IMPROVISATION DRAMA FOR PEOPLE WITH DEMENTIA

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ABSTRACT

This paper aims to highlight the developmental journey of a pilot group therapy programme using improvisational drama involving residents with dementia in a nursing home. The programme comprises of two parts. The first involves presenting residents with vintage items acting as stimuli to engage their sense of touch, sight, hearing, smell and taste. They are then engaged in reminiscence about the past and are encouraged to share their knowledge and experiences with each other. The second part involves using improvisation to dramatize a fictional scene. The facilitator sets the place, time and characters of a story. Residents will take on roles, provide input to the story, and develop it. The nursing home received funding to pilot this programme in January 2018 with a group of residents with dementia. Due to the successful outcome, the home received new funding in 2019 for a second run. For both runs, all residents who participated gave positive feedback. For the second run, a therapy assistant received training to facilitate this improvisational drama method and the home plans to incorporate improvisational drama as a regular in-house therapy programme to improve the engagement and wellbeing of residents with dementia. Our paper will cover the approach the planning team took to create the pilot and its contents for the initial run, how the team improved these aspects for the second run and the plans we have for future runs. We believe improvisational drama is replicable and when introduced to people with dementia, will support their social and psychological well-being.

INTRODUCTION

St. Joseph's Home is a nursing home set up by the Catholic Welfare Services and has been providing residential aged care since 1978. In 2017, after four years of planning and major rebuilding, it moved into a redeveloped space that incorporated several features like a co-sited infant and childcare centre, a gym and hydrotherapy pool and improved residential living areas for residents, including a dementia-specific unit.

The home's vision has always been to provide care and support for residents beyond the physical aspects of living. We believe in adding life to their remaining years and so ensure that services and programmes nurture the residents emotionally, psychologically and spiritually. One of the ways we do this is by engaging residents through the arts. Since 2017, we have woven various visual, creative and expressive art forms into our activities and programmes, which have been well received by residents.

BACKGROUND

REMINISCENCE WORK

Reminiscence activities have roots in social work where participants explore their memories based on stimuli provided. Often held in a group, participants are encouraged to share their memories associated with the stimuli. This interaction provides participants with a sense of validation, allowing bonds to form especially when they begin to share common narratives.

Reminiscence activities have always been part of our home's Occupational Therapy programmes. However, this is the first time reminiscence is presented in the form of improvisation drama.

IMPROVISATION DRAMA

Improvisation activities are commonly used in theatre rehearsals as a form of actor training. With a general idea, topic, setting or stimulus, cast members develop scenes on the spot, working with and building on each other's suggestions. This spontaneous process not only increases cognitive abilities, but also develops collaboration and confidence amongst the actors.

Improvisation theatre is also a type of theatre on its own where actors engage in spontaneous creation of stories from stimuli provided by the audience. On occasions, members of the audience can also join in the improvisation on stage. As there is no prepared script, one show is always different from the last.

The key features of improvisation are the contribution of the participants, the importance of being in the present and in the moment and the absence of a script. The term improvisation "drama" instead of "theatre" is used in this project as it emphasises the process of being involved in improvisation.

MERGING ART FORMS WITH GOALS OF CARE

In 2018, Ms Chang Mei Yee, an artist and drama educator, shared the possibilities of combining reminiscence work and improvisation drama with people with dementia with Ms May Wong, Head of Allied Health Services and dementia lead at St. Joseph's Home. Both agreed that to be able to freely associate personal memories with stimuli and then be engaged in pretend play could potentially increase engagement levels amongst residents in the home.

Ms May Wong believed that the participatory processes in improvisation drama could potentially engage a person's different senses and in turn, support the well-being of that individual. She also believed that introducing new faces, in the form of project facilitators and volunteers to the residents would also give them an opportunity to socialise and extend their social circle.

In this paper, Ms Chang Mei Yee will be known as the artist and Ms May Wong will be known as the project coordinator.

PILOT PROGRAMME: PROJECT HERE AND NOW OBJECTIVES

Project Here and Now aimed to support the well-being of participants, who were residents with dementia, in three dimensions - being engaged cognitively and socially, gaining a sense of achievement and nurturing feelings of joy. Together with other artistic activities at St. Joseph's Home, this project hoped to maintain a sense of "self" for participants.

FUNDING

The project was funded by the WeCare Arts Fund which is a collaboration between the National Arts Council and the People's Association. This fund aims to encourage participation in arts amongst beneficiaries supported by social service agencies. It also aims to connect community artists who wish to meet the needs and interests of the beneficiaries using their art forms (National Arts Council, 2014).

PARTICIPANTS

There were twelve residents with dementia identified by the project coordinator. All of them had moderate dementia and an average age of seventy years. Most had lived at St Joseph's Home for about five years. They were all mobile independently, with a mobility aid or with physical assistance. They spoke a variety of languages ranging from English to Cantonese, Hokkien and Mandarin. Half of the group had contact with family members who visit socially but the other half were single with little or no contact with family or friends. Despite their dementia, they were able to engage in activities even though in some instances, some of them would require prompting or cueing.

THE PROJECT TEAM

The project coordinator and the artist lead the project team. The project coordinator identified participants for the workshop and together with the artist, identified suitable venues for the activities. The project coordinator also assigned nursing staff to participate and assist in the activities at all sessions.

The artist conceptualised the project in consultation with the project coordinator and planned the structure of the sessions. She also sourced the stimuli needed for the sessions and any accompanying props for the improvisation drama activities.

The artist also recruited youth volunteers, aged between seventeen and twenty four years, who were current students or alumni from the Diploma in Applied Drama and Psychology course at a local institution - Singapore Polytechnic. With their drama training, the volunteers knew how improvisation worked. Throughout the entire project, a project assistant aided the artist in a range of matters including volunteer management, documentation of the sessions and managing a social media account of the project.

METHOD

There were twelve sessions in total spread across three phases. Phases 1 and 3 comprised of face-to-face sessions with participants with Phase 2 being time set aside for the artist to plan the structure of the main activities. An overview of the different phases of the project is shown in Table 1.

Phase 1	Phase 2	Phase 3
1. 4 sessions held every week	1. Artist creates possible settings for improvisation	1. 8 sessions held fortnightly
2. 1.5 hours per session	drama session based on	2. 1.5 hours per session
3. Conversations with the	the conversations	3. Participants engage
participants using stimuli from the past	generated in Phase 1	with stimuli within the improvisation drama scenarios

Table 1: An overview of the different phases of Project Here and Now

Phase 1

This consisted of four sessions of one and a half hours each. In each session, the artist used a variety of stimuli like objects, photos, music and videos that might be familiar to participants

to generate casual conversations with them in small groups as well as a whole. Nursing staff and youth volunteers supported these activities.

In addition, warm-up activities incorporated into conversation eases participants physically and psychologically into the activity space and the people around them. Cool-down activities were also built-in to cue the end of each session. Every face-to-face session of the phases used this structure of warm-up, conversations and cool-down.

Phase 2

The artist extracted general themes from the conversations generated in Phase 1 then crafted basic dramatic settings in preparation for Phase 3. The artist also designed possible roles that the participants could take on.

Phase 3

This comprised of eight sessions of one and a half hours each. The artist begins the dramatic setting by introducing suitable stimuli or props and starts the improvisation drama. Participants can choose suggested roles or they could create their own roles within this drama. This pretend play did not require any acting skills nor was there a script to follow. All participants were encouraged to develop the plot along the way. To move the plot along, the artist may offer prompts or asked questions.

DOCUMENTATION

A project assistant recorded the sessions through session notes, photos and videos primarily for documentation and archival purposes. He would look out for moments of participants' engagement, like listening to what fellow participants are saying, doing or responding. He also looked out for demonstration of improvisation drama like smiling or laughing or exploring the stimuli.

Youth volunteers at the workshop also provided anecdotal accounts of what they had observed after each session. Information collected from them could range from what the participants shared or how the participants related to each other or to the topic that day. Nursing staff who participated in the sessions provided anecdotal observations as well.

FEEDBACK

Generally, the participants articulated that they enjoyed the face-to-face improvisation drama sessions. Not only did they listen to the plot and suggestions generated by fellow participants, they were able to take on different roles and take part in the unfolding stories. Participants were able to reminisce around themes that these roles brought. In the process, they were able to have fun and socialise amongst themselves and with the young volunteers. This enabled everyone to learn more about each other during the sessions. Mingling with volunteers also gave residents a chance to connect with new faces from outside the nursing home keeping them connected to the community at large.

POST-PILOT PROGRAMME: PROJECT FACING THE SUNRISE OBJECTIVES

Following the success of the pilot, the home implemented a second project, this time with two prongs, each having its own aims.

Aim of the first prong

The objectives were to engage a larger and mixed group of participants - those with and without dementia - in order to forge friendships amongst them and to continue to provide a platform for participants to perform thus promoting self-expression and confidence.

Aim of the second prong

The objective is to ensure the sustainability of using reminiscence improvisation drama as a therapeutic intervention in the nursing home by training a therapy assistant from the Occupational Therapy service to facilitate reminiscence improvisational drama activities.

FUNDING

Once again, the WeCare Arts Fund was the source of funding for this second programme.

PARTICIPANTS

The project coordinator, together with the therapy assistant-in training, identified fifteen residents for the project. These included three who had dementia while the rest had no cognitive impairment. Their average age was about seventy years and most were residents of the home for about five years. They spoke a variety of languages ranging from English to Cantonese, Hokkien and Mandarin.

PROJECT TEAM

Once again, the team leads were the project coordinator and the artist. The artist conceptualised the project in consultation with the project coordinator. Apart from planning and conducting the reminiscence improvisation drama sessions, which were similar to the pilot project "Project Here and Now", the artist also created a training plan for the therapy assistant.

The therapy assistant played a key role in this project. Since she was training to be a future facilitator, she assisted in all the sessions in Phase 1. Although she was observing the artist, she was also a comforting presence for the participants as she was a staff member and a familiar face.

As with the pilot, the artist again recruited youth volunteers who were current students or alumni from the Diploma in Applied Drama and Psychology course at a local institution - Singapore Polytechnic. Throughout the entire project, a project assistant would aid the artist in a similar manner as in the pilot.

METHOD

Table 2 shows the overview of the phases of Project: Facing the Sunrise.

Phase 1	Phase 2
1. 8 weekly sessions of 2 hours each	1. 8 weekly sessions of 2 hours each
2. Artist to conduct reminiscence and improvisation drama sessions	2. Therapy assistant facilitated sessions
_	3. Artist to provide targeted feedback
3. Therapy assistant to observe and participate in the sessions	after each session
	4. Therapy assistant to note areas for
4. Artist and therapy assistant review each session according to training notes provided	improvement and write reflections based on feedback provided

Table 2: Overview of the phases in Facing the Sunrise

Phase 1

The main objective of this phase is for the therapy assistant to observe the artist and learn how to facilitate the reminiscence and improvisation drama sessions. There were eight sessions of two hours each, comprising of time set aside before and after each sessions for the artist and therapy assistant to go through prepared training notes and reviewing feedback as well as actual contact time with participants.

The format and the structure of the sessions were similar to the pilot, where the artist would decide on a theme and the participants were able to contribute to the development of the dramatic scenario. The sessions preceded with warm-up activities and ended with cool-down activities similar to the pilot.

Phase 2

In this phase, the main objective was for the therapy assistant to put into practice what she learnt in phase one. There were eight sessions of two hours each and the therapy assistant facilitated these sessions independently. The artist was present but this time, as an observer and assessor. Contact time between therapy assistant and participants was an hour while the rest of the time was spent with the artist previewing what the therapy assistant had planned to conduct during the session and reviewing detailed feedback from the artist after the session was completed. No youth volunteers were recruited for these sessions because this context mirrored the therapy assistant's real-life working conditions of working solo.

DOCUMENTATION

The project assistant documented the sessions through session notes, photos and videos. These were primarily for documentation and archival purposes. At each session, he would look out for moments of engagement and interaction amongst participants. The therapy assistant also provided her observations.

FEEDBACK

All the participants reported that they found great pleasure reminiscing about their past and sharing good memories with others in the group. Some participants had previous acting or directing experience and they derived personal satisfaction teaching the rest. One participant who had never participated in an activity of this nature, reported feeling a sense of achievement because he learnt a new skill — acting. Another who previously only preferred individual engagement sessions in therapy expressed that he enjoyed this group session and began to participate in other group-run activities, thus extending his social circle.

BENEFITS OF THE PILOT AND POST-PILOT PROGRAMME

Based on the observations and feedback gathered over the two projects, the project team concluded that the processes of reminiscing in an improvisation drama context supports the well-being of people with dementia. This is because at its heart, this approach promotes human interaction with the immediate environment and the people within it, resulting in the ignition of a person's cognition, emotions and senses.

As reminiscence improvisation drama involves the sharing of memories or stories attached to stimuli, participants could articulate personal stories related to them or choose to indulge in pretend-play. The use of stimuli is a tangible way of engaging the different senses of the participants. Feeling and manipulating the objects during sessions activated their tactile memory. Looking at photographs and listening to songs that they were familiar with engaged the visual and auditory senses. These factors works positively to support the activation of long term memory, giving people with dementia a way to freely self-express and attain a sense of agency.

This method of promoting interaction between the facilitator, participants, staff and volunteers also acts as a vehicle for socialisation. While the artist and the youth volunteers are able to get to know the participants during the programmes, the staff who assisted in the sessions got the opportunity to witness a more personal side of the residents, allowing them to understand the background and the personalities of the participants better. This made them more informed and able to deliver personalised care for them on a daily basis outside of the programmes.

The structure of improvisation drama encouraged every participant to contribute to the end product. While narratives might differ, or may even be in conflict with each other, no one narrative was deemed better or more accurate than the other. This is important as it builds and strengthens participants' confidence and self-esteem. All aspects of the drama — character creation, plot formulation and ways to use props - were suggested by participants, accepted by the group then subsequently weaved into the final dramatic piece. This ensures that participants experience a sense of validation for their contributions thereby reinforcing their motivation to continue to participate.

With the feature of pretend-play woven into the sessions, having a psychological safe space of being in a character role allowed the participants to feel protected. This resulted in them being able to behave in a way they would not ordinarily do. This feeling of liberation from judgement and expectations became empowering for the participants. Moreover, play time promotes a sense of joy and wonder amongst the participants. Many of them shared and laughed freely during the sessions

CONCLUSION

Improvisation drama supports the well-being of people with dementia through interaction and the stimulation of their senses and cognition. The stimuli items are the vehicle for reminiscence as it generates discussions and stimulates exchange of memories. The safe space of role-playing and the absence of a prescribed script enables participants to indulge in creative self-expression, thus returning a sense of control and empowerment to participants. Usually conducted in a group setting, this approach opens up opportunities for people to interact and socialise in a non-threatening environment. When implemented in a care setting like a nursing home, involving care staff and volunteers with aged care residents in a shared programme like improvisation drama can initiate connections and friendship-building. This supports socialisation and helps residents in a nursing home maintain ties with the wider community.

REFERENCES AND LINKS

National Arts Council. (2014). WeCare Arts Fund. Retrieved January 12, 2019, from https://artsforall.sg/initiatives/artreach/wecare-arts-fund.aspx

To view a video on Project Here and Now, please go to

https://www.youtube.com/watch?v=hDKMms6fNz8