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Caring for Memory: Exploring Applied Theatre as a Resource in Dementia and Alzheimer's Disease Care

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Abstract

This article explores the potential for artistic experiences to address dementia, a growing global health challenge with no pharmacological cure. The role of arts-based approaches in dementia care is reviewed, with a specific focus on applied theatre experiences. Drawing on the World Health Organization's report and syntheses of recent evidence, it highlights how artistic engagement – through multimodal stimulation involving aesthetic, emotional, cognitive, and social elements – supports psychological well-being, social connectedness, and quality of life for people living with dementia and their caregivers. The paper then presents applied theatre methodologies, characterized by participatory workshops emphasizing subjectivity and different languages (not cognitive, but primarily bodily) that make these methods particularly feasible for work in the field of dementia. An Italian case study, "Teatro Fragile" by Compagnie Malviste, is presented as an exemplary applied theatre project, Alzheimer Cafés, which are integrated into the local social care system and are yielding measurable improvements in both patients and caregivers' wellbeing.

Keywords: dementia, nonpharmacological approaches, arts, applied theatre

1. Introduction to dementia

According to the World Health Organization, dementia "is an umbrella term for several diseases affecting memory, other cognitive abilities and behaviour that interfere significantly with a person's ability to maintain their activities of daily living" (World Health Organization 2025). Core deficits often involve memory, executive functions, language, visuospatial processing, and social cognition, frequently accompanied by behavioural and psychological symptoms. Dementia is not a normal consequence of ageing; rather, it reflects underlying pathologies that lead to irreversible neuronal damage and brain atrophy.

Alzheimer's disease is the most common cause of dementia, accounting globally for an estimated 60–70% of all dementia cases (Ib.).

From an epidemiological perspective, the global burden of dementia is enormous and is rapidly increasing. Projections suggest that, if current demographic trends continue, the global number of people living with dementia could nearly triple by 2050, exceeding 150 million individuals (Ib.).

Currently, there is no pharmacological cure for Alzheimer's disease or other forms of dementia, and the available pharmacological treatments can only modestly slow cognitive decline (Ib.). Consequently, there is growing recognition of the importance of non-pharmacological interventions, including psychosocial, cognitive, and creative approaches, to support quality of life, maintain functional abilities, and promote wellbeing (Alzheimer's Disease International 2024). This article will explore the creative and artistic interventions, with a particular focus on the potential of theatre-based activities.

2. The Potential of the Arts in Dementia care

The potential of the arts in the care of dementia and Alzheimer's Disease must be framed within the more general recognition of the value of artistic activities for health, formalized by World Health Organization in 2019 with the publication of the evidence synthesis report *What is the evidence of the role of arts in improving health and well-being?* authored by Daisy Fancourt and Saoirse Finn (Fancourt & Finn 2019). It represents a milestone, being the first publication by the world-leading health institution recognizing the value of arts for health and synthesizing evidence covering over 3000 studies. The World Health Organization identifies the arts' potential for improving health with the fact that "arts are complex or multimodal interventions in that they combine multiple different components that are all known to be health promoting" (Ib.: 2). These include aesthetic experiences, imaginative engagement, sensory stimulation, emotional elicitation, cognitive activation, social interaction, physical movement, as well as engagement with health-related themes and healthcare environments. Together, these elements can elicit psychological responses (such as increased self-efficacy, improved coping strategies, and better emotional regulation), physiological responses (including reduced stress-related hormonal activity, enhanced immune functioning, and increased cardiovascular responsiveness), social responses (such as decreased loneliness and social isolation, strengthened social support, and improved social behaviours), and behavioural responses (for example, greater physical activity, healthier lifestyle choices, and skill acquisition). These psychological, physiological, and social processes are causally linked to health-related outcomes.

The findings collected were summarised in the report in the following table, which presents them within two broad health domains: prevention and health promotion, and the management and treatment of diseases.

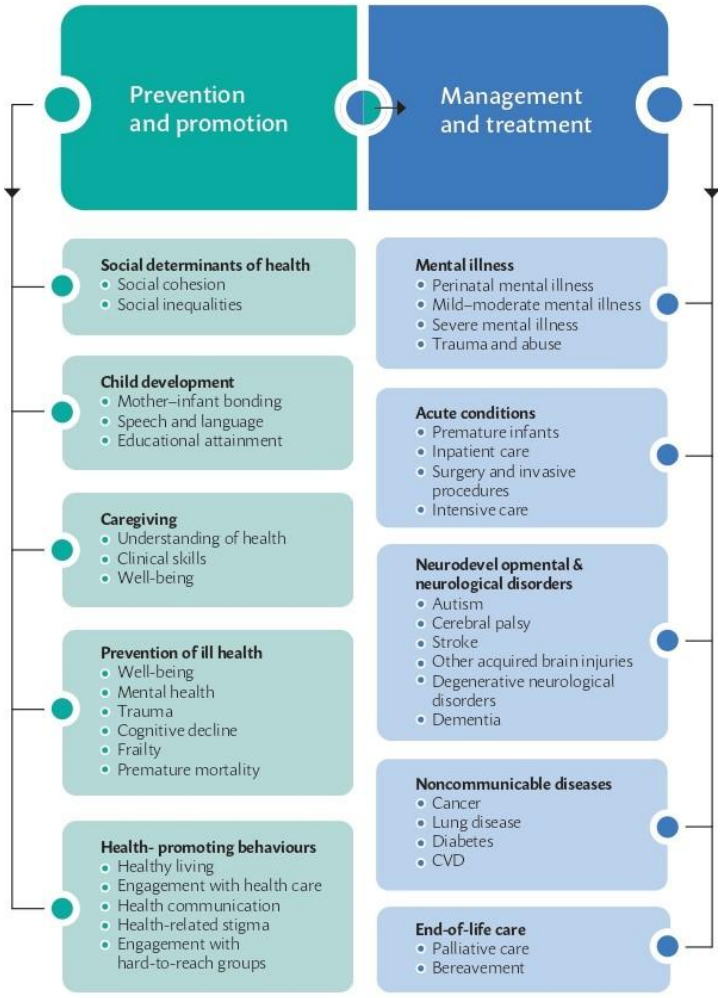

Figure 1. The arts' impact in the fields of prevention and promotion and management and treatment (Fancourt & Finn 2019: 8).

Within this framework, engagement in artistic activities is consistently associated with benefits for people living with dementia and Alzheimer's disease, although evidence is still methodologically heterogeneous.

The majority of the evidence relates to psychological outcomes that include improved mood, reduced agitation, and enhanced overall well-being compared with usual care or non-interactive activities (Fancourt & Steptoe 2018). Some longitudinal and experimental studies also report positive effects on attention, communication, and,

in certain cases, a slower decline or temporary stabilisation of cognitive functioning, particularly when programmes are regular and group-based (Emblad & Gray 2021; Särkämö et al. 2014).

As far as a person's social and identity levels are concerned, arts programmes can foster social participation, reciprocity, and a sense of belonging, helping to counter isolation and stigma around dementia (Burns et al. 2018). Qualitative research indicates that creative participation supports continuity of identity and personhood, enabling individuals to be recognized as persons rather than primarily as patients (Windle et al. 2020).

Interventions involving both the person with dementia and their caregiver show improvements in relationship quality, communication, and shared positive experiences (Watt et al. 2024; McManus et al. 2022). Arts-based projects for professional caregivers are associated with increased empathy, more person-centred attitudes, and higher job satisfaction, with positive effects on the wider care environment (Irons et al. 2021).

Recent systematic and scoping reviews on arts and culture-based interventions conclude that artistic engagement yields small-to-moderate positive effects on quality of life, mood, social functioning, and care relationships in dementia, with virtually no reported adverse effects. Nonetheless, many studies use small samples, heterogeneous outcome measures, and short follow-up periods, so more robust randomized trials and standardized assessments are needed to consolidate evidence on efficacy and cost-effectiveness (Fancourt & Finn 2019; CultureForHealth, 2022).

Within the broad range of arts activities, the specific contribution of taking part in theatre activities will be examined more deepened, illustrating how performing arts and, particularly applied and social theatre, can address dementia and Alzheimer's disease challenges.

3. Applied theatre

Among the many forms of theatre activities, this paper focuses on and presents those that intentionally employ theatre language to address the needs and requirements of the people involved. Around the world these practices are generally referred to as "applied theatre", although in Italy they are known as "teatro sociale" or "social theatre".

Applied theatre is a broad term, developed in Anglo-Saxon contexts, that designates a heterogeneous range of theatre practices and creative processes taking place outside conventional theatre institutions that

> "take participants and audience beyond the scope of conventional mainstream theatre into the realm of a theatre that is responsive to ordinary people and their stories, local settings and priorities". (Prentki & Preston 2009: 9)

Because of this variety and breadth of applications, it is difficult to produce a single, exhaustive definition encompassing many forms of drama (Freebody et al. 2018: 1). A common core within this diversity is the intentional use of theatre to benefit individuals, groups, and societies by addressing educational, social, health-related, or political issues in situated contexts such as schools, prisons, communities, and healthcare services.

Methodologically, applied theatre is characterized by participatory processes in which people are co-creators of the theatrical event, often in informal or non-theatrical venues (such as day centres, village halls, care settings, and community spaces).

Within the umbrella term of "applied theatre" lies the practice that, in Italy, is known as "social theatre", a definition which is as recurring as it is problematic. There is an increasing number of theatre projects in various contexts that are held under the term of "social theatre", but

not always with the same intent and meaning because of the proliferation of different and fluid experiences, and because of the lack of a formal and institutional recognition. In recent years, a national project involving five Italian universities was devoted to social theatre; the conclusion of three years of studies, experimentations, and explorations about social theatre both in the literature and on the field, has been that it is not possible to provide a unique definition of social theatre (Bernardi & Innocenti Malini 2021: 58). The term "social theatre" was first officially used and introduced by Claudio Bernardi who defined it as it follows:

> takes care of expression, education and interaction of persons, groups and communities through performing activities including different theatre genres, plays, feasts, rites, sport, dance, events and cultural manifestations. (Bernardi 2004: 58).

Considering such a variety of applications, "it is impossible to define a single intervention model; rather, what emerges is the recurrence of certain methodological criteria, among which this very plurality of applications is included" (Innocenti Malini 2011: 88). A core part of the social theatre method is the workshop (Innocenti Malini 2011; Bernardi 2004).

Social theatre workshops are structured in distinct phases. An initial informal welcoming phase is followed by psychophysical training as a warm-up to attune the body to others and the surrounding space, then by teamwork through trust exercises to build and strengthen group relationships. The core of the workshop lies in scenic creation, realized through improvisations or other theatre techniques. As Bernardi states:

> whether aimed at process, product, or both, every scenic writing in the realm of social theatre makes no sense unless it is created, assimilated, produced, discussed, invented, elaborated, set up, and cared for from beginning to end by the group. (Bernardi 2004: 88)

Central to the social theatre method is the subjectivity of people taking part in projects, aiming to bridge the divide between cultural producers and cultural beneficiaries and to reestablish a more direct relationship between life and art, culture and social development (Pontremoli 2015; Bernardi 2004). To achieve this, the main focus is on stimulating expressivity through theatre language that aims to present something personal in a form with which the audience can identify; theatre techniques enable the artistic exploration and integration of the experience into life (Innocenti Malini 2011: 88). Indeed, in social theatre the focus is on group and social transformation rather than on individual change (Bernardi & Innocenti Malini 2021; Bernardi 2004).

In conclusion,

> the social theatre workshop seeks the theatrical form which is best to give form and sense to the participants' experiences. […] Its characteristic is to always be propelled by the question about which is the theatre necessary for the group and persons, the theatre that makes sense for the 'us' created during the workshop. (Innocenti Malini 2011: 88)

This makes applied and social theatre particularly relevant to work in the field of care (Pontremoli et al. 2025; Low & Baxter 2017), where projects have been developed with people living with cancer, Alzheimer's disease, dementia, and other forms of frailty or disability,

as well as with their caregivers, in order to explore and reframe experiences of illness, ageing, and vulnerability within shared performative spaces.

4. Applied theatre in dementia care: main evidence

Applied theatre with people living with dementia or Alzheimer's disease encompasses a range of participatory drama, improvisation, and research-based theatre practices that seek to sustain personhood, communication, and social connection beyond cognitive decline (Basting 2018; Kontos et al. 2010). Interventions include structured drama therapy groups in the community (Li-Wei et al. 2022), theatre-based methods embedded in everyday care (Boersma et al. 2019), and improvisational workshops in residential facilities that invite participants to respond to props, music, or narratives with gestures, words, and role-play (Zeisel et al. 2018). Methodologically, these programmes typically combine psychophysical warm-ups, guided improvisations, and co-created scenes to support embodied self-expression and to validate the emotional reality of participants, rather than focusing on cognitive performance (Bowers 2024; Kontos et al. 2010).

Evidence, though still limited and heterogeneous, points to several benefits of such activities for people with dementia. Pilot and randomized studies of drama therapy and theatre-based communication methods report improvements in engagement, mood, and quality of life, as well as reductions in depressive symptoms and behavioural distress compared with control conditions such as typical care or non-interactive activities such as watching films (Li-Wei et al. 2022; Aldridge et al. 2015). Qualitative analyses show that participants can express ideas and feelings through dramatic play, gain opportunities for agency and humour, and experience recognition from others, even in moderate stages of dementia (Zeisel et al. 2018;

Basting 2018). At the same time, applied theatre is used to train and support caregivers and staff: drama-based education enhances awareness of embodied selfhood, empathy, and person-centred communication in practitioners, and shared theatre experiences can strengthen bonds and reduce stress in family caregivers (McManus et al. 2022; Kontos et al. 2010). Within this framework, applied theatre functions as a flexible, relational, and culturally grounded resource that complements biomedical care and creates meaningful spaces of encounter for people living with dementia and those who accompany them.

In the last paragraph, a paradigmatic experience of Italian social theatre with persons affected by Alzheimer's disease will be presented.

5. An experience of social theatre with persons affected by Alzheimer's disease: "Teatro Fragile" by Compagnie Malviste

A well-established and exemplary project, from the perspective of building a local territorial network, is *Teatro Fragile*, developed by the association *Compagnie Malviste*. Le Compagnie Malviste is a Milan-based arts association founded in 2009 that specializes in social theatre and participatory arts with vulnerable older adults, particularly those living with Alzheimer's disease and other forms of dementia (Le Compagnie Malviste, nd). The organisation operates primarily in working-class neighbourhoods (notably Quarto Cagnino and Isola) and has become a key partner of the Municipality of Milan's Alzheimer Network and local Alzheimer Cafés, which are informal meeting spaces where people living with dementia and their support networks gather regularly in a relaxed, non-clinical setting to socialize, share experiences, access peer support and information, and reduce isolation and stigma (Alzheimer Europe, nd). Since 2009, Compagnie Malviste have run weekly theatre workshops in Milan neighbourhoods involving people with Alzheimer's, their family members and caregivers, older

adults, volunteers, and local residents, with the explicit aim of reducing marginalization and isolation, improving quality of life, and reframing old age beyond a narrow contrast between health and illness.

From a methodological perspective, *Compagnie Malviste* offers a weekly theatre workshop lasting two hours for individuals attending the Alzheimer Café. Each session includes an initial welcome, followed by theatrical activities such as physical training, object-based stimulation activities and moments of improvisation, and concludes with a phase of reworking and performative sharing. The session ends with a convivial moment. The method focuses on four fundamental elements of theatre: rituality, working with body, working with voice, and representing. The work combines verbal and physical games, elements drawn from dance/movement therapy, and a strong musical component to stimulate mobility and embodied memory, encouraging self-expression through words, storytelling when possible, movement, song, and the use of objects to awaken "physical memory". The groups typically co-create performances that are then shared in public spaces – pubs, bars, theatres, cultural centres, private and public parks – often in intergenerational formats that actively involve schools and university students, thereby diluting stigma.

Individual objectives pursued include promoting participants' well-being, fostering expressiveness, encouraging and sustaining affective relationships at both individual and group levels, improving dynamics between caregivers and care recipients, stimulating memory (both affective and poetic) as well as symbolic and creative functions, promoting aesthetic experiences, and encouraging socially and culturally active engagement. At group and community levels, the aims are to promote collaboration, mutual support, and inclusion beyond the workshop setting, to reduce stigma associated with dementia, to foster local networks of collaboration, and to stimulate the development of policies.

The results of their work have been validated at a workshop during the Alzheimer Fest in 2017, during which weekly assessments were conducted to evaluate potential variations in certain health parameters and perceived well-being, both in patients and in caregivers. Specifically, caregivers were administered the NPI (Neuropsychiatric Inventory) to assess levels of anxiety and depression, while patients' wellbeing was measured through the NRS (Numerical Rating Scale) for daily pain monitoring, as well as through measurements of vital parameters (blood pressure, oxygen saturation, body temperature). At the end of the week, the results showed a tendency towards improved blood pressure and respiratory function, increased motor skills, and reduced pain in patients, along with decreased depression and anxiety in caregivers (Campostrini et al. 2018: 105–107).

Furthermore, the effectiveness of their working method has been recognised through the publication – funded by the European Union – of a guide on the use of theatre techniques with people living with dementia. Their person-centred approach and their longstanding collaboration with socio-healthcare initiatives such as the Alzheimer Cafés – with which they have established a territorial support network extending beyond the workshops – position them as an exemplary experience in working with people with dementia. Future work should focus on extending this method to other territorial contexts.

6. Conclusion

In conclusion, although the evidence is heterogeneous and not always systematized, artistic activities represent a valuable opportunity to improve the health and well-being of people living with dementia and their caregivers, having positive effects on psychological well-being (Emblad & Gray 2021), social connectedness (Watt et al. 2024), and stigma reduction (Burns et al. 2018).

In particular, the resources and potential of applied theatre

activities have been highlighted. By modulating their approach according to the characteristics and needs of participating groups, these activities prove to be particularly flexible and effective methods for engaging people affected by varying degrees of dementia. Applied theatre has the capacity to activate narrative techniques that value individual subjectivity, integrating diverse languages – not only cognitive but primarily bodily – in a transformative process that enhances quality of life (Li-Wei 2022), communication, socialization (Phinney et al. 2016) and emotional well-being (Zeisel et al. 2018). Moreover, the fact that they are necessarily implemented in groups further enhances their effectiveness.

Despite these potential benefits, however, it is necessary to systematize both the interventions and the research, in order to move from individual successful projects to systematic and sustainable programmes over time.

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