

National Dementia Essay Competition

First prize (third-year category)

What are the benefits of engaging with the visual arts in a gallery environment for people living with dementia in Australia?

By ***Shan Crosbie***

Bachelor of Creative Arts,

The Australian National University, ACT

This essay aims to show that an engagement with the discipline of the visual arts has a vital role to play in the development of a dementia-friendly Australia. During my six-week internship at the Learning and Access department of the National Gallery of Australia (NGA), I was enchanted by the 'Art and Dementia' program and its eager participants. It was from this encounter that I was inspired to investigate the origins and value of a program that facilitates engagement with the visual arts for people living with dementia.

Dementia is quickly becoming an international health priority, and as the second largest cause of death and leading cause of disability in older Australians (Alzheimer's Australia 2015) it is essential that Australia invest in strategies to respond to the epidemic. Numerous national and international studies have shown that engaging with the visual arts in a gallery context is of significant social, cognitive and emotional benefit for dementia patients. The 2009 study at the NGA aptly entitled, *You do it for the moment* (Macpherson *et al* 2009) was the foundation for the now seven-year-old program that I was fortunate enough to observe during my internship, and will serve as the focus of this essay.

What is dementia?

Dementia is a syndrome caused by brain disease that is usually of a chronic or progressive nature. The syndrome affects memory, cognitive ability, social ability, comprehension, orientation, learning ability, language and judgment (WHO 2012). In 2015, 342,800 people are living with dementia in Australia with a new diagnosis every sixx minutes. It is estimated that without significant medical breakthroughs, by 2050 an overwhelming 900,000 people will be living with dementia in Australia (Alzheimer's Australia 2015). In 2012, the World Health Organisation (WHO) called for dementia to be considered an international public health priority, imploring communities to begin to develop strategies to increase awareness of the epidemic and to manage its impact (WHO 2012).

With the rising number of people living with dementia, there is an added focus not only on prevention, but also on the constructive management of people already suffering from the syndrome. The burden on formal and informal caregivers is already a serious economic and social issue, and the needs of the people living with dementia are becoming harder and harder to meet.

Excess disability develops when the person's actual level of disability is overestimated and their remaining strengths and abilities are not recognised or promoted (Macpherson *et al* 2009). With the current economic and social strain on caregivers it can be difficult to counteract the development of excess disability in their patients. According to residential aged care facilities' (RACF) observational studies, dementia patients in residential care spend only 10% of their time participating in leisure or creative activities. What is also problematic is that the majority of the activities available are often at an unsuitable level of intellectual stimulation for their participants as patients' capacity for engagement is often underestimated. Social isolation is also an increasing problem for people suffering with dementia. It is estimated that frail and elderly people within our community spend 50% of their time alone (Macpherson *et al* 2009).

The task of creating a positive and engaging society for people living with dementia should be a responsibility that is shared and prioritised by the Australian public as a whole. I believe that it is only in this way that the burden of the dementia epidemic can be managed in a positive and sustainable way for patients, carers and the Australian public. Major cultural institutions have an important role to play in sharing the responsibility of creating a dementia-friendly society (Hutchison 2005).

Studies have proven that engagement with creative activities has proved to be an effective means of reversing, if only temporarily, the effects of excess disability (Macpherson *et al* 2009). Under the Disability Discrimination Act 1992, cultural institutions in Australia are required to make their services and premises accessible for people with a disability. The ways in which many cultural institutions meet their obligations under the 1992 act are often creative and proving to be highly successful contributions to the lives of people living with disability (Hutchison 2005).

Studies investigating the benefits of engagement with art for people living with dementia have been conducted over the past two decades with highly positive results. This essay will focus on a study published in *Aging and Mental Health* in 2009 that was entitled *An art gallery access program for people with dementia: 'You do it for the moment'*. This study was conducted at the NGA in 2007 and aimed to determine whether people living with dementia would be able to engage with a creative activity that was of a higher intellectual level than that of programs normally offered to dementia patients. The study was based on a program developed in 2002 by Artists for Alzheimer's (ARTZ) in the USA (Macpherson *et al* 2009). The mission of the ARTZ program in the US is "*To enrich the cultural life of people living with Alzheimer's disease, enable them to express their inner-selves, and lessen the stigma that often accompanies a diagnosis*" (ARTZ: Artists for Alzheimer's). Guided by a similar mission statement, the study conducted at the NGA was able to measure the value of engaging with the visual arts in a gallery context for dementia patients and their wider communities.

The original study conducted at the NGA comprised of a group of eight residential- and seven community-based dementia patients participating in a

six-week art appreciation program. The NGA provided educator staff to facilitate the weekly groups that were attended by the patient's carers. The results showed that the vast majority of the participants were highly engaged from the start of the program. The program sought to discourage the development of excess disability and to promote the participants' residual strengths and personalities as they engaged with a higher level thinking activity in the gallery (Macpherson *et al* 2009). As a participant's quote reveals: "We sort of tend to think about the things that we can't do but it [the program] aims to sort of expose you to something, to show that you can still do something" (Macpherson *et al* 2009). No lasting improvements in the participants' conditions were observed as a result of the program, but as one carer's comment reminds us: "You do it for the moment" (Macpherson *et al* 2009).

The authors' of the study concluded: "A critical issue highlighted by this study is the ability of psychosocial programs to maximise the residual capacities of people with dementia. That is, the excess disability observed external to the program was not an issue within the group context. This, in turn, reinforces the importance of providing interventions that promote 'normal' higher level activities for people with dementia" (Macpherson *et al* 2009).

In order to create a dementia-friendly Australia, there has to be support for not only the people living with dementia but also their carers. What is significant about gallery interventions is that by supporting the dementia patients there is also a flow-on effect that benefits the carers of these people as well. It became clear that during sessions where the carers were absent from the activity that the participants demonstrated much higher levels of engagement. Weeks where the participants were accompanied, the dementia patients would rely heavily on their carers' to respond to the activity on their behalf, resulting in the encouragement of excess disability (Macpherson *et al* 2009). Interestingly, carers do not accompany participants in the current program at the NGA, which suggests that the decision to not attend was supported by the results of the 2009 study.

Although it is not the focus of this essay, the benefits of art gallery interventions for the carers of people living with dementia are also significant. In 2015, there are two separate art engagement programs running at the NGA; one for the dementia patients themselves, and another for their carers (NGA). The separation of the two parties has proven beneficial as the dementia patients display less signs of excess disability without their carers, and the carers are able to enjoy time at the gallery temporarily removed from their responsibility as a carer.

Other programs in existence

Other similar programs or studies have been undertaken overseas and have supported the findings of the 2009 NGA study, showing similar results and benefits. *Dementia and art* (Leslie 2001) observes the value of incorporating an activity that engages with the visual arts in the nursing home. *Dementia and art* was a small study of six people with dementia art participating in an art program established at their nursing home. The participants had low-level

communication skills, and the study set out to measure the effectiveness of art as a means of encouraging the communication skills of these people. The study included a variety of participants who were affected by dementia in different ways and who consequently responded to the activity in different ways. The weekly program involved looking at and discussing prints of works and then going on to paint their own work. Some of the participants grew attached to particular prints and experienced pleasure in discussing and holding them. Through the process of painting and looking at art, participants that often found communication and socialisation an issue began to reminisce about their childhoods and memories and develop social bonds with the other members of the group. The study showed a correlation between the regular art activity and the increased capacity for communication, engagement, and quiet enjoyment in the participants. The author hopes that more aged care facilities will consider incorporating creative activities into their care planning to improve the quality of the lives of people with dementia (Leslie 2001).

A later 2015 study from the UK entitled *Theorising how art gallery interventions impact people with dementia and their caregivers* directly references the 2009 study at the NGA and builds upon and confirms their original findings (Camic *et al* 2015). The 2015 study involved 12 participants with dementia and their carers who undertook an eight-week program visiting two different galleries in the UK. Each week, the participants would visit the gallery for a two-hour session where they would view two to three works of art in the first hour and make their own art in the second. Such an activity was found to be beneficial for the participants, as aesthetic responses seem to be maintained for some time with the onset of dementia. The results revealed four key positive components that arose from the study, identified as valued space (the gallery environment), intellectual stimulation, social interaction, and changed perceptions. The results of the study challenged misperceptions of the low capacity of people with dementia to engage in complex material such as art viewing, and proved that it actively promoted the psychological and social well-being of the participants (Camic *et al* 2015).

Benefits

Over the past two decades, the studies mentioned in this essay have revealed significant benefits for both people living with dementia and their carers. These benefits have the potential to flow on to positively affect the extended family of people living with dementia, and subsequently their societies at both a local and national level. In order to create a dementia-friendly Australia, efforts have to be made to eliminate stigmas associated with dementia patients and programs like 'Art and Dementia' at the NGA go a long way to challenge these preconceptions. By engaging with visual and intellectual culture within a public institution, studies are beginning to reveal the potential benefits of normalising and re-engaging dementia patients with the Australian public (NGA).

For the dementia patients themselves, the studies over the past two decades have consistently shown that the social, intellectual and psychological benefits of engaging with art in a gallery context are significant (NGA). The studies show the importance of encouraging the discovery of residual abilities in

people living with dementia, and discouraging the reversible effects of excess disability. By challenging dementia patients to engage with an activity of a higher intellectual level than is usually expected of these people, studies are showing that participants are consistently rising to engage with the material that has previously been deemed to be beyond the capacity of dementia patients (Macpherson *et al* 2009). The social benefits of engaging with art in a gallery have also been shown to be significant. For many of the participants social interaction is something that they either actively avoid or do not have the opportunity to enjoy (Macpherson *et al* 2009). One of the community-based participants in the 2009 study at the NGA commented that: "It got me sort of getting out there, having to see more people" (Macpherson *et al* 2009).

Unfortunately, lasting benefits to the dementia patient themselves have not been seen for the mental capacity or behavior of the participants involved in the studies (Macpherson *et al* 2009). Due to the nature of dementia, these benefits are experienced only temporarily, in the moment of the activity. The ephemeral nature of the benefits should not however undermine their value, and it should be remembered that the benefits for carers and the wider Australian public are ongoing. For so many, the visual arts serve as a peaceful and safe platform to tap into emotions and to uncover hidden memories and experiences. Engaging with art is a universally beneficial experience and it has an important role to play in the development of a dementia-friendly Australia.

References

Alzheimer's Australia (2015) *Alzheimer's Australia statistics*. Accessed September 12, 2015.

ARTZ: Artists for Alzheimer's. Accessed September 19, 2015.

Hutchison M (2005) *Making the journey: arts and disability in Australia*. Walsh Bay, NSW: Arts Access Australia.

Leslie H (2001) Dementia and art. *Nursing Older People*, 13(7) 10-3.

Retrieved from

<http://search.proquest.com/docview/218605894?accountid=8330>.

Macpherson S, Bird M, Anderson K, Davis T, Blair A (2009) An art gallery access program for people with dementia: 'you do it for the moment'. *Ageing and Mental Health* 13(5).

National Gallery of Australia (NGA). Art and Dementia Program. Accessed September 19, 2015.

World Health Organisation (WHO) (2012) *Dementia: a public health priority*. Geneva.

National Gallery of Australia (NGA). *What's on*. Accessed September 19, 2015.