

Searching for Personhood: Unlocking the Self through Expressive Arts.



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Disclosures



- Angel Duncan is not serving as a paid consultant for any pharmaceutical or medical device company

Overview



- Overview of art therapy
- Overview of depression vs. sadness
- Where we are today: level of functioning and statistics
- Problems and key concerns
- Common misdiagnosis
- Assessing and diagnosing
- Research
- Treatments: Case studies in managing depression
- Final thoughts and solutions
- Questions

Overview of Art Therapy



- Nonverbal form of communication
- Diagnostic tool
- Known to increase Self-Esteem
- Known to increase Self-Awareness
- Safe Environment
- Discover / Express Emotions & Feelings
- Stress Reduction
- No Judgments

Art therapy is a mental health profession that uses the creative process of art making to improve and enhance the physical, mental and emotional well-being of individuals of all ages. It is based on the belief that the creative process involved in artistic self-expression helps people to resolve conflicts and problems, develop interpersonal skills, manage behavior, reduce stress, increase self-esteem and self-awareness, and achieve insight.

American Art Therapy Association

Depression vs. Sadness



- Sadness is:
- Depression is:
- *Depression can...*

Geriatric Depression



- Undetected & Untreated
- Adult vs. Older Adult Depression:
- Misdiagnosis; Education (*too many healthcare professionals and families do not know what to do in geriatric care*). A general lack of healthcare professionals working with seniors
- Communication and inferiority balances
- Costs of healthcare

Assessing: Observation



- Depressed seniors are more likely to demonstrate problems with attention, motivation and concentration, as well as slower speed of information processing.
- Common signs of depression observed in care settings may include: weight loss, headaches, fatigue, gastrointestinal symptoms, pain and multiple vague somatic complaints.
- Most are reluctant to talk about depression due to the stigma of mental illness, or the fear of having dementia. Depression tends to get underreported, so *observation* becomes key in assessing.

What is the Outlook Today?



Statistics: Approximately 18.8 million American adults

- Recent NIMH studies show that 13 to 27 percent of older adults have subclinical depressions that do not meet the diagnostic criteria for major depression but are associated with increased risk of major depression, physical disability, medical illness, and high use of health services.
- Suicide is more common among the elderly than in any other age group. In studies of older adults who committed suicide, nearly all had major depression, typically a first episode, though very few had a substance abuse disorder.

Problems and Key Concerns

Universal problems and key concerns in this country are:

- Care and Support
- Referrals and Resources
- Anti-aging notions
- Media/Social Media
- Disease Stigmas
- Education
- Funding
- Compounding Losses
- Depression/Anxiety/ETOH
- Isolation and Ostracized
- Communication

Common Misdiagnosis



- Most common misdiagnosis seen in clinical and hospital settings are:

Assessing



- Some seniors think, “If I can get through this (rehab), then I can get home.” Their families may also believe that. Healthcare specialists have to really probe and devote more time in assessing. Mental health is usually not a big part of the visit, particularly when there are already existing medical conditions that require follow-up.
- A close look at a senior's existing medication regimen can also provide important clues. An example case study: a doctor found an elderly woman's depression cleared rapidly once she was taken off hypertension agents known to precipitate depression.

Assessing Cont'



- Be an ally. Build- up trust for open and honest communication between thoughts and emotions.
- Talk *with* each other
- Listen
- Validate feelings and offer your help and reassurance
- Look for key words, i.e.:

Treatment Modalities



- Art therapy / expressive therapies
- Personhood
- Drug vs non-drug interventions
- Effective coping and management

Combining Science and Art: Fostering a Care Environment



- Art compliments science in a variety of ways, and art therapy can be used by:
 - Serving as a diagnostic tool
 - Determining progress and treatment through interventions
 - Determining discharge readiness and planning
 - Lowering cost in medical visits, hospitalization and drug usage
 - Allowing for healthy leisure activities and finding new passions
 - Working in conjunction with necessary drug treatment
 - ✦ Embarking on empowerment and lessening stigma and shame
 - ✦ Discovering and living in normalcy



Research



Dr. Gene Cohen

- Journal of Aging, Humanities and the Arts
- Official Journal of the Gerontological society of America
- 2 year study, people 65 and older

Research Cont'



- Stanford University, Behavioral & Sciences Department (Krisztal, Dupart & Morley, 2003)
- Apparent Affect Rating Scale (AARS)
- Results indicated:
 - ✓ Awareness/Alertness
 - ✓ Socialization/Cohesion
 - ✓ Brighter Affect (smiling, laughing)
 - ✓ Stimulation (visual/mental; using left & right sides of brain)

Research Cont'



- Kinney/Rentz Study, 2005
- Memories in the Making: American Journal of Alzheimer's Disease
- Results indicated:
 - More interest
 - Enhanced sense of well-being
 - Sustained attention
 - Increase pleasure
 - Increased Self esteem and normalcy during participation

Research Cont'



- Meet Me at MoMA (NYU museum study) NYU
- Making Art Accessible to People with Dementia
- Mary Mittelman, Dr.P.H. & Cynthia Epstein, LCSW

Results indicated:

- Intellectual Stimulation
- Shared Experiences
- Social Interaction
- Accepting Environment
- Emotional Carryover
- Program Extension (plan to return)
- Brighter Affect/Mood; Improved Self Esteem

Treatment: Case Studies



- William Utermohlen
- Viewing artwork and case studies from:
 - residential
 - assisted living
 - dementia specific units
 - psychiatric and rehab hospitals
 - adult day centers
 - support groups for those with memory loss



Artwork

Alzheimer's Disease and MCI Artwork/Case Studies

Key Solutions



- Ways to provide and ensure quality of care and services
- What doctors are now saying about Alzheimer's disease: A new focus in care and support

New Concepts in Alzheimer's Disease

What doctors are saying:

Dr. Whitehead, MD

Dr. Cohen, MD

Dr. Potts, MD (personhood)

Alzheimer's Disease:

Old Story:

New Story:

Standard approach:

“Aging is a project, a work of existential art, a story that one continues to write until one can write it no more- it does not end when one is diagnosed with Alzheimer’s by a doctor.” ~ Dr. Whitehead

Addressing Key Concerns: Exploring Solutions



- Access to appropriate care and support
- Access to a variety of referrals and resources from medicine to programs and local events
- Providing education and bringing awareness to everyone: *seniors, families, healthcare professionals, non-profits, corporations, government agencies, and the general public*

Addressing Key Concerns: Exploring Solutions



Q: How do we keep the doors open?

- Providing better outlets for self expression

Paving the way for a better society and enhancing quality of life



- Outreach: *get creative in your approaches*
- Provide education programs and special event programs: *Who do you know? Where can you go? Who can you approach?*
- Network: *outside of the usual meetings filled with the same people and places*
- Communicate and Collaborate: *with the same people and places and establishing new people and places*

THANK YOU



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Disclosures



- Dr. Potts is not serving as a paid consultant for any pharmaceutical or medical device company
- Dr. Potts has formed a not-for-profit foundation to benefit the cognitively-impaired, Cognitive Dynamics
- Dr. Potts has formed a Dementia caregiver education company, Dementia Dynamics

Objectives



- To share the life story of Lester E. Potts, Jr., Alzheimer's patient and artist, and show how the expressive arts and person-centered dementia care helped this man and his family
- To define and describe expressive arts therapies and their benefits, including the promotion of emotional wellbeing
- To discuss the phenomenon of artistic expression in dementia
- To define and discuss person-centered dementia care and its benefits
- To discuss how the expressive arts potentially facilitate the telling of one's life story and bolster the sense of self
- To foster an attitude of hope in dementia and eldercare

Case Study: Lester Potts

Daniel C. Potts, MD



- Lester's life story
- Lester's initial manifestations of Alzheimer's disease
- Symptoms and signs of depression that accompanied Alzheimer's, with resultant loss of function and perceived self-worth

What are “expressive arts therapies”?



- Music therapy
- Art therapy
- Dance/movement therapy
- Drama therapy
- Poetry and bibliotherapy
- Storytelling and reminiscence

Benefits of expressive arts therapies:



- Person-centered, validating care is the standard for the cognitively-impaired
- Such care helps to preserve the sense of self
- Preservation of the self requires that an individual be cognizant of his/her life story, and be able to relate it in some way, to some extent
- ***Expressive arts therapies can help people maintain awareness of their life stories, and can aid in life story expression***

Supporting Personhood



- Humans need to create, to be productive, to be independent, to be loved, and to be in community with others who understand them
(Relational identity)
- They need to be able to share their life stories and experience the life stories of others
- A kind word spoken, a gentle touch, smiling eye contact, the sharing of a story or song, and communicating in ways that affirm people in their present condition all validate personhood and foster its expression.
When personhood is strengthened, dementia's hold is weakened

The Mission

Cognitive Dynamics Foundation

- Mission: to improve the quality of life of patients with cognitive disorders (such as Alzheimer's disease) and their care givers through education, research, and support of innovative care models which promote human dignity, especially those employing the expressive arts

www.cognitivedynamics.org

Dementia Dynamics, L.L.C.

- Mission: to educate dementia care givers, both volunteers and professionals, in proactive, compassionate ways of caring for dementia patients

www.dementiadynamics.com



Advocacy in Action: The “Bringing Art to Life” Initiative

FIND OUT MORE DETAILS!

Info Session –

Friday, October 22 at 2:00pm

173 Nott Hall

Can't attend but interested in more
information? email
megmccrummen@gmail.com

UH Art to Life!

a Spring 2011 service learning course

Are you interested in ...

- storytelling? OR
- hands-on service in Alabama's Black Belt? OR
- art, drama or music therapy? OR
- video production? OR
- cutting-edge Alzheimer's research?



Students in Art to Life! will tangibly improve the quality of life of dementia patients and their caregivers in Marion, Alabama. Working with an art therapist, participants will piece together the life story of the patient through interviews, conversations, family albums, etc. The end product will be a DVD or memory book that will continue the patient's therapy for years to come – and be an invaluable gift to the caregivers.

Cognitive Connections

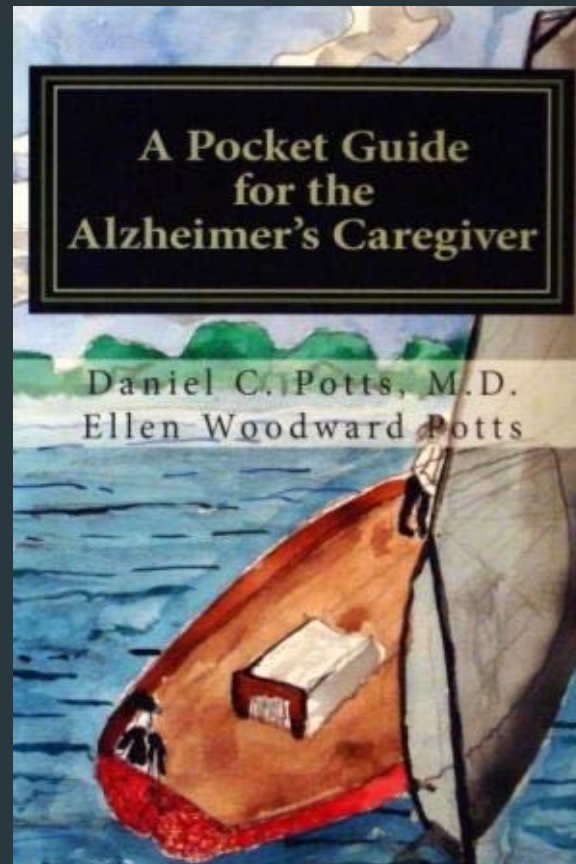
A dignity-promoting arts training initiative for caregivers of those with Alzheimer's disease and other forms of cognitive impairment

Executive Director:

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A Pocket Guide for the Alzheimer's Caregiver



The “Art” of Searching for Personhood



- Validating the person in his/her present condition bolsters self-worth
- Looking past affliction to abilities, focusing on what remains, not what is lost upbuilds the sense of self
- When personhood is strengthened, depression's hold is weakened

The “Art” of Searching for Personhood

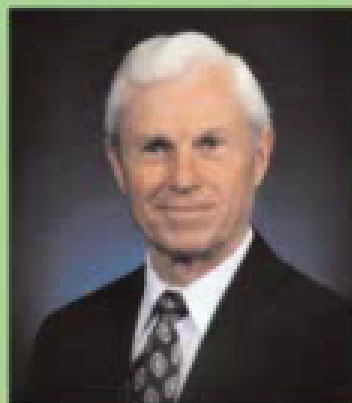


- Learning one’s life story, at least in part, is an essential element of person-centered care
- Caring enough to learn the story bolsters self-worth
- Art therapy (and other expressive arts therapies) are useful components of person-centered care models

The “Art” of Searching for Personhood



- In person's with Alzheimer's disease, the emotional centers of the brain remain relatively unaffected
- The emotional “self” remains (?)
- The expressive arts therapies can tap into this emotional self, enabling freedom of expression and the opportunity to work through affective conflicts



About the Author

Daniel C. Potts, M.D. is a practicing Neurologist in Tuscaloosa, Alabama, member of the faculty of the Capstone College of Medicine, elder at First Presbyterian Church, former member of the board of Carling Congregations, the proud husband of a lovely wife and the father of two beautiful daughters. He is co-author of *Neurology for the Boards*, the best-selling Neurology review book published by Lippincott Williams and Wilkins, and has had poetry featured in *Neurology*, *The Presbyterian Voice*, and the online journal *EmergingPoets.com*.

The Broken Jar



Daniel C. Potts

Questions?



Thank You

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