



ELISTAT PROJECT

*Enriching the Lives of Seniors through
the Art Therapy*

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TUTOR GUIDE





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Introduction

We have been experiencing a historical times with the challenge of the COVID-19 global pandemic. The outbreak of COVID-19 will have a long-term and profound impact on older adults' health and well-being. Social isolation and loneliness are major risk factors that have been linked with poor physical and mental health status. Experts indicate that Art Therapy can play a crucial role to prevent mentioned dysfunctions. Art Therapy involves the use of creative techniques such as drawing, painting, collage, coloring or sculpting to help people express themselves artistically. It helps older adults explore their emotions, improve self-esteem, relieve stress, improve symptoms of anxiety and depression and cope with a physical illness or disability.

The Erasmus+ project "ELISTAT: Enriching the lives of the Elderly through art therapy" has been developed under mentioned circumstances, the project is funded by the European Commission and Turkish National Agency and implemented by a consortium of partners from 5 countries – Turkey, Romania, Italy, Portugal and France.

In the light of the mentioned facts, the project aims to facilitate the application of Art Therapy techniques on older adults and their caregivers to ensure their mental well-being especially during the lockdown and social isolation times.

The project also aims to increase the art and creativity competencies of adult educators, to make adult educators competent in the practice of art therapy in order to ensure the emotional and mental health of the elderly and caregivers at home, nursing homes and hospices.

In this scope, the project will produce Intellectual Outputs including the curriculum and training modules, e-learning platform, video and podcasts series. Training Materials which is another output of the project will support adult trainers to implement the developed Training Programme. This document, The Tutor Guide is the first part of these supporting documents.

In this document, you will find following items

This document will support Adult Trainers to deliver high quality adult training by providing:

- specific teaching strategies for adult learners,
- step by step instructions for each activity,
- information about required equipments,
- follow-up and assesment strategies.

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Section 1:

Getting Started

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1. Tutoring Goals and Responsibilities

Goals are specific statements of intent that focus our attention and guide our efforts. The goal of the tutor guide is to help target groups overcome training challenges and lead them to autonomous or independent learning. Over the course of our tutoring sessions, it is expected to:

1. foster independence in learning

- Independent learning involves learning how to learn. It involves empowering target groups to overcome their own learning problems autonomously.

2. support tutees in personalizing their learning process

- All people learn differently, but the best practices in study and comprehension can be adapted for individual differences. Effective tutors develop a "Theory of Mind" insight into their tutees thought processes, and guide the target group to adopt strategies that match preferences.

3. acknowledge and honor our difficulties and limits as a tutor.

Support target groups about alternative teaching methods, supportive resources,

finding a new match, and remedial intervention for tutees who are just too far behind. No one expects you to do the impossible, only your best.

2. Effective attributes for a tutor

For tutoring sessions to be effective, it is essential to establish a good relationship between the tutor and the student. Usually, this relationship is created quickly. The success of this relationship reveals the personality of each person, but it also shows the educational qualities of the tutor. Some of these qualities are listed below:

• Asks good, open-ended questions:

Questioning may be effective for forming a connection, boosting confidence, discovering the knowledge of a target group, and sharing experiences;

"Can't you do this activity?"

"You're really good at art, how do you feel about art applications?"

• Effective tutors balance comprehensive knowledge of a specific subject with a desire to help others, empathy, respectful, proactive, creative, patient, honesty, enthusiasm, and a sense of humor.

• Good Listener:

A good tutor should have great communication skills to connect with their trainees and share complex information

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based on their trainees' needs. They also need to have a strong understanding of different subject matters to ensure trainees learn during their sessions.

- Motivator/encouraging

Connecting with a learner and reassuring them of their development requires positive reinforcement and encouragement. A little well-chosen praise may go a long way toward establishing trust between teacher and pupil.

- Evaluation

If a trainee is going to receive the help they need, an open line of communication between tutor and trainee is essential. Encourage them to be candid and transparent about their learning requirements so that the divide between confidence and abilities may be assessed. An effective evaluation of their demands and challenges will enable an instructor to start out with the appropriate strategy.

3. Preparation and planning

Practical Tutoring Tips

- Assessing Learning Needs for the Elderly

During all stages of the teaching-learning process (including assessment, planning, implementation and evaluation), the tutor should focus your attention not only on the current medical problem, but also on into functional problems and many underlying psychosocial problems commonly

encountered in old age. A detailed history is an essential part of the assessment. If the elderly may not be a reliable informant, a family member or close friend is required. Along with medical history, a thorough social history can identify potential problems with the family environment, support system, financial resources, and various stresses that may be contributing to the medical problem. An accurate dietary history is especially important if the person is to follow any form of diet. With age, there is a corresponding normal decline in sensory functions, including vision, hearing, and touch. Two-thirds of frail elderly people have vision and hearing impairments. In addition, there is a normal decline in dexterity and physical endurance. Eighty percent of people over the age of 65 have some form of chronic illness.

- Teaching strategies to consider for the elderly.

Consider using specific teaching techniques when teaching seniors about health. Some seniors have increasingly difficulty understanding complex sentences, are less adept at reasoning, and have problems with motor tasks. Present new information at a slower rate than you would for younger patients. Speak in a low voice and allow enough time for the patient to assimilate and integrate the conceptual material. One Spend more time assimilating and integrating conceptual

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material and emphasizing concrete rather than abstract material. It is important to minimize environmental distractions, both to compensate for any age-related hearing loss and to help patients stay alert and focused. Group learning can help some older patients increase their health-related problem-solving skills. When suggesting lifestyle changes, be aware that many older patients are cautious and may not make changes easily. The implication of patient teaching is that we need to spend more time on teaching and we need to deliver the teaching material in small increments so that the material can be integrated. For a teaching-learning plan to be effective, it must be individualized to meet the needs and lifestyles of the older adult, and for goals to be mutually acceptable the person must be actively involved in the Goal Setting. The ability to adhere to expected behavioral changes is highly dependent on changes that the patient considers important, changes that can be adapted to the patient's lifestyle, and the availability of appropriate resources. fit. When planning patient education for an older adult, goals should be individualized not only based on the person's needs but also on what he or she chooses to do.

4. Introductory activities – Ice-breakers

Ice breaker games are simple activities that warm up groups by helping everyone get to know each other, relieve social anxieties and

promote team bonding. The game aspect of these ice breakers allows individuals to relax and have fun while communicating and collaborating. Human Sculpture – One way to start is to talk about negative and positive space. Have one participant create a large shape at a high level that creates lots of negative space. Show how you can build on that space at another level using the negative space so that you are connecting to that student in space without actually touching them. Allow participants to begin to build on the shape until it feels "done". Remind them to create a shape where they are holding their own weight and choosing a body position that they can maintain for a number of minutes as others build onto the sculpture. Anyone not involved in this human sculpture can suggest a name for the sculpture. Repeat this process several times in a row to allow those who are more hesitant time to warm to the activity and start to feel safe with it.

- Animal Chorus – Choose a popular song that all the students might know and have them sing it using animal noises. Imagine "Row, Row, Row Your Boat" sung by chickens. You could even make a round with each new group voicing a different animal!
- Stuck on You – Tell the partners they must move connected to one another in some way and cannot disconnect from their partner(s). Tell them the specific way they must connect (link elbows, palms touching, shoulders

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touching, index fingers touching, backs touching, etc.). You may just let them experiment with moving together or you may add to the challenge but having them change levels, add a turn, do a particular locomotor movement like hop, jump, slide, etc. or axial movement (non-locomotor) like melt, rock, stretch, shake, twist, etc.

- Collaborative Drawing – This can be done in partners or in small groups. Have the participants work for a limited time (adjust it depending on the size of the groups but 2-5 minutes should be plenty). Each participant chooses a color of marker, crayon or colored pencil. The first participant makes a mark of some kind on the paper – a dot, a line, a shape (organic or geometric). The next participant uses her/his color and adds another mark to the piece. Have the participant name the piece and be prepared to explain the name. You may wish to extend this activity to make further use of the art pieces created.

5 Establishing expectations or ground-rules

- Set goals and establish specific, measurable objectives. You will be able to use this to establish a diagnostic for the advancement of your trainees and program. Check out what is already in place by speaking with other participants in your program.
- Before beginning the one-on-one or group activity, state the objectives. Explain to the

participants what to anticipate from the training session. Always keep in mind that when dealing with your trainees, you want to have direction. Declare the goal and what it means for them to understand the concepts before you start any activity.

- Have a session-by-session plan with a time-based structure. Whether working in a group or one-on-one, it is crucial to create a strategy for your activities throughout the session. Although a documented timetable is not required, learning how long common activities take will help you prepare classes more efficiently.
- Be dependable. Make it a point to be understanding, supportive, and adaptable throughout each session.

Section 2:

Modules

Module 1 - ART AND ART THERAPY

1. Concepts and information about modules

Module 1 explains what art means, art movements, how art is used in therapy, its use for therapeutic purposes, how art affects well-being, and how art contributes to healing. At the same time, practical activities are offered as examples that can be applied exactly as described, adapted to specific situations, or simply inspired to develop other exercises and activities with a similar effect. It also includes materials to be used in all this art therapy.

Keywords: art, art therapy, meditative art therapies, well-being, healing, materials

2. Aims of the module

- In terms of knowledge, the module is aimed on helping the learners:
 - a. to define art and art movements;
 - b. to learn about how art can be used for therapeutic purposes, how art contributes to healing, how art affects well-being and materials generally used in Art therapy.
- In terms of skills, the objectives of the module are:
 - c. to explain how art can be used for therapeutic purposes;
 - d. to be aware of the effect of art on well-being and be able to use the healing effect of art
 - e. to know Meditative Art Therapies.

- In terms of competences, the aims of the module are set on:

f. to be able to use all the knowledge learned about art and art therapy in art therapy practices.

3. Content and Structure of the Module

The content of the module will be divided into 3 units:

Unit 1: Introduction to Art Therapy

Art therapy is an evidence-based intervention developed in the mid-1940s for the treatment of mental illness in adults and children. It is widely used in Europe and the United States, but the practice of art therapy is still in its infancy in Australia. Art therapy is an integrated mental health that enriches the lives of individuals, families and communities through active art production, creative processes, applied psychological theories, and human experience in psychotherapeutic relationships. Human service professional. Provided by professional art therapists, art therapy effectively supports personal, relationship treatment goals, and community concerns. Art therapy improves cognitive and sensorimotor functions, enhances self-esteem and self-awareness, develops emotional resilience, promotes insights,

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improves social skills, reduces and resolves conflicts and distress, and societies. Used to promote target and environmental change. Through an integrated method, art therapy works on the mind, body and spirit in a way that is different from purely verbal articulation. The possibilities of kinaesthetic, sensations, perceptions, and symbols lead to alternative forms of receptive and expressive communication that can overcome the limits of language. Visual and symbolic expressions empower the experience and transform individuals, communities and societies.

-Techniques

The goal of art therapy is to use creative processes to enable people to express themselves while gaining personal insights and finding new ways to develop new coping skills. Art creation or appreciation is used to help people explore emotions, develop self-awareness, manage stress, increase self-esteem, and engage in social skills. The techniques used in art therapy are:

- Collage
- Coloring
- Doodling and scribbling
- Drawing
- Finger painting
- Painting
- Photography
- Sculpting

- Working with clay

Activity 1 – Tree Canvases

Description: In this activity the target group make temporary drawings using chalks especially using trees as canvases and they complete their artwork with their dance or idioms/proverbs. Painting, photography, and artistic action will be used as techniques.

Category of art therapy applied is mark making.

Aims: To make the target group understand the importance of the ephemeral, valuing conceptual work in art, and strengthening literature and poetry topics recreationally.

Directives:

1. Images of art and land art from art books or the Internet are commented on.
2. In a brainstorming session, the group is asked to come up with ideas for art projects.
3. Some projects can be done in the street where the drawings are exposed to the weather and will gradually deteriorate until they disappear.
4. They can make a drawing in

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a wood by marking lines on the trees using chalks.

5. The wood thereby becomes an immense canvas where the optical drawings can be read depending on the spectator's position.

6. The drawings can be done on the floor of the school playground using chalks.

7. They can come up with a performance based on a simple dance routine.

8. Or micro-poetry (one or two lines long) saying is organized to recreationally reinforce figures of speech. In this way they can make a memory-related sub-activity.

Equipment: Chalk, camera, and video camera.

Follow-up and assessment: Ask related questions to assess the impact of the activity on the target group and to make sure aims of the activity are achieved. Enable them to reflect upon their experience and thoughts.

Activity 2 – Orff-Schulwerk Approach (Online)

Aims: To teach the target group about Orff approach and art therapy in an harmonized way, introduce an innovative and artistic approach to the target group that can be adapted to various issues including art therapy in teaching and learning, encourage them to broaden their viewpoints in this regard.

Directives:

1. A class is created for everyone online to join. Present the Orff Schulwerk approach and make sure that your target group understands the essence and basic of this approach in art therapy
2. Show how they can apply this approach in relation with the art therapy and while doing so obtain their opinions on the issue
3. Divide the target group in three groups as; readers, musicians and creators
4. Readers will read a poem or

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a story you choose to all groups, then musicians will participate by choosing instruments to represent a character or a word in the story or a poem.

5. As the story or poem is read by the readers again, the musician group is asked to choose Orff instruments. Orff instruments will be created by the participants with similar materials obtained from the environment. (For example, using a plate instead of a hand drum, etc.) They add sound effects by playing the Orff instruments of their choice.

6. Afterwards ask creators to use natural materials such as leaves, pebbles, earth, tree branches etc. in order to create emotional works by getting inspired by the readings and music performed.

7. Start a group discussion that will allow participants to comment on the performances they exhibited. Ask them how it feels to make art.

8. Emphasize that they can exercise the same activity with the target group after making necessary adjustments.

9. Ask them to prepare work plan to apply this approach and activity to be carried out with target group

10. Review and comment on these plans and ask for their overall opinion about this experience



(Orff Instruments)

Equipment: Computer, materials required for presentations, sheets and pens, natural objects, glue, scissors and other materials for ephemeral art activity, Orff instruments they created such as hand drums or percussion.

Follow-up and assessment: Ask the target group what they think about the information given, how they can relate the activity with their field of work, what they will do differently while working with the target group on art therapy in the near future. If you see it necessary, apply for an evaluation questionnaire.

Unit 2. The healing Power/ Aspect of Art Therapy

Therapy and medicine are the conventional pillars of mental health care. A patient's treatment regimen is increasingly being supplemented with art therapy. In many instances where conventional treatment methods may fall short, art therapy can be helpful. By facilitating the expressing of emotions that are frequently difficult to put into words, it improves physical, emotional, and mental well-being. A patient's artwork can

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be used by an art therapist to assist them gain insights, develop their social skills, raise their self-awareness, and build their self-esteem. This aids in lowering stress and anxiety, which relieves pain and creates a solid basis for the healing process or adjusting to permanent limitations.

The healing arts are a variety of creative practices that can help people heal and improve their well-being. Traditional healing arts include music, art, dance/ movement, poetry/writing, and drama therapies.

Art therapy is a meaningful and helpful support therapy for every individual who wants to express their feelings and express themselves better in daily life.

Art therapy is an individual method that aims to reduce the problems by expressing the noisy silences that the individual keeps inside. The fact that the transitions are very soft includes the process of expressing oneself with the aesthetics of art by taking strong steps over time.

-How does art contribute to healing?

Because it forces you to establish a connection between your mind and your body, art is therapeutic. Making art engages both the mind and the body to aid in healing, in contrast to exercising, which exercises the body, or meditating, which calms the mind. Every time you sit down to write a song or paint a picture,

you are engaging in a physically demanding task while using your brain.

-How can art help people navigate disease?

When you are working on a piece of art, it can be challenging to be consumed by anxiety and bad emotions. Instead, you feel grounded, in the moment, and gratefully connected to yourself. You can even learn to communicate and engage with your work by posing inquiries to it, having a conversation with it, and learning more about yourself. Even though it initially seems corny, connecting with yourself in this way can be really wise.

Activity 1 – MandalArt

Description: Creating mandalas is a delightful, beautiful and easy activity which someone can do almost anywhere and at any time. Natural objects will be used in this activity to form circular and unique shapes of mandala.

Aims: Using mandala's logic of circularity and calming, focusing effects on the target group within the art concept. This activity will allow them to create their artwork while at the same time experiencing mandala techniques. Their ability to visualize what they have on their mind in an organized and artistic way. Category of art applied is collaging/arranging.

Directives:

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1. Introduce them the concept of mandala and the ways of applying mandala with different objects on different concepts.
2. Ask them to prepare their circle in an area which will allow their artwork to grow, such as a beach, a field, a grassy knoll or a space of floor.
3. Once they have determined their area, gather materials nearby so they have them in an easily accessible space.
4. They choose the central piece for their artwork and sit this in the center of their working area. They select a large item or an item they only have one of to be the central piece, such as a large piece of rock or driftwood.
5. They choose another collection and form a ring around the central piece much like a tree ring. This may be a circle of shells surrounding the central coral piece, or pinecones surrounding the large flower. The main focus here is to make sure they make a complete ring around the first piece; therefore, the inner piece is completely contained inside the outer circle.
6. They continue this pattern adding new circles made out of different items until they believe their piece is complete. A minimum of 5 rings is usually required for visual impact.
7. Take photos so that they remember their mandala and so they can share it with family and friends.



Equipment: Natural found objects such as autumn leaves, little rocks, pinecones, little pieces of wood etc. Smartphone or camera for capturing photos.

Follow-up and assessment: Ask related questions to assess the impact of the activity on children and to make sure aims of the activity are achieved. Enable children to reflect upon their experience and thoughts.

Activity 2 – Soundwave Portraits (Online)

Description: In this activity the target group makes a recording of their voice using a program and then they imitate the recorded sounds of themselves by creating soundwaves by drawing them with finger paint on windows. They use their recording to create artwork. This activity is a fun way to explore the idea of portraiture through voice. Category of ephemeral art applied is mark making.

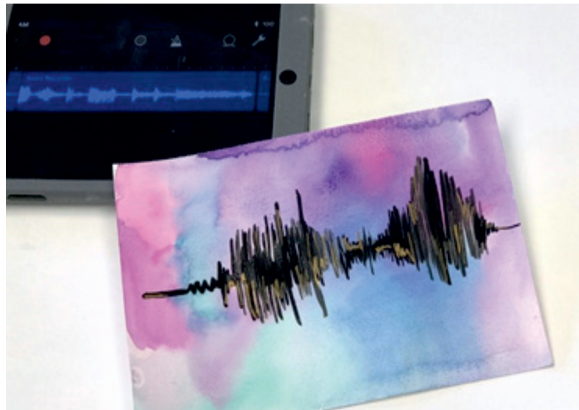
Aims: To teach the target group how sounds are created and what are amplitude,

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frequency, and wavelength in a fun and innovative way with the adaptation of ephemeral art into physics.

Directives:

1. They record their voices by using a program like GarageBand, where the sound waves are visible. This could be on a computer, smartphone, or tablet.
2. They listen to their voice recordings and while doing so they try to implicate the voices by drawing soundwaves on window



Equipment: Computer, smartphone or tablet with a recording program, earphones, fingerpaint, windows or a piece of flat glass.
Follow-up and assessment: Ask the target group how they felt while listening to their records and how you decide drawing lines up and down. Observe whether they made a connection with the temporality of sounds with the temporality of the drawings they created with a water-based paint.

Smartphone or camera for capturing photos.

Unit 3: Materials Used in Art Therapy

The power of art to create and deepen connections is one of its coolest features. This is particularly true when it comes to how people interact with both natural and artificial materials.

Metal, Wood, and Oil Paint are just a few examples of materials with a long history of use. We are interested in learning more about the various materials that current artists are using to create their works of art. More specifically, how one material can be used in so many different ways. What year was it created? What functions does it provide in various contexts? Who uses this content?

The ability to engage in a variety of sensory experiences throughout the creative process is one of the major advantages of employing art in therapy. All four senses— sight, smell, touch, and sound—are involved in the creation of art. The materials one chooses for their artistic creation have profound significance.

The way someone works with the materials they use for art can evoke emotions brought on by the sensory experience. For some who don't feel at ease with moist or fluid-like materials, shaping clay might be a difficult task. This person could favor using a substance with more structure, such a colored pencil.

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Clay is more easily shaped than colored pencil, therefore to someone else, colored pencil may look constricting.

Activity 1 – Portable Environments

Name of the activity: Portable Environments

Description: This activity has inspiration from the artworks of Vaughn Bell, especially his exhibition named as Portable Environment. He filled everyday objects we always use and move with us such as shopping charts into grass, little forest and terrariums.

Starting from Bell's point of view target group will transform an everyday object that can be moveable into ecological environments



by adding a meaning to what they create. They will also brainstorm about how to apply this activity with children in order to enable them to learn about ephemeral art by experiencing it.

Aims: To enable the target group to question the daily life from their point of view, allow them to learn about ephemeral art by adding vitality, life to a simple artificial everyday object, provide motivation, information and experience for them to use while teaching ephemeral art to children in creative ways.

Directives:

1. Make a presentation about ephemeral art including information about its origin, its mentality and important examples of it. Then discuss how to apply ephemeral art while teaching it to children.
2. Define an everyday object that can be moveable so that it can be turned into a living environment. This object can be an egg basket, a hat, a trash bin etc.
3. Ask the target group what the importance of the defined object for human life is and lead a warming up discussion that will later direct them while creating their artwork.
4. Provide them with all the materials possible such as earth, seeds, little plants etc.
5. Remind them that they can use artificial materials such as signs, papers and pens etc. in order to complete their concept and even to convey a message.
6. After they all finish, ask for them to explain their piece to others one by one and encourage a group discussion.
7. Ask them to think about how to apply this activity with children and create a basic work plan for it.
8. Review the work plans, all together make comments on them.

Equipment: Computer, materials required for presentations, sheets and pens, natural objects, glue, scissors and other materials for

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ephemeral art activity, earth, seeds, little plants

Follow-up and assessment: Ask the target group what they think about the information given, how they can relate the activity with their field of work, what they will do differently while working with children on ephemeral art in the near future. If you see it necessary, apply evaluation questionnaire.

Activity 2 – Customizing Paintings (Online)

Description: In this activity a group of children visit an art gallery if possible or analyze selected paintings elsewhere and they think as if everything within the selected painting is real. Each of them combines the materials they create or find with the painting by keeping in mind as if the details of the painting were concrete. In this way they will create their own art pieces by applying ephemeral art approach. The category of ephemeral art applied is construction and assembling.

Aims: Developing children's interpretation and internalization skills of artworks, creating new works by adding something from themselves, learning by experiencing ephemeral art, improving their general culture by seeing the connections between art and life.

Directives:

1. If possible, organize a visit to a museum or art gallery where children can view paintings and if this is not possible in your situation make a presentation consisting of a few

famous paintings.

2. Select one painting by majority of votes of children and distribute color printed versions of the painting to each child.

3. Ask children to imagine what they would see, hear, smell, taste and touch if we were inside the painting.

4. Ask them to use natural materials they can find outside or you can provide them with a variety of these materials in the class environment.

5. They will select and use the materials they see fit to the concept of painting.

6. After combining them in their own ways they reflect on what they did one by one.



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Equipment: Powerpoint presentation, computer, printer, sheets, naturally found objects, scissors, glue, smartphone or camera etc.

Follow-up and assessment: Ask related questions to assess the impact of the activity on children and to make sure aims of the activity are achieved. Enable children to reflect upon their experience and thoughts.

3.1. Total duration of module

The total duration of the module will be 9 hours, divided into 3 hours per unit.

3.2. Tools and materials

The training's structure states that the following equipment and supplies are required to teach this module:

- PowerPoint presentations
- laptop, video-projector, projection screen
- writing board, flipchart
- Worksheets, photographs, educational videos
- the curriculum, further reading resources
- forums and discussion boards for the online environment, Google Drive or similar collaborative tools.

The equipment and supplies required to effectively carry out the previously stated activities depend on how they are carried out and modified. Check the instructions for the

activities for this equipment.

4. Benefits of the module

Art is an enjoyable experience in nature and can be a powerful tool in the field of treatment. It can give people the opportunity to express their inner thoughts while helping them better understand and understand your emotions and mental health. The benefits of art therapy make it a valuable tool for adults and adolescents in the treatment of a variety of illnesses and disorders. People can find relief from overwhelming emotions, crises, or traumas. They gain insight into themselves, increase happiness, and enrich their daily lives through creative expression. They can experience personal transformation. Human health in general is multifaceted, and positive health outcomes require an integrated mental, physical, social / emotional, and environmental approach. Art therapy is an approach that has been shown to be useful for both mental and physical health. In recent years, researchers have been studying the benefits of art therapy to treat a variety of physical health problems. Some of their findings indicate art therapy: helps to relieve pain, reduce stress symptoms and improve quality of life in adult cancer patients. Improved ability to manage pain and other painful symptoms in children with cancer.

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Less stress and anxiety in asthmatic children. Stimulated mental function in the elderly with dementia. Showed a decrease in depression in patients with Parkinson's disease. Art and art therapy modules have been prepared by taking the above mentioned benefits. Moreover, the module sets certain goals for the target group and in this way, tutors can organize their training both online and face-to-face accordingly. Targeted skills, knowledge and competencies are as follows:

4.1. Skills

Learners will be able to

- describe Art Psychotherapies,
- explain how art can be used for therapeutic purposes,
- explain how art contributes to healing,
- explain how art affects well-being
- describe Meditative Art Therapies,

4.2. Knowledge

Learners will:

- know what art is,
- know about main Art Movements,
- know what Art Therapy is,
- know about Art Psychotherapies,
- know how art can be used for therapeutic purposes,
- know how art contributes to healing,
- know how art affects well-being

- know about Meditative Art Therapies,

4.3. Competences

- Learners will be able to put all theoretical knowledge about art and art therapy into practice, in a real Art Therapy application

5. Application Instructions

Art therapy tutors help people access their imaging skills. They do this by exploring together the meaning of their images in the light of the relationships and personal experiences they have encountered. The big advantage of the tutor is that it can facilitate the expression of his inner worlds, which he may find difficult to express in words. Tutors drive the process of emotional integration and growth by providing a safe and reliable treatment environment where s can develop insights and create and use images to achieve personal change.

5.1. Precautions & Risk Assessment

- This module covers the beginning of the whole process. For this reason, basic knowledge must be solid in order to be able to understand the other modules well. Anyone who does not understand the healing power of art therapy will be incomplete in the methods applied in other modules.

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Therefore, this module must be processed in a complete and understandable way.

- It is important to consider the sensitivity of people when applying art therapy. Make sure you have a safe and comfortable space to do all the activities in this module before you start practicing them. Please don't judge the people who are vulnerable, but please protect and support them.

Do not be afraid to discuss information with other course participants, the instructional team, or other professionals (the pedagogical team or with other therapists) in your support system in order to reduce the danger.

5.2. Suggestions for the application of modules

- The most important suggestion we can stress are related to the fact that seniors, as we saw in the module, are a heterogeneous group with a variety of demands, life experiences, health issues, and social conditions. Sensitive topics may come up during art therapy, triggering emotional responses. Diverse emotional states should be channeled so that only positive emotions are left.

- This module may be used both online and offline, either in a group or alone. Be aware that online and face-to-face practices are different;

1. For online training, you need to be in a quiet

and calm place with a strong internet connection on your computer.

2. For face-to-face training, make sure that your resources are ready and your materials are suitable for practice.

5.3. Notes for the tutor

This module may be used both online and offline, either in a group or alone. Adapt the activities and procedures to the talents and requirements of the people, taking into account the particular circumstances you are working with. In addition, this module is designed to be self-paced, it will be interesting for you to interact with other art therapy instructors.

Tips About Conducting Art Therapy

1. After giving the target group art assignments, make them work. Do not disturb or ask questions. Observe them creating an art assignment. If they say I can't do this, encourage them to continue trying for at least 2 minutes.

2. When the implementation time is over, start with something like this: Is there anything you would like to talk about? (likes and dislikes, changes, etc.)

3. Remain person-centric. In other words, focus on target groups conditions and expectations.

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4. Make a neutral observation of the image, not praise or criticism (eg shape, size, space usage, center of gravity, what's on the edge, colors used, etc.).
5. Emphasize emotional content and process vs. Focus on how the product was launched or its specific content.
6. Use third party language such as "What is this person / animal / character doing?" And "What are you doing?"
7. Identify and use metaphors and engage with them to dig deeper.
8. Ask questions about the artwork.
9. Respect their artwork and include them in all decisions about what to do with the art. This means that if they want to keep it, keep it safe and only display it with permission.

6. Suggestions for the development and further application of the modules

People do not have to be artistic People do not have to have artistic abilities or special talents to participate in art therapy, people of all ages, including children, adolescents and adults You can benefit from it. Some studies suggest that the mere existence of art may play a role in promoting mental health. It's not the same as an art class. People often wonder how an art therapy session differs from an art class. While art classes focus on teaching techniques and

creating specific final products, art therapy aims to help clients focus on their inner experience. When creating art, people can focus on their perceptions, ideas and emotions. People are encouraged to create art that represents the inner world, rather than making something that represents the outer world.

MODULE 2 - ART THERAPY FOT SENIORS

1. Concepts and information

about modules

Module 2 gives a general introduction to working with seniors in Art Therapy. It gives some tips and things to consider while setting up the Art Therapy Room for individual and group practices. In addition, it gives concrete advice on how to plan an Art Therapy Session for individual and group applications with seniors. Furthermore, given the very nature of the Art Therapy sessions, which, first of all, aim to provide a warm, trusting environment in which people can feel at ease in revealing personal matters, Module 2 gives suggestions to help to achieve this kind of caring, participant-centered group which people enjoy being in.

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2. Aims of the module

The Module 2 objectives could be divided into three main groups: "know", "know-how" and a synthesis between knowledge and abilities, i.e. "competences". Module 2 aims to teach learners on how to create a learning environment suitable for seniors, how to communicate with seniors during Art Therapy activities, how to organize the room/workplace for individual & group Art Therapy activities, and how to plan and implement an individual & group Art Therapy session. In addition, Module 2 aims to equip learners with some skills on the evaluation methods in Art Therapy and psychotherapy and components and requirements of quality art therapy.

3. Content and Structure of the Module

Module 2 consists of 5 units, namely:

Working with seniors in Art Therapy;
Designing the Art Therapy Room for individual and group practices; Planning a Art Therapy Session for individual and group applications;
Group Management in Art Therapy;
Evaluation in Art Therapy. The first unit will analyze the general profile, needs and capabilities of senior citizens. It will discuss communication skills needed for work with

seniors and the importance of creating a safe space for personal development of the seniors and preventing age stereotypes while working with seniors.

Face-to-face Activity: Post-Its to fight ageism
Distribute post-its of two different colors to the group. They have the options to draw or to write. In one color post-its they write or draw a stereotype about older persons. In the other color post it they write or draw a way to fight this stereotype. The group can then discuss:
What are the main stereotypes about older persons? Which ones are the worst to endure?
How to fight these stereotypes? Which ways are the most efficient to educate society about them?

Copyright: Raw Pixels



Online Activity: Senior Superhero

This online activity makes us reflect on our perception of aging in a positive and resourceful manner. First, draw how you picture

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yourself at 80 years old. Then, draw a senior superhero.

Is your perception of aging rather positive or negative? Why?

Look at your superhero, what are his/her main powers?

How does this superhero comfort your perception of aging?



Copyright: Adobe Stock

The second unit will consider the art therapy space, storage and organization, atmosphere, accessibility and safety and some studio rules.

Face-to-face Activity: Drawing inspiration for your art-therapy room

If you set up an art-therapy room from scratch, create a board with the inspirational images with the design, quotes, and other ideas for your future art-therapy room. Look up examples of the art-therapy rooms on Pinterest or other banks of images and print out the pictures with the ideas which you

would like to implement or adapt to your art-therapy room and attach them to your board.



Copyright: <https://nestingstory.ca/created-vision-board-home-digging-us-survival-mode-series/>

Online Activity: Setting up rules for the art-therapy room

Reflect on some rules which you would like to apply in your art-therapy room filling in the table presented below. Think of the ways you could formulate them kindly and politely and display them in your art therapy room.

Which simple actions applied by the sessions' participants would make your work easier?

Which simple actions applied by the sessions' participants would make the work of other participants easier?

Which communication rules would smooth the art-therapy process?

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Which simple actions applied by the sessions' participants would make your work easier?	
Which simple actions applied by the sessions' participants would make the work of other participants easier?	
Which communication rules would smooth the art-therapy process?	

The third unit will give some information on planning an AT session, e.g. special features of working with older people and choosing appropriate art and craft techniques and materials. It will also give some working approaches and methods for individual and group sessions with seniors.

Face-to-Face Activity: Planning your group session. In this activity you will plan a group session, please reflect on:

What thematic will you address with the group?

What technique will they be able to use?

What material do you need?

The third unit will give some information on planning an AT session, e.g. special features of working with older people and choosing appropriate art and craft techniques and materials. It will also give some working approaches and methods for individual and group sessions with seniors.

Face-to-Face Activity: Planning your group session. In this activity you will plan a group session, please reflect on:

What thematic will you address with the group?

What technique will they be able to use?

What material do you need?

★ Art Therapy Supplies

PAINTING	DRAWING	SCULPTURE	COLLAGE
<input type="checkbox"/> Acrylic paints. <input type="checkbox"/> Watercolours <input type="checkbox"/> Gouache <input type="checkbox"/> Finger Paint <input type="checkbox"/> Spray paints <input type="checkbox"/> Brushes <input type="checkbox"/> Brayer <input type="checkbox"/> Journals <input type="checkbox"/> Loose paper <input type="checkbox"/> Canvas <input type="checkbox"/> Gel print plates <input type="checkbox"/> Stencils <input type="checkbox"/> Foam stamps	<input type="checkbox"/> Pencils <input type="checkbox"/> Pens <input type="checkbox"/> Pastels <input type="checkbox"/> Charcoal <input type="checkbox"/> Chalk <input type="checkbox"/> Markers <input type="checkbox"/> Crayons <input type="checkbox"/> Journals <input type="checkbox"/> Loose paper <input type="checkbox"/> Eraser <input type="checkbox"/> Sharpener <input type="checkbox"/> Tortillon	<input type="checkbox"/> Clay <input type="checkbox"/> Polymer clay <input type="checkbox"/> Paper clay <input type="checkbox"/> Paper mache <input type="checkbox"/> Carving tools <input type="checkbox"/> Decorative items <input type="checkbox"/> Dough <input type="checkbox"/> Rolling Pin <input type="checkbox"/> Painting items <input type="checkbox"/> Drawing items <input type="checkbox"/> Collage items <input type="checkbox"/> Molds <input type="checkbox"/> Balsa wood (light)	<input type="checkbox"/> Patterned papers <input type="checkbox"/> Magazines <input type="checkbox"/> Journals <input type="checkbox"/> Loose paper <input type="checkbox"/> Brayers <input type="checkbox"/> Adhesive <input type="checkbox"/> Cardboard <input type="checkbox"/> Scissors <input type="checkbox"/> Brushes <input type="checkbox"/> Stickers <input type="checkbox"/> Stamps & Ink Pad <input type="checkbox"/> Painting items <input type="checkbox"/> Drawing items
WRITING	PHOTOS	TEXTILES	DIGITAL
<input type="checkbox"/> Pencils <input type="checkbox"/> Pens <input type="checkbox"/> Journals <input type="checkbox"/> Loose Paper <input type="checkbox"/> Ruler <input type="checkbox"/> Scissors <input type="checkbox"/> Magazines <input type="checkbox"/> Dictionary <input type="checkbox"/> Thesaurus <input type="checkbox"/> Computer <input type="checkbox"/> Printer <input type="checkbox"/> Poetry books	<input type="checkbox"/> Photographs <input type="checkbox"/> Digital camera <input type="checkbox"/> Smart phone <input type="checkbox"/> Software (Gimp) <input type="checkbox"/> Computer <input type="checkbox"/> Printer <input type="checkbox"/> Photo paper <input type="checkbox"/> Transfer Medium <input type="checkbox"/> Journal <input type="checkbox"/> Drawing items <input type="checkbox"/> Painting items <input type="checkbox"/> Collage items	<input type="checkbox"/> Rulers <input type="checkbox"/> Scissors <input type="checkbox"/> Ribbon <input type="checkbox"/> Buttons <input type="checkbox"/> Fabric <input type="checkbox"/> Calico <input type="checkbox"/> Felt <input type="checkbox"/> Thread <input type="checkbox"/> Wool <input type="checkbox"/> Stuffing/Filling <input type="checkbox"/> String <input type="checkbox"/> Dye <input type="checkbox"/> Fabric Paint	<input type="checkbox"/> Photographs <input type="checkbox"/> Digital camera <input type="checkbox"/> Smart phone <input type="checkbox"/> Software (Gimp) <input type="checkbox"/> Graphics (Freepik) <input type="checkbox"/> Video software <input type="checkbox"/> Tablet <input type="checkbox"/> Graphics Apps <input type="checkbox"/> Computer <input type="checkbox"/> Printer <input type="checkbox"/> Photo paper <input type="checkbox"/> Secure storage <input type="checkbox"/> Video games

Copyright: Art Therapy Resources

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Online Activity : Planning an individual session
In this online activity, you should follow the template and plan two individual sessions: One for a senior that is feeling a bit down and apathetic without the strength to go out of home or plan activities. One for a senior that is nostalgic and missing friends and families that he might have lost or not see anymore.

Once you have developed your art therapy intervention is developed, you can create a simple template to record the procedural parts of your art therapy intervention. This can be kept very simple as shown in the example below:

ART THERAPY INTERVENTION PROCEDURE:

Art therapy intervention title: _____

Suggested art materials: _____

Instructions: _____

Client Discussion: _____

BLOG POST LINK: <https://arttherapyresources.com.au/art-interventions>

Copyright: Art Therapy Resources

The fourth unit focuses on group Management in Art Therapy, in particular setting up the group, group boundaries and ground rules, size of group, facilitator roles, introductions and 'warming up' and engaging in the artwork.

Face to face activity : Exquisite Drawing

This face to face activity is based on the game "exquisite corpse". In order not to shock, you can call it: " exquisite drawing". In the exquisite drawing, the group does a collective drawing of an animal, it has a face, a body and legs. You will need a single sheet of paper and to divide your group into subgroups of three people. The first person draws the head and

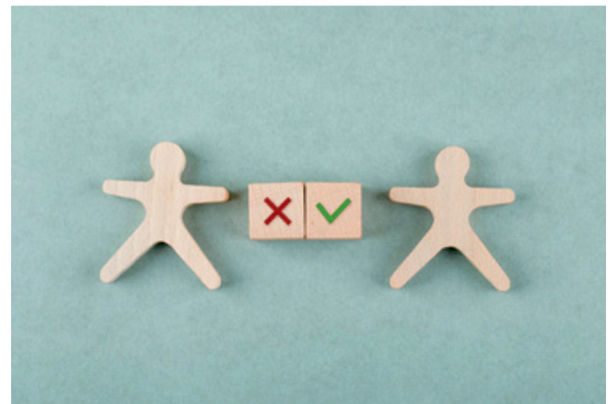
folds the piece of paper hiding all of the drawing but a few lines. The second draws the body just under the head and folds the piece leaving a few lines. The last person draws the legs and proceeds to the big reveal. For more details you can watch the following video by Canadian artist Sandeep Johal : <https://youtu.be/OVjuP8ScVfA>



Copyright: Surrey Art Gallery, Sandeep Johal.

Online Activity : True & False

A good online group warming up activity is the "True & False" participants have to introduce themselves and say two true facts about them and one false fact. The others have to guess which of the statements is false



Copyright: 8photo

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The fifth unit considers evaluation in art therapy, i.e psychopathological evaluation, analysis and use of surveys, and tests techniques used in AT.

Face-to-Face Activity: Please Draw (applying PPAT & DDS)

For the PPAT evaluation, you should give seniors the following instruction: "Draw a person picking up an apple from a tree". You can assess the work once it is finished, no interview or observation is needed. When assessing the work, pay attention to the color, the details, the accuracy, realism, logic, line quality, space used.



Copyright: Gantt & Tinnin, 2007

For the DDS evaluation, seniors should make three drawings. They have 15 min per drawing. Allocate one sheet of paper per drawing. Drawing 1: « draw a picture using this material ». Drawing 2: « Draw a picture of a tree ». Drawing 3: « Make a picture of how you are feeling using lines, shapes and colors ». When assessing the work, pay attention to the color, the details, the accuracy, realism, logic, line quality, space used.

"Draw a picture of a tree."



"Make a picture of how you are feeling using lines, shapes, and colors."



"Make a Picture using these materials"



Online Activity: Comparative Table
Read more details about PPAT and DDS on the module slides (numbers TBC) , assess the strengths and weaknesses of each technique. Is one of them more suitable for certain situations than others?

- To which situation can PPAT be more suitable? Why?
- To which situation can DDS be more suitable? Why?

Technique Strengths Weaknesses
PPAT
DDS

3.1. Total duration of module

Each subtopic requires on average 4 hours, thus, given the blended format of the course, online and offline classes will take 20 hours each.

3.2. Tools and materials

The courses organized in classrooms will require the following tools and materials: curriculum in PDF format, PowerPoint presentation, worksheets, photographs for exercises, laptop, video-projector and projection screen, writing board and flipchart. Whereas organizing online courses a tutor will need PowerPoint presentations with or without voice-over, forums and discussion boards, Google Drive and similar collaborative tools, educational videos, and further reading links.

4. Benefits of the module

The benefits of this module are practical, allowing art therapists to manage the organization of activities, either individual or in a group, and the communication with seniors, either as individuals or as a group. It allows us to understand the variety of seniors' needs and conditions and eventually to overcome stereotypes about aging, called ageism.

4.1. Skills

At the end of this Module, learners are expected to be able to:

- communicate with seniors during Art Therapy activities,
- organize the room/workplace for individual Art Therapy activities,
- organize the room/workplace for individual Art Therapy activities,
- plan and implement an individual Art Therapy session,
- plan and implement a group Art Therapy session,
- manage a group in Art Therapy,
- evaluate learning outcomes in Art Therapy and psychotherapy,

- use of general surveys and analysis methods,
- create a learning environment suitable for seniors,
- prevent ageism/ age stereotypes.

4.2. Knowledge

Having studied Module 2, learners will know:

- General profiles and needs of senior participants,
- How to communicate with seniors during Art Therapy activities,
- How to organize the room/workplace for individual Art Therapy activities,
- How to organize the room/workplace for group Art Therapy activities,
- How to plan and implement an individual Art Therapy session,
- How to plan and implement a group Art Therapy session,
- Group management skills in Art Therapy,
- The evaluation methods in Art Therapy and psychotherapy,
- The use of general surveys and analysis methods,
- Tests and evaluation methods in Art Therapy,
- Components and requirements of quality art therapy,
- How to create a learning environment suitable for seniors,
- How to prevent ageism/ age stereotypes.

4.3. Competences

As a synthesis between knowledge and abilities thanks to this Module, learners will be able to make all necessary arrangements including organization of workplace and stages of the session and to perform Art

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Therapy sessions in accordance with the needs and requirements of senior participants.

5. Application Instructions

The following instructions cover both the possibilities of following our module face-to-face or online. They also raise the main risks and mitigation actions as well as precautions you should take regarding elements presented and explored in this module.

5.1. Precautions & Risk Assessment

In this module we explore how to organize individual and group art therapy sessions focusing on seniors' needs and expectations. The main precautions we can underline concern the fact that seniors, as we see in the module, are a heterogeneous category with different needs, life backgrounds, health and social conditions. During art therapy, sensitive subjects may arise provoking emotional reactions. The diversity of emotional states should be canalized so no negative emotions remain. To make sure emotions are channeled, having a safe space for expression is key and trainers should use their active listening skills making sure to be able to answer any issues raised by seniors. Eventually, you can plan to have a separate space allowing for face-to-face discussion with seniors if the necessity arises. Risk assessment is key to our module. The main risk you may be confronted with is, as we said, difficulty in dealing with the diversity of emotions and

reactions that might arise during sessions. To mitigate the risk, don't hesitate to exchange with other course participants, with the pedagogical team or with other therapists from your entourage.

5.2. Suggestions for the application of modules

Our module can be applied from an individual therapy point of view or group therapy point of view. Make sure you distinguish both situations as preparation for both types of sessions vary greatly.

For face-to-face application of our module, make sure to have our main advice printed to help you when planning and setting your session.

For online applications, make sure you have a good computer, tablet or smartphone. Be comfortably seated, in a pleasant and calm environment preventing distractions.

For both modules, you can take individual notes highlighting the main elements you should remember either on paper or in the notepad of the computer.

5.3. Notes for the tutor

This module can be applied both online and offline in a group or individually. The variety of material proposed (videos, presentations, manual) allow us to adapt to the variety of needs of art therapy professionals. It is accessible at any time of the day allowing it to fit even to the busiest schedules.

The goal of this module is to enrich professional practices and share knowledge, it should be applied in a manner that is flexible and does not represent a burden for art therapists.

6. Suggestions for the development and further application of the modules

This module is conceived in a self learning method but it will be interesting for you to exchange with other art therapy trainers. This opportunity will be offered during the ELISTAT workshops: building a strong learning community and stimulating peer-to-peer learning is our goal. We offer a pan European perspective and our partners have knowledge of the specific cases and needs in their countries (Italy, France, Portugal, Romania and Turkey) but don't hesitate in adapting activities to your local needs if you may be from a country different than ours.

MODULE - 3 ART THERAPY FOR SENIORS IN PRACTICE

1. Concepts and information about modules

Why need to know Art Therapy Applications for seniors?

Enhancing each person's creative and expressive aptitudes in order to identify new horizons of expression by allowing the elderly person to become the protagonist of his or her own existence again: this is the goal of the individual and group art therapy workshop projects.

About the Module 3

The Module introduces the Art Therapy Applications, in terms of Methods by specific arts:

- Drawing and Painting
- Other Visual Arts
- Dance and Movements
- Music
- Drama

How to carry out Art Therapy Applications

Within the art therapy sections, it will be crucial for the practitioner to get to know the participants, with their skills, abilities and needs, and to identify the specific goals to be achieved in each section.

In addition, it will be important to create the most favourable conditions for the activity, without tension and anxiety for the elderly person, who, instead, should feel completely free to express himself or herself and relate to the therapist and others (if in a group), without fear of conditioning or judgment.

The practitioner responsible for art therapy sessions will be able to understand:

- which methods are most appropriate based on the therapeutic goals to be achieved
- What modalities to use to implement art therapy sessions
- which tools to use
- how to accompany the elderly person in carrying out the proposed activities

The module also contains the descriptions of the good practices to be implemented in

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art therapy, i.e., the best models of art therapy sessions in the world.

Aims and objectives of Art Therapy Applications on Elderly:

Each of these types is aimed at improving a particular health condition of the elderly:

- significantly reduces symptoms related to depression and memory loss,
- counteracts the neuropsychological aging process
- limits complications at the functional level, typical of Alzheimer's and other forms of dementia.

The benefits of an art-therapeutic intervention lie in the possibility of recovering feelings and memories of past experiences by going through alternative channels than traditional ones; in addition, the elderly person has the opportunity to create a new role for himself, reinforcing his identity and self-esteem, through products and artifacts that restore a sense of control over reality and attribute new meaning to experiences. This enables the stimulation of several cognitive functions beyond memory, namely attention, planning, choice and abstract thinking.

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Another important aspect is that of relating to others: art therapy projects involve multiple people, thus creating opportunities for sharing among guests, who feel they are an active part of something beautiful and important, the group.

In general, all are aimed at the general improvement of the psychophysical health of users and, therefore, at an improvement in their lifestyle. This module will describe techniques and applications for each of the

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following areas, applicable both face-to-face and online. Through this module, therefore, readers will have a greater awareness of what art therapy is and its practices and will be able to conduct therapy sessions for seniors.

2. Aims of the module

The purpose of the module is for learners to acquire

- Knowledge of Art Therapy methods and processes in minimum two specific art branches defined below:

- Drawing,
- visual arts,
- writing, poem,
- music,
- dance,
- drama
- Knowledge of good practices and Model Art Therapy Sessions
- Skills on how to apply Art Therapy methods and processes in minimum two specific art branches
- Competences on conducting Art Therapy sessions in minimum two specific art branches in accordance with the needs and requirements of senior participants.

The objectives of this module pass by:

- Developing awareness of seniors' strengths and weaknesses and their residual competencies to be improved.
- Learning to leverage their strengths and control their weaknesses in expressing themselves through art therapy applications

- Learning to manage feelings through art therapy applications
- Mastering goal-setting and methods designed to implement art therapy sessions
- Learn how to set up a creative environment for seniors, and how to motivate each senior to express his or her potential.

The outcomes that we want to obtain with this module are directed to art therapy professionals and are:

- Exercises to carry out creative and non-judgmental sessions with users
- Tips on how to create safe, motivating and inclusive working environments for individuals and groups
- Activities to support the competence and confidence of seniors.

3. Content and Structure of the Module

The Module 3 is structured in 6 topics:

A. ART THERAPY APPLICATIONS

The goal of art therapy is to utilize the creative process to help people explore self-expression and, in doing so, find new ways to gain personal insight and develop new coping skills.

Art Therapy is using artistic methods to treat psychological disorders and enhance mental health. It is based on the empiric experience that creative expression can foster healing and mental well-being.

According to a 2016 study published in the Journal of the American Art Therapy Association, less than an hour of creative activity can reduce stress and have a positive effect on mental health. This is regardless of artistic experience or talent. Age does not play a role.

Art therapy is a good way to help user relax. The art therapy practitioner must have in mind this as central objective of the art therapy sessions with seniors.

In this topic there are presented the different emotions that the practitioner can work on through art therapy different methods, like dealing with anger and sadness, relaxation, focusing on the good and happiness, overcoming trauma and unhappiness, among others.

B. DRAWING AND PAINTING THERAPY

B.1. Drawing Therapy

Drawing is given by a set of figurative or abstract graphic gestures, and it is important because it transforms internal and external contents of the subject into an image. Just as the word objectifies a feeling, the same is the case with drawing. The difference lies in the fact that because of its figurative characteristic, being an image, it becomes an awareness that is often greater or more immediate.

It falls within the context of art therapy because it stimulates the person to freely and spontaneously externalize his or her psychological contents. In fact, in many individuals, it proves to be an important communicative method that facilitates the expression of those parts of the self that we generally know and contact less or that we make it difficult to externalize in other ways.

B.1.1 Drawing Therapy Benefits

Drawing according to recent studies is the best way to promote well-being and decrease stress at any age. In fact, psychology has confirmed the usefulness of manual activity such as coloring. This is when the mind is relieved and the worries and thoughts that plague us. The activity of coloring and drawing stimulates the part of the brain that deals with emotions. The same area deals with movement and vision, so coloring is a total workout for the mind and body.

For these very reasons, drawing is used in the treatment of various diseases and can provide strong benefits for the elderly. Especially for patients suffering from dementia or neurological diseases, it allows for improved psychomotor coordination and spatial ordering. The elderly, on the other hand, who suffer from depression are helped by drawing to get in touch with themselves. It is also used as therapy in cancer and terminal patients who need to calm their minds from depression that would worsen their already fragile health. Drawing therapy is essentially drawing as a form of coping and self-care. Drawing, like other forms of art therapy, allows people to relieve stress and anxiety. Thus, it is not the content of the drawing that assumes

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significance, but rather the emotions that are expressed or released with it.

B.1.2 Drawing Therapy Techniques

Drawing therapy itself encompasses various practices, such as:

1. Doodling: give the patient a blank sheet of paper or canvas and let him doodle to his heart's content. A kind of stream of consciousness that takes shape through squiggles, words, shapes, colors.
2. Drawing shapes: asking the patient to draw specific shapes, such as squares, triangles, lines, etc.
3. Drawing one's emotions: ask the patient to create sketches of their positive and negative thoughts. You could also ask them to draw one first and then the other. Of the former, you could ask them to draw what they are grateful for, what they dream about or positive memories of their life. Among the others, you could ask to sketch to give vent to your stress, depression, frustration over a certain physical or mental health condition.
4. Mandala: This type of drawing is recommended by psychology, particularly by the founder of analytical psychology Carl Jung. Mandalas are spiritual symbols, often in circles with geometric shapes, whose pattern complexity and repetition can promote awareness. Drawing or coloring mandalas helps reduce negative emotions and enhance

spirituality.

6. Coloring: this art form allows the patient to relieve stress and anxiety.

7. Mix mediums: allowing the patient to draw and color using different types of tools (pencils, pens, colors, crayons, markers, etc.). Allow them to give vent to their emotions through the mix of words, shapes, drawings of different types, which allow them to best express each person's subjective situation. You can also add the benefit of music by having them play songs that can help the patient's best expression. Example of practical exercise: draw a happy memory

Purpose: to awaken positive emotions.

Materials: a sheet of paper and coloured pencils.

Instructions: Ask the patient to obtain the above materials and recall a moment when he or she felt truly happy. Then ask the patient to recount that moment and the emotions felt. In this way, the patient will focus on positive emotions and feel relieved.



B.2. Painting Therapy

One art therapy tool that needs a distinction from drawing is painting. Painting therapy uses the creative process of creating and producing art to improve the physical, mental and emotional well-being of individuals of all ages.

B.2.1 Painting Therapy Benefits

Painting therapy, like drawing, enables patients to express themselves, understand themselves, reduce anxiety and stress, and improve their social skills and abilities. Painting therapy aims to improve people's mental health at various stages of prevention, treatment and rehabilitation. It is a type of alternative and natural therapy that can have multiple benefits, especially for the elderly. In particular, it:

- Improves communication;
- Increases self-esteem;
- Improves motor skills;
- Keeps the brain moving;
- Increases concentration;
- Emotional intelligence.

In addition to the above benefits, studies have shown that painting therapy can help control and treat aggression. In fact, art therapists believe that the artistic process is helpful in growing interactions and reducing aggressive tendencies. Painting is an attractive and distinctively expressive tool that can lead to a strong increase in individuals' abilities and

good expression and interaction. Through painting therapy it is possible to understand the moods, tendencies and characteristics of the elderly. Indeed, it allows one to understand the influence of the external factor for them, as well as their inner and subjective issues. Such therapy allows individuals to express their thoughts and feelings through projection, thus establishing emotional and social compatibility.

B.2.2 Painting Therapy Techniques

As with drawing, there are various techniques used in painting, as:

1. Painting and coloring the frame with colored pencils: patients are asked to draw a frame on a blank sheet of paper and each person connects a dot from one side of the frame to the other, then completes the shapes formed by drawing lines.
2. Free painting: patients paint freely.
3. Painting with geometric shapes: geometric shapes are drawn on colored sheets and patients are asked to paint the shapes.
4. Painting their favorite place: patients are asked to paint their favorite place and talk about it at the end of the session.
5. Painting the fondest memory: patients are asked to paint their fondest and sweetest memory and talk about it at the end of the session.
6. Painting on tools: tools (e.g., glasses, bottles, etc.) are provided to paint on.

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7. Painting nature and telling stories: patients are asked to paint their favorite nature and tell a story about it.

8. Compare themselves to an object and paint it: patients are asked to compare themselves to an object and paint it and, therefore, explain the comparison.

9. Painting desires: one's desires are painted and discussed at the end of the session.

C. VISUAL ART THERAPY

Visual art therapy is defined as a "therapeutic process based on spontaneous or prompted creative expression using various art materials and techniques such as painting, drawing, sculpture, clay modeling, and collage."

Visual art therapies are art interventions designed to give participants an opportunity for creative expression through visual tasks, such as collage, clay modeling, and visual art analysis/cognitive assessment, with the goal of improving one's mental/cognitive and psychological well-being. A typical VAT session takes place in a group and includes socialization, art education/instruction, reminiscence, art processing, art sharing/ plenary presentation, and art analysis /cognitive evaluation.

The mechanisms by which VAT is believed to improve cognitive and psychological functions could be explained by 3 processes:

1. Stimulation of episodic memory, executive

function, abstract thinking, and working memory.

2. Cognitive stimulation mechanisms through learning concentration, attentive listening and engagement in the learning process. In addition, art practice stimulates fine motor skills, coordination, visual spatial memory, abstract thinking and executive functions, while plenary story sharing related to one's artwork stimulates language skills and self-expression, recall, abstract thinking, executive control, satisfaction and self-confidence.

3. Social stimulation mechanisms occur through interaction with other participants, sharing of skills and artwork, and mutual feedback, resulting in reduced loneliness, increased social connectivity, and improved mood.

Visual art therapies have been widely used among the elderly with normal cognition and those with dementia with the goal of delaying cognitive decline and/or improving cognitive function and psychological well-being.

C.1 Visual art therapy Benefits

Visual art therapy allows patients' involvement in planning, creativity, verbal expression, decision-making, cognitive control and abstract thinking. It also enables the creation of a positive social relationship with the therapist and other patients, thus promoting the individual's psychosocial

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well-being. The process of creating the artwork, depending on the method used, can also lead to spontaneous re-experience, resolution and reintegration of the patient's inner emotions and conflicts.

The application of visual art therapy has proven to be very useful in the prevention and management of cognitive decline, especially in cases of dementia. In general, it, when used in conjunction with exercise, allows for a promotion of well-being and mood in the elderly population in general.

The goal of the therapy is to utilize the creative process to help people explore self-expression and, in doing so, find new ways to gain personal insight and develop new coping skills. The creation or appreciation of art is used to help people explore emotions, develop self-awareness, cope with stress, boost self-esteem, and work on social skills.

C.2 Visual art therapy Techniques

Techniques used in visual art therapy can include:

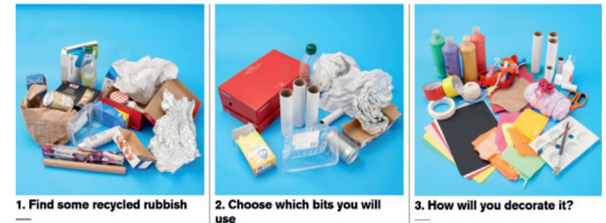
- Collage
- Doodling and scribbling
- Finger painting
- Photography
- Sculpting
- Working with clay

Example of practical exercise: make a sculpture with recyclable material

Purpose: to allow the patient to express what they feel.

Materials: everyday objects in the home that are reusable, such as plastic bottles, paper kitchen rolls, egg cartons, etc.

Instructions: Ask the patient to create a small object at home with these materials and express how we feel about something that happened to us with a sculpture, for example. This is a good way to allow the patient to "get out" what they have inside that makes them feel sad, frustrated or angry.



D. DANCE/MOVEMENT THERAPY

Dance/movement therapy, or DMT, is the psychotherapeutic use of movement to promote emotional, social, cognitive and physical integration. DMT is in fact defined by the European Dance Movement Therapy Association as "the therapeutic use of movement to promote the emotional, cognitive, physical, spiritual and social well-being" of the individual.

Dance/movement therapy, addresses not only the body, but also the mind and spirit, and is therefore a powerful and effective way to help

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older people access a vital sense of self. Dance, in this case, is not about form, technique or correct steps. Rather, it is about a shared experience of humanity and connection, manifested in movements as small as a tapping of toes, a sway of the shoulders or a slight change in attitude.

Some of the biggest challenges facing the elderly are isolation, physical inertia and loss of independence. While it is important to honor the natural slowing and physical decline that occurs with aging, it is also sometimes helpful to respectfully interrupt this inertia with activities that promote meaningful engagement.

D.1 Dance/movement therapy Benefits

DMT can give people:

- physical benefits, such as increasing strength, improving flexibility, decreasing muscle tension and enhancing coordination, all of which can be of particular benefit to the elderly;
- mental health benefits, including reducing stress and even alleviating symptoms of conditions such as anxiety and depression, which are very prevalent in the elderly.

The therapeutic effects of dance-movement therapy have been demonstrated for people with severe mental illness. Many studies have

examined the application of DMT as a therapeutic treatment for a range of conditions, including cancer, dementia, depression, and schizophrenia.

Exercises of a cardiovascular nature such as running, walking, and aerobics have been shown to improve cognitive abilities and executive and motor functions in the elderly.

Dance, like cardiovascular exercise, appears to be beneficial for the elderly. It differs from exercise because it provides a richer environment for rehabilitation and therapy. Dance interventions, in fact, not only include physical activity or exercise but also include learning, attention, memory, emotion, rhythmic coordination, motor coordination, balance, gait, visual-spatial skills, auditory stimulation, imagination, improvisation, and social interaction. Improvements in all these areas naturally bring improvement in an individual's overall well-being. In addition, it has been shown how dance can be a means of promoting social interaction for the elderly.

D.2 Dance/movement therapy Techniques

Some of the dance techniques that dance therapists can use are:

- Mirroring, which involves matching and echoing another person's movements. It can be a way to help people feel more connected

to others and create feelings of empathy. A therapist may mirror a client's movements, or have clients mirror one another, allowing participants to see a reflection of themselves.

- Movement Metaphors. Using a movement metaphor or prop can help a person physically and expressively demonstrate a therapeutic challenge or achievement. For example, a therapist may give a person in treatment a white flag to celebrate emotional surrender.

- Jumping Rhythms. Therapists may incorporate jumping into a dance for clients experiencing depression, having a research shown decreased levels of vertical movement in people with depression.

E. MUSIC THERAPY

Musical interventions can be of different kinds: listening to live or recorded music, participation in singing or playing instruments, music therapy, and the combination of music and movement. Some of the most common problems of the elderly are understanding speech in the presence of background noise and the decline of auditory working memory with age. It has been shown that musical training and participation can be a remedy for both problems. In fact, it has been observed that musicians not only can more easily hear

speech in the presence of noise in old age, even as hearing declines, but also have better memory. For musical performance, in fact, both auditory and motor patterns and sequences need to be memorized. Thus, it can be argued that a lifetime of music promotes improved hearing in noise, auditory memory and biological processing of sounds.

E.1 Music therapy Benefits

Music therapy, therefore, is aimed at helping the elderly in the areas of hearing and memory, but also at improving communication skills, cognitive function and physical health.

Music therapy has also been found to be very useful in helping dementia patients, particularly in managing certain behaviours, such as reducing agitation or aggression and increasing alertness.

Numerous studies have also shown that Alzheimer's patients retain musical skills and memory for much longer than other communication and cognitive skills.

In general, they have been shown to be helpful in reducing some negative behaviors associated with dementia, including aggression, agitation, anxiety, depression, and wandering. Sometimes they have also led to improvements in cognitive faculties (particularly memory and language).

E.2 Music therapy Techniques

Some examples of music therapy techniques are:

- Analytical music therapy, which encourages the patient to use an improvised, musical "dialogue" through singing or playing an instrument to express the unconscious thoughts, which the patient can reflect on and discuss with his therapist afterward.
- Benenzon music therapy, which combines some concepts of psychoanalysis with the process of making music. Benenzon music therapy includes the search for your "musical sound identity," which describes the external sounds that most closely match your internal psychological state.
- Cognitive behavioral music therapy (CBMT), which combines cognitive behavioral therapy (CBT) with music. In CBMT, music is used to reinforce some behaviors and modify others. This approach is structured, not improvisational, and may include listening to music, dancing, singing, or playing an instrument.
- Community music therapy, which is focused on using music as a way to facilitate change on the community level. It's done in a group setting and requires a high level of engagement from each member.
- Nordoff-Robbins music therapy (also called creative music therapy), which involves playing an instrument (often a cymbal or

drum) while the therapist accompanies using another instrument. The improvisational process uses music as a way to help enable self-expression.

- The Bonny method of guided imagery and music (GIM), for which classical music is used as a way to stimulate the imagination. In this method, the patient explains the feelings, sensations, memories, and imagery he experiences while listening to the music.

- Vocal psychotherapy, for which the patient uses various vocal exercises, natural sounds, and breathing techniques to connect with his emotions and impulses. This practice is meant to create a deeper sense of connection with yourself.

As seen, music therapy may involve:

- Making music
- Writing songs
- Singing
- Dancing
- Listening to music
- Discussing music

This form of treatment may be helpful for people with depression and anxiety, and it may help improve the quality of life for people with physical health problems. Anyone can engage in music therapy; you don't need a background in music to experience its beneficial effects. During a music therapy session, you may listen to different genres of music, play a musical instrument, or even

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compose your own songs. You may be asked to sing or dance. Your therapist may encourage you to improvise, or they may have a set structure for you to follow.

Example of practical exercise: draw what you hear

Purpose: to arouse certain emotions in the patient and get him or her to express what he or she is feeling.

Materials: a worksheet provided by the tutor and a pen or pencil.

Instructions: The therapist lays out several pieces of music to the patient and asks him or her to pay attention to each one. In the next step, the patient is given a worksheet (illustrated below), where he can write or draw what listening to the various songs elicited in him. So, ask him to talk about what he wrote I drew, thus about the emotions he felt while listening to each song.

Sample Worksheet

Song 1 ----- ----- -----	Song 2 ----- ----- -----	Song 3 ----- ----- -----
Song 4 ----- ----- -----	Song 5 ----- ----- -----	Song 6 ----- ----- -----

F. DRAMA THERAPY

Dramatherapy uses theatrical and/or dramatic techniques, combining them with psychotherapeutic methods, to offer new

ways of expressing what you think or feel, to deal more effectively with behavioural and emotional problems. Dramatherapy is one of the creative arts therapies (CAT), is active and experiential, and involves the intentional and systematic use of theatrical and dramatic processes as the primary means of achieving psychological growth and change within a psychotherapeutic relationship. In drama-therapy sessions, individuals explore their life experiences in depth through dramatization techniques, fantasy, and imagination to enter into a character and tell a story. Dramatherapy benefits the entire elderly population, from high functioning to those living with physical, emotional and cognitive difficulties, and it has also been found to increase group involvement and positive relationships during aging and promote better communication and a sense of trust among people with dementia. It is an active and experiential form of creative therapy that can help people gain self-confidence and explore new problem-solving skills.

F.1 Drama therapy Benefits

Drama therapy has been found to improve various facets of mental health while aging. It provides opportunities for personal growth and creative expression and enhances group

relationships. Drama therapy is a widely acknowledged way to explore the life stories in late life. It brings several benefits, such as:

- Reducing feelings of isolation
- Learn how to solve problems
- Express their feelings
- Setting goals
- Relate better to other people
- Better understand themselves and their experiences
- Improving self-esteem and self-worth
- Develop better coping skills
- Expanding the range of expression of emotions
- Use creativity, imagination and play o practice responding to difficult situations.
- Getting to grips with problems quickly
- Escape the pressures of life for a while and take refuge in imagination
- Interact with others in a safe and comfortable environment.

Through drama therapy, one has the opportunity to tell one's story and change it, as well as to look at problems from a different perspective, express one's emotions or deal with emotions related to certain memories or ongoing situations.

F.2 Drama therapy Techniques

Depending on the therapeutic goals, drama therapy can take different forms and include a variety of techniques, including:

- Drama exercises
- Acting
- Improvisations
- puppetry
- Role-playing
- Storytelling
- Theatre games

G. GOOD PRACTICES IN ART THERAPY

Art therapy follow different orientations and theories, such as psychodynamic; humanistic (phenomenological, gestalt, person-centered); psychoeducational (behavioral, cognitive behavioral, developmental); systemic (family and group therapy); as well as integrative and eclectic approaches. There are also various variations in individual preference and orientation by art therapists (Van Lith, 2016). The art therapist may facilitate positive change in psychosocial problems through both engagement with the therapist and art materials in a playful and safe environment.

Indeed the use of art therapy for the treatment of mental health conditions represents a field of growing interest (e.g., Van Lith, 2016; Haeyen et al., 2018). The practices review shows some common points that it's necessary to consider in the design and implementation of art therapy sessions:

- Is it a group activity?

It is important to start with energizers and motivation activities

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- Which method to use?

There are several different activities and techniques depending on the goals to be achieved and the benefits to be produced in the patient.

Best practices can direct the practitioner to the most appropriate choice.

ArTeA Polysign Model art therapy, for example, is a therapeutic intervention-treatment or prevention-that uses artistic mediums such as painting, drawing, sculpture, photography, video, and generally any expression of figurative art as a means of communication and therapeutic negotiation.

The image created by a person allows, through a specific decoding procedure, to visualize the structure of that person's thought and imagery: working on the rendering and shaping of images created by someone, therefore, means accessing his or her imagery and through it supporting him or her in an evolutionary process. The Polysign Model developed by Master Achille De Gregorio, president of the Artea - Arteterapeuti Associati Association consists of three phases:

1. First phase, called Observation: the user experiments with techniques and materials until he finds the one that best suits his expressive needs.
2. Second phase, called Treatment: once the problem that the person brings to the atelier

has been identified and their mode of expression found, the art therapist directs the elderly person toward an original expression of the Self.

3. Third phase, called Verification: this is the complete analysis of the productions, the relationship created and the content addressed in the course, all monitored and decoded in the Art Therapy Folder.

The assumption from which art therapy starts is that the activation of the creative process in the individual entails in turn an activation of important psychic and psychological processes, so that every change in creative potential corresponds to a transformation in the cognitive, emotional and behavioral spheres.

The task of the art therapist is to accompany the user in the discovery of artistic "making" and in supporting with verbalization, in an appropriate setting, the awareness of what is expressed in the artistic form. Fundamental is the artistic medium that allows the realization of a lasting product. The art therapist decodes the message the user gives through the work, which contains information regarding various aspects: of relationship, psychological content, emotional experience, and formal realization. The Module also presents examples of effective Art Therapy Sessions.

3.1 Total duration of module

The duration of the Module is different for:

- Classroom Training: 32 hours distributed in:
- Art Therapy Application Methods by Specific Arts: 24 hours (3 fields)
- Good practices in Art Therapy: 8 hours
- Online Training: 48 hours distributed in:
- Art Therapy Application Methods by Specific Arts: 40 hours
- Good practices in Art Therapy: 8 hours

3.2. Tools and materials

Tools and Materials change according to the different Art therapy methods used.

It is important to consider, in each session, the specific list of tools and materials required.

An important point is also referred to the

- Examples of art materials that can be used one time and kept by the client, or thrown away, are:

Textiles, Canvas, Single-use packaged clay, Paper, Cotton swabs, Paint, Craft sticks, Chenille stems, Yarn

- Example of supplies that can be used repeatedly but must be disinfected are:

Markers, Scissors, Coloured pencils, Paintbrushes, Needles, Knitting/crochet tools

4. Benefits of the module

At the end of the module, the learner will know:

- the benefits of art therapy, particularly for seniors;
- the various types of art therapy (of drawing and painting, other visual arts, dance and movement, music and drama),

their applications, techniques and methods, and their specific benefits;

- some activities (one for each area of art therapy) to be carried out online or in the classroom, particularly with seniors, including the material needed, its purpose and steps to be followed step by step;
- good practices needed to become a knowledgeable art therapist and to plan and implement an effective session.

4.1. Skills

The skills acquired at the end of the module will be:

- ability to perform art therapy techniques, in its different forms (drawing, painting, visual arts, music, dance and movement, drama), on elderly patients. In particular, students will be able to reproduce the exercises proposed in the module and will have the necessary knowledge to apply new techniques.

4.2. Knowledge

The knowledge gained at the end of the module will be:

- know the theoretical foundations of art therapy, its techniques and benefits, particularly for the elderly;
- know the theoretical foundations of the various forms of art therapy (drawing, painting, visual arts, music, dance and movement, drama), their specific benefits for the elderly, and the various techniques that can be applied with the elderly;
- know the practical applications of the various forms of art therapy for the elderly;

- know some rules and cautions to be followed in the application of art therapy for the elderly.

4.3. Competences

The competences the student will acquire at the end of the module are:

- Intervene in the multiple areas of psychopathology using the methodology and techniques best suited for the elderly;
- Enhance the user's work by preparing a final moment of comparison and sharing of the experience;
- Know how to use the content that emerged in the user's artistic work;
- Knowing how to comply with rules and regulations;
- Knowing how to enter into relationships with family members in order to facilitate communication in case of moments of difficulty for the patient;
- Design the interventions to be implemented in order to customize the activity according to the type of user, pathology and any characteristics and needs of the patient;
- Prepare the environment and art materials in such a way as to foster the creative process and therapeutic relationship, setting up appropriate tables and structures also to store and protect folders containing the patient's work.

5. Application Instructions

In addition to its use in the treatment of mental health, art therapy is used in a complementary way to traditional medicine for the treatment of biologically based diseases and conditions. The correlation between mental health and physical health is now well known, and art therapy can benefit both. Indeed, it has been used in the healing process to relieve stress and develop coping mechanisms in an effort to treat both the physical and mental needs of the patient. Although art therapy has traditionally focused on visual media (paintings, sculptures, drawings, etc.), the concept has expanded to now include music, dance, writing and drama. The benefits that different forms of art therapy can bring, in the lives of all patients and, in our case, the elderly in particular, are:

- Improved cognitive function. Art therapy challenges the elderly to create art and thus stimulate the senses to sharpen them. This improves thinking ability and facilitates the creation of rapid neural connections that may have been lost due to aging.
- Improved mood. Art therapy can reduce feelings of anxiety, depression and stress in the elderly. Such feelings may also result from the natural gradual loss of vision and hearing due to aging. Focusing on drawing helps those

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who are struggling to relax and focus on positive feelings. Engaging in art therapy can help the elderly cope better with these problems and give vent to their frustration.

- Improved motor skills. When people practice skills such as, for example, painting, drawing or dancing in art therapy, they physically exercise their hands and arms through movement. In this way, they can improve muscle coordination and increase blood flow.

- Increased social interaction. Art therapy sessions allow seniors to meet people with whom they can interact and make connections. These connections can help them combat loneliness and isolation and improve their emotional health.

- Increased self-expression. Elderly people often have difficulty with verbal communication due to mental or physical deterioration. Art therapy is an alternative method of expression for their feelings and thoughts.

- Relieving grief. Art therapy can also help with disorders associated with chronic pain. Indeed, it allows people to focus more on creativity and less on pain. Art therapy also promotes relaxation, which can help relieve emotional pain.

- New thought processes. Art therapy can also help people think differently about life. In fact, exploring new movements and thoughts can help older people revise their perspectives

and find new joy.

- Memory enhancement. Practicing the creative arts can help seniors suffering from memory loss due to dementia or Alzheimer's. Painting and music can even help uncover forgotten memories and offer those suffering from memory loss a moment of clarity and the ability to function optimally.

Art therapy can be very rewarding for the elderly: it can promote healthy and positive feelings, improve physical abilities and have a calming effect. Through the fun of creation, the elderly will enjoy a better quality of life.

Knowing your role and duties before you start teaching is a very important step in preparing yourself to teach.

Common duties for a tutor include:

- Leading tutorial sessions
- Conducting laboratory sessions
- Marking assignments or other activities.

Based on learners feedback, a good tutor can be described as someone who:

- is enthusiastic;
- is available and accessible for explanations or advice;
- is very humane and creates a welcoming environment;
- is confident, organized and knowledgeable;
- conveys positivity and confidence to learners;
- is practical about course topics, details, and organizational issues;

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- can be clear and explanatory about what the course is about, course materials, assessment criteria and expectations, and is available to provide clarification to individual learners;
- uses a variety of teaching and learning methods, adapting them to needs;
- knows how to choose the most addressed activities for the session;
- knows how to best use the knowledge and experiences of individuals in the group;
- knows how to manage group dynamics;
- makes communication between and with participants easy;
- knows how to ask the right questions to spark a discussion, but without dominating it;
- does not assume that people have prior knowledge in the topic, and therefore encourages them to ask questions to better understand it, even the simplest ones;
- is close to each person, takes an interest in each learner's progress, and provides constructive feedback;
- reflects on the progress of his or her work, what he or she has done well and what he or she has done poorly, striving for continuous improvement.

5.1 Precautions & Risk Assessment

Planning an art therapy session with elders must take into account some potential risks related to:

- Hazardous tools and materials
- Mental and physical limitations of the elderly person

It is therefore necessary, as emphasized above, to have a clear picture of the context in which the activity, whether individual or group, is to be carried out, taking into account:

- Available spaces
- Presence of supportive staff or caregivers
- Adequacy of the activities to the capabilities of the recipients
- Degree of safety of the tools and materials used

Sometimes, people with dementia may have difficulty initiating an activity, and if you help them get started, they'll be able to continue on their own for a while.

It's important to remember, when encouraging creative engagement, the focus is on enjoyment and process, not achievement. Often asking for someone's help, being mindful not to over tax a person, can fill an important void and provide a reason to engage. In addition, art making can be relaxing, reduce feelings of stress or anxiety, and can benefit individuals and caregivers alike.

5.2. Suggestions for the application of modules

There are some suggestions that can be followed in applying the various art therapy methods and activities. These suggestions come from the best practices prevalent in the world and are useful in getting the most out of art therapy sessions (in any field of art

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therapy) thus increasing the benefits that the patient can derive from them.

Thus, here are some important suggestions:

1. After assigning the patient an art task, it is important to let the patient work freely, without interrupting or asking questions. Simply observe the patient during the process of doing the artistic task.

2. If the patient says he cannot do something, encourage him to try for at least another five minutes.

3. Once the project time is up, start by asking the patient if there is anything he would like to share about his work, the process of making it, what he likes or dislikes or would change, etc.

4. Remain client-centered, so focus on the client's associations and projections.

5. Pay attention to the therapist's associations, avoiding them at all costs unless they add value or feed into the life of the material.

6. Make neutral observations about the work, rather than praise or criticism (e.g., about shape, size, use of space, focal point, what's in the border, what colors are used).

7. Emphasize emotional content and process rather than focusing on how the work came out or its specific content.

8. Use third-person language such as "what is that person/animal/character doing?" versus "what are you doing?"

9. Identify metaphors and use them, play with them to go deeper into the patient's emotions.

10. Ask questions that can help the patient tell the story from which his or her work stems. For example, "If you were to enter this image, where would you go? What would you do?"

11. Avoid questions such as, "Why did you do this?" The patient is very likely to have difficulty answering these kinds of questions. It is better to ask if what he did has a specific meaning.

12. Ask the patient to look at what he has created at the end of the work and whether it meets his expectations. If not, ask him how it is different from what he intended to make. This is important because sometimes the meaning of these differences between what you expected to create and what you actually created can be a message from the unconscious.

13. Respect the patient's work and involve him in all decisions about what to do with his art. So, if the patient would like to keep his work, it is right to keep it safe and exhibit it only with his permission.

5.3. Notes for the tutor

Things to Consider

If you or someone you love is thinking about art therapy, there are some common misconceptions and facts you should know.

You Don't Have to Be Artistic

People do not need to have artistic ability or special talent to participate in art therapy, and people of all ages including children, teens, and adults can benefit from it. Some research suggests that just the presence of art can play a part in boosting mental health.

A 2017 study found that art displayed in hospital settings contributed to an environment where patients felt safe. It also played a role in improving socialization and maintaining an identity outside of the hospital.

It's Not the Same as an Art Class

People often wonder how an art therapy session differs from an art class. Where an art class is focused on teaching technique or creating a specific finished product, art therapy is more about letting clients focus on their inner experience.

In creating art, people are able to focus on their own perceptions, imagination, and feelings. Clients are encouraged to create art

that expresses their inner world more than making something that is an expression of the outer world.

Art Therapy Can Take Place in a Variety of Settings

In patient offices, private mental health offices, schools, and community organizations are all possible settings for art therapy services. Additionally, art therapy may be available in other settings such as:

- Art studios
- Colleges and universities
- Community centers
- Correctional facilities
- Elementary schools and high schools
- Group homes
- Homeless shelters
- Hospitals
- Private therapy offices
- Residential treatment centers
- Senior centers
- Wellness center
- Women's shelters

If specialized media or equipment is required, however, finding a suitable setting may become challenging.

Art Therapy Is Not for Everyone

Art therapy isn't for everyone. While high levels of creativity or artistic ability aren't necessary for art therapy to be successful, many adults who believe they are not creative

or artistic might be resistant or skeptical of the process.

In addition, art therapy has not been found effective for all types of mental health conditions. For example, one meta-analysis found that art therapy is not effective in reducing positive or negative symptoms of schizophrenia.

6. Suggestions for the development and further application of the modules

Nowadays, people are always looking for new and different ways to relieve stress. Art therapy is emerging as a useful tool for improving mental health, as it involves mind, body and spirit and allows people to express their thoughts and difficulties in alternative ways. Some of the main reasons for its use include the need for improvement of cognitive and sensorimotor functions and social skills, promotion of self-esteem and self-awareness, cultivation of emotional resilience, promotion of insight, and reduction and resolution of conflict and distress.

According to research conducted on art therapy, active engagement in art-making actually helps patients achieve social, emotional, educational and mental health goals. However, still many steps need to be taken from traditional medical care to the wider use of art in health care. Indeed, the creative process and personal expression can

come into play at the patient's bedside, in waiting rooms, lobbies, elevators, and even parking lots.

Art therapy is thus a tool that still deserves further research, use and exploration.

It has, in fact, in addition to the benefits listed so far, also been shown to succeed in encouraging multidisciplinary collaboration. That is, art therapy leads to collaboration between different professions that generally do not work together (nursing, medicine, occupational therapy, science) in order to design the best plan for the patient and his or her caregivers. Other options refer to the implementation of art therapy sessions for elderly caregivers to help them express their feelings, relax, and overcome the trauma of loss.

Module 4 – Specific Art Therapy Applications

1. Concepts and information about modules
Module 4 explains how art therapy may be used with certain affective disorders or pathologies in order to restore a person's functionality and offer new ways of managing emotions and inner reflections to re-establish homeostasis. Also, practical activities are offered as examples, which may be applied exactly as described, adapted for the specific cases or may just serve as inspiration to develop other exercises and activities with similar impact.

Keywords: self-knowledge, self-awareness, trauma, anxiety, grief, loss.

2. Aims of the module

- In terms of knowledge, the module is aimed on helping the learners:
 - o to define the concepts of self-knowledge, trauma, anxiety, grief and loss;
 - o to learn about the specificity of emotions.
- In terms of skills, the objectives of the module are:
 - o to initiate self-reflection and deepen self-knowledge;
 - o to reorganize traumas, anxiety and other overwhelming emotions.
- In terms of competences, the aims of the module are set on:
 - o specific art therapy practice to deal with trauma;
 - o specific art therapy practice to deal with anxiety;
 - o specific art therapy practice to deal with grief and loss.

3. Content and Structure of the Module

The content of the module will be divided into 4 units:

1. Self-knowledge study
2. Trauma focused art therapy
3. Anxiety focused art therapy
4. Art therapy for grief and loss

Unit 1. Self-knowledge study

In terms of psychology and psychotherapy, self-knowledge or self-awareness is often

defined as the ability to engage in some kind of reflective awareness. As one develops a certain level of self-awareness, that person will begin to connect with his/ her own unique identity, will have a more accurate perspective of own resources and limits, will be able to better evaluate his/ her own behavior in comparison with internal standards and values and will become more self-conscious. A person with a high level of self-knowledge will be able to engage in suitable activities, will be more decisive regarding when to take risks and when to step down, will initiate more functional relationships with the others and will be able to handle and communicate his/ her own emotions in a more functional way.

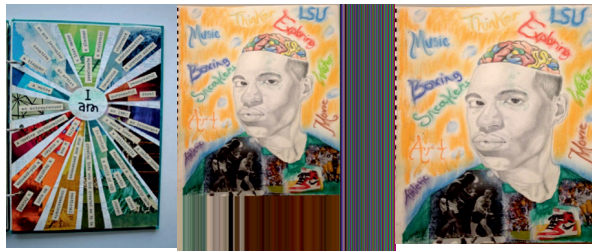
The plethora of self-knowledge activities used in different contexts may use different techniques and are not limited to art therapy techniques, but this unit will give the learners the opportunity to engage in such self-reflection and get to know more about themselves, by using art therapy techniques. Any practical exercises and activities that are relevant for the group may be included here, as long as they bring a new perspective upon the self and help them discover who they really are at core level and what. We have included here some examples that may be used or adapted accordingly.

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Activity 1 – Create an art-journal page which reflects who you are

Art-journaling is an activity which allows the learner to use any visual art techniques (drawing, painting, collage etc.), but also writing, to create pages on any given topic (see below some examples of art-journal pages).

In this case, the topic is a general one, but it may also be reformulated in a more specific manner (see below the list of questions/ topics which may trigger self- knowledge).



- What does your ideal "You" look like?
- What are your dreams and goals?
- What does your "Courage" look like?
- What are your core beliefs/ values?
- What makes you a unique person/ a good friend?
- What is your biggest strength/ weakness?

Activity 2 – Create a dramatic role play to reflect the role you had/ have in your family

Drama and role play are therapy techniques in which the persons involved are experiencing feelings, thoughts, actions that may trigger personal insights. In this case, dramatic experience may be used to guide the self-knowledge.

Participants are asked to choose a few persons

from the group to help them recreate a scene of their family present or past life that best reflects the role they had/ still have in their family of origin. They should remain outside the scene, as a director at first, and choose somebody else to play their part. The group facilitator might ask the person to switch places in turns with different other members of the family and then explain to the group what are the feelings, the thoughts etc. of that person – this exercise is very helpful in gaining new perspectives upon a situation and practicing empathy.

Activity 3 – Using body paints, draw the personal resources that you see in others

There are always things that one person knows about oneself and which the others are not seeing, but there are also things that the others see about the person and that the person cannot acknowledge. In this respect, this exercise is focusing on the things that others are seeing and may point out about a person, in order to help that person reach a higher level of self-knowledge.

The exercise may be done in small groups or in pairs. Participants are asked to use body paints and draw on the other's person skin one personal resource (one strength) that they have noticed in the other person. The person who receives the body "tattoo" is then invited to interpret it and explain what he/ she thinks of the self by reflecting the inability

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it means and, afterwards, the author of the body art will also explain what he/ she did and why he/ she believes that the body "tattoo" is representative for the other person.

Unit 2. Trauma focused art therapy

Trauma is an experience or a chain of repeated experiences of high emotional distress, which destabilizes the usual balance and inadequacy of a . Trauma is often a generic term used for exceptional harmful or painful experiences, like physical or sexual abuse, childhood neglect, natural disasters or accidents, death of a loved one, war etc., but it is not limited to those and not always a traumatic experience is so obvious as in the cases mentioned above. Often, the traumatic experiences of a person may not be so exceptional and may not seem as traumatic to another individual. For instance, the loss of the favorite toy, children's gossip or falling in love with another who does not respond with the same affection may also be traumatic. Thus, trauma is not about the experience in itself, but about the degree of emotional impact that the experience has upon the inner equilibrium.

Trauma is often all-consuming and it may impact every facet of a person's life, including their career, relationships, self-esteem, sleep patterns, physical health and the ability to

function in society. If not addressed properly and timely, it may also lead to more severe disorders, like acute distress disorders, post-traumatic stress disorder, panic attacks, anxiety, depression, obsessive-compulsive disorder, eating disorders, alcohol or drug addictions etc.

Art therapy applied in trauma cases offers the advantage that people may express themselves without having to verbalize their emotions, they may heal their pain even though they don't recognize it consciously or they don't feel empowered enough to relive it.

Activity 1 – Draw/ paint a boat at sea, a storm and a lighthouse and reflect upon you as being the passenger on the boat

The three elements of the drawing are symbolic and the therapeutic effect emerges not just from the drawing/ painting process itself, but also from the discussion which should follow and the reflection of the person upon being the passenger on the boat. Here are some ideas how to lead that discussion:

What does the storm look like? How does it make you feel?

Do you feel alone? Is there anybody else with you on the same boat?

What resources do you have that could take your boat to the shore?

Who is guiding you or has the potential to guide you from the lighthouse to reach the shore? Who would you ask to help you?

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What actions you need to take in order to get to safety? Will it be hard or easy to get to shore? What would make it easier on you?

Activity 2 – Choose a song that inspires you to be strong and confident and dance your way to strength and confidence

Music and dance are therapeutic per se, but using the body to express a certain state of mind or emotion has a strong effect upon the mind and may induce that feeling or conviction. People dealing with trauma often feel defeated and lack confidence, so getting them to experience empowerment and confidence with their body in a dance has the potential to change their perspective and help them overcome their vulnerability caused by the traumatic experience.

Unit 3. Anxiety focused art therapy

Anxiety is a feeling of worry, uneasiness or fear which may occur in a situation that is not well-defined, that is out of the ordinary and of which the outcome may not yet be predicted. Everybody may feel anxious in such situations. Anxiety disorder on the other hand is a condition in which people may experience intense, excessive and persistent worry and fear in everyday situations. In such cases, the emotional response of a person is disproportioned in relation with the situation. Art therapy techniques may be used to help express and relieve the anxious feelings and

cultivate calm and tranquility. When one is focused on creating, his/ her attention shifts away from worrisome ruminations. Thus, the nervous system will begin to regulate and will make room for other emotions and thoughts. Also, because art therapy supports nonverbal expression of emotions, it helps the anxious person to move away from the inner spoken thoughts and contributes to structure a more general view of the situation.

Activity 1 – Anxiety expressing itself

Ask the participants to close their eyes, breathe deeply a few times and get in touch with the feeling of anxiety they feel in their body. Then, after they had a grasp of the feeling, with their eyes still closed and without thinking too much, they should start scribbling on a blank paper taped down to the table a continuous drawing without lifting the pencil from the paper, just as the anxiety would express itself on the paper. The movement should stop when the expression of the feeling would stop. The participants are then invited to look at the drawing, turning also the page if necessary, and try to find a meaning for it, by continuing to develop the drawing. As soon as the drawing is complete, the participants are invited to imagine a dialog with the anxiety on the paper. This helps them understand it better, as most of the times the anxiety is just a defensive mechanism that protects the person. The activity may also be adapted to working with clay instead of drawing.

Section: 2 Modules

Activity 2 – Make a collage of calm and safety

The purpose of the exercise is to create a visual reminder of a "safe place". The participants are directed to close their eyes, take a few deep breaths and remember a time and a place in which they felt safe and relaxed. They are then invited to create a collage of it with various materials at hand. After the collage is finished, they may present to the group and imagine themselves as being in that place.

Unit 4. Art therapy for grief and loss

Grieving is the natural response to the loss of someone dear. Even though people process loss differently, some grief symptoms are common in the majority of cases: sadness, loneliness, fear, crying, intrusive thoughts and memories, hopelessness, numbness. Most people tend to isolate themselves from others while grieving, thus the feelings may actually get amplified by that.

Just like in the other cases of overwhelming emotions, art therapy has the potential of facilitating the expression of emotions and reduces their intensity, while triggering exploration of underlying feelings associated with loss. It also may help people connect with each other and fight the hopelessness and loneliness together, especially if conducted in a group.

Activity 1 – Have a conversation with the person you have lost (the empty chair technique)

It often happens that the person grieving feels there are still things left unspoken to the lost one. This technique uses drama improvisation in order to help the person that grieves to unload the burden of unspoken things and find relief. The technique is more suited for an individual approach, but it may also be adapted to group work, if conducted as an imagination exercise, without exposing the grieving person to the group.

Have the person remember the appearance of the lost one and imagine that the lost one will take a seat in front of him/ her (have an empty chair there) right now. Guide an imaginary conversation with the lost one:

- What would you like to say to your dear one? Is there anything you would like to ask? What would you like him/ her to know?
- What do you think that your dear one would say? What do you think his/ her words would be in reply to your question?
- What would you like your dear one to remember from this conversation? What is that you will take with you from this conversation?

Activity 2 – Make a present for the one departed

Any art therapy technique may be utilized for this, as the point of the activity is to help the grieving person to cope with the loss and say farewell in a nonverbal, artistic manner: it may be a drawing, a painting, a collage, a clay representation, a bead or sand work, a music composition or a dance etc. – there is no

wrong art technique for this. If the task is given to a group, a step in which the grieving person describes the gift and explains to the others why he/ she chose to make it in a specific way might be added.

3.1. Total duration of module

The total duration of the module will be 16 hours, divided into 4 hours per unit.

3.2. Tools and materials

According to the structure of the training, the tools and materials needed to teach this module are:

- laptop, video-projector, projection screen;
- writing board, flipchart;
- PowerPoint presentations, worksheets, photographs, educational videos;
- the curriculum, further reading resources;
- forums and discussion boards for the online environment, Goggle Drive or similar collaborative tools.

The tools and materials needed to put to good use the activities exemplified previously are according to the way they are implemented and adapted, but in general you will need:

- colored pencils, colored felt-tip pens, painting materials (colors, brushes, palettes etc.);
- papers, cardboards, canvas;
- glue and variety of collage materials;
- body paints;
- theatre props;

- music;
- clay, sand, beads, seeds.

4. Benefits of the module

Art therapy has a very versatile range of techniques which may be used for so many purposes. Understanding at least a few of its utilities offers to the learners a pretty accurate perspective upon this set of methods. Also, learning about how to use art therapy in certain specific cases helps the learners make the connections and transfer the knowledge to other types of cases if necessary.

4.1. Skills

The learners of this module will in the end be able to:

- o initiate self-reflection and deepen self-knowledge;
- o reorganize traumas, anxiety and other overwhelming emotions.

4.2. Knowledge

The learners of this module will in the end be able to:

- o define the concepts of self-knowledge, trauma, anxiety, grief and loss;
- o learn about the specificity of emotions.

4.3. Competences

The learners of this module will in the end be able to:

- o apply specific art therapy techniques to deal with trauma;

o apply specific art therapy techniques to deal with anxiety;

o apply specific art therapy techniques to deal with grief and loss.

5. Application Instructions

This module can be applied both online and offline, either in a group or individually. The various activities and techniques exemplified offer the opportunity to adapt to a variety of needs and specific cases.

5.1. Precautions & Risk Assessment

Please take into account that all the topics addressed in this module are sensitive and people are more vulnerable in these situations compared to other sessions in which art therapy may be applied. Ensure an emotional safe space for all the activities in this module before you put them into practice. Instruct the group not to judge, but to protect and support the vulnerable people.

5.2. Suggestions for the application of modules

The first unit of the module is an experiential one. Participants should be involved in self-knowledge exercises themselves in order to be able to fully understand their dynamics and learn to apply them. The other units may also be covered through self-study, but keep in

mind that experimenting with different techniques in specific cases helps gather experience and a more wide perspective upon the topic.

5.3. Notes for the tutor

Take into consideration the specific cases you are working with and adapt the activities and techniques to the people's capabilities and needs.

6. Suggestions for the development and further application of the modules

Section 3: Conclusion and Feedback

1. Receiving and giving feedback

Training, whether formal, non-formal or

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Informal, is a systematic, planned and controlled process aimed at changing concepts, skills and attitudes in individuals and groups. It is intended, in educational terms, that the trainees learn something that is taken as useful and it is expected that they are the ones to find use for the learning.

This dimension, in which the trainee finds use in the learning he is doing, has a direct impact on his degree of motivation, which, positively or negatively, determines his will and willingness to learn. In turn, motivation is determined, in part, by the satisfaction they feel in relation to the training and the trainer himself.

Therefore, it is imperative that an Assessment of the Degree of Satisfaction of the trainees is carried out, which allows us to understand if their expectations are being met and to conclude if the previously established training objectives are in accordance with what they expected.

The assessment of the trainees' degree of satisfaction also serves as a tool for the trainer to identify weaknesses and improve actions in the training in question.

In this context, evaluation questionnaires emerge as the most used tool, with the Likert-type scale (5 points) being the most common and the one we will use in our questionnaires.

The assessment areas that the questionnaire will target will be:

- The degree of achievement of objectives,
- The relevance of the contents;
- The trainer's intervention level;
- The quality of the pedagogical relationship established;
- The effectiveness of the teaching methods adopted;
- The suitability of the materials used.

The questionnaire will be brief, simple and objective in order to guarantee that the trainees will answer without objections and with honesty.

In order to facilitate data analysis, the same questionnaire will be used for all modules in order to avoid comprehension difficulties, both by the trainee and the trainer. At the end, after all trainees have completed the training, another questionnaire will also be administered to assess the degree of satisfaction, but transversal to all modules. It will, however, be of similar structure to all the others and of equal filling. Making this explanation more practical, the evaluation questionnaire will be made available to the trainer to be filled in by each trainee at the end of each module. The trainer must explain to the trainees that this questionnaire is used for the trainer to understand how best to help far the trainee was from the goals set

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them develop their skills and the most effective way to do so.

The estimated time required to complete the questionnaire will be 5 to 7 minutes and trainees should be informed of this. It should appeal to the honesty of the answers, reinforcing the idea that they will be an asset for the improvement of training.

Let's now talk about the importance of the learning carried out by the trainees, called Summative Assessment. Summative Assessment indicates that the trainers proceed to the assessment of knowledge and learning in order to understand the degree of apprehension of new knowledge, skills or behaviors acquired during the training by the trainees. This closes a learning phase, through the verification of the acquired knowledge, sanctioning the results obtained - in different ways - and rejecting the error (that is, considering it only, negatively, as a fault) Its main purpose is to determine how at the beginning.

Training is effective when it induces desired behaviors in the target population and this, in turn, translates into a desired outcome in their performance. There is no universally accepted assessment model, nor are there any ways of operating or rules of conduct accepted by all. Bearing in mind that this training can be given

in the classroom or via online, we will adopt a summative assessment of a multiple answer test in order to facilitate the verification of the results obtained by the trainee.

MULTIPLE CHOICE ANSWER

They consist of statements of a question or an incomplete statement (usually called a trunk or root), followed by several alternative answers. Of the various answers provided, only one is correct (the so-called answer, the rest being known as distractors). The trainer must make the test available to the trainees at the end of each taught module, informing that there is no time limit for carrying out the test, but that they must complete it without resorting to memory aids, being honest with themselves and with the trainer. The objective of this assessment is for the trainee to gain awareness of the quality of their work and to assess the effort to be expended. Makes the trainee aware of their own learning, by transforming mistakes into moments of problem solving. For the trainer, it is a key point that helps to decide, based on the results, the trainees' capabilities, thus helping their future orientation.

2. Evaluating trainee's feedback and success

After evaluating the degree of satisfaction of trainees with the training and the summative

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assessment of these trainees, it is necessary to systematize both. Therefore, the trainer will be provided with a table of 2 entries that will allow him to identify, for each module, the suitability of the training and the learning carried out, respectively.

Assessment of the Degree of Satisfaction

The Trainer will have access to a double-entry table in which he must mark the score of each trainee for each parameter evaluated. After completing the table, the trainer will add the points awarded by each trainee and also the sum of points per parameter. In this way, he will be able to easily identify which trainee is the least motivated or for whom the training does not correspond to expectations. He will also be able to identify the evaluation parameters that need to be improved.

Summative Assessment of Trainees

As this assessment is carried out through a multiple choice test, the trainer will have access to a grid with the correct answers for each item. He must go through each test performed by each trainee and mark whether the answer is correct or wrong. If the answer is wrong, and for the reasons already stated in point 1 of this section, the trainee should be allowed to repeat the learning module and retake the test so that it becomes an opportunity and not a failure. As in the

previous assessment, the trainer will also have access to a double-entry table, in which he must mark the correct or wrong answers of each trainee for each question, allowing the identification of the final score. The trainee will only be allowed to move on to the next training module if he/she answers correctly to at least 50% of the questions.

3. Improving your teaching

The evolution of training in recent years has increased the demand for courses and training actions, as well as the breadth of the context for the development of the Trainer's activity. The growing differentiation in terms of Training Intervention Modalities (b-learning and e-learning) sends the trainer to increasingly complex training networks. In this sense, it is imperative that special attention be given to the framework of the activity of future trainers; the contexts in which they intervene; the new challenges to which they are exposed (eg, more creative and entrepreneurial training actions); the structuring of training programs according to a model structure; and, development of competence-based training. Training actions are structured using certain methods and techniques frequently used in pedagogical situations.

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In order to make a correct selection and adaptation to the training action and target audience, it is necessary to understand the space that there is to develop the actions, the feedback of the trainees during the development of the training, and the interactions that are created between them. The demand of today's society regarding the use of multimedia products leads the trainer to adapt and develop their knowledge to be able to respond to a variety of requests, which often go beyond the scope of their academic and professional training. Thus, it is urgent that they develop new skills and master a set of techniques that allow, in the context of training, to convey all the information about the topics they are developing in an appealing manner. Multimedia presentations today assume a prominent place in the form of content transmission, which is why it is necessary to provide trainers with new skills in this area.

Another point to consider is the Communication and Promotion of Training Groups, as these are not always easy tasks for trainers. It is necessary to prepare these processes by not only thinking about the thematic context of

the training, but also giving special attention to the work group present in the training action. Increasingly, trainers have to deal with diversity, with conflicts between trainees and conflicts with the trainer. Acquiring and apprehending techniques and strategies that may characterize training groups and the factors that enhance situations of inequality are strategies for the trainer to anticipate problems, solve them and, at the same time, safeguard their role as the trainer. In this sense, the approach to Communication and its inherent variants in training (such as mediation, action strategies, motivation, conflict management, diversity management, among others) are one of the points with special importance in the training of future trainers.

The aim is to form innovative, creative individuals with a sense of multifunctional development and as such, the communicational side cannot be neglected. All communication, whether verbal or non-verbal, is important and essential for the effectiveness and efficiency of processes, in this case, training. It is also essential to instill in trainees

Section: 3 Conclusion and Feedback

concepts of creativity, entrepreneurship and differentiated learning, also giving them the pedagogical perspective of intrconnecting these concepts with learning. The introduction of creativity when designing/developing pedagogical methods and techniques and the importance of the relationship between the training group and the trainer opens the door to new content to be introduced. In conclusion, it is necessary to make trainers aware of the most appropriate techniques and resources to be applied in their training sessions, and to provide them with knowledge about the most appropriate ones to select them according to the different and sometimes adverse characteristics of the groups and contexts. of training

Section 4:

Appendix

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GLOSSARY

Ageism	Discriminatory attitudes against individuals or age groups based on stereotypes associated with older people.
Anxiety	Psychic state of apprehension or fear provoked by the anticipation of an unpleasant or dangerous situation and accompanied by symptoms of tension.
Arbitrary Color	Color chosen by the artist to symbolize an idea or to express a feeling. Opposite of optical color.
Archetype	A concept that represents the first model of something, prototype, or old impressions about something.
Art	Objects such as paintings, prints or sculptures made with creativity and imagination, often as a form of personal expression.
Art criticism	The process and the result of critical thinking about art. Art criticism involves the description, analysis and interpretation of art.
Automatism	The quality or state of being automatic. the moving or functioning (as of an organ, tissue, or a body part) without conscious control that occurs either independently of external stimuli or under the influence of external stimuli.
Behavior	Term that characterizes any reaction to the environment in which it is inserted.
Biography/ Autobiography	An account of someone's life written by someone else/ an account of a person's life written by that person.
Brainstorming	Technique for developing and sharing new ideas or solving problems, based on a discussion in which several people make many suggestions so that the best ones are chosen or a fusion of them.
Brush stroke	A mark made by a paintbrush drawn across a surface.
Canvas	A surface for painting.
Caregivers	Person who provides assistance on an ongoing basis, to an individual who is dependent or unable to perform some or all of their daily activities.
Catharsis	The process of releasing, and thereby providing relief from, strong or repressed emotions.
Chalks	A type of soft white rock used for writing and drawing on various types of surfaces.
Cognitive	Associated with the process of learning and developing knowledge.

Cognitive behavioral therapy	An approach to psychotherapy that understands the way in which human beings interpret events as what affects them, and not the events themselves.
Dementia	A slow and progressive decrease in mental function that affects memory, thinking, judgment and the ability to learn.
Depression	Clinical term for designating a mood disorder that is characterized by sadness severe or persistent enough to interfere with functioning and, often, to diminish interest or pleasure in activities.
Drama	A technique used in art therapy . Therapy associated with drama is one of the Creative Arts Therapies (CAT). It constitutes a modality of psychotherapy that involves the intentional and systematic use of drama/theater processes as a primary means of achieving psychological growth and change within a psychotherapeutic relationship.
Elderly	A person who lived for many years; the age considered old by the world health organization is established according to the socio-economic level of each nation; in developing countries, elderly people are considered who are 60 years of age or older. In developed countries, the age extends to 65 years.
Empirical experience	It refers to a type of evidence generated by observing things rather than scientific theories and methods.
Engagement	Being involved with something.
Episodic memory	Episodic memory is the memory of autobiographical events; collection of past personal experiences that occurred at a particular time and place.
Expression	It is the way the individual expresses himself in his treatment (purification/emotional discharge) so that he can experience the therapeutic process and it makes sense in his mental state.
Expressionism	An art movement often used in art therapy. It was inspired most heavily by the symbolist currents in late nineteenth century art.
Flow	That's when psychic energy is expended positively. For example: the self is compatible with information in consciousness, the self is considered sufficient, anxiety is disabled, internal and external attention increases depending on positive feedback for yourself, transformation occurs in the perception of time.

Frustration	Feeling of dissatisfaction or annoyance, usually caused by the non-fulfilment of a desire, an expectation, a need or an objective.
Grief	Deep feeling of sadness and grief caused by losses, usually associated with the death of someone, but can cover different contexts
Hazard	something that is dangerous and likely to cause damage.
Healing	The process of the restoration of health from an unbalanced, diseased, damaged or unvitalized organism. Psychotherapy literally means 'soul healing'. is considered one of the places of art in psychotherapy and psychiatric rehabilitation.
Homeostasis	Ability to maintain the internal environment in an almost constant equilibrium, regardless of changes that occur in the external environment.
Impressionism	Considered one of the basic art movements. It was the product of decades of art critics and a member of high society scrutinizing many new artists on what they could paint.
Insight	Cognitive event that means sudden understanding of something or a certain situation.
Kinaesthetic	Perception of balance and position of the various parts of the body; it is the sensation or perception of movement.
Landscape	An artwork that depicts the land (mountains, valleys, rivers, etc.) as subject matter. Categories of landscape include cityscape and seascape.
Light	The condition of illumination upon which sight depends; the opposite of dark. In art, we are referring to the light the artist shows or implies (sunlight, moonlight, candlelight, etc).
Line	A mark with length and direction, created by a point that moves across a surface. A line can vary in length, width, direction, curvature and color. Line can be two-dimensional (a pencil line on paper), three-dimensional (wire) or implied.
Mandala	Geometric representation of the dynamic relationship between man and the cosmos; didactic resource that allows the exercise of autonomy and individuality, in addition to having a calming power.
Mental Health	A term used to describe a level of cognitive or emotional quality of life or the absence of a mental illness.
Mindfulness	Considered a practice of art therapy. Bringing one's complete attention to the present experience on a moment-to-moment basis.

Oil paint	A relatively slow-drying paint made from pigments mixed with an oil base. When it dries, it becomes a hard film, protecting the brilliance of the colors.
Orff approach	Orff was a 20th century german composer who contributed to the field of music pedagogy with the orff method of musical teaching, based on percussion and singing.
Outline	A line that shows or creates the outer edge of a shape or form. Also called a contour.
Overwhelming	Something that is very intense and hard to deal with; to be overcome with emotion as a result of an amount of something.
Painterly	A general painting style in which patches of color and visible brushstrokes show, allowing the viewer to infer the artist's gestures in applying paint.
Paintings	Works produced by applying paint to a surface.
Palette	A portable platform for handling, storing, or moving materials and packages.
Pastel	A chalk-like crayon made of finely ground color. A picture made with pastel crayons. Also a term for tints of colors.
Permanent collection	A collection of art that a museum owns.
Perspective	Techniques for creating the illusion of depth on a two-dimensional surface.
Picture plane	The surface of a two-dimensional artwork.
Portrait	A painting, drawing, photograph, or engraving of a person, especially one depicting only the face or head and shoulders
Psychopathology	The branch of psychology that studies pathological phenomena or mental disorders and other abnormal phenomena, i.e., dealing with the essential nature of mental illness.
Puppet	A small-scale figure (as of a person or animal) usually with a cloth body and hollow head that fits over and is moved by the hand.
Rehabilitation	Health care aimed at the sequelae of a disorder that generates disability or dysfunction and whose purpose is for the individual to recover or improve physical, psychic and mental capacities due to illness or trauma.
Resilience	The capacity to recover quickly from difficulties;
Self expression	When the individual intends to express something coming from himself. For example expressing your thoughts, feelings, etc.. The art is considered a channel for the self expression.
Self-esteem	Subjective evaluation that an individual makes of himself.

Sitter	Someone who is having their portrait painted.
Sketch	A rough or unfinished drawing or painting, often made to assist in making a more finished picture.
Spiritual	Things of a spiritual, ecclesiastical, or religious nature.
Stereotype	Preconceived, standardized and generalized concept or image established by common sense, without deep knowledge, about something or someone.
Still-life picture	A genre of picture used for the depiction of inanimate subject matter, typically a small group of objects.
Symbol	A thing that represents or stands for something else, especially a material object representing something abstract.
Therapeutic	The therapeutic process in artistic therapy is where the individual is alone with himself and provides his own treatment.
Therapy	Treatment or technique that aims to alleviate or eliminate the effects of a disease.
Trauma	An experience or a chain of repeated experiences of high emotional distress, which destabilizes the usual balance of the self by reflecting the inability and inadequacy of a person to engage in regular activities and relationships.
Vanishing point	In a perspective drawing, one or more points on the horizon where receding lines seem to meet.
Watercolor	A transparent paint made by mixing powdered colors with a binder and water. The term also means an artwork done with this paint.
Well-being	Means the individual's ability to evaluate positively in relation to the general aspects of his life.
Working memory	Type of short-term memory that takes care of the temporary storage and manipulation of information.



T.C. ANKARA VALİLİĞİ
AİLE VE SOSYAL HİZMETLER
İL MÜDÜRLÜĞÜ



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