

Example of argumentative essay on the benefits of art therapy for people with alz...

[Health & Medicine](#), [Disease](#)



Meet me at The Museum of Modern Art in New York (MoMA) is a monthly museum program for people with Alzheimer's disease and their caregivers (Chancellor et al., 2014). In this program, curators from the museum lead discussions about a handful of artworks from the museum's collections. This encourages people with Alzheimer's disease and their caregivers to interact with each other and share their opinions with art experts about the artwork in the galleries. Rosenberg (2009) stated that the MoMA program improved the mood of people with Alzheimer's disease during and after the visit, decreased social isolation and enhanced their self-esteem. According to Rosenberg (2009), engagement in art discussions offer people with Alzheimer's disease an opportunity to participate in a meaningful activity and exchange ideas without relying on short-term memory, access to personal experiences, or long term memories; and it allows them to make a connection between individual experience and the world at large.

In a UK gallery-based intervention people with Alzheimer's attended gallery sessions over three weeks to discuss some paintings in the gallery with an art educator, and then followed these discussions with art making sessions where a person with Alzheimer's could paint and engage with the art materials as he or she desired. Eekelaar et al. (2012) suggested that gallery based art viewing and art making interventions reduced feelings of isolation in people with Alzheimer's disease, improved their mood, and increased their confidence. In summary, people with Alzheimer's disease who engage in art-based activities show improvement in psychological well-being and quality of life. Chancellor et al. (2014) suggested three different explanations for why art therapy programs have a positive impact on people with Alzheimer's

disease. First, art therapy relies on preserved skills and it does not attempt to correct disabilities. People with Alzheimer's disease can appreciate and produce visual art until late in the disease. They can share their thoughts, ideas, and feeling about the artworks with others even if they have a deficit in their memory. Also, art production relies on procedural memories which involve skill based knowledge, and these memories are preserved in people with Alzheimer's disease. Participants in an art therapy programs are able to use colors and include a high degree of details in their artwork (Stewart, 2004). Second, art helps people with Alzheimer's to express and organize their emotions in a non-verbal way. People with AD are often excited and relieved at the chance to say something without words, because verbal abilities become difficult and deteriorate as the disease progresses. Third, creating visual art can induce a state of 'flow'. Flow refers to a state of concentration, satisfaction, and engagement that is achieved by setting a goal that does not exceed one's abilities. When a person is in a state of flow they tend to feel strong, in control, and alert. Art making can induce flow when the activity is challenging, goal oriented, and followed by immediate feedback. Chancellor et al. (2014) state that under the proper conditions, people with Alzheimer's disease can experience flow when creating art.

Benefits of art therapy: People who are suffering from AD gradually lose the ability to express themselves with words because of brain deterioration, memory loss, and personality changes. This is one reason that art therapy can be so helpful, because it helps patients to express their inner- thoughts and emotions when they can no longer do so with words (Ehresman, 2014). People with AD do not lose their basic physical senses such as sight and

touch; therefore, they are able to create art and enjoy the experience of artistic production.

Art therapists say that creating art is beneficial for people with AD because it allows them a chance for sensory stimulation, positive social interaction, and a sense of empowerment through creativity (Greene-Stewart, 2004). People with AD do not have control over many aspects of their lives, and so artistic creation is empowering because it allows them to make their own choices and decisions. Expression through art can also lead to new perspectives and help individuals become resilient to the changing circumstances in their lives (Hannerman, 2006). Studies show that even people in advanced stages of AD can participate in art therapy and focus for relatively long periods of time on artwork. This shows that art therapy can be adapted to any individual's needs regardless of levels of confusion and cognitive skills, and this is one reason it is so beneficial for people with AD (Ehresman, 2014).

Art therapy can have a positive effect on difficult emotions by helping individuals cope with feelings that usually come after diagnosis with a disease (Hannerman, 2006). For example, it can help alleviate the frustration and anger people with AD often feel. People with AD may also feel scared and depressed because they are not able to talk about their difficult memories or thoughts. Art therapy can be a safe place where patients can reveal their difficult memories by expressing them through artwork (Ehresman, 2014). Research shows that the process of creating art can be a soothing experience for people with dementia, and it promotes positive emotional states and alleviates agitation. Also, the end product can be useful for self-reflection even if the person does not remember creating it.

Ehresman (2014) suggested having people with AD sign their artwork, and then later they can feel pride displaying it to others. Whether or not people with AD are happy about their artwork later, research shows that art therapy promotes positive reminiscing that influences their life outside of therapy sessions. How art therapy slow the progression of the disease and improve quality of life: Art therapy programs for people with Alzheimer's disease can be crucial to slowing the progression of the disease. Engaging in artwork activities can enhance the brain plasticity of people with Alzheimer's disease (Ehresman, 2014). Brain plasticity refers to the ability of the brain to change physically, functionally, and chemically as a result of life experience.

Alzheimer's disease affects people by deteriorating parts of the brain and decreasing the activity of neural connections in the brain, and this is what causes deterioration of memory and cognitive skills. Research shows that creative processes may help change neural structures; and, therefore, brain functioning (Ehresman, 2014). When this concept is applied to people with Alzheimer's disease, studies prove that engaging in artwork activities increases the interneuron connections of people with AD and as a result, slows the progression of the disease. Brain structure is improved through reinforcing synaptic connections, and this can stop further mental deterioration. This is an important development because it shows that art programs can greatly improve behavior and quality of life for people with AD.

Along with the evidence showing that art therapy improves quality of life on a biological level, there is evidence showing that it helps people with AD on an emotional and social level. One longitudinal study assessed how art

therapy affected people with AD on levels of cognition, depression, behavior, and sociability (Rusted et al., 2006). The results showed that there were no changes in cognitive ability or short-term memory for those who received art therapy, but the control group showed decreased performance in these areas; and since dementia is a naturally progressive disease these results are very significant. Also, the art therapy group greatly improved in calmness, and sociability. This study shows evidence in the improved quality of life for those with AD (Rusted et al., 2006).

Furthermore, although the tests in the previous study did not show statistical significance for cognitive changes, the staff working with those who had art therapy said that they were better at recognizing group members and communicating with caregivers (Rusted et al., 2006). Researchers concluded that more sensitive tests should be developed that can detect more subtle improvements. Studies like this prove that art therapy has a positive effect on overall quality of life for people with AD (Ehresman, 2014). Discussion and limitations: Although some studies suggested that art therapy has the potential benefit to slow the progression of the disease and improve quality of life, there are many limitations to these studies. Many of them used small sample sizes, some did not use control groups, and some did not specify the type of dementia that they examined. Also many studies did not specify the stage of the disease such as if it was early stage or more advanced dementia. Also, many of the studies did not do a follow up study to examine if the effects of art therapy were maintained after leaving the sessions. The longitudinal study discussed previously was one that did track effects over time, however, the measures of the studies were found wanting in

sensitivity.

One of the main limitations of the studies of art therapy and AD is that they emphasize qualitative over quantitative evidence. This means the studies are based on observations and this can lead to results that are biased. One of the main observer biases that can occur are expectancy effects. This happens when the observer has an expectation as to what they will observe, and they are more likely to report and see what they expect to happen. The risk of observer bias can influence the results of studies that do not use quantitative tests to measure results. Also, different people may evaluate the same things differently. For example, the art therapist and caregivers of people with Alzheimer's disease may judge improvements in behavior and well-being differently. Measuring the quality of life of people with Alzheimer's disease is challenging because it is a multidimensional construct that encompasses daily activities, health and well-being, cognitive functioning, social relationships, and self-concept. More research is needed to discover new and more effective ways of measuring these different aspects, and to collaborate the effects of art therapy toward overall functioning. Also, there is very limited research to explain why art therapy is effective for Alzheimer's patients. Although Chancellor et al. (2014) provided three explanations to why art therapy helps patients with dementia, these explanations are more theories of cause and effect and do not determine the underlying reasons why art therapy promotes the positive changes seen in people with Alzheimer's disease. Future research is still needed to assess the relationship between art therapy and the brain. Are there specific regions in the brain that are provoked when people with Alzheimer's disease view or

make artwork? Also, more research is needed examining how well art therapy stimulates cognition and memory. There is no cure for Alzheimer's disease and the efficacy of drug treatments are very limited and include negative side effects, and so researchers should focus more on studying different types of non-pharmacological interventions. Since the non-pharmacological interventions show evidence of slowing and reversing the effects of AD, more research should be done to explore these interventions and discover how they affect the brain of people with Alzheimer's disease. More examples of non-pharmacological interventions are animal -assisted therapy, aromatherapy, light therapy, music therapy and dance therapy. Many researchers only focus on people in the early or middle stages of AD and they do not examine people with more severe cases of the disease. Many people with severe dementia take pharmacological drugs such as atypical antipsychotics, typical antipsychotics, and Cholinesterase Inhibitors. However, all atypical antipsychotics are associated with increased risk of stroke, and typical antipsychotics are associated with increased rate of cognitive decline (Ballard & Corbett, 2010). Also, there are only short-term benefits of using atypical antipsychotics in the treatment of neuropsychiatric symptoms in people with Alzheimer's disease and there is limited evidence of the long term benefit of using atypical antipsychotics (Ballard & Corbett, 2010). As a result researchers should do more research on people with severe Alzheimer's disease and test if non-pharmacological treatment could be useful for them. Applying art therapy alone for people with Alzheimer's disease might not be enough for effective treatment. Combining studies of two types of non-pharmacological intervention would be interesting, such as

art therapy and dance therapy or art therapy and music therapy. Would we get a different and more collaborative result or the same as these two interventions alone? Many research studies do not specify what type of art or painting caused the positive responses in people with Alzheimer's. I found only one study that provided the styles of painting they examined. In the UK gallery based intervention study, the researchers provided the different types of painting that were taught and used for people with Alzheimer's disease. More research is needed in this area because there may be specific styles of painting that lead to positive results or that are accessible for those with Alzheimer's disease. Conclusion: Dementia affects individuals as they age and cause many impairments including memory loss, emotional distress, and social dysfunction. Alzheimer's disease is one of the most severe forms of dementia, and there is no known cause for the disease. Alzheimer's disease deteriorates memory and functioning in every aspect of life, and there are many different interventions for people with AD. Pharmacological interventions tend to temporarily slow developing symptoms for people with mild AD, but there are many psychological interventions that can help reduce or stop the debilitating symptoms of AD. One of these interventions is art therapy which has been shown to slow the progression of AD, improve some symptoms, and benefit overall quality of life.

Some relevant and effective art therapies for Alzheimer's disease allow people with AD and their caregivers to discuss and appreciate art together with experts, and improve self-esteem and social connections. Creating artwork is very beneficial for people with AD because it allows them to express, organize, and cope with their emotions. Art therapy offers people

with AD a satisfying skill that they are capable of performing, and increases self-esteem by giving them a form of control in their life when so much control has been taken away. Also, for those in the advanced stages of AD painting may be one of the only forms of communication available. Studies show that art therapy for people with AD increases mood and psychological health. Art therapy can also be adapted for different levels of severity of Alzheimer's disease which makes it very accessible for interventions. As well as psychological well-being, art therapy improves biological properties for people with AD. Artistic creativity increases neural activity and plasticity in the brain which allows improvement in functioning. Since no one knows what causes AD and the brain deterioration, it is important to find ways of slowing or reversing this process. Studies have shown that art therapy increases sociability, emotional well-being, and improves brain functioning. There is still more research that needs to be done to examine which types of art therapies are useful, and what specific aspects of art therapy are helping. More accurate measures also need to be created to eliminate biases in results of studies. However, the current findings are encouraging and show that art therapy improves the quality of life for people with AD, and can slow the progression of the disease.

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