

# Animating senses : exploring multi-sensorial art engagement, intercorporeality and wellbeing of elderly people in dementia day care centre

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**NANYANG TECHNOLOGICAL UNIVERSITY  
SCHOOL OF ART, DESIGN & MEDIA**



***ANIMATING SENSES:***

**EXPLORING MULTI-SENSORIAL ART ENGAGEMENT, INTERCORPOREALITY  
AND WELLBEING OF ELDERLY PEOPLE IN DEMENTIA DAY CARE CENTRE**

**CHUN WAN YING RACHEL**

**A thesis submitted to the Nanyang Technological University in partial fulfilment of  
the requirement for the  
Degree of Master of Arts (Research)**

**2021**



## Supervisor Declaration Statement

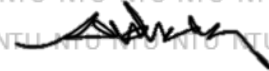
I have reviewed the content of this thesis and to the best of my knowledge, it does not contain plagiarised materials. The presentation style is also consistent with what is expected of the degree awarded. To the best of my knowledge, the research and writing are those of the candidate except as acknowledged in the Author Attribution Statement. I confirm that the investigations were conducted in accordance with the ethics policies and integrity standards of Nanyang Technological University and that the research data are presented honestly and without prejudice.

12 July 2021

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Candice Ng Ee Ching



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## **Abstract**

The demographic shift towards a rapidly ageing population in Singapore has seen an increasing prevalence of dementia. As the irrevocable neurodegenerative condition progresses, the individuals and their family inevitably have to rely on community resources and aged care services to meet the increased care needs. While there have been a proliferation of community and centre-based care services to support ageing-in-place policy, efforts looking into creating meaningful and quality programmes, and understanding its effect on the wellbeing of elderly people have been limited. Considering the above, this study foregrounds arts-health practice to offer inventive care for elderly people at Dementia Day Care Centre (DDC) in Singapore.

In this study, I have developed, implemented and explored the processes and effect of a multi-sensorial art engagement programme involving the use of participatory arts and music activities on the wellbeing of Older Persons with Dementia (OPWD). Informed by Merleau-Ponty's concept of intercorporeality, I approached this notion from the praxis of multi-sensorial art engagement. From this outlook, I investigated how intercorporeality shapes and promotes wellbeing, mediated by the affordances of positive affect, interaction and relations that occur with the engagement of participatory arts and music activities.

Using a qualitative approach, this draws on participant observation, semi-structured interviews, digital video, field notes and journals. The empirical materials were analysed using strategies in grounded theory, with the findings validated through triangulation. Recognising the individual and collective attributes, the understandings and developments is derived through a discussion and proposed Multi-sensorial Art Engagement Framework for Older Persons with Dementia (OPWD). With the aim of Animating Senses, I proposed multi-sensorial art engagement as a possible alternative for engaging and better care of elderly people in Dementia Day Care Centre (DDC), as I highlight its potential as a meaningful activity option which taps on their current functional abilities.

## **Abbreviations**

<b>BPSD</b>	<b>Behavioral and Psychological Symptoms of Dementia</b>
<b>DDC</b>	<b>Dementia Day Care Centre</b>
<b>MOH</b>	<b>Ministry of Health, Singapore</b>
<b>OPWD</b>	<b>Older Persons with Dementia</b>
<b>PWD</b>	<b>Persons with Dementia</b>
<b>SSO</b>	<b>Social Service Organizations</b>
<b>VWO</b>	<b>Voluntary Welfare Organizations</b>

## **Defining Terminology**

The terms and main keywords that are frequently mentioned will be defined here.

### **Multi-sensorial Art Engagement**

Multi-sensorial Art Engagement in this study refers to the use of both non-therapies based participatory arts and music-making activities. In the intervention, the combination of both participatory arts and music-making activities is intended to optimize and stimulate multiple sensory modalities including: visual, tactile, auditory, and kinesthetic. Multi-sensorial Art Engagement or activities can be defined as approaches that stimulate the senses, and directed towards promoting adaptive behaviors and enjoyable sensorial experiences (Hope, 1998, Chitsey et al., 2002, Heyn, 2003). Multi-sensorial Art Engagement within the context of this study is directed at the development of artistic competence, skills, and knowledge (Tan, 2016), experience and production of art (The Arts Council of Ireland, 2018) and unraveling of creative potentials (Broderick, 2011). This is unlike multisensory art and music therapies where the focus is on recovery and therapeutic process based in clinical settings (Clift, 2011). Multi-sensorial Art Engagement may include approaches or strategies dependent on the practitioner's professional orientation and training (Heyn, 2003). This can take the form of coordinated stimulation of varying senses through art, music, dance, physical exercises, food tasting, and are by no means exhaustive (Bower, 1967, James, 1984, Griffiths et al., 2019). These approaches have shown to enhance communication, socialization, and quality of care for Older Persons with Dementia (OPWD) (Friedman and Tappen, 1991, Tappen et al., 2000, Arkin, 2000).

### **Intercorporeality**

Drawing upon French philosopher Merleau Ponty's concept of Intercorporeality (Merleau-Ponty, 1962, Merleau-Ponty, 1968), this study embeds the concept of Intercorporeality within Multi-sensorial Art Engagement to reflect on the practice. This looks into how Intercorporeality brings forth a novel and critical dimension to understanding the importance of Multi-sensorial Art Engagement within dementia care practices. The concept of Intercorporeality in practice considers the multiscale

network of meaning that emerges unceasingly and contextually out of one's sensorial interactions with persons, places, and objects (Hahn, 2016) as it establishes immediate relations among all involved (Alkemeyer et al., 2016). From the perspective of my study, it revolves around persons (participants, carers, care associates, myself), places (within dementia day care centre), and is attuned to the objects and materiality (participatory art and music-making activities).

### **Wellbeing**

Recognizing the role of health and wellbeing across all life stages, this study considers fostering the wellbeing of older adults (65 years and above). Drawing an inference from the World Health Organization's (1986) definition, health is 'a state of complete physical, mental, and social wellbeing and not merely the absence of disease or infirmity'. As I refer to subjective wellbeing, it correlates with emotional responses, life satisfaction, domain fulfilment, and psychological functioning (Diener, 1984, Ryan and Deci, 2001). Inherently, as people age, hedonic and eudaimonic perspectives of wellbeing are taken into account. Hedonic and eudaimonic pursuits are regarded here in this study collectively. Hedonic wellbeing encompasses life satisfaction, positive feelings, and the ability to acquire opportunities that one desires (Waterman, 1993, Ryan and Deci, 2001). Whereas, eudaimonic wellbeing encapsulates the actualization of human potentials, personal growth, and meaningful relationships (Ryan et al., 1996, Ryan and Deci, 2001). The notion of flourishing (Seligman, 2011) recognises the simultaneous presence of hedonic and eudaimonic. Flourishing in old age is associated with several predictors. They include positive emotions, engagement, meaning, purpose, interest, positive relationships, optimism, vitality, resilience, self-esteem, and self-determination (Seligman, 2011). With the core of flourishing in later life in the face of physical and societal challenges; "Our Animated Play" in this study looks into the ultimate goal of encouraging and supporting wellbeing construct through engaging OPWD with multi-sensorial art engagement activities.

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# Chapter 1. Introduction

## 1.1 Rationale of Study

The motivations for this research emanated from a personal interest to engage with, and better care for Older Persons with Dementia (OPWD), particularly those who are relying on the services of Dementia Day Care Centre (DDC). The rising incidences of dementia in Singapore have also lead to a surge in the utilization of DDC services (Lien Foundation, 2018). While the Ministry of Health (MOH) has plans to increase the number of DDC places (Ministry of Health, 2016), the attempt to develop quality activities and to understand its effect on the wellbeing of OPWD remains limited. Mahendran et al. (2017) express that research on the effectiveness of integrating arts and music activities as part of the care plans for elderly with cognitive impairments in Singapore are very limited regardless of its association with positive indicators. As a volunteer at the DDC, I observed that leisure and recreational activities consisted of mainly colouring on paper, jigsaw puzzles, picture bingo games, singing sessions to music videos played, or simply watching the television, and these are usually rotated through the day. Frequently, clients mostly remain aloof or unengaged during these scheduled activities despite being seated among others. In consideration of the pervasive sensory loss and its negative impact on older adults (Kiely et al., 2013). I am interested to develop and explore how multi-sensorial art engagement involving participatory arts and music activities can promote the wellbeing of elderly people in DDC. It is with the intention of this study to create a meaningful and engaging programme that can help promote the wellbeing of elderly people and enhance the quality of programmes in DDC.



## **1.2 Research Aims and Questions**

This research aims to develop a 6-weeks multi-sensorial art engagement programme and explore its effect on the wellbeing of Older Persons with Dementia (OPWD) in Dementia Day Care Centre (DDC). It intends to engage the concept of intercorporeality to reflect on the manner which wellbeing is shaped through multi-sensorial art engagement. Drawing on the findings, the study will identify qualities and attributes in the multi-sensorial art engagement session to offer an understanding that guides effective practice in the DDC. This research will address two research questions:

### **1. How might multi-sensorial art engagement contribute to the wellbeing of OPWD?**

- What are the opinions and experiences of participants following their participation in a multi-sensorial art engagement at the DDC?
- What are the elements affecting wellbeing outcomes in multi-sensorial art engagement?

### **2. How does intercorporeality affect wellbeing outcome in a multi-sensorial art engagement session?**

- How might the interplay of meaning, interaction, and relations shape wellbeing in the context of multi-sensorial art engagement?
- What are the key attributes and considerations needed for an effective facilitation session and programme session in the DDC?

## **Chapter 2. Literature Review**

### **2.1 Ageing and Prevalence of Dementia in Singapore: An Overview of the Challenges**

The frequencies of dementia soars in an ageing society (Mattson, 2004), and continual challenges will surface with the changing needs as the condition advances. As such, there needs to be appropriate support and services in the larger community to accommodate to elderly and their families. In Singapore, residents aged 65 years and above are regarded as senior citizens (Ministry of Social and Family Development, 2017). Like other developed countries, Singapore is ageing rapidly. It has the highest proportion of elderly amongst the ASEAN countries (Guan, 2006). According to the latest data, residents aged 65 years and over have gone beyond 9.9 percent in 2009 to 16 percent in 2019, with the figures standing at a prominent 581,700 as of 2019, this foresaw the number of elderlies to reach nearly a million by 2030, which is a significant increase to a 23.7 percent (Department of Statistics Singapore, 2019). This unprecedented age shift is attributable to higher standards of healthcare and investments in public health, leading to longevity, alongside a lower replacement fertility rate (Saw, 2012). From the findings by Institute for Health Metrics and Evaluation (2018), Singapore ranks third in the world with life expectancy predicted to rise to 85.4 years in 2040. Coinciding with the ageing society and prolonged lifespan, are the increased likelihood and diagnosis of non-communicable chronic diseases, disabilities, frailty, with the prevalence of dementia becoming a significant concern (Lim et al., 2017).

In the Well-being of the Singapore Elderly (WiSE) study led by Institute of Mental Health, the prevalence of dementia among older adults in Singapore is estimated at close to 82,000 cases in 2018; which is equivalent to 1 in every 10 persons, with figures envisaged to surpass 100,000 in a few years' time (Subramaniam et al., 2015). Dementia could generally be regarded as an irrevocable condition which encapsulates the deterioration of several domains which includes memory, language skills, visuospatial perception, praxis, conceptual or semantic knowledge, executive function, personality or social behavior, and emotional awareness or expression (Mendez and Cummings, 2003). Underlying the broad term dementia, constitute four main subtypes that include Alzheimer's Disease, Vascular Dementia, Frontotemporal Dementia, and Lewy Body Dementia, each of which engendered by varying causes (National Neuroscience Institute, 2018). The most common form of dementia is Alzheimer's Disease and it accounts for nearly one half to two-thirds of all diagnosed cases (Selkoe, 1991). The onset of symptoms in Alzheimer's Disease is usually reflected by memory difficulties, repetitive conversations, forgetfulness, and troubles with judgment, recollection, and wordfinding (Loewenstein, 2013). This neurodegenerative disorder is evinced by progressive dysfunction of neurons which are responsible for the storage and processing of information, and it was highlighted that the risk of Alzheimer's Disease significantly increases for individuals who are over the age of 70 (Mattson, 2004). Coming after Alzheimer's Disease, Vascular Dementia is recognized as the second most prevalent form of dementia (Kalaria et al., 2008), and is associated with strokes and cerebrovascular disease (Paul et al., 2013). Succinctly, Frontotemporal Dementia comes after and is characterized by profound changes in behavior (LaMarre and Kramer, 2013), with Lewy Body Dementia displaying symptoms

similar to Parkinson's disease (National Neuroscience Institute, 2018) which is induced by Lewy bodies aggregates and neuronal loss (Tröster and Browner, 2013).

The progressive neurodegenerative condition thus affects the quality of life and wellbeing of Persons with Dementia (PWD) due to Behavioural and Psychological Symptoms of Dementia (BPSD) (Brooker et al., 2016). As a result, they are less able to communicate effectively to express their needs (Gjerberg et al., 2013). For this reason, the impact of dementia asserts influence not only on the individuals, but the caregivers on a personal, emotional, financial, and social level (Cahill et al., 2012). Hence, they often requires an extensive range of formal and informal health and or social care services in numerous settings administered by hospitals, residential care settings or the person's home (Cahill et al., 2012). With the exponential rise of dementia cases, community care with the right mix of planning, policies, and programmes is an important factor in maintaining healthy, active and socially engaged seniors (Lai, 2018). Hence, this study set out to objectively measure and assess the effect of '*Our Animated Play*', a novel multi-sensorial art engagement programme to understand the views and experiences of OPWD in community care settings. In this regard, to also review in detail the necessary features and protocols to develop a practice framework for future studies and practitioners keen in this area of study.

### **2.1.1 State of Dementia Day Care Centre (DDC) Development in Singapore**

As more seniors and their families turn to home and centre-based care services to meet eldercare needs, there is a shift towards a more varied and comprehensive community care services and programmes for seniors and OPWD to stay engaged and

age-in-place. Responding to these needs, in the National Plan for Successful Ageing, Ministry of Health (2016) plans to expand the capacity of home and community care by 50 and 100 percent respectively. Enhancing community support for OPWD, this will see the number of DDC places increase from 650 to 3000 by 2020 (Ministry of Health, 2016). DDC is commonly managed by Voluntary Welfare Organizations (VWOs), with a smaller number operated by private providers, and are usually located within the residential neighborhood (Lien Foundation, 2018). These DDC provides structured day programmes which are intended to slow down the deterioration of physical and cognitive functions of PWD when their family members are away at work during the day (Ministry of Health, 2018). The services provided are also inclusive of nursing, occupational therapy, physiotherapy, and social activities (Agency for Integrated Care, 2016). In addition to a referral from the hospital, polyclinic or family service centres for the arrangements of DDC, Agency for Integrated Care remains as the main agency that coordinates referrals for community services (Agency for Integrated Care, 2016).

Although some research pertaining to DDC in Singapore have been carried out, which includes power dynamics of dementia care work (Tan, 2018), utilization of day care services for PWD (Huang et al., 2017), and the development of day care services for seniors (Liu et al., 2015). So far, no studies have looked into multi-sensorial art engagement within DDC for OPWD that explores social aspects of care and wellbeing. To date, studies in close proximity are Leng et al. (2014) iPad activities as a substitute for usual conventional activities in the achieving of wellbeing for PWD at DDC. As well as Lum (2011) exploratory study on community music engagement in a nursing home and day care centre for senior citizens, which has explored music engagement process

between music educators and senior participants. In a recent study from Lien Foundation (2018) revealed that home and centre-based services have overtaken to be the main form of arrangement for long-term care in Singapore, with a preference for seniors to be cared for in the community, or at home in place of hospitals or nursing homes. Besides, a public consultation with the seniors was brought to the attention of their hopes for eldercare centres to provide a wider range of meaningful activities to keep their minds and bodies active (Ministry of Health, 2016). With the growing demand for and supply of DDC in Singapore, these facilities could be further leveraged on to encourage social connectivity and creativity among the elderly. Here, I suggest for a more innovative and enabling range of activities which considers their wellbeing as there are few such studies.

### **2.1.2 Perspectives of Ageing, Dementia, and its Challenges**

Inevitably, the perceptions, attitudes, and lack of apathy on ageing in the society can influence the health choices, behaviours, and experience of the older populations. In biogerontological theories, ageing is perceived as a process of decline within the body correlative to the flow of chronological age, which concludes in the event of death (Cristofalo et al., 1999). The aged body is often regarded as senescence, co-occurring with diminished vital energy, loss of cognitive functions, leaving older people debilitated (Cristofalo et al., 1999, Haber, 2001). Referring to senescence, Finch (1990) points to age-related changes as an unavoidable passage of time supervised by degenerative process, functions, and vitality. Ageism, a preconceived notion is represented by negative attitudes or behaviors shown towards an individual on grounds of their age and is portrayed as a form of prejudice and discrimination (Nelson,

2004). Within the cultural dimensions of ageing, is shaped by the context of ethnic culture, practical circumstances, and external environment, where living alone hold to be a predisposing factor for social isolation (Mehta, 1997). On the conceptual premise of 'learned helplessness', reflects on societally induced barriers that adverts participation of physical activities with chronological age, and succumbing to this has resulted in older persons discerning that it is socially desirable to be less active as they age (McPherson, 1994). In confrontation with the intrinsic and extrinsic challenges, a series of adaptive physiological and behavioral changes may occur (Butler et al., 2004). Furthermore, as Bandura (1989) suggests, older people who perceive themselves as inefficacious are more inclined to stress, depression, anxiety, and dispensable medical attention, which contributes to increased dependency on others as they refrain from exerting cognitive capabilities and physical activities.

Conventionally, research on ageing mostly prioritize on cognitive functioning and physical health, and this has resulted in the oversight of social aspects of ageing and its involvement in the quality of life as people age (Warburton et al., 2013). Underpinned by disengagement theory, Cumming and Henry (1961) highlighted the association between ageing and the continued withdrawal from social life, participation, personal relationships, which gives rise to social isolation. Following reduced socialization, older people are more susceptible to feelings of loneliness, depressive symptoms, stress which increases the risk of cardiovascular disease, and decline in functional capacity (Cacioppo et al., 2002, Dykstra et al., 2005, Dannefer, 2010).

The negative connotations associated with the perception of ageing and dementia continually poses a challenge to the aged population despite current initiatives towards developing more senior-friendly, dementia-friendly amenities and communities. From the recent findings of National Survey on Dementia conducted by Singapore Management University and Alzheimer's Disease Association (2019) had listed stigma, incompetence, rejection, and loneliness as the main concerns of respondents, which included the views of PWD, primary or secondary caregivers, and the general public. Being indifferent to their sensitivity, there is a tendency to regard PWD as 'demented', 'dementia sufferer', or 'care receivers' in place of a 'full person' (Bartlett and O'Connor, 2010). The priority placed on a 'hypercognitive culture' in today's society, PWD are often marginalized as they are deemed to lack 'cognitive citizenship', hence this form of cultural representation engenders stigma, discrimination, and implicit stereotypes which is an obstacle to ensuring good care and quality of life for PWD (Corner et al., 2007). Confronted by injustices, the individual could also be predisposed to factors including prejudices and stereotypical convictions associated to the human rights issue, with the condition of dementia being framed as a form of disability (Bartlett, 2000, Post, 2000, Cahill, 2018). Paramount to the autonomy of PWD, their fundamental right, freedom of choice and control over their way of life is undermined as the condition progress (Boyle, 2008, Hughes, 2011). Discriminating against PWD as Woods (2001) mentions may have the consequence of hindering opportunities for self-expression and growth.

Central to the subjective needs of PWD in the community, it was conveyed that coping with losses, self-esteem, and social connection was of greater value for



individuals who were referred from day care centres and memory clinics (Van Der Roest et al., 2007). Similarly, Huang et al. (2017) suggest for a more holistic approach for dementia day care by addressing to client's cognitive and emotional wellbeing. By bringing into focus person-centred programmes that are tailored in line with the client's preferences, capability, and background, as an alternative to a one-size-fits-all care model or prioritizing on the usual physical and safety needs (Huang et al., 2017). In allowing PWD to age gracefully in the community, requires a move away from persisting ageing and dementia stereotypes, as well as to surpass fundamental healthcare needs. Providing OPWD with new opportunities and more accessibility to quality programmes will enable them to continue thriving in old age.

### **2.1.3 Reframing the Perspective of Older Persons with Dementia (OPWD)**

Reinstating the possibilities of adaptive capacity and acquiring knowledge in old age, a longitudinal study has shown that under the aegis of plasticity or reserve capacity, continued growth is possible (Baltes and Lindenberger, 1988, Baltes and Baltes, 1990). Elaborating on Rowe and Kahn (1987) model of successful ageing, Baker et al. (2009) study on the relationship between involvement in physical activity and successful ageing in older adults has found that that engagement with life does not necessarily subside, even in the face of dementia and or chronic illnesses. Steering away from successful ageing (Rowe and Kahn, 1987), where the focus is on the absence of illness and disabilities, I turn to the multidimensional concept of positive ageing which encompasses optimal, successful, productive, and healthy ageing (Bar-Tur and Malkinson, 2014). This embodies positive psychology (Seligman and Csikszentmihalyi, 2014), flourishing (Seligman, 2011), satisfaction in life (Diener, 1984) thereby

encouraging the involvement of meaningful activities (Lopez and Snyder, 2003, Lyubomirsky, 2008). In the presence of dementia, Kontos (2003) observes that creativity and imaginativeness persist, through embodied consciousness. Engaging with the ageing phenomenon in Singapore, Mehta (2019) stresses on the multidisciplinary solution in a society where services, approaches, and policies must be expanded and given a broader consideration e.g. physical, social, psychological, and spiritual needs. For this reason, I hold the view of gravitating less on memory or making recollections, as the absence of committing to memory, I argue brings the essence of ingenuity and give prominence to the unfolding of forthcoming activities. This stance is supported by Basting (2009) who writes that memory is relational, as existing between people, not as belonging to one person or another, where she also draws attention to the value of being in the present moment. Moving forward, it is worth noting that the engagement with the arts can provide a way to elicit the intrinsic capacity and unleash the creative potentials of OPWD, as well as opening up avenues for meaning-making (Basting, 2009), medium for expressiveness, and increase of wellbeing, development of new roles, and rebuilding of self-esteem (Craig and Killick, 2011). Taken together, the findings thus far have demonstrated a need to reframe the way we perceive OPWD, to go beyond their deficits, and focus on their current functional abilities.

## **2.2 Benefits of Participatory Arts Activities for Elderly**

Experiences with participatory arts often sit alongside health and wellbeing, with growing evidence demonstrating a positive relationship between participatory arts and better quality of life in old age (Cohen, 2005, Cutler, 2009, Organ, 2013). Broadly, the term arts and health refers to the use of arts-based approaches to enhance individual and community health, for health promotion or healthcare (Macnaughton et al., 2005). This corresponded to artists working in diverse settings alongside the use of any art form with the aim of health, aesthetic or social outcomes, which may involve an individual, a group setting, or having no participants at all (Smith, 2003, Putland, 2008, Badham, 2010). An alliance in the intersection of the arts, health, and wellbeing include the National Alliance for Arts, Health and Wellbeing (NAAHW), and within which the All-Party Parliament Group on Arts, Health and Wellbeing (APPGAHW) operates proactively to support practitioners and progress in the field. Alongside, APPGAHW (2017) presents a comprehensive inquiry report into the existing practice and research on the engagement of arts in social care. Drawing on the findings, I have further considered the diversified views and first-hand experiences, benefits, and value of arts for health and wellbeing, approaches taken, and the recommendations on practices (APPGAHW, 2017). As well, the Health Evidence Network (HEN) synthesis report on arts and health covers the most extensive review of the evidence on the role of the arts in improving health and wellbeing in the WHO European Region to date (World Health Organization, 2019b). Findings from the HEN report have acknowledged the growing evidence base for the role of arts in improving health and wellbeing, recognizes the added health value of engagement with the arts, and the cross-sectoral nature of the arts and health fields (World Health Organization,

2019b). Besides, underlying the diverse use of terminologies, the field encompasses the generic arts in health, arts for health, arts and health, healing arts (White, 2009), arts in health practice (Clift et al., 2009), community-based arts health practice (McQueen-Thomson and Ziguras, 2002), and socially engaged arts practice (Badham, 2010).

Removing the complexities, I will use the term *arts-health practice* proposed by Tan (2016) in my study. An arts-health practice is characterized by the development of artistic competence, skill, and knowledge, with emphasis on the artistic product, and are different from art therapies or any creative therapy practices (Tan, 2016). On a social paradigm, community-based arts health practice (McQueen-Thomson and Ziguras, 2002), or socially engaged arts practice (Badham, 2010), epitomizes a broader social determinant of health, often involving active participation of individuals or groups in the community, intended at promoting health and wellbeing (McQueen-Thomson and Ziguras, 2002, South, 2004). Beyond this, the movement of community arts or socially engaged art stemmed from the social democratic political policies which underpinned participatory art practice (Bishop, 2012). Social democratic political parties are supported by developmental approaches and participatory practice (Clifford and Kaspari, 2003). Following that, resulting in a robust community cultural development field, which links social theory and art practice to health and wellbeing; this connection also imbues the principle of 'building connectedness' (Putland, 2008).

In participatory arts programmes or activities entails creative arts engagement session that is conducted and designed by one or a few other arts practitioners (Tan,

2016). Participatory arts also embrace an extensive range of art forms comprising of literature, painting, music, sculpturing, dance, within a multiplicity of others (Novitz, 2001). Often, participatory arts activity is usually associated with wider developmental, social inclusion or health outcomes, drawing on creative competencies and artistic qualities in the process (Raw and Mantecón, 2013), and pertains to art-making rather than art observing (Noice et al., 2013). In addition, other documented benefits of arts health engagement for the elderly include social inclusion, higher self-esteem, and confidence (Jermyn, 2001), capacity to communicate in multi-sensual or emotional domains (Thiele and Marsden, 2003), promotes positive health outcomes and artistic expression (Simons and McCormack, 2007) and sense of mastery (Cohen, 2009). To contrive a relational framework for positive relationships, arts practitioners and project participants develop a proactive connection through learning and exploration in tandem (Raw and Mantecón, 2013).

The challenges faced by professional carers in dementia care settings including time limitations (Lloyd, 2019), allocation of resources, workload, and the emphasis on priority needs (Broome et al., 2019) often deters them from making arrangements for arts activities. Within these communities of practice (Wenger, 1999), the role of artist and facilitator extends as it provides opportunities and helps elderly people discover their creative potentials (Huhtinen-Hildén, 2014). In turn, as I utilize participatory arts and music activities in this present study, I have considered its affective qualities and successively, to reflect on how the interactive processes involving OPWD inform participatory art practices. As well, engaging the concept of intercorporeality to advance the understanding of care practices, interacting, and embodied selves in the

context of multi-sensorial art engagement as it opens up opportunities to foster wellbeing and support meaningful engagements.

So far, most studies in the field of arts and health has only focused on the therapeutic use of arts, works centred on chronic conditions and addictions (Hamilton et al., 2003), or are mostly clinically focused in health care settings, having few community studies with wider public health relevance (Clift, 2012). Arts-health practice and participatory practices, set against clinically-based arts-health studies are often confronted by methodological discourses and conflation or seen as less robust, despite reported benefits coming from considerable contexts (Clift, 2012). This indicates a need to better understand the mechanisms of arts-health practices alongside the theorization of creative practitioners' practice methodology (Raw et al., 2012). Moreover, it is recommended that future research provide a foundation for further planning and upscaling of arts intervention that is securely evidence-based (Clift, 2012), in simultaneous with a more rigorous research design (Putland, 2008).

From here, I will explore the effect of multi-sensorial art engagement on OPWD. With the introduction of participatory arts and music activities in this present study, I will address how this engagement plays a role in affording positive affect, interaction and relations in this intercorporeal network, and how wellbeing is presented and shaped in the process. As such a conceptual framework is currently lacking, I will propose a practice framework which sees to the understandings, qualities of intercorporeality, and developments channeled from the practice of multi-sensorial art engagement. To establish an understanding and experiences on the effect of the

programme, the research process takes into consideration an ongoing corroboration, reflexive analysis, and intersubjective engagement. From this iterative cycle and data gathered from various perspectives including the participants, staff, and caregivers at the DDC; hence enabling a more credible and comprehensive account that shapes the findings of the research.

### **2.3 Intercorporeality, Wellbeing and the Arts**

A concept introduced by Merleau-Ponty (1962), intercorporeality is defined as a pre-reflective intertwining of the lived and living bodies, in which the own's body is influenced by the other's body, leading to an embodied communication. Describing this intercorporeal interaction, Merleau-Ponty (1962) writes:

The communication or comprehension of gestures comes about through the reciprocity of my intentions and the gestures of others, of my gestures and the intentions discernible in the conduct of other people. It is as if the other person's intentions inhabited my body and mine his (Merleau-Ponty, 1962p.215)

The meaning and formation of relations that constitute bodies, objects and the relations that becomes apparent between them are seen as an intercorporeal network (Merleau-Ponty, 1968). With bodily co-presence, intercorporeality can transpire by the means of perception and movement, emerging from the participant's participation as a novel and own lived experience (Loenhoff, 2017). Alongside a shared space of dynamic intercorporeal engagement exemplified by the expressiveness of bodily subjects through movement, posture, touch and eye contact (Zeiler, 2014). This concept of intercorporeality emerges from interactive practice through synchronisation of embodied agents in which actions become inherently expressive and meaningful; where over time more than just inter-bodily resonance, acquires its pattern, autonomous dynamics, and gains distinctive history (Fuchs, 2016).

By embodied practice, it refers to practices that are mediated by the society in and through the autonomous body, identified by features of self-care and self-expression (Gilleard and Higgs, 2014), as a holistic experiencing individual (Barbour, 2006). Drawing on the concept of intercorporeality and embodied arts practice, Purser (2016) suggests that expressive arts practice along with philosophical theory can inform new dimensions of understanding and experience in relations to wellbeing and care for the self and others, and such works enable an on-going communication and open up the creative experience of co-expression. In ensuring that PWD is entitled to equal opportunities to participate in social life, Kontos and Grigorovich (2018) highlighted the relevance of intercorporeal ethics and the need for scholars, policymakers, artists, and health practitioners to engage in this body of work. As regards, intercorporeal sensitivity considers the cultivation of environment for persons with dementia which supports positive human potentialities (Kontos and Grigorovich, 2018). Creative and spontaneous engagements through improvised nature are not ascribed to the cognitive abilities of a person, instead, it is a bodily form of consciousness which entails an intrinsic intercorporeality of being in the world and the social structures that are shaped (Kontos and Grigorovich, 2018). Mostly, research on the relationship of intercorporeality and embodied arts practice tended to focus on the practice of dance, improvisation, and movement, and this included dance as a site of intertwining (Carr, 2014), connectedness and creative collaboration in the embodied practice of dance (Purser, 2016), embodied engagement in arts research (Barbour, 2006) and embodied practices in improvisation (Hahn, 2016).



Consecutively, in this study I refer to subjective wellbeing (Diener, 1984), and considered the convergence of both hedonic (Kahneman et al., 1999) and eudaimonic (Waterman, 1993) perspectives. Essentially, subjective wellbeing relates to people's emotional responses, life satisfaction, and domain fulfilment (Diener, 1984) intersected with optimal psychological functioning and experience (Ryan and Deci, 2001). Hedonic wellbeing is outlined by positive feelings arising from material objects and the ability to acquire opportunities that one desires (Waterman, 1993). Eudaimonic wellbeing is concerned with the actualization of human potentials (Ryan and Deci, 2001), personal growth and meaningful relationships (Ryan et al., 1996). Given the overlapping perspectives, both hedonic and eudaimonic pursuits taken together are associated with the greatest degree of wellbeing (Huta and Ryan, 2010). In this case, as I employ the term *wellbeing*, it pertains to flourishing in later life and the human experience through fostering the health and wellbeing of OPWD. (Refer to Defining Terminology Pg. 12).

The goal of this work does not serve to arrive at a medical improvement or meant for any clinical therapeutic purpose. Instead, it focuses on the engagement of multi-sensorial art and capitalizes on the social determinants of health and wellbeing as it draws on an exploratory design from the social sciences. In this sense, social determinants of health and wellbeing consider the development of social cohesion, minimalizing loneliness and social isolation, and strengthening of individual and group identity (World Health Organization, 2019a). Further, defining exploratory design in social science, Vogt and Johnson (2011) describe as:

A distinctive way of conducting science, a scientific process, a special methodological approach, and a pervasive personal orientation of the explorer. The emergent generalizations are many and varied, and they include the descriptive facts, folk concepts, cultural artefacts, structural arrangements, social processes, and beliefs and belief systems normally found there (Vogt and Johnson, 2011p. 105)

Hence, undertaking an exploratory design enables credibility and robustness through observing and analysing reality, recognising the 'why' and 'how' things happen while emphasising on the development of well-grounded generalizations about the group, process, activity, or situation (Stebbins, 2001, Reiter, 2017). With the exploratory design nature, focus on social determinants of health and wellbeing, and participant's experiences, the outcomes will be ascertained through observed impact and the personal testimonies of all participants involved in the programme. This will be evaluated accordingly with the accounts of participant's own experiences, together with the viewpoints of staff, care associates, carers at the DDC, and will be enhanced with the use of participant observation and field notes. Taken together, these multiple perspectives will establish an understanding of 'why' and determine 'how' the programme contributes to an overall experience, wellbeing outcomes, value of the creative and learning process for participants, carers and staff. In addition, here I draw in relevant qualitative exploratory studies in the arts-health sector which are well-conducted and were also designed to appraise features of wellbeing and social outcomes using mainly observational approaches in the social sciences (Skingley and Bungay, 2010, Ullán et al., 2013, Vogelpoel and Jarrold, 2014, Campbell et al., 2017, Windle et al., 2018). Consequently, in this study, from the responses, key elements and findings which emerges from the programme (successful attributes, quality of the programme, arts practice and facilitation, suggestions or otherwise), I will propose a

practice framework and consider how these could inform future development of arts-health practices based in dementia care settings or particularly in DDC.

### **2.3.1 Multi-sensorial Art Engagement for Older Persons with Dementia (OPWD)**

Concurrently with the degenerative symptoms of dementia, is accompanied by the loss of ability to process sensory stimuli, increasing the risk of sensory deprivation with their declining primary senses (Haigh and Mytton, 2016). This indicates a need for auditory, visual, olfactory, tactile, taste, and kinaesthetic stimulation (Vozzella, 2007, Haigh and Mytton, 2016). Deprivation of sensory enriching experience and the unavailability of appropriate activity may significantly reduce individual's health and wellbeing (Kovach, 2000). Goldstein-Levitas (2016) considers sensory stimulation as techniques for invigorating the senses with the desired result of enhancing the quality of life, alertness, and for ameliorating behavioural and psychological symptoms. The combination of varying sensory modalities according to Jensen (1997) was found to elicit better outcomes than the use of a single modality. Similarly, James (1984) holds that a multisensory approach involving music enables multiple unimpaired senses to be triggered, allowing participants to arrive at a high level of stimulation and enjoyment. A recent multisensory arts intervention for PWD focused on olfactory stimuli has found to strengthen relationships, encourage active engagement and meaningful interactions (Griffiths et al., 2019). Further documented benefits of sensory stimulation include creativity, relaxation, reduction for the need of chemical restraints (Vozzella, 2007), adaptation to memory loss (Maddock et al., 2001), mind-body coordination (Berrol and Katz, 1985), and improved communication (Weil, 1966). Despite existing accounts of interventions involving sensory stimulation, research into

the appropriate interventions which can stir latent abilities are still underdeveloped (Bakker, 2003). An extensive analysis of reviews by Strom et al. (2016) found that much of the literature failed to demonstrate the methodological and theoretical characteristic of sensory stimulations used for persons with dementia in the interventions, and have since recommended further studies to address the conceptual framework, and to consider the effect on quality of life.

Given the prevalence of dementia in Asia, studies conducted on sensory stimulation with older adults were extremely limited in the continent, with a majority of the contributions coming from the USA, Canada, Europe, and Australia (Strom et al., 2016). Collier and Jakob (2017) suggest that further work is required to investigate the benefits of the multisensory approach in exploring the experiences of PWD. Besides, although the concept of intercorporeality is seen to be responsive with visual, auditory, tactile, and kinaesthetic practices (Meyer, 2017), there have been few investigations on the correlations of intercorporeality and multi-sensorial art engagements. Even so, prior studies were mostly stemmed on technologies and the arts, such as: bodily encounters with new media art, performance, installation (Springgay, 2005), body in contemporary art performance with integrated new technologies (Davidson et al., 2017), and multisensory perspectives of touch in art museum (Christidou and Pierroux, 2019). While the exploration of multisensory engagements involving PWD mostly prioritized on art, music therapies (James, 1984, Jensen, 1997, Ozdemir and Akdemir, 2009, Sánchez et al., 2016), or multisensory environment (Hope, 1998, Baker et al., 2003, Cox et al., 2004, Sánchez et al., 2013). So far, no study has embedded the concept of intercorporeality within multi-sensorial art engagement involving the use of both

non-therapeutic arts and music activities for OPWD in DDC. Taking these components together, this exploration will examine how the enactive nature of intercorporeality, dimensions of intercorporeal experience and intercorporeal network in the context of multi-sensorial art engagement influences and supports wellbeing.

## **Chapter 3. Research Methodology**

### **3.1 Research Objectives**

This study involves research and a practical component that entails the development and delivery of a 6-weeks multi-sensorial art engagement comprising of participatory arts and music activities at a Dementia Day Care Centre. The incorporation of creative practice in the exploration of research questions (Gray and Malins, 2016) can help identify and promote attributes of a 'reflective practitioner' (Schon and DeSanctis, 1986). The 6-weeks programme titled '*Our Animated Play*' aims to: i) Investigate how wellbeing is afforded through multi-sensorial art engagement; ii) Engaging the concept of intercorporeality to reflect on how wellbeing is shaped, and iii) Develop a practice framework to guide future implementation of such a programme for OPWD in DDC.

### **3.2 Research Design**

This research design follows a qualitative phenomenological methodology to gain insights into the experiences and opinions of the participants of the multi-sensorial art engagement programme in DDC, and its effect on their wellbeing.

The role of qualitative research in the arts and health enables illumination of participants experiences and uncovers processes involved in the project delivery (Daykin and Stickley, 2015). A qualitative exploration with inductive, interactive, and holistic attributes brings about a better understanding of how people behave and think as individuals and as part of a group, along with the development of concepts,

conceptual frameworks, and theories from interviews, observations, and discourses (Parahoo, 2014). In essence, qualitative research captures the subtleties and complexities of the research subject in an everyday context (Anderson, 2010), first-hand experience of valuable meaningful data (Duffy, 1987), and social or cultural norms (Hennink et al., 2010). Qualitative research sheds light on the social, emotional, and experiential phenomena in health care (Giacomini et al., 2000), where it seeks to understand participants responses to health, illness, and wellbeing, and meanings they contrive of these encounters (Morse, 2016). Concerned with humanizing dimensions of care, qualitative research facilitates the complexity, depth, and range of living situations (Todres et al., 2009), provides a compelling moral imperative to more humanized forms of care through a social justice perspective which includes advocacy, development, and reinforcement of theories or concepts, interventions, and new approaches to care (Morse, 2002, Morse, 2016).

The phenomenological approach has demonstrated the ability to capture the essence of the meaning of the lived experience, occurrence and encounters with phenomenon or concepts (Creswell and Clark, 2017). To which the inductive and extensive description allows concepts to be identified through a comprehensive discussion (Morse, 2016). Given the relevance of the study pertinent to an arts, health for wellbeing intervention, phenomenology, as a research approach has shown to be effective for illustrating human experience surrounding care, healing, wellbeing, with the interpretive component in parallel to practice (Svedlund et al., 2001, Wojnar and Swanson, 2007). On the phenomenon of human experience, the use of arts in healthcare research has strengthened participants personalized experiences of their

inner world, with the creative and artistic process eliciting a contextualized understanding and distinctiveness of participants own experiences (Latham, 2014, Nguyen, 2018). Referring to sub textual phenomenology coupled with arts practice, Vallack (2010) proposes that methodologically, this provides a coherent and epistemological context for academic research as the use of any art form, be it through music, image, or movement along with consistent theoretical framework enables phenomenological essences of an inquiry to be articulated thoroughly. In Moss and O'Neill (2014) phenomenological analysis of the experience of arts in hospital for patients, the approach was found to be useful in generating discussion on participants involvement with arts, on unfolding new themes and acquiring an in-depth understanding of a phenomenon.

To address the research questions, using a qualitative phenomenological methodology will enable access to a multi-perspective and in-depth understanding of the world and the everyday lives of participants which includes their usual routine activities and contrive meanings and experiences derived from the implementation of the programme. Within this qualitative phenomenological approach, the effect of the 6-weeks multi-sensorial art engagement could be better examined through comprehensive documentation of the processes and significant moments which occurs, from the view of participants, and those involved in the programme. It will facilitate the exploration on the effect of multi-sensorial art engagement and offer a glimpse into how the enactive nature of intercorporeality within these dynamic engagements could support wellbeing, as well, to highlight the key attributes needed for an effective facilitation session for OPWD in DDC.



### 3.2.1 Research Phases

The research design will consist of three main phases, including the *pre-intervention*, *delivery of the programme*, and *post-intervention*. A rundown of the research design phase together with the time frame and plan of action are further illustrated in **Figure 1**.

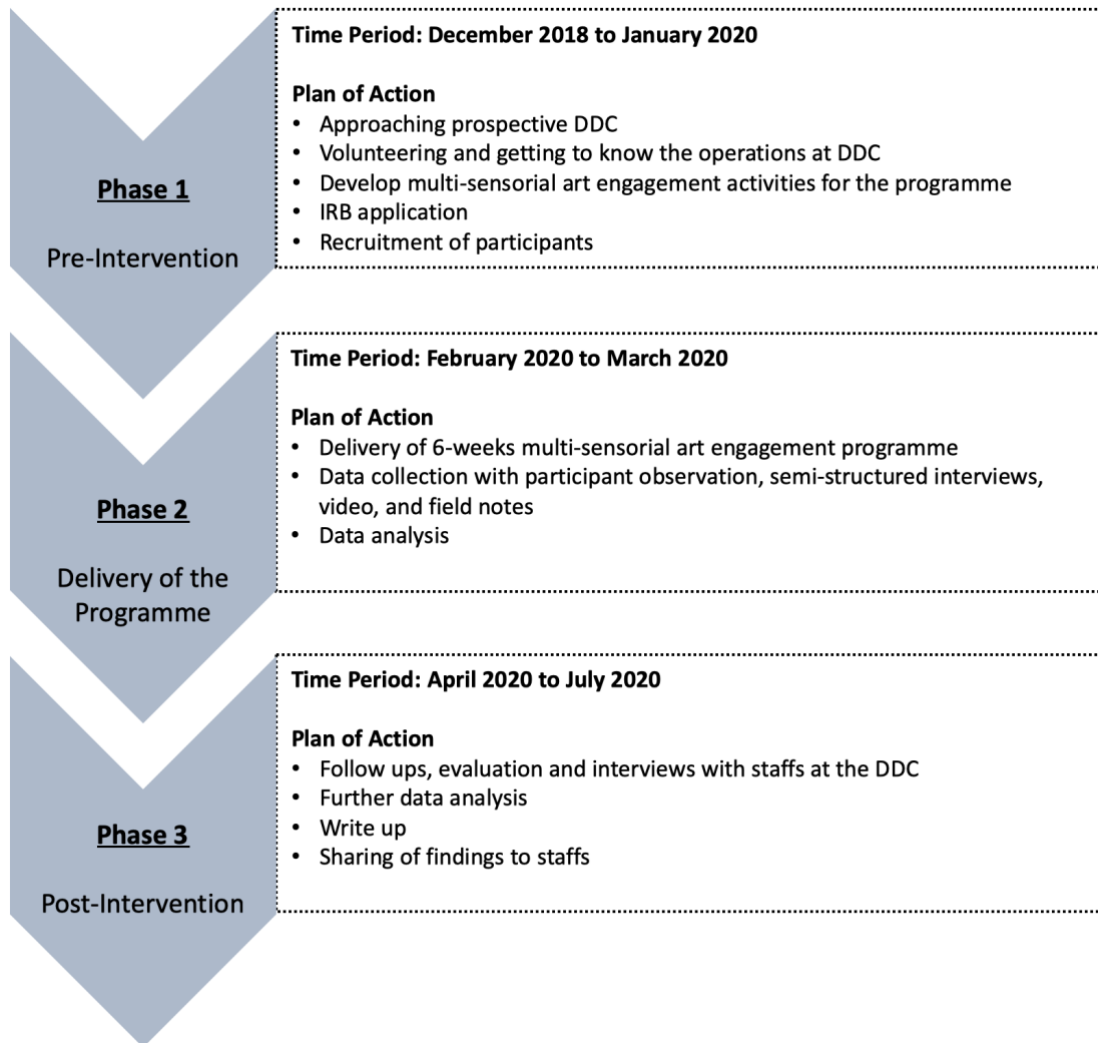


Figure 1. Rundown of Research Design Phase

Next, in **Figure 2**, an extended weekly session breakdown will be shown under the delivery of the programme.

## Delivery of the Programme

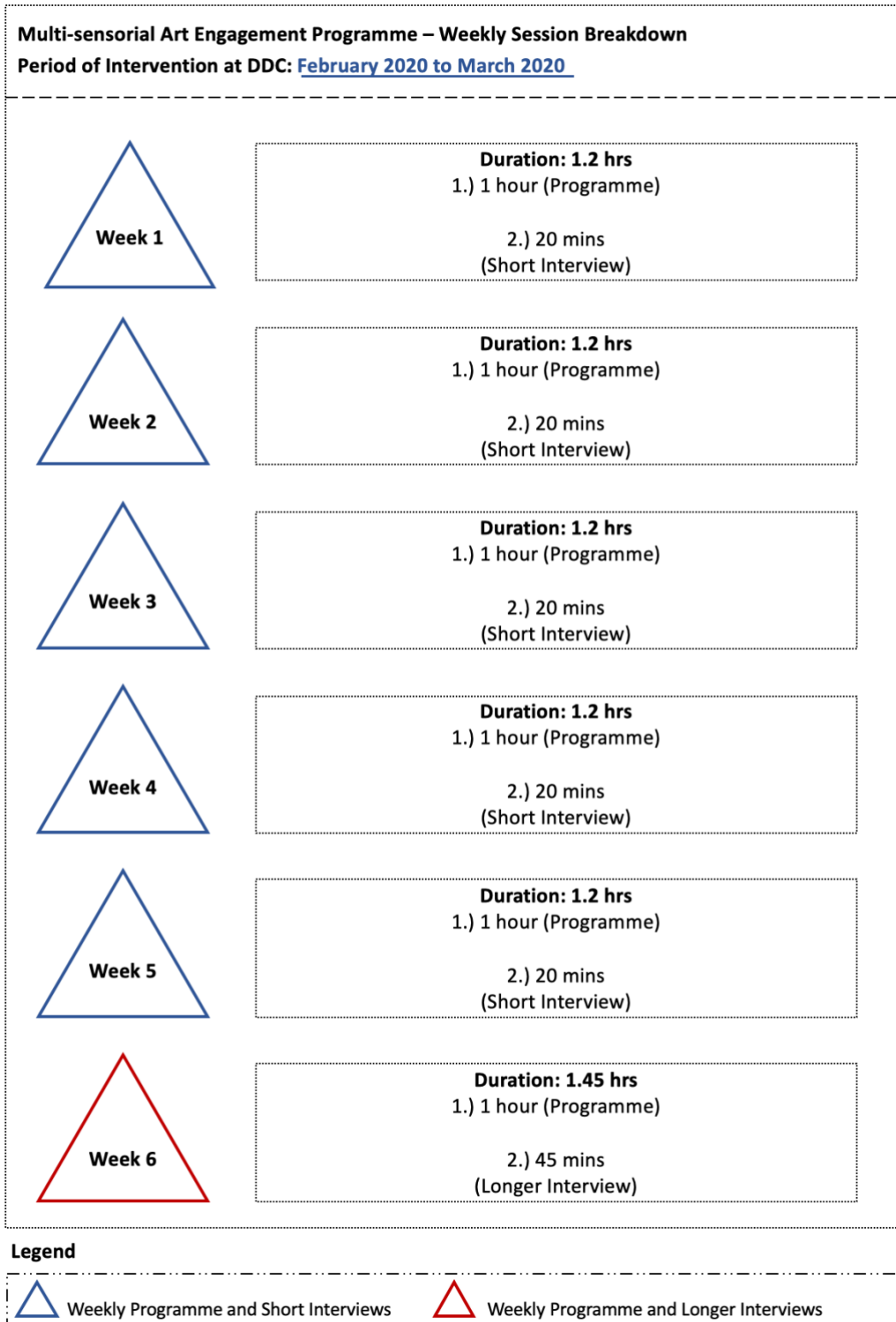


Figure 2. Delivery of the Programme

For delivery of the programme, a 6-weeks programme is conducted at a DDC. The period of intervention at the centre was from February 2020 to March 2020. The programme was conducted concurrently with data collection, using methods of participant observation, video recordings, and taking of field notes. Semi-structured interviews were carried out weekly at each centre, with shorter interviews taking place from week 1 to 5, and an individual longer interview conducted on week 6. The intents for the weekly interviews take into consideration the profile of participants, as they may have difficulties in recalling their experiences. Each regular programme session lasted an hour. An additional 20 minutes was added on week 1 to 5 and 45 minutes on week 6 for the interviews. In other respects, an indication of limitations in this study would consider its exploratory element, practical constraints in having a control group, and my dual role as a researcher and facilitator. Identifying these factors, it will be further addressed and reflected upon in the concluding chapter.

### **3.2.2 Design of Practical Project**

*'Our Animated Play'* is a 6-weeks multi-sensorial art engagement designed for OPWD at DDC. Each session comprises of two components art-making (Part One) and music-making (Part Two). In this case, my impetus behind the design of the programme is to allow access to versatility and a repertoire of synchronous stimulation through the pairing of both art and music-making activities. This also includes individual elements (materials and suchlike) across various pairings to enable a multiplicity of options, to assimilate participant's experience and their reactions each week. I draw inspiration from a myriad of sources in the literature where artists, researchers, facilitators, and social workers have documented the benefits of the elderly participating in arts and music activities. This comprised of mainly music and drawing with institutionalized elderly (Rosling and Kitchen, 1993) and the creativity and ageing study (Cohen, 2009). More recently, studies have also shown that benefits can be derived from expressive arts activities. In Lin (2021) findings, which have included music, rhythm, artistic creation, sports and games exhibited an increase in emotional wellbeing, aid in body relaxation, and an improvement in interpersonal skills for the elderly with dementia. Comparably, Soontorntanaphol (2021) study of elderly participation in music and art activities has indicated that the greater the participation of the elderly was, the greater the feeling of satisfaction they acquired. On this basis, with the existing benefits and potential presented, it also draws my attention as to how I can integrate the two components of art and music-making in conjunction with a multisensory experience. Hence, the programme design also takes into factor several attributes; such as maximizing visual, tactile, auditory, kinaesthetic, and olfactory senses. Likewise, the underlying reason behind the 6-weeks programme is for the

participant to explore different creative mediums through art-making and progressively moving on to an interpersonal and interactive dynamical group experience in music-making alongside embodied movements. Aside from that, the art materials have been carefully chosen to encourage stimulating experiences. For example, the aroma of dried flowers to stimulate the sense of smell, materials with different textures for textural exploration and to stimulate their haptic experience, as well as the addition of a modern twist to traditional instruments in which may facilitate elderly recollection and reminiscence. In Part One for art-making, participants are led to create a single instrument individually. Part Two involves music-making where participants are led to explore rhythms and beats.

In the design process, co-creation and collaborative participatory design practice in healthcare, deriving from the context of participatory action research were drawn upon. This approach delves into a series of planning, acting, observing, and evaluation by which the cycles of reflection and reflexivity are inherently prominent (Kjellström and Mitchell, 2019). Reciprocally, participatory action research also incites distinct features of the collaborative process where the social and practical aspects, the building of relationships with participants are imperative (Kjellström and Mitchell, 2019). By engaging the clients (participants), care team, and caregivers in the co-design process, enables them to be actively involved in the creation as well as the assessment of the art and music-making activities. In mutuality, Jakob and Collier (2017) indicated the importance of actively engaging healthcare practitioners and carers to elevate the impact of direct knowledge exchange, education, and the relevance of sensory design in dementia care.

Henceforth, the design of the programme has taken into consideration the feedbacks of not just the clients themselves, but the care team including the staff nurse, care associates and client's own helpers at the centre. While developing this programme, I have also attempted some arts activities at both the centres when I was volunteering, to assess the suitability of such activities for the clients. This is tested with the presence and active participation of the client's helpers who were present, and care associates at the centres. Further, I was open to the suggestions given by the staff nurse and centre director when devising this programme to ensure that it is not repetitive with any of the activities that they have done formerly or are currently having. To help validate the contributions of the programme, the care team were enlisted to provide their inputs and to assess the impact of the programme. The programme outline is reflected in **Table 1**, in the following page.

Week	Programme Outline	Sensory Modality
1	<p><b><u>Glissandos</u></b>  <b>[Part One – Art Making]</b>  Participants will be engaged in the making of <i>rhythmic rain sticks</i> while putting together circular plastic roll, food grains (red beans, mung beans, yellow beans and star anise), decorative paper, yarn rolls, washi tapes, powdered glitter and stick-on.</p> <p><b>[Part Two – Music Making]</b>  Exploration of rhythm and beats making. This will involve all participants to engage in a rhythmic play.</p>	Visual Tactile Auditory Kinaesthetic Olfactory
2	<p><b><u>Click &amp; Clack</u></b>  <b>[Part One – Art Making]</b>  Creating of <i>castanets</i> using circular wood sheet, chenille stems, acrylic paint, decorative eye stickers, buttons, and white glue.</p> <p><b>[Part Two – Music Making]</b>  Exploration of rhythm and beats making. This will involve all participants to engage in a rhythmic play.</p>	
3	<p><b><u>Ting-a-ling</u></b>  <b>[Part One – Art Making]</b>  The making of <i>tambourine</i> with wood ring, yarns, bells, ribbons, decorative stickers, coloured threads, and washi tapes.</p> <p><b>[Part Two – Music Making]</b>  Exploration of rhythm and beats making. This will involve all participants to engage in a rhythmic play.</p>	
4	<p><b><u>Funky Times</u></b>  <b>[Part One – Art Making]</b>  Participants will be involved in the creation of <i>spin drums</i> using pre-cut wood, paper straws, decorative paper, cloth tapes, washi tapes, leather threads, coloured beads, feathers, and stickers for decorations.</p> <p><b>[Part Two – Music Making]</b>  Exploration of rhythm and beats making. This will involve all participants to engage in a rhythmic play.</p>	
5	<p><b><u>Dancing Flower Maracas</u></b>  <b>[Part One – Art Making]</b>  This session entails the making of <i>flower maracas</i> using plastic shaped containers, scented flowers (cranberry, chrysanthemum, rose, and lavender), washi tapes, cloth tapes, stickers for decorations, powdered glitter, decorative thread for hanging.</p> <p><b>[Part Two – Music Making]</b>  Exploration of rhythm and beats making. This will involve all participants to engage in a rhythmic play.</p>	
6	<p><b><u>Groovy Charms</u></b>  <b>[Part One – Art Making]</b>  Creating of <i>hand-held drums</i> with circle blank frisbee, coloured ribbons, white glue, decorative cloth tape, other pre-shaped decorative materials, and poms poms.</p> <p><b>[Part Two – Music Making]</b>  Exploration of rhythm and beats making. This will involve all participants to engage in a rhythmic play.</p>	

Table 1. Programme Outline

### 3.2.3 Ethics

Mindful of the emerging ethical implications which may surface throughout the research process, from the choice of topic, selection of design, in the field, to the publication of findings (Parahoo, 2014). When undertaking this project, I have considered potential ethical risks and have adhered to the following steps for minimization of harm to safeguard the interests of participants. First and foremost, ethical clearance is cleared under the Institutional Review Board of NTU's Research Integrity and Ethics Office, in compliance to NTU's policy on Research involving Human Subjects. The study is approved under reference number: **IRB-2019-11-012**, with all protocols and compliances followed throughout the study period. Refer to **Appendix 1**. for NTU Institutional Review Board Approval.

In light of the additional risks posed with the inclusion of OPWD in my research work, I have further prepared myself by going through the relevant literatures, and have requested for assistance from the staff nurse and centre director of the DDC, who served as the gatekeepers and are key informants for my research, regarding of any ethical issues which I have to be mindful about, and to facilitate the process of seeking consent from authorized representatives. Considering that OPWD may lack the ability to understand the consequences of their involvement in the research or make a relational judgment, informed consent were obtained from authorized representatives (Slaughter et al., 2007). To ensure the assent of OPWD in their initial and ongoing willingness to participate in the research, potential participants were consulted directly in addition to the informed consent from their next of kin (Slaughter et al., 2007). Furthermore, noting the imminent risks that are apparent in all phases of my



research, I have recognized and had exercised the ethics as process model (Ramcharan and Cutcliffe, 2001), reflexivity in ethical stance (Guillemin and Gillam, 2004), and protocols to minimize issues related to participants and researcher own physical, emotional and psychological safety (Paterson et al., 1999, McCosker et al., 2001).

### **3.2.4 Anonymity and Confidentiality**

Safeguarding the confidentiality and privacy of participants involved in this study, this section will attend to the measures that were undertaken. To begin with, pseudonyms was applied in ensuring that the identities of the research participants, staffs, and names of the centres were anonymised. The pseudonyms was created using an online generator, which is then transferred over to a master list in an excel document encrypted with a password. With regards to the storage of research data, all digital documents of this research are stored in a password encrypted laptop and tablet. The research data are strictly authorized and are accessible only to myself and my supervisors when the need arises. Also, when there is a need for photos to be taken, I made sure to refrain from taking pictures from angles where their faces are visible. In the scenario where their faces are noticeable, the images were edited to ensure that their identities are not compromised, where subsequent to the edits, the original images were deleted. As for the storing of research documents, I am mindful of the identifiers and the manner in which my files are named.

### **3.2.5 Access to the Field**

Gaining access to the field site first began when I shortlisted several prospective day care centres to approach earlier in December 2018. Having identified OPWD as the main research participants, the number of centres were narrowed down with my focus on securing access to sites that only admit clients with dementia. I went ahead to contact these centres directly and shortly after, introductory meetings with the respective centre directors and staff nurses were scheduled. Access to the field site was granted subsequently after the meetups, and eventually, I decided to settle on a main DDC. The centre is a DDC that admits and provides only structured day care programme for PWD (Ministry of Health, 2018, National Council of Social Service, 2019). Location wise, the DDC is situated at the periphery of the central region in Singapore, with comparative bustling foot traffic attributable to the enclaves of offices in the vicinity. I began volunteering at the DDC in mid-December 2018 and returned for weekly half or full-day visits, as a volunteer I also had the chance to be involved in the daily scheduled programmes for the clients as I assisted the care associates in the transfer or moving of clients from one place to another, leading of leisure and cognitive activities, as well as encouraging and guiding the clients during their physical exercises. On a general note, these frequent visits have allowed me to get acquainted and oriented to the norms of the setting and activity scheduling while allowing an opportunity for me to observe precursory or raise any questions I have had.

### **3.2.6 Sampling and Recruitment**

At the DDC, I have requested assistance from the staff nurse and centre director on the subject of sampling and recruitment of participants, this is to ensure that I do not create any avoidable inconveniences to the staffs or expose the clients to any risks. Having that in mind, in discussion with the staff nurse and centre director, I proposed the approach of purposive sampling (Patton, 1990). Referring to Devers and Frankel (2000) definition, purposive sampling is a strategy that is intended to enhance the understandings of selected individuals or group's experiences or use for developing theories and concepts which drives at the greatest insight into the research question through information-rich cases. Concerned with the study of information-rich cases in depth and detail, purposive sampling brings the understanding and illumination of cases into focus which generates data relevant to research aims, rather than the generalization of a sample to the entire population (Patton, 1999). Beyond this, the rationale on the selection of purposive sampling included the means and flexibility to identify prospective participants who are willing and able to participate (Etikan et al., 2016, Bernard, 2017), drawing the focus on people with closer match and characteristics (Etikan et al., 2016), for better utilization of available resources (Patton, 2002).

In the recruitment of research participants for the 6-weeks programme, the following specifications were criterial for inclusion:

- OPWD who are 65 years of age and above with moderate cognitive decline (early-stage dementia) and can participate in the activities and converse coherently.
- There is no predisposition on gender or race, however, participants must be able to communicate in either English, Chinese, and or Chinese Dialects (Mainly Cantonese, Hokkien, or Teochew).
- Participants must also be agreeable to partake in the interviews scheduled and be involved in the weekly programme.
- Prior experiences with art and music-making are not part of the eligible criteria.

Prospective participants identified are mostly in the early stages of dementia where they are still fairly independent. Within the context of the centre, the elderly can participate in the daily programmes with moderate assistance. Reasons for exclusion included the inability to converse in all research languages used, clients showing extreme behavioural and psychological symptoms of dementia (BPSD), PWD under the age of 65, and disinterest.

The arrangement of clients from the centre is based on a sample size of 11 participants. 11 clients are recruited from Clovercare. The session were conducted in 3 separate groups, with 3 to 4 clients at each time. The recruitment of participants has been primarily assisted by the staff nurse and centre director at the centre, and at Clovercare an appointed care associate has also been prearranged to help with the programme.

### **3.3 Methods for Data Collection**

Research data were gathered from four methods, namely participant observation, semi-structured interviews, video footages, field notes, and journals. The methods selected were attributed by their flexible, creative and penetrative context (Alderson and Trust, 2001) which brings on perspectives, and help address the research questions in this study.

#### **3.3.1 Participant Observation**

Simultaneously with the delivery of the programme, participant observation were carried out. This is complemented by the reviewing of video footages from the 6-weeks programme and taking of field notes and journals, in the circumstances where details are overlooked when facilitating the programme. Precedingly, volunteering and interactions with the staffs and clients have offered a general overview and understanding of the daily operations at the DDC. In participant observation, it offers not only the opportunity to record actions, interactions and the chronology of events, but it also enables the researcher to participate and acquire information through their own experience of the phenomena (Ritchie, 2003). It gathers perspectives of participants behaviour through looking, listening and asking (Bonner and Tolhurst, 2002). Thereby, using the approach of participant observation considers a process of learning by exposure, or through participating in the day-to-day activities of participants in a research setting (Spradley, 1980). Being directly involved provides a better understanding, as it captures the habits, attitudes, interests, personal relationships, and characteristics of participants daily happenings in the DDC (Campos et al., 2019), including of interaction alternating between staff and clients, between

clients themselves, and myself. For the recording of activities, I mainly used a camcorder for videotaping. However, I have also brought along a DSLR camera to take pictures of the completed artworks by participants. As the sessions are conducted in the main activity hall at the centre, I am mindful of limited spaces available, to not obstruct or cause any unneeded distractions, especially with the positioning of the video camera and tripod stand.

### **3.3.2 Semi-Structured Interviews**

To elicit the voices of participants, I had utilised semi-structured interviews as one of the tools for accumulating my research data in views of its open-ended structure (Britten, 2006). This has allowed the definition and the shaping of the area to be explored in accordance with my research objectives, with the flexibility for follow-up probes (Parahoo, 2014), and the means to evoke information that are descriptive, truthful, thoughtful and emotional (Clifford et al., 2016). When formulating the interview schedule, I had turned to Patton (1987) guide on the types of interview questions that can be covered, which comprised of behaviour or experience, opinion or belief, feelings, knowledge, sensory experience, and demographic or background details, as well as Hennink et al. (2010) structure on developing an interview guide. Majority of the clients in the DDC are mandarin speaking, I had also made sure to include a set of questions each in Chinese and English. Interviews with participants were conducted in English, Chinese, or Chinese Dialects (Cantonese, Hokkien or Teochew), with the assistance of a health-care assistant to ensure that the translations are accurate. Refer to **Appendix 2.** for Interview Schedule for Participants in English and **Appendix 3.** for Interview Schedule for Participants in Chinese. Refer to **Appendix**

4. for Interview Schedule for Staffs in English. For triangulation and cross-validation of data, interviews were conducted with staff after the 6-weeks programme. Refraining from biases in my analysis, I had interviewed the staff (consisting of care associates and staff nurse) as they are the main observers or helpers during the delivery of the programme. Additionally, with the staff's familiarity and understanding of the clients, they will be able to provide their perspectives on the effect of the programme on the wellbeing of clients, through their behaviours and gestures or suchlike.

Gearing up for the interview session, I further prepared myself by going through the necessary steps on ethical considerations, the literature on interview techniques in which I referred to the six-point directiveness scale (Whyte, 2003), and strategies for maintaining control of the interview (Patton, 1987). The six-point directiveness scale is devised to guide novice researchers in analysing interviewing technique, such as how directive the researcher is when conducting the interview (Whyte, 2003). Hence, to monitor my own interviewing technique I heeded to Whyte (2003) directiveness scale which covers (1) Making encouraging noises, (2) Reflecting on remarks made by the informant, (3) Probing on the last remark by the informant, (4) Probing an idea preceding the last remark by the informant, (5) Probing an idea expressed earlier in the interview, and (6) Introducing a new topic. Ahead of the interview session, I had provided a copy of the interview questions to the staff nurse and centre director for their approval and in ensuring that the language is comprehensible for the prospective participants. In conformance with the ethical protocol and apart from the initial proxy consent, I have re-established the notion of consent before each interview session and the purpose of their participation. Making

sure that the clients are agreeable, revisiting the fact that their participation is voluntary and should they wish to, they will be allowed to comfortably withdraw at any time. Interviews are audio recorded with a tablet using an app which can filter background noises, these audio recordings are stored in a cloud drive encrypted with a password, transcribed verbatim and further examined for accuracy.

### **3.3.3 Video**

Video footages will be the main source of visual material used in this study for interpretation, as I attempt to illuminate the nuances of the 6-weeks programme through documentation and reflection. In particular, using video to capture the process of a project for data collection path the way for a visual running record, providing an avenue to assess, fine-tune, and convene a compelling source of evidence (Weber, 2008). Banks and Zeitlyn (2015) expresses that visual documentation in fieldwork enables a researcher to remember and share the experience, and record complex situations that are difficult to describe.

Involving the use of digital video as one of my research tools, I am aware of the ethical issues for researchers (Schuck and Kearney, 2006) and pertaining to human subjects (Derry et al., 2010). The following steps were undertaken. First, prior approval has been granted with regards to the filming of the session at Clovercare. Further, I had sought the consent of participants to ensure that they are agreeable to be filmed preceding to each recording session. Access to the video footages during the data collection process and their personal information will also be restricted to safeguard the privacy and confidentiality of participants. Once the footages from the camcorder



are transferred over to my cloud drive after each session, the data from the SD card were deleted immediately.

In consideration of the multiple roles and responsibilities that I have to take on as a researcher and when facilitating the programme, e.g. looking out for participants safety, providing guidance when needed, overseeing to operational and logistics matter, responding to any unanticipated situations or suchlike, I may be unable to observe minutely or take down fieldnotes right away. For this reason, the use of video contributes to the data collection process due to its retrievability and the possibility of reinterpretation or for further analysis (Plowman, 1999), amplifies data from observation and allows triangulation via substantiating or refutation of findings (Schuck and Kearney, 2006). Using video as a recording tool provides comprehensive documentation of social phenomena as well as the capability to capture high-level detail (microscopic scrutiny) and for analysing interactive processes (Schnettler and Raab, 2009). On a micro-analytic stance, it enables the visibility of micro-interactions such as facial movement, touch, gait, expression, responses to interactions which are difficult through just observations alone, and this provides a rich description of macro-level data overtime (Haw and Hadfield, 2011, Morse, 2016). Employing video in this study hence allows an in-depth analysis of the enactive nature of intercorporeality, intercorporeal experience, and the manner wellbeing is shaped through participatory arts and music engagements within the dynamic intercorporeal network. As I accentuate on the value of being in the present moment (Basting, 2009), using video also enables the capturing of meaningful moments which occurs during the programme.

### **3.3.4 Field Notes and Research Journals**

The taking of field notes and research journals were ongoing throughout the research endeavour. This included participant observation during the delivery of programme alongside further reflections and interpretations from the video footages. Additional to establishing credibility, researcher's field notes and journals bring forth analytical, immediate and ensuing perceptions and thoughts regarding participants (Rose and Webb, 1998, Tuckett, 2005). It records the process of interaction, relationships and participants reaction to events, which offers material for reflection (Koch, 2006) and allows the researcher to be aware of any biases and preconceived assumptions (Krefting, 1991). Subsequent to field notes, research journal which presents a freer essay (Campos et al., 2019) were used as a personal document to record my observations, reflections or any comments which emerged following each session in the field. In the writing of my field notes, I heeded to (Geertz, 1973) 'thick description' where a level of detailed, rich contextualized account of an event, and webs of social relationships are described and presented (Denzin, 2001, Merriam and Tisdell, 2015, Creswell and Poth, 2017) to facilitate data analysis (Ritchie et al., 2013). Also, I am cautious to not divulge any discernible features or names when penning down my thoughts. The brief notes taken were extended into a detailed descriptive account (Pope et al., 2006) at the end of the day to minimize the possibility of letting details slip.

### **3.4 Data Analysis**

Data for this study were collected in both digital and manual forms, which comprises field notes and journals from participant observation, digital video footages, audio-recordings and transcripts from interviews. On the preparation of data for analysis, audio-recordings from the interviews with participants and staffs are transcribed in verbatim first. As the interviews are conducted in both English and Chinese language, the interview recordings in Chinese were typed out in Chinese, before translating it to English. All transcripts were typed out using Word document and converted to PDF document for organising and storage. To provide accurate documentation, I had not disregard any prolonged pauses, sighs, or laughs, as the level of detail of the transcription can influence the interpretation of speech (Pope et al., 2006). Facilitating an ethnographic cycle, transcription had begun once the first round of interview is completed to allow the means for reviewing, the rectification of issues or readjustments of interview guides, including the identification of the point of saturation along the way (Hennink et al., 2010). Written field notes were scanned and stored as a PDF document to prevent any loss of data.

For analysis, I draw on the strategies in grounded theory (Charmaz and Belgrave, 2007) to facilitate the structuring and organising of data for inferential and explanatory purposes. In grounded theory, consists of an underlying set of principles in data collection and analytic process aimed at developing an empirical theory (Charmaz and Belgrave, 2007) which is constructed through careful observation of the social world (Liamputtong and Ezzy, 2005). The analytic process had involved the application of distinct codes to data, arising from sequences of cumulative coding cycles which brings

on the development of theory 'grounded' in the original data (Saldaña, 2009). As a guide to facilitate the development of codes, I referred to Saldaña (2009) coding manual. Coding in qualitative analysis points to an essence-capturing word or short phrase extracted from a non-exhaustive list inclusive of interview transcripts, field notes, journals, video, documents, literature and so forth (Saldaña, 2015) and acts as a formation of critical link between data collection and unfolding of meaning (Charmaz, 2001). To analyse my data, I had used the methods of initial coding in the first cycle (Saldaña, 2009, Saldaña, 2015) and axial coding for the second cycle (Strauss and Corbin, 1990). To facilitate the analyzation of data, I had purchased and used the software NVivo to ease the categorization and theming of codes. First, the line-by-line open coding of data is to draw out saturated categories, to minimize the oversight of any substantial listing, and ensures relevance by generating codes which are integral to my research questions (Holton, 2007). Proceeding on, I had used Strauss and Corbin (1990) axial coding for reassembling of data and for making of connections between the categories and subcategories, to enable the identification of best representative codes (Boeije, 2009). Simultaneously, analytic memo writing is undertaken to explore, explicate, and theorize emergent patterns (Lempert, 2007) and to connote social reality through the organization, interpretation of the social worlds of participants (Richardson, 2003).

Alongside, video footages from the 6-weeks programme were analysed through the modes of extraction (Haw and Hadfield, 2011) and analytic inductive approach which involves a preliminary, substantive and analytic review of data corpus (Heath et al., 2010). In correlation, I had heeded to reflexivity in data analysis

(Mauthner and Doucet, 2003), and emerging avenues of inquiry for reinterpretation and refinement (Pope et al., 2006). In detail, over the duration of the 6-weeks programme, 18 video footage of the sessions were recorded altogether. As the participants were separated into 3 groups per week, 3 respective video recordings of the activities were taken. The average length of each video recorded over the weeks was comparably consistent and ranged from 50 minutes to about an hour. When reviewing and analysing the recorded sessions, I primarily looked at three components: **1)** Participants' individual and group dyadic verbal interactions, **2)** Participants' individual and group dyadic non-verbal interactions, and **3)** Overall engagement/participation levels and reactivity of participants', with staff, caregivers and myself as a facilitator. Within the coding scheme, these are some specific classifications and cues that were identified; body language, responsiveness, gaze, gestures, mannerisms, attention and engagement levels, affirmative nodding, affectionate touches and behaviours, and interpersonal dynamics. Relating to my research questions, these inputs and labels were picked up as I observed the phenomenon and traits present in the videotaped recording of the sessions. In the process, each video was reviewed twice. Once at the end of the day as I write and sort out my field notes, and once more as I extensively compared the interview transcripts along with the video data. Categorically, each keyword, theme, and code were then drawn out from my fieldnotes, interview transcripts with participants, staff, and caregivers. Consequently, it is then organized and grouped accordingly using NVivo, a qualitative data analysis software.

### **3.4.1 Triangulation**

Alleviating the conditions of biases (Blaikie, 1991) resulting from my personal presumptions and anticipated benefits, I had drawn on the principles of triangulation to cross-validate my research data (Patton, 1999) through the convergence of information from multiple data sources (Carter et al., 2014) that adds rigour, breadth and depth in this investigation for a comprehensive understanding of phenomenon (Denzin and Lincoln, 2011). As Morse (1991) mentions, triangulation can substantiate research results and reinforce theory and knowledge development through maximizing the strength and minimizing the weaknesses of each approach. The types of triangulation identified for this study entails methodological triangulation, investigator triangulation and data source triangulation (Denzin, 1978). With methodological triangulation, using the methods of participant observation, semi-structured interviews, video, field notes, and journals enables the verification of generalisable trends (Oppermann, 2000). Adding to the scope, perspectives through investigator triangulation can provide multiple observations and inference of the phenomenon of interest (Denzin, 1978). Utilising data source triangulation, the sharing of personal experiences and perspectives of research participants and staffs during the semi-structured interviews has unveiled rich information on their own experiences, robustness, and diversified viewpoints (Carter et al., 2014) on the execution and effect of the 6-weeks programme.

To increase the reliability of my data source and to minimize biases, the following measures were undertaken. First, the corroborating of data from various methods which has included interviews with participants, staff, and caregivers, my

personal observation, and taking down of field notes. For the purpose of analysis, the videotaped sessions were used to measure observations, the happenings in real-time in which I may have missed when conducting the activities. Undeniably, I am also fully aware of participant reactivity (Paterson, 1994) wherein the response between myself and participant during the course of data collection may alter the natural course of behaviour as a result of being observed and filmed. For that reason, I have taken the Hawthorne effect (Haidet et al., 2009) into factor; at which participants are exposed to longer periods of observation to acclimate them to the presence of having me observing and filming. In this context, I have documented raw footage of participants during the sessions conducted from the beginning to the end, and have analysed all 18 videotaped recordings to ensure accuracy and consistency of participants' behaviour. This, to substantiate other data sources including interviews, field notes, and observation. Crucially, I have also worked with both my supervisors in the reviewing and corroboration of findings, and also to gather inputs and insights from their point of view, ensuring there is impartiality.

### **3.4.2 Saturation of Data**

To assess the point of saturation, I had kept to an iterative process of synchronous data collection and analysis (Sandelowski, 1995) of my interview transcripts from the semi-structured interviews, field notes, and journals drawn from participant observation and video footages. The iterative cycle ensures that all relevant conceptual categories are fully explored, identified, and exhausted (Hennink et al., 2017), with no new themes emerging (Strauss and Corbin, 1990) to reach theoretical saturation. As well, the application of triangulation is directed towards the attainment of data saturation with its ability to enhance the reliability of findings (Stavros and Westberg, 2009). When the data are sufficient to address the research questions (Paterson et al., 2001) with no further issues identified and as data gets repetitive (Kerr et al., 2010) collection of data were discontinued. Hence, data saturation will be determined when there is coherent data condensation and interpretation that accounts for all possible explanation of the phenomenon of study (Hyde, 2003).



## Chapter 4. Animating Ageing Bodies and Senses

### 4.1 *Our Animated Play: A Multi-sensorial Art Engagement Programme*

This research involved developing, implementing, and examining the effect of *Our Animated Play*, a multi-sensorial art programme on the wellbeing of elderly people in Dementia Day Care Centre. The 6-week programme aims to foster the wellbeing of participants to stimulate the participants' sensory faculty and offers an opportunity to exercise their creativity. Each session, which lasts approximately 80 minutes, comprises an art-making and music-making segment. The programme was conducted at Clovercare from February to March 2020. A total of 12 participants were recruited, with 11 of them successfully completing the programme. The demographics of the participants were female (n=8) and male (n=4), with their age ranged from 70 to 91 years. One participant had withdrawn at the beginning of the study and the reason for attrition was due to disinterest (n=1). All the participants were Chinese as the clients at Clovercare during this point of time study were of the same ethnicity. The remaining 11 participants were organised into three groups. Each group would attend and participate in the programme on an allocated day and timing of the week. This has considered the manageability in supporting the participants, and the scheduling of clients as some of them do not attend the centre on a daily basis. Sessions for the three groups were conducted on Tuesday to Thursday for 6-weeks. Each week, participants were introduced to an assortment of art materials that are specially chosen for their sensory features such as dried scented flowers, dried food grains, feathers, bells, yarns, sensory fabric and 3D-stickers were included. The art-making component invites participants to create their own instrument as it engages the visual, tactile, and

olfactory sensory modality (see figure 3). With a proactive approach for music-making, participants are then led to creating beats with their handmade instrument in groups and synchronously engaging the auditory and kinaesthetic sensory modality (see figure 4). During each session, the participants were encouraged to work independently. However, support was given to those who needed further assistance during the activities.



Figure 3. A Multi-sensorial Art Engagement Session at Clovercare. (Art-making)



Figure 4. A Multi-sensorial Art Engagement Session at Clovercare. (Music-making)

Clovercare is a full-fledged dementia day care centre (DDC) which serves only clients with dementia, and it is a social service agency (SSA) affiliated to a church. Clovercare operates from Monday to Friday during the day, with clients returning home by 5 pm. On a typical day at Clovercare, clients are served typically 3 meals (breakfast, lunch, and tea-break). They would participate in activities led by the care associates. The nature of the activities is usually repetitive and facile for the clients, and it involves some rudimentary physical exercises and singing which takes place every morning before lunch is served. Mostly, during leisure time, clients are usually left to watch the television, read newspapers, do colouring on papers, or assemble jigsaw puzzles. On a rotational basis throughout the week, there are also other programmes such as reminiscence activity, karaoke sessions led by volunteers, group bingo and table tennis games, and biblical readings. The arts activities that are currently offered at Clovercare are predominantly colouring, weekly crafts catered to only selected clients, and special events or activities arranged during festive occasions.

Hence, the implementation of the multi-sensorial art engagement programme sought to deliver novel and more invigorating activities for clients at Clovercare. In doing so, I will draw out the attributes which contribute to participants' wellbeing, the conceptual understanding of intercorporeality and its influence on participants' wellbeing outcomes, as well as the benefits derived from the activities.

Prior to the start of the programme, a face-to-face meeting was held with the centre manager, staff nurse, and care associates to discuss the arrangements needed. As Clovercare was undergoing refurbishment during the implementation period of the programme, I was unable to secure an activity room, which would be ideal to provide more privacy and a less distractive setting for conducting the sessions. Clovercare is fully-airconditioned, brightly-lighted, and well-equipped with tables and chairs which I could freely use. I took the recommendation of a staff nurse to conduct my programme by using a section of the main hall located near the care-staff office at Clovercare, upon assessing its suitability. In view of the spaciousness at the corner of the main hall, it was deemed most suitable as I had ample space to set up my logistical equipment without obstructing the way. Situated at the furthest section of the main hall, it poses lesser interference. The familiarity that the clients had with the space also makes it most ideal; the area is usually used for recreational activities as well as a space where they are all being cared for. As I was running the sessions alone, I was incredibly grateful for the assistance provided by Alyssa, the staff nurse during the sessions when I needed an extra hand. Before the start of each session, the care associates were kind to help me gather the participants. Additionally, a cabinet shelf was allocated for me to store the participants' weekly completed artworks and other logistical items.

Drawing on the opinions and experiences of my participants ensuing from their involvement in the multi-sensorial art engagement programme, the following sections will convey my empirical findings. It will also present the benefits found in the weekly session and discuss how they contribute to the wellbeing of participants at Clovercare.

## **4.2 Fostering Sprightliness through Multi-sensorial Art**

This section offers an account of the participants' opinions and experiences of the 6-week multi-sensorial art engagement programme as it explores the effects on the wellbeing of participants.

### **4.2.1 Emboldening Creative Potential**

Through the sessions, participants often expressed great pleasure from having made something of their own. This sense of elation was further reflected by feelings of satisfaction and accomplishment as many felt that they have exceeded their own expectations. For instance, Lauren, who is showing signs of some memory lapse displayed a high degree of independence in the creation of her own instrument. Despite the occasional disorientation, Lauren was still capable of making independent decisions and was actively engaged across the weeks. She often responded with a smile when praised by the staff who walked past our activity table. Seemingly pleased with the outcome, Lauren expresses her desire to showcase her artwork.

Lauren: You used hard work to teach us this....  
Interviewer: You put in a lot of effort too! And you managed to make this all by yourself. How do you feel about it?  
Lauren: I feel that everyone is happy together!  
Interviewer: Ah, I am glad you felt happy and that everyone is enjoying themselves! Can you share with me more? Like what do you enjoy about it?  
Lauren: Learn already can show people what I made!  
Interviewer: Yes, you can let people see it. You can bring it home to show your children too!

Lauren: I want to put it up and display it here! Because... others might want to learn it too...

Despite her initial confused state, whenever Lauren was presented with the art materials, she gave the impression of a renewed person altogether. Lauren would bend forward with interest as she fondled with the art materials, displaying her undivided attention and determination throughout. Glowing with pride, Lauren relates with joy and contentment as she communicated her thoughts on her own artwork. She was revelling with confidence when she held on to the Tambourine she had made with delight, and these features observed has undoubtedly delineated her sense of achievement and incremental morale (Refer to Figure 5). This further posits that the weekly session has played a pertinent role in discovering the creative potential of Lauren and of the other participants, which also gave them an opportunity to attain new skills and boost up their self-esteem. Autonomous decision making and opportunity to be in control appears to be discernible from the multi-sensorial art engagement programme, as expressed by participants and through the lens of observation. The association between empowerment and sense of accomplishment emerging seems to have positive wellbeing outcomes on the participants.



Figure 5. Tambourine by Participants. (Picture on Right, Most Left): by Lauren

In another case, Chiara appears to be keenly expectant and often grins from ear to ear during the session. She would consistently wave as she called me over excitedly to show me what she has done for the session. With Chiara's unfaltering energy and extraversion, she has also brought much felicity and liveliness to the group during our weekly sessions.

Chiara: I feel a sense of accomplishment as I get to make something of my own today! (Chuckles...)  
Interviewer: Oh yes, you made your own haha! And you added plenty of bells too. (Chiara playing her tambourine in the background).  
Chiara: Can I bring this tambourine back home?  
Interviewer: Yes, of course! You can bring this back home.  
Chiara: Can hang this up on my front door! The bells will ring...

Her enthusiasm and interest can be observed from the level of engagement she has with the programme. Chiara was always the first to arrive and last to leave the activity table. Without fail, she would request for a picture to be taken as she posed proudly with her new creation every week, face brightened with joy. Particularly, it also appears evident that Chiara's level of engagement and enjoyment was further amplified by her feelings of achievement and the ability to create artworks of her own, in which she seldom had the chance to do so. Always showing her inquisitiveness, Chiara had often expressed the creative knowledge and skillsets that she had acquired over the weekly sessions.

Chiara: Still got more sessions ah? Still got what?  
Interviewer: Yes, we will be making another instrument next week!  
Chiara: It's very good! Thank you for teaching me how to make all these!  
Interviewer: You're most welcome! Perhaps, can you also share with me how do you feel over the past couple of weeks as you created these instruments?  
Chiara: Really... really... very good! You taught us how to make these! It gives us a sense of accomplishment and satisfaction each week. Like making these... by myself... I learn new things every week.

Ascertained from the multi-sensorial art engagement programme, and coming to know from participant's experiences, there are positive correlations manifested between empowerment and attainment of new skills. As noted by participants, their sense of

accomplishment and satisfaction has risen incrementally over the weeks as they acquired new skills and knowledge through the opportunity given to create their own instruments autonomously. Theoretically, empowerment is often associated with wellbeing, strengths and competencies, and the opportunities for the development of new knowledge and skills (Perkins and Zimmerman, 1995). For persons with dementia, feelings of empowerment can enhance the quality of life as having control over decision-making processes gives them an increased sense of purpose and confidence (O'Rourke et al., 2015, Perkins et al., 2016). Aside, as persons with dementia engage in arts activities, the ability to create original work contributes to a sense of control, mastery, empowerment, and increased self-esteem. This is consistent with positive emotions as new dendrites are stimulated in the brains, also commonly referred to as brain plasticity (Cohen, 2006, Lokon et al., 2012).

Overriding the dormant ideologies and stereotypical notions of dementia, many participants have indicated that involvement in the multi-sensorial art engagement programme has afforded a degree of personal control and achievement. This connotes an increase in confidence, re-building of self-esteem, and feelings of competence which was observable in participants progressively. Also reflected in the earlier case of Lauren, her increased confidence shone through as she has indicated her wish to showcase her artwork. Distinctly, it also denoted the pride she has in the outcome of her own creation. Clearly, as represented in the cases of participants, they have exemplified an appetite for new knowledge and demonstrated their uninhibited potentialities over the weeks.



#### 4.2.2 Spurring on Creativity, Imagination, and Personal Advancement

Most of the participants found the experience enjoyable and shared that they felt uplifted. Creative aspects including novelty, imaginativeness, and individuality were observed and communicated by participants in the interviews. For some, they found the process of art and music-making to be relaxing as it frees them from their worries and relieves them of boredom. Unanimously, these are views reported by participants over the 6-weeks.

- Shirley: I feel happy ah...the sessions are enjoyable! When you are happy, I am happy too! Making and doing all these activities... as the week goes by, you show us many things... and we learn many new things! This I feel very happy lor!
- Tanya: I am very pleased... I felt like I could arrange all the materials to my own likings! For mine... I added different materials all around. Like for the materials that resemble animals or living things... I put it next to each other because it looks so adorable! For these... I could present it very creatively... I didn't need to follow any instructions and it's interesting...
- Chester: It was a refreshing and new experience for me... learning something new like this! And I like this the most because it has plenty of patterns on it, which I added by myself! It was enjoyable and helped me to pass time...
- Kendrick: Because I like!... Hmm... I don't know how to explain...but I feel...happy!
- Chiara: I enjoy the art-making more...It's good ah and quite interesting too! Mine is full of colours...the ribbons! And I learned something new again today...and like that lor... my mind it feels very peaceful ah...
- Sharon: I really like this... I pasted and added plenty of it... And it's very shiny too... the shiny thing (Glitter Powder) ... I really enjoyed adding that to my flowers...it is beautiful and I am satisfied...When you come down here to do this with us... it helps us pass time also la... that is good...
- Elaine: I feel good... the activity today was relaxing...I felt relaxed...

From these views presented by several participants, they had each articulated their individualized experiences of the multi-sensorial art engagement programme. With precise details, some participants were able to recount the creative process during the art-making segment, which had unfalteringly bolstered enjoyment and contributed to an increased level of happiness. In unison, many were able to relate to the feelings of

peacefulness and relaxation which had arisen from the sessions. Prominently, involvement in the weekly sessions has also helped the participants to spend their time more meaningfully as they are kept occupied with the participatory arts and music activities.

In the case of Shirley, who has a very gentle demeanour, she was exceptionally expressive and conscientious when it comes to creating her own instrument (Refer to Figure 4). Visibly, her level of engagement and focus has exerted a positive influence on the other participants and overall group ambience, as the others were seen more involved and spryer when they looked on at Shirley. Although the sessions were not meant to be competitive, it seemed as though the rest wanted to do as well as Shirley too. During the session itself, the participants were also seen making some convivial comparisons with each other.

Interviewer: What do you think of your artwork today?  
Shirley: I think it's okay...Not bad!  
Interviewer: Would you like to tell me more, what is this that you made?  
Shirley: I made it... to resemble a doll's face...

Consistently throughout, Shirley was meticulous and shows the ability to exercise her own choice, from the selection of colours, types of art materials to the arrangement. With scores of imaginative ideas, she was able to express herself through her artwork. Conceptually, conscientiousness, extraversion, and expressive traits that were observed in Shirley are positively associated with psychological and subjective well-being. As evidently, studies have found that personality traits tend to influence well-being, and individuals who exhibited conscientiousness, openness, and extraversion show greater satisfaction towards life, as well as having an observable increase in their wellbeing (Soto, 2015).



Figure 6. Spin-Drum by Participants. (Right): by Shirley

Dispelling the idea of senescence with age, participants have refuted as they approached the weekly sessions open-mindedly with receptiveness. Many of the participants indicated that the multi-sensorial art engagement programme was an entirely new experience for them. In what follows, this has led to discoveries about themselves as they were cognitively engaged with activities that were different from their usual regime. Besides ingenuity, the multi-sensorial art engagement programme also serves as a building block for imaginativeness as it underlies the distinctive characteristics of participants. Particularly, the uniqueness is shown through in each of the participant's creation (Refer to Figure 5 and 6) were indicative of their inventiveness and innate ability to thrive. For good measure, many of the others have also reported that participating in the weekly session has helped them spend their time more meaningfully and productively as they felt less bored.

Frequently, in Sharon's case, she appears lethargic when unengaged and often falls asleep during her free-time at Clovercare. However, during the session, she took an active interest and was visibly occupied for the entire duration. At times, she would

make mention of her deteriorating eyesight, but that alone did not deter her from participating as she was persistent throughout.

Interviewer: How do you feel about today's activity?  
Sharon: It is very good la!  
Interviewer: Very good ah? Why do you find it good?  
Sharon: Because I have nothing to do usually...  
Interviewer: Uh, okay... nothing to do usually ah...  
Sharon: So, this art-making is something for me to do...  
Interviewer: Hmm, okay... Did you like what you have made today?  
Sharon: Yes! And I have never made something like that before!  
Interviewer: I am glad to hear that too! Uh, then how do you feel about me coming down to conduct these activities?  
Sharon: It's very good! To help us pass time.... It's good...

This suggest that for Sharon, involvement in the programme has kept her occupied and time was well-spent. Reflected through her positive emotions, Sharon shows anticipation as she would beamed with delight whenever I start preparing the art-materials at the activity table. She would look on curiously while continuously asking me questions. No doubt, Sharon also displayed her creative flair (Refer to Figure 7) when she mixes and matches different colours while painting and would enthusiastically asked me if the combination looks good together.



Figure 7. Castanet by Participants. (Picture on Left): by Sharon

In a similar vein, Chester, another client revealed that participating in the programme has brought him enjoyment and pleasure. He has also stated multiple

times during our interviews that he felt satisfied upon completion of his artwork, and participating in the sessions has greatly alleviated his boredom. In the beginning, Chester seemed rather reserved and cautious, and I often find him reading newspapers or seated at the bench next to Clovercare's gate during his free time. Gradually, he began to open up and initiated more conversations with me, he also appeared more confident. This observation is consistently reflected in his mannerisms across the weeks. When I first met Chester, he was extremely soft-spoken and many times I had to ask him to repeat as his voice was almost inaudible. At the start, he also showed uneasiness when seated together with the rest of the participants. Often, Chester would take a peek at others when they spoke unreservedly as he looked downwards instead of joining the conversation. Besides, he was visibly watchful of the others when they chose their art materials, and I often had to prompt or reassure him to make him feel more comfortable and encouraged. Subsequently, it became heartening for me to notice the changes in Chester. He began to engage in many idle conversations with the rest of the participants and myself and was seen to be more at ease inferring from his body gestures, mannerisms, and interview responses. With a broad smile plastered on his face, Chester would recurrently express his elation and contentment over his artwork. That relish and positiveness in him had unequivocally assured me of his increased sense of confidence and achievement over the weeks.

Interviewer: How do you feel about the activities?

Chester: I think it is a new experience...

Interviewer: Oh, new experience... What are your thoughts on making these instruments, and the music-making?

Chester: It is enjoyable... because.... anyway...I have nothing much to do also...

Interviewer: Uh, I see... How do you feel about participating in this programme with the rest?

Chester: I feel very pleased every time... it's good also... because every week when I come... I usually just sit here...sometimes they will ask me to join some activities... if not I will just seat here...

Caringly, Chester would never fail to ask me if I have taken my lunch before the start of our session and would always remind me to do so. It was gratifying for me to see as Chester progressively began to socialize more often with other participants and myself. It was eminent that our closeness grew as we bonded along the weeks over the participatory arts and music activities. Here, referring to the social conception of wellbeing, it ensues from individual and group social relationships as such, and it embodies social integration, acceptance, contribution, actualization, and coherence (Kazemi, 2011). As Ybarra et al. (2008) note, social interaction is also positively tied with a better quality of life, wellbeing, improvement in physical health, and cognitive functioning, even in non-clinical populations.

Through the above-mentioned examples, several beneficial impacts on the wellbeing of participants were brought forth by the involvement in the multi-sensorial art engagement programme. This included reinforcement of positive emotions from mental stimulation and alleviation of boredom, flourishing imaginativeness, and creative expression, fostering of social connectivity and interpersonal relationships, feelings of relaxation and peacefulness that were elicited, as well as personal advancement and growth. Unlike the usual arts and leisure activities that are currently offered at Clovercare, the multi-sensorial art engagement programme had provided participants with the opportunities to engage in a different art form while gaining new skills. This is supported by the current findings and accounts chronicled by participants, where they had emphasized the novel and intriguing experience, cognitively stimulating activities, and most enormously, their desire to continue learning. Significantly, a number of studies have also positively associated creative arts

participation with wellbeing, and demonstrated its correlation to an improvement in physiological and psychosocial health in older adults (Cohen et al., 2006, Stuckey and Nobel, 2010, Pappne Demecs and Miller, 2019).

Considering the overall experience of participants, involvement in the multi-sensorial art engagement programme further strengthens the idea that elderly with dementia evince openness to new experiences, learning, and growth. Stemming from the perspective of participants, they have expressed a strong desire for personal advancement, eagerness to acquire new skills, and further self-improvement. Recognising the creative capacities of the elderly with dementia, participants have demonstrated that the ability to thrive and engage in new opportunities is not hindered by cognitive functioning. On multiple occasions, Hester has provided an account of the benefits arisen from her participation in the weekly sessions.

Interviewer: How do you feel about me coming down weekly to conduct these activities?  
Hester: It's good!  
Interviewer: Oh, why do you feel that it's good? Would you like to share more with me?  
Hester: I have learned to make all these. Can improve myself! And all the activity can allow us to seek self-improvement ma...  
Interviewer: I see! That's very good to hear! Can you also share with me, how do you feel after seeing what you have made over the 6-weeks?  
Hester: I feel happy!  
Interviewer: So, you do feel satisfied with what you have made over the weeks?  
Hester: Yes!  
Interviewer: I am very happy to hear that! Do you have any activities you enjoyed most? Or which instrument do you like the most haha...  
Hester: All of them! (Chuckles)

Repeatedly, Hester draws attention to the acquisition of skills, the process of learning, and a sense of accomplishment. According to Hester, the achievement she felt from completing the art and music activities each week has kept her motivated and to continuously strive for self-improvement. Posing proudly, Hester was over the moon

when she was presented with the artworks she has completed over the 6-weeks (Refer to Figure 8).



Figure 8. Completed Art-works by Hester.

Cast in this light, participants have resonated that involvement in the multi-sensorial art engagement programme has provided them with new opportunities to try something different from the usual. This is also outlined by the rewarding and invaluable experience they felt from the process and completion of artworks.

- Shirley: We are old already... Don't have opportunities to experience such programmes.... you gave me the opportunity to learn so many new things... experience this... and learn that there is something like that!
- Chester: It's interesting and it is a new experience because I never had the chance to try this previously!
- Sharon: I feel very satisfied! Never had such an opportunity to make this kind of artwork... because when I am at home, I never get to do such things also...
- Chiara: It's very good! It will be better if you can teach us more! Teach us how to create more art-works... then we can bring all these back home...

Enlivened by the novelty, participants have actively expressed their keen interest in learning new skills, as many had also indicated that they look forward to subsequent sessions each week. In particular, this is rewarding to hear as it further highlights the



imperativeness of engaging OPWD with meaningful activities of such, and enabling them with more opportunities for creative pursuits.

#### **4.2.3 Vitalizing the Senses**

From the perspective of participants, stimulation of sensory qualities was imminent and they were able to identify most with auditory, olfactory, and muscular-movement coordination. Emphasising the sensory components in the multi-sensorial art engagement programme, close attention was paid to the sourcing of art materials for the sessions. As the programme endeavoured to stimulate multiple sensory modalities, it was designed such that the visual, olfactory, tactile, auditory, and kinaesthetic functions were attended to. Analogously, Witucki and Twibell (1997) have identified the increase in the psychological wellbeing of persons with dementia (PWD) following sensory stimulation activities involving music, touch, and smell. Previous research findings have also established the association between multi-sensory art activities and the quality of life of those with dementia, and reported benefits included improvement in cognitive abilities, increased in socialization, reduction of agitation and uplifting of mood, self-expression, and a greater ability to perform activities of daily living (Maloney, 1986, Smith, 1988, Mitchell and Maercklein, 1996, Sánchez et al., 2016, Griffiths et al., 2019).

For Shirley, she relates to a positive encounter during our music-making session where we had a rhythmic play with the rest of the participants, using the flower maracas they have worked on.

Interviewer: Can you share with me... what do you enjoy most today?

Shirley: Making music just now!  
 Interviewer: Music ah... Why do you like music more?  
 Shirley: Because it uses my ears... auditory sense... use it to listen... there is no need for me to think so much or worry so much!  
 Interviewer: Uh, auditory sense... okay... so you feel that the process was relaxing for you?  
 Shirley: Yes! There is no need for me to think so much!  
 Interviewer: Uh... so you felt that the experience was good because you were relaxed and free from worries while making music, right?  
 Shirley: Ya... correct!  
 Interviewer: Oh... okay...Then...do you like this flower maraca you made today?  
 Shirley: I like it very much ah!  
 Interviewer: What do you like about it haha?  
 Shirley: There are scented flowers... which is good!

To Shirley, it was evident that music-making provided auditory stimulation and the process was particularly relaxing as it takes her mind off worries. In her account, Shirley also mentions that she was pleased with the outcome, and alluded to her liking for the scented flowers used. The dried scented flowers included in the session comprised of chrysanthemum, cranberry, lavender, and rose which was intended for olfactory stimulation. Interestingly, the addition of scented flowers has elicited positive reactions from participants as they all took turns to sniff and attempted to make a guess, which has also sparked off a great deal of conversations.

Muscular-movement coordination has also been identified in the responses of participants. It was apparent in Chiara's case that music-making provided her an avenue to engage in physical activity. This could be attributed to the process where the playing of the instrument had enhanced wrist and arm motion, as well as bodily movements (Refer to Figure 9).

Interviewer: How do you feel about today's activity?  
 Chiara: I feel happy! And I got to exercise my arms also...



Figure 9. Flower Maracas by Participants. (Left): by Chiara

This is echoed by the view of Kendrick, who was sprightly for a ninety-year-old. Even though he was not able to articulate much verbally, he showed spontaneity through his gestures and body movements. He was particularly expressive during our music-making sessions and consistently participated with great vigour (Refer to Figure 10).

Interviewer: What are your thoughts on being able to make this on your own?  
 Kendrick: Good!  
 Interviewer: Hmm, you feel good? Why is it good?  
 Kendrick: I feel... happy...  
 Interviewer: Uh... you feel happy! I am glad to hear that... Can you share with me... what made you happy today?  
 Kendrick: Music...  
 Interviewer: Uh, okay... you enjoyed the music-making? Why?  
 Kendrick: Because can shake!



Figure 10. Hand-held Drums by Participants. (Right): by Kendrick

Expressing his zest for music, Kendrick often appears upbeat as he would whistle or hum along while playing with the instrument he has made. Undertaking an active role during our music-making sessions, he would respond speedily and swayed his body as he counted to the beats together with the other participants. It is also encouraging to note that most participants could relate to the stimulation of multiple senses, which has evoked positive reactions. Mirrored by participants' body movements, gestures, and expressions, these new forms of interaction were visibly expressed through a repertoire of actions during the multi-sensorial art engagement programme. The formation of relations encompasses the swaying of the body with the tempo, shaking of an instrument to match the beats, tapping of their feet, synchronization, turn-takings, and anticipation, participants mirroring each other, laughter, smiles, eye contact, with physical intimacy and closeness shared. These repertoires of actions were highly essential and were brought forth through verbal and non-verbal means during the programme, which had allowed participants to socialize and bond regardless of their physicality and ability to speak. Here, the music-making component has hence bolstered humanistic connections and elicited active communication and actions amongst participants. The communal feelings shared between participants were encouraging and has enabled positive reactions and sensory experiences; entailing a network of visual, tactile, auditory, kinaesthetic, and olfactory stimulation, physical intimacy and connection, as well as verbal and non-verbal interactions.

#### 4.2.4 Our Shared Anecdote: Reminiscence and Socializing

Accounts by participants have suggested that involvement in the multi-sensorial art engagement programme inhabits a social dimension. Group participation during the weekly sessions has spurred on many light-hearted conversations which have supported social engagements and afforded a sense of closeness amongst participants, between participants and carers, and myself. For many, frequent conversations have evoked memories as well as prior life experiences. As Chester recalled during one of our interviews, the art-making experience has reminded him of memorable moments in his childhood. Refer to Figure 11.

Interviewer: How do you feel about the 6-weeks activity?  
Chester: Get to know you...  
Interviewer: Oh, get to know me ah... Haha... I am happy to know you as well. Can I ask you... How do you feel about the activity today?  
Chester: My feelings... It brings back my memories... When I was younger...  
Interviewer: Oh okay, it made you recall those times when you're younger? Did you also do arts and crafts when you were younger?  
Chester: No la... Last time we don't have such materials... It was some basic arts and craft...  
Interviewer: Oh... So last time the materials used were simpler?  
Chester: Ya...  
Interviewer: Those memories you mentioned... Were those happy moments?  
Chester: Hmm, happy!  
Interviewer: Would you like to share them with me haha?  
Chester: Today's activity... reminds me of the seashells I played with in the past...  
Interviewer: Oh... So, you like seashells!  
Chester: Ya, hahaha...



Figure 11. Completed Art-works by Chester.

Reminiscing about his childhood, participating in the session has kindled precious memories, as Chester shared them cheerily with me during the conversation we had. Likewise, many had indicated that they appreciated the socialization that took place during the weekly session. Hearty jokes and laughter were shared commonly at the activity table, with participants feeling generally more comfortable as relationships were fostered along the weeks.

Similarly, during my encounters with Tanya, she was always ever-willing to share. In an interview session of ours, Tanya had mentioned that making the instruments was interesting for her and she felt that she has gained new knowledge. This, in particular, had prompted positive memories of herself in her secondary school days.

Tanya: Today's activity was interesting to me! I think I have gained quite a lot of new knowledge! This just reminds me of the time when I was studying at Anglican High School... I was from the school's NPCC team...So previously when I was in the NPCC team, I felt a huge sense of accomplishment too! Then... we had activities like archery... When I was in the NPCC team, I was still considered young... So then... I felt a sense of accomplishment and was very happy!

Discernibly, Tanya's feelings of achievement have led her to reminisce about the most treasured moments she had when she participated in a uniformed group during her younger times. When reminiscing, meaningful past experiences and acquired values are accentuated, enhancing an individual's self-identity and meaning in life, especially for persons with dementia (Dempsey et al., 2014). Being in reconciliation with their past experiences and having a positive self-identity will enable them to age gracefully, be more accepting of the impending future and death, and have a greater sense of wellbeing (Bohlmeijer et al., 2007, Dempsey et al., 2014). Also, reminiscing involves

interaction and this further improves communication skills and social relationships of persons with dementia and their carers, fostering wellbeing and ameliorating isolation (Parker, 2003, Gibson, 2004). In direct relation, findings on persons with dementia who are engaged in reminiscence and arts activities were reported to have a higher level of wellbeing and quality of life, ascribable to the enjoyment level and benefits (O'Shea et al., 2014, Keating et al., 2020).

Amongst some, the use of materials such as star anise, food grains, and dried chrysanthemum has also engendered much interest. One such case was Lilian, who appeared rather gloomy in the beginning. Preceding the session, I was also informed that Lilian may show signs of disinterest or irritability when she gets moody. To my surprise and relief, she had favourable responses throughout the weeks (Refer to Figure 12), and also seemed to enjoy our company. During our very first session as I introduced the materials, Lilian first picked up the star anise and started smelling it. Further, I struck up a conversation with her and she began to giggle while responding to my questions.

Interviewer:	Do you know what this is haha?
Lilian:	It's used to cook braised meat...
Interviewer:	Do you like braised meat then?
Lilian:	Hahaha... No, I don't... (Chuckles)
Interviewer:	Why don't you? What dish do you enjoy then? Haha...
Lilian:	It takes a long time to cook la... Can buy... Now I don't cook at home...My helper does it... or she buys... (Chuckles)





Figure 12. Rhythmic Rain-sticks by Participants. (Picture on Right, Most Right): by Lilian

Consistently immersed in the sessions, I was glad that Lilian showed positive reactions and appears to enjoy group participation and interaction. On a few occasions, she also commented on her artwork and laughed out in amusement. Expressing fascination at the art-materials used, she often made humorous remarks which triggered much spontaneous laughter, uplifting the overall mood at Clovercare. When seated together with the other participants, Lilian regularly smiles and made eye contact with everyone. For Lilian, participating in the multi-sensorial art engagement programme has provided her an opportunity to interact with others, which she has reiterated during our interviews.

Effectively, the accounts of participants have supported the consensus of reminiscence and social enactment as it reinstates the sense of achievement and self-worth as positive memories are engendered from the multi-sensorial art engagement programme. With the emerging synergistic relationships, the multi-sensorial art engagement programme also draws attention to social determinants of health as a major contributing factor for wellbeing amongst participants. In the participant's



account surrounding how they felt participating in the sessions with their counterparts, feelings of connectedness, and sense of togetherness recurred and were particularly prominent in the interview data. Conceivably, this suggests that the joint activity has fostered a sense of camaraderie amongst participants as rapport is established gradually through meaningful conversations and shared experiences across the weeks.

#### **4.2.5 Improvisation and Play: In-the-moment Creation**

Alluding to the participatory arts and music-making process and their personalized instruments as connecting objects in affective modes, the sessions have incited many favourable responses as well as in-the-moment creation. Responding to in-the-moment creation here, participants were not confined to any rules and were given the freedom of choice and liberty to improvise during the process of instrument creation and music-making. Through this arrangement, all the sessions are equally distinctive as participants responded out of the moment, with interesting occurrences and materialisation as we proceeded with the flow. This experience of flow is regulated by the process in the participatory arts and music-making, relative to any remembered capacities, where this endowing momentary experience with value contributes to participant's quality of life (Nakamura and Csikszentmihalyi, 2014).

Drawing on a particular case, Tanya, an eloquent participant who often spoke to me cheerily and shared many past stories of hers. Her enthusiasm and preparedness to lead the other participants during our music-making session revealed a level of confidence in her that was not observed by staff. This was very surprising for the care team as they mentioned that Tanya's temperament is usually unpredictable during

activity time at Clovercare and she can get very uncooperative during her sudden bouts of change in mood. Nevertheless, over the weeks Tanya has been very cooperative during the sessions, to which I was also impressed at her great finesse at improvising and her ability to express herself creatively. Inextricably, music improvisation for persons with dementia has shown to increase participation level, reduce isolation, and promotes self-expression in the participant (Zeiler, 2014).

Through my observation and from the analysed videotaped recordings of the session, there were several attributes drawn from in-the-moment creation. This encompasses participants feeling the rhythm and grooving along to the continuous motion while passing on the beats, the improvisation contributed and influenced by participants, the pleasing harmony, synchronization, and spontaneity. Noteworthy, communication was not a concern during music-making as participants who had limited verbal ability were actively involved through non-verbal communicative actions musically. The participants were connected on grounds of the interactive process with the continuous motion, bodily movements, turn-takings, mirroring, noticing, and anticipation of forthcoming beats. Naturally, the atmosphere became less tense as it began to resemble a play-session where every one of us just played and tapped along to various beats with the instrument while laughter erupted with on-going chatters.

Relating specifically to meaningful experience in participant's points of view, the subject of play and meaning-making also came into discussion. As the participants expressed:

- Tanya: And I thank god for this opportunity to meet you here... If not, I would not have this chance to play around and experience all of this...
- Sharon: I think the activity is good and I like it because we can play together ah!
- Lilian: It is fun to play around with music and making noises...
- Chiara: Learning to make all these... it is very fun for me la... we all can also play along...
- Elaine: I enjoy playing! It makes me happy... thank you, you...

The common views which surfaced mostly alluded to the notion of play, and having fun. Bringing to the fore, Elaine was a participant of mine who has limited verbal responses but was rather affectionate, and she usually expresses herself through nonverbal gestures, including nods and eye contact. Recognising this, I was attentive to her expression during the sessions, trying to apprehend her emotions or note if the session was paced comfortably for her. Most surprisingly, what is noticeable was that even with her limited speech, Elaine responded in a playful manner displaying an expression of contentment and grins as she regularly took a glimpse of the other participants and myself. Noteworthily, on many occasions during our music-making sessions, Elaine playfully nudges the participant next to her, seemingly asking them to keep up with her tempo. Affectionately, she often held on to my hand whenever I approach her or looked on at me warmly as she touches my face during our interview session. Debunking the notion of play, it is not intended to infantize or trivialize; alternatively, in dementia care settings, it is a concept meant for exploring new potentials for expression, relationship building, and meaning-making in later life (Perrin et al., 2008, Killick and Allan, 2012, Dunn et al., 2013). As well, this imaginative nature of play also has the ability to alleviate boredom, suppress aggression, release tensions, and foster social connectivity (Glynn and Webster, 1992).

During the activities, particularly in the joint music-making session, embodied communication is established in the musical conversation where participants holding on to their instruments played along to various tempo controlled by themselves. In this dialogue, participants sometimes mimic each other, performed various gestures and bodily actions, with this dynamical interplay being socially communicative. Nuances of expressive qualities were elicited from participants' novel experience, projecting a range of bodily actions and gestures. Inseparably, the context of the play as accorded by participants also coexist with feelings of cohesiveness, merriness, as well as many fleeting moments demonstrating their great gusto with humour. In tandem with, the participant's dynamism with them paying close attention to details as we went through rounds of music-making and played the instruments together. As they conveyed:

- Elaine:           Everybody is doing this together... it's better... like more crowded and livelier...
- Henry:           When doing music... I am contented... the more the merrier la...
- Tanya:           Every time I heard Kendrick (another participant in the same session) play his castanet, his is the loudest and most catching... Us participating together is much better! Like... it's a kind of cooperation and collaboration I feel...
- Sharon:           It is fun as we chatted and played along with each other, here and there!
- Chiara:           I enjoyed the music-making... when we shake the maracas... Because everyone is together, I find the process very enjoyable...
- Lilian:           Music and making noises with the instruments are fun... we can also crack jokes here...

Memorably, during a session we shared, Lilian on the spur of the moment began giggling as she recited a rhyme in Mandarin in a playful tone; *"yao yao yao, yao dao wai po qiao"* (a popular classic nursery rhyme) as she shook the flower maracas in sync with the others. This has also incited barrels of laughter amongst participants, myself, and staff who were overlooking. Shown in Lilian and the other participants here, the

unfolding of playfulness with improvisation and spontaneity, can be associated with the terms of creativity, flexibility, art, and imagination; where these dimensions of play can spark off new and meaningful forms of interaction for persons with dementia (Shika and Huali, 2015). These emerging social cues picked up during the multi-sensorial art engagement programme has shown that elderly with dementia have the means to maintain and form meaningful social relationships with verbal and even non-verbal communication. In-the-moment creation and a sense of camaraderie were established, enabling a deeper understanding and impression of a dynamic and spontaneous interpersonal engagement.

#### **4.2.6 Supportive Environment and Improved Interpersonal Relationship**

Along with these encounters of shared experience weekly, a sense of closeness is largely intensified, which has reinforced interpersonal relationships and the meaning-making process. Exemplified in the case of Shirley, companionship, and the development of friendship was clearly expressed by her in the interview data and had emerged through the affection that she has shown. The consolidated extract taken from our weekly interviews have further demonstrated that Shirley enjoyed the bonding, close ties formed, and quality connections along the weeks.

Shirley:                    We... from strangers... now we are so much closer!

                                  We are friends already now... now we are becoming really good friends... like sisters!

                                  I am old...but even though you are still young... that is good also... I can talk to you... and you are still here with me...

                                  Our relationship got better because everyone is here together! Everyone does these activities together... and you are here with us.... Chatting and chatting, making us happy too...

Taking these interview extracts together, suggests that embodied communication and the hearty conversation that arises during our weekly sessions have forged our friendship and deepened the connection amongst participants and myself. In Shirley's case, her domestic helper usually joins her during some of our sessions and has participated in the activities together with her, and at times, also spurred her on with some compliments. Not just Shirley, her counterparts also appeared to enjoy the compliments that were given. The proximity observed between Sharon and her helper during these shared moments together has purportedly enhanced the caregiving relationship, which was also perceived in a few other participants with their helpers. For instance, the helpers of participants who were present were mostly astonished when seeing their completed artworks. The helpers often came over cheerfully and took pictures of the participants on their own accord, and were very supportive of them. Pertaining to the conditions of a supportive and enabling environment, it has a direct influence on participants, and the interwoven factors could alter or interfere with the responses and reactions of individuals. In this case, the familiarity of the facility and usage of the common space at the dementia day care was comforting and accustomed for participants, and this has allowed them to feel more at ease during the weekly session they had participated in. The care staffs at Clovercare were also very involved and had an integral part to play in encouraging and keeping participants motivated through the weeks. On many occasions, staff would come by to the activity table for conversations and would often compliment the artwork done by participants, which has often left them beaming with smiles. As domestic helpers were accompanying several participants, keeping them company and

with some participating together with the elderly. En rapport with the activities, care-giving relationship was enhanced as closer ties were fostered.

Between participants and all of us involved, the increased social interactions and interpersonal communication is likely a probable explanation for the observed change in dynamism and synergy level. On this basis of interpersonal relationship and socialization, when participants are engaged in the session, synergistic with one another and stimulated by their personalized instruments with the flow and characteristics of the multi-sensorial art engagement, the resonance becomes visible. With the proximity of my participants and myself during the sessions, this sense of affection had manifested through hand holding, eye contact, attention given, physical and supportive touches, positive facial expressions, and suchlike. Figure 13. presents an overview of each theme, and the breakdown of engagement level that each participant accounts for.

Themes (n=6)	Emboldening Creative Potential	Spurring on Creativity, Imagination, and Personal Achievement	Vitalizing the Senses	Our Shared Anecdote: Reminiscence and Socializing	Improvisation and Play: In-the-moment Creation	Supportive Environment and Improved Interpersonal Relationship
<b>Participants (n=11)</b>						
Sharon		✓			✓	✓
Shirley	✓	✓	✓			✓
Tanya	✓	✓		✓	✓	
Lauren	✓					
Lilian	✓			✓	✓	✓
Henry					✓	
Elaine		✓			✓	
Chester	✓	✓		✓		✓
Chiara	✓	✓	✓		✓	✓
Kendrick		✓	✓			✓
Hester		✓				
<b>Total (n)</b>	<b>6</b>	<b>8</b>	<b>3</b>	<b>3</b>	<b>6</b>	<b>6</b>

Figure 13. Respective Themes and Participants' Engagement

At the end of the 6-week programme, participants were presented with their art-works which was packed in a gift bag for them to bring back as a memento. Many were pleasantly surprised and were ecstatically happy with the outcome of their work. With some looking equally amused and fascinated, while some have voiced out that they would have never imagined being able to do something like that. The participants, in particular, were extremely appreciative of the sessions they have attended, as they thanked me gleefully, and mentioned that the 6-weeks flew by really swiftly.



### 4.3 Testimonies from Care Staff at Clovercare

In substantiation and to ensure the reliability of my empirical findings, testimonies were obtained from five care staff at Clovercare. These care staff identified are the main care providers of the clients at Clovercare, under the wing of elderly dementia services. The care team comprises of the staff nurse, Alyssa, and four other care associates, and are Megan, Hazel, Jameson, and Cindy. For most of the sessions, Alyssa had sat in and provided me with logistical support most generously, while the rest of the care associates took rotations to sit in and observe whenever their schedule permits. In an attempt to gather the impression care staff had of the multi-sensorial art engagement at Clovercare, inputs were obtained on the final week of the programme. As shown, are the care staff overall opinion of the 6-weeks programme, which was generally positive and rather affirming.

- |          |  |
|----------|--|
| Alyssa:  | The sessions are very engaging, with interesting new ideas. These are activities that clients have not tried previously.                             |
| Cindy:   | I think that it is a very well-planned and organized programme.  |
| Jameson: | It is good. Something different from their normal activity, and I think that it can also built up their interest in arts and music.                  |
| Megan:   | I think this will benefit the clients for psychological and emotional wellbeing for those involved in this programme.                                |
| Hazel:   | It is a very meaningful activity, giving the elderly something new to do, making new arts and crafts. Allowing them to have a sense of satisfaction. |

These views surfaced mainly in what respects to the novelty and structure of the programme, which suggest an enhancement of participants engagement levels, and which had incited their interest in arts and music. In their account, Megan and Hazel indicated that the 6-weeks programme was meaningful, and had benefitted the participants. They both agreed that the sessions had uplifted the participant's wellbeing and gave them a sense of satisfaction.

### 4.3.1 Meaningful and Stimulating Activity

When asked about their opinions on having this activity as part of Clovercare routine, several perspectives were expressed.

- Alyssa: It would provide our clients with a regular art component where they can create their own versions of items they are familiar with.
- Cindy: This activity will definitely benefit the clients in the long run. However, maybe just not suitable for the very advanced dementia clients.
- Jameson: The activity adds on to scent and sensory engagement for our clients.
- Hazel: I think it is a good suggestion to have this activity as part of our centre routine.

A common view amongst care staff was that having such a programme as part of Clovercare routine would be beneficial for the clients in the long haul as they are able to experience a more diversified art component regularly. As Jameson mentions, the multi-sensory component integrated with the programme also serves the interest of the participants as it can engage them multifariously. Care staff has expressed the belief that the 6-weeks programme has played a role in meaning-making and in empowering the participants.

- Alyssa: This programme has allowed them to exercise their creativity and create an object of their own, encouraging the participants to make autonomous and independent choices.
- Cindy: Even though the clients may normally not remember what they have done after some time, nevertheless I observed that the clients were very patient and focused while they did the art and crafts on their own. I felt that this was meaningful for them as well.
- Jameson: Yes, I think that this programme involves quite a number of details in doing it, which participants were able to. Perhaps, just not suitable for the more advanced dementia clients.

Encapsulating the essence of empowerment and meaning-making for participants, having the ability to exercise their own choice often evoke a sense of accomplishment for them. Oftentimes, clients at Clovercare were very much being cared for by the care team or their helpers as they follow through with a fixed set of schedule or activities

which are usually regimented. To an extent, decision making is often deprived or overlooked. Surfaced in the participant interviews, the opportunity to participate in the sessions had given them a sense of purpose and indulgence as many also referred to as having exceeded their expectations.

#### **4.3.2 Improved Engagement and Interaction**

Through the care staff observation, they had also commented on the participant's engagement and interaction levels during the sessions.

- Alyssa: Engagement and interaction level depends on the client's interest level. For those who enjoy art and music were observed to enjoy making the objects. However, some clients were likely unable to give much response during the interview as they have difficulties thinking up of comments.
- Cindy: Overall, participants were very focused during the activities. And many of them are also very willing to participate.
- Jameson: I noticed that they are all engaged. And most of them were interested.
- Megan: Through my observations, I noticed that the clients are keen to learn new things, and learn how to make the instrument and play it. It is also not too difficult for them.

As observed by the care staff, participants were actively engaged during the sessions and were highly focused throughout. During a short conversation that I shared with Alyssa, she was also caught by surprise as she further explained that some clients are usually easily distracted. However, during the sessions we had, those participants mentioned were very engrossed in the activity, even on days where we overran. This also infers that concentration during the session has helped elevate their focus. The activities have since commanded their absorption, and sense of time is suspended, accentuating the importance of being in the moment (Craig and Killick, 2011). According to Megan, participants showed anticipation and proactiveness towards

learning and were open to new experiences as well. This was extremely encouraging for me to hear and have accorded to my earlier observation of the participants.

### **4.3.3 Strengthening Staff-Client Relationship**

On their impression of participant's abilities, and looking on at what they have created over the weeks, care staff were impressed and had all agreed that participants had positive reactions and were mostly happy with the outcome.

- |          |   |
|----------|---|
| Alyssa:  | Some clients were really pleased with the outcomes of their project, as they do not do this on a regular basis.   |
| Cindy:   | I saw one client appreciated the art and crafts work so much that she wants to keep the bag close to her side in order not to misplace it. My impression is that she treasures her workpiece. |
| Jameson: | They found something new to occupy them, it is a new and interesting experience for them.   |
| Hazel:   | Even though I am not there to observe every session. I could see that the clients are very satisfied and happy with the outcome of their artwork. This makes me proud of them.                |

It can be drawn from care staff responses that they were supportive and felt proud of the participant's achievement. For instance, the care staff repeatedly came by the activity table during the sessions and gave many compliments to encourage the participants. Significantly, they have noticed that participants were delighted as involvement in the programme had given them the opportunity to try something that they do not usually do. Notably, completion of the artworks had also given participants an immense feeling of joy and satisfaction. In correlation to what was being quoted by Cindy, I recalled on many occasions that participants had enthusiastically asked me if they could bring home the artwork that they have completed.

Turning now to the opinions that the care staff had about having me as a facilitator conducting the programme, these respective views were expressed.

- Alyssa: It will be good to have you coming down to conduct the programme as it would provide a holistic approach and also monitor the progress of clients if programme is over a few weeks.
- Cindy: It is good as you can have different types of engagement for the clients. You have also put in a lot of effort, getting colourful and striking materials. Every session was well-planned and organized. You are very gentle and patient with the clients.
- Jameson: The various types of engagement you provided is good for the clients. You have also been very kind and patient towards the clients. Preparation for the materials is very well organized every week when you are here.
- Megan: You coming here to conduct the programme helps to lighten the load of our staff.
- Hazel: You have been very patient when explaining to the clients. Also, you tried to understand their needs and provided them with assistance while showing empathy.

It is especially heartening and relieving to hear that the care staff had viewed how I facilitated the programme favourably. Additionally, the multi-sensorial art engagement programme was also deemed to be holistic and is a great approach to engage and invigorate the clients. Megan had also indicated that with a facilitator, it can greatly alleviate the workload of the care staff as they sometimes do not have the additional support, resources, or time to make arrangement for regular programmes as such. Concerning the qualities of my facilitation, the care staff had pointed out patience, being empathetic, gentle approach, kindness, and the carefully designed programme.

Together, these empirical findings and further testimonies provided by care staff had given important insights, adding to the experiences and opinions of participants following their involvement in the multi-sensorial art engagement

programme. It is also reassuring to note that the care staff felt that participants were empowered, with the majority commenting that it was an invaluable experience for them altogether.

#### **4.4 Summary**

Taken together, this present chapter highlights the potential of a multi-sensorial art engagement programme as it explores the effects and contribution on the wellbeing of the elderly in dementia day care centre (DDC). The empirical findings encapsulate the opinions and experiences, as well as the benefits springing from participant's involved in the 6-weeks participatory arts and music session at Clovercare. Drawing the inferences directly from participant interviews, digital video, observation of participants, and field notes, the findings is further corroborated through testimonies provided by care staff. Looking beyond the dormant ideologies and pathological condition of dementia, the empirical findings have implied that when given necessary support and opportunities, elderly attending DDC can continue thriving and have a more holistic experience during their time spent at the facility.

Undeterred by the obstacles faced along the way, participants demonstrated a high degree of independence and were able to accomplish and create their personalized instruments. Tenaciously, the sense of achievement, regaining of confidence, and the ability to make their own decisions were strongly recounted. Dauntlessly, contrary to stereotypical notions of elderly with dementia, all the participants have shown their openness to new experiences, appetite for new knowledge, and displayed their ravening for self-improvement. With elation and

enjoyment, the creative and novelty aspects from the programme has also engendered originality and inventiveness, which was displayed in each of their work of art. Reflexively, the uniqueness of each individual was striking and reflected through their artworks and imaginative ideas, which further supports positive identity construction.

Dynamically, the instruments as a connecting object together with music-making have spurred on multi-sensory coordination and much spontaneity. In resonance, participants had accorded to sensory qualities which were apparent, and had evoked favourable reactions. On multiple levels, the findings suggested that group participation has opened up pathways for conversations and facilitated synergistic relationships. Across the weeks, participants avidness has fostered meaningful relationships, social interaction, mutual discoveries, and emotional connection. Beauteous and precious memories were enkindled and shared as participants reminisce about their past experiences. Overall, the current empirical findings presented in this chapter further strengthens the potential for a multi-sensorial art engagement programme and its contribution towards the wellbeing of the elderly at DDC.

Turning now to the elements which have influenced wellbeing outcomes, the current empirical findings have also gone some ways towards enhancing the understanding of intercorporeality within the practice of multi-sensorial art engagement programme in dementia care. Reflections on intercorporeality and the manner in which wellbeing is shaped through multisensorial art engagement will be discussed in the next chapter.

## **Chapter 5. Intercorporeality, Wellbeing and Multi-sensorial Art Engagement Programme in Dementia Care**

Building on my empirical findings, this chapter will offer some reflections on the processes that shape the wellbeing of OPWD at Clovercare through multi-sensorial art engagements by considering the theoretical concept of intercorporeality. In reiteration, intercorporeality is a notion derived from Merleau-Ponty (1962) to illustrate the relations between one's body and the others as a social being, the inseparable bearing of the minds and bodies; and the interrelatedness of a network of relationships. Intercorporeality also draws attention to a range of interplaying elements such as interpersonal connections, physical objects (e.g. art materials and completed musical instruments) in a shared context, that shape meaningful interactions. The multi-sensorial art engagement session presented in my research can be regarded as an interwoven relationship of my participants, myself as the art facilitator, the care staff at Clovercare, domestic helpers accompanying some of the participants, the shared physical space, and the weekly participatory arts and music activities. Noting these factors, when considering intercorporeality here; it opens up possibilities and alternative views such that even when cognitive abilities are diminished, OPWD is still able to make a connection through bodily behaviours in verbal and non-verbal ways in a multisensorial art engagement session. All of which is a means to meaningful interactions and experiences, thus shaping wellbeing outcomes closely, and ushering effective practices.



Coherently with the insights of intercorporeality and how it can have influence on wellbeing, a part of the discussion in this chapter will reflect on the facilitation processes in multi-sensorial art sessions for OPWD. As well, to draw out distinctive features and approaches which were deemed effective in supporting participants during the sessions conducted at the DDC. Drawing on these reflections, the concluding section will propose a practice framework as a guide for practitioners to promote effective practice.

### **5.1 In-the-moment Encounters, Intercorporeality and Wellbeing**

In Merleau-Ponty (1968) perspective on phenomenology of the body, he points out to objects in affective modes where it can be either appealing or abhorrent, this evinces reactions from the bodies, which may be inviting or receding. The 6-weeks multi-sensorial art engagement programme fuelled a supportive and safe environment for participants to engage in the creation of their personalized instrument. Hereinafter, utilising their instrument, participants are then invited with their counterparts in the exploration and making of music-beats. Leveraging on the connecting object and materiality, the instruments made by participants weekly are imperative for the joint music-making experience, which are intended for reciprocal engagement and dynamic interplay. As participants engage directly in the creative process of making, with their completed instruments, they partake actively in a music-making experience as a group which includes me, sometimes the staff nurse, Alyssa, and domestic helpers of participants. Consistent with the human intercorporeal experience, multi-sensorial experiences, and creative expressions can be enabled through the medium of a shared object, reinforcing and affording new forms of interaction (Hahn and Jordan, 2017).

As suggested in the experience of the participants, it is comparable to Purser (2019) stance on engaging in creative practices by moving beyond psycho-therapeutic practice into the context of humanising experience; where healing and well-being take the form of reconnecting with oneself, the world, and others through creative art forms. Surrounding this comprehensive experience, it moves us towards in-the-moment and in-the-body connection where all body-object and body-body relations are inescapably meaningful (Jordan and Mays, 2017, Purser, 2019). Positively, shown in several qualitative studies, engaging in creative arts experiences for elderly with dementia were shown to be benefitting for their social, psychological, and physical wellbeing; coupled with the importance of acknowledging their strengths, regardless of mental capacities (Lokon et al., 2012). An example of the in the moment experience can be observed in Sharon, a participant in one of the multisensorial art session. She effortlessly clings on to the loop of the castanet on her thumb and taps on it rhythmically. When I was making my observations, it does seem to me that Sharon was rather familiar with the instrument. As I approached her during our individual interview on the final week, unsurprisingly Sharon also chose the castanet as her favourite out of all the other instruments she has created over the 6-weeks. Out of curiosity, I shared this with Alyssa, the staff nurse, and asked if the clients at Clovercare were exposed to such percussion instruments. To my realization, Alyssa then informed me that Sharon indeed plays the castanet during their karaoke activities at Clovercare. Here, it also surfaced that Sharon's effortless playing was shaped by her experience, embodied from her previous musical encounters from the karaoke activities. Closely, several dementia studies have found that even with deteriorating cognitive abilities, capabilities for singing, other forms of music-making, and artistic abilities can be

retained (Ridder, 2003, Miller, 2008, Chatterton et al., 2010). This, in relation to the form of intercorporeal dyadic body memory, exists where individuals re-enact to dyadic patterns as in the case of Sharon, which transcends to an openness towards individual creativity and sociality (Fuchs, 2016).

Strikingly, another encounter with Tanya has demonstrated that she took on a vastly different role from her usual self during the joint music-making segment. On spur of moment, grasping on firming to the tambourine she has made earlier during the art-making, Tanya improvised and boldly led the group. Rhythmically tapping onto the tambourine, Tanya began to experiment with several different beats while the rest of the participants and myself tag-along closely. This was slightly out of the ordinary and also remarkably distinctive for me, as I usually would signal for a transition or lead the participants first. However, at that particular moment, I decided to take a step back and go with the flow (Refer to Figure 14). The session, almost like a chain action cycle, where we repetitively followed Tanya's beat. Notably, to get us on the same page, Tanya also counted to the beat loudly which has gotten hold of all our attention.



Figure 14. Participants tapping on their Tambourines during Music-making (Tanya, in grey).

Interestingly, within the actual moment, the presence of Tanya with her rhythmic movements and cues has echoed the same actions as the rest of us. As we proceeded on with several rounds of improvisation, synchronization was distinct as we gained momentum. This has seemingly positively impacted the flow of the session while also effectively initiating several levels of communication. Reflecting from our interactions, there were several pronounced features including; nodding of heads and acknowledging each other's presence, spontaneous laughter, tapping of hands, relaxed body posture and facial expressions, deeper concentration, regular eye contact, and mimicking of each other's bodily actions and the flow of musical synchronicity. With these insights, the immersion process shared during these in-the-moment encounters also draws out attributes to the flow experiences or the flow states. In this context, the concept of flow induces positive physiological changes, as when the participants are immersed in the multi-sensorial art engagement session, there is a natural flow state where pleasure and enjoyment are derived (Csikszentmihalyi and

Csikszentmihaly, 1990, Tierney and Beattie, 2020). Closely aligned, the interactions that occurred during the session, including from participants to participants, and with the environment which also contributes to the many dimensions of flow. In consideration, there are aspects of thoughts, intentions, actions, and senses (Craig and Killick, 2011). Emphasizing the encouraging health implications of flow, the phrase 'dynamic equilibrium' in Nakamura and Csikszentmihalyi (2014) also stresses the integrating experience for persons with dementia to have the opportunity to feel entirely whole again. In their extract:

Although it seems clear that flow serves as a buffer against adversity and prevents pathology, its major contribution to the quality of life consists in endowing momentary experience with value (Nakamura and Csikszentmihalyi, 2014p. 102).

Among other things, the concept of flow is noticeable from the accounts of participants as they were profoundly absorbed during the multi-sensorial art sessions and have displayed a sense of identity and traits that were usually not observed in them. As expressed in an earlier chapter (See Section 4.3.2), the staff at the centre has specifically pointed out a higher engagement level as the elderly participants were more focused than usual. Thereupon, the data drawn in this section recognises the conceptual understanding of intercorporeality as it plays out meaningfully within participatory arts and music activities in holistic ways that support wellbeing outcomes for participants. Here, the nexus of in-the-moment creation where the instrument as connecting objects held by participants has invigorated comradely bodily actions and gestures, inciting and exchanged by the other's body, manoeuvring towards an embodied communication. Engaging with Merleau-Ponty (1962) intercorporeality within the context of multi-sensorial art engagement hence unfolded understandings that dynamism, expressiveness, and spontaneous contributions of participants have

fostered socialization and a caring environment. Dynamically, the core of human connection in the weekly sessions was eminently presented through the multitude of joint active bodily and multi-sensory communication, facilitated by the participatory arts and music activities. In that light, verbal communication and cognitive abilities of participants are not an undermining factor towards wellbeing contribution or neither as a reflection of their latent potentialities.

## **5.2 Fostering Camaraderie: Synergies of the Ageing Bodies**

As we look beyond the bio-medical model in dementia care, the overarching lens of psychosocial research has substantiated the importance of social engagement, tapping on available environmental resources to support the latent capabilities of individuals with dementia (Vernooij-Dassen and Jeon, 2016). Acknowledging the significance of social and physical interaction, corporeal schema is developed through the shared experience of participants during the process of the multi-sensorial art engagement programme, which is relative to participant's bodies towards active, dynamic engagement and the transpersonal experience (Merleau-Ponty, 1962, Levin, 1988). Along with these encounters of shared experience weekly, the transference of corporeal schema intensified the sense of closeness, reinforces mutual relationship, and the meaning-making process. Attuned to these shared practices in the multi-sensorial art engagement programme, the emergence of a social reality invokes a supra individual process within which participants assimilate their position, meaning, identity, and are empowered by each other (Alkemeyer et al., 2017). Having shared quality time together with my participants, the blossoming of friendships, meaningful and supportive relationship dynamics were particularly pronounced as the week

progresses. Observed in the form of social inferences and reciprocity, was a lasting encounter I had with Sharon and Shirley. In specifics, even though their personality traits were exceedingly different; with Sharon being more extroverted, daring, and always full of curiosity. Shirley appears the exact opposite, she is very soft-spoken, conscientious, and sometimes needed a little gentle persuasion. Despite the differences in their personalities, the weekly session has allowed them to become better acquainted. Immeasurably, this has also incited many personal and informal conversations during the art-making, music-making, and even finer, through the interviews conducted at the end of every session. In an intriguing occurrence during the making of the spin drums, Sharon who was seated right next to Shirley had begun to initiate a conversation, expressing her interest in the various art materials which were presented on the activity table. Handling the art materials laid in front of them, both Sharon and Shirley began to engage in a rich dialogue; with them having conversations and discussions on which decorative papers to choose and et cetera. This has also unfolded plentiful of expressive and creative ideas, with both Sharon and Shirley proposing and exchanging their impression of each other's artwork. Entering this dialogue, the other participants in which I have noticed, have also paid close attention to what the rest are doing. Instinctively, it appears that not just with Sharon and Shirley, this communicative and social dialogue seemed to also empower the other participants who were seated together during the session.

Dynamic connections can also be observed during a session on Week Four. Clearly focused and very verbal, Sharon appears to be in good spirits during the entire session. Initiating a conversation with Shirley seated next to her, Sharon gave her

suggestion on the colour selection and recommended matching colours when Shirley couldn't make her decision on which decorative paper to choose from. Regularly, Sharon leaned her body forward towards Shirley, and the other participants in the group, passing on the art materials and as we chatted. Reciprocally, Shirley, and Tanya (another participant in the group) were visibly thrilled and pleased as we engaged in small talks throughout the session. Grins and laughter were eminent as Sharon, Shirley and Tanya completed their spin drums (where they also started to play along with it together). While observing the participants, it came into view that all of them were very observant of each other as they were in the process of making. It was astounding to witness their interactions at first hand and the manner in which they go about to give each other suggestions cheerily. Also, the continuous chatters and bonding as they relate to one another on the spin drums they had made, and the loud sound it made and compared its resemblance to the pellet drum they all played when they were younger. Sharon had also shared with me that she would like to give it to her grandchild. Hence, from first-hand accounts of observation and the interviews with participants, it has come into sight that the weekly social encounters and interpersonal relations were enhanced immeasurably. As communicated by Shirley earlier (See Section 4.2.6), she felt a sense of togetherness and thriving friendship, over the course of us spending time altogether during the multi-sensorial art sessions. In this respect, meaningful interactions during the sessions account for interrelated bodily movements underlying gestures and language in the form of communication (Fuchs, 2000, Alkemeyer, 2006). Hence, in these shared bodily experiences, intercorporeality materializes not just through direct physical contact but also the sense of affection, affordance, and resonance (Alkemeyer et al., 2017). Ardently, a sense of attachment can be vividly



observed from Elaine, as she regularly displays affection. Though Elaine speaks a few words, she often had rich expressions and communicates through bodily forms of interaction (Refer to Figure 15). As she required more assistance, communicating with Elaine would constitute seating or standing close by her side and showing examples visually to provide guidance whilst also giving her reassurance and acknowledgments with regular nods and smiles. Meanwhile, also ensuring that the pace is right for her. Whereby continually, Elaine would reciprocate playfully with a cheeky grin and gave nods as she proceeds with whatever is on hand.

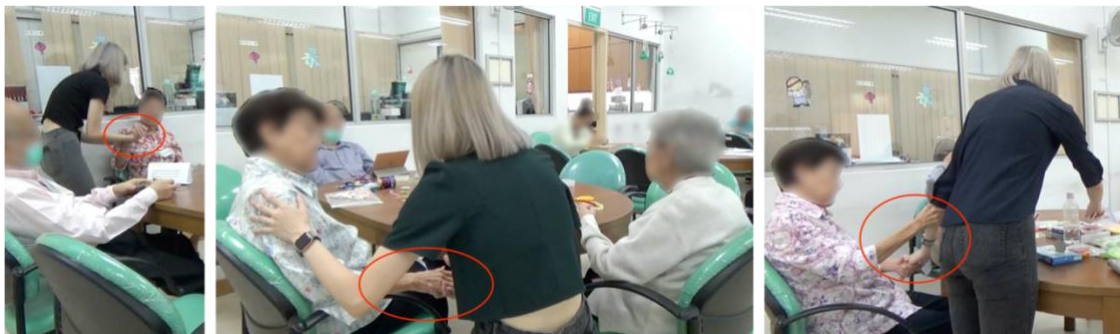


Figure 15. My Interactions with Elaine

In my interactions with Elaine on multiple occasions (As Shown in Figure 15), she frequently expresses her appreciation by holding on to my hands, usually at the end of the session. Sporadically, Elaine would respond to my interview questions with short answers, where she would mostly convey her experience in the multi-sensorial art engagement programme as a form of play and relaxation for her (See Section 4.2.2 and Section 4.2.5). Seemingly apparent in the accounts of Elaine, meaningful interactions manifest mainly through the smooth exchanges and fluidity of bodily interactions and affection. This is between Elaine herself, myself, the other participants, the staff who walked by and participated, and Elaine's helper. Most importantly, as seen in the case

of Elaine, her limitations in verbal communication have not restricted her capacities to express herself creatively or in any way affected her abilities to open up towards others. It is encouraging to note that this is consistent with the literature with regards to the view of wellbeing and bodily boundedness in intercorporeality. In this sense, persons with dementia are still able to maintain bodily forms of expression in a way that reflects their bodily style and selfhood (Petherbridge, 2019). Following on with another observation, participants had also expressed that a positive atmosphere during the multi-sensorial art engagement session has made it possible for them to gain meaningful relationships. As I gathered responses over the weeks, the memoirs of Chester stood out in particular. As mentioned earlier, Chester carries a reserved demeanour in the beginning and has noticeably formed a close bond with the other participants and myself over the weeks. His confidence gradually rose as he felt pleased and accomplished whenever he had completed an art-work during the sessions (See Section 4.2.2). The socialization that occurred in the course of the group participation had greatly facilitated a sense of comradery amongst participants and had lifted the uneasiness Chester showed initially. In his response during the interviews, Chester had also mentioned about getting to know me better, as well as the other participants, as though we were all friends (See Section 4.2.4). Apart from that, Chester also felt comfortable when approaching me when he faced any difficulties during the process of art and music-making. In his words:

Interviewer: How do you feel about me facilitating this programme?

Chester: It's very good, if I don't know anything... I will just come and find you and you will help me. You helped me a lot and you are very patient with me.

In view of this, the positive atmosphere which Chester experienced during sessions had allowed him to open up, talk about his feelings while gaining new experiences. This

is interchangeable with the staff testimonies where they had commented on the enhanced staff-client relationship (See Section 4.3.3).

### **5.3 A Multi-sensorial Art Engagement Practice Framework for Older Persons with Dementia (OPWD)**

So far, in the previous sections, I have explored and highlighted the potentiality of the multi-sensorial art engagement programme in contributing to the wellbeing of OPWD at Clovercare. Engaging the notions of Merleau-Ponty (1962) intercorporeality, I further reflected on how wellbeing is shaped across the inherent network of bodies, objects, relations, positive affect, supportive environment, and the weekly participatory arts and music activities. Building on these understandings, I will now explore and propose a multi-sensorial art engagement practice framework which I hope will help guide practitioners to create a successful session. Facilitating the programme, draws upon mediating various levels of entities, consisting of being supportive, understanding, empathetic, and having to manage ongoing situations or interruptions that may compromise the emotional and physical safety and wellbeing of participants. Channelling the actions of participants, are the materiality and objects used during the session which has provided an array of multi-sensory experiences. The objects here manifest in the form of art materials and completed instruments by participants which were being used weekly for the music-making session, supporting group expressivity and interaction.

### 5.3.1 Empathetic Disposition of an Art Facilitator

In this section, I will turn to the indispensable account of art facilitation as I reflect on significant aspects of this caring work. This draws together the traits and indicators pointed out by participants themselves and the care team relating to my facilitation. As pointed out, these are views collected from participants during our weekly qualitative interviews and written inputs received by the care team at the end of the 6-week programme.

- Shirley: It was not difficult for me... because you are very *compassionate*... and you taught me *patiently* ah... now... I learned a lot from you... and you are *humble* too...
- Chester: If I don't know anything, I come and find you lor (chuckles)... and you helped me and you are very *patient* with me...
- Hester: I am happy to look for you! I enjoyed it because you are not fierce! You are a *nice and kind* girl and helped me when I faced difficulties...
- Elaine: It is successful I think... you are *patient* with all of us...
- Tanya: I would like to thank you also... for being so *thoughtful*... and spending such *great effort* to conduct the activities...

An overview of the characteristics' participants had listed included patience, compassion, kindness, humble, thoughtfulness, and great effort. In retrospect, this resonated with the care staff responses earlier, which indicated the qualities of patience, being empathetic, gentle approach, kindness, and the carefully designed programme. It is somewhat surprising for me and I was also filled with gratitude when I learned that the role I undertook as an art facilitator was valued and appreciated. To mention, the creative activities and art facilitation was also a process of mutual discovery and shared relationship as I cogitate on. The process of mutual discovery and shared relationship, got me to consider the aspects of caring and empathetic

correlations during my art facilitation. For instance, each encounter and experience with every individual is uniquely distinctive.

Interestingly, this brings me to Tanya's opinion of the entire multi-sensorial art engagement programme and how I had conducted the programme. In correlation, she had described the importance of the art sessions as meaningful, caring, social, where she also appreciated the facilitation process. She has also expressed her support for the development of the programme and its potential for expansion at other DDC or social service agencies. In a detailed account, the extract below was provided by Tanya during the interview we shared on our final session.

Tanya: Because you came here, this art programme is also something that is completely new... I do think that it's great that you implemented this programme, it is extremely valuable. Making use of the facilities here... You should also try approaching other social service agencies... I think they will have a venue for you to expand this programme... It will enable more people to develop their creative capability... I really do hope that you not only conduct this programme here, you can also do it at all the other centres... For older people or younger ones... I feel that this art programme you are doing is very special! So, I really do think that it is something worth carrying forward... You can try to find ways! I think that god will bless you and place a huge importance... on this care work and social work you are doing... It is meaningful to the society and welfare of people...

Nonetheless, as I recounted on the facilitation process, no doubt it was also confronted by several challenges, including the need for continuous refinements, and adapting to variables. Concerning each participant's condition and their ability to communicate was also a hurdle I had to overcome as well. It can be unpredictable sometimes as their condition affects them very differently. For instance, I had a participant who was gloomy and disruptive during a particular session and she wanted to leave, and I respected her decision. Thereupon, when I invited her again on another

day to join us in the session when she was in a better mood. She happily obliged this time round and completed her instrument in no time.

As the context of the multi-sensorial art engagement programme involves both participatory arts and music elements, the process of transition had to be communicated concisely to my participants while holding on to their attention. Another interruption I had faced would be dealing with disruptions in the background, as the weekly sessions were held in a communal space, there were excessive noises which can sometimes make focusing hard for the participants. I also had to oscillate between art facilitating and as a researcher often. There were moments where I had to observe, attend to participants when they needed guidance with the handling of art materials, and switching to the role of carer at times. In specific cases like fetching water for my participants when he or she was coughing, helping and reminding them to put on their masks, massaging their fingers when they experienced cramps, and getting their walking frames when they needed to go to the washroom. Undeniably, all these aspects play a vital role with regards to caring for and empowering the elderly. Above all, as I reflect on the importance of empathetic traits in art facilitation here, the next section will describe features of the enabling environment.

### **5.3.2 Enabling Environment**

In addition to the empathetic disposition of the art facilitator, another significant aspect towards overall wellbeing outcomes is a supportive and empowering environment. Establishing an enabling and conducive environment, it is necessary here to highlight the physical and social facets. Given the physical space that was utilized

during the multi-sensorial art engagement sessions, a suitable corner at the end of the main activity hall was allocated as it poses less of a distraction. The dedicated corner was deemed suitable as it not only has ample space to conduct the activity but also to set up my camera equipment. Most importantly for safety reasons, participants who require the walking frame and wheelchair can navigate around without much of an issue. With sufficient space, I was also able to move around and be of reach for my participants when they require assistance.

Looking out for the participants, I have noted other considerable factors including; empowering them to undertake the arts activities independently, being supportive and adaptive when attending to the participants, being physically and emotionally present for them. Considering the sensitivities involved, I continually provide active support and showed understanding of my participants. Eminently, I also kept in mind to not assist excessively and allow the elderly to work independently whenever possible. This is to enable them to exercise their autonomy and hence encouraging them to build their confidence and self-esteem by expressing themselves fully. Words of encouragement and reassurance from myself, staff, and helpers also form a huge component in elevating the confidence of elderly participants. As for some, it is their first time engaging in participatory art and music-making.

Another significant factor I had to consider was their physical and frail health, such as deteriorating eyesight, hearing loss and, chronic pains. In this process, I have learned to make continual adjustments according to each of the participants needs, by providing a more comfortable space and pace for them. For some, conveying messages

and communicating was indeed a challenge as some had difficulties articulating their thoughts or had limited verbal speech. Or at times, I may have trouble understanding them during our interviews. In such cases, I tried manoeuvring other ways like visual prompts or gestures to engage and capture their attention instead. Paying more attention, I would try to observe their reactions to see if they needed more assistance thereafter. Very often, the difference in group dynamics was also something I had to work around and manage. As the participants were divided into smaller groups, I had to work with three different groups of participants, and each group had a varying atmosphere in which I had to learn how to engage them effectively. For such cases, I had enlisted the help of Alyssa, the staff nurse whenever she is available. This has allowed me to better understand each of my participants. I would also speak to Alyssa before the session, to check on the condition and ensure that the participants are well before I begin. Not forgetting, after each session I would also provide a de-brief and follow up with an update on the participants' condition for the day. Tremendously, I am grateful to the staff nurse, Alyssa for taking time off her busy schedule to share with me the likes and dislikes of the participants, their interests, and personalities. In a particular case, Henry, a very reserved man and who rarely spoke during our sessions. After I learned about his pastime and his love for music by The Beatles and Elvis Presley, I tried engaging him in a conversation with some songs I knew. Such instances had also given me the opportunity to build trust, learn alongside each participant, and truly relish each moment that I shared with them. Drawing lessons from the sessions over the weeks, it is clear that providing a supportive and enabling environment is paramount to the participant's sense of wellness, as creative capabilities and feelings



of satisfaction were established as a result. In the section that follows, the multi-sensory features of the programme will be discussed.

### **5.3.3 Sensatory Experience**

To uplift feelings of wellbeing from sensory experience, the multi-sensorial art engagement programme centralizes on a multisensory approach to amplify expressive qualities in participants. In this respect, the multisensory approach takes into consideration sensory qualities and attempt to offer stimulation of the visual, tactile, auditory, kinaesthetic, and olfactory. The design of the programme was with the intention of engaging participants all embracingly with the weekly participatory art and music-making activities; without stressing their linguistic abilities. Inseparably, this aligns with the assortment of materials that were utilized to enhance sensory pleasure and multisensory capacities. With the materials in factor, participants were encouraged and given sufficient time to explore, touch, identify, smell, and go through the art supplies and items of the week (e.g. there were food grains including star anise, scented flowers, and coloured feathers). Thoroughly, the variety of materials was also chosen deliberately to pique their interest and curiosity. Once participants were introduced to the art materials and the respective items, they are then guided to create their personal instruments.

Propelling interactivity, the music-making activities were planned in a manner which provides an avenue for participants to socialize in close proximity. Disposing of a relaxed atmosphere, participants are led to create music beats during joint music-making. Performing shakes in-sync with their instruments, some participants were

visibly verbal as they counted along with the music beats, some exhibited bodily movements; swaying and leaning their bodies forward, and there were some who just tapped along. Repetitively, over a few rounds, participants were in control of the speed as they took turns with the counting and shakes. A positive and cheerful mood, light-hearted conversation, bodily movements, and imaginativeness were observable, inciting a range of expressive and communicative bodily behaviours. Manifestly, these interactions are presented in the forms of warm smiles, nodding, looking over at each other and acknowledging their presence, spontaneous laughter, tapping of hands and feet, eye contact, relaxed body posture and facial expression, immersion, close bodily contact, and mimicking of each other's' bodily actions and gestures. Referring back to one of the participants' remarks on her music-making encounter, she mentions:

Shirley:                    Because it uses my ears... auditory sense... use it to listen... there is no need for me to think so much or worry so much!

In her experience, Shirley has shared that her auditory sense was intensified, where she also felt worry-free in the process of the activity. Substantially, bodily resonance and synergy amongst participants were ignited. To elaborate, as participants were proactively engaged during the weekly sessions, improvisation, individuality, in the moment encounters, and creation was spurred. This constant relationship had also reinforced feelings of connectedness, rapport, and dynamism among participants, myself, staff, and helpers who were involved. Conclusively, tapping on sensory experience here, it is relevant to add that sense of wellbeing is significantly interlaced with materiality and multi-sensory qualities, enabling environment, as well as the mannerisms of the art facilitator.

#### 5.4 Proposed Multi-sensorial Art Engagement Practice Framework for Older Persons with Dementia (OPWD)

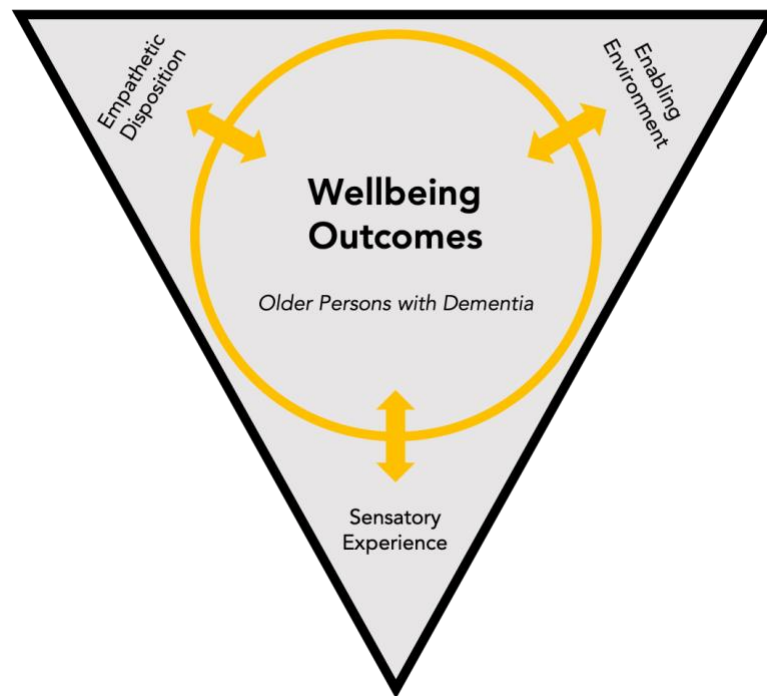


Figure 16. Multi-sensorial Art Engagement Practice Framework for Older Persons with Dementia (OPWD)

Drawing the inference from previous sections, the key features, and themes identified for the proposed multi-sensorial art engagement practice framework for older persons with dementia (OPWD) would entail empathetic disposition, enabling environment, and sensory experience. As illustrated in Figure 16, the proposed practice framework identifies and presents the intercorrelations among the three aspects as the contributing factors of wellbeing outcomes for OPWD through multi-sensorial art engagement. The three interacting components communicate the essence of what is fundamental and what is to be considered by practitioners in a similar programme for participants. In this sense, this practice framework also exemplifies the inseparable nature of each component. For instance, how the entity of

wellbeing outcomes interjects with participant's experience of the programme. On the entity of wellbeing, it is with the intention of the programme to allow participants to achieve holistic health and wellness. For this instance, wellbeing also reinforces flourishing in later life and supporting OPWD to the fullest of their abilities through engagement in meaningful activities (Refer to Definition of Wellbeing on Pg. 12). Reflecting upon my empirical practice, participant's experience and their wellbeing outcomes derived are predominantly shaped by empathetic disposition, enabling environment, and sensory experience. All of which are of equal importance.

***Empathetic disposition.*** In the scope of empathetic disposition, embraces the manner in which the facilitator carries or conducts himself or herself effectively in the form of care and respect towards the participants. It also considers the approach the facilitator takes on when interacting with participants, managing relationship dynamics, or when motivating or encouraging them along the way. Referring to the facilitator's empathetic disposition here, the aspects of care and consideration for participant takes precedence. It encompasses how care and concern are shown and concern in the form of words, affection, or touches. Also, it draws on the ability to manage or to adapt to the various situations on hand.

***Enabling environment.*** Retrospectively, for enabling the environment, there are both the physical and social facets. In terms of physicality, it considers the physical environment or venue in which the activity is held. It looks at the conditions of the venue, and whether or not the exact place chosen is suitable for the activities. As such, this is also interaffected by varying factors inclusive of lighting, temperature (possibility

the ability to adjust the air-condition or fan), spaciousness, distractors, any other safety hazards, or space limitations. This may require prior site recce or volunteering sessions at the place of interest, to allow a better grasp of the situation and environment itself. Under enabling environment, it also calls attention to the factor of empowering participants and providing them with adequate emotional and physical support. Amongst others, setting a comfortable environment by having some fun and light-hearted conversation starters before the activities to establish rapport. In addition, constant support and encouragement from myself, staff members, and caregivers. Notably, empowering participants to be independent by allowing them to work on their art pieces introspectively, and bearing in mind to not assist excessively. It is important to note that there must be an establishment of a good relationship with not just the participants, but also the staff members at the place of interest.

***Sensatory experience.*** Consequently, for sensory experience, concerns the quality of activities, materiality, and multi-sensory stimulation. To gauge the suitability and quality of the activities, there is a need for prior engagement and continual adjustments. This is by the means of a programme dry-run for preceding insights and to assess its practicality, and an ongoing evaluation when running the programme to ensure that things are going smoothly. In the projection of a multi-sensory element, a great deal of attention is placed on the materials used for the programme. This also ranges from sourcing the materials to engaging the participants with the materials. Engaging the participants to stimulate their senses would then require knacks and approaches. This brings us to the dynamism and conduct of the facilitator, and also by planning and having a list of reminders or to-do lists. Within dynamism, there is also

stimulation by bodily expressiveness and its physical surroundings, emerging as personal and meaningfully distinctive.

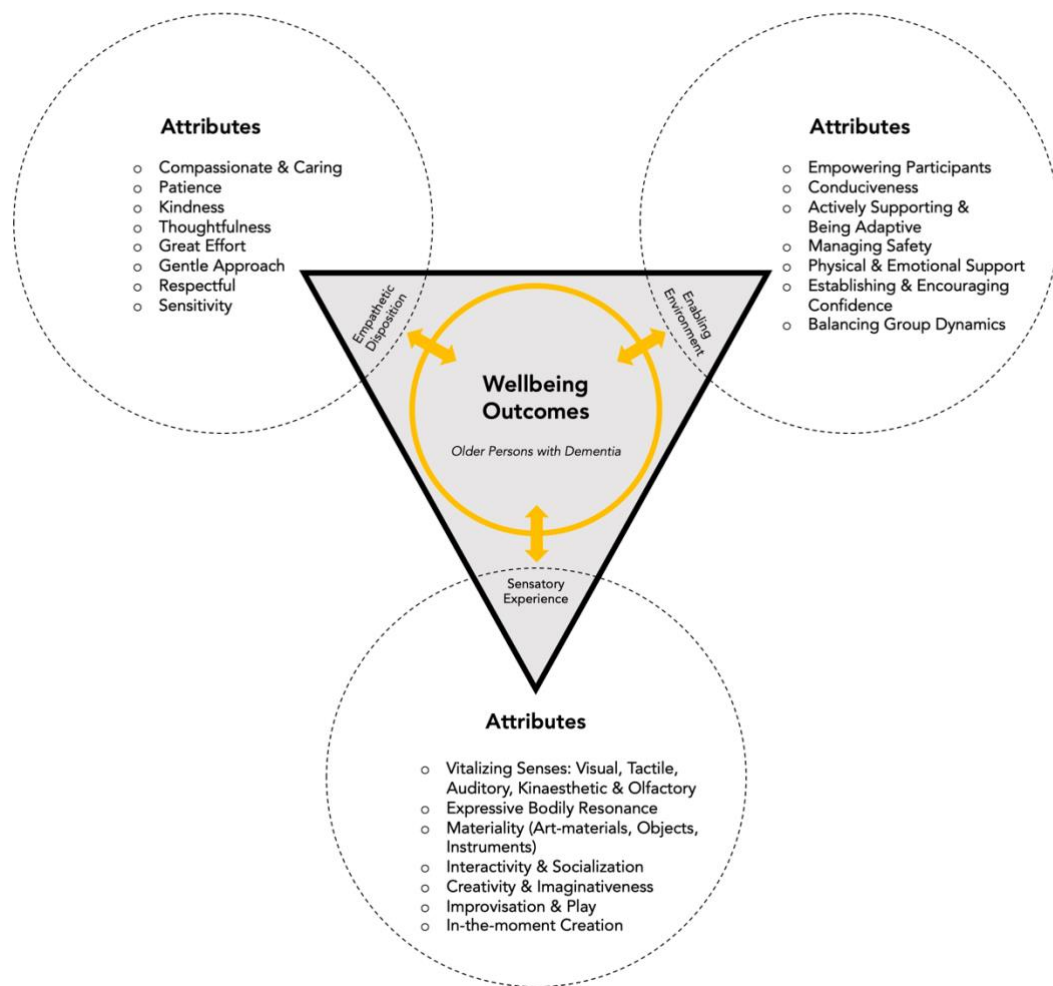


Figure 17. Visualization of Proposed Multi-sensorial Art Engagement Practice Framework with Key Attributes

Hence, the proposed practice framework (Refer to Figure 16 and 17) illustrates empathetic disposition, enabling environment, and sensory experience as instrumental as it plays a pivotal role in the wellbeing outcomes for participants. The visualization in Figure 17. presents the attributes contributing to each key component. In summary, the proposed multi-sensorial art engagement practice framework draws upon my empirical practice, reflections, and consideration of how wellbeing outcomes are fostered.

## **Chapter 6. Conclusion**

### **6.1 Exit Strategy and Limitations of Research**

Considering the moral and ethical imperatives involved, as well as the appropriate closure, my exit strategy will include expanding the activities and training of care associates or volunteers at both the centres. For instance, at the end of the 6-weeks weekly intervention, my visits will be continual on a semi-monthly and monthly basis. During these visits, I intend to further develop the activities concurrently with training and getting the care associates and volunteers involved to establish continuity and on-going communication beyond the programme. At present, this is an exploratory study primarily focused on validating the experiences of participants. For that reason, having a control group could be beneficial, however, within the context of my proposed study, it is beyond the scope due to time limitations and resources. Considering these factors, I further reviewed the literature and found several exploratory qualitative studies situated in dementia care settings which also explored the contributions of participatory arts projects (Skingley and Bungay, 2010, Ullán et al., 2013, Vogelpoel and Jarrold, 2014, Campbell et al., 2017, Windle et al., 2018). Despite having no control groups, the results from these studies have demonstrated a nuanced understanding of participant's experience and positive aspects relating to wellbeing, creativity, social inclusion, and self-esteem. To negotiate this dual role as a researcher and facilitator, such that consequential moments may be missed when I am preoccupied with facilitation, observing, and taking field notes, the video will be utilised to countervail the constraints. Besides the addition of supplementary cameras,

credibility will be enhanced through verifying data with interviewees on top of reviewing the video footage.

## **6.2 Recommendations for Future Research**

In terms of directions for future studies, it could consider a larger sample size involving more participants as the present research I have undertaken is an exploratory study with comparatively smaller sample size. Another implication would be financial, time, and resource constraints, as this has limited the number of participants I could engage. Taking this into account, to potentially extend this research programme to other sites beyond DDC, if given more resources. Due to the timeline and repercussions of COVID-19, I was also unable to conduct the study at multiple centres as intended, or lengthen the programme beyond 6-weeks given the circuit breaker measures which was implemented in April 2020. In addition to multi-sensory engagement involving participatory arts and music elements which was introduced in my present study, other art forms involving technology could be usefully explored as it would be very interesting. Another possible area would be collaborative efforts with other practicing, performing artists or SSOs.



### **6.3 Summary**

Dementia, among many age-related diseases, perpetuates as Singapore's population continues to age. One in Ten persons aged 60 years and above has dementia in Singapore and the number of cases is expected to outstrip 100,000 in a few years (Subramaniam et al., 2015). As more turn to formal day and home care services for the comfort of ageing-in-place, a more radical, comprehensive form of support and services are needed within the community care landscape to help PWD stay engaged and lead meaningful lives for as long as possible. This study proposes multi-sensorial art engagement as a possible activity option for OPWD in DDC. Approaching the phenomenon of intercorporeality from a novel perspective central to participatory arts and music activities, I examined how wellbeing is reinforced through these dynamic engagements. Drawing on the intrinsic capacity of OPWD, I argue for the essence of ingenuity as it converges with the value of being in the present moment, the self, and memory as relational in the process. Building on these discussions, I attempt to unify this work as articulated from the experiences of participants, analyzed data, attributes, and understandings contrived, and propose a practice framework for OPWD. Conclusively, it also recognizes the zealousness and avidity attitudes that the elderly possesses, as well as the eminence of autonomy in dementia care. Finally, through the lens of Animating Senses, this proposed work aims to provide a stimulating moment for participants to engage in both participatory art and music-making, as it offers an inventive way to relook at care practices and confer a medium for outreach and advocacy.

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# Appendix 1. NTU Institutional Review Board Approval



Reg. No. 200604393R

**IRB-2019-11-012**

4 December 2019

Asst Prof Michael Thaddeus Tan Koon Boon  
School of Art, Design and Media

Dear Asst Prof Michael Thaddeus Tan Koon Boon

## **NTU INSTITUTIONAL REVIEW BOARD (NTU-IRB) APPROVAL**

**Project Title: Exploring Multisensorial Art Engagement, Intercorporeality, and Well-being of Elderly People in Dementia Day Care Centres**

We are pleased to inform you that the NTU-IRB has approved the application as titled above under **Expedited** review.

The documents reviewed are:

- a) NTU IRB application form dated 5 November 2019
- b) Rachel Chun\_Template\_Non-HBRA Project Consent form v4.1 copy.docx
- c) Attachment 2\_Rachel Chun\_Programme Outline.docx
- d) Attachment 3\_Rachel Chun\_Research Methodology\_2.docx

The approval period is from **4 December 2019 to 3 December 2020**. The NTU-IRB reference number for this study is **IRB-2019-11-012**. Please use this reference number for all future correspondence.

The following protocol and compliances are to be observed upon NTU IRB approval

1. Any research involving subjects less than 21 years old would require IRB approved written Parental Consent and consent from the participant before any research protocols can be administered unless waiver of consent is given by IRB. Minimal risk refers to an anticipated level of harm and discomfort that is no greater than that ordinarily encountered in daily life, or during the performance of routine educational, physical, or psychological examination.
2. Only the approved Participants Information Sheet and Consent Form should be used. It must be signed by each subject prior to initiation of any protocol procedures. In addition, each subject should be given a copy of the signed consent form.
3. Consent forms are important documents therefore they should be stored in the strictest arrangement. Loss of consent form would result in disciplinary action.
4. No deviation from, or changes of, the protocol should be initiated without prior written NTU IRB approval of an appropriate amendment.

**Research Integrity and Ethics Office, NTU Institutional Review Board**

62 Nanyang Drive, Block N1.2-B1-02A, Singapore 637459, T: (65) 6592-2495, [www.ntu.edu.sg](http://www.ntu.edu.sg)

5. The Principal Investigator should report promptly to NTU IRB regarding:
  - a. Deviation from, or changes to the protocol.
  - b. Changes increasing the risk to the subjects and/or affecting significantly the conduct of the trial
  - c. All serious adverse events (SAEs) which are both serious and unexpected.
  - d. New information that may affect adversely the safety of the subjects of the conduct of the trial.
  - e. Completion of the study.
6. Continuing Review Request/ Notice of Study completion form should be submitted to NTU IRB for the following:
  - a. Annual review: Status of the study should be reported to the NTU IRB at least annually using the Continuing Review Request/ Notice of Study completion form.
  - b. Study completion or termination: Continuing Review Request/ Notice of Study completion form is to be submitted within 4 to 6 weeks of study completion or termination.
7. All Principal Investigators should comply with existing legislation that would have an impact on the domain of their research.
8. Advertisements/ Notices for recruitment of subjects must meet the following requirements:
  - a. Advertisements must clearly state that volunteers are being recruited to participate in an NTU research project with proper research title and NTU logo.
  - b. Name and contact details of Principal Investigator (usually a faculty member), and NTU-IRB contact details (Tel: 6592 2495; Email: [IRB@ntu.edu.sg](mailto:IRB@ntu.edu.sg)) should be provided.
  - c. The NTU-IRB project reference number should be stated.
  - d. Advertisements should include eligibility criteria.
  - e. Advertisements recruiting Minors must explicitly state that parental consent is required for participation (unless NTU-IRB has granted approval for a waiver of parental consent).

Advertisements/ Notices should NOT contain the following:

  - a. State or imply a certainty of favourable outcome or other benefits beyond what is outlined in the informed consent form and the application/protocol.
  - b. Make claims, either explicitly or implicitly, that a procedure or intervention is safe or effective or superior to other standard procedures or interventions.
  - c. Use catchy words like "free" or "exciting."
  - d. Advertisements may state that participants will be paid, but should not emphasize the payment or the amount to be paid (e.g. by such means of larger or bold type)



Dr Lim Jui  
Chair, NTU Institutional Review Board  
encl.

## **Appendix 2. Interview Schedule for Participants in English**

1. How do you feel about the activity?
2. What are your thoughts on being able to make these? Can you describe your experiences?
3. Can you share about any specific moments or activities you found most memorable or enjoyed most?
4. What are some opportunities that this activity or the 6-weeks programme has provided?
5. What are some of your opinions on participating in this activity together with the other clients?
6. How well do you know each other?
7. Does participating in this activity influence your relationship with the other clients?
8. What are your opinions on having a facilitator coming down to conduct such programmes?
9. While you're making or creating these, what are some challenges or difficulties you've faced?
10. What can the facilitator do to ease this or helped in anyway?

### **Appendix 3. Interview Schedule for Participants in Chinese**

1. 您对今天的活动有什么看法？
2. 您对能够做到这些有什么看法？能和我分享您的经历吗？
3. 您能分享一下，在参与这时，有什么您最喜欢的活动或最难忘的时刻吗？
4. 在这六个星期，这些活动有提供什么机会吗？
5. 您和大家一起参与这个活动有什么想法？
6. 您对彼此的了解如何？
7. 参与这个活动有影响您和大家的关系吗？
8. 您对我来这里进行这些活动有什么看法？
9. 当您在制作这些手工和音乐时，您有面对什么挑战或困难吗？
10. 在面对这些挑战或困难时，您觉得我可以做些什么来缓解这种情况或提供帮助？

#### **Appendix 4. Interview Schedule for Staffs in English**

1. What are your thoughts on the 6-weeks programme?
2. What are some of your opinions on having this activity as part of the regular DDC routine?
3. Through your observations, how do you feel about the clients participating in the activities? What are your thoughts of their engagement and interaction levels?
4. What are your impression of the clients looking at what they have created over the weeks?
5. Can you describe any new discovery about the clients over the 6-weeks?
6. How do you think the 6-weeks programme has played a role in meaning-making or empowering the clients?
7. How do you feel about having a facilitator coming down to conduct these programmes?
8. What may be some considerations?
9. What do you think can be improved on?