



## Article

# The Power of Arts in Old Age: Implications for Social Workers

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**Abstract:** This article attempts to bridge various forms of arts and social work interventions through an exploration of how arts can fit within the social work context and have a positive impact on clients' lives. The focus of the article is on the older adults, a population group that is considered as a vulnerable, from the social and health perspectives. The objective of the study was to examine whether arts have a positive impact on older adults or not. By examining the impact of various kinds of arts on the quality of life of older adults, this article aims to strengthen the idea of using alternative approaches in social work interventions with older adults. It also suggests the idea of introducing social work courses within the curriculum that combine social work and arts. Through a pen-and-paper, closed-ended questionnaire, 179 Greek Cypriots over the age of 65 were surveyed in order to measure the power that participation in art activities may have on their lives.

**Keywords:** social work; arts; older adults; ageing; Cyprus



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## 1. Introduction

The world is ageing, and ageing fast. The advancement of medicine and public health, as one of the greatest successes of modern times, has allowed people worldwide to live longer and led to the reduction in numbers of deaths and greater prosperity (Wilson 2000; Hashimoto et al. 2002). Population ageing represents, in one sense, a human success story, since societies now have the luxury of ageing (Kinsella 2000; Wilson 2000).

The 2018 EU Ageing Report stated that by 2070, the EU's share of the total world population is forecast to shrink to 4.5%, and its dependency ratios will be second highest globally among large countries. In particular, the proportion of young people (aged 0–14) is projected to remain fairly constant by 2070 in the EU28, falling from 16% to 15%. Those aged 65 and over will become a much larger share, rising from 19% to 29% of the population, while the share of those aged 80 and over will increase from 5% to 13%, becoming almost as large as the young population in 2070. By contrast, those aged 15–64—namely the working-age population—will become a substantially smaller share of the total population, declining from 65% to 56%. The demographic old-age dependency ratio (people aged 65 or above relative to those aged 15–64) is projected to increase from 29.6% to 51.2% in the EU as a whole and the very old-age dependency ratio (people aged 80 or above relative to those aged 15–64) is projected to almost triple from 8.3% to 22.3% in the EU as a whole over the projection period (2070) (European Commission 2018).

Societies need to fully acknowledge that they must keep their older populations active and happy through social and community leisure, entertainment activities, and through employment opportunities. Particular attention should be paid to the happiness of older adults, as they constitute one of the more vulnerable population groups (Neocleous and Apostolou 2016). In order for societies to achieve that, they should think creatively, combining traditional approaches with alternative interventions and particularly, arts aiming to improve happiness among older people. This means that to invest in human happiness, but also in the continuation of that happiness, is important to national health (Mieras 2015).

Furthermore, the population ageing should alert social policy makers and social workers in order to promote a more creative lifestyle among older people while at the same time provide the means that older people can access such a new lifestyle.

### *1.1. The Amalgamation of Arts and Social Work*

Creativity in social work is an additional tool in the hands of practitioners, which can make a powerful impact on their interventions. However, how does this powerful tool work? While social workers can draw upon any number of talk therapy techniques to help their clients, there are times when talk is not helpful or cannot be summoned. Creative arts therapies involve the use of the arts, such as visual art, music, dance and movement, drama, and poetry, to facilitate therapeutic goals (Jackson 2015).

Photographer and social worker, Marianne Gontarz York, pointed out that ‘eighty percent of sensory stimuli enters through our eyes and goes into our brains, where it is retained visually, nonverbally. Most of us think, feel and recall memories not in words, but in imagery. These images become a verbal language when people attempt to communicate what is going on in their minds to someone else’. While creative arts therapies are not necessarily or entirely nonverbal, they recognize that talking is not always the best way to communicate, and, as a result, encourage and facilitate self-expression and active participation without depending entirely on a verbal articulation of issues (Jackson 2015).

Any of the creative arts modalities may be used as a primary form of therapy or an adjunct to other modalities to improve the physical, cognitive, and psychosocial well-being of individuals. They may have psychiatric disorders, developmental disabilities, neurological diseases, physical disabilities and medical conditions, and may be practiced in the entire spectrum of therapeutic settings (Jackson 2015).

In order to acquire an idea of how arts could have a positive impact on older people this article examines several kinds of arts and their relation to social work. As it has already been mentioned, it is not necessary for a social worker to have specialized training or knowledge on any kind of arts. It can be achieved through multidisciplinary interventions and collaboration between a social worker and an artist. The arts teach us a great deal about values, life, getting along, balance and health. Even though no more than 35% of what we express when we speak is verbal, the nonverbal is ignored. For people with cognitive issues, the nonverbal is of the utmost importance. Expressive art therapies in general are something they can excel at and grow in (Newman-Bluestein 2013).

**Music.** Of all the creative art therapies, music may be the most familiar to the public, having received significant attention over the years. It has been widely acknowledged as an especially useful therapeutic modality, ever since it was used to help World War II veterans with brain injuries (Jackson 2015). Music-making has been described as ‘a way to survive’, ‘reviving’ and ‘a breathing hole in life’ (Forssen 2007, p. 231). Listening to music and active music-making are associated with social and emotional well-being, offering a medium through which participants could express themselves and connect with others. Musical background did not make a difference; music has meaning and importance in the lives of professional musicians, amateur music-makers and novices alike (Creech et al. 2013).

Cohen (1992, 2000, 2006) and Cohen et al. (2007) recognized that many skills continue to develop independent of age and ‘some strengths emerge in association with ageing’. Some of these strengths include (a) vocabulary, (b) specialized skills and (c) psychodynamic growth, which were related to ‘personal insight, a component of wisdom’. In music, certain strengths, values, attitudes, abilities, or benefits may emerge as age increases. As life expectancy continues to prolong, the impact of these emerging strengths must not be ignored.

A compelling body of research demonstrates that music continues to offer powerful potential for enhancing health and well-being. Active music-making has been found to provide a source of enhanced social cohesion, enjoyment, personal development and empowerment, and to contribute to recovery from depression and maintenance of personal well-being (Creech et al. 2013).

An early experimental study that investigated the relationship between well-being and music-making was carried out by [VanderArk et al. \(1983\)](#). The research took place in a residential nursing home. Twenty participants aged from 60 to 95 were assigned to the experimental group, while a further twenty-three, matched for age, were assigned to a control group with no music-making. The experimental group participated in music sessions twice a week for five weeks, where they sang familiar songs and used simple percussion for accompaniment and sound effects. Significant improvements amongst the experimental group were reported, including more positive life satisfaction, musical self-concept, and general attitudes towards music.

The relationship between music and quality of life was also investigated by [Coffman and Adamek \(1999\)](#) and [Coffman \(2002\)](#), who surveyed 52 members of a wind band. [Coffman \(2002\)](#) reported that aspects of quality of life, including social interaction, feeling enriched and experiencing a sense of accomplishment, were attributed to this experience of active music-making. More recently, [Southcott \(2009\)](#) carried out a phenomenological case study, exploring the experiences of older choir participants. Southcott's case study illustrated the perception amongst participants that choir membership supported well-being, providing a sense of purpose, fulfilment, personal growth and a context where they could maintain social relationships.

**Dance/Movement Therapy.** Dance/movement therapy was defined by the American Dance Therapy Association (ADTA) as the 'psychotherapeutic use of movement to further the emotional, cognitive, physical and social integration of the individual'. It reflects a core social work value in its emphasis on meeting clients where they are ([Hwang and Braun 2015](#)).

Dance can take many forms, can be performed in a variety of settings, and does not necessarily require much expense or equipment; it might appeal to a wide range of individuals of all ages ([Keogh et al. 2009](#)). Everyone can meaningfully participate, regardless of their level of physical or cognitive functioning, and it is not necessary for clients to be able to dance to reap the benefits ([Jackson 2015](#)). Dancing has the potential to be an attractive physical activity that can be adjusted to fit a target population age, physical limitations, and culture.

**Poetry Therapy.** [Mazza \(2009\)](#) defines poetry therapy as 'the use of language, symbol, and story in therapeutic, educational and community building capacities'. It is effective, he says, 'with a wide range of populations, from children to elders, and with a broad range of problem areas, including family violence, homelessness, death and loss and suicide'. For example, it is used within social work practice when therapists employ poetry and creative writing to work on positive impact when working with veterans and their families. A collaborative poem may be a helpful tool in social work, while a dyadic poem may help facilitate couples/marital therapy ([Jackson 2015](#)).

Poetry provides another form of storytelling that allows individuals an avenue to express the self and therapeutically make sense of the world around them ([Furman et al. 2008](#)). As a poet/practitioner understands that the act of creation, whether that creation is a poem or the construction of one's individual life space is a highly personal act demanding more reflection than expert analysis ([Furman 2004, 2005](#)). Using the poet mindset to enrich analysis allows the practitioner a more tangible examination of the human experience through their own reflections on life and experience. In this way, poetry can act not only as a means of social work research, but also as the beginning of an intervention, both for the client and the practitioner ([Furman 2004](#)). Poetry is said to express emotions and experience that prose cannot always describe ([Taylor 2016](#)).

The poet/practitioner seeks to understand the human experience from a holistic perspective, while also striving to understand themselves from that perspective. Both these abilities will allow better insight into a client's perception and experiences. One way to understand the client's reality is to create connections. The poet/practitioner seeks to connect the client to the outside world and inside feelings and beliefs simultaneously ([Furman et al. 2008](#)). Poetry in social work is applied in a similar way to Michael White and David Epston's Collaborative/Narrative Therapy, where the client is invited to deconstruct

their own histories and reconstruct them in a more creative manner. Poetry gives expression to some of these histories, and enables social workers to become more in tune with their own emotions and the challenges of their work.

The therapeutic use of poetry has become an important tool of social work practice. In fact, poetry therapy has become its own discipline, complete with its own professional association and its own journal (Furman et al. 2008).

The reason poetry therapy is effective is that it is culturally sensitive and promotes interaction. Through practice and research, Mazza (2009) identified three major domains of poetry therapy: (a) introducing a poem into the practice session (bibliotherapy tradition), (b) promoting focused expressive writing (well-documented health benefits) and (c) utilizing symbolic or ceremonial activities to aid in life transitions. Furthermore, it is consistent with the strengths perspective but easily adaptable to a wide range of theories, e.g., cognitive-behavioural, narrative and systems (Jackson 2015).

Poetry allows the social worker to gauge experiences, to hear the voices of clients and not simply to diagnose and treat their physical symptoms based on qualitative data. Through this medium, the practitioner is allowed to see the world through the poet's lens, filling in some of the more personal, more meaningful aspects of the client's experiences, which will allow the practitioner to better understand and more compassionately and competently treat them (Furman and Cavers 2005; Richardson 1994). This provides an insight into the client that is both unique and personal, something that many practitioners strive for years to achieve (Furman et al. 2008).

Within the social work field, there are many ways to approach clients. The use of poetry is one method that needs to be more readily brought to the table. Although it can be intimidating to practitioners and clients alike, it does lend itself to self-determination, in that a poem can be anything a poet or a reader wants it to be (Furman et al. 2008).

**Drama Therapy.** Drama therapy relies on a range of techniques to meet numerous therapeutic goals and outcomes. It includes the ability of clients to tell their stories, rehearse desired behaviours, practice relationship skills, set goals, improve interpersonal skills, achieve catharsis, appropriately express feelings, and perform the change they wish to be and see in the world. Among the drama techniques yoked within other methods of therapy to achieve these goals are storytelling, role-playing, improvisation, performance, and the use of puppetry and masks (Jackson 2015).

Drama therapy is all about experiencing and expressing feelings, but it tends, especially in the beginning, to be fun, so clients can work on slowly learning how to feel again, and feel with other people. As with other creative arts therapies, an especially powerful aspect of drama therapy rests in its ability to promote relationship building, and its nonthreatening nature encourages participation (Jackson 2015).

Drama therapy is one among several expressive or creative arts therapies. The participants attempt to make sense of their life experience as they engage partly or fully in the creative process, through the media of drama and theatre (Landy 2006). At the base of each life story, all the principles of dramatic scenes can be found: images, protagonists, plots, themes, settings, characters, conflicts and endings (McAdams 2001). Drama therapy interventions are made mainly within or through the dramatic reality: a safe space that integrates reality and fantasy, and allows the individual to explore subjective experiences in the present (Pendzik 2003, 2006). In a drama therapy group, the clients, together with the help of the drama therapist and other participants, animate relevant aspects of their lives within the dramatic reality's present time (Keisari and Palgi 2017).

The dramatic reality allows individuals to return to their childhood or move forward in time to the future, to go beyond reality, thus liberating the individual from the constraints of the real world (Pendzik 2006). The flexibility of the dramatic reality allows individuals to explore alternative versions of their life-crossroads, and the way they are integrated into a life story. This, in turn, allows individuals to gain new perspectives about their life decisions and deepens their understanding of the associations between these decisions, in a way that gives rise to a more positive identity (Keisari and Palgi 2017).

Making use of the dramatic reality in order to explore individual narratives is an accepted practice. Narradrama, founded by Dunne (2003), integrates the narrative therapy principles developed by White and Epston in 1990, with drama therapy and other creative art therapies. Other works emphasize the contribution of drama therapy (Bird 2010; Milioni 2001; Novy et al. 2005) and playback theatre to the field of narrative therapy which was introduced by Michael White and David Epston during the 1970s and 1980s (Barak 2013). The integration between life-review techniques and drama therapy can intensify the positive effects of life-review therapy and enrich it by using the unique qualities of drama therapy. Additionally, drama therapy, increases self-acceptance, relationships with others and sense of meaning in life (Keisari and Palgi 2017).

### *1.2. Applying Arts in Social Work Interventions*

Literature and empirical evidence have shown the effects of active engagement with music on the intellectual, social and personal development towards social change (Hallam 2010; Wehbi et al. 2016). A range of studies present evidence on the effectiveness of using arts to deliver social, health and well-being benefits, including happiness (Pattoni 2014; Derogatis et al. 1979). Matarasso (1997) provides a comprehensive overview of the evidence base that describes the social impacts arising from participation in any form of arts.

### *1.3. Social Work and Social Services*

In particular, in social work and other social services, music can reach people in ways where words are sometimes not needed (Pietiläinen 2017). There is a lot of evidence about the positive effects of arts and music in hospitals, elderly care and the field of social services (Pietiläinen 2017). Artists, critics and social workers engaged in art practices would agree that art may serve as a catalyst of critical reflection, consciousness-raising and community building and may even bring about social and behavioural shifts (Almenberg 2010; Kester 2004; Ranta-Tyrkkö 2010; Reed 2005).

It is important to note that certain forms of radical social work also aim to problematize social relations in order to lay bare issues of power (Wilson 2007). Traditionally associated with individual genius, studio practices and aesthetics, art continues to be understood as a means of affecting the emotional, intellectual and/or spiritual state of the perceiver/audience (Wehbi et al. 2016). For instance, emotional responses to music involve the interplay of multiple factors related to music, listener, and situation (Gabrielsson 2001; Scherer and Zentner 2001).

### *1.4. Active Engagement Interventions*

Although active listening and talking with clients are traditional techniques social workers apply in their interventions, these are not always effective, especially in cases where clients are not in a position to communicate with others. We all understand the crucial element of communication among people. For instance, music can be used as a way to encourage clients to self-expression without words and speech (Pietiläinen 2017). Thus, it is important for social workers to utilize alternative approaches when talk is not helpful or cannot be summoned. In such cases, arts can open a back door to the psyche, drawing from individuals what they cannot yet put into words (Jackson 2015).

### *1.5. Creativity in Social Work Interventions*

While many social workers do have artistic skills and training, it is not necessary for practitioners to have a degree in fine arts or music and certainly do not need to play a musical instrument. By just being creative and using art interventions by themselves or through interdisciplinary approaches is enough for a client to respond. Music and arts, in general, are such powerful and effective tools of communication that clients respond in a positive way and take an active role in the process, either through playing music, singing, dancing, painting, etc. Social workers may want to explore art approaches, however, within the context of their clients' culture and understanding/accepting art.

Nevertheless, the use of arts in intervention with various age and population groups has been tested significantly and empirical evidence from interventions through arts is relatively rich. Play therapy, music therapy, art therapy, expressive arts therapy, drama therapy, visual arts therapy, photography and dance therapy are all art interventions. As long as a social worker does not claim that they are, for example, music or dance therapists (unless they have an appropriate diploma), it is not necessary to hold a university degree in arts in order to apply any kind of art in their intervention. As written above, social work itself is a form of art, so, by incorporating skills and techniques from other arts in their approach is an additional tool in their work.

In order to examine the impact of arts in the lives of older adults, within an effort to create a context where arts and social work co-exist a survey for the views of older adults in Cyprus on the participation in art activities and the impact these have on their lives was carried out.

## 2. Materials and Methods

The survey comprised two parts. In the first part demographic information was collected, such as sex, age, marital status, place of living, etc. In the next part, participants were asked a number of questions related to their engagement with various forms of arts, such as music, choir, poetry, pottery, singing, painting, theatre, photography, ceramics, crafts, etc. Participants could choose more than one option at a time. In addition, participants were asked to explain the reasons they engage in art activities, their feelings while participating in art activities, and whether engaging in art activities has a positive effect on older adults' mental and/or physical health. Additionally, those who were not participating in any form of art activity were asked to choose from a list the reasons are keeping them away from any art activities. Provided that this survey was carried out during the pandemic period, participants were asked about the last time they attended an art event and, if not, the reasons they prohibited them from such participation.

All participants were fulfilling the criteria of activities of daily living (ADL), and were mentally healthy enough to manage the questionnaires by interpreting and answering all questionnaires by themselves and all of them were able to read and write.

Three research assistants were employed for the purposes of this study. In order to ensure the reliability of the data collection, the three research assistants were trained on understanding the questions in particular, as well as how to administer the questionnaire. The research assistants administered the questionnaire to randomly selected participants aged 65 and older in rural and urban areas all over the south part of Cyprus (the Turkish occupied northern part is not under the control of the Cyprus Republic) in coffee shops, senior citizens centres and other places that older people usually visit, such as parks. In addition, the method of snowball was used among participants in order to inform and encourage their network to participate in the study. In order to construct a questionnaire as a comprehensive research tool of the different views on the subject under study, the researchers formed a focus group consisting of eight individuals (four men and four women), between 65 and 80 years old. The idea behind the development of the focus group was based on the need to explore all those issues that were related to their engagement or not in creative activities. In addition to the various views on the potential questions that the research could raise, the participants in the focus group were invited to provide their suggestions over the appropriate length of the questionnaire and the way the questions should be stated so that they would be clear to the participants.

The number of participants was set to eight people, so each person had a turn to speak, as well as to generate a conversation around the topic, without any time constraints. Moreover, with that number, it was easier for the moderator to keep the whole control of the group and avoid subgroups to be formed. The moderator ensured that the topics and questions of interest to the evaluation were covered within the allocated time. That meant that the group participants had the freedom and the knowledge to decide to move the

discussion on to another topic, to keep the discussion relevant and focused, and to choose when to allow more free-ranging discussion with minimal intervention.

Several questions emerged from the focus group that would enable us to measure the impact of participating in creative arts on their lives. The outcome of the focus groups led to the construction of an instrument composed of 16 closed-ended questions.

The survey received approval by the Department Research Ethics Committee of the University.

Participants were briefly informed about the purposes of the research and then they were asked to sign a consent form. Following this, participants were given the questionnaire in paper format together with a pencil for its completion.

In this study 179 Greek-Cypriot pensioners took part (89 men and 90 women). Participants were separated into six age categories (65–69 = 24.6%, 70–74 = 21.8%, 75–79 = 23.5%, 80–84 = 15.1%, 85–89 = 10.1%, 90+ = 5%). Using SPSS through Descriptive Statistics (Frequencies) we found that 58.7% were living in urban areas, 29.1% in rural areas and 12.3% in displaced or refugee settlements. Of the participants, 69.3% were married, 23% widowed, 4.5% divorced and 3.5% single. Additionally, 67% were living with a spouse, 3% with a partner, 7% with children and 22% alone, while 1% stated that they were living with a sibling.

### 3. Results

Out of the 179 participants, only 58 (32.4%) persons were engaged in some form of art activity. In particular 25 males and 33 females were involved in art activities with 7.3% learning a musical instrument, 7.8% dance, 7.8% paint, 2.8% pottery, 6% ceramics, 2.8% poetry, 6.7% singing, 2.8% performing theatre, 2.2% taking photography lessons, and 7.8% were choir members. Several participants were engaging in more than one activity.

The majority of the participants (20.7%) who were involved in art activities had been doing so for six years or longer; 4% had been involved in some form of art activity during the past two years; and 7.3% for 2–4 years.

Almost all of the participants (82.1%) agreed that engagement with some form of art activity had a positive effect on pensioners (mental and physical health) adding that family encouragement (40.2%) was beneficial to their decision to engage in art activities.

The main reasons that encouraged them to become involved with some form of arts included just an interest (15.6%), to have some quality time (12.8%), for socialization (10.6%), to learn new things (8.4%), to relieve stress (6.1%), to relax (11.2%), to keep their mind active (10.1%), to avoid loneliness (7.3%).

The main feelings came out of their involvement with arts included satisfaction (21.2%), great joy (11.2%), confidence (8.9%) and pride (7.3%).

The high percentage of those who attended an art event a year ago (25.7%) and those who were not able to recall when was the last time (40.2%) is associated with a variety of reasons, such as lack of transportation (3.4%), lack of company (5.6%), no activities in their area (15.1%), lack of knowledge (7.3%), or health issues (5%). Interestingly, COVID-19 was not an obstacle; only 4.5% indicated pandemic as the main reason for not attending any art events.

It seems that the older the age, the less participation in art activities. Out of the 58 individuals participating in art activities, 18 individuals (31%) (older than 80 years) were active, as opposed to 40 (69%) individuals (65–79 years old) who were actively engaged with arts.

Remarkably, only 6% of the total sample expressed an indifference or lack of interest in watching art events, as opposed to the 94% who, no matter whether they were engaged in art activities or not, every time they watched art events, live or on TV, they felt great joy (33.5%), enthusiasm (21.8%) or satisfaction (36.3%), an indication that direct or indirect engagement with arts can have a positive impact on older adults.

#### 4. Discussion

The current survey has demonstrated the power of arts in enhancing older adults' quality of life. Even though many older adults, for various reasons, are not actively engaged in art activities, they admit that arts have a positive impact on them. It seems that the older the age the less frequently someone will be engaged in any form of arts, mainly because of ageing issues (e.g., health, mobility issues and loss of social network and lack of transportation).

An interesting finding is that more activities are offered in urban than rural areas. This is an additional obstacle which older adults living in rural areas face and would like to engage in art activities. This issue should alarm those who are responsible for social policies for the older adults. Social policies and various art activities should be more friendly and accessible for the elderly no matter where they reside. Addressing such inhomogeneous interventions might be useful to go through legislation or protocols among the State, local communities, NGOs and the private sector. Synergies between various organizations could promote and celebrate active ageing.

In a world where ageing is occurring in an unprecedented way, alternative interventions and/or therapies should be promoted through social policies. Social workers should always promote the idea of alternative interventions with older adults within the context of arts. The engagement of older adults with arts can improve their mood and create feelings of happiness. Happiness creates health; however, it has not been possible to prove that happiness aids healing (Derogatis et al. 1979; Mahalakshmi and Velusamy 2018). Happiness in life may not make someone healthy, but it can keep them healthy, mostly mentally.

The application of various forms of arts can be an alternative to traditional social work interventions and a challenge for social work practitioners and other professionals towards the enhancement of the lives of older adults. While arts are therapeutic on their own to a person who is engaged with them, the interconnection with social work is an even more powerful tool in the hands of a practitioner. This connection could have a positive impact on clients, allowing a ritual form of communication, facilitating the externalization of emotions and feelings while setting aside any physical or mental issues bothering an older adult.

The review of various forms of arts in relation to old age reveals positive life outcomes for older adults, and a message to practitioners who should be encouraged to use their creativity towards their interventions with older adults. Social workers, especially those with art backgrounds, should feel comfortable to apply their knowledge and skills with an artistic flavour. Experience and literature, as well as the current survey's findings, indicate the power of arts in healing and preparing someone to connect or reconnect with their social environment. In addition, lifelong learning is an inalienable right for all, and older adults are not an exception.

Furthermore, schools of social work should be encouraged to integrate into their curricula courses that combine social work with arts, in order to provide their students with additional tools for intervention, not only for older adults but all population groups. At the same time, practitioners should also be able to incorporate arts in their interventions towards more efficient treatments for their clients.

The essence of social work lies in facilitating human relationships in ways that support and increase potential, enhance choice, and contribute to the empowerment of clients (Graybeal 2007). Within this context, social work with older adults focuses on the conservation and development of performance and of excellence of living. Through the focus on elderly care and the capacity to understand the difficulties involved from different perspectives, social workers adopt an exceptional and precious role in this field by providing the means to meet the multidimensional desires of elderly and their families (Mahalakshmi and Velusamy 2018).

In relation to the above discussion, there are several implications for social workers who practice in the area of old age in terms of supporting, influencing and enabling structures and systems for older adults. Similarly, social workers could collaborate with

older adults in creating and advocating ageing-friendly policies, services and programmes that would be culturally competent to older adults (Neocleous and Apostolou 2016). For example, social workers can encourage older adults, senior citizen centres, and nursing homes to engage in or establish a variety of activities related to various forms of arts, such as dance, painting, music, drama, etc. Evidently, such activities could contribute to happiness among older adults, since their participation in any kind of art activities can only have positive effects on the quality of their lives.

Finally, further research on the impact of arts within social work interventions is needed in order to extract valuable conclusions on the significance of the combination of social work and arts in social interventions with older adults.

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