



“On Stage In the Golden Age: Theatre for Healthy Ageing”

PROJECT NUMBER: 2023 - 1 - R001 - KA220 - ADU - 000160973



TRANSNATIONAL REPORT

The Role of Theatre in Enhancing Health and Psychosocial Well-being of Older People

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“We must all do theatre, to find out who we are and discover who we could become.”

— **Augusto Boal**

“I regard the theatre as the greatest of all art forms, the most immediate way in which a human being can share with another the sense of what it is to be a human being.”

— **Thornton Wilde**

The dramatist should not only offer pleasure but should, besides that, be a teacher of morality and a political adviser.

— **Aristophanes**



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Foreword

The global elderly population is continuously increasing, with people now living longer than previous generations. It is estimated that the number of individuals aged 65 years and over worldwide is projected to more than double, rising from 761 million in 2021 to 1.6 billion in 2050. However, as individuals age, they may become more vulnerable to various health issues, including pandemics, chronic illnesses, mental health disorders, Alzheimer's disease, or other forms of dementia. Rates of dementia and mild cognitive impairment notably increase with age across all countries. In response, the World Health Organization (WHO, 2023) and the European Commission have strongly advocated for active and healthy ageing, proposing arts-based interventions that link the benefits of creativity to both physical and mental health. Particularly, WHO (2019) has provided strong evidence that the arts help promote good health, prevent various mental and physical health issues, and treat or manage acute and chronic conditions that emerge during people's lives.

Theatre, as an art form, has been shown to benefit older adults, regardless of their background or health status. It is one of the oldest and most significant performance arts, encouraging active participation and interaction. This has the potential to improve health and well-being while also fostering education and social change. Indeed, theatre's therapeutic value as a health-promoting component dates back to ancient times, with roots in healing ceremonies and theatrical performances found across different cultures. Similarly, its educational and pedagogical applications date back to antiquity, specifically to ancient Greece, where it was explicitly recognized as a literary genre (Papadopoulos, 2010).

Nowadays, the world of acting, theatre, and drama extends far beyond professional performers. Thanks to avant-garde and progressive theatrical movements of the 20th century, older adults of all ages, backgrounds, and



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abilities can now engage in theatrical praxis as a creative endeavour. As will be seen later in this report, older adults are frequently motivated to participate in creative and theatrical activities for a variety of reasons, such as improving their health, furthering their education, seeking recreation, and using the activities for therapy and healing.



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The Project “On Stage in the Golden Age: Theatre for Healthy Ageing” (AGE-THEA)

The "On Stage in the Golden Age: Theatre for Healthy Ageing" (AGE-THEA) is a two-year project that is co-funded by the European Commission under the framework of the ERASMUS+ Programme (KA220-ADU – Cooperation Partnerships in Adult Education). AGE-THEA is implemented by six (6) European organisations, including one university institution: SRA (Romania), LCM (Italy), EDRA (Greece), RC (Portugal), Habilitas (Romania), and UNIWA (Greece). The project aims to raise awareness about the role and impacts of theatre on the prevention and treatment of health and psychosocial well-being of elderly people who are living with or without Alzheimer or other forms of dementia. Synergies between different fields (social, cultural, and health) will result in the development of a high-quality training program and methodology for operators. Through theatre interventions, the project's activities aim to promote active ageing, the elderly's psychosocial well-being, and their social inclusion.

The activities that are going to be implemented in this project are structured under 5 work packages (WP):

- WP1: Project Management
- WP2: Analysis and Assessment
- WP3: Joint Training programme for Social, Cultural, and Health Sectors
- WP4: Participatory Theatre Activities for Seniors
- WP5: Awareness-Raising and Dissemination

The project results and other outcomes expected from this project are:

- Analysis report on the role of the theatre in enhancing the psychosocial health and wellbeing of elderly people
- Joint Training Programme for enhancing the psychosocial wellbeing of



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elderly people

- Guide to the development of the Participatory Theatre Activities for Seniors

The Purpose of Report

This transnational report highlights the important role of theatre in enhancing the health and psychosocial well-being of the elderly, including those living with dementia- Alzheimer, or other cognitive impairments. Based on the desk research and fieldwork carried out in each ERASMUS partner country, the report provides guidance for developing a high-quality training program and methodology based on theatre activities for operators. Specifically,

- The report focuses on the ageing policy and creative practices in each of the ERASMUS partner countries (Romania, Greece, Italy, and Portugal). It also describes how national and local organisations use theatre and drama-based initiatives to enhance the quality of life and mental health of the elderly population.
- The report provides an in-depth exploration of a wide range of programs and methods, presenting valuable perspectives on how engagement in theatre can positively impact the well-being of elderly individuals. The results of the on-site research, including focus group discussions and hands-on theatrical activities conducted by each ERASMUS partner country, confirm the significant benefits of theatre in enhancing the lives of older adults.

Methodology Report

The methodology for this report involves gathering both primary and



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secondary data, as well as conducting fieldwork to observe, interact with, and gain a better understanding of the project participants. To achieve this, data were collected through desk research and fieldwork in the following ways:

Desk Research: It was conducted to acquire a more comprehensive understanding of the topic under study as well as to complement or validate prior knowledge on the subject.

The desk research included a review of the international and national literature on creative, theatrical, and drama interventions, as well as educational programs for older people and their caregivers, including seniors living with dementia –Alzheimer. In addition, all published data on health and social care services for the elderly in each partner country (Romania, Greece, Italy, and Portugal) was searched using journal articles, databases, reports, gray literature, and websites.

Desk Research was conducted during May to June 2024.

Fieldwork: It consisted of one focus group conducted by each partner country, as well as a variety of theatrical activities/exercises. In particular, the fieldwork encompassed the following:

- **Focus group** discussions with artists, caregivers, health care, cultural, and social professionals, as well as older persons living with Alzheimer’s and cognitive diseases. The focus group included at least one senior member (65+) from the target population to ensure inclusivity in research participation.
- **Theatrical activities** were conducted by a facilitator and co-facilitator, and they involved older people and caregivers.



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For Greece, the fieldwork research activities have been approved by the Research Ethics Committee of the University of West Attica (UN.I.W.A.– Outg. 18970 – 13/03/2024 Aigaleo)

Field Research was conducted during May to June 2024.

Report Structure

The report is divided into five sections, each of which is based on data that was collected using a variety of methods: **1)** An international literature review; **2)** National literature reviews; **3)** Focus group discussions with professionals, older adults, and their caregivers (informal or formal) in each of the ERASMUS countries; **4)** Theatrical activities conducted by each partner organisation and **5)** General and specific recommendations to help partner countries develop an appropriate methodology for implementing the training programme. Wherever feasible, information is given on public organisations and the private sector (profit, not-for-profit, and NGOs) that provide care and creative activities for older people in each partner country.



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SECTION 1. INTERNATIONAL LITERATURE REVIEW

Introduction

Extensive research indicates that incorporating theatrical activities into creative interventions can significantly improve the physical and mental health, as well as the psychosocial well-being of older adults. This is because theatre serves a dual purpose in enhancing the health and well-being of the elderly population, functioning as both a preventative measure and a healing or treatment approach for older persons with and without cognitive impairments such as dementia and Alzheimer's.

In general, theatre and drama-based interventions, as participatory creative and arts programs, allow older adults, with or without impairments and dementia- Alzheimer, to actively engage in a task or project, use their imagination, promote social interaction, and cultivate an appreciation for each participant's contributions, regardless of the quality of their own work (Swinnen & De Medeiros, 2018). Consequently, older people feel empowered to liberate themselves and express their creativity without any fear of prejudice or discrimination.

Theatre, as a key participation activity, nurtures and stimulates older people's creativity, which is recognised as an important aspect in fostering healthy and active aging (Cristini & Cesa-Bianchi, 2019). In fact, as Laceulle and Baar (2014) point out, being active as we age allows us to experience aging not as decay but as an evolution toward self-realization in later life.

As will be seen in the following sections, performative arts programs and activities, such as theatre and drama, aim to help older people with and



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without dementia, neurological disorders, and Alzheimer’s disease, slow down or avoid the challenges related to ageing, allowing them to maintain control of their lives for as long as possible. This creative collaborative method seeks to empower older people to maintain control of their lives as they age, while simultaneously minimising or eliminating the natural declines that come with ageing. This way, older people continue to make meaningful contributions to their communities and be active members of society (Perel–Levin, 2023).

Theatre: Definition & Meaning

There are multiple meanings for the term "theatre" in the relevant literature. Typically, it indicates a structure equipped with a stage, where spectacles and performances are conducted. Conversely, it may be employed to delineate a form of performing art¹ wherein live performers create a portrayal of a real or imagined event in front of an audience at a specific location. Although these are two distinct definitions of theatre, they both refer to a collaborative art form.

Etymologically, the word ‘theatre’ (or theatre) is derived from the Ancient Greek *theatron*, which means «a place of viewing». At its core, it is a place where individuals seek to uncover the reality of life and societal circumstances—the truth about themselves, their communities, and the world at large.

Aristotle, the ancient Greek philosopher, believed that theatre originated from the human inclination for imitation, known as mimesis. According to Aristotle, humans have an innate tendency to imitate or mimic the world around them, which is evident in our artistic and creative endeavours. Indeed, theatre has always been an important part of human society because of the innate desire

¹ <https://en.wikipedia.org/wiki/Theatre>



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of human beings to perform, regardless of social status, economic position, ethnicity, or age. Richard Avedon, an American photographer, once remarked, “We are all performing. It's what we do with each other all the time, consciously or unintentionally. It's a way of telling about ourselves in the hope of being recognized as what we'd like to be”. Similarly, Pipino (2022), Associate Professor of Acting, Directing, and Movement at SUNY Oneonta, says that even in our daily lives, we all perform, explaining that everyone makes an effort to look their best in order to get what they want out of life.

Aristotle saw theatre as a complete art form that included not only dialogue, characters, and plot, but also spectacle, music, and dance. This viewpoint embodies the modern concept of theatre, as it includes movement, words, voice, and visual elements that all contribute to theatrical performance, making it a highly creative approach for older people to express thoughts, feelings, and ideas. From this perspective, theatre is a holistic creative art form of expression in which the story and body play essential roles. Performers are asked to use more than just words to tell a story; they must also use their bodies.

Many scholars today consider theatre to be a distinct collective experience for two reasons, as opposed to other performing arts such as dance, music, and opera. First, it offers unique performing experiences. This means that the audience will never watch the same performance in the same way, even if they visit the same venue numerous times in succession. There will always be modifications in the staging or individual performances of the performers, even if the structure will remain the same. Second, it is the only form of art that combines political and social critique with enjoyment. In the West, theatre as a performing art has been used to encourage citizens to participate in public discussions about moral, social, and political issues since ancient times (Nisker et al., 2006). The ancient Greeks, who established theatre as a form of escapist entertainment and civic involvement, sought to improve their morality



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by tackling important contemporary concerns through tragedy, comedy, and satire plays.

Theatre has a vast history that spans civilizations and evolves along with human communities.

A Brief History of Theatre

Theatre has a lengthy history, spanning thousands of years. Theatre emerged in different societies worldwide and developed from myths, religious ceremonies, and rituals that took place in daily life (Meyer-Dinkgräfe, 2001). There are several theories on the origins of theatre, the most well-known of which sees theatre as a development from ancient religious practices. Nevertheless, there is no solid proof that theatre evolved from ritual, despite the similarities and importance of this relationship (Pipino, 2022).

The first recorded theatrical performances, which included performances for the gods, originated in ancient Egypt² about 2500 BCE. This early form of theatre could include dance, music, and other elements meant to please the gods as well as entertain and educate the audience. A passion play is a play about the life of a god, and the earliest recorded Egyptian passion play tells the tale of the god Osiris.

In the West, theatre has its roots in the myths and rituals of ancient Greece. The theatre of ancient Greece, which flourished between 550 BC and 220 BC, served as a precursor to modern Western theatre, to which it gave technical terminology, genre classification, and numerous themes, stock characters, and narrative elements. Particularly, the origins of Greek drama can be traced

² <https://study.com/academy/lesson/history-of-theater-overview-timeline.html>



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back to Thespis, who was the first actor to step out of the chorus and perform solo, marking a significant shift in theatrical storytelling. From this supposed origin, theatre has worn many variations of its two masks – comedy (known as Thalia, the muse of comedy) and tragedy/drama (known as Melpomene, the muse of tragedy).

During classical Greek and Roman antiquity, the theatre as a space, as well as the theatrical acts and teachings, were seen as the major axes of communal life, around which this life acquired structure, expression, and purpose (Papadopoulos, 2010). During the Middle Ages and late antiquity, the Christian Church employed religious dramas as a method of religious instruction for adherents, intending to disseminate and regulate its doctrines (Papadopoulos, 2010).

In the 20th century, theatre represented a period of great change in culture and society, primarily in Europe and North America. This is the period during which revolutionary artists, and radical and progressive pioneers of theatre like Bertolt Brecht, Jerzy Grotowski, J. L. Moreno, and Augusto Boal envisioned the theatre as a space of expression for the oppressed voice of the poor and marginalised people. This innovative theatrical practice was perceived as a force that would subvert political and social hegemonies and serve as a liberation mechanism against the prevailing ideological mechanisms (Papadopoulos, 2010). According to Obermueller (2013), all of these pioneers of 20th-century theatre shared the desire to demolish the spectator's passive role and engage him/her in the action. Their radical ideas about breaking down the barrier between the performer and their audience, that theatre may be done outside of a traditional stage, and that anyone, not only actors, can play theatre, laid the groundwork for the form of applied theater nowadays.

Applied theatre is now widely recognized as an umbrella term that encompasses a variety of theatre practices with the shared goal of igniting or



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influencing social change. Many forms³ of applied theatre, advocate for political and social change, whilst others, such as drama therapy, psychodrama, and sociodrama, focus on the inner workings of the individual, facilitating personal growth and promoting mental health. The subject matter of applied theatre is often generated by the participants under the guidance of the facilitator(s).

Theatre and Drama: similarities and differences

Literature often uses theatre and drama interchangeably. Nevertheless, a distinction can be made between these two notions, as illustrated in the subsequent table.

³ Examples of applied theatre practices include Theatre-in-Education (TiE), Theatre-in-Health Education (THE), Theatre for Development (TfD), prison theatre, community theatre, theatre for conflict resolution/reconciliation, reminiscence theatre with elderly people, theatre in museums, galleries, and heritage centres, theatre at historic sites, and more recently, theatre in hospitals (Sextou & Smith, 2017)



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Table 1. Similarities and Differences between Theatre and Drama

Theatre	Drama
Theatre is a physical entity.	Drama is an abstract entity.
Theatre is the onstage production of a play.	Drama is the script of a play.
There is no direct interaction between the audience and the dramatist.	There is a direct interaction between the reader and the dramatist.
Interpretation of the play depends on the reader.	Interpretation of the play depends on the artists.
<p><i>Source: https://pediaa.com/difference-between-drama-and-theater</i></p>	

Theatre and Ageing

As previously mentioned, creativity is widely recognized as a pathway to active and healthy ageing (Cristini & Cesa-Bianchi, 2019; O’Neill, 2019). Therefore, theatre, as a collaborative creative activity, plays a significant role in promoting the health and well-being of older adults from diverse backgrounds.

Theatre is a powerful vehicle through which older people can express



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themselves, engage, and communicate with others through their appearance, their words, and their body language. Engaging in theatrical activities, contributing to the development of shows, or simply watching performances have undoubtedly a positive impact on elderly health and well-being.

In recent years, there has been a growing recognition of the significance of theatre in promoting the health and well-being of older people as a low-cost and engaging approach to active and healthy ageing. In particular, for dementia patients, theatre as a creative arts activity appears to be gaining popularity as a potentially low-cost alternative or complementary to pharmaceutical interventions, as it improves cognitive performance while also reducing behavioural and psychological symptoms (e.g., aggression, agitation, depression) (Swinnen & de Medeiros, 2018). Despite the proven health and well-being benefits of theatre for the elderly, including those with dementia, its value is still not fully acknowledged worldwide, including in Europe.

Benefits of Theatre for Older People

In recent years, there has been a growing interest in researching programs and best practices that use the arts to engage older people in order to improve their health and well-being while also building community. To date, most studies on theatre program interventions are from the UK and North America (USA, Canada), with a few from Australasia and Scandinavian countries (e.g., Gürgens Gjaerum, 2013; Lee, Aula, & Masoodian, 2023) and, more recently, the Netherlands and Italy⁴. Regardless of the study's origin, all provide evidence that older adults, including those with dementia–Alzheimer, can benefit from participating in theatrical programs and activities that bring joy,

⁴ Also, look at the relevant research included in the book “Welfare per Sognatori.”



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break isolation, boost physical fitness, reconfigure relationships, stimulate the imagination, and improve cognitive abilities. Studies on older people with dementia and Alzheimer's disease, in particular, have shown that this population can fully participate in theatrical practices that are appropriate for their abilities and that employing specific theatrical techniques that improve their health, and overall well-being will benefit them most. In this regard, an interesting program for using theatrical and drama-based activities with older people comes from Italy. Campostrini, Manzella, and Caracciolo (2017) recently developed and implemented a pioneering therapeutic project that combined autobiographical writing with theatrical activities in the treatment of Alzheimer's patients of varying cognitive abilities, demonstrating the beneficial effects of theatrical practices on Alzheimer's patients. The 'Veder Method,' created in the Netherlands, is another program that uses theatrical stimuli (such as songs and poems) in conjunction with person-centred approaches to encourage vulnerable people to make contact. This method is intended for dementia patients and caregivers, but it can also be applied to a variety of cognitive impairments and psychiatric disorders. Similar programs for people living with Alzheimer or other forms of dementia have been developed in the United States, such as “TimeSlips Creative Storytelling” (Basting, 2020). This is an innovative method of creative care for older people with dementia that uses creativity and imagination, rather than memory, to create stories and narratives that allow people to discover their strengths rather than dwell on their losses. Of course, such programs and interventions are not limited to the ones listed above; these and other programs are discussed in the following section. Nonetheless, it is worth noting here that, despite the limited research on theatre and drama-based interventions for older people in dementia care around the world (Keisari et al., 2020), there is evidence that the existing programs can improve positive emotions, learning, social skills, communication, and self-esteem while also reducing depressive symptoms (see, for example, Zeisel et al., 2018; Stevens, 2012).



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In addition to discussing the benefits of theatre for older people, the literature focuses on the benefits for caregivers (formal or informal, such as family members) who engage in creative and theatrical activities with the elderly or attend training/workshops to improve their interactions with their care receivers. Participating in collaborative theatre group activities, for example, can improve caregivers' communication and interaction skills with older people, whether they have cognitive impairments or not. This, in turn, can lead to a reduction in a range of psychological and behavioural symptoms. Recently, Brunet and colleagues (2021) evaluated the effectiveness of a novel pilot program aimed at teaching improvisation skills to caregivers of dementia patients. The program employed experiential improv exercises in which participants learned to collaborate as a team while also focusing on creating new experiences with their loved ones. The study yielded encouraging evidence indicating that improvisation programs can effectively alleviate symptoms of depression and mitigate sensations of stress or burden among caregivers. These benefits have the potential to significantly improve caregiver well-being and overall health.

However, engaging older people in theatre activities provides not only physical and mental health benefits but also cultural value. In their review report on the advantages of theatre for older people, Bernard and Rickett (2017) noted that dramatic role-playing and devising are particularly effective in creating a safe space for expressing and challenging age-related stereotypes, as well as for embracing diversity and finding commonalities (p. 22). The authors highlight the cultural value of devised productions created by older people as aesthetic artistic contributions to society, rather than solely focusing on the personal benefits they gain from engaging in theatre and drama activities. Nevertheless, as already stated, when using techniques to engage older people in artistic activities, whether for prevention or therapy/healing, the focus should be on the process itself rather than the potential aesthetic benefits that may arise, as already mentioned.



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As already pointed out, theatre has the power to transform who and how we are through its educational, therapeutic, and healing qualities. Its transformative power goes beyond the stage, offering a plethora of physical, cognitive, emotional, and social benefits that can help alleviate health and social challenges experienced by older individuals (Bernard & Rickett, 2016). For instance, research by Noice (Noice & Kramer, 2013) found that participating in structured theatrical exercises can improve cognitive abilities such as problem-solving, memory, word generation and comprehension, and cognitive functioning. By actively participating in performing arts, including theatre and drama, older people can enhance their social relationships, coping skills, and learning abilities (Dadswell et al., 2020), debunking the myth that they are resistant to change and incapable of acquiring new knowledge.

Theatre, as a form of creative expression, creates a safe and comfortable space for older adults, particularly those with dementia and Alzheimer's, to explore their creative selves, whether they reside at home or in a care setting. Recently, Bernard and Rickett (2017) reviewed 77 published studies on older people's theatre and drama participation and summarised their findings. Their analysis highlights the benefits of such participation on the health and well-being of elderly people, including improving group relationships, enhancing learning, and creativity, and emphasising the importance of the aesthetic value and quality of older people's drama. Additionally, Wilson, Dadswell, Bungay, and Munn-Giddings (2017) conducted a systematic review that explored the impact of participatory arts on the social relationships of older people. These relationships encompassed interactions with peers, care staff/caregivers, and the broader community. The study revealed that there are various initiatives and programs across the globe that engage senior citizens in participatory arts, including theatre and drama. The review highlights the positive effects of these programs on the physical and mental health of elderly populations, as well as their interpersonal connections. Finally, Chacur, Serrat, and Villar



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(2022) conducted a scoping review of studies that explored the participation of older adults in artistic activities, including theatre and drama. The review found that older adults benefit from participating in such activities, but also identified gaps in the existing research literature. The researchers suggest new directions for further research to address these gaps and expand our understanding of the benefits of artistic activities for older people.

To summarise, engaging in theatrical activities and exercises, whether as a spectator or, ideally, by actively participating in structured creative endeavors, can provide numerous benefits to the elderly, their caregivers, and society at large. The benefits for the elderly, in particular, can be divided into four major domains:

Health and Cognition

- improvements in cognitive functioning, memory, word generation and comprehension, and problem-solving
- stress reduction
- decrease anxiety and depression

Emotional and Social Benefits

- development of new relationships and friendships
- fostering of intergenerational trust and empathy
- increased self-confidence and self-affirmation
- building positive relationships with peers, caregivers, families, and health and social care professionals
- feelings of excitement, fun, happiness, and freeing of the imagination
- strengthen communication skills and interpersonal relationships



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Creativity and Learning

- development of new skills, being challenged, and taking risks in later life
- self-expression, play, and fun
- breaking down ageist stereotypes and encouraging an all-inclusive society
- cultivate the creative self
- gain theatre/drama and acting skills

Physical⁵ Fitness

- improve mobility, flexibility, strength, balance, and cardiovascular health
- body awareness
- enhance overall physical well-being

Theatre and Drama-based Programs and Interventions for Older People with and without Dementia-Alzheimer

A variety of theatrical interventions, sometimes referred to as "theatre activities", "drama-based activities," "theatre/drama/creative method," or "drama therapy," have been developed to help older people, with or without cognitive impairments, maintain or improve their health and well-being. Studies conducted in various countries across the globe have revealed the existence of a wide range of theatrical intervention programs aimed at the

⁵ <https://medium.com/@cccindy/power-of-theatre-enhancing-elderly-health-and-well-being-553da9e1b1b2>



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elderly. Some theatrical interventions use specific types of theatre, such as Playback Theatre, Reminiscence Theatre, or Readers’ Theatre to assist older people in improving their health and maintaining their well-being and independence as they age. Other programs include a variety of sensory, dramatic, and aesthetic activities, as well as music-based experiential exercises inspired by and based on theatre and drama to elicit memories or encourage older individuals to use their imagination and creativity. The activities may also incorporate sound, dance, and bodily movement, allowing older adults to engage in physical activity while also functioning as a method of communication and connection for those who have difficulty speaking or communicating verbally.

Furthermore, theatrical interventions for older adults can incorporate creative therapeutic approaches, such as drama therapy, and employ various techniques such as theatre games, storytelling, story writing, photography, puppets, and poetry to stimulate memory and facilitate reflection on one's life. Memory activities and games are common choices in creative programs for older adults, particularly those with dementia, as they can help boost brain health and slow down cognitive decline. Nevertheless, it is imperative to take into account the viewpoints of certain experts, like Anne Basting (2020), who argue that memory-enhancing activities centred around personal life experiences may not always be necessary for enhancing memory performance in older individuals with cognitive impairments. This perspective is critical, and professionals should bear it in mind when developing and implementing theatrical program interventions for people with dementia or mixed groups that include both people with and without cognitive impairments.

Moreover, the literature review found that theatre and drama activities, whether used for entertainment, healing, or teaching, must always be enjoyable, user-friendly, and well-designed to suit older people's physical, emotional, and psychosocial needs. These fundamental qualities are essential



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for any successful theatre/drama activity or exercise. However, as scientific and empirical evidence shows, not all older people have the same psychosocial needs due to individual and cultural differences. Similarly, not everyone gets dementia and Alzheimer in the same way. As a result, it is reasonable to claim that there is no "one size fits all" theatrical intervention, but rather a variety of approaches that can be tailored to each person's needs and settings in order to be effective. This tailored approach not only ensures that older people receive adequate creative care, but it also improves their overall well-being and quality of life. Consequently, it is essential to choose activities that align with the objectives of the training or workshop programs and address the specific needs of the target audience.

According to our literature review, the most frequently cited types of theatre and drama-based programs and approaches for older individuals with and without dementia- Alzheimer and their caregivers are as follows:

● **Reminiscence Theatre**

Reminiscence Theatre is a form of interactive drama in which older adults share memories and experiences through dialogue, storytelling, and creative activities. It is about seeing and realising the dramatic potential in real-life stories. It takes verbatim memories as the basis for theatre scripts, using the experiences of older people as a source of artistic production and therapeutic creativity (e.g., Kosti, 2018; Schweitzer, 2007).

● **Creative Drama⁶**

Creative (improvisational) drama is an arts-based activity that has been shown to have significant personal and social value for older

⁶ file:///C:/Users/user/Downloads/Story-To-Remember-booklet-EN-1%20(2).pdf



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adults as a side effect or immediate result of participating in a series of such activities. It refers to dramatic activities that are designed to help participants develop their cognitive, affective, aesthetic, and moral thinking skills, including those with dementia–Alzheimer.

● The 'Veder Method'

It is a theatre–based communication method that uses theatrical stimuli (e.g., songs, poetry) in conjunction with person–centred approaches to encourage vulnerable people to make contact. This is not only for the person who is having difficulty making contact but also for those around them, such as family members and caregivers. The 'Veder Method' was developed for people with dementia and their caregivers, but it can be applied to a wide range of cognitive impairments and psychiatric disorders (e.g., van Haeften–van Dijk, van Weert, & Dröes, 2015).

● Veder Contact Method

This is a modified version of the original Veder Method, tailored specifically for daily care settings. It emphasises integrating theatrical, poetic, and musical communication into routine caregiving tasks rather than relying on structured performances. The aim is to enhance everyday interactions between caregivers and residents by using elements of the Veder Method during personal care activities. It involves training caregivers to incorporate elements of theatrical communication into their caregiving practices without needing extensive performance skills (Boersma et al., 2017).

● Playback Theatre

Playback Theatre is a type of improvisational theatre in which audience members volunteer stories from their lives and watch them



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performed on stage. Keisari and colleagues (2020) used playback theatre in a structured 12-week group intervention and found significant improvements in self-esteem, positive affect, meaning in life, and quality of life, as well as a significant decrease in depressive disorders.

● **Improvisation Theatre (or Theatre Improvisation)**

It is a stimulating and imaginative way for seniors to keep up their cognitive abilities, interpersonal skills, and active participation. Improvisatory theatre techniques may also prove advantageous for caregivers as a means of coping with the challenges they encounter (e.g., Bassis, Rybko, & Maor, 2023).

● **Readers' Theatre**

Readers' Theatre is a form of drama that requires participants to read aloud a scripted narrative to the audience. Participants have their scripts in hand and act without the necessity of memorising lines. Readers Theatre may not utilise any performance, scenery, props, or costumes, and the plays performed are one-act or brief adaptations of longer productions. No acting experience is necessary (eg., Khanlou et al., 2022).

● **Recreational Drama**

It makes use of a variety of dramatic activities to provide older people with recreational opportunities (e.g., Sextou & Smith, 2017).

● **Life-crossroads**

It is an active life review method that uses carefully selected autobiographical memories, self-defining life experiences, or life



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periods that shaped a participant. Participants can easily explore identity, meaning, and relationships with their surroundings by sharing and bringing life-crossroads stories to life (e.g., Keisari & Palgi, 2017).

● TimeSlips

It is a creative, group storytelling method for people with Alzheimer’s disease and related disorders. The method makes use of storytelling to engage people with dementia in meaningful ways. It acknowledges the importance of creative storytelling for people with dementia, shifting the emphasis from memory to imagination (Basting, 2013).

Ethical Principles for Theatre and Drama-based Work with Older People

The literature on creative ageing programs offers various examples of how theatrical interventions can promote older people's psychosocial well-being while combating ageism and ableism. According to experts, ageist stigmatisation and discrimination based on social stereotypes can impair older adults' cognitive and physical performance, restrict their healthcare accessibility, and undermine their sense of self-identity and overall welfare (Lee, Aula, & Masoodian, 2023; Perel-Levin, 2023; Stokes & Moorman, 2020).

Taking into account the foregoing, Ellen Hirzy (2021) contends that creative ageing programs should be asset-based rather than deficit-based, and thus anti-ableist, by emphasizing arts learning and skill development for older people. Additionally, she holds the belief that older people should be provided with chances to acquire knowledge and engage in activities within nurturing and stimulating settings that value their skills, aspirations, and dedication.

Moreover, the literature has shown that there is no one-size-fits-all approach



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to theatrical programs and interventions for older people, as each person is unique. However, when using theatre to engage older persons with or without dementia and Alzheimer, it is important to consider the acceptable and appropriate behaviour of professionals and facilitators toward this age population. In other words, when working with older people, it is of paramount importance to practice ethical behaviour. Ethical practice helps establish a strong connection and trust between professionals and older people and their caregivers, which is especially important when working with vulnerable seniors, dementia patients, and those in high-risk situations.

In general, professionals who interact with the elderly must adhere to the United Nations⁷ Principles for Older Persons and the Sustainable Development Goals (SDGs) regarding health and well-being, refrain from perpetuating stereotypes, and ensure that every older adult is treated with dignity and respect. However, a recent study by Georgia Grace Bowers (2023) in the UK emphasises the importance of not only adhering to overarching ethical principles when interacting with older persons, but also taking into account the ethical practices of using specific performing arts, such as applied theatre and, in particular, reminiscence theatre, when working with this age population. The study highlights the unintended ageist consequences of this type of theatre, which risks reducing older people to mere storytellers of the past, overshadowing their present identities and contributions.

As already mentioned, reminiscence theatre is a form of interactive drama in which older adults share their memories and experiences through dialogue, storytelling, and creative activities.

Bowers draws attention to the potential inadvertent perpetuation of stereotypes and neglect of participants' present lives and agency within

⁷ <https://www.ohchr.org/en/instruments-mechanisms/instruments/united-nations-principles-older-persons>



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applied theatre practices, despite their positive intentions. To tackle any age-related prejudices that may arise while implementing theatrical techniques, Bowers suggests using an Anti-Ageism Praxis (AAP) framework alongside the broader ethical principles for older people. This approach ensures that the life experiences of older adults are respected and that their views are acknowledged and heard on an equal footing throughout the theatrical activities and exercises. The AAP framework emphasises the following: co-creation, attentiveness to present responses to memories and critical examination of stereotypes.

Co-creation and shared power: Participants actively collaborate in shaping the project and final performative outcomes, ensuring that they are not only used for their recollections.

Focus on present responses: Exploring how participants feel about their memories of the present moment leads to focusing on the here and now and not solely on what has been.

Challenging stereotypes: AAP prioritises showcasing older adults' diverse experiences and perspectives, fostering understanding, and dismantling ageism.

Theatrical programs and interventions involving older adults must prioritise inclusivity, diversity, and the ethical integrity of professionals, as with any creative endeavour that engages and stimulates human potential. Firstly, inclusivity must be a top priority, which means that the program should be designed to cater to individuals of all backgrounds and abilities. This approach ensures that older adults from diverse backgrounds can participate and benefit from the program, regardless of their social, cultural, or physical differences.

Secondly, diversity must also be taken into account. In this context, diversity



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refers to the range of experiences, perspectives, and ideas that are brought to the program. By incorporating diversity into the program, it is possible to create more dynamic and engaging experiences that appeal to a broader range of participants.

Finally, the ethical integrity of professionals must also be considered. This simply means that the professionals involved in the program must be trustworthy, knowledgeable, and experienced. They must operate with honesty, transparency, and respect for the participants, ensuring that the program is safe, effective, and beneficial for all involved. By prioritising inclusivity, diversity, and ethical integrity in theatrical programs and interventions for older adults, it is possible to create a stimulating and engaging experience that promotes human capital and enriches the lives of all involved.



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SECTION 2. FINDINGS FROM NATIONAL LITERATURE REVIEWS

Ageing and the Current State of Care for Older People

Europe is home to an increasing number of countries where people are living longer lives than in past years. In **Romania**, the low birth rates and massive emigration determined the diminution of the populations which is characterised by an ageing process. Older adults (65+) represented 19,6% from the total population, in 2021 (Institutul National de Statistica, 2023). The life expectancy at birth in Romania is the third lowest in the EU – 76,6 years (Eurostat, 2024). Dementia in Romania has a serious impact; from an approximate number of 270,000 – 300,000 people with Alzheimer, only less than 20% are detected and diagnosed (Romanian Alzheimer Society, 2012). Additionally, in 2019, Alzheimer’s disease was listed as the 6th cause of death in Romania. Particularly, **Greece** is one of the EU countries that is ageing rapidly, leading to significant alterations in its structural attributes. People over 65 years old in the country today represent more than 21.3% of the population and, according to forecasts, in 2030 they will be about 30% of the population, while in 2050 they will be close to 1/3 of the population (WHO, 2023). According to the latest figures from the Greek National Observatory for Dementia – Alzheimer, it is estimated that 200,000 people are living with dementia in the country, while family caregivers are estimated at 400,000 all over the country. Traditionally, older adults’ care in Greece has been predominantly family-based. In a recent research, part of the Hellenic Epidemiological Longitudinal Investigation of Aging and Diet (HELIAD), dementia incidence among the age group of 65 years and above in Greece, was 19.0 cases per 1000 person-years (age-standardised and sex-standardised incidence: 25.4/1000 person-years, of which 16.3 per 1000



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years were attributable to Alzheimer disease) (Vlachos et al., 2021). These numbers will increase dramatically in the years to come, making dementia one of the most crucial medical, societal, and economic challenges in Greece, as it is all over the world. Despite this, very few studies have been conducted so far concerning the prevalence of dementia and mild cognitive impairment in Greece (Tsolaki et al., 2021). According to recent research from around the world, the aforementioned circumstances frequently have a negative impact on the physical and mental health and well-being of older people, causing stress and anxiety, as well as feelings of loneliness and social isolation (Perel-Levin, 2023).

According to ISTAT data, based on the population residing in **Italy** as of 1st January 2023 (ISTAT), there are approximately 1,126,961 cases of dementia in the age group of 65 years and older. When adding cases related to Mild Cognitive Impairment (MCI), around 900,000, and the involved family members, totaling 4 million, the number exceeds 6 million people directly affected by the issue.

Portugal ranked as the fourth most-aged country in the world in 2021, with 23.4% of its population aged 65 and over, an increase from 19.03% in 2011 (INE, 2022; INE, 2013). This demographic shift underscores the rising number of elderly individuals requiring social and health care. In the context of globalisation, evolving labour market trends, increased residential mobility, the rising age of first-time parents, and changing living conditions, it has become more challenging for children to provide care and socio-emotional support to their ageing parents. Even in countries with a tradition of moral responsibility towards elderly parents (Saraceno, 2016), there is a trend towards greater reliance on external care, indicating a process of defamiliarization (São José, 2012; Walker et al., 2019). The dominant terms in recent decades have been 'active ageing' in Europe and 'successful ageing' in



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the United States (Paúl, Ribeiro, & Teixeira, 2012). Both concepts originate from the same scientific foundation based on the activity perspective (Foster & Walker, 2014) and are viewed in research and policy as alternatives to the deficient model of ageing (Strawbridge, Wallhagen, & Cohen, 2002). Active ageing, as defined by the World Health Organization (WHO), is the "process of optimising opportunities for health, participation, and security, in order to enhance quality of life as people age" (WHO, 2002). Its four key concepts are: (1) Autonomy; (2) Independence; (3) Quality of Life; and (4) Healthy Life Expectancy. For the WHO, being "active" means continuous participation in all aspects of life—social, cultural, economic, spiritual, or civic— and not merely the ability to be physically active or engaged in work (WHO, 2002).

National Policy of Older Population with and without Dementia-Alzheimer

In **Romania**, the National Health Insurance House (CNAS) runs a special program for Alzheimer's disease, ensuring that patients who are diagnosed receive specific treatments free of charge, following a detailed protocol. Despite the importance of early diagnosis, many people only consult their doctors when the disease has progressed significantly.

In 2013, the Ministry of Labour, Family, Social Protection, and Elderly introduced Order No. 2272. This order specifies the procedures for applying Article 42 of Law 448/2006, which focuses on protecting and promoting the rights of disabled individuals. According to this law, people with severe disabilities, including those with dementia, have the right to a personal caregiver. This entitlement is based on a thorough medical and psycho-social assessment and is managed by the General Directorate of Social Assistance and Child Protection.

At this moment, there is a National Strategy for Long-term Care and Active Ageing (2023 – 2030) in Romania, developed by the Ministry of Labor and Social Solidarity with technical assistance from the World Bank. This strategy aims to improve long-term care services and promote active ageing among



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the population.

However, Romania does not currently have an official National Dementia Strategy or a National Dementia Action Plan. Despite this, there has been a significant effort to create one. The Romanian Alzheimer Society and Asociația Habilitas Centru de Resurse și Formare Profesională have developed a National Dementia Action Plan for 2020–2024. This initiative, co-financed by the European Social Fund through the Operational Program Administrative Capacity 2014–2020 and titled "Mental Health – Priority on the Public Agenda!" (MySMIS code 112591), has been submitted to the Romanian Ministry of Health. Unfortunately, it is still pending adaptation and financing.

The proposed National Dementia Action Plan focuses on seven key priority areas: (1) Registration and classification of people diagnosed with dementia in Romania; (2) Prevention, information and awareness of the population regarding neurodegenerative disorders; (3) Support and care for patients diagnosed with dementia; (4) Dementia treatment; (5) Formal, informal and non-formal education in the field of neurodegenerative disorders; (6) Improving the legislative framework, including normative acts that regulate the rights of patients affected by dementia and their caregivers; (7) Research on neurodegenerative disorders. This public policy document, submitted to the Romanian Ministry of Health, is important for addressing the growing needs of dementia patients and their families in Romania. However, its implementation is contingent on the pending adaptation and financing by the relevant authorities.

In **Greece**, there is not a National Action Plan for Older Population in place. What exists is the National Action Plan for Dementia – Alzheimer’s Disease 2016–2020, which wasn’t implemented to any meaningful extent except by putting some services and structures in place. According to the Greek National Action Plan for Dementia – Alzheimer’s Disease 2016–2020, “the issue of dementia was not a priority in the public health sector and there was no



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systematic mapping of the network of the few available health and social care services for people with dementia in Greece.” (p.24).

During 2023, the Greek government announced a comprehensive action plan to tackle dementia, considered by analysts as a significant challenge for the country’s ageing population. In terms of the legislative framework, the Action Plan aims to safeguard the fundamental rights of people with dementia and their informal caregivers. In addition, the proposed legislation includes the introduction of a “a care and health representative” of the patient, who will be appointed for each patient with dementia and Alzheimer’s. This person will act as a legal representative for care and treatment issues when the patient loses cognitive functions and cannot make decisions. The National Action Plan for Dementia and Alzheimer Disease 2023–2028 is based on 7 axes: 1) Registration and classification of people with dementia in Greece, 2) Prevention, information and public awareness, 3) Support of carers of people with dementia, 4) Treating dementia, 5) Legislation – Rights of people with dementia and their caregivers, 6) Dementia research, 7) Dementia education.

In **Italy**, from the early 2000s and for the subsequent ten years, actions at the regional and local levels were organised and implemented without a common direction. It was necessary to wait until 2015 to have the first national framework, the first *Piano Nazionale Demenze* (PND) – National Dementia Plan, which, despite representing a basis for shared strategy, was never supported by sufficient funding. Furthermore, the creation of a Tavolo nazionale permanente – Permanent Table on Dementia – responsible for coordinating the actions implemented has also been envisaged, but its formal establishment took about six years. Despite the delays, the new body has started to produce several documents at the national level, jointly approved by the State and Regions, that were expected to have a significant impact and provide a clear direction to the programming strategies. The most significant legacy, also from an economic–financial point of view, was the provision of the first Fondo Nazionale per le Demenze – National Dementia Fund –,



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included in the 2021 Budget Law (Law No. 178 of 30/12/2020), which made available an endowment of 5 million euros annually for three years.

As established, those performing governance functions, namely the Ministry, Regions and Autonomous Provinces, and local authorities, are tasked with the following duties and invested with the consequent responsibilities: setting objectives and strategies; designing governance and control structures; monitoring and evaluating their functioning and the achievement of objectives; foreseeing management systems capable of intervening to correct and enhance ongoing actions and performance. Unlike initially envisaged, the reality of the Italian territory still appears very varied and fragmented among the different Regions and often even more at local level, with areas of excellence alongside others where it is extremely necessary to intervene to fill evident gaps. This leads to marked inequalities in the access and use of the qualitative–quantitative offer of diagnosis and care services. In general, there is weak or even poor integration and collaboration among the various entities and figures involved: hospitals, General Practitioners (GPs), territorial services, and integrated home care assistance.

In Italy, there are several cultural–based initiatives aimed at dementia, but the management and treatment of this phenomenon are complicated. The planned paths hardly involve openness and collaboration with sectors other than health; they are limited mostly to a medical and not cultural–based approach. Only now, some local public institutions have started to co–design initiatives and cultural welfare activities.

In 2014, the *National Dementia Plan* (PND) was established through collaboration and agreement involving the Ministry of Health, Regions and Autonomous Provinces (PA), the Higher Institute of Health (ISS) and the three national associations of patients and family members. With an integrated approach to managing and treating the disease, which materialises in a comprehensive set of care pathways, the aim is to develop a global strategy



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to promote consistent and appropriate interventions, improve the appropriateness and effectiveness of dementia care provision, counter social stigma, and ensure rights, access and utilisation of up-to-date knowledge.

In 2017, the *Permanent Table on Dementia* produced national guidelines and directions regarding *Percorsi Diagnostico Terapeutici Assistenziali (PDTA) – Diagnostic–Therapeutic Care Paths* – for dementia to support health authorities in the development of such programs. In addition to providing a shared definition of PDTAs, the document identifies the steps and essential elements necessary to outline the pathways at the regional level; due to specific needs, the articulation of these pathways varies depending on the local context in which they develop. The same PND recognizes the development and implementation of specific networks within an appropriate and high-quality pathway, including various health professionals, as important actions.

In 2022, the *Alzheimer's and Dementia Fund* was established, providing funding of 14 million euros to implement a series of project activities to pursue the objectives of the PND. This represents the first specific public funding related to dementia and, after the *Cronos Project*⁸ and the publication of the PND, corresponds to the largest public health operation on this topic in the history of Italy. Until then, *Cronos* had represented the first coordinated initiative at the national level for dementia, specifically for Alzheimer's

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Launched over twenty years ago, the Cronos project has represented the first coordinated initiative at country level for dementia (specifically Alzheimer's disease) aimed at structuring a management system linked to the prescription of a type of drugs. In Italy, the network for dementia began to be activated in 2000 with the Cronos Project, which promoted management models at the national level and laid the foundations for a future implementation service.



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disease, aimed at structuring a care system connected to the prescription of a type of medication.

Political Intervention **Portugal** has aligned with the World Health Organization (WHO) and European Union (EU) values and strategic objectives concerning active and healthy ageing since the Political Declaration and Madrid International Plan of Action on Ageing (United Nations, 2002). In 2004, the Directorate-General for Health (DGS) under the Portuguese Ministry of Health launched the National Program for the Health of Older People. This initiative was followed in 2014 by the report “Greater Age in Numbers,” which aimed to monitor the health of the population aged 65 and over (Direção-Geral de Saúde, 2004; 2014). Further, alignment with global ageing strategies was seen in the adoption of the Global Strategy and Action Plan on Ageing and Health by the World Health Assembly in May 2016, and the framework presented in the World Report on Ageing and Health (WHO, 2015). In response, the Portuguese Government established an inter-ministerial working group to develop the National Strategy for Active and Healthy Ageing (ENEAS) in 2017. This strategic plan aimed to create a society for all ages, promoting active, dignified, and healthy ageing. The working group (Grupo de Trabalho Interministerial, 2017) proposed a set of actions organised into seven categories:

- Promotion of healthy lifestyles and health surveillance
- Comorbidity management
- Training and education throughout the life cycle
- Creation of environments that enable integration and participation
- Creation of physical environments that ensure safety
- Identification, signaling, and support in situations of vulnerability
- Implementation, monitoring, and research in light of the challenges imposed by the COVID-19 pandemic,



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The Active Ageing Index Analytical Report, and the Decade of Healthy Ageing 2021–2030 offer opportunities to strategically consider ageing as a national priority in Portugal and across Europe (Costa et al., 2021).

Health and Social Care: Structures and Services for Older People with and without Dementia-Alzheimer

In **Romania**, poverty is still at a high level as in 2016 38.8% of the population was at risk of poverty and social exclusion (European Commission, 2018). Access to health care is universal and guaranteed by the Constitution. Each insured person in Romania has the right to free health services. For uninsured persons only emergency health care is provided. Constantly, low levels of funding and excessive dependence on hospital care, limits universal access to quality care, while corruption remains widespread. The Law 263/2010 regulates the pensions system in Romania. 96% of the 65+ population in urban areas receives at least a minimum wage or a minimum pension, while 93% of 65+ population from rural areas receives pensions from the social insurance system or from agriculture workers’ pension system. Additionally, there are no residential care centres or palliative care centres dedicated to dementia patients. The day centres for people with dementia are local initiatives only in a few big cities. The rural areas are completely uncovered regarding dementia care. There are also no support services for informal/ family carers of people diagnosed with dementia, apart from the financial support. The network of residential care is insufficient for the high number of older people in need of care services, therefore there is a high development of the private care sector. Despite the need, care services are sometimes characterised by low quality and abusing behaviours. There are constant efforts from public authorities and private initiatives to improve the standard of quality in care.

Greece is one of the few European countries where public expenditures on health and long-term care services for the elderly are below the EU average; most long-term care in the country is provided informally by family members



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at home, who bear the associated responsibilities and expenses. Despite the lack of official data regarding the prevalence of informal care in Greece, Eurofound (EQLS, 2016) estimates that informal caregivers comprise 34% of the Greek population, or about 3,600,000 individuals.

Today, a variety of public, for-profit, and nonprofit private organisations in Greece provide services to older people. Health and social care organisations for older adults, including those with dementia–Alzheimer, are managed by both the public and private sectors, with the private sector accounting for the majority. The settings provide various services and activities for older people, including creative and arts activities such as theatre (theatrical groups), dance (traditional, modern dance), chorus, crafting, recreational, and cultural activities (visiting museums, attending festival events, etc.). Public sector agencies (e.g., municipal and community services), non-profit organisations (e.g., churches, charitable foundations, NGOs), and for-profit organisations (e.g., nursing homes, older adult care units) that provide long-term and residential care services for older adults, as well as dementia-specific settings, frequently arrange groups with specific interests and provide creative opportunities to patients, caregivers, families, and friends. However, there is no systematic research or mapping of healthcare and social and creative services for older adults in the country. Additionally, service provision significantly varies by sector and location; urban areas have better availability, while rural areas have very limited services.

Theatre Initiatives for Older Adults

While concepts of active ageing and successful ageing emphasise participation and engagement in cultural activities, they do not explicitly highlight the importance of creative and artistic activities in the lives of the elderly. Creativity offers a new paradigm for ageing, one that focuses on the potential of older individuals rather than their challenges (Hanna & Perlstein, 2008). In contemporary society, creativity is often erroneously viewed as an attribute



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exclusive to youth. However, the practice of creative ageing has emerged in three distinct areas:

1. **Health and Well-Being:** This includes tailored art therapy programs for older adults in residential care and those with cognitive decline.
2. **Community:** These programs utilise the arts for cultural or civic development, providing opportunities for the elderly to contribute to community life.
3. **Lifelong Learning:** Community-based educational programs designed to develop artistic skills through participatory workshops, typically culminating in public presentations.

Understanding the relationship between creativity and ageing is essential for recognising the potential of individuals in their later years, thus restoring their place in lifelong learning, growth, and community participation. The intersection of arts and health is multidisciplinary, encompassing artistic practices within both health and community contexts. Older adults often face increased vulnerability and health issues in later stages of life. Therefore, comprehending how engagement in artistic activities, such as theatre, can enhance health and well-being is crucial. By fostering creativity and participation, the arts have the potential to significantly improve the quality of life for older adults, promoting not only physical health but also emotional and social well-being.

In **Romania** several theatrical initiatives for older people exist, but not on a stable basis. Most of them are part of short-term projects. The following are indicative of these initiatives:

- [*Theatre for People 65+ – DGASPC – Satu Mare*](#). A project funded by EU funds within the Day Center for the Older People on Valea Jiului, under the auspices of the Satu Mare Directorate of Social Assistance. This



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project, named “Engaged and Active in the Age of Wisdom”, provides free access to two theatre plays for interested older adults. The events are organised by the Satu Mare Directorate of Social Assistance and the Caritas Organisation of the Satu Mare Diocese and are aimed at both those who regularly attend the theatre and those who have had limited or no access to such cultural events. To participate, individuals must be over 65 years old and possess a green certificate according to COVID-19 protection measures. The number of seats is limited, and free tickets can be obtained from the theatre agency prior to the performances.

- [“Story2Remember”](#). A project funded by the European Commission through the Erasmus+ Strategic Partnerships for Adult Education program implemented in an transnational partnership of 6 organizations from 5 countries (Romania, Greece, Bulgaria, Ireland and United Kingdom).

The Erasmus+ project “Story2remember” aimed to improve the quality of life for people with dementia and their caregivers, enhance healthcare professionals' skills, and promote social inclusion through creative drama and storytelling. The project produced a booklet on using drama in dementia care, a training handbook for professionals, a communication toolkit for families, and a policy document to support dementia-friendly communities in the EU. These resources collectively foster wellbeing, social inclusion, and autonomy for individuals with dementia.

- [Culture on Prescription Europe \(COPE\)](#). This project was the result of collaboration between organisations from six European countries: Ireland, Belgium, Portugal, Germany, the Netherlands, and Romania. The aim of this project was to identify best practices in the field of social prescribing and to create solutions that use culture and health



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promotion to combat loneliness and isolation, especially in older people and those with mental health issues. Additionally, the project aimed to develop new concepts for culturally prescribed offerings that would have a positive impact on health through cultural and learning activities. The COPE project aimed to provide resources and practical support to social services and healthcare facilitators to organise non-clinical activities for individuals affected by or at risk of loneliness or social exclusion. Another important objective of the project was to develop guidelines for decision-makers in municipalities and associations to help them address social and cultural prescribing at the local or organisational level. Ultimately, COPE aimed to create an implementation framework to facilitate the effective application of solutions developed within the project and to contribute to combating loneliness and isolation among vulnerable populations across Europe.

- [The "Support Circle" Project](#). A cultural intervention initiative carried out by the Romanian Association for Psychotherapy through Dance and Movement (ARPDM). The aim of this project is to facilitate access to culture and dance therapy for psychiatric patients, to support their social reintegration, and to offer hospital staff new ways of approaching patients.

The project is co-funded by the National Cultural Fund Administration and is carried out in partnership with Indie Box, the Estuar Foundation, and the Equilibrium Association. The "Support Circle" includes a series of activities such as dance therapy workshops in hospitals and the community for outpatient patients, film screenings, and contemporary dance performances. The purpose of these activities is to support the rehabilitation and reintegration of psychiatric patients, promote inclusion and diversity, and provide access to artistic events outside the cultural mainstream.



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- [STAD Project – „Social Transmission of Cognitive and Emotional States in the Care of Alzheimer’s Disease Patients”](#). This project aims to develop an intervention based on drama therapy and virtual reality for Alzheimer's patients. The main objective is to study the neurophysiological substrate of memory improvement in a social context.

The project initiators intend to investigate how the social context naturally influences memory using healthy subjects, both young and elderly, who do not exhibit symptoms of Alzheimer's. After obtaining the results, they will be applied to a group of patients with early-stage dementia to evaluate effectiveness in practice.

- [#LightUpBucharestInPurple projects](#). Implemented by Romanian Alzheimer Society and financed by Kaufland through the programme “In stare de bine” managed by FDSC. The #ABM project is structured around three main events (World Alzheimer's Day, Christmas Ball, and Spring Ball) organised to increase the visibility of the dementia issue. Throughout the project it is also planned to carry out an awareness and fundraising campaign. The project began on September 21, 2023, World Alzheimer's Day. The ALZ tried to bring together people living with dementia, their family members, civil society, mental health professionals, and ultimately the entire community. To address the isolation and stigmatisation faced by people living with dementia and family members, they offer them both direct services (storytelling and creative drama groups for people living with dementia, support groups for family members) and the opportunity to participate in events that progressively remove them from isolation (Memory Cafes for people living with dementia and family members and events for people living with dementia + family members and community).



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In **Greece**, there is currently a lack of documentation on creative and arts programs and activities for older people, such as theatrical, creative, cultural, and recreational activities provided by public and private agencies and groups. However, we know from professional contacts and personal observations that a variety of creative and theatrical activities are available to people over the age of 65, both with and without cognitive impairments. These activities are offered in both short- and long-term care settings. However, due to the lack of official data and relevant research, there is a dearth of knowledge concerning the types, objectives, and outcomes of creative opportunities, including theatrical interventions and activities available to the elderly. This information gap makes it difficult to fully understand the potential benefits and limitations of these activities for promoting creativity, socialisation, and overall well-being among older people. At the present, there has only been one study on this subject, carried out in 2019 by Kosti. Kosti's research centred on the utilisation of reminiscence drama among individuals aged 65 and over who were members of an older adults' day care centre (KAPH) located in a small Greek community. The study showed that, in line with other research, taking part in theatrical activities and acting can result in favourable effects on the overall health, well-being, and cognitive abilities of senior citizens.

The theatre initiatives for older adults across Greece, although not carried out systematically, aim to involve older adults in both audience and participatory roles. Some of the types of theatre initiatives conducted in the country are as follows:

- **Community Theatre Groups:** Many community centres in urban and rural areas of Greece host theatre groups specifically for older adults. These groups not only allow them to watch performances but also to participate in them, facilitating both cognitive engagement and physical activity.



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- **Therapeutic Theatre Workshops:** Workshops that combine elements of drama therapy and traditional theatre practices are becoming more popular. These sessions are designed to help older adults’ express emotions, recall memories, and improve communication skills.
- **Festivals and Events:** Some cultural festivals in Greece have begun to include specific programming for older adults, such as early matinee shows and plays that cater to issues relevant to the older generation.

Le Compagnie Malviste are operating in the area of Milan, **Italy** with four intergenerational and intercultural workshops that actively and creatively engage older people in the neighbourhoods of Figino, Quinto Romano, Quarto Cagnino, and Isola, our investigation has revealed that there are other realities nationwide using theatre to involve elderly individuals, with and without dementia, and as a tool to promote their health and psychosocial well-being. However, these are often projects carried out sporadically and only for a certain period. Other experiences, listed below, have a continuous nature or at least strive to be sustainable over time. They are:

- The workshop within the Alzheimer's village *Il paese ritrovato* in Monza (Lombardy);
- also in Monza, within the accommodations of *Oasi San Gerardo*, there is an intergenerational theatre project involving elderly residents and young individuals;
- The theatrical workshop *Il teatro e il benessere* carried out in Ferrara (Emilia-Romagna) by *APS Balamòs Teatro* and active since 2015;
- the workshop *Il Teatro dimenticato* within the Korian elderly residences in Guidonia (Lazio);
- The theatre workshop with and for people with Alzheimer's carried out by the cooperative *Nuove Risposte* in Trivigliano and Colleparado (Lazio);



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- Another theatre workshop for adults and elderly individuals in Cursi (Puglia).

Additionally, some festivals are organised annually, addressing the theme of neurodegenerative diseases and Alzheimer's disease in particular. These include the *Alzheimer Fest*, travelling throughout Italy and now in its seventh edition, and the *D-Festival* in Bergamo, already in its third edition.

At the national level, a network of Alzheimer's Cafés⁹ has developed that act as meeting places for people with disabilities and caregivers.

In **Portugal**, the theatrical productions of the Senior Theatre Group of Silves were developed using the memories, traditions, and local histories of the participants. This reminiscence-based method engaged the group in the artistic process by connecting personal, familial, and community aspects, thereby motivating participants through the inclusion of their identities (Gonçalves & Anica, 2018). This method not only facilitated a deep personal connection to the artistic process but also integrated individual and communal identities, thereby motivating participants through the inclusion of their personal narratives. Observations of the *Senior Theatre Group of Silves* during two distinct theatrical experiences revealed that theatre promotes well-being and improves the quality of life for older adults.

⁹ Born in 1997 from an idea of the Dutch doctor Bère Miesen, the Alzheimer Cafés are safe places where people with dementia, their family members and caregivers can meet informally and spend a few hours in a friendly atmosphere centered on listening. They can maintain social relations, fight the isolation and stigma that surrounds them, break the tiring routine of care, talk about their problems and the strategies found to solve them and learn more about the disease.



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Adapted activities such as a culturally themed *Bingo game* for people with dementia incorporated local heritage, traditional festivities, occupational activities, and seasonal themes, offering cognitive stimulation through familiar cultural elements (Lima & Penedos–Santiago, 2022). This culturally themed Bingo game, adapted for people with dementia, replaced traditional numbers with culturally significant illustrations, including local heritage and traditional festivities. This adaptation aimed to stimulate memory through familiar visual cues and foster social interaction by encouraging the sharing of related stories. Additionally, a colouring book project featuring significant monuments and sites from users' life experiences was developed to enhance memory stimulation through sensory engagement and relaxation (Lima & Penedos Santiago, 2022). These projects were well–received by users and highlighted the importance of flexible, inclusive materials that cater to different stages of dementia. The value of multidisciplinary collaboration in developing these resources was emphasised, and the need for affordable, adapted cognitive stimulation materials was noted. This project also indicated a market gap and called for further development and funding, with digital media suggested as a cost–effective solution to address potential digital illiteracy.

The interdisciplinary approach of the “*Laços*” *project* demonstrated that theatre provides significant biopsychosocial stimuli, improving the quality of life for older adults (Pratinha, 2019). Participation enhanced self–esteem mitigated negative self–images, and fostered friendships and intergenerational bonds, combating loneliness and promoting cultural exchange (Pratinha, 2019). The “Laços” project demonstrated theatre as a powerful tool for interdisciplinary interventions, providing significant biopsychosocial stimuli that improve the quality of life for older adults (Pratinha, 2019). Active participation in the project promoted self–esteem, challenged negative self–images, strengthened friendships, and fostered intergenerational bonds, combating loneliness, and encouraging cultural



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exchange. Theatre helped participants develop personal and social skills, promoting active ageing and greater community integration (Pratinha, 2019). Positive feedback from the public and participants emphasised the importance of continuing such projects, which enhance and value the identity of older adults, allowing them to experience later life with dignity and purpose (Pratinha, 2019; Trindade, 2020). Theatre also facilitated memory sharing across generations, as evidenced by the "Laços" project, where older and younger participants engaged in group exercises to evoke memories and foster creativity. Techniques such as space exploration, body expression, and improvisation helped develop mutual understanding and familiarity, promoting intergenerational bonding and enhancing participants' sense of identity and belonging (Pratinha, 2019). By integrating personal histories and cultural contexts into creative and cognitive interventions, these initiatives not only improve mental health and cognitive functions but also foster a deeper sense of identity, community belonging, and intergenerational connectivity. The 'Laços' project further exemplified the benefits of theatre for active ageing by focusing on overcoming physical limitations and discovering expressive potential through body movements (Pratinha, 2019). Intergenerational activities, such as rhythmic exercises and relaxation techniques, promoted physical and emotional well-being, combating isolation and fostering social connections. These activities also stimulated cognition, communication, and expression, thereby enhancing self-esteem and confidence among participants.

A *larger project*, involving Alzheimer Portugal and various Portuguese universities, is being planned to create a national multidisciplinary network (Lima & Penedos-Santiago, 2022). This project aims to produce cognitive stimulation materials that reflect regional cultures and secure funding for research, usability tests, and production. The author's experiences with theatre in Brazil and voluntary work in Lisbon influenced their perspective, highlighting theatre as a social tool. Collaboration with gerontology



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professionals in Portugal revealed theatre's potential to reinforce elderly memories. Studies on the Active Theatre Group of UATI-UEPG investigated the creation of a theatrical piece based on participants' memories, aiming to involve older adults in the scriptwriting process, valuing their experiences, and promoting autonomy (Lima & Penedos-Santiago, 2022).

Conclusions on the Desk Review

Based on the foregoing, it is clear that there is a significant gap in the existing literature on creativity among older adults, as well as policies affecting the elderly. Our literature review, analysis of national reports, and data collection from multiple sources on active and healthy ageing revealed a scarcity of services to address the complex and diverse issues that older adults face. This inadequacy is most visible among low-income people, marginalised communities, and vulnerable groups such as LGBTQ+ seniors, refugees, and older women. Concerning dementia-Alzheimer issues specifically, the desk review reveals significant gaps in research and services for people living with dementia and Alzheimer's, including creative services, as well as a lack of critical support structures.



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SECTION 3. FINDINGS FROM FOCUS GROUPS

Focus Groups

Participants

The focus group discussions took place at the facilities of the ERASMUS partners' organisations, such as Asociatia Habilitas and Societatea Romana Alzheimer in Romania, EDRA in Greece, *Le Compagnie Malviste* in Italy and Rightchallenge Padre José Coelho Social Centre in Portugal. Participants were recruited from partners' organisations' pools. The inclusion criteria required participants to have previous experience in creative, theatrical, or drama-based activities, whether as professionals, amateurs, or hobbyists.

In total, a sample of 47 participants recruited and participated in the 4 focus groups. In Table 1, the characteristics of the participants by country are presented.

Table 2. Characteristics of participants in focus groups by country and role

Participants		
Country	Role	N
Romania	Caregivers	1
	Professionals/artists	6
	Total	7
Greece	Caregivers	3
	Professionals/artists	3



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	Older adults	6
	Total	12
Italy	Caregivers	2
	Professionals/artists	3
	Older adults	11
	Total	16
Portugal	Professionals/caregivers	3
	Older adults	9
	Total	12
TOTAL		47

Each focus group lasted between one to two hours and was recorded and transcribed verbatim. Each participant was informed about the content of the project beforehand. Informed consent was obtained to ensure that the participants were aware of the objective of the study and the focus group, the confidentiality of the information collected, and the voluntary nature of their participation.

By conducting a focus group with participants in diverse roles, we have satisfied the heterogeneity criterion. This approach ensures that we have gathered a wide range of perspectives and insights, making our findings more comprehensive and valuable.

Participants shared their previous experiences, perceptions, and knowledge about implementing or participating in theatrical activities from a variety of



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perspectives (professionals, caregivers, and seniors). Open-ended questions that emerged from the literature review were used to allow participants to provide qualitative feedback.

Data Analysis

The focus group data was analysed using the thematic analysis methodology (Braun & Clarke, 2006). The analysis followed the following steps: 1) identifying relevant themes from each transcript (each question represented a theme); 2) coding themes and sub-themes; 3) interpreting themes.

The analysis identified four major themes based on the primary thematic areas that guided the focus group discussion following the literature review. The emerging themes are divided into the following areas:

1. Previous experience in implementing or participating in drama or theatrical activities with older adults (types of drama or theatrical activities)
2. Usefulness of the activities and skills developed through relevant experience (examples)
3. Challenges or obstacles encountered while attempting to implement drama or theatre-related activities.
4. Enablers to put theatre or drama-related activities into practice. Areas of growth and improvement.

Findings

Four themes emerged from the data analysis. The findings for each topic area are presented as follows:

- 1. Previous experience in implementing or participating in drama or theatrical activities with older adults (types of drama or theatrical activities)**

All the participants had previous experience participating in drama or



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theatrical activities since this was one of the inclusion criteria for participating in the focus group.

In **Romania**, one person was a family member and volunteer, all the others were health professionals or actors working with older people. The majority of them had experience in working with dementia through theatrical activities involving professional and amateur theatre and dance therapy.

In **Greece**, the main forms of drama or theatrical activities they have participated in were theatrical activities in general and role-playing as part of a drama therapy group for older adults. One artist was an occupational therapist using psychodrama and drama therapy in their work, as well as experiential games, like role-playing in her current job with people with mental disorders. She has previous experience participating in a theatre group with young adults with disabilities and older adults with cerebral palsy. Also, she participated in a choir. The second artist was a member of a young people with developmental disorders theatre group, using improvisations, theatrical play, and various other similar activities in her daily practice. The third artist had participated in a group that used theatre and psychodrama techniques. They have used role playing a lot in their work, to help build connections among team members. They also, use role-playing, psychokinetic games, experiential activities, and journal writing not only with tenants but with professionals, as well to strengthen the interpersonal relations among the group members. The one caregiver has been involved in theater for a long time, firstly in a youth group using theatre to raise awareness about social issues such as racism and now in the friendship clubs for older adults, conducting support groups. The second caregiver was a social work student doing his internship at an older adults facility and has been involved in various painting groups, drama, choir, and therapy groups and also participated in the theatre group of this organisation. Older adults have participated in music groups, as well as various theatrical activities in the organisations they participate in, and have watched theatrical plays as part of recreational



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activities.

In **Italy**, participants had different experiences with *Teatro Periferico*, *Teatro del Buratto*, *ZonaK* and in various projects with *Le Compagnie Malviste*. They all agreed that Le Compagnie Malviste's production of *Pane e Pomodoro* was the most remarkable theatrical event they had ever experienced. A dancer mentioned an attempt of hers with an intergenerational approach where she dedicated herself to integrate different forms of dance in various contexts, both in terms of age and physical-motor skills. On the other hand, the psychologist had experience in designing and conducting Fragile Theatre workshops – Handle with Care in Alzheimer's Cafés, RSA and in schools. Regarding the latter, in particular, she participated in intergenerational workshops with elderly and young students.

In **Portugal**, regarding the theatre activities used, professional caregivers (N=3) reported using theatrical activities based on imagination and memory, as well as activities based on the elderly people's everyday life (present or mnemonic). Additionally, they also emphasised the importance of complementing theatrical activities with physical activities or body movements.

2. Usefulness of the activities and skills developed through relevant experience (examples)

In **Romania**, many participants spoke about the value of engaging older people in creative activities such as theatre and dance. This theme revolves around the empowerment of seniors, enabling them to express themselves and engage with their communities actively. Creative activities provide a platform for continuous learning and social interaction, which are crucial for maintaining quality of life. Further, one participant highlighted the importance of empathy and adaptability in caregiving by quoting Michael Verde, founder of Memory Bridge¹⁰: *“If you really want to know what, how to communicate*

¹⁰ Michael Verde founded Memory Bridge in 2003. To date, Memory Bridge has connected



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with somebody living with dementia, who's lost their ability to communicate, then you have to get your ego out of the way, your own ego out of the way, in order to love the person for who they are becoming, not who you want them to be.”

The discussions of Romanian participants highlight the significant role that the creative arts play in enhancing the lives of people with dementia. Engaging in theatre, dance, and visual arts helps maintain connections with life, supports personal expression, and improves communication. Participants underscore the therapeutic benefits of the arts, which can elevate well-being and social interaction among people living with dementia.

In **Greece**, participants found the theatrical activities they participated in to be both useful and enjoyable, and they stated that they benefited on a personal level in terms of skills and the enhancement of psychosocial elements such as self-expression, self-confidence, and self-esteem. Specifically, one of the artists mentioned that she gained benefits on a personal level as a therapist since she identified the multitude and variety of benefits of theatrical activities. She was always an introvert, shy, and wanted motivation to participate in groups. Since she joined the theatrical group in one of her previous jobs, her psych. elements, such as self-expression, self-confidence, and self-esteem, were automatically stimulated. Also, artists acknowledged the recreational benefits for people with disabilities and how these forms of art helped them to greatly enhance parts of their self-image, self-esteem, and self-confidence, feeling that they do something important through their performance and the applause they gain. A therapist recognised that this form of art strongly combated the stigma of people with disabilities involved through their interaction with the community during their performances.

The benefits for older adults are numerous. Firstly, they significantly improve

over 8,000 people with and without dementia to each other in one-to-one relationships.

(source: <https://www.memorybridge.org/board/>)



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their cognitive functions because they must learn something short, concentrate, pay attention, and memorise, all of which are important factors, especially for older people; additionally, they provide entertainment and, of course, enhance their imagination and creativity. All these are elements that the therapists want to stimulate, especially in closed contexts, such as residential care settings. These activities are fun and, of course, connect people, bring them closer together because they are working towards a common goal, to get something out of that moment.

“It’s like at that moment, they are a tree that slowly grows from a seed and opens its branches. In other words, they enter a role that includes many elements of creativity and imagination, and they do something together; having fun.” – (Gr, Artist 1)

One of the caregivers emphasised the importance of the interaction between different people in the theatrical activities, as when they participated in an older adults’ theatrical group, the older adults liked the interaction they had with a younger person and found it helpful for the group. Most of the participants agreed that participating in all these kinds of activities helps participants express themselves and their feelings.

In **Italy**, most of the participants gave the same answer, namely that through theatre, a person can learn to overcome shyness and be more courageous. Here are some responses:

“You have more courage, you are more relaxed... it’s very nice to go and see it and especially to do theatre.” (It, Older adult 1)

“The first time I went on stage, I thought I couldn’t speak... but then I enjoyed acting... Before, I was more ashamed of everything, now a little less.” (It, Older adult 2)

“I think that... especially for those who may be a bit shy and are not used



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to doing theatre...theatre also means coming here and freeing yourself by doing something that maybe you wouldn't do off stage." (It, Older adult 3)

Another participant confessed that, having taught him to get into character, he can now assert his opinion better in case of an argument. A caregiver talked about learning to know the inner aspects of people, what they have inside, and how, unlike before, when she didn't even have the desire and enthusiasm, it is now something natural and spontaneous for her. The dancer explained how the main goals and teachings of community dance are: to create a community where a person feels welcomed and stimulated; to express concepts, emotions and reflections through movement rather than words; finally, to accept rules and modes of relationship not imposed from above but shared and based on listening and mutual respect. Without a doubt, these are goals that can be achieved even for brief moments during a lesson or may be found from time to time and then preserved and proposed as collective achievements.

Regarding the skills developed through experiences, the psychologist talked about developing the ability to be sensitive to the group's atmosphere, which is useful to understand when and how to propose a certain facilitator or activity. Another skill is mediating in bringing together the needs of different people, such as those of caregivers and those of their charges.

"I remember that often during the workshops, it was necessary to reassure the caregiver about their desire to take care, which also involved trying to hide what they interpreted as bad figures of their charges in front of the group ... such as not answering a question or not performing a gesture in the same way shown by the facilitator." (It, Professional 1)

One of the older people added how much she enjoyed performing not only on stage in various theatres in the area but also with students at school,



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emphasising the importance of the interactions between different people in the theatrical activities, like younger people. Even not recalling the performances or the roles and lines she had, a lady remembers when she used to sing.

Concerning the utility of theatrical activities, some participants mentioned not considering themselves capable of getting on stage and acting, but now they enjoy it a lot and consider themselves good actors or writers. Others emphasised that theatre gives courage and encourages daring because it allows people to approach, unite and assimilate with each other, almost becoming a second family where everyone helps and supports the other when someone is experiencing fragility – whether physical, cognitive, or behavioural—or going through a difficult time and needs support.

A woman, recalling how she used to organise many shows with friends even as a child, confessed how wonderful it is to recreate them now, how it helps to stay active, but above all to bring out and face everything that is inside.

Another considered the activities very useful because they allow them to socialise and stimulate the mind and memory:

“I like it because we are in contact with people... everyone speaks their mind and this stimulates your brain.” (It, Older adult 4)

Both the actress and the dancer reported how every activity carried out in the context of entertainment, performance, and public restitution had a sense and effect of professional and human growth for them. Being together and organising theatrical workshop activities, autobiographical paths, or interventions based on the principles of dance therapy and movement verbalization deeply involved them, not only on a professional level.

Given the wide variety of possible theatrical activities, the psychologist mentioned that the usefulness of an activity cannot be defined based on the



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activity itself but rather on how it is used and whether it is used at the right time and for the right group. Another fundamental characteristic of proposing activities is an open and non-judgmental approach to the outcomes that a proposal can bring to the group, allowing oneself to be surprised and able to appreciate everything that the group builds from the stimulus proposed. Summarising, she found that all activities proposed in a workshop can be useful if proposed from this perspective.

In **Portugal**, it was pointed out by most participants that theatrical activities, by themselves, brought benefits, and were good for the older adults who were the target of such activities.

“(...) And when presenting the activity, we, as professionals, know how to present the activity in an enticing way for them. Any activity is always better than spending the day on the couch watching TV. So, the benefit is already there, the problem is to get them to participate to enjoy these types of activities.” (Pt, Care Professional P1)

The main benefits highlighted were building relationships, which contribute to combating loneliness; promoting active ageing; and deep reflection on oneself and one's memories.

“Friendship, because we have a group. Because when there are these (theatrical and artistic) activities, we go there. We all go together. So, we go and do all those things.” (Pt, Older Adult P12)

“But, well, this kind of activity allows us to go to our memories and come back and understand that in the end, we were never alone.” (Pt, P5)

“For healthy ageing, people need to be well treated. That's the fundamental part. The activities that are carried out are activities that allow to combat the loneliness that often awaits them. If they only walked around here being taken care of, without any other kind of



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stimulation, people would only become more 'shrunk' and think about their problems.” (Pt, Older Adult P2)

“By carrying out this type of more theatrical and artistic activities, we improve their ageing, not only by providing a small community among themselves but also the possibility of talking about themselves in a reflective way. This is very important. Many people don't like to talk about themselves or their lives, but by creating the opportunity to talk about themselves in a different way, to retell their story, it gives them freedom. Don't you feel that?” (Pt, Care Professional P1)

Combating loneliness, promoting active ageing, and the profound reflection generated are points that interrelate. Combating loneliness is done through promoting active ageing, and this is supported by promoting reflection of older adults on themselves and their memories, which allows the possibility of revisiting them and assigning them new meaning. These new configurations of themselves and their memories allow them to ensure physical and psychological well-being.

3. Challenges or obstacles encountered while attempting to implement drama or theatre-related activities.

In **Romania**, a significant theme that emerged was the various barriers to implementing creative programs, including financial constraints, staffing challenges, and institutional resistance. These discussions often focus on practical strategies for overcoming these barriers to enhance the accessibility and impact of arts-based interventions.

In **Greece**, almost all the participants mentioned that they hadn't faced any obstacles while attempting to implement drama or theatre-related activities. Two of the artists mentioned that the only challenge they faced had to do with the fear of criticism, exposure, and thinking about not meeting the expectations of the performance that they may feel or the participants in



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theatrical activities feel when they have to present a performance in public.

In **Italy**, the main obstacle faced by almost all participants was shyness—the embarrassment of being able to get on stage and act in front of an audience. Some confessed to having difficulty speaking in front of everyone due to their shy nature, while others mentioned not being able to open up quickly and easily.

A participant mentioned that she doesn't find difficulties but acknowledges the importance of learning to be together with others, calmly expressing what one thinks, listening to the expert and the professional who guides the group, as well as all the other members. She then talks about the need to develop a series of shared rules, often lacking, to allow the facilitator to lead the activity better, relying on everyone's collaboration.

“For example, we have to listen to each other... when someone speaks, others must have the courtesy to be silent... especially when one of the facilitators speaks. I suggest doing this, but without hostility... I'm talking about simple, minimal rules to be well together in a space.” (It, Older adult 5)

Another participant mentioned as an obstacle the lack of means of transport, which often hinders reaching the places where such activities are organised.

The professionals reported that dialogue with institutions often does not develop satisfactorily and that activities like those in question are perceived as superfluous. Other obstacles include the ability to explain and involve those who approach as listeners or educational support, as well as the ability to listen in turn and discern what comes from others, whether colleagues or recipients. Referring to her experience in leading workshops, the psychologist talked about another challenge, namely the prejudice regarding what an elderly person can or cannot do and understand or whether it can benefit them; she mentioned how activities that go somewhat against the general view



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of the elderly and people with Alzheimer's disease often encounter resistance.

In **Portugal**, the difficulties pointed out about theatrical activities can be located in two subgroups: the difficulties arising from ageing, which hinder the execution of some activities and the predisposition to participate in them; and the difficulties stemming from a lack of human and economic resources to conduct theatrical activities that align with the users' needs.

“And we have to understand... 'oh, I can't do that anymore, I'm so old'... It's like that, the years don't weigh, it's the problems that come.” (Pt, Older Adult P5)

“Yes, of course, those who can. We, happily or unfortunately, have quite a few older people who are vulnerable in terms of motor and cognitive levels. Therefore, moments of social interaction, or rather the activities we develop, that we try to provide for our users, have to be different. We can't act the same with all of them.” (Pt, Care Professional P1)

“The main barriers are the fact that we have few financial and human resources to make these activities a routine. We are a social centre, not a theatre association, so we have to respond not only to more cognitive, interpretative needs, but also to basic needs. And this implies a very large management, which does not allow us to just focus on theatrical and artistic activities.” (Pt, Care Professional P1)

These excerpts show that theatrical activities with the elderly population entail some difficulties inherent to the target population as well as to the institution where they take place, since they are also conducted by the professional caregivers themselves, who often cannot solely focus on the development of these activities because they are also responsible for assisting with other types of needs that may arise. These difficulties also include a lack of motivation to participate in the activities.



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“That’s not possible. There are people who are not motivated for that.”
(Pt, Older Adult P6)

“There are indeed many people not motivated to participate in this type of activity.” (Pt, Care Professional P1)

Some of this demotivation was also associated with the ageing process itself, with all its complications, which discourages people from even becoming interested. This point was raised by some participants as either issues of shame or of a pre-existing demotivation upon their stay at the social centre.

“There are people who have no desire at all. Some people here don’t even want to be motivated.” (Pt, Older Adult P5)

“Some people might be because of shame.” (Pt, Older Adult P7)

“Some people might be. But most of the people who don’t participate, it’s because they don’t want to do anything at all.” (Pt, Older Adult P5)

4. Enablers to put theatre or drama-related activities into practice. Areas of growth and improvement.

In **Romania**, almost all the participants were professionals, and gave a great insight on the enablers, areas of growth and improvement for theatre or drama-related activities, as well as proposed activities to be applied. Specifically, the focus group discussion outlined key abilities for training programs aiming at engaging older people, especially those with dementia, emphasising playfulness, improvisation, deep listening, intensive interaction, and ability to express attitudes and reactions, and a certain practical movement if needed for the role. These abilities aim to foster joy, respect, and a deeper connection by recognizing and valuing the individual beyond their condition. Celebrating each person’s unique contributions through creative expressions like theatre and acknowledging their stories enhances their sense of worth and identity. Humour was highlighted as a tool for creating positive



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interactions. Overall, these skills are crucial for meaningful engagement, ensuring that elderly individuals feel seen, heard, and valued.

The importance of maintaining a playful attitude was emphasised, not in a patronising way, but in a manner that’s engaging and childlike, encouraging joy and open-hearted interaction. Also, listening skills that help see the person beyond the condition were highlighted, too.

“Learning to really listen and to hear, to kind of get alongside people and to listen, and to see the person, not the condition. That’s the most important thing: to see the person and not the disease, not the condition, you see the disease, you don’t see the person.” (Ro, Artist/ Dance Movement Psychotherapist)

Some of the ideas for training content on drama and theatrical activities were proposed. By one participant the involvement in dementia care mapping was discussed. Care mapping is a tool used to assess and improve the quality of care in care settings. This method helps caregivers understand the experiences of those with dementia from a first-person perspective, ensuring their emotional and psychological needs are met.

Another idea was workshops where artists learn about dementia care and health professionals learn about integrating theatre and art into care practices.

A family member mentioned the idea of a play that involves creating a theatrical piece where participants, likely older individuals, can share and dramatise their daily routines and the creative strategies they use to manage challenges associated with their conditions. This concept aims to portray these everyday coping mechanisms in a playful and engaging way, allowing individuals to express themselves, share their experiences, and possibly educate others on how they maintain their autonomy and manage their health independently.



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Another participant shared his experience of creating and touring a theatrical piece titled "Around the World in 80 Minutes." In this interactive theatre show, he played the role of Captain Croon, a cruise ship captain, while his colleague, nicknamed Dynamite, performed alongside him. They travelled with a portable set, performing for elderly residents in care homes, simulating a cruise ship environment. The show included various international segments, like a Parisian song in Paris, a Mexican hat dance in Mexico, and other cultural performances, complete with costume changes and engaging subplots, such as a playful romantic intrigue between the Captain and Dynamite. This immersive experience aimed to entertain and stimulate the elderly audience through music, dance, and theatrical storytelling, providing a creative and engaging escape around the world.

In **Greece**, according to artists, multidimensional groups work better. In other words, groups that both professionals and recipients could participate in. Older adults should be prepared by professionals in terms of their cognitive skills, memory perception, and all the elements considered necessary, to understand and participate in theatrical activities. Also, older adults must be prepared by professionals concerning the part of exposing themselves, which can also be stressful for some of them. Additionally, appropriate skills and education are necessary in order to work as a professional conducting theatre or drama-related activities, and especially skills for emotions management, like being trained in drama therapy.

“There is a question about what kind of professional you are. That means, when you do a theatre group with people receiving mental health services, what kind of professional are you? Are you a drama therapist? Are you a psychologist? Are you an artist? Because theatre can open up an emotion and this emotion can take the person many years back to time, so they may also need the support of a mental health professional.” (Gr, Artist 1)



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“This is the difference between theatre and therapeutic theatre. These two are unrelated; the same tools are used but the goal is different. In the first case, the goal is entertainment. In the second case, the goal is therapeutic for the individuals, focusing on breaking stigma, and as part of social integration. To show the skills you have, your capabilities and the important things you do as a recipient of mental health services. That's why the professional has to be sensitive to the feelings of frustration in case something goes wrong and be able to manage it.”
(Gr, Artist 2)

Another suggestion was to promote intergenerational actions, where the benefits are essentially ambiguous, because, e.g., children become familiar with the potential of older people and learn to accept differences, and older people get joy from this interaction.

“In the previous work, we networked with the community and children from primary schools played with the service recipients who had mobility difficulties and psychiatric diagnosis, and this was great because it was an intergenerational action. Also, the children were in contact with this specific group of people and there was a social message in this, preparing children to accept the difference.” (Gr, Artist 2)

“I have been in a dementia organisation that has a kindergarten right next to it. So, once a month, the kindergarten teachers take the children to visit the dementia organisation and spend the day there, drawing, dancing, playing, making sketches.” (Gr, Artist 1)

One of the caregivers mentioned that these activities should not be too focused on the result (e.g., a theatrical play), but on the procedure. Focusing on the results could be very stressful for the participants. The most important thing is to be in a nice environment, to have fun, to want to participate, and



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not be stressed about the result. To focus more on the procedure, to feel good, and to express themselves. Lastly, two of the older adults agreed and highlighted the importance of expressing emotions and the joy of participating in theatrical activities.

In **Italy**, it was mainly the experts who responded to the question. The other participants interpreted the question as referring to professionals in the field.

The actress and social theatre operator open the discussion by emphasising that even ‘*if we are not in a space with curtains, a stage, an audience, etc., we can still do theatre, tell and listen to stories just to remember them and above all to share them*’. According to her, the fundamental aspects underlying everything, which become facilitators themselves, are speaking the same language and the belief that everyone is at the same level, thus welcoming all people experiencing any type of fragility, whether physical, cognitive, or behavioural.

“I know that when two people speak the same language, they understand each other... We must think that we are doing theatre, that every gesture counts, and every word has value because it's important that someone remembers it...”
(It, Artist 1)

The dancer attributed the role of facilitator to collaboration with friends and colleagues with whom she can compare herself and share experiences and suggestions at a theoretical, training and problem-solving level. She defines “*irreplaceable nourishment*” the many training and in-depth courses she has attended in her professional career.

For the psychologist, one of the most effective facilitators was the use of music and musical instruments:

“With a direct hook to people's emotional world, it is possible to generate changes in the group very quickly and create an uninhibited atmosphere that allows people to express themselves freely according to their peculiarities.” (It,



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Professional 1)

As another facilitator, she has always liked to use objects, which often awaken emotions, thoughts and memories and can help as a medium in relationships.

As for the suggestions, the elderly and caregivers decide to choose one or a few words each to summarise the meeting and express wishes for future positive developments. Here are the responses: *“Alliance / Union / Getting along / Freedom / Moving – jumping – dancing / Mutual listening / Trust and reliance / Listening / No criticism / Meeting halfway – understanding and empathising.”*

The actress and social theatre operator invited to always maintain a hint of curiosity, to be more curious about what can happen and especially for something unknown.

The dancer concluded by saying that, after many dance workshops, followed and then conducted, and all the different people she has met, from dance professionals to the elderly, the only answer is that she is now just happy to work in the contexts that are proposed to her. The real resource is to be in harmony first of all with oneself, to listen to oneself and consider objectively, as much as possible, one's limits and strengths, one's characteristics and weaknesses.

Regarding the workshops and activities, she has experienced, the psychologist mentioned:

“One thing I have always liked is the fact that both frail elderly people and their caregivers could participate. I believe that working for/with those who take care is fundamental from a broad preventive perspective and also in the future processing of grief.” (It, Professional 1)

She therefore believes that an area of improvement in these activities could be to dedicate sessions and specific projects to caregivers, as was done during



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the pandemic with psychological listening desks.

In **Portugal**, motivation emerged as a significant theme for the focus group, mainly because its absence was evident as a barrier to participation in theatrical activities. Although this theme also falls under motivational issues, it is associated with facilitating the participation of elderly people in these theatrical/artistic activities.

One of the reasons cited that enhances motivation for participation in activities is previous experience in theatre. Some of the older participants in the focus group mentioned having had some experience when they were younger.

“Yes... I was already doing theatre at 5 years old. I even played Saint Martha. I've always liked these things, always liked being a 'clown', so to speak. But I really like these art-related things.” (Pt, Older Adult P5)

In addition to not liking monotony, another reason also pointed out as motivation for participation was the realisation of different activities during their stay at the social centre.

“We do many different things here. We do both painting and sewing. And we've also done sculpture. I really liked painting. I liked it and I still do.” (Pt, Older Adult P12)

Besides having different activities, the importance of combining physical activities with the theatrical component, as well as including active participation by users in defining the activities and how they can be carried out, were highlighted.

“And promote physical activity. When we do theatrical activities, we try to incorporate a physical aspect. And the fact that there is movement and physical activity makes them more engaged and participatory in this type of activity. It's like a gateway.” (Pt, Care Professional P1)



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“And when they feel they have an active role in that activity. In other words, when they don't feel like they're doing something just because we're telling them to, they also have a say in it.” (Pt, Care Professional P3)

Professional caregivers emphasised, during the group discussion session, the importance of networking in order to plan and execute theatrical activities with the users. This theme aligns with one of the difficulties reported by the participants: workload overload, meaning they cannot solely focus on conducting theatrical activity sessions, as they are also responsible for ensuring the basic needs of the elderly. Networking helps to mitigate some of the difficulties mentioned.

“We advocate for networking. That is, we believe that different people with different skills can do something different together. Therefore, we try to maintain a collaborative relationship with different professionals involved, because in the case of artistic activities, sometimes it's someone from outside. They advocate for collaborative work with different expertise, preferring specialists to lead the different proposed activities.” (Pt, Care Professional P3)

Although theatrical activities were deemed beneficial when applied to a group of older people, they were occasionally insufficient, either as motivators for older people of older ages (as previously demonstrated by the theme of difficulties) or in terms of promoting psychological well-being for all participants. Part of this problem elaborates on the need to adapt these theatrical activities.

“Yes, of course, for those who can. We, fortunately or unfortunately, have many users who are vulnerable in terms of motor and cognitive abilities. Therefore, the moments of socialisation, or the activities we develop, that we try to provide to our users, have to be different. We cannot act in the same way with all of them.” (Pt, Care Professional P1)

“When we think about and execute our artistic activities, even those that



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involve more physicality and representation, we have to consider these limitations and know how to adapt all ages to all people.” (Pt, Care Professional P3)

Theatrical activities need to be planned according to the different limitations that different older people will present. The fact that users also reported feeling the need to have active participation during these activities points to the importance of theatrical activities being built with the users themselves, considering their limitations and interests within the spectrum of theatrical activities.

Discussion and Conclusions

The goal of using focus group methodology was to better understand the experiences, perceptions, and knowledge of different perspectives on the implementation of theatrical activities (professional caregivers, informal caregivers, and elderly individuals). These focus groups are an essential part of the operationalisation of an Analysis and Evaluation (WP2) on the role of theatre in enhancing the health and psychological well-being of older adults, with and without dementia.

The participants in these focus groups were both older adults and professional caregivers. When discussing the role that theatrical activities play in the mental health of older people, they mentioned both the Difficulties, Benefits, Motivation for participation, the importance of Networking, and Adaptation. These themes were all interconnected under the organising concept "Theatrical Activities in Ageing."

Regarding difficulties, it became evident that both the elderly and caregivers face obstacles in engaging in theatrical activities. Issues such as physical and financial limitations were highlighted, emphasising the need for adequate resources and adaptive strategies to overcome such barriers. Lack of motivation was also a concern, related to both the ageing process and the



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availability, and sometimes lack of time for planning and executing stimulating activities.

On the other hand, the participants widely recognised the benefits of theatrical activities. Building relationships, combating loneliness, and reflecting on memories were highlighted as positive aspects of these practices. These benefits are intrinsically linked to the concept of active ageing, which promotes the physical and psychological well-being of the elderly.

Motivation emerged as a key factor in participation in theatrical activities. Previous experience in theatre, the variety of activities offered, and the opportunity for active participation were identified as important drivers. These elements underscore the importance of creating a stimulating environment, even for the elderly.

Regarding the type of activities, there was an emphasis on imagination, memory, and everyday experiences of the elderly. Adapting these activities to the needs and interests was highlighted as essential to ensure the participation and benefit of all involved.

Finally, networking and the need for adaptation were recognized as crucial aspects for the success of theatrical activities. Collaboration among professionals from different areas and flexibility in approaching activities are essential to meeting the diverse needs and abilities of the elderly.

In conclusion, the results highlight the importance of theatrical activities in ageing but also underscore the need for adaptive and collaborative approaches to maximise their positive impact. It is important to note that not only the expertise of those conducting the theatrical activity sessions matters, but also the creation of synergies with other professionals or organisations to optimise the benefit of these activities for the elderly population: first, because involving different professionals and enhancing their collaboration reduces the workload burden on professionals, increasing the effectiveness of the



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activities; and second, because the population in question requires various types of care, not just those addressed by theatrical activities. Different types of care, when addressed, also contribute to greater participation of the elderly population in theatrical activities.

These conclusions provide valuable guidance for the implementation of effective theatrical activity programs in elderly care settings.



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SECTION 4.

FINDINGS FROM THEATRICAL ACTIVITIES

Theatrical activities

The purpose of the theatrical activities that were implemented during the project's fieldwork phase was to identify the needs for WP3 and WP4. Partner organisations didn't need to organise the same activities since they operate in different cultural and social contexts. However, the activities should be quick, simple to plan and carry out, and suitable for individuals with and without dementia–Alzheimer and other cognitive impairments.

Two facilitators conducted the activities. At least one of them had a background in theatre/drama or creativity, such as actors, drama therapists, cultural operators, etc. The other facilitator was a social or health scientist with experience in working with older people, such as social workers, psychologists, nurses, etc. Based on their experience, LCM proposed to other partners a range of theatrical exercises/activities and provided explanations/guidelines to the operators who implemented the activities in the other countries.

Participants

Participants were selected from organisations' participant pools since all partner organisations had previous experience working with the targeted populations. All participants had previous experience using creative, theatrical, or drama–based activities, whether as professionals, amateurs, or hobbyists. The following criteria were applied for inclusion:



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- Social, cultural, and health sector operators and artists
- Caregivers (formal and non-formal caregivers, for example, family members, etc.)
- Elderly people (65+) with legal capacity

Table 3. Characteristics of participants in theatrical activities by country and role

Participants		
Country	Role	N
Romania	Informal caregivers or family members	4
	Older adults	4
	Professionals	5
	Total	13
Greece	Caregivers	3
	Professionals/artists	3
	Older adults	6
	Total	12
Italy	Caregivers	3
	Older adults	11
	Total	13
Portugal	Professionals/caregivers	3



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	Older adults	9
	Total	12
TOTAL		51

In Romania, the participant group consisted of four informal caregivers or family members, all of whom were women, and four older adults, individuals with dementia, including one woman and three men. The participants included three couples (husband and wife) and one caregiver whose mother was unable to attend. Additionally, one elderly participant with dementia attended without a caregiver.

The Romanian Alzheimer Society was represented by 5 professionals (psychiatrists, psychologist, nurse, facilitator) along with one representative from Habilitas, – Center for Resources and Professional Training. The feedback was collected from family members and older people participants (in total 8).

Table 4: Theatrical activities in Romania

Activities	Intervention Idea	Plan/ Rationale
Activity 1: Ice-breaking exercise	Each participant was invited to state their name, perform a characteristic gesture, and then throw a ball to another participant.	This simple game served to break the ice and introduce a dynamic note.
Activity 2: “Creating Connection in the Group”	Three balls were used to stimulate attention and connectivity among participants.	The passing of the balls from one participant to another brought a smile to most faces, creating a



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		sense of joy and ease within the group.
Activity 3: Music and dance	Scarves distributed to all participants and balloons added to create a lively atmosphere.	The music encouraged everyone to get up from their seats and move rhythmically.
Activity 4: Reading a poem about spring	The poem was written by a support group of people with dementia and their caregivers. Additionally, a poem by Nichitatănescu (“In dulcele stil clasic”) was included.	The poem was read aloud by participants who felt a deep connection with the words and sentiments expressed.

Through these diverse and engaging activities, the session succeeded in creating a safe and encouraging space where participants felt understood and connected, thus underscoring the importance of support groups in managing the emotional and social issues of caregivers and people with dementia.

In **Greece**, the same participants who participated in the focus group participated in the theatrical activities as well. A drama therapist was in charge of organising the activities, which took place at EDRA's facilities.

Table 5: Theatrical activities in Greece

Activities	Intervention Idea	Plan/ Rationale
Activity 1: Group opening with simple experiential activities	We met the members in the circle, seated, and the coordinator gave a brief explanation of our	The music encouraged everyone to get up from their seats and move rhythmically.



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	<p>meeting today. We stood up, looked at the person next to us, the person across from us, the person diagonally across from us, and smiled politely at each other. Only the calm voice of the coordinator could be heard directing the members. We closed our eyes and concentrated on our breathing. Then we began to make further contact with ourselves, touching our bodies sometimes gently, sometimes with strokes. We opened our eyes. We moved from our position, arms and legs in any way we wanted, to expel all the tension of the day from above us and somehow we focused on the here – and now...</p> <p>*Activities 6–9–12 followed</p>	
<p>Activity 2: “The Piano”</p>	<p>While listening to Rondo Alla Turka, the group was invited to play the Maestro with his</p>	<ul style="list-style-type: none"> ● Discovery of the great role of theatre activities in our lives.



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	<p>orchestra, in a musical extravaganza at the Athens Concert Hall. The Maestro held his imaginary baguette and conducted the orchestra, with the great musicians holding their hands out in front of them and playing their imaginary piano. From this fantastic concert, proceeds were allegedly collected for charitable and animal-friendly purposes and at the end, each of us declared the body to which these proceeds would be given.</p>	<ul style="list-style-type: none"> ● Entertainment/ creating a good mood and a pleasant atmosphere. ● Enhancing team skills (e.g. team bonding, building trust, accomplishing a common goal, building cooperation and team dynamics, mutual respect, others) ● Encouraging psychosocial skills (e.g. overcoming fear of exposure, developing and taking responsibility, self-confidence, self-esteem, self-expression, self-image, non-verbal communication-body expression, others) ● Activating the imagination and
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		<p>creativity of the members</p> <ul style="list-style-type: none"> ● Tuning, rhythm sequence ● Broader, physical – mental – emotional activation
<p>Activity 3: “he Gift”</p>	<p>While listening to “The Silence of Beethoven”, we each donated a ball of knitting wool to a co-member of our choice. While offering the ball to the other person, we simultaneously kept a cricket for ourselves. We then moved freely around the space, dancing. The balls of wool slowly unfolded, until a network was formed that resembled a spider’s web, and this finally united us all. We raised our mast high, then lowered it, so we saw ourselves and our team from different levels but “entangled” within this network. Now in a circular arrangement, and after the music stopped, we exchanged thoughts</p>	<ul style="list-style-type: none"> ● Discovery of the great role of theatre activities in our lives. ● Entertainment/ creating a good mood and a pleasant atmosphere. ● Enhancing team skills (e.g. team bonding, building trust, accomplishing a common goal, building cooperation and team dynamics, mutual respect, others) ● Encouraging psychosocial skills (e.g. overcoming fear of exposure, developing and taking



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	and feelings on this action.	<p>responsibility, self-confidence, self-esteem, self-expression, self-image, non-verbal communication-body expression, others)</p> <ul style="list-style-type: none"> ● Activating the imagination and creativity of the members ● Tuning, rhythm sequence ● Broader, physical – mental – emotional activation
Activity 4: “Closing Moment”	Our group closed with the coordinator asking everyone to give a form of feedback, to share their personal experience in simple words, as each participant felt or as they feel, without trying to pressure and direct the person.	

In **Italy**, for the implementation phase of the theatrical activities, the same participants from the focus groups were involved, with the exception of



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operators in the social, cultural, healthcare sectors and artists who work with the elderly.

During the session, there were 13 participants in total, all belonging to one of the following groups:

- 10 older adults 65+, one with Alzheimer's disease;
- 3 caregivers, divided between formal and informal.

The meeting took place in the foyer of a neighbourhood theatre. In addition to the theatrical activities themselves, there was a moment of opening and closing the activities, the latter including a shared snack, which resulted equally significant for the participants.

Table 6: Theatrical activities in Italy

Activities	Intervention Idea	Plan/ Rationale
Activity 1: Opening of the activities	As a first step, all the participants were welcomed one by one, seating them inside a circle, the perfect shape where no one is excluded. Since they already knew each other, many introductions were not necessary; however, to break the ice a bit, the participants engaged in	<ul style="list-style-type: none"> ● To break the ice among the group members ● To warm up the group for the theatrical activities to follow ● To allow the facilitator to begin to understand the type of group and the people who are part of it



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	<p>conversations by telling personal anecdotes of daily life or the past or general news of the week.</p>	<ul style="list-style-type: none"> ● To create a relaxed and comfortable atmosphere where everyone can open up according to their own pace.
<p>Activity 2: The frame</p>	<p>Tools: a red frame</p> <p>The facilitator asked the participating guests to introduce themselves and tell something about themselves – name, where they were born and where they live – putting the frame in front of their face to allow everyone to start getting to know each other.</p>	<ul style="list-style-type: none"> ● To get to know each other ● To recall how we are unique pieces and invaluable works of art
<p>Activity 3: What does this smell remind you of?</p>	<p>Tools: Jars containing spices, herbs and food – turmeric, dried mushrooms, oregano, cinnamon, laurel, tea.</p> <p>The facilitator proposed to the participants to read an excerpt from the work <i>À la recherche du temps perdu</i> by French author Marcel Proust.</p>	<ul style="list-style-type: none"> ● To show how it's possible to rekindle a distant memory through a simple sensory experience



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	<p>After finishing the reading, the facilitator pointed out how often we forget how strong a distant memory can come and strike us simply because it is rekindled by a smell, pleasant or unpleasant. He invited the participants to approach the jars arranged on the table to smell their contents, to see if the smell recalls any past moment or event and then to share their experience with others.</p>	
<p>Activity 4: Warm-up</p>	<p>While sitting in a circle, the facilitator led an initial warm-up. It started by swaying slowly from side to side and loosening hands, arms, legs, feet and also giving small taps to awaken the body. Noticing some general difficulty in harmonizing and some struggling to stand up, the facilitator emphasized how important it is to pay</p>	<ul style="list-style-type: none"> ● To awaken the body, adjusting one's pace to that of others ● Importance of paying attention to the others and support them



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	<p>attention to the others in order to adjust one's own rhythm and support those who are struggling by offering an arm or a shoulder to lean on.</p>	
<p>Activity 5: Reciprocity</p>	<p>Tools: Coloured plastic sticks</p> <p>Chairs were arranged in two rows facing each other. In pairs, the participants supported and moved the sticks using only the palms of their hands, trying to maintain silence, perhaps keeping the rhythm of the background music and looking into each other's eyes. After performing the activity seated, they tried standing up, moving within the available space, rotating and also using multiple sticks simultaneously.</p>	<ul style="list-style-type: none"> ● To work on body awareness, both on oneself and of other people ● To work on balance and concentration ● Mutual support, connection, dialogue and contact between people ● To enhance tact, empathy and sensitivity towards the other
<p>Activity 6: Closing activity</p>	<p>With the idea that it is essential to close the activities as much as it is to open them, the session</p>	<ul style="list-style-type: none"> ● To stimulate conviviality and the development of social relations



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	<p>ended with a moment of sharing. A brief convivial moment was organized. In addition, the facilitator asked for final feedback and if anyone would like to share something with the group, even a simple word, about the experience.</p> <p>Convinced that it is important to find or create a final greeting, verbal or non- verbal, that further unites the group, before leaving, those present were invited to clap their hands twice all together according to the final ritual <i>Dos Palmos</i> with which <i>Le Compagnie Malviste</i> closes their daily activities.</p>	<p>further and outside the weekly meeting time</p>
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In **Portugal**, Rightchallenge implemented a set of activities. This session involved 12 participants from our target demographic, which comprises older adults(N=9) and professional caregivers (N=3). This session took place in Centro Social Padre José Coelho, in Fiães, Santa Maria da Feira.



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Table 7: Theatrical activities in Portugal

Activities	Intervention Idea	Plan/ Rationale
Activity 1: Icebreaker activity	<p>Participants sit in a circle of chairs created so that everyone could sit at the same level allowing for horizontal communication with everyone.</p> <p>The activity involved the participants introducing themselves, telling their name, age and what was their favourite toy/ play when they were children.</p>	
Activity 2: “State of Mind through Gestures”	<p>Participants were encouraged to convey their emotions solely through gestures, with facial expressions also permitted. Participants were prompted to express their feelings through single or composite gestures, tailored to their comfort level.</p>	
Activity 3: “Introduction the person on your left”	<p>Participants were allocated 3 (three) minutes to acquaint themselves with their neighbour and discern key details deemed essential for introduction. Subsequently, participants assumed the persona of the individual beside them, introducing them in the first-person singular.</p>	<ul style="list-style-type: none"> ● Capitalise on the existing rapport among participants ● Foster a profound sense of connection and mutual understanding. ● Collective acknowledgement



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		<p>of strengths cultivated an atmosphere of warmth and empathy, engendering a sense of camaraderie among all participants.</p>
<p>Activity 4: “Telling Story about Art and Culture”</p>	<p>Participants were invited to recount personal tales related to art and culture, specifically drawn upon memories from their childhood and youth.</p>	<ul style="list-style-type: none"> ● Sharing and connection ● Stimulation of cognitive engagement among participants ● Enabling individuals to find common ground in the cultural experiences of others.

Evaluation of Theatrical Activities

After the completion of theatrical activities, participants were asked to fill in a short evaluation questionnaire via Google Forms to provide feedback on their experiences. The assessment questions were answered on a 5–point Likert scale (1 =low, 5=high). The questionnaire included one open–ended question that requested suggestions and ideas for future improvements.



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The results are presented below:

The majority of participants found the activities enjoyable and rewarding, allowing them to express their inner selves. Only one of the older adults stated that they did not enjoy it as much as they would have liked due to one of their roommates' behavior, but they still enjoyed it. Most participants felt more confident and reported being in a good mood during the session, with responses predominantly at levels 4 and 5. Creativity stimulation was generally positive, except for one participant, who strongly disagreed. The activities were well received as easy to follow, and the sessions were considered highly valuable, with nearly all participants finding them a valuable experience. Comfort levels were high, as well. Time management was viewed favorably, with effective use of time noted by most. Overall satisfaction with the session's activities was high.

Discussion and Conclusions

The feedback gathered from the participants overwhelmingly highlighted the positive impact of engaging in theatre activities. It was observed that active involvement in theatrical pursuits has the potential to empower older adults by fostering a sense of purpose, imbuing their daily lives with meaning, and nurturing a creative mindset for addressing challenges. Furthermore, the incorporation of these activities has been found to enhance the effectiveness of caregiver interaction with older persons, with or without cognitive impairments. This collaborative and creative approach has shown promise in alleviating symptoms of stress and anxiety among all involved parties, thereby creating an enjoyable and beneficial experience for everyone.

In 2020, the World Health Organization launched the Decade for Healthy Ageing (2021–2030), intending to encourage governments, civil society, and all stakeholders to collaborate to improve the quality of life of current and



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future generations of older people, their families, and the communities in which they live. The literature review and empirical study conducted by each partner organisation in this report demonstrated that theatre, as a performative art, has the potential to play a transformative role in improving the health and psychosocial well-being of older adults with and without cognitive impairments.



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SECTION 5.

RECOMMENDATIONS FOR IMPLEMENTATION

Clearly, theatrical engagement can enhance the lives of older people and promote inclusivity in society. By leveraging the community spirit of theatre, we can provide meaningful engagement, joy, and a higher quality of life for the elderly, fostering a more inclusive society.

A. General Recommendations

Although the theatre plays a crucial role in the partners' cultures and offers numerous benefits to individuals of all generations, the report has highlighted various obstacles hindering the expansion of theatre programs and initiatives aimed at older adults, including those living with dementia– Alzheimer. These barriers primarily stem from the lack of comprehensive national ageing policies and insufficient government funding.

To better leverage theatre as a tool for enhancing the health and psychosocial well-being of older adults, several steps could be considered:

- **National Funding Policies:** Economic initiatives in partner countries that provide the resources required to run theatre programmes and interventions.
- **Government and NGOs Collaboration:** Increased support from local governments and NGOs can help expand the reach and scope of theatre programs.
- **Cooperation Partnerships:** Theatre and performing arts schools, non-governmental organisations (NGOs), and health and social science schools



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(e.g., social work, psychology, and gerontology) can work together to create and deliver targeted theatrical programs for the elderly, with a focus on vulnerable and marginalised older adults.

- **Inclusive Programming:** Designing programs that accommodate the diverse needs and interests of the older adult population. Based on the COVID-19 learning experience, using digital tools in theatre activities can benefit older adults with physical limitations.
- **Promotion and Outreach:** Efforts should be intensified, possibly through community leaders and healthcare and social care providers.
- **Training Programs:** Professionals who are currently working with older adults or plan to work with them in the future must be trained in theatre as an empowerment methodology for older adults using friendly and enjoyable activities.
- **Accessibility:** Ensuring that theatres and performance spaces are accessible to those with physical limitations is crucial.

B. Specific Recommendations

Our transnational findings align with the global literature regarding the benefits of using theatrical activities while working with older people, with and without dementia–Alzheimer and other cognitive impairments, and the importance of training professionals in the creative process of theatre. In particular, the training that professionals need to receive should cover a variety of topics and skills, including the following:



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● Process-oriented Approach

- Training programs designed for professionals who work with or plan to work with older adults with or without cognitive impairments benefit from highlighting theatrical activities with a process-oriented approach, prioritising the experience over the end product.

● Variety of Activities

- It is critical to emphasise teaching a variety of simple verbal and nonverbal activities that are enjoyable and interactive (among participants, between participants, and the group facilitator) and address the specific needs of older adults, with a focus on cognitive skills and memory perception, as well as promoting effective community interaction. This is especially important for older people who are deemed vulnerable, at risk, or suffer from loneliness.

● Types of Activities

- Activities can be experiential, with examples including improvisation, theatrical play, role-playing, music-accompanied psychokinetic and bodywork exercises and games, poetry, dance, and journaling. Sensory memory exercises can also be used to help stimulate the brains of older people, improving their mental health and memory skills.
- Welcome activities promote trust and respect among older adults, as well as strong communication skills.



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- Proper opening activities and warm-up exercises at the start of each session can improve people's performance and mentally prepare them for creative exercises, among other things.
- Closing exercises are crucial for establishing a safe space for reflection and sharing.
- Cognitive skills will be developed through the use of easy-to-concrete and memorise exercises, as well as psychosocial abilities such as self-expression, confidence, self-esteem, imagination, and creativity.
- By providing older adults with various meaningful and enjoyable activities, we can help enhance their quality of life and ensure that they remain active and engaged members of their communities.

● Function of Activities

- The activities may have an intergenerational function and should be designed to promote engagement, socialisation, and overall well-being among older adults while also being flexible enough to accommodate individual preferences and abilities.

● Professional skills and knowledge

- The effectiveness of training programs for professionals who interact with diverse older adults through theatrical activities largely depends on their ability to impart essential communication skills (e.g., deep listening, intensive interaction, etc.), including humour, as well as emotional management skills using emotional



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intelligence. Without these critical competencies, professionals may find it difficult to connect and interact effectively with older adults, especially those with dementia–Alzheimer or other cognitive impairments. Therefore, training programs must prioritise the development of these skills to ensure that professionals are well–equipped to provide the necessary support and assistance to older adults from all walks of life.

● Ethical practice

- Ethical practice is fundamental to establishing a trusting relationship between professionals and older adults.
- An ethical approach to creating & using safe spaces. The importance of creating an atmosphere of security and mutual trust where participants feel free to share their stories and express their ideas and opinions without fear of judgement or repercussions.
- Ethical standards ensure that practitioners protect seniors’ rights and welfare against emotional, physical, and psychological harm while also enhancing professional integrity.



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ANNEX 1. Evaluation of Theatrical Activities

Table 8: Evaluation of theatrical activities (Romania, Greece, Italy, Portugal)

	1 - Strongly disagree				2 - Disagree				3 - Neither agree nor disagree				4 - Agree				5 - Strongly Agree							
	Ro		Gr		PT		IT		Ro		Gr		PT		IT		Ro		Gr		PT		IT	
	Ro	Gr	PT	IT	Ro	Gr	PT	IT	Ro	Gr	PT	IT	Ro	Gr	PT	IT	Ro	Gr	PT	IT	Ro	Gr	PT	IT
The activities I did contributed to feeling confident.	0	0	0	1	0	0	0	0	2	5	4	0	4	2	4	4	2	2	4	8				
The activities I did gave me pleasure.	0	0	0	0	0	0	0	2	0	0	4	1	3	4	4	1	5	5	4	9				
The activities I did helped me express myself.	0	1	0	1	0	0	0	1	0	3	5	0	0	3	2	4	0	2	5	8				
The activities I did gave me a sense of satisfaction.	0	0	0	2	0	0	0	0	0	3	5	0	0	4	3	2	0	2	4	9				
The activities I did expressed my creativity.	0	0	0	1	0	1	0	2	1	4	2	0	4	4	5	1	3	0	5	9				
The activities I did were easy to follow and understand.	0	0	0	0	0	0	0	1	0	3	4	2	2	2	3	0	6	4	5	10				
The meeting was a worthwhile experience.	0	0	0	1	0	0	0	1	0	1	3	0	1	1	2	1	7	7	7	10				
I felt comfortable during the meeting.	0	1	0	1	0	0	0	0	0	3	3	1	1	2	2	1	7	3	8	10				
The facilitator moderated the meeting effectively.	0	0	0	1	0	0	0	1	0	1	3	1	0	1	4	0	0	7	5	10				
The time use of the theatrical activities was efficient.	0	0	0	0	0	0	0	3	0	2	4	0	2	4	2	1	6	3	6	9				
Please rate the overall activities	0	0	0	0	0	0	0	0	1	2	3	1	1	5	1	2	6	2	8	10				



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