

Museum-based creative arts programming is associated with less dementia patient apathy and better caregiver well-being



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Background:

- Alzheimer's disease and related disorders (ADRD) adversely impact personal and professional caregivers
 - General medical health
 - Quality of life
 - Mood
- Cognitive leisure activities are associated with delayed dementia onset
- Effect on dementia outcomes is uncertain
- Art programs have been explored in many neurologic and psychiatric conditions
- Demand for AD art programs in major museums has been rising since 2006
- Existing programs involve a 90-minute session for AD patients and caregivers that including open gallery discussion and/or studio projects such as drawing, painting, collage, or sculpting
- Little formal research involving art and AD care

Hypothesis:

•Art-centered experiences may improve caregiver burden and well-being

Aims:

 To study the potential impact of art-centered museum based programs on caregiver burden and patient apathy.

Methods:

- Design: Pilot study of an observational cohort, drawn from a convenience sample of community elderly
- Subjects: Participants at an art-centered program designed for people with dementia and their caregivers.
- Recruitment performed on-site at several Museums: The Metropolitan Museum of Art, The Cloisters, The Studio Museum in Harlem, and The New-York Historical Society
- Assessments: Surveys administered by phone to caregivers to assess QOL, caregiver burden, self-efficacy, well-being, and patient apathy.

Results

Table 1. Participant Characteristics

		Caregivers (n=12)	Patients (n=8)
Age		66	74
Median (range)		(46-77)	(66-89)
Female, n (%)		10 (83)	3 (38)
Relationship	Spouse	7	
	Child	3	
	Professional	1	
	Friend	1	
Depression, n (%	5)	5 (42)	1 (13)
Race-Ethnicity	NHW	6	3
	Minority	6	4
Education	HS/Some College	1	3
	College/Grad	11	5
# Museum Visits	/Yr,	17	27
Median (Range)		(0-96)	(0-96)



Results:

Table 2. Principal Findings

Caregiver								Patient
Domain	QOL	Burden	Self- Efficacy	Positive Thinking	Well- Being	Mental Health	Physical Health	Apathy
Measure	DEMQoL- U-Proxy	Zarit Index	SE Scale	SES sub- domain	WHO-5	SF-8M	SF-8P	Apathy Index
Score (Good/Bad)	4-16	0-48	<mark>0</mark> -100	<mark>0</mark> -100	<mark>0-25</mark>	0 -100	<mark>0</mark> -100	0-36
Age		. <u>-</u> -	2.5 (0.46)	1.27 (0.45)				
Depression			<u>-</u> -				-7.9 (5.0)	-10.4 (7.4)
Programs attended in year		-0.21 (0.09)	0.29 (0.20)	0.49 (0.20)	0.36 (0.25)	0.15 (0.10)		-0.27 (0.12)

•Univariate regression models presented, β (SE). All models performed, those with p<0.20 presented in table. Green boxes: p≤ 0.05.

•Example interpretation: For each 5 museum programs attended/year, caregiver burden decreased by 1 point on a scale of 48 (2%).

"[This program] makes my day. It gives me new ways to engage that I can take home. It has been transformative for us. After the touch object session I went home and did the same with objects from her own art collection. After the [engaging the senses] activity in the courtyard, I went home and made a garden with a fountain in her own courtyard." --Caregiver

"Looking at art and listening to the active dialogue saves me from my alone-ness. It is a time for my husband and I to bond and communicate. I feel comfortable sharing with everyone." --Caregiver

"I like visiting the galleries and seeing the pictures. It makes me happier." --Patient

Discussion:

Key findings:

- Increased participation in museum based activities over the past year was associated with improved caregiver indices and dementia patient apathy in both quantitative and qualitative findings
- Study was feasible, generalizable, and potentially cost-effective
 - Takes advantage of existent programs likely available in many communities.
- Some psychological stress may be experienced while discussing illness

Limitations:

- Small sample size
- Cross-sectional study
- Participant bias
 - Most subjects had already been enrolled in available art programs.
 - New slots in available programs are not routinely available.
 - Relatively uniform demographics
 - Gender and education

Conclusions:

- Association between the frequency or quantity of arts programs attended and AD caregiver burden and apathy warrants further study.
- Bias may influence findings, but these programs could independently impact outcomes explored in the study

Future directions:

- Randomized Control Trial
- Longitudinal study
- Cost-efficacy of art programs

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