

# Quality of Life improvement through dramatherapy with people with dementia: A developmental approach

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## Abstract

This paper explores Quality of life (QoL) of people with dementia from a developmental viewpoint by presenting research stories from 16 sessions of dramatherapy. An early life developmental paradigm, Embodiment, Projection and Role (EPR), is reversed for old age, in order to honour later lifestages: Role, Projection and Embodiment (RPE) actively promoting expression. The full range of feeling intelligence (a concept defined and clarified in this article) was apparent in the dramatherapy group during a mixed-method project. Improved QoL of the group was demonstrated, compared with a control group undertaking 'usual activities'. Triangulated with the quantitative data, resulting qualitative improvement in QoL in the dramatherapy group was justified.

## Keywords

Embodiment, projection, role, dramatherapy, feeling intelligence, mixed method.

## Introduction

Dramatherapy is a modality which helps people to experience themselves as embodied human beings within the full range of their feeling life. One of the definitions of dramatherapy is my own, under the rubric of the Dramatherapy Centre, Sydney, as follows:

Dramatherapy intentionally uses theatre and drama techniques to encourage the client's creativity and expressive ability. It helps the clients to tell their story, express feelings, set goals, extend inner experience and try on new and more fulfilling roles so far unexplored. (Dramatherapy Centre, 2018)

As dramatherapists, we use interventions to help clients to address real-life relationships and social situations. We encourage them to play with their lifescipt, telling their story in a new way, often with role-play and improvisation. We sometimes assist them to achieve a deeper self-understanding through mask, puppetry and other distancing techniques. The attitudes and life experiences of people who have dementia, although varied, are generally not nearly as universally negative as some literature and media outlets suggest (Hulko, 2009). When dramatherapists apply a sensitive developmental model of practice such as EPR/RPE, participants are given the opportunity to express their identity, as well as their hopes and fears. There has been little written by developmental psychologists about the later human life stages (Jaaniste, 2016). Tornstam's

work suggests that "a shift in meta-perspective from a materialistic and rational view to a more cosmic and transcendent one" (2005, p.41) is brought about through actually experiencing the challenges of old age, as the participants in this project showed they could do with grace. This article advocates for an opportunity for elders with dementia to express themselves through feeling intelligence and physical movement according to their stage in life and in doing so to improve their QoL.

## Embodiment, Projection and Role (EPR)

EPR techniques are extremely useful for the dramatherapist in selecting interventions for all populations. These three different kinds of interventions can be used for assessment purposes in individual or group dramatherapy. It became clear to the author that the order could be reversed with elderly people and this reversal offers the opportunity to find ways for the dramatherapist to use the technique with them so that it fulfils the needs of their life stage (Jennings, 1999, pp.51–53; Jennings & Jaaniste, 2016).

### Embodiment:

The interventions for embodiment issues involve engaging the client in movement and gesture. These non-cognitive exercises can assist clients, who may have had disturbing bodily experiences, to permit touch and gain somatic self-awareness. They are usually not among initial interventions used with

a client, but are introduced gradually over time, as safety and trust-building are paramount for the strengthening of client confidence in their own embodied identity as individuals.

Most of the young child's earliest experiences are expressed physically, through the senses and bodily stimuli. The infant moves and plays along with the world physically, in order to experience it. This helps them to develop identity later on.

#### **Projection:**

Projective interventions increase the development of the client's imagination, providing symbolic objects which can become metaphors for exploring lived experience so far and hopes for change. By exploring concrete objects and toys, or making art to provide a client's own images, relationships to others and to their own story can be established.

Here the child relates more to the outer world, beyond their body. There is a focus on the objects and toys belonging to their environment. During this stage, children explore the world through their own relationships to objects, and stories can be dramatised through toys or dolls. It is often easier for them to speak through their teddy bear or favourite doll, for example: "Teddy wants a drink".

#### **Role:**

Role-play as an intervention is a means of assisting the client to find unexpected connections with the self and others. Taking on a role, no matter how different that role is from the client's perceived everyday self, can bring important realisations about the nature of the self, the over-used role they play in life or a new aspect of role they would like to add to their collection. For example, a high-status role may bring the realisation there is more need for authority in their voice or bearing.

The toddler changes at about three years old when the child identifies themselves as 'I'. Dramatic play becomes a new way of being, and they start to distinguish between everyday and dramatic reality as they play familiar and unfamiliar roles. Role-modelling coming from parents and caregivers is played out. The child borrows the caregiver's clothes and 'en-roles'.

### Role, Projection and Embodiment

The sequence of this paradigm has been reversed by the author for elders because, especially for people with dementia, taking on a role is easier for those whose dementia is at a mild level, as at this stage they know the difference between 'me' and 'not me'. Projection works best for people in a moderate state of dementia, as their thinking is more concrete at this stage, and embodiment is successful when the

person has a severe diagnosis of the disease, since body language can take over when words fail them. The use of the method in this way has nothing to do with infantilisation. This is a destructive treatment of older people, quoted by Kitwood as a "malignant social psychology" (1997, p.45). An awareness of social psychology with integrity is essential when connecting with people who may have one or more experiences such as intense anxiety, feelings of abandonment, betrayal, confusion or boredom, sometimes caused by well-intended but uninformed family or carers (Kitwood, 1997, p.79).

### Feeling intelligence and the later life stages – potential and possibilities

Conscious of her own rich feeling life, Christine Bryden, who received a diagnosis of dementia in 1998, published her story in 2004, reporting self-awareness and positivity. She was encouraged to continue writing by a Japanese producer who had read her work on dementia and communicated to her that he had found a deeper, or newer, 'self' through her description of her experience. "I also read the draft copy of your lecture and realised that your process of trying to know yourself even deepened since you wrote the book" (Bryden, 2005, p.10). In 1998, Bryden (2005) had been told she would have to go into a nursing home by 2000, and would maybe die by 2004. Instead, she went on to write further books in 2012 and 2015, advocating for understanding of the conscious inner life of people with dementia.

On this topic I posit that 'feeling intelligence' – a concept not easy to grasp – as opposed to 'emotional reaction' is present in elders, even when they have a diagnosis of dementia. Feeling and emotion are differentiated here – emotion being a physical experience that has symptoms which are often uncomfortable and even visceral (Jaaniste, 2013b). I argue that the EPR/RPE paradigm is useful to recognise and celebrate the strong feelings and interactive robustness of people with dementia (Jaaniste 2011; 2013a; 2013b; 2015). Such aspects of these people are often neglected in the literature, where symptoms of isolation, loneliness, perseveration and poor memory are often recorded to the exclusion of their more positive attributes.

Old age is the time when people in the later life stages, if they are healthy, can experience a 'second wind'. Doidge (2007) cites the discovery of neural stem cells as "one of the ways the aging brain can rejuvenate" (p.254). Moore (1992) writes of the strengthening of a spiritual presence as people age. If we observe carefully as therapists, we can see this phenomenon for ourselves, even in those with

dementia who are not now as healthy as they were before their diagnosis. The renewal is capable of bringing about inner transformation and requires a capacity for conscious feeling, which is still available to people with dementia. Kitwood believes the “good relationship” between client and therapist can strengthen this renewal (1997, p.98). The feelings evoked by stories told in dramatherapy can be relational in the Kitwoodian sense – they relate to participants’ lives and to those who help perform them. Thomaz, Duran, Busatto, Gillies and Rueckert (2007) found that in 20 subjects with Alzheimer’s disease, recall was more evident when hearing a story with feeling content than in the control group of elders with no dementia.

The following research stories illustrate RPE in practice during 16 sessions of dramatherapy, and highlight feeling intelligence together with self and body awareness of the participants. All names have been changed, and the research has been evaluated by the Western Sydney University Ethics Committee.

## Role

Neil (aged 61) had mild dementia. He had inhaled the scent of oranges in a smelling game, and despite the decline in the olfactory sense that often occurs with dementia, he embodied himself in role at the age of six or seven years old in his mother’s kitchen, remembering the scent of the fruit she was slicing. He selected another participant to play his mother, and described the kitchen scene and his interaction with her. Others took the role of the stove and the window, and 6 year old Neil ran around the workbench island, taunting his en-rolled mother, “You can’t catch me. Get onto my little brother!” as he tweaked imaginary pieces of apple from under her nose while she prepared an apple pie. At first the ‘mum’ scolded him, but ended up giving him more fruit.

It transpired in the reflection that he had been perfectly well aware as a child that the scolding was playful, and his mother wanted him to be around – a powerful affirmation of having been loved by her. He had already paid tribute to his late mother in an earlier session by making an artwork (Figure 1), and used the session as a second opportunity to praise her. Poignantly, the twigs in the image are losing their blossoms – upwards.

The following week, Neil had a clear memory of having improvised the scene with the female participant as his mother. He went on to compliment the author as facilitator of the group, understood metaphorically as representing a ‘good enough mother’ to the group (Winnicott, 2005, p.109). Among other comments, he said that as

a dramatherapist: “you could skip this way, and you could skip that way”. As Winnicott (2005) has suggested: “It is in playing and only in playing that the individual child or adult is able to be creative and use the whole personality, and it is only in being creative that the individual discovers the self” (Winnicott, 2005, p.73). Neil’s comments seem to justify Kitwood’s relational therapy and emotional memory, as well as highlighting the importance of play at any age, and especially for elderly people with dementia.

## Projection

In Session 12 of the 16 meetings, the group theme was forgetfulness, and two participants, Paul (aged 87) and Leanne (aged 70), both with moderate dementia, had already given their opinion on the subject.

Paul: *I discovered a lot of things about memory, or lack of memory.*

Dramatherapist: *What have you discovered?*

Paul: *Well, I forget things left, right and centre. Forgotten [broad smile].*

Leanne: *Gone, gone, gone!*

Following the discussion, the group became involved in a projective game after warm-ups where sticks of anger, stones of fear, petals and leaves of grief, and bowls of emptiness were available for them to pick up if they wished, with a view to transforming them (Macy & Young Brown, 1998, p.101). These objects were used in turn to transform some of the feelings that emanate from unwanted forgetfulness, and it was explained to participants that they could take items from these groups of objects with the suggested symbolism. They worked in pairs at first, talking among themselves. Finally, participants reflected on this process as a whole group.

Leanne had said her stone was heavy; however, outside the play space she found that her stone of fear had another quality, as she spoke of “that magnificent chunk of splendour”.

Leanne: *It’s beautiful, it’s enduring... It’s intriguing, because it’s got a brown stripe around it, and when you come to the top, it’s beautifully sparkled all over. So there’s something hidden somewhere.*

Paul: *The sparkles wouldn’t be there if it wasn’t for that [indicating the dull brown foundation of the rock].*

Leanne (dreamily): *It’s beautiful... we need to see beauty, because if we don’t see it, something dies in us... you’ve got to search*

for the good stuff, and it's always a joy to see it... incredible, isn't it, it grows from that stuff [pointing to the brown stripe] to that stuff [pointing out the sparkling crystal].

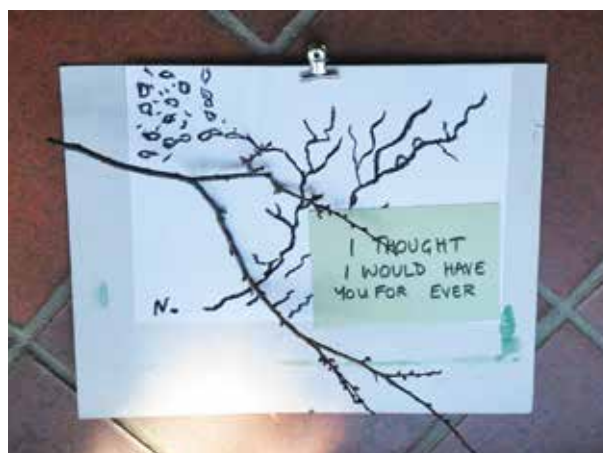
Paul (having picked up a chopstick): *One of my sons married a Japanese girl, and she brought new thinking, forms of thinking, and so did the fathers and uncles and so forth... the Japanese connections have been very strong, and very, very much appreciated by me [broad smile].*

In the reflection time after this exercise, there was commentary about growing up with fear, and not instilling it in one's children by one staff member, and seeing a mother robbed of memory by Alzheimer's by another. There was "a feeling of humanity" for Paul, "certain touches and tastes of the music" for Ben and "I think I feel at home here... which means that I wasn't before" from Neil. Some part of the transformation of the sticks, stones, petals and bowls had been a valuable segue to expression of feeling intelligence.

## Embodiment

The exploration of body language within the drama space over 16 sessions changed somewhat for all participants, particularly for David (aged 74) and Ben (aged 73). The Sutton-Smith Lazier Scale of Dramatic Involvement (1981) had been adapted by Jones (1996) and was re-adapted by the author for clarity of measurement (Jaaniste, 2013a). An analysis was made of the use of space, movement and body language of these two participants, showing the scoring system as percentages of full involvement. Examples of their changed physical and expressive movement and gesture are described below.

In Session 2, the theme was 'Weather', and most participants improvised walking in rain with an umbrella, or shivering in the snow when asked to do so. However, neither Ben nor David improvised or interacted with others when instructions were given about weather changes. Both stood still, looking awkward while others improvised the building of a snowman, despite the dramatherapist's and others' endeavours to encourage them to join in. Neither showed any facial expression, even though they were both able to engage in conversation. While others were adjusting their body language to suit the activity, Ben's average score stood at 14 percent for embodiment attributes and David's was higher, at 46 percent. However, in later sessions, the eleventh for David and the sixteenth for Ben, their averages stood at 64 and 72 percent respectively.



From top:

Figure 1. Neil, *I thought I would have you for ever*, mixed-media, 210 x 297mm.

Figure 2. Joanna Jaaniste, projective objects used during the fieldwork.

Figure 3. Body warm-up.

In David's case, he showed more bodily and facial expression during games and exercises as the sessions progressed. In a following session he was involved with an improvised bullfight, using embodiment to express himself. He gave himself the opportunity to dress and move around as a gay man, when he normally presented as heterosexual. The topic was 'Dealing with Difficult People' and he was involved in two improvisations: in the first he

needed to relate to a deceitful worker laying tiles, and the second related to himself as a rebellious lad at school. In both cases he showed altered affect and movement appropriate for the roles.

Ben's involvement gradually became more active as the programme unfolded. Shy of movement at first, he experimented with dressing up and joined with others in a group-devised dance. As his memory and word retention deteriorated, his collaborative body movement increased. In Session 16 Ben enjoyed swirling around with two contrasting silk cloths he had chosen. He later took the role of a doctor to whom participants decided they would give prescriptions. He became even more social at the end, picking up the cloths again at the close of the session and making his own decision about performing the closing ritual and involving others in it.

Merleau-Ponty argues that intentionality "does not come into being through the transparency of any (mental) consciousness, but takes for granted all the latent knowledge of itself that (our) body possesses" (1962, p.233). This latent knowledge is a field of possible actions and movements the body 'knows' how to perform, with the theorist giving the example of a scratch that needs to be itched, arguing that the scratcher bypasses the cognitive conscious process in the action, relying on body memory to find the appropriate location of the scratch. Steiner calls this wisdom "the fingerprint on the etheric" (1975, p.58). An understanding of the importance of this body wisdom gives the creative arts therapist a much better awareness of the significance of embodied practices for people with dementia (Coaten, 2011).

Kontos and Martin (2013) point out that "lived experiences of the body in which social processes associated with corporeality are highlighted" (p.289) are an essential part of embodiment, and have not been given enough attention in dementia care. Lived experience in corporeality has started to "enrich the discourse on selfhood and memory in dementia" (p.289). I would posit that this discourse needs expanding, with particular reference to people such as Ben, whose dementia was deteriorating severely. Kontos (2005) claims that an embodied and unintelligible conversation between two elders with dementia that she witnessed illustrates Merleau-Ponty's argument that "communication dwells in corporeality or, more specifically, in the body's capacity to gesture" (1962, p.7). She relates this statement to their performed intersubjectivity and display of aspects of self-identity through their bodily posture and the repetition of syllables, volume, pitch, and intonation contours. It seems

to me that embodied action also encourages social behaviour and collaboration, as can be seen in Ben's initiatives and socialisation above, also displaying intelligence of feeling.

## Discussion

Although a small sample size limited the ability to match two groups on all related factors (baseline QoL, age, gender, education, location), there was an improvement in the QoL-AD scale (Logsdon, Gibbons, McCurry, & Teri, 1999) in the dramatherapy group as opposed to the 'usual activity' group. It is important to note that the lively feeling that emerged through phenomenological investigation supports the finding of improved QoL-AD scores in the dramatherapy group. The EPR/RPE paradigms reveal the potential, in people with mild and moderate dementia, for an often-invisible capacity to celebrate their present state of being with compassion for themselves and others. The often non-verbal communication of people whose dementia is increasing is also revealed. Neil was able to show his feelings of love for his mother and her loss through role-play and artwork, and Leanne and Paul felt the power of transformed beauty in sticks and stones. Ben's and David's analysed results show lived experience justifying a need for families and care staff to reframe and deconstruct the linking of cognition and selfhood (Kontos, 2005; Kontos & Martin, 2013).

## Conclusion

It is interesting, in the light of the very positive relationships that often occur between old people and children, that elderly people – and those with dementia in particular – seem to live their lives in reverse order of this developmental paradigm. The infant arrives amongst us from a mysterious place, and the elderly adult is about to disappear to an equally mysterious one (Jaanimäe, 2011). In conversation with my colleague Sheridan Linnell while writing this article, it became obvious that, whereas the child is moving outwards from embodiment via projection into the integration of a social role, the elderly participants are moving in an opposite direction in life generally (S. Linnell, personal communication, April 7, 2018). They move from an enhanced experience of themselves in the social role, via projection, to the re-embodiment of the sense of self as feeling, creative beings, accounting for the quality of feeling intelligence that was witnessed in the process of the dramatherapy sessions.

Although slowly losing cognitive abilities, the participants in the study showed a capacity to celebrate their present state of being with humour, and compassion for themselves and others. Their healthy attitude to grieving loss and other challenges of ageing has much to teach the rest of us. They showed feeling intelligence and agency even in the severest forms of dementia. It is essential to introduce programmes in day centres and residential facilities that assist people to express their feelings in satisfying and creative ways, and dramatherapy helps people to do this. It is important to state, however, that participants must be held in the therapeutic process by a trained therapist who is able to contain any material from the participants, as often their lived experiences can be from childhood. The results of this study indicate strongly that by applying a developmental paradigm in group-work, which suits their life stage, such people can express their joys and woes with intelligence, through the benefits of group dramatherapy.

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