and resilience in response to COVID-19” (Sonke et al., 2021).

In this article, we share field notes from the perspective of a performing arts center evaluating five new arts in health programs and demonstrate how other arts centers may utilize a process evaluation to: (1) support the identification and tracking of what is working well; (2) identify challenges early and allow for appropriate adjustments; and (3) provide support for communication with funders and stakeholders. Evaluations can shed light on projects with “purposeful data management, a better understanding of what is working or not working in a program...” (Leak et al., 2025). We confront the need to intentionally plan and resource evaluation from the very beginning of program development as essential to successful implementation.

Across the United States, thousands of performing arts centers serve as vital ecosystems of impact for their local communities and economies — and according to Americans for the Arts, 90% of Americans believe that cultural facilities improve quality of life (Americans for the Arts, n.d.). In these notes, we share insights from our process evaluation to support arts centers navigating cross-sector collaborations and developing or assessing programs at the intersection of arts, culture, health, and evaluation practice. We contend that arts centers should recognize their work as part of the broader arts in health ecosystem, and that when establishing arts in health programming, conducting rigorous process evaluations ought to be standard practice — both to strengthen their programs and to better serve the communities they reach.

Background:

New Jersey Performing Arts Center (NJPAC), located in Newark, New Jersey, is the anchor cultural institution for both the city of Newark and the state of New Jersey (New Jersey Performing Arts Center, n.d.). In 2022, NJPAC established an Arts & Well-Being (AWB) department, bolstered by foundational endowment funding support from RWJBarnabas Health System, Horizon Blue Cross Blue Shield of New Jersey, and Women@NJPAC. The funding facilitated NJPAC’s hiring of a Senior Director of Arts & Well-Being to lead the department, and the subsequent program implementation, partnerships, and associated staff roles. The department now, in 2026, generates dozens of programs annually under the banner of five pillars, facilitated by four full time staff, one part time staff member, and a myriad of local teaching artists. The goal of AWB is to increase access to the arts and culture, improve health equity and health outcomes, and promote the practice of engaging with the arts for well-being for the NJPAC and larger Newark community.

Early planning for these new AWB programs included roundtables and stakeholder conversations (including community members), design sessions, coalition building, and reviews of local community health needs assessments (Newark Beth Israel Medical Center, n.d.). Programs were developed in partnership with established local health or social care organizations that held similar goals of creating a “culture of connection” and impacting the community through the promotion of arts engagement activities.

The resulting five pillars of programs of the AWB department include: (1) NJPAC-Rutgers Arts in Health Research Lab: measuring impact through a partnership with Rutgers School of Public Health and Mason Gross School of the Arts, (2) Arts in Healthcare: enhancing patient care and staff well-being through the arts at Newark Beth Israel Medical Center, (3) ArtsRx: increasing access to the arts through free referrals to local arts programs by local health partners, (4) Health Promotion: programs and events addressing key health issues through events and programs with community health partners, and (5) Training and Education: online courses to build capacity for arts in health through accessible and affordable workforce development.

To assess the effectiveness of their new processes and partnerships, NJPAC AWB leveraged the newly-established Arts in Health Research Lab and received support from AWB program implementation partner, Elevate Theatre Company LLC, to conduct a process evaluation.

The following reflects on the unique process of assessing five AWB programs after their first year of implementation, including three programs in the Health Promotion pillar: Lullaby Project, Ritual4Return, and Rutgers University-Newark Student Mental Health Workshops; one program under the Arts in Healthcare pillar: Music in the Lobby, and ArtsRx (a single program pillar) (see Table 1 for program descriptions and goals).

The sections *What We Did* and *What We Learned* are written from the perspectives of the evaluation team representing the Arts in Health Research Lab and Elevate Theatre Company LLC, with call-out boxes including reflections from the AWB lead at NJPAC. All our voices converge in the discussion and conclusion.

Evaluation Approach & Methods: *What We Did*

A process evaluation examines how a program is being delivered, assessing whether activities are reaching the intended audience and being implemented as planned, while a program evaluation most often measures overall merit and long-term outcomes (Smith and Ory, 2014). Given that the AWB programs were new, it was determined that a process evaluation was necessary to focus on how the programs were being implemented to the benefit of the participants, partners and community.

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The evaluation was an opportunity to assess programmatic improvements to be made in alignment with the stated goals of the programs and the AWB department overall. There were two distinct efforts to capture information from the five AWB programs: (1) pre/post participant and administrator survey data captured as a part of standard and planned program implementation, and (2) the post-implementation process evaluation. The evaluation was solely for quality improvement purposes of the AWB programs. Therefore, we did not perform research and did not seek approval from an Institutional Review Board (IRB).

(1) Pre/Post Participant and Administrator Survey Data:

From the inception of each AWB program, pre/post surveys for program participants were implemented to understand mostly quantitative data including participant demographics, program logistics, participant experience, and impact. All surveys also captured well-being metrics through the Flourishing Scale, a validated scale which measures “purpose, relationships, optimism, engagement, and self-esteem” (Diener et al., 2009). Each program integrated the survey into the onboarding and offboarding processes for ease of collecting information. For the process evaluation, a pre-post comparison analysis was conducted to understand the participants’ change in response over time, looking at key measures such as frequency of arts participation before the program and after.

Additionally, across all programs, surveys were also conducted with program administrators to capture their experiences as they conducted workshops or delivered programs. A thematic analysis was conducted for this program administrator survey data to understand logistics, communication, and other partnership elements.

Post-Implementation Process Evaluation:

In the year following program implementation, we sought a more nuanced understanding of the processes through which the programs were implemented and the impact of the program for partner organizations and participants. Beginning with a theory of change, (BetterEvaluation, n.d.) we established a hypothesis that: (1) there was a high level of communication and collaboration between the AWB team and partners; (2) participation in NJPAC AWB programming (aimed to address the identified community health goals) creates opportunities for emotional engagement, including empathy and meaning-making for participants, and (3) the high level of communication and collaboration allowed for successful program implementation, thus driving participant experience with emotional engagement. To test the hypothesis through the process evaluation, we constructed a long-form survey instrument.

The resulting instrument was intended for a broad capture of information, theoretically allowing for a deep assessment of the programs and providing rich qualitative and quantitative data. It was to be filled out by three stakeholder groups: (1) AWB team members, (2) representatives from AWB partner organizations, and (3) AWB program participants. These three audiences provide a clear sense of the overarching impact from people internal and external to NJPAC. The long form survey would have collected respondents views from different domains including: program content, delivery, and logistics. The instrument used a combination of qualitative and quantitative questions including some open-ended questions and a satisfaction scale.

Keeping in mind the need to “reserve time for calibration and testing the evaluation models,” (Bundi & Pattyn, 2023) we shared the long-form survey with the AWB team to test and give feedback on the instrument. We quickly discovered the proposed instrument was dense and complex, too lengthy for the purposes of this evaluation and would demand too much of our partners’ and participants’ time, contributing to survey fatigue (Porter et al., 2004). In alignment with utilization-focused evaluation theory, we found it necessary to apply “situational responsiveness,” (Patton, M.Q., 2003), ensuring the data captured was useful for the AWB leadership (our primary intended end-user of the data), and easy for program participants’ and partners engagement.

With an attitude of flexibility, the decision was made to pivot from the long-form survey tool to semi-structured interviews. Although disappointing to make significant changes to the approach, doing away with a tool we worked hard to create, we felt it imperative to balance our needs for the evaluation and the needs of the three groups of participants. AWB leadership enlisted outside help as a way of off-loading some of the burden of the evaluation process from their resource stretched team and partner organizations. When tested, the long-form survey compromised our goals. Instead, 23 semi-structured individual, Zoom interviews were conducted. The semi-structured format was selected to ensure the interviews maintained the intended broad capture of data and could adapt to allow for “unexpected themes to emerge” (Lewis-Beck, et al., 2004). Table 2 illustrates the questions asked for all three populations and Figure 1 displays a breakdown of participant and administrator interviews.

The 23 interviewees were volunteers. Participants from each of the five AWB programs being evaluated were emailed an invitation to participate in the interviews and offered a gift card

payment as compensation for their participation. Additionally, program partners were also invited to participate. At the time there were three AWB team members, all were interviewed. AWB team members and partners were not offered compensation. All interviews were conducted by the evaluation team.

Interviews were transcribed and summarized with repeated words, phrases, and sentiments noted across stakeholders and programs, in an iterative manner. Quantitative data from Pre/Post Participant and Administrative Surveys were analyzed and summarized. And the two sets of data were compared.

Our initial findings were crafted into five short one-to-two-page reports (one per program) then shared with AWB program partners and AWB leadership for feedback and confirmation of findings. After incorporating one round of feedback, a final multi-page report was developed to summarize all our key findings, key successes and recommendations for each program in addition to recommendations for the AWB team.

Reflections from the AWB Leadership:

As we built the AWB department, nearly a dozen AWB programs were established simultaneously. While this was instrumental to our comprehensive programmatic approach, the limited timeline to stand up the programs detracted from our focus on intentional evaluation design efforts.

Recommendations for other arts centers/arts organizations:

1. Strategically invest in your evaluations from day one by devoting staff attention and/or lengthening program implementation timelines to account for evaluation development.
2. Proactively ask partners and program participants about their own “why”; what their organization’s or personal goals are and develop evaluation tools reflecting those goals and the goals of the arts center.
3. Build in time for staff and partner reflection and evaluation in program cycles.

Ethical Considerations:

Our evaluation was done with integrity, incorporated systemic inquiry, and respected participants, with the common good in mind (Ethical Guidelines | Better Evaluation, n.d.). More specifically, we made sure to:

1. **Acknowledge the valuable time of all stakeholders** - Evaluation respondents were voluntary and AWB program participants were paid for their time and contribution to the semi-structured interviews. The \$20 gift card payment was also not so high as to be coercive, but was a gesture of the value their time and thoughtful responses provided.
2. **Use accessible processes, including language** - All evaluation respondents’ work and home life schedules were taken into consideration. We offered a wide range of times to participate and offered phone calls instead of video conference, as needed. We did not offer the interviews in any language other than English because all participants spoke English. We purposefully avoided acronyms and other jargon in the questions to ensure comprehension by all.
3. **Anticipate and allay any potential concerns related to future engagement** - Participants were invited to provide voluntary feedback on both the “roses and thorns” of their participation and were informed that any answers they provided would not impact their future program participation or work at or with NJPAC.

Reflections from AWB Leadership:

The imperative to implement an ethically sound evaluation, coupled with limited team capacity for implementation and the fact that our AWB lead was the only person with research and evaluation experience, made it critical for AWB to invest in outside support.

As evaluation leads, Arts in Health Research Lab and Elevate Theater Company LLC ensured thorough, thoughtful, and ethical delivery of the entire process evaluation and subsequent report.

NJPAC has now hired a full-time Senior Director of Research and Impact and two Research Manager positions to oversee research and evaluation for all NJPAC's social impact departments.

Recommendation for other arts centers/arts organizations:

1. Approach resourcing evaluation as a strategic investment in how you can understand and tell the story of how your programs impact the individuals and community you serve.
2. Acknowledge that outside support can be a first step in creating the necessary organizational norms and improve internal skills for on-going program evaluation.

Findings: What We Learned

Our analysis was conducted based on robust qualitative and quantitative information including three main sources of data:

1. Twenty-three 30–60-minute semi-structured interviews across all programs and stakeholders.
2. Nearly 300 pre-existing surveys including participant pre/post survey data and additional surveys collected across the various programs from AWB team members and partners.
3. Pre-existing program documentation, including MOUs, partner agreements, timelines, and program observations conducted by the program evaluation team.

The following is a summary of the major successes and recommendations from our qualitative and quantitative analysis. The final published evaluation report can be found [here](#).

Themes from AWB Program Participants:

- AWB was commended as being highly effective organizers and communicators.
- AWB thoughtfully provided amenities including food, transportation, parking, marketing support, and other assets when possible, improving the experience for participants.
- AWB program enrollment processes were excellent.

Recommendation:

- Clearly define the “why” – *what is NJPAC's connection with each program's target population? And how does NJPAC uniquely benefit them?*

Themes from External AWB Partners:

- AWB built clear relationships and trust with each partner.
- AWB created streamlined and standardized operational procedures, which were followed by program implementers.

Recommendations:

- Specify the main goals of each program to all partners for long-term impact.
- Increase opportunities for AWB partner organizations to meet and network with each other.

- Provide each program with standard onboarding and offboarding procedures and share the processes with partners in advance.

Recommendations from AWB Team Members:

- Create and regularly update an annual AWB programmatic calendar.
- Create videos that feature AWB programs to increase visibility of the value of arts for health and well-being.
- Establish regular, consistent evaluation processes to be implemented for each program.
- Formalize more internship opportunities (e.g., with Rutgers University-Newark) to increase capacity for overall AWB program administration.

In considering our practice when conducting this process evaluation, we learned that the semi-structured interviews were a valuable source of detail, depth, and nuance that would have not been captured from surveys alone. For our purposes, a quantitative scale — even the validated Flourishing Scale — was ultimately not as effective at capturing the full scope of what was truly working well, the impact on the participants’ daily lives, and the depth of their gratitude for the AWB programs. For example, our quantitative survey demonstrated that “in the last month” over half the Lullaby Project participants, had never “participated in nor attended an arts program or activity,” and in the post-survey the same percentage had participated in an arts program or activity once a month or more. However, through our interviews we learned about our participants’ perceived value of the arts towards their health and well-being and captured our partners’ perspectives about communication levels and coordination of program logistics. We gained quotes like “We’ve been singing the song [created in the Lullaby Project] with her daily, and it’s something that we use as a keepsake ... it grounds us.” This qualitative information reinforced mission alignment, and allowed for stakeholders to provide meaningful input into future program design elements, and creating conditions for actionable change.

Reflections from AWB Leadership:

The process evaluation proved invaluable to the way we operate our AWB programs. It validated how we work with partners and reinforced our shared goals and values. We uncovered quick wins and opportunities for better alignment between facilitator capacity and participant numbers, in some cases, expanding participation. We learned that there is more opportunity to articulate our “why” for each population we serve and share our “why” more broadly with key stakeholders. And, we are working to understand how best to provide our partners with networking opportunities across programs.

Recommendations for other arts centers/arts organizations:

1. Leverage evaluation to improve systems and programmatic offerings, *and* to articulate impact to stakeholders more broadly - policy makers, community members, funders and advocates.

Conclusion:

NJPAC AWB is grounded in the principle that arts centers function as community health centers, given that participation in the arts — whether active or receptive — leads to positive social and mental health outcomes for the individuals and communities they serve (Wilson et al., 2022).

While this work was clear in concept to AWB leadership from the beginning, the execution was far from simple. Evaluations of new programs require a significant time and staffing commitment for teams often working with limited resources. We emphasize that in order to be effective, this

work requires an institutional commitment and an investment of time, financial resources, and personnel. Whenever possible, organizations should build process evaluation into organizational budgets, job descriptions, create partnerships, and/or hire appropriate consulting services. The insights collected can improve processes, fortify the mission, be used for further advocacy and funding.

Discussion for Arts Centers:

Our work uncovered a number of important factors that can be replicated and applied to performing arts centers, regardless of size, across the United States:

- *Think ahead:* The commitment from leadership to conduct a process evaluation allowed for clear alignment of timelines, resources, and expectations from the beginning.
- *Dedicate support:* Hiring outside support allowed for a clear delineation of responsibilities, alignment with team capacity, nimble response to challenges, and, ultimately, a more robust evaluation.
- *Adopt an attitude of flexibility:* Maintaining a flexible posture throughout the process evaluation allowed us to implement semi-structured interviews, a tool better suited for respondents and our goals, which allowed for the outcomes of the evaluation to match the original vision, and supported real-time updates according to programmatic needs.
- *Incorporate strategies for amplification:* Broad amplification of this process evaluation ensures accountability for future improvements and invites industry leaders to adopt and adapt these methods towards a critical future understanding of how arts centers can become more widely understood to contribute to community health and well-being.
- *Look back:* When setting out a plan and timeline for programs, include time for reflection for your team and partners, not only on the programs themselves, but on the evaluation process.

Future Exploration:

Our results have informed engagement with key stakeholders for the arts center and have driven conversations about the economic impact of the arts with questions like: *can we learn if and how to measure “healthy years of life” in part, attributed to arts participation and engagement?* That kind of information could expand our understanding of economic impact beyond ticket sales and subscriber numbers. Of course, there are many steps to making these types of connections and the AWB leadership has a vision for further evaluation and research that expands our definitions and data sources, exploring the stories shared by stakeholders, performing thematic analysis on scripts and lyrics created in programs, and using photos taken at events as rich sources of data to better understand our impact. And, while we expand measurement of impacts, we know the importance of also evaluating the process of implementing programs for the people we serve, to ensure trust, adhere to mission, and promote sustainability.

This process evaluation was a meaningful step towards understanding and improving our programmatic offerings, and has given us ample perspective and considerations before undertaking more robust research and evaluation in the future. This evaluation supported our understanding of what was working well and where improvement was required across the five AWB programs and we argue that more data, both qualitative and quantitative, strategically collected, leads to more robust understanding of program function and the multidimensional impact on partners and participants.

We implore further exploration in evaluation strategies as a model for broader understanding across the industry, emphasizing that program evaluation is not learning for learning's sake. Arts centers world-wide are in constant communication with one another, sharing best practices

for ticket sales, programming, education, and community engagement. If more arts centers join us and invest the time and resources required for robust analysis and share findings across the field, there is no telling what “ahas” we will uncover about the power of the arts for health and well-being and the impactful role arts centers play in helping communities thrive.

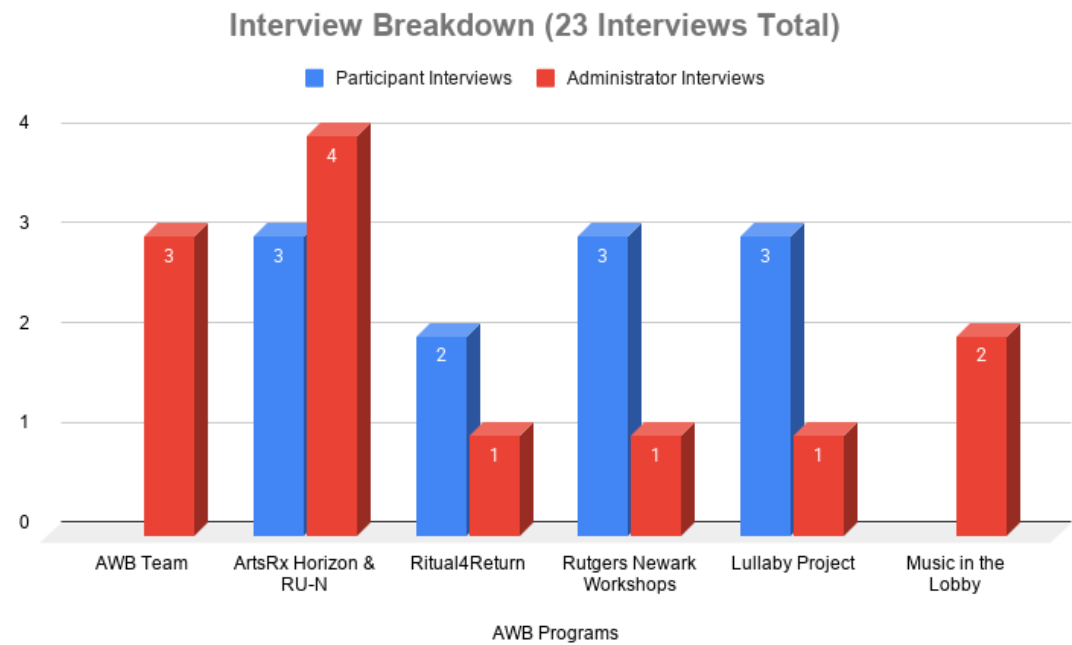
Table 1: AWB Programs in Process Evaluation from 2023–24 Season

Program Name & Description	AWB Pillar	Goals	Implementation Partners	Period Evaluated
The Lullaby Project began in the spring of 2024. New parents and families receiving services from the Partnership for Maternal and Child Health of Northern New Jersey were offered six weeks of virtual songwriting sessions led by an NJPAC teaching artist. The pilot period culminated with an in-person concert of original songs performed by the participants in front of their friends and families.	Health Promotion	Support maternal health, aid in childhood development, and strengthen the bonds between parent/caregivers and their children	Carnegie Hall The Partnership for Maternal Child Health of Northern New Jersey	Jan – July '24
Ritual4Return Through this 12-week theater and storytelling program for formerly incarcerated individuals, participants explore their experiences of entering, getting through and out of prison, and returning to their communities.	Health Promotion	Help returning citizens overcome the shame and stigma of incarceration	Ritual4Return Returning Citizens Support Group	Sept '23 – May '24
Rutgers University–Newark Student Mental Health Workshops A series of arts-based workshops designed to increase access to the mental health benefits of arts engagements.	Health Promotion	Reduce stress, build coping skills for student mental health	Rutgers University–Newark	Sept '23 – June '24
ArtsRx increases access to the arts supporting holistic health and well-being of the greater Newark community who access the program through partnerships with Horizon Blue Cross Blue Shield of New Jersey (Horizon), RU-N, and the City of Newark.	ArtsRx	Increase access to the health benefits of arts engagement	Horizon Blue Cross Blue Shield of New Jersey (Horizon) Rutgers University–Newark	Oct '23 – Sept '24
Music in the Lobby Twice-a-month musical performances by select artists in the lobby of the Newark Beth Israel Medical Center.	Arts in Healthcare	Enhance the healthcare environment for patients, visitors, and staff	Newark Beth Israel Medical Center	Oct '23 – Nov '24

Table 2: Semi-Structured Interviews Conducted with All Three Stakeholder Groups

Semi-Structed Interview Questions	Language Adaptations for Participant interviews
What are the most important goals of this program?	<i>“Why was it important for you to participate in this program? What were your personal goals?”</i>
What criteria, key performance indicators, are used to assess the progress of this program toward achieving these goals?	<i>“Were your personal goals for participating in the program met?”</i>
When you think about your program in 2023–24, what were its most impressive achievements? <i>Do you believe that the processes and resources that are in place at the current time will help sustain or grow those achievements in 2024–25?</i>	<i>“What personal achievements did you reach that would cause you to want to recommend the program to others?”</i>
Which program goals have been the most difficult to meet – to your level of satisfaction?	<i>“What challenges did you see occurring in the program? Did any of these affect you as a participant? Was the program aware of this; if so, were challenges resolved in a way that you were satisfied with? What was missing/disappointing about the program?”</i> <i>Probe where the program delivery fell short using participation variables.</i>
Which key challenges do you believe hinder these program goals — to your level of satisfaction?	<i>Participant interviews are shorter and would not involve key program challenges.</i>

Figure 1: Interview Participant Breakdown:



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