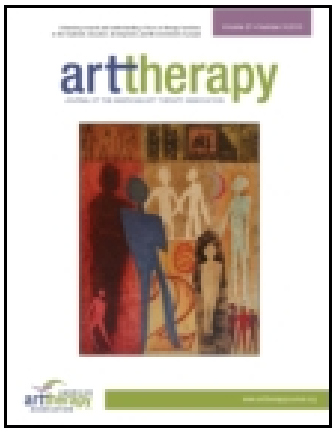

Art Therapy: Journal of the American Art Therapy Association

Publication details, including instructions for authors and subscription information:
http://www.tandfonline.com/loi/uart20

Promoting Well-Being and Gerotranscendence in an Art Therapy Program for Older Adults

Raquel Chapin Stephenson [a]

[a] Cambridge , MA

Published online: 07 Dec 2013.

To cite this article: Raquel Chapin Stephenson (2013) Promoting Well-Being and Gerotranscendence in an Art Therapy Program for Older Adults, Art Therapy: Journal of the American Art Therapy Association, 30:4, 151-158, DOI: 10.1080/07421656.2014.846206

To link to this article: http://dx.doi.org/10.1080/07421656.2014.846206

Art Therapy: Journal of the American Art Therapy Association, 30(4) pp. 151–158 © AATA, Inc. 2013

Promoting Well-Being and Gerotranscendence in an Art Therapy Program for Older Adults

Raquel Chapin Stephenson, Cambridge, MA

Abstract

This article describes a community art therapy program that was designed to promote health and well-being in old age. Observations of diverse participant interactions in the nondirective therapy studio over the course of 6 years revealed the benefits of art making and how it may influence well-being during the process of advancing age. Program goals that evolved over time were to (a) foster artistic identity, (b) activate a sense of purpose and motivation, (c) use art as a bridge to connect with others, and (d) support movement toward the attainment of gerotranscendence. The theory of gerotranscendence serves as a particularly appropriate theoretical framework to understand aging and art therapy with older adults.

Introduction

The conversation about health care in the United States is shifting. Although treating illness and disease is a primary concern, followed by their prevention, there is a new focus on well-being and helping people stay healthy. In a recent policy development, the Patient Protection and Affordable Care Act of 2010 (2012) called for the creation of a National Prevention, Health Promotion, and Public Health Council to "identify promising practices and innovative approaches to prevention and integrative health" (National Prevention Council, 2011, p. 8). The Council was designed to develop strategies to improve wellness, health promotion practices, the public health system, and integrative care, with a specific focus on evidence-based programs that succeed in increasing the health of U.S. citizens.

This health care initiative is part of an overall paradigm shift having to do with the human life span. As in other parts of the world, the older adult population of the United States is growing rapidly. Demographers predict that by 2030 the number of people aged 65 and older will represent 20 percent of the total U.S. population; this number is double the size of the population that was age 65 and over in 2000 (U.S. Department of Heath and Human Services, Administration on Aging, 2013). Many adults who are now in midlife or are reaching retirement age are reconsidering plans for their futures (Bateson, 2010; Lawrence-Lightfoot, 2010). With a rapidly aging population, it will be increasingly important to help make it possible for older adults to achieve a quality of life that maintains health and is meaningful to them. As programs are designed and funded to assist older adults in realizing this goal, opportunities will grow for therapeutic programs utilizing the creative arts. Therefore, it is important to understand how creative expression through art making is meaningful to older persons and what types of therapeutic environments best enhance this experience.

Art therapists have a unique opportunity to become part of the "wellness" conversation mentioned above. Research has shown that participation in creative arts can improve self-esteem, well-being, and physical health (Cohen et al., 2006). Creative involvement during old age contributes to well-being by developing and maintaining problem-solving skills, symbolic expression, perception, and motivation (Abraham, 2005; Alders & Levine-Madori, 2010; Reed, 2005; Stallings, 2010; Stewart, 2004). Traditionally art therapists have focused on treating their patients' diagnosed illnesses; however, therapists also can provide services that promote health and prevent or prolong the need for medical intervention. Many older adults are at risk for becoming isolated and depressed or unable to take care of their daily needs. Such needs may result in loss of independent living, illness, or injury. Through participation in art therapy programs, older adults may remain engaged with peers and their communities and become motivated to stay active in their lives. Art therapy can help increase their self-esteem and offer experiences that develop aspects of their identities that were unexplored as younger persons.

Although there are a variety of ways to engage older adults through art therapy, this article examines an open, nondirective art therapy studio approach for older adults in their own community. The New York University Creative Aging Therapeutic Services (CATS) program is designed to promote wellness. The benefits of the program are identified herein, based on observations of an art therapy group for older adults who were coping with moderate age-related challenges. Specifically, I describe how art making supports a positive aging process and I suggest ideal goals for art therapy groups with older adults. I assert that a shift in the underlying theoretical framework of adult development is helpful for understanding the psychological processes that occur with members of this population. Engagement in creative activities may assist them in looking forward to a longer and healthier life span.

Editor's Note: Raquel Chapin Stephenson, PhD, ATR-BC, LCAT, is an assistant professor in the Expressive Therapies program at Lesley University, Cambridge, MA, and an adjunct instructor at New York University. The author acknowledges the generous financial support for the New York University Creative Aging Therapeutic Services program from the Werner and Elaine Dannheisser Fund. Correspondence concerning this article may be addressed to the author at rstephe3@lesley.edu

Review of the Literature

Art therapists have found that encouraging and supporting art making can be effective in working with older adults. Some studies have focused on individuals with dementia who are coping with memory loss and restricted ability to communicate (Abraham, 2005; Alders & Levine-Madori, 2010; Hattori, Hattori, Hokao, Mizushima, & Mase, 2011; Mimica & Dubravka, 2011; Ravid-Horesh, 2004; Rusted, Sheppard, & Waller, 2006; Safar & Press, 2011; Shore, 1997; Stallings, 2010; Stewart, 2004) and with life-long mental illness (Orr, 1997). There is at least one account in the literature on community-based art therapy programs for older adults living independently (Sezaki & Bloomgarden, 2000). It appears that art therapy is most effective with older adults when approached with an understanding of "what is healthy and adaptive during this remarkable developmental stage" (Kerr, 1999, p. 37).

Some researchers have examined the nature of "successful aging" by considering how it is that some older adults maintain a vital and healthy lifestyle in their advancing age while others in their cohort become frail and isolated. Rowe and Kahn (1998) found that along with a healthy lifestyle, social and creative involvement in old age is an important contributor to well-being. Cohen et al. (2006) conducted a study with older adults who participated in creative arts programs to better understand their emotional and physical health benefits. The researchers found that participants in creative arts programs improved in both physical and emotional health as compared to control group members who did not participate in creative arts programs. These findings support the claims in the art therapy literature and suggest that participation in such programs contributes to overall health.

Erikson's (1959) theory of psychosocial human development continues to be one of the primary frameworks for understanding adult development. Erikson (1959) believed that throughout the life span the individual's unconscious goal is to achieve ego integrity. At each stage a person is faced with the task of overcoming a developmental conflict. With the healthy resolution of the conflict, the person moves along to the next stage. Unlike his contemporaries who focused more on development in childhood and youth, Erikson (1959) included stages of adulthood in his theory. Notably, the sixth, seventh, and eighth stages conceived of development as continuing beyond childhood and adolescence. In the final stage, ego integrity versus despair, one faces mortality, the need to integrate the experiences of earlier stages, and the realization that one's life has had meaning despite failures or disappointments along the way. If ego integrity is achieved, Erikson (1959) contended, a person will feel a sense of connection with younger generations and will feel the need to share experience and wisdom with them.

Years after creating his theory, Erikson (1982) reflected on the stages from the vantage point of his own old age, recognizing that old age was not as simple as he had thought initially. He came to stress the importance of wisdom in the last stage and the unique challenges of old age. He and his colleagues also explained how the arts contribute in old age, giving particular emphasis to the multisensory aspects of art making and suggesting that working in a multigenerational studio workshop was a way of staying involved, connected, and exhilarated (Erikson, Erikson & Kivnick, 1986).

Building on Erikson's (1959) eighth and final stage of development, Tornstam (2005) proposed a theory of *gerotranscendence* that offers a deeper understanding of the unique developmental achievements in late adulthood. After young adulthood, Tornstam posited, a person gradually shifts "from a materialistic and rational perspective to a more cosmic and transcendent one, normally followed by an increase in life satisfaction" (p. 41). Some of the changes Tornstam outlined involve a number of shifts in relationships and morality. For example, older adults develop new connections between the past and present, both to their childhoods and to members of younger generations. In addition, there is less of a need to be with others; older adults choose more carefully the people they want in their lives. An awareness develops of the difference between "self and role" (Tornstam, 2005, p. 66) with an urge to abandon role-playing. An increased sense of right and wrong develops, which Tornstam named "everyday wisdom" (p. 68). Lastly, individuals move from egoism to altruism and begin to see that they are part of the larger universe. Body transcendence may occur, which has to do with acceptance of changes in one's body brought on by aging. Tornstam acknowledged that the process of transcendence can be accelerated or interrupted by life events such as illness, crises, or feeling in conflict with a society's ideals, such as productivity, health, and independence.

In earlier research (Stephenson, 2010) I found that Tornstam's (2005) theory of gerotranscendence offered a contemporary perspective on aging that was useful in understanding the experiences of women artists who took up art making in their later years. Their descriptions of how art enhanced their lives reflected the transcendent experience. This theory also offers insight into the art therapy studio group member experiences discussed in the present article.

Creative Aging Therapeutic Services

Program Overview

For over 6 years, I directed New York University's Creative Aging Therapeutic Services (CATS), a community art therapy program founded on the belief that art making can be a meaningful and important component to aging well. CATS provided art therapy services free of charge to two distinct groups of older adults: day program adults with late stage Alzheimer's disease and other forms of dementia, and residents of a large cooperative housing complex. The latter group, which is the focus of this paper, resided independently. The CATS program provided a much-needed opportunity for these older adults to maintain a sense of community and peer support as they coped with a wide range of age-related losses, including physical and cognitive decline and loss of a spouse and/or former home. New York University graduate art therapy interns and I facilitated

strengths-based programming through creative activity to help the older adults improve their coping and well-being. Over the years, approximately 70 people participated in the program, averaging 10 to 15 participants per group.

The art therapy group was designed from the beginning to provide space and materials to engage in art making in an open, nondirective studio setting. Group sessions drew a strong and loyal participation from the residents of the cooperative housing complex in which the CATS program was based. Participants introduced their friends and neighbors to the program, making it a vehicle for strengthening community. The group attracted lifelong professional artists along with individuals who had never made art before. Although there were several men in the group, most participants were women. Some participants attended from the beginning and others joined the group later on. For the most part, participants attended consistently on a regular basis. Despite a wide range in age (about 58 to 99 years), abilities, and familiarity with the group, a remarkable sense of community developed among these participants over the years. Many people expressed that the CATS program was the cornerstone of their ability to maintain social contacts, stimulate their minds, and keep a healthy life balance. They also believed that the opportunity to creatively explore and express themselves in a social and supportive environment was not only meaningful but essential.

Additionally, CATS held an annual art exhibition of participant artwork. The exhibitions, which usually included about 40 artworks from 20 participants, were held in a gallery at the university. One year the participants chose the title "What Were We Thinking?" to evoke the combined humor and self-reflection that they experienced in the group. Each participant attended the exhibition opening with friends and family, some of whom traveled from out of town to attend. The participants were always exuberant and proud of their accomplishments.

Group Setting and Structure

The art therapy group met weekly for 2 hours, and provided not only a space in which to work but also a wide selection of art materials. Tables were set up in a long "L" format under the strongest light source with chairs on either side. Additional tables were placed apart from the main tables for individuals who wished to work alone or had particularly large or messy work. Art supplies were located near the center of the room; these included a variety of drawing materials (e.g., pencils, charcoal, and pastels), paints (watercolor, gouache, and acrylics), and an assortment of brushes, palettes, paper, and canvas boards. There were additional, more specialized materials available for artists who chose to work in clay, printmaking, Chinese brush painting, or who needed the use of specialized measuring and cutting devices or certain adhesives. There were also books and magazines available as reference and collage materials, along with easels and drawing boards.

Group members could choose to bring in work from home or begin work in the studio. Each week the art therapy interns offered innovative ideas that introduced new materials or concepts to try. Thematic suggestions challenged participants with a question or opportunity to explore an aspect of their lives, leaving the choice of art materials and form of expression to the artist. For example, in one session participants were asked to reflect on their support network. Earl (pseudonym), a 96-year-old professional artist, painted a watercolor depicting his three children propping him up while he painted a mural on the ceiling (Figure 1). During the group discussion, Earl explained that he was struggling with the fact that he was becoming less independent and needed help from his children. Because many of the other participants were experiencing similar shifts in dependence on children and family members, Earl received a great deal of support from the group. This approach became increasingly successful as the group dynamic matured and individuals became more motivated to share with their peers and gain their support. We always encouraged the participants to explore their own thoughts, feelings, and life experiences in their artwork.

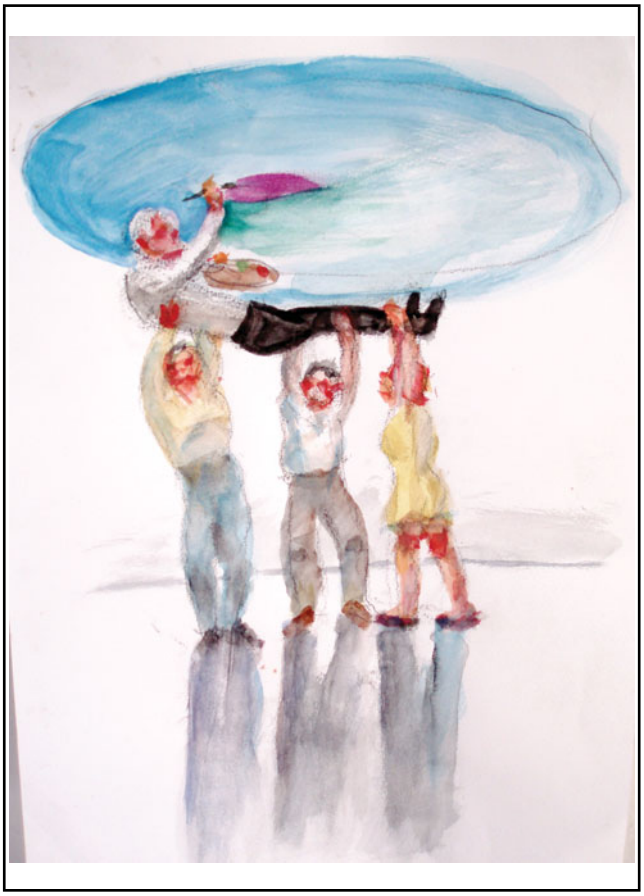

Figure 1 Support System (Watercolor, 12″ x 9″)

Group Objectives

Although we taught art techniques to increase the participants' level of mastery, the group art therapy objectives were mostly focused on the older adults' sense of purpose, social connectivity, and self-esteem. We knew that these

particular factors are supremely important in the health and well-being of older adults (Cohen et al., 2006). It is difficult to measure improvement in these domains; however, at times they could be observed in the subtle ways in which participants expanded their range of expression, took greater risks in their artwork, or developed social connections with others in the group. Occasionally, the observed changes were more profound. For example, Mary (pseudonym) was new to art making, but she used her creative ideas and techniques from the CATS program to cope with her prolonged hospitalization due to debilitating chemotherapy treatments and brain surgery. Mary began to explore her illness in her art while still attending our group, and continued during her hospitalization. She took advantage of the availability of the art therapy program, she said, because it helped her significantly in her recovery.

Because CATS was a community program, participants had to leave their apartments to get to the site. Despite the difficulty this posed for many due to arthritis, poor vision, or other limitations, many participants stated that coming to the art group not only helped motivate them to get out of their apartments, but also that they felt they were connecting with themselves in new ways and were building an important community and friendships with others in the group. Jane (pseudonym) was blind in one eye when she began attending the group. One of her first pictures was a striking self-portrait in charcoal in which she did not initially depict the blind eye. The picture was a powerful visual expression of her disability while at the same time being a bold statement about her courageous effort to cope with it. However, as her eyesight returned, she completed drawing the eye, using graphite pencil to express subtle yet noticeable differences from the charcoal (Figure 2).

I witnessed marked changes in the artwork of many of the participants. They increased their repertoire with new approaches and techniques to art making along with an expanded ability to tap into thoughts or feelings within themselves in new and enlightening ways through art. At 99 years of age, Tony (pseudonym) continued to push the boundaries of his art expression. Typically painting or drawing realistic portraits, he confidently experimented with abstraction (Figure 3). Tony had a wide repertoire of art skills, but rather than repeating what had been successful in past work, he continuously experimented with new materials and sought new forms of visual expression.

Often the participants remarked on how "liberated" they felt in their art making as a result of the freedom and encouragement they received in the group. Muriel (pseudonym) suffered from debilitating arthritis that nearly prevented her from coming every week. An accountant who had never made art before, she was eager to learn about art materials and the techniques of using them while at the same time she enjoyed a new sense of creative freedom (Figure 4). Muriel explained that art had given her "so much insight" into her feelings. She said, "I visualize colors and shapes wherever I am. I feel I found a voice through my paintings and I love it!" The support of the therapist and interns was essential, she said, because she had no prior experience working in an art community.

Figure 2 Self Portrait (Charcoal and graphite, 24" x 18")

Importance of Community

Although making art was an important component in the CATS groups, I believe it was the shared discussion about the artwork created, taking place during the last half hour of the session, that really solidified the participants' trust in one another. In this forum the artists were able to share their thoughts, ideas, and feelings about their work and the

Figure 3 Abstract (Gouache, 11" x 15")

Figure 4 Amoeba (Watercolor, 15″ x 11″)

work of others with the group. They were careful, respectful, but wholly honest in what they said. As a result, they not only apparently felt like they had a voice that was heard and respected, but also responded to encouragement from others to "dig deep" within themselves. In these discussions the human condition was palpable, honest, and supported. Despite a wide range of art ability and training, it was remarkable that all members of the group were able to support one another, offering advice about art techniques as well as thoughtful feedback about the work created.

The artwork created in the CATS group was often personal, conveying powerful images or stories about the artists' lives. Participants reflected on positive elements in their work while also empathizing with their own struggles with art materials and technique that they understood to reflect broader, more encompassing life struggles. Familiar topics were about inspiration, joy, and the natural environment, along with pain, illness, and death. The artists were always supportive of one another, offering praise generously. Criticism was reserved only for the artwork and was phrased constructively. The group was powerful in this way; group norms modeled the kind of comments that people felt comfortable with. For instance, I witnessed one new participant in her first session express criticism of someone's artwork, only to return the following week with more subdued criticism and enhanced support for her peer's expressed intent and experience.

At the inception of the program, the student interns and I were cautious in our methods. Rather than impose our ideas, we were open to the needs and interests of our participants. At first we struggled to find a clear definition for what we were doing in terms of art therapy practice and the ways in which the program could claim to have therapeutic benefits. The program straddled art education and art therapy, and we found that the boundary between the two was continually permeable. Although still fluid in practice, we have become clearer with the program's purpose. We have greater understanding of the many ways in which our work is therapeutic and meets the needs of older adults.

Recommended Goals for Art Therapy Programs With Older Adults

Several themes emerged from my observational notes over time that suggest certain goals that may be most important for programs similar to CATS in design. These themes also emerged in a study I conducted on the creative experience of older women artists (Stephenson, 2010). From these data I recommend the following program goals: (a) foster artistic identity, (b) activate a sense of purpose and motivation through creative work, (c) use art as a bridge to connect with others, and (d) support movement toward the attainment of gerotranscendence.

Foster Artistic Identity

One of the most successful components of the CATS program was that it fostered in its participants a sense of identity as an artist. As artists, they had license or permission for self-expression in a variety of ways. By embracing this newfound sense of identity, they discovered new ways of connecting to themselves and relating to others that previously had been unexplored. It became clear that this identity was a powerful tool in managing the aging process.

For some people, being an artist brings a certain status in their community; for others it provides opportunity to engage in life review and leave a legacy, or to increase social connections. The artist identity can be an important means to gain access to a broader life experience, which is especially important in later years to counter social isolation. Moreover, what seemed most important to these men and women was not that they were seen as artists by others, but rather that, over time, they considered themselves to be artists. Being an artist empowered them. Their art practice not only helped them accept getting older but also contributed to a sense of purpose, self-acceptance, and self-confidence.

Activate a Sense of Purpose and Motivation

Current research is providing new understanding of how creative thinking, motivation, and identity change with aging, and the older adult's greater need for self-expression in particular. According to Reed (2005), older adults have

an increased capacity for creativity through the mastery and integration of life experience. Sasser-Coen (1993) suggested that a person's thinking becomes more flexible and adaptable with age. As evidenced by the participants in the CATS program, creativity is a function of confidence, ability, inspiration, motivation, and insight.

The experiences of these older adults support the idea that, as people age, they become more experimental in their art making. A study by Lindauer, Orwoll, and Kelley (1997) found that older artists increased their use of spontaneity and abstraction, among other findings. The changes in the work of the artists in the CATS program also reflected their maturity and motivation, which was revealed through their creative process as well as in pictorial content. However, it was the way the artists thought about art, their art making, and their aging experience in the community studio context that evolved the most. Creative thinking fostered their motivation and fueled their sense of purpose.

Encourage Connection to Others

Participation in an art therapy group can afford older adults the opportunity to connect with others, thus enhancing their feelings of connection to community (Flood & Phillips, 2007). The CATS group members demonstrated a great joy in trying something new and doing so in the company of others. This suggests that making art in an environment that encourages older adults to embrace their artistic identity is particularly empowering because it provides expressive tools that help them remain connected to others—and even deepen those social connections—regardless of advancing age. Some participants were not looking for acknowledgement from their peers as much as they were looking for camaraderie. Nonetheless, the support, interest, and accolades they received from peers were seen as beneficial.

Whether experienced or inexperienced in art making, sharing one's work and the art making process with others helps to create a cooperative and encouraging environment. A group of older adults can experience the journey of art making together, which builds cohesion and camaraderie among members (Erikson et al., 1986). Additionally, art therapists should not overlook the benefits of more insightfully focused art therapy for this population. Group art therapy that attends to personal or emotional issues can draw on kinship with others who are equally experienced in life from which to gain insight and garner support as members explore their successes and failures.

Research suggests that it is important for older women to have empathic relationships with others in their lives (Surrey, 1993) and to be connected with family and community (Browne, 1998). From observing the participants in the CATS group, most of whom were women, I found this to be the case. Through encouragement of one another's artwork and creative process, they built friendships and a support network that lived on beyond the confines of the group. Participants met for coffee or lunch when the art therapy group was not in session. They attended the theater and visited art galleries together. And, most notably, they checked on one another when someone was ill and visited one another in the hospital.

Support Movement Toward Gerotranscendence

The participants in the CATS program were in general lively and energetic older adults, and in many ways they were looking forward and expanding their life experience. Although they acknowledged their advancing age and anticipated their own death, group members for the most part were engaged in social and community endeavors that broadened rather than simplified their lives. Many participants expressed how they had begun to notice the little things in life and were more selective of whom they spent time with—a phenomenon that Tornstam (2005) called *social transcendence*. Yet despite the desire to spend less time with others, they recognized that they had more time to make art, which they identified as a transcendent experience in their aging process. I also observed that many of the participants seemed less preoccupied with their physical appearance as they became older. Tornstam (2005) categorized this phenomenon as body transcendence, in which the older person is more accepting of age-related physical changes and carries on activities despite limitations.

My observations during the CATS program suggest that making art contributes to satisfaction, self-esteem, and wisdom. These strengths characterize gerotranscendent behavior (Bohman, van Wyk, & Ekman, 2011). Tornstam (2005) suggested that movement toward gerotranscendence happens naturally with advancing age; however, the older adults in the CATS program demonstrated that being an artist helps to foster this state as it gives people skills, strengths, and benefits in multiple domains that help them contend with the challenges of aging.

Conclusion

Creative Aging Therapeutic Services helped to improve the lives of the older adults who participated in the program in ways that—although sometimes small—were substantial. Our work together led to ongoing creative pursuits for some participants or to building and regaining wellness. This observation suggests that to meet the needs of older adults in today's society, it is important to understand their unique strengths and skills, and encourage engagement in arts programs that develop these assets. Through collaboration with researchers, educators, and policy makers, art therapists offer unique resources for crafting more effective programs. The CATS model serves this purpose by promoting artist identity, motivation, connection to others, and movement toward gerotranscendence. Art programs for older adults should involve informed leadership on the part of the art therapist within a supportive and enriching environment that is respectful of participants' wisdom and life experience while also acknowledging their physical needs by adapting the space and tools accordingly. As the experiences of the participants in the CATS program suggest, there should be room for experimentation with materials and artistic style. Such an approach allows for social interaction and builds a

platform on which participants may connect, share, and inspire one another.

Art therapy groups aimed at promoting wellness in older adults can help individuals realign their sense of self to embrace the wisdom that comes with the changes in thinking, feeling, and behaving that occur in later life (Wang, Lin, & Hsieh, 2011). Art for many people is a transcendent experience that allows for the past, present, and future to coexist at once. In art therapy powerful and meaningful emotional content can be expressed, examined, and recollected with changed understanding or purpose. As a perspective on adult development, gerotranscendence holds that a person can create the capacity to continue to be motivated towards growth and self-actualization. Older adults may also be able to transcend the challenges of illness and social realities, or the fear of death. An understanding of the dynamics of human development in old age from Tornstam's (2005) concept of gerotranscendence offers art therapists a sound, flexible developmental perspective from which to understand their older adult clients.

Research studies in this area are vital and should focus on developing evidence-based practices and models. Determining the efficacy of wellness models, such as the CATS program, is more challenging than determining the efficacy of prevention models, due to a lack of tools for measuring wellness. More studies are needed to identify health-promoting approaches to aging and well-being.

Art therapy holds a promise of promoting quality of life for older adults that maintains health and is meaningful. By expanding our understanding of aging and developing effective programs that utilize art therapy and other innovative methods to meet the needs of older adults, the societal mandate to improve wellness and health promotion practices can be further realized.

References

Abraham, R. (2005). *When words have lost their meaning: Alzheimer's patients communicate through art*. Westport, CT: Praeger.

Alders, A., & Levine-Madori, L. (2010). The effect of art therapy on cognitive performance of Hispanic/Latino older adults. *Art Therapy: Journal of the American Art Therapy Association*, *27*(3), 127–135. doi:10.1080/07421656.2010.10129661

Bateson, M. C. (2010). *Composing a further life: The age of active wisdom*. New York, NY: Vintage Books.

Bohman, D. M., van Wyk, N. C., & Ekman, S.–L. (2011). South Africans' experience of being old and of care and caring in a transitional period. *International Journal of Older People Nursing*, *6*(3), 187–195. doi:10.1111/j.1748-3743.2010.00225.x

Browne, C. V. (1998). *Women, feminism, and aging*. New York, NY: Springer.

Cohen, G. D., Perlstein, S., Chapline, J., Kelly, J., Firth, K. M., & Simmens, S. (2006). The impact of professionally conducted cultural programs on the physical health, mental health, and social functioning of older adults. *The Gerontologist*, *46*(6), 726–734. doi:10.1093/geront/46.6.726

Erikson, E. H. (1959). *Identity and the life cycle*. New York, NY: Norton.

Erikson, E. H. (1982). *The life cycle completed: A review*. New York, NY: W. W. Norton.

Erikson, E. H., Erikson, J. M., & Kivnick, H. Q. (1986). *Vital involvement in old age: The experience of old age in our time*. New York, NY: W. W. Norton.

Flood, M., & Phillips, K. D. (2007). Creativity in older adults: A plethora of possibilities. *Issues in Mental Health Nursing*, *28*(4), 389–411. doi:10.1080/01612840701252956

Hattori, H., Hattori, C., Hokao, C., Mizushima, K., & Mase, T. (2011). Controlled study on the cognitive and psychological effect of coloring and drawing in mild Alzheimer's disease patients. *Geriatrics and Gerontology International*, *11*(4), 431–437. doi:10.1111/j.1447-0594.2011.00698.x

Kerr, C. (1999). The psychosocial significance of creativity in the elderly. *Art Therapy: Journal of the American Art Therapy Association*, *16*(1), 37–41.

Lawrence-Lightfoot, S. (2010). *The third chapter: Passion, risk, and adventure in the 25 years after 50*. New York, NY: Sarah Crichton Books.

Lindauer, M. S., Orwoll, L., & Kelley, M. C. (1997). Aging artists on the creativity of their old age. *Creativity Research Journal*, *10*(2–3), 133–152. doi:10.1080/10400419.1997.9651214

Mimica, N., & Dubravka, K. (2011). Art therapy may be beneficial for reducing stress-related behaviours in people with dementia: Case report. *Psychiatria Danubina*, *23*(1), 125–128.

National Prevention Council. (2011). *National prevention strategy*. Washington, DC: U.S. Department of Health and Human Services, Office of the Surgeon General.

Orr, P. (1997). Treating the whole person: A combination of medical and psychiatric treatment for older adults. *Art Therapy: Journal of the American Art Therapy Association*, *14*(3), 200–205.

Patient Protection and Affordable Care Act of 2010, 42 U.S.C. § 18001 (2012).

Ravid-Horesh, R. H. (2004). A temporary guest: The use of art therapy in life review with an elderly woman. *The Arts in Psychotherapy*, *31*(5), 303–319. doi:10.1016/j.aip.2004.07.001

Reed, I. C. (2005). Creativity: Self-perceptions over time. *International Journal of Aging and Human Development*, *60*(1), 1–18. doi:10.2190/WM5Y-FHEM-CXQT-UEXW

Rowe, J. W., & Kahn, R. L. (1998). *Successful aging*. New York, NY: Dell.

Rusted, J., Sheppard, L., & Waller, D. (2006). A multi-centre randomized control group trial on the use of art therapy for older people with dementia. *Group Analysis*, *39*(4), 517–536. doi:10.1177/0533316406071447

Safar, L. T., & Press, D. Z. (2011). Art and the brain: Effects of dementia on art production in art therapy. *Art Therapy: Journal of the American Art Therapy Association*, *28*(3), 96–103. doi:10.1080/07421656.2011.599734

Sasser-Coen, J. R. (1993). Qualitative changes in creativity in the second half of life: A life-span developmental perspective. *Journal of Creative Behavior*, *27*(1), 18–27. doi:10.1002/j.2162–6057.1993.tb01383.x

Sezaki, S., & Bloomgarden, J. (2000). Home-based art therapy for older adults. *Art Therapy*, *17*(4), 283–290. doi:10.1080/07421656.2000.10129756

Shore, A. (1997). Promoting wisdom: The role of art therapy in geriatric settings. *Art Therapy: Journal of the American Art Therapy Association*, *14*(3), 172–177.

Stallings, J. W. (2010). Collage as a therapeutic modality for reminiscence in patients with dementia. *Art Therapy: Journal of the American Art Therapy Association*, *27*(3), 136–140. doi:10.1080/07421656.2010.10129667

Stephenson, R. C. (2010). *The creative experience of women: Art making and old age* (Doctoral dissertation). Available from ProQuest Dissertations and Theses database. (UMI No. 3404691)

Stewart, E. G. (2004). Art therapy and neuroscience blend: Working with patients who have dementia. *Art Therapy: Journal of the American Art Therapy Association*, *21*(3), 148–155. doi:10.1080/07421656.2004.10129499

Surrey, J. L. (1993). Self-in-relation: A theory of women's development. *Advanced Development*, *5*, 1–11.

Tornstam, L. (2005). *Gerotranscendence: A developmental theory of positive aging*. New York, NY: Springer.

U.S. Department of Heath and Human Services, Administration on Aging. (2013). *Older population by age group, 1900–2050*. Retrieved from http://www.aoa.gov/Aging_Statistics/future_growth/future_growth.aspx#age

Wang, J.-J., Lin, Y.-H., & Hsieh, L.-Y. (2011). Effects of gerotranscendence support group on gerotranscendence perspective, depression, and life satisfaction of institutionalized elders. *Aging and Mental Health*, *15*(5), 580–586. doi:10.1080/13607863.2010.543663