

DIAGNOSTIC VALUE AND EFFICIENCY OF EXPRESSIVELY-FORMATIVE INTERVENTIONS APPLIED AT SENIOR CITIZENS WITH DEMENTIA

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Abstract

This paper focuses on the results of specific university research projects carried out at the Faculty of Education at Palacký University in Olomouc in 2013-2014. These projects were conducted by the research team led by prof. Milan Valenta, formally divided according to objective-oriented project segments. In this paper, it is mainly a description of the output of the segment B, which dealt with the expressive-formative approaches applied to the senior citizens dependent on the care (with special emphasis on atrophic-degenerative and ischemic dementia). More details will be discussed in the text, not just to what extent it was possible to design and validate field diagnostic tool useful for: a) determining the effectiveness of expressively-formative interventions for senior citizens dependent on care because of the occurrence of chronic mental illness, b) diagnosis of reminiscence and reality-oriented psychosocial needs at this clientele conducted at dramatherapy intervention, but also to what extent this tool was possible to evaluate and verify.

Keywords: expressive-formative intervention, senior citizen, dependence on care, atrophic-degenerative dementia, diagnostic tool, diagnostic value, procedural efficiency

INTRODUCTION

The turn of the 20th and 21st century, and beyond, in the view of demographics showed a significant aging of the population, especially in the so-called developed countries. According to the EU report (published on 15 May, 2012) in the coming decades a substantial change in the age composition of the population of the Union is expected. By the year 2060 the total number will not increase dramatically (from the current 502 million it is expected to increase only to 517 million), but the population will be much older - 30% of Europeans will belong to the age group 65 years and older (Graying Europe - we need to prepare now, 2012). This also applies to the Czech Republic. According to The projections of the population in the year 2065, prepared by the Czech Statistical Office, the number of people over 65 years will be intensively growing (in relation to children aged 0-14 years old, but also to so called productive part of the population). Noticeable changes can occur within the group of seniors. While in 2010 people aged 65-69 years created one third of the population, in 2065 it will be only 15%. This means that the representation of persons aged 70 years and over will increase (Svobodová, 2012). The above phenomenon will occur in various social fields in which the issue of the quality of life of this important group of the population will have to be specifically solved.

As the quality of life is dependent on possibilities of development (maintenance) of human potential and competencies of the person (allowing to further maintain a certain level of mental and physical health, be involved in the social environment,) the solution of this issue becomes also important.

The field that can systematically contribute to the solution of development support (maintenance) of human potential and competence of senior citizens, is the special education gerontagogics (part of Special Education). In its framework for this purpose there is both theoretically and methodically handled a number of supporting policies. Among them there are subjected to a research also so-called expressively-formative approaches.

The following text relates to these research efforts, continues and summarizes some partial results of two ongoing projects of a specific university research conducted at Palacký University in Olomouc in 2013-2014 under the names "Current challenges and alternative strategies in special educational diagnostics" and "Evaluation and verification of currently designed tools in special educational diagnostics ". The global aim of both was to design and test such devices, procedures, manuals and measurement tools that reflect the diagnostic needs of the newly forming special education disciplines, in the case of the above mentioned segment of the project then just in special educational gerontagogics.

1. THE THEORETICAL FRAMEWORK, CONTENT AND OBJECTIVES OF THE PROJECTS

The projects responded to the demands of new diagnostic procedures within the scope of special education in several segments. In segment B (dealing with diagnostic needs of special educational gerontagogics) the first phase was about the creation of the rating focused on the process and the effectiveness of expressively-formative practice (with an emphasis on dramatherapy) for senior citizens dependent on care, then in the second phase its evaluation and verification. Content and outputs of this segment in its implementation were derived from the following two specific objectives.

The first objective was to design and verify in the field above mentioned diagnostic tool useful for:

- a) determination of the effectiveness of expressively-formative interventions for senior citizens dependent on care because of the occurrence of chronic mental illness (particularly atrophic-degenerative and ischemic dementia)
- b) diagnostics of reminiscence and reality-oriented psychosocial needs of this clientele conducted within dramatherapy intervention.

The second objective was to verify and evaluate this tool and use it experimentally with non-pharmacological (especially expressive-formative) therapy of the seniors with atrophic-degenerative and ischemic dementia.

Previous experience and research tell us that concerning the expressive-formative approaches to the senior citizens dependent on care because of the occurrence of chronic mental illness, necessary supporting potential can have most of them. Studies confirming the positive impact of arts activities on personal well-being (as an important indicator of the quality of life) of seniors with dementia are many - Kinney, Rentz, 2005, McFadden, Basting, 2010, Pepin, Holley, Moore, Kosloski, 2006, Phillips, Reid-Arndt, then, in 2010, Rentz, 2002, Rusted, Sheppard, Waller, 2006, also specialized texts dealing with various approaches - eg. Basting, Killick, 2003, Killick, Alan, 1999, Gerdner, 2000. It is also important for the approaches to correspond to the degree of involuntional (or pathological) changes, functional status (self-sufficiency), degree of adaptability to the individual's age, type of personality, previous experience, needs, etc. These determinants are in different contexts also confirmed. Inspiring is the model built on the correspondence of the satisfying of the needs and behavior of the individual. Cohen-Mansfield (2000) summarized it in three ways: the behavior leading to the fulfillment of needs (such as a search of stimuli), the behavior leading to the expression of needs (eg. repeated questioning), behavior resulting from unmet needs (such as aggression induced by pain or uncomfortable feeling). The effect of experience for ability of activities of seniors is mentioned by Neda Agahi (2006): a systematic activities in adulthood are highly significant predictor of activity in a later age – an old man, who was very active in youth, will most likely pursue the same lifestyle henceforth.

The expressively-formative approaches have the advantage already given by the functions of an artistic activity, which they work with as the main vehicle of change. We know that art can offer many resources capable to more accelerate the human psychosocially and physiologically (or vice versa to ease), which gives in conjunction with their natural creative potential a good basis for activity and participation in social life. Creative artistic expression is unthinkable without the participation of the senses, motor responses, associations of ideas, communication and sharing of meanings, emotions, etc., which can make a person healthy. It is demonstrated, among other things, in the work of American psychiatrist G.D. Cohen (1944-2009), who proved the link between creativity stimulated in the elderly and maintaining of the health and independence (Cohen, 2001). However, Stuart-Hamilton (1999), like Neda Agahi (see above) points out that it also depends on the current state of creativity that is already in the course of human life shaped by lifestyle and practical requirements of the person (whether they were "forced" to act creatively). Social aspects of the phenomenon also highlight the research findings of Bernice Neugarten (American psychologist dealing with the psychology of aging) ascribing a real decline of creativity in old age rather to social and cultural stereotypes (eg. attributing a negative role of seniors from the social surroundings) rather than biological involution (Neugarten in Sasser-Coen, 1993). And this is more or less positive.

Regarding other distinctive possibilities of expressive-formative approaches to support older people, it is necessary to mention their strong communication potential. Every artistic activity is significantly more effective especially when faced with a social environment of "artist". And it is not just about the fact that the "environment" can praise them for their activity. Above all, it is an absolutely extraordinary opportunity for the individual to choose from several types of communication that best fit, allowing them to interactively share life experiences, knowledge and experience. This advantage helps to fulfill one of the most important needs in old age and thus achieve the psychosocial needs of safety, security, love, emotional responses, respect and others.

Art allows people to communicate by alternative means, especially when their verbal skills are not just on the good level (see, for example, dementia). Generally, it is largely based on non-verbal means of communication, which is a distinct advantage. These resources constitute a relatively safe and well manageable instruments to express the inner world of a man and to grasp a possible problem. In addition, for the quality of relations and interactions - between the partners, between a specialist and their ward, between a social worker and a social service user and so on.

Existing studies of nonverbal communication among persons with dementia have focused mainly on touch (carers and response - ie. touch instrumental and expressive) and facial expression (as used by seniors and understood by carers) – there was also developed a number of tools (such as the monitoring of positive responses in form of micro-movements, it means a smile, nod, eye contact, gestures, as a reaction to external stimuli, eg. music, massage, flower arrangement-see Hubbard, Cook, Tester, Downs, 2002) - but research activities did not include examining of nonverbal behavior within the broader social interactions. The professional attention to this phenomenon began to be paid in relation to establishing an etnometodological approach. Its importance is underlined by Cséfalvay: at the end of the 20th century two new paradigms were created, important as basal theoretical basis for meaningful and effective intervention for people with communication disorders: psycholinguistic modeling (which uses cognitive neuropsychology) and adaptation of etnometodological principles of conversation analysis. This conversation has become an important means of diagnosis and therapy in the field (Cséfalvay, Brnova, 2009). Based on the application of the etnometodological principles there was revealed a necessary interaction dimension of the neverbality of seniors with dementia and was found that clients use it as an important way of communication and their own interpretation of nonverbal behavior of others (Hubbard, Cook, Tester, Downs, 2002).

The process of determining the effectiveness of expressively-formative interventions for elderly people dependent on care because of the occurrence of chronic mental disorders (dementia) and diagnose of their reminiscence and reality-oriented psychosocial needs conducted within dramatherapy intervention were theoretically and methodologically not based only on the knowledge regarding the potential artistic expressiveness. Their epistemological bases also included instructional knowledge of the classification of evaluations in the social sciences, drama-media use in the evaluation of therapeutic interventions, application of psychotherapeutic principles (eg. Gestalt principles applying a holistic vision of human in unity with their environment, when one becomes a certain part of the environment and in an interaction with it implements its needs - see Polínek, 2012) and so on. Quite an important source of basal findings of the evaluation of function and efficiency of the arts in the last decade in the world and in here, when according to Valenta (2013) there are usually applied three main lines of argument, that in some respects have the common intersections because of the complex nature of artistic activities: (1) The arguments derived from a social role of art in human civilization, (2) arguments based on the reference to the development of general human dispositions related to artistic activities, (3) the arguments that are based on psychological and socio-therapeutic effects of art activities.

(ad 1) Arguments based on the social function of art are based primarily on the concept of "cultural capital" by the philosopher P. Bourdieu. He points out that managing of artistic activities and orientation in artistic culture is a prerequisite to an individual to be able to move and apply in those sections of society that fundamentally decide on the cultural and social development, and indirectly also about the vital potential.

(ad 2) Arguments based on the reference to the development of general human dispositions have a long tradition and are connected with the names H. Read, E. Eisner, H. Gardner, our J. Uždil and others. It relies mainly on the concepts of "creativity" "artistic literacy," "critical thinking", "metacognition", "emotional intelligence", "aesthetic cultivation", etc.

(ad 3) Psycho- and socio-therapeutic reasoning has been applied around the world since the mid-20th century and is particularly linked with the name of V. Lowenfeld, who was followed by a number of other authors (Fitzherbert, Dalley, Boyer-Labrouche, our Slavík, Šicková etc..). It is based mainly on the concept of "positive prevention" or the traditional concepts of "sublimation", "catharsis" and others.

In the seventies of the last century there were some representative studies that tried to find a solid answer to the question of whether and how the group experience can bring changes in healthy populations in some of the measured parameters (interpersonal attitudes and behavior towards the values of life, self-esteem, the ability to express emotions, value system ...). It was based on the assumption that the treatment is too good to be confined to the sick, and that one does not have to be sick to be healed (Yalom, 2012). Research involving 170 university students who passed thirty-hour training in a group, showed that 39% of probands experienced a significant positive personal change, which lasted at least a six-month period (Lieberman, Yalom, Miles, 1973).

2. TERMS, THE METHODOLOGY AND PROCESS OF VALIDATION OF A DIAGNOSTIC TOOL

In the project a triangulation methodology was used combining qualitative and quantitative research (qualitative part of the methodology was based on the concept of empirically justified theory of Strauss, Glaser and Corbin, 1999), as instrumentation in particular were used:

- structured questionnaires and scales,
- group interviews and focus groups,
- field notes,
- analysis of reflective balance,
- analysis of creative products
- survey,
- Q-methodology,
- Gestaltscreening,
- unstructured interview,
- observation.

Experimental work in segment B was based on some results of segment A, where the primary focus was on methodological research (verification of measuring instruments), but due to the nature of the data collected also on research of a substantive problem (process and effect of these interventions). The verified instrument in segment A with clients of the psychotherapeutic department 18B at Psychiatric Hospital in Kromeriz (mostly women of working age with neurotic disorders) was a rating scale created on the basis of several theoretical and empirical baseline levels. Some of the items were created from the generally accepted theoretical constructs, eg. from:

- typology of group roles according to Schindler (alpha – leaders, beta - experts, gamma - common adaptable members, omega - the role of the underdog + P role- role of the sacrificial lamb, a symbolic enemy),
- distance theory by Robert Landy, professor of dramatherapy at New York University,
- application of the theory of cognitive development by Jean Piaget in the concept of developmental changes in dramatherapy by D.R. Johnson,
- structuring of the input levels according to the role by the theorist of drama and scenologist Josef Valenta
- professional experience of dramatherapists that were involved in the evaluation and verification, and apply the "general" items of Jones range of client engagement (Müller, Lištiakova, Valenta, Svoboda, 2014)

The rating scale, evaluated and verified in segment A, became the initial model for the formation of such a diagnostic tool that would be useful for determining the effectiveness of expressively-formative interventions for senior citizens dependent on care because of the occurrence of any type of dementia and diagnostics of reminiscence and reality oriented psychosocial needs of these clients, conducted within dramatherapy intervention.

Making the necessary measuring instrument was initially based on:

- partial modification of a diagnostic tool and originally designed and evaluated for adults with mental disorder
- propedeutic knowledge of needs of the target groups with special emphasis on reminiscence and reality-oriented needs,
- propedeutic knowledge of activating, reeducation and compensation potential of artistic expressiveness,
- ongoing experimental verification of phases and selected dramatherapy procedures evaluated in the context of the real needs of the target group.

A modification of a diagnostic tool (fulfilling diagnostic demands of special educational gerontagogics) was primarily motivated by an effort to resolve the factual issue, namely how to find the optimal way of measuring the effectiveness of the process (including expressively-formative resources) as well as its optimal focus. Methodological problem, namely verification of a tool, got through the initial phase of the rating evaluation (mainly through observation, reflective balance, field notes and unstructured interviews of cooperating tandem therapist / coterapeut and clinical psychologist participating in individual sessions) to the correlation of its individual items in the context of the effectiveness of the intervention.

Instructional knowledge of the needs of the target group was based on the principle of the relationship to the current state of functional ability and self-sufficiency of the client with respect to the methodological importance of the International Classification of Functioning, Disability and Health - in which dominates the effort of description and classification of situations that a person with disability (with chronic health problems - see seniors) must cope (in which has problems which are difficult to manage). In addition to hierarchically or otherwise disposed system of generally recognized needs - such as Maslow's theory of motivation – it was worked with the specific needs of senior citizens, especially connecting to human autonomy (including the necessary degree of activity and social participation) and involving reminiscence (in terms of simple memories, reflecting of the past in the informative and experiential way) and orientation in reality (personal, social, spatial, temporal), ie:

- the need to remain in their familiar environment, whether physically or in thoughts or memories (related to home as an area that I know and control, I am able to orientate there, I feel safe in it, I find things that have both practical and personal / symbolic meaning for me, space that is filled with positive relationships with close persons) - this need may be reflected in thought "escape" from the current aggressive threatening world that emphasises (and claims) the need to be young, dynamic and operational,
- the need to maintain a certain level of activity (ranging from maintaining a minimal self-sufficiency to the ability of activities bringing results) – fulfilling of this need is related to the needs for stimulation, learning, self-fulfillment, etc., and it is very important for not only autonomy and participation, but also the overall personal well-being,
- the need for communication and maintaining of interpersonal relationships - this need can be met through shared memories (reminiscence) - shared memories may be not only the theme of the conversation, but also the motivation to change the view to the person, and thus to change the relationship.

The experimental verification was carried out through regular dramatherapy sessions with clients, running from September to December 2013 and from February to May 2014 (once a week for 45 minutes). The research group, consisting of approximately 6-8 probands, was chosen by the form of institutional purposive sampling from the population of senior people dependent on care (because of the occurrence of any of the common types of dementia), currently located in the residential social care facility or attending a specialized daily facility (special homes, retirement homes, day care centers, etc.). Specifically, in this experiment, it was the open group of patients (mainly elderly people with mild to moderate dementia) of the gerontopsychiatric department 7A, B at Psychiatric Hospital in Kromeriz.

Functional status of clients ranged from fragility to addiction. According to Kalvach (2011) these two grades of fitness show following specifics:

- frail seniors - showing a low level of the health potential (fitness, endurance and adaptability), as well as a low resistance to common stress, easily and repeatedly functionally decompensate and / or get into precarious situations (eg. falls), requiring active follow-up care, emergency care, security of contacts, help at the level of instrumental activities of daily living, functional assessment with interventions, animation – promoting of the quality of life without infantilization,
- dependent seniors - exhibiting partial or complete loss of self-sufficiency, they manage self-care, require continuous securing of instrumental activities of daily living by family or day care service, active follow-up, animation of the life to stimuli, communication and sense, the movement support outside the apartment.

The disturbance of communication abilities matched the condition of mild to moderately severe dementia – when the communication should be, compared with the norm:

- partially reduced in the domain of participation in communication (greeting)
- more reduced in the domain of verbal communication (understanding words, finding the right words, and significantly in verbal pragmatics - eg. response to open-ended questions, presenting new information, etc..)
- mostly preserved in its verbal component (Rousseaux, 2010).

Among participating individuals the symptoms of ischemic and atrophic-degenerative dementia in various degrees were manifested (compare Kalvach, Zadák, Jirák, 2004; Pidrman, 2007; ICD - 10).

Dramatherapy sessions had fairly regular structure consisting of these content (intervention) components:

- tuning, contact, orientation - designed to determine or influence the initial current mood and

- psychophysical state of clients - mostly through a small cushion as the contact initiation object,
- motivation - aiming to mobilize clients and focus their activity in a meaningful way – here an important role was played by the so-called reminiscence media (visual, sound, music, touch, etc..), such as contemporary music, old photographs, reference objects (eg. a ball handbag evocatory preparing for an important social event), reminiscence boxes with small props, etc..,
 - thematically oriented group or individual activity - aiming to meet the needs of a stimulation, self-realization, communication, participation, etc.. - They were such as movement and dance activities inspired by music from old movies, singing inspired by memories of important life events, reminiscence inspired by props, etc..,
 - Finally - for the conclusion of open communication "channels", tuning of the memories, feedback summarizing authentic impressions of the executed sessions, farewell - this was mostly in the form of group conversation.

For data collection, evaluation, and modification process for rating collaborated a pair of researchers - coterapeuts, and based on shared observations with the rating record (without consultation and comparison scales) this pair prepared documents for the creation of a new measuring instrument. Their work was conducted by the effort to cope with the so far weakest point of the evaluation of the tool, it means reduced possibility of proving the relationship (statistical dependence) between the independent and dependent variables, ie. the fact that it is impossible to control all independent variables (and multiple experiment with double-control group - due to the nature of the investigation – was out of the question). In practice it ment such factors as medication and other curative and palliative agents, spontaneous personality tendency to be passive, the dynamics of the state of probands, etc. Due to the lack of a control group it was also resigned to detect statistical significance of the data collected and verification of possible hypotheses (only statistical difference between items in the input-output diagram was marginally established). Conversely the advantage of that rating was based on its structural simplicity, portability and the possibility of quantifying of qualitative markers. Another positive of the tool was its comparability in the time for a particular client, the possibility to monitor the progress and the possibility of recording of the central tendency of measured identification marks (ie. persistence, decrease or increase).

3. THE RESULTS OF THE EXPERIMENTAL ACTIVITIES IN SEGMENT B

The main result of the solution of the set research problems was the already mentioned proposal of the diagnostic tool - rating scale - meeting the requirements for the solution of the set substantive problem, thus allowing the measurement of the practical effectiveness of expressively-formative process (and formative and expressive-intervention) for selected clients and also some requirements to address a methodological task, ie validation and verification of the rating scale. The finding that the measurement process efficiency can be realized by a rating scales evaluating not only the typical personal-social skills and functional skills but also specific competencies related to the artistic expressiveness, and these procedurally correlate with interventions that respect the needs of clients, represents the current peak of the whole experiment. This rating scales, developed by continuous modifications and evaluations, reached the following final format and content:

1. the position of the client in the group - from an uncooperative to always cooperating
2. client activity - from indifference to leading the activity,
3. spontaneity - from rigidity to maximum spontaneity,
4. concentration - from constant distraction to the stability during the whole intervention
5. emotionality of a client - from no expressing of emotions to uncovering of the emotional nature
6. nonverbality - from zero expression to adequate nonverbality throughout intervention
7. interaction – from the indifference to the conscious interaction during the whole intervention
8. response to the initiating object - from the inertia to the conscious interaction during the intervention
9. response to dramatherapy medium - from touch to word
10. dramatherapy expression level - from moving to the verbalization,
11. entry in the role and its level - from the inability to entry in the role to the interactive characterization.

Complementary results of the research problems were the processing and verification of methodical series of lessons (with expressively-formative theoretical and methodological background), respecting the specific needs of the target group. In their methodology there were incorporated in particular:

- narrative approach to the use (and surveying) of reminiscence - using the free group conversations about life experiences of the participants (comprising of allowing self-expression, cognitive stimulation,

enhancing psychological well-being ...),

- reflecting (balance) approach to the use (and surveying) of reminiscence - using the evaluation of clients' life, encouraging, supplying the meaning of life,
- information access - built on the transmission of information (memories, experiences, knowledge) in the form of personal narrative in the context of historical events,
- orientation in reality - enabling clients to understand raised social (or dramatic) situations and orientate in oneself, relationships, location, time, etc..

All of these concepts have become an integral part of all dramatherapy intervention implemented during the experimental work of the research team.

CONCLUSION

The present text has responded to current research trends raised in relation to changes in the paradigm of the field of special education, part of which has also become a special education gerontagogics. Its main purpose was to describe some of the outputs of the specific university research conducted at the Faculty of Education at Palacky University in Olomouc in 2013-2014. This project was implemented by the research team, consisting mostly of special education teachers - dramaterapeuts, under the guidance of prof. Milan Valenta. The team members were divided into separate segments in which they were solving the problems of the new diagnostic strategies according to specific areas and target groups of clients.

The text was mainly focused on the B segment outputs, dealing with the diagnostics of the efficiency of expressively-formative approaches (drama) for senior citizens dependent on care. It was described in detail to what extent it was managed to design and verify in the field the diagnostic tool useful for: a) determining the effectiveness of expressive-formative interventions for senior citizens dependent on care because of the occurrence of chronic mental illness - especially dementia, b) diagnostics of reminiscence and reality-oriented psychosocial needs of this clientele conducted within dramatherapy intervention, and to what extent it was managed to verify this tool.

REFERENCE LIST

- AGAHİ, N., AHACIC, K., PARKER, M. G. (2006). Continuity of leisure participation from middle age to old age. *The Journals of Gerontology. Series B: Psychological Sciences and Social Sciences*. 2006, 61 (6), p. S340-S346.
- BASTING, AD., KILLICK, J. (2003). *The arts and dementia care: A resource guide*. Brooklyn, NY: The National Centre for Creative Aging.
- COHEN-MANSFIELD, J. (2000). Use of patient characteristic to determine non-pharmacologic interventions for behavioural and psychological symptoms of dementia. *International Psychogeriatrics*, 12, p. 373-380.
- COHEN, G. (2001). *The creative age: awakening human potential in the second half of life*. New York, NY: Quill.
- CSÉFALVAY, Z., BRNOVÁ, J. (2009). *Konverzačná analýza v afaziológii*. Bratislava: MABAG, spol. s r.o.
- GERDNER, L. (2000). Effects of individualized versus classical relaxation music on the frequency of agitation in elderly persons with Alzheimer's disease and related disorders. *International Psychogeriatrics*, 12, p. 49-65.
- Greying Europe – we need to prepare now - 15/05/2012. In: *Ec.europa.eu* [online]. Brussels: Communication department of the European Commission, 2012, 19.07.2012 [cit. 2014-09-10]. Dostupné z: http://ec.europa.eu/news/economy/120515_cs.htm#top.
- HUBBARD, G., COOK, A., TESTER, S., DOWNS, M. (2002). Beyond words: older people with dementia using and interpreting nonverbal behaviour. *Journal of Aging Studies*, 16 (2). p. 155-167.
- KALVACH, Z., ČELEDOVÁ, L., HOLMEROVÁ, I., JIRÁK, R. a kol. (2011). *Křehký pacient a primární péče*. Praha: Grada.
- KALVACH, Z., ZADÁK, Z., JIRÁK, R. a kol. (2004). *Geriatric a gerontologie*. Praha: Grada.
- KILLICK, J., ALAN, K. (1999). The arts in dementia care: tapping a rich resource. *Journal of Dementia Care*,

7, p. 35-38.

KINNEY, J. M., RENTZ, C. A. (2005). Observed well-being among individuals with dementia: Memories in the Making, an art program, versus other structured activity. *American Journal of Alzheimer's Disease and Other Dementias*, 20 (4), p. 220-227.

LIEBERMAN, MA., YALOM, ID., MILES, MB. (1973). *Encounter groups: first facts*. NY: Basic Books.

McFADDEN, S.H., BASTING, A. (2010). Healthy aging persons and their brains: Promoting resilience through creative engagement. *Clinics in Geriatric Medicine*, 26 (1), p. 149-161.

Mezinárodní statistická klasifikace nemocí a přidružených zdravotních problémů: MKN-10 : desátá revize - aktualizovaná druhá verze k 1. 1. 2009. (2008). Praha: Bomton Agency.

MKF. Mezinárodní klasifikace funkčních schopností, disability a zdraví. (2008). Praha: Grada.

MÜLLER, O., LIŠTIAKOVA, I., VALENTA, M., SVOBODA, P. (2014). Evaluation of dramatherapy process with clients of psychiatric hospital. In: *Proceedings of the International multidisciplinary scientific conferences on social sciences and arts. Volume I. Psychology and psychiatry, sociology and healthcare, education.* Sofia: STEF92 Technology Ltd., p. 167-174.

PEPIN, K., HOLLEY, L., MOORE, C., KOSLOSKI, K. (2006). Evaluating the effectiveness of arts activities for elderly patients with Alzheimer's disease. *Activities Directors Quarterly for Alzheimer's and Other Dementia Patients*, 7 (4), p. 31-39.

PHILLIPS, L.J., REID-ARNDT, S.A. PAK, Y. (2010). Effects of creative expression intervention on emotions, communication, and quality of life in persons with dementia. *Nursing Research*, 59 (6), p. 417-425.

PIDRMAN, V. (2007). *Demence*. Praha: Grada.

POLÍNEK, M.D. (2012). Gestalt přístup v teatroterapii. *Arteterapie*, 29, s. 122-125.

RENTZ, C. (2002). Memories in the Making: Outcome-based evaluation of an art program for individuals with dementing illness. *American Journal of Alzheimer's Disease and Other Dementias*, 20, p. 175-181.

ROUSSEAU, M., SÉVE, A., VALLET, M., PASQUIER, F., MACKOWIAK-CORDOLIANI, M.A. (2010). An analysis of communication in conversation in patients with dementia. *Neuropsychologia*, 48 (13), p. 3884-3890.

RUSTED, J., SHEPPARD, L., WALLER, D. (2006). A multi-centre randomized control group trial on the use of art therapy for older people with dementia. *Group Analysis*, 39 (4), p. 517.

SASSER-COEN, J. R. (1993). Qualitative Changes in Creativity in the Second Half of life: A Life-Span Developmental Perspective. *The Journal of Creative Behavior*, 27 (1), p. 18-27.

STRAUSS, A. L., CORBINOVÁ, J. (1999). *Základy kvalitativního výzkumu (Postupy a techniky metody zakotvené teorie)*. Brno – Boskovice: Sdružení podané ruce, Nakladatelství Albert.

STUART-HAMILTON, I. (1999). *Psychologie stárnutí*. Praha: Portál.

SVOBODOVÁ, K. Analýza: Stárnutí populace podle výsledků projekce. In: *Demografie* [online]. Praha: Demografické informační centrum, 2012, 23.03.2012 [cit. 2014-08-24]. Dostupné z: http://www.demografie.info/?cz_detail_clanku&artclID=824&.

VALENTA, M, CZEREOVÁ, L. (2013). Evaluace dramaterapeutického procesu. I. část. *Arteterapie*, 32, s. 84-94.

YALOM, I. D. (2012). *Chvála psychoterapie*. Praha: Portál.