Complementary and Art-Therapies as a Supportive Approach in Gerontology and Geriatrics

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Introduction
The process of aging is often accompanied by the idea of loneliness, physical decay, pain, illness, helplessness, etc. [1,2]. However, contemporary development of medicine, technology and other related disciplines promises a more successful fight against the diseases and the negative consequences of aging [3]. With this purpose, different national and global strategies are being developed with the aim to prevent chronic disease and encourage people to be empowered to promote their own health, interact effectively with health services, and be active partners in managing disease [4].

Aging can cause different functional, physical, psychological and social implications, and therefore there is a need of eliminating or alleviating the existing negative symptoms. In that context, the use of complementary and art-therapies can also be considered as supportive approaches in therapy and rehabilitation of the elderly. Regarding to results, these therapies could contribute to development of holistic and multidisciplinary approaches in accordance with actual paradigms that are present in the field of maintaining human health and psychological well-being. But also, process of integration of different disciplines demand an additional effort regarding to further investigation of optimal models of intervention harmonized with the psychophysical, social and spiritual needs of the individual.

Complementary Therapies
The USA National Center for Complementary and Alternative Medicine (NCCAM) defines complementary medicine as "a group of different medical and health care systems, practices and products that are not generally considered part of conventional medicine" [8]. NCCAM has developed one of the most widely used classification systems of CAM into five major groups:

A. Alternative medical systems,
B. Mind-body interventions
C. Biologically based therapies
D. Manipulative and body-based methods
E. Energy therapies [9,10].

In that context, also an integrative medicine should be mentioned since involve bringing conventional and complementary approaches together in a coordinated way [11]. There is a wide range of complementary approaches that can be used within geriatrics and gerontology, but the most appropriate could be massage, aromatherapy, relaxation, meditation, therapeutic touch, guided imagination, reflexology, acupressure and naturopathy. Astin et al. [12] pointed out that forty-one percent of 1597 seniors included in their research reported use of complementary and alternative medicine (CAM), and 80% of them reported that they had received substantial benefit from their use of CAM. Furthermore, CAM users tended to be younger, more educated, report either arthritis and/or depression/anxiety, engage in exercise, practice and meditation.

Some authors suggest that the use of massage, aromatherapy and therapeutic touch may reduce pain, anxiety, indisposition and tiredness [13-15]. Also, therapeutic touch can be applied as a metaphor of acceptance and closeness, and includes the simple laying of hands on the some parts of the body, handling, embrace,
slight rhythmic touch, etc. Using touch in this way relieves the feeling of isolation, fear and vulnerability in the patient, or as Leonard & Kalman [16] cited, “the touch has the power to close the interpersonal space and alleviate the suffering”. Progressive psychophysical relaxation is also an interesting approach which assumes a set of techniques aimed at establishing intentional control and reduction of muscular tension. These techniques are particularly appropriate since a positive correlation has been established between the degree of muscular tension and anxiety [17]. This technique can be also used with a guided imagery that represents the process of imagining objects, space, persons and situations related to aesthetic, perceptive and emotional experience. This technique has proven to be a valuable non-pharmacological therapy in conditions of increased physical or psychological distress [18].

Complementary therapies can be an interesting issue in clinical and rehabilitation setting because they represent a valuable platform on which ancient, traditional and modern point of view can be connected. It is also important to emphasize that these therapies include non-invasive approaches, same-level dialogue and stimulation of psychophysical integrity. However, in order to consider these therapies as part of a standard interdisciplinary approach in elderly, certain assumptions must be met:

A. The implementation of precisely methodologically designed research;
B. Avoiding the possible risks and unwanted psycho-physical reactions; and
C. Respecting individual psycho-physical needs as well as cultural and religious beliefs and customs.

Art Therapies
Expressive arts-therapies are predicated on the assumption that through creative expression and tapping of imagination, a person can examine different aspects of Self such as sensory experiences, symbolic expression, emotional expression, life enhancement, cognitive development and social connectedness [19]. According to International Expressive Arts Therapy Association (IEATA) expressive art-therapies could be defined as methods of using the visual arts, music, dance/movement, drama, poetry, writing and other creative processes to foster deep personal growth and community development [20].

Bearing in mind the strong role of creativity in defining goals and behavioral strategies, Bellas et al. [21] tried to emphasize the importance of including people with dementia in a range of creative, art-based intervention switch can help to affirm personhood and redress the biomedical focus on loss and deficit. But, in their research they are much more oriented to mundane forms of creativity that emerge in everyday life and they extricated the following areas where creativity could be manifested: everyday creativity; power relations; ways to operationalize creativity; sensory and affective experience; difference; and reciprocity.

Similarly, Kitwood [22] assumed that a scarcely socio-psychological environment could accelerate neurological degeneration and consequently he identified 12 kinds of positive interactions, such as: recognition, negotiation, collaboration, playing, celebration, relaxation, creative creation and giving.

Because art-therapies are based on sensitivity, motor expression and symbolic presentation they encourage creativity and socialization but also functional and psycho-emotional ability. For example, Eliot & Gardner [23] emphasized three ways in which music influences the lives of older adults with dementia:

A. Reduced agitation,
B. Improved cognition, and
C. Enhanced social well-being.

Furthermore, Guthsell et al. [24] made a conclusion based on their research that use of music and autogenic training can reduce the level of pain perception in palliative care patients [24]. In some studies, a statistically significant positive influence of music therapy on fatigue, anxiety, energy, mood, physical comfort, spirituality, and quality of life is also obtained [25].

As very interesting approach can be considered reminiscence therapy as the mental process of recalling the past; it operates through cognitive functions and involves emotions and talking about past experiences. So, Choi & Jeon [26] reported that using of reminiscence together with art-therapy significantly improved cognitive function and quality of life and decreased symptoms of depression in group of 33 women over 65 years of age.

Similarly, the powerful method can be dance movement therapy (DMT). It is well known that DMT positively affects mood and symbolic expression of emotions, but also can have a beneficial effect on functional and motor skills [27,28]. For example, Rocha et al. [29] described statistically significant improvements that occurred in mobility, balance, and motor disability in the tango group, and freezing of gait improved for the mixed-dance group in persons with Parkinson’s disease.

The Center for Research on Reading, Literature and Society (CRILS) at University of Liverpool has launched a research on group-reading interventions for older people with dementia [30]. Qualitative data have shown that participation in group-reading encourages significant reduction in the symptoms of dementia, even in the last stage. In the project report particular consideration is given to:

A. The uses of powerfully emotional literature to trigger awakenings in people living with dementia;
B. The value of literature in offering emotional experiences too often feared to be ‘negative’;
C. The kind of memory that is stimulated by shared reading - different from working memory or from what is achieved through reminiscence therapy;
D. The additional effect on relatives and carers.

As an innovative creative approach can be also mentioned Time Slips. The idea is to show photos to people with memory loss, and get them to imagine what’s going on - not to try to remember anything, but to make up a story [31]. George et al. [32] carried out a research on Time Slips storytelling program in nursing care unit for 6 weeks with persons with dementia. They stressed that: “There were specific benefits for residents (increased creativity, improved quality of life, positively altered behavior, and involvement in meaningful activity), staff members (learning new practices, developing a deeper understanding of residents, involvement in meaningful activity, and thinking creatively around programmatic challenges), and the nursing home community (nurturing relationships and improved atmosphere)”. It can be concluded that arts are considered a fundamental phenomenon of human existence and are closely related to imagination, emotion, cognition, body-experience and spirituality. Symbolic expression enables overcoming limitations of standard communication and can precisely, at deeper level, illuminate inner and outer conflicts and possible solutions of the problem [25]. What encourages the use of art-therapies in the elderly is the development of assistive technologies that can facilitate visual, musical and dance expression in persons with reduced functional, motor, cognitive or sensory abilities [33]. For example, useful means can be Story Board That, the ePad III flip-board for visual expression on the tablet, The Art Therapy Draw! App, Voice output communication aids “VOCA”, or, for example, Rolling Dance Chair.

One of the most important assumptions in using complementary and art-therapies is to respect the person’s needs; its functional, intellectual and psychosocial abilities and levels of motivation and interest. Anyway, further investigations are needed to provide insight into the benefits and limitations of using complementary therapies and art-therapies in the area of geriatrics and gerontology.

Conclusion

The question of life, aging and death was an important issue for all civilizations, religions and philosophical approaches. In all cultural and historical periods the necessity of aging and disappearance was considered, which have led to valuable thoughts reflected in science and art. Understanding and accepting of the life cycle has resulted not only in obtaining knowledge and comfort, but also in valuable works such as Klimt’s painting “The Three Ages of Woman”, “The Epic of Gilgamesh” or “Story of Benjamin Button”. This means that art is thrown into the eternal man’s struggle to draw attention to the negative aspects of aging and can therefore be considered as a therapeutic media in the process of holistic healing and rehabilitation. Together with complementary therapies aimed at supporting the body-mind unit, it can be powerful auxiliary tools that can contribute to more effective mitigation of psycho-physical symptoms of aging and to improve the quality of life and life potential development in elderly. In this sense, connecting different disciplines can certainly represent an important approach in contemporary rehabilitation and therapeutic practice, with the aim of achieving a self-fulfilled and satisfied person, regardless of her/his age.

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