WP3 -Joint Training programme for Social, Cultural and Health Sectors -Module overview-

DOCUMENT PRODUCED BY:

APS LE COMPAGNIE MALVISTE ETS, ITALY

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Module Overview (1 page max.)

Module	Practical theatre activities that can be implemented by social and mental health professionals and cultural operators working with older people
Module summary / main contents	Psychosocial interventions that adopt artistic languages are constructed and implemented for a general improvement in psycho-physical well-being and health, for better control of behavioural disorders, to reduce anxiety and depression and to counteract isolation and loneliness. Participating in theatrical activities promotes the birth of social relationships, generates a sense of belonging to a group/community, stimulates creativity and increases empowerment.
Timetable & schedule	• (1hour): Introduction and explanation of the contents of the module: Theatre activities for the elderly. • (10 minutes): Active learning activity 1 – Physical and cognitive awakening through music and movement – Welcome, personal presentations and introduction. • (40 minutes): Active learning activity 1 – Physical and cognitive awakening through music and movement – Activity. • (10 minutes): Active learning activity 1 – Physical and cognitive awakening through music and movement – Discussion and closing moment.

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	• (15 minutes): Active learning activity 2 – Scene writing – Welcome, personal presentations and introduction. • (30 minutes): Active learning activity 2 – Scene writing – Activity. • (15 minutes): Active learning activity 2 – Scene writing – Discussion and closing moment. • (15 minutes): Active learning activity 3 – Use of the story, writing and image – The mineralogy of the word – Welcome, personal presentations and introduction. • (30 minutes): Active learning activity 3 – Use of the story, writing and image – The mineralogy of the word – Activity. • (15 minutes): Active learning activity 3 – Use of the story, writing and image – The mineralogy of the word – Discussion and closing moment.
Learning outcomes of the module	• Cognitive stimulation of older people • To enhance psychological /emotional wellbeing of older people • To stimulate human connection and interaction • Tackling isolation and marginalization • To promote a new vision, culture and approach to aging and related diseases (Alzheimer's, dementia, cognitive decline etc.) • To support the birth and maintenance of social relations • To awaken and strengthen sense of belonging to a group • To create a sense of community

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1. The context: not only a health and pharmacological approach

In the current context, the emergency dictated by the exponential increase in the spread of neurodegenerative diseases such as Alzheimer's and other similar dementias is increasingly evident. In addition to people suffering from the disease, who are seriously compromised in their autonomy, their family members and caregivers are also involved. Even in a large city, there are thousands of people suffering from forms of dementia such as Alzheimer's and are forced to spend their days without leaving home also due to the lack of meeting places suitable for their particular needs.

Despite the fact that dementia is on the rise in the general population and that WHO has indicated it as a global public health priority, impressive data emerge from research in this field in several countries that photograph the progressive consolidation of a silent emergency; if it wasn't for the attention of the numerous and varied associations of the Third Sector that take care of the needs of thousands of people suffering from Alzheimer's/dementia and also their caregivers, these would live in general indifference. Thousands of people, often elderly people who live in conditions of isolation and marginalization – also due to architectural barriers – and with low income, find themselves unable to live a peaceful life

To respond to this phenomenon and wanting to help avoid cases of

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abandonment, in the last 20 years new spaces have sprung up - psychosocial laboratories, Alzheimer's cafés, meeting centers, etc. - and a new approach that is not exclusively health-pharmacological and that recognizes the role and impact of art and culture - including of course theatre - on the psychosocial well-being and health of people with Alzheimer's has gradually spread.

Why is theatre a useful answer in a context of this kind? There is now a lot of evidence of the effects of art and culture on the health and well-being of the people who practice it. The clinical evidence of the relationship between culture and health is confirmed by studies and research. Artistic interventions are considered non-invasive and are low-risk treatment options useful for complementing traditional biomedical treatments. The Health *Evidence Network* (HEN) synthesis report, published at the end of 2019, reviewed the world's academic literature. It collects evidence on the contribution of the arts to the promotion of good health and the prevention of a range of mental and physical health conditions, as well as to the treatment or management of acute and chronic conditions that manifest themselves throughout life. The arts can be cost-effective solutions because they take into account existing availability or resources, even if more research is needed in the economic-health field. The report also offers evidence that the arts can help provide multisectoral, holistic and integrated and person-centred care, addressing complex challenges for which there

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are no solutions in current healthcare system.

The arts could help countries achieve the integrated goals of key global policy documents, including the *2030 Agenda for Sustainable Development* and the WHO's *13th General Programme of Work 2019 – 2030* which aim to increase human capital, reduce injustices and promote multi-sectoral action for health and well-being.

Regarding prevention and health promotion, the arts can:

- influence the social determinants of health – for example, the development of social cohesion and the reduction of inequalities and injustices;
- encourage health-promoting behaviours – for example by promoting healthy living or encouraging involvement in care;
- help prevent disease, including improving well-being and reducing the impact of trauma or the risk of cognitive impairment;
- support care, including increasing our understanding of health and improving clinical skills;
- improve intergenerational bonding;
- support the growth and engagement of young people.

The use of the arts, in this case theatre, in integrated care pathways can have a strong impact on the management and treatment of degenerative cognitive diseases such as Alzheimer's and dementia.

2. Art and culture as tools for psychosocial well-being and health

The quality of life and well-being of fragile people depends on the ability to place their state of health in a more comprehensive framework where art, theatre, poetry, dance, music, play, etc. find space. Investment in culture is useful for the development of personal and social skills, the promotion of active citizenship and social inclusion and cohesion, training, the creation of individual, group, organizational and social well-being and health.

Art and culture has to become means and not just aesthetic acts. Through this approach, we want to achieve the following objectives:

- to create a series of opportunities for meeting, exchange and promotion of specific initiatives in favour of families with people living with Alzheimer's and other similar diseases, also involving citizens and institutions;
- to offer people alternative methodologies to pharmacological treatments;
- to provide people living with Alzheimer's with the opportunity to participate in moments of socialization in order to keep their resources and creativity alive;
- to provide family members and caregivers with the opportunity and space to elaborate and compare common problems;
- to create one or more theatrical performances with all the participants

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involved;

- to encourage audience engagement and audience empowerment paths, involving participants to express themselves and manifest their interests, skills, talents and passions;
- to promote the sense of belonging to a present, united and cohesive community in which citizens do not feel abandoned, but rather still protagonists and active;
- to encourage the creation of intergenerational ties and relationships through the collaboration with schools;
- to affirm and spread a new inclusive culture of Alzheimer's and similar diseases;
- to involve and activate synergies with other community actors;
- to address current issues, in particular the environmental one, through a greater knowledge of one's territory and its inhabitants.

3. Social theatre and the *Fragile Theatre method – Handling with care*

According to what has already been anticipated, theatre is a very powerful tool. Social theatre is the theatre itself, in other words a place where everyone, even without having a text, can say something, a space that welcomes everyone, a container of culture, an opportunity to get to know the other, create relationships and improve oneself. Theatre is plurality, it is something that cannot be done alone, but is done with and for others.

The theatre is based on four pillars:

1) rituality – rehearsals/repetition to find intensity;

2) the body;

3) representation;

4) participation with responsibility – feeling part of a group and feeling a feeling of belonging/responsibility towards that whole.

Theatre is not knowing by heart but remembering together. To be able to do this, it is necessary to learn a language that is able to reach the other, always being aware and convinced that we are all different, that we are unique pieces.

Theatre is a means of and for participation. Social theatre aims to make the individual aware, making the most of his or her possibilities. It wants to stimulate the participation and empowerment of the community. In social theatre, participation is not an end but a means by which we try to give devices to be able to achieve a certain degree of problem solving in order to make people in their own community responsible. Through participation, people acquire skills, new ways of communicating, relating and trusting others thanks to the proposed exercises. In these moments, you also learn to ask for help in times of need.

The central idea is that Alzheimer's, as well as all degenerative diseases, is not just about health care, but is a community affair. Prerequisites and expectations for health cannot be guaranteed by the healthcare sector alone.

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Each person is therefore involved as an individual, family or community in the health promotion process.

Theatre is not just culture. Theatre is art and beauty, fundamental elements for the care of the individual person. Each of us has so much to give, it's up to us to listen. In the person with fragility, we find the ability to move air, that is, to create a new language that reaches the other, from one heart to another. As a conductor, I do not bring my own language but learn a new one. The group together can create its own language, verbal or non-verbal. A theatre workshop has to be held weekly, for example once a week, and has to be open to everyone: caregivers, young people and citizens of all ages and from schools of all levels. The laboratory has a duration of one and a half or two hours. This was calculated based on the experience of *Le Compagnie Malviste* who observed the person's ability to stay for a certain time in a specific situation.

Other techniques from different artistic disciplines, such as music therapy and dance, are also added to the theatre, precisely because movement is a fundamental component for people with Alzheimer's. During the laboratory, in fact, the operators aim to awaken that body memory that we all have. Where it is possible to use the word, they build their own stories; . If, on the other hand, difficulties are encountered, through the movement you can still interact.

The great ability and competence of the conductors lies in knowing how to

pass from real life to theatre and vice versa, working with who is there and with the resources that can offer.

The method *Teatro Fragile – Handle with care* has been developed and followed for 17 years and now is administered as a real practice. The Catholic University of Milan has made it an object of research and study.
The centre of the method is transformation: transforming places of culture into places of care and places of care in places of culture.
The most important thing is to create a setting that is free from judgment, where people do what they can and where, through trial and error, new solutions to old problems can be found.

Thanks to this method we can discover and see how important is the relationship between people, to get out of loneliness and isolation, to confront each other and have a fixed appointment within a group. The aim is to awaken and strengthen that sense of belonging to a group. The theatrical act is precisely the action that creates relationship. The method is developed in the ability to transform a trauma into a plot – *un trauma in una trama* in Italian – and to promote a new culture of disease through representation.
Fragile Theatre – Handle with Care is the method that is administered to all people who have chosen to get involved. It is time to reflect on the fact that

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Alzheimer's is not something that concerns only health or social policies. Fragility is a fact of community, as exemplified by the formula *I + You + Them = We*. "*We*" does not belong only to me, but it is ours. It is in this perspective that the sense of belonging and teamwork develops in us. This is where Social and Community Theatre starts. Our method asks welfare to rethink itself to put a new generative dynamic at the centre: the person, the relational dimensions and human capital, elements that are generally considered residual.

The theatrical workshops involve various professionals: first of all, the meetings are always conducted by expert conductors who are alternately flanked by figures such as a playwright, a director, a musician, a set designer/costume designer, a dancer, etc. It is therefore necessary to involve and make the cultural professions – artists, cultural operators and organizers, experts in Social Theatre, etc. – collaborate with the social and health professions – social worker, psychologist, educators and social-health workers.

3.1 Caregivers

Psychosocial interventions that adopt artistic languages are constructed and implemented for a general improvement in psycho-physical well-being and health, for better control of behavioural disorders, to reduce anxiety and depression and to counteract isolation and loneliness. In particular, these

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last aspects do not only refer to the person with dementia, but also to all the people who take care of him.

The theatrical activities are very useful for the person with Alzheimer or dementia, but also for caregivers and families. It's important that caregivers and families participate; in this way, they learn to see with new eyes. We need new tools to dialogue with people with Alzheimer's, but also with caregivers and family members. They are the ones who suffer the most because they find themselves alone, without help and answers to their questions.

Burdensome care burden has repercussions on multiple aspects of life: work, economic, social, physical, psychological and emotional. For these reasons, it is important that the caregiver also takes part in the proposed activities.

One of the central questions to ask is: "*Who takes care of those who provides care?*". In an area where we work with and for people and where what drives to move forward is the heart, and not the money, we find ourselves faced with a question that still has no answer or solution today.

Studies and research in this area have shown that the participation of the caregiver in the theatre workshops:

- can bring out new awareness of what the person with Alzheimer's/dementia can still do;
- can restore a sense of satisfaction for the relationships that can

still be established;

- diverts attention from the disease to focus instead on the emotions generated by the activities;
- increases social activities and allows to create new links;
- offers the opportunity to share one's experience and problems with peers.

3.2The construction of the theatre workshop

Before starting any activity, it is essential to get to know the group. In the first phase, the meetings are aimed to know and welcome the participants in order to create a group that can interact and, over time, also materialize as a self-help group where participants can freely exchange opinions, ideas and advice in an atmosphere of trust and absence of prejudice.

The methodology used is composite. It aims first and foremost to make all participants feel welcome and to create a friendly climate of trust to encourage participation. In addition to verbal and body games, there are techniques learned in other disciplines such as dance movement therapy and a significant musical component to stimulate the mobility. Self-expression is therefore encouraged in various ways: with words, storytelling - where possible - movement, singing, also with the use of requirements and tools (large and small cloths, tools, photographs...) for the awakening of physical memory. The material expressed is recorded by the conductors

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and becomes part of the history of the group or even the basis for subsequent performances of collective involvement and social mobilization. We can therefore aim to create a group performance art, not prepared and induced from the outside, but built with the expressive material of the specific participants within a precise group.

This is where the theatrical competence of the conductors is manifested: knowing how to move from theatre to real life and from real life to theatre by working with those who are there and with the resources that those who are there can offer. We like to emphasize that the characteristic of mixing people with dementia with other people is extremely positive and winning. In collective work, definitions and differences fade until they are lost; instead the values and significant and precious contributions of each individual person are grasped.

An example of starting and opening activities can be the following. With the participants sitting or standing and arranged in a circle, the perfect shape where no one is excluded and everyone can look at each other, the conductors introduce themselves and ask those present to introduce themselves in turn. This first step is important because it allows to test the verbal cognitive level and then set up the work by conveying it in the appropriate direction to grasp all the skills and resources. The questions must be simple: name, surname, job, interests and passions, telling

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something about oneself.

From the beginning, it would be very important and fruitful to open these meetings and spaces to the entire community, in particular involving children and young people, school students of all levels, to activate moments of meeting, dialogue and exchange.

Currently, this type of intervention is almost non-existent or episodic. In fact, there are not many spaces that allow such intergenerational confrontation and this has a negative impact on the city context. Multidisciplinary projects with a strong experiential impact stimulate creative and active participation through intergenerational encounters; they represent an opportunity for young students to grow and face challenges. This is an unprecedented and innovative approach that promotes and enhances intergenerational encounters, as a generator of new skills and challenges; it allows young people to compare themselves with previous generations and allows older people to carve out / take back a role within their community.

Within spaces and moments such as those described, it is necessary to respect rules and methods of relationship that are not imposed from above, but shared and based on listening and mutual respect. In order to allow the conductors to guide the activity in the best way possible, counting on everyone's collaboration, and to feel good together in a common space,

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simple but not trivial precautions must be followed and adopted. The most important are:

- individual expression of each person is promoted;
- listen in silence;
- needs are agreed;
- everyone does what they can and feel;
- no judgment and no suggestions;
- knowing how to wait and give things time to emerge and mature;
- turn off the voices in your head that say "*What are you doing?*", "*You're too old to do these things*", "*You made a mistake*", "*I'm ashamed*" etc.
- allowing yourself to make mistakes.

3.3 Characteristics of the group and approach of the conductor

A facilitator can lead groups with different stories, characteristics and durations. Based on the people in front of him, he must be able to adopt appropriate changes in his approach and behaviour. Below, are described 3 situations in which a conductor may find himself and the aspects to be taken into account in his way of relating to the group.

3.3.1 With a historical group that has existed for years

The behaviour of the conductor is based on and allows:

- **Established relationship:** The conductor can afford more creative

freedom. He knows the limits, potential, personal stories and languages of the group.

- **Experimentation**: He can propose more complex or profound paths deepening some autobiographical themes such as gender violence, diseases, intergenerational aspect, etc. with the construction of texts through the method of scene writing for the realization of performances open to the public.
- **Greater mutual trust**: Work as emotionally intense as possible, given the climate of trust that has been created over time.
- **Co-construction**: The group's path is always shared, with ideas that arise from the group and involve the participants first.
- **Continuity and memory**: You can work in a cyclical way, recalling past experiences and building a sense of continuity.
- **Involvement of the territory**: the group of participants comes into contact with the entities present in the area such as schools, public institutions, other associations, etc. with which they collaborate for the conception and implementation of cultural/social/aggregative initiatives.

3.3.2 With an unknown/new group

The behaviour of the conductor is based on:

- **Observation and listening**: In the first meetings, an attitude of welcome

and observation prevails. It is important to grasp the climate of the place, the dynamics already present between guests and operators.

- **Gentle and respectful tone**: It is essential to avoid an intrusive or too "scenic" approach at first. Theatricality must be calibrated.
- **Gradualness**: The proposals must be simple, inclusive, accessible and proceed in small steps such as the realization of a traditional festival or on the occasion of an anniversary or a national/regional celebration.
- **Trust building**: A lot of work is done on individual and collective relationships, with attention to emotional memory, eye contact, voice, gestures.
    - **Empathy and adaptation**: The conductor continuously adapts to the group's proposals/responses.

From the point of view of relational dynamics:

- Participants may be distrustful, disoriented or indifferent at first. The conductor is a "stranger" in a very delicate context, with implicit hierarchies between guests and operators. Among the facilitator's strategies: tune in emotionally with the climate of the structure; work in synergy with the staff; observe how they interact with the elderly. The conductor have to learn the names of the participants in the group, in order to break down barriers and create trust, a sense of belonging.

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- Verify the bond that exists between the participants in the group by stimulating listening and sharing, but also through exercises/games such as: "*Introduce me/tell me about your partner*"; "*Interview in the dark*", in which the participants are asked some questions related to the other members of the group – *How is X dressed today? Is X wearing trousers? What colour? Does Y wear bracelets or earrings? Does Y have a watch on his wrist? What colour are N's shoes? What colour are his eyes?*– ; "*Guess the voice*", a variant relating to the vocal body in which one of the participants is asked to guess who is speaking by listening the voice.
- The conductor must make sure to know the skills, passions, talents, dreams and desires of each of the participants (such as skills in singing, playing an instrument, writing, entertaining, etc.)

Regarding the objectives, the facilitator has to establish a welcoming and reassuring presence, activate curiosity and gradual participation and create a common language (voice, gestures, rhythm...). To do this, the group's activities usually are:

· sensory, gestural and musical activities (singing, sounds, symbolic movements);

· use of evocative objects (foulards, balls, photos, objects);

· simple theatrical games, dialogues built together, light improvisations.

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3.3.3 The conductor has to create the group

The behaviour of the conductor is based on:

- **Collaboration with institutions and the existing network**: He turns to and works in synergy with social services, educators, psychologists, to identify who could participate and in what ways.
- **Patience**: Participation is not forced. Curiosity and familiarity are created through the constant presence and proposal of simple, playful and non-intimidating activities.
- **Creation of a "social group"**: First of all, he works to ensure that people recognize themselves as a group.
- **Use of rituality**: Small rituals, greetings songs, symbolic objects, can help build belonging and shared memory.
- **Narration and listening**: The biographical story (oral, bodily, sound) is often the key to bringing out participation and giving value to the voice of the elderly. The conductor must encourage active mutual listening and sharing - also stimulated by an object that passes from person to person. Other pretexts can be used to allow everyone to express themselves, tell their stories, make themselves known through anecdotes, events in their lives, bringing out everyone's skills, passions, talents, dreams and desires.

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3.4Theatrical activities within the workshop

As mentioned above, in a theatre workshop with elderly people, whether or not they live with Alzheimer's/dementia, various disciplines – dance, music, writing, reading, etc. – and different types of language – verbal, non-verbal, gestures, looks, etc – meet and combine. In addition to what you do, it matters how you do it. The conductor, as well as any professional involved, must not impose a defined, rigid and unadaptable activity proposal, but must define and build it together with the group, being ready and knowing how to grasp and manage the need for sudden changes due to the conditions, stimuli and suggestions of the group at that precise moment. It is therefore necessary to always be vigilant and listening to welcome new and unexpected ideas and enhance the resources that the people present can offer.

Below, a number of exercises that can be implemented. These are only a small part of all the variety of activities that can be experienced together. Each group and each moment, based on who is there and what people can offer, the group can freely build and give life to new and different exercises.

- Welcome and personal presentations – Opening activity

It is important to welcome everyone, one by one. Ideally, you have to work in a circle, standing or sitting doesn't matter; the circle is the perfect shape where you can see everyone and no one is excluded.

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First of all, everyone is asked to introduce himself, obviously where possible; as you build confidence and break the ice, people can play by telling something fun or inventing anecdotes or features.

These first steps are fundamental to understand the type of group, the people in it, who speaks more and who less.

You can ask the person how he feels, his feelings about the initiative, if there is any news that he wants to share with others, no matter whether personal or heard from other people or on TV.

All this allow people to feel comfortable, to start to open up, each one with its own time, and create a comfortable climate and environment.

- Introduce the person to your right/left

This is a variation of the previous activity; after a few meetings, when there is more confidence, you can try this alternative.

In a circle, the operator asks everyone to introduce to the whole group the person on his right/left. It's not important to say/know the name, but to talk about the person himself, even making up everything, things he does and likes. This is how facts and real aspects are mixed with totally invented anecdotes.

- Presenting yourself with a gesture

This is another alternative. The operator asks everyone "*How do you feel today? Can you tell me with a gesture?*". The person will propose his gesture

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and then the rest of the group will imitate him. Next, another person will do the same and the others will repeat his gesture. And so on until the end of the turn. You can put a song in the background, preferably a neutral musical base and without words.

- What's the ball for you?

Tools: n. 1 tennis ball.

The operator shows everyone a tennis ball and emphasizes the importance of making the body talk, of being free, of the emotional and body awakening, always paying attention to those around us, each one with their own fragility, to those who talk more and who less, to those who are more shy.

As a useful exercise to train the imagination, the operator then asks everyone to say what the ball is for him. After declaring it, the person has to pass it to his partner on his left while asking him "*What is for you?*", looking him in the eye, smiling and approaching without invading the personal space of the other.

If you want to go even deeper, you may ask, "*How much does this weigh for you?*"

- Ball pass

Tools: n. 3 tennis balls.

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The pass is made by making the ball a bounce. First, it's essential to make eye contact with the partner to whom we want to throw it. It is fundamental because it stimulates and activates the directionality of our action. You don't have to be quiet and still, but play, be ready to throw and receive, catch the attention of others and let them know "*I'm here, I'm ready*".

Coordination is also involved in grabbing the ball and controlling the force to throw it.

Someone could tend to throw it when eye contact hasn't been made yet. Someone else could have a hard time catching it or could be embarrassed to look others in the eye. A second and a third ball are introduced into the circle; the game continues with three balls crossing the space. Continuing with the activity, it improves more and more with each attempt; it increases the attention, coordination and even fun.

Slowly the balls are removed from the circle; from three you go back to two and then to one, until the activity ends.

- <u>The piano</u>

The operator proposes to play the piano all together. "*Where is piano?*" will surely ask someone. The operator will stretch his hands in front of him and will say: "We must imagine that there is!". Everyone extends their hands imitating the operator who invites a volunteer to act as an orchestra leader to conduct the group to the rhythm of Mozart's "*Rondo alla turca*".

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- The nest

One at a time, with your hands on your heart, you choose a partner in the circle, you cut the space, you go to meet him and give him "something of yours" while looking, touching/taking his hands, opening your palms towards him and then taking his place in the circle. This game also stimulates the creation of relationships, the courage to come forward, to get in touch with someone else and look him in the eye. The game takes place accompanied by the music "*The Silence of Beethoven*" by Ernesto Cortazar.

- What's the ball of wool for you?

Tools: n. 1 ball of wool

This is a different version of the tennis ball exercise, but this time using a large ball of wool.

- The gift

Tools: n. 1 ball of wool.

This is an evolution of the ball passage. In this exercise we no longer throw the tennis ball but we go to give the ball of wool to a companion, offering it to him and at the same time holding a piece of strand for ourselves. The ball that is donated for each can represent something different. The exercise takes place with "*The Silence of Beethoven*" as the soundtrack. As people go

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through the space, a network of strands is created and connects all the participants.

When the music ends, the operator asks everyone: "*What do you think this interweaving of strands?*".

Then he asks to lower the net and says: "*And now, from above, what do you see*?".

- Biological fireworks

Tools: coloured handkerchiefs

The handkerchiefs are shaken in the hands to the rhythm of Offenbach's "*Can Can*". The dynamics vary from fast to slow and the operator leads the joyful movements. At the peak of the music the movements become faster and on the final accent the handkerchiefs are thrown generating a colored rain of "fireworks".

- Reading aloud

Choose a short poem or a song – better if significant for the community, the country or with some particular message – and distribute some photocopies of the text or the lyrics. The operator proposes a choral reading. A first person starts and the others will join him after. If you choose a song, you can listen to it and maybe someone will even start dancing.

The operator asks a feedback and if there are phrases or words that strike

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more than others or that recall memories.

- Closing moment

As it is crucial to open, you must also close the activities in the right way.

The operator asks everyone for a final feedback and if someone wants to share his feelings about what he did, just a simple concluding word.

You could also find or create a final greeting, verbal or nonverbal.

It is also important to spend a convivial moment at the end of the activities, eating and drinking something together.

3.4 Results

Art and culture, theatre in this case, must therefore not aim exclusively at aesthetic purposes, but must be considered as means and opportunities that contribute to promote sociality and the creation of relationships, improving the health and well-being of people, in particular the elderly, whether or not they live with Alzheimer's/dementia, and their caregivers.

The main results are listed below.

- Consolidation of the link between social and cultural activities and the social-health field. The key lies precisely in creativity because it is precisely imagination and inventiveness that allow individuals to get out of very complicated states of discomfort. In addition, creativity can help us to give meaning to things, difficulties and suffering.

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- Decreased sense of loneliness, discomfort and abandonment of people with Alzheimer's/dementia, but also of the people who care for them.
- To accompany people from being passive recipients of services and performances, excluded and exponents of a silent marginality, to being active subjects with a voice and a social presence, reactivating elements to promote dynamics for an active citizenship that is attentive to the needs of oneself and the Other.
- Sharing and exchanging information between people, who know each other and who do not know each other, to expand one's relational network.
- Increase in intergenerational relationships and exchanges.
- A community that is more attentive to the needs of fragile people and their families.
- A community that knows the spaces dedicated to the most fragile people.

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