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Understanding Psychotherapy In Dementia Through Existentialism And Indian Perspectives

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Abstract

Researches indicate that psychotherapy in dementia is predominantly guided by supportive psychotherapy. However, recent studies had been conducted to enrich this paradigm with the inclusion of existential-humanistic perspectives. The present study suggests that management of dementia with supportive psychotherapy may additionally be enriched with the combined approaches of existentialism and some of the Indian perspectives. Though, effectiveness of these suggestions is possibly subject of verification by the longitudinal studies.

Keywords: Dementia, supportive psychotherapy, existentialism, Indian perspectives, longitudinal studies

Article Received: 18 October 2020, Revised: 3 November 2020, Accepted: 24 December 2020

Dementia, the term which implies clinical syndrome of disorders of brain that results in cognitive impairment as individuals' performances get affected due to the disturbances in one or more domains such as attention, memory, perception, executive functioning and other behavioral and social functioning (Yaghmour, Bartlett & Brannelly, 2018). Although, there are many conditions of dementia but most common forms are vascular dementia and Alzheimer's disease (Cheston, Christopher & Ismail, 2015). But other contemporary studies showed that Alzheimer's disease is the commonest form with 50 to 70% of all the affected people followed by vascular dementia that includes 25% of all the cases, dementia of Lewy

bodies with 15% of the cases and frontotemporal dementia (Burns & Lliffe, 2009; WHO, 2014). As reported in 2016, almost about 46 million of people around the world get affected by dementia (GBD 2015, 2016) and almost 10% of the total cases develop dementia at any time during their life (Loy, Schofield, Turner & Kwok, 2014). Umphred (2012) conducted a study which showed that dementia increases with age as 3% of all cases reported, were within 65 to 74 years, 19% of reported cases were within the age range of 75 to 84 years and almost half of the people with 85 years or above develop dementia. GBD 2015 (2016) in their similar epidemiological study reported about the mortality of the disease and indicated that according to the

report of 2013, dementia caused death of about 1.7 million and the numbers increased to more than half from 1990 when the number of death cases was reported to be 0.8 million. Larson, Yaffe and Langa (2013) in another epidemiological study interestingly indicated that dementia has also been found to be common as peoples' longevity gets increased. These brain diseases of dementia are broad category in which person needs to adjust a lot in terms of performing day to day routine activities (like, abilities to think, acquire new information, planning and executions as well as to make decisions) as they progressively experience decrease in their cognitive abilities (Al-Zahrani, 2019). All these conditions sometimes get severe enough that the affected person gradually gets completely depended on the surrounding people (Cheston et al., 2015). People with dementia not only suffer from cognitive disturbances but also experience emotional disturbances and reduction of motivation (Burns & Liffie, 2009), though persons' functioning in terms of their consciousness remains intact (WHO, 2020). Although currently cure of dementia is not known but risk factors may be decreased to a certain extent by keeping under control vascular disease which is associated with high blood pressure, smoking, diabetes, and obesity (WHO, 2020).

An overview of psychotherapy in dementia

Treating dementia with an attempt to cure is an impossible task as to till date there is no treatment mechanism available rather clinicians in this regard can adhere to the several measures that can only improve quality of life of the sufferers as well as their caregivers. Educating about the problems, providing emotional support, physical exercise that improves day to day life activities and implementing various psychotherapeutic measures may help the sufferers to deal with the problems which result from dementia (WHO, 2014). Regarding psychotherapy in dementia, not much organized researches are available either in India or abroad. In 2006, an initiative had been taken in UK by their National Collaborating Centre for Mental Health to implement psychotherapeutic treatment to take care of the negative psychological phenomena which are experienced by the people with dementia and their caregivers (Junaid & Hegde, 2007). Though public interest regarding psychotherapy in dementia is discouraging as people assume that for older adults

with increase in age psychotherapeutic implications decrease (Zivian, Larsen, Knox & Gekoski, 1992). Another study in the similar line reported about ignoring psychotherapy for older people as their comparatively less significant social and occupational responsibilities provides them with lesser priority for psychotherapeutic treatment and the authors further reported that there is no significant evidence which suggests that psychotherapeutic treatment is less effective for older people with dementia (Garner, 2002). Cheston, Jones and Gilliard (2003) conducted group psychotherapy with dementia patients and mentioned that people with dementia could able to improve symptoms of depression at the significant level and anxiety at the marginal level after being provided with the treatment. Some researchers found mixed results when studied with the specific psychotherapeutic measures such as brief psychotherapy or psychodynamic interpersonal therapy as these failed to prove full efficacy (Burns et al., 2005). Though on the contrary, Fossey et al. (2006) reported significant positive impact of enhancing psychosocial care in reducing the use of antipsychotic drugs without exacerbating behavioral symptoms during residential treatment. Cognitive stimulation therapy was also found to be very effective and economical in comparison to the other treatment (Knapp et al., 2006). Long ago American Psychological Association (1997) accepted that some clinicians found supportive psychotherapy to be effective for sufferers with mild impairment, though they were apprehensive that only limited studies had been conducted in this regard. In the similar line Rosenthal, Muran, Pinsker, Hellerstein & Winston (1999) conducted an important study which measured the significance of supportive psychotherapy in changing the interpersonal functioning in psychiatric population and found this to be effective to improve interpersonal functioning at a significant level. Barrowclough et al. (2001) compared supportive psychotherapy with cognitive behavior therapy and indicated that CBT though controlled anxiety symptoms but failed to improve functional ability. An interesting recent study showed supportive psychotherapy as an effective therapeutic mechanism in dementia to enhance quality of life of both the patients and their caregivers but the authors clearly mentioned that conducting this therapy requires through understanding about the conceptions and

implications of the therapeutic processes (Junaid & Hegde, 2007).

Purpose of the study

This review study was conducted to explore through discussion about some management strategies which have possibilities to bring changes in individuals to cope effectively with those clinical symptoms (generally apathy, depression & anxiety) and impairments (cognitive, emotional & behavioral) in dementia and guide them in the way to accept and adjust with the threatening conditions that such experiences may lead them to search for meaning in life through transformation.

Understanding of Existential perspectives in psychotherapy for dementia with an emphasis on supportive psychotherapy

Therapists attempt supportive psychotherapy with dementia patients in order to strengthen their coping skills and social functioning so that they can develop their own feelings about the problems as well as their behaviors (Novalis, Rojcewicz & Peele, 1993). Researchers also showed that supportive psychotherapy is not based on single theory (Junaid & Hegde, 2007). In psychodynamically oriented supportive psychotherapy Rockland (1989) expressed the views to strengthen ego functioning by decreasing strain which is being imposed over ego by three dimensional and opposing forces such as id, superego and external reality. Interpersonal perspectives holds that in supportive psychotherapy the therapist will focus on various interpersonal issues of stressful life events to help the client to get connected to the social supports and also to develop relationships (Cuijpers, 2016). Learning theorists maintain that behavioral or learning principles need to be implemented in order to elucidate important components of supportive psychotherapy (Sullivan, 1971). Existential-humanistic perspectives holds the view that in difficulties people need to be assisted to develop their individuality through the resistances they face that they are able to find more meaningful existence (Karabiyik, 2020). According to the great existentialists Frankl (1963, 1967 & 1978) and Yalom (1975, 1980) individuals have enormous capabilities to experience hope, to excel and to discover meaning in life even in the face of difficult situations. In a recent study, McFadden (2011) also

stated the view of Frankl that human being has mainly the tendency to experience meaning but not power and pleasure. Regarding wellbeing for people with dementia, McFadden (2011) in the similar study again stated that people with dementia can reach to the meaning in life by experience, creation as well as belonging in a relationship, freely selecting their attitude towards inescapable sufferings and by adhering to humor that will help to maintain their position exterior to themselves. Discussing about dementia in existential perspectives Cheston et al. (2015) suggested that dementia needs to be conceptualized as an 'existential threat' if someone wants to understand about nature of the disease from psychological perspectives. In their study dementia was regarded as 'existential threat' as persons' identity and independence falls in challenge, they isolate themselves socially and realize that their purpose of living and searching meaning in life is in threat. They also illustrated the management strategy and stated that such dreaded feelings may be dealt with by developing stronger position on three important interconnected psychological domains such as self esteem, social connectedness and meaning in life. People who are able to score high on these domains are expected to tolerate the ruthless and unkind part of their life without being overwhelmed by fear and anxiety and also such people possibly have knowledge to remain flexible to unconditionally experience the various situations in life in order to establish purpose and meaning of their living. Therefore, sufficient efforts should be given from part of the therapist to help the affected people to get strengthened on the three well connected psychological domains such as self esteem, social connectedness and meaning in life. In this process the Cheston et al. (2015) in their study wonderfully explained that for people with dementia forgetting about their diseased condition is a psychopathological defense that self is unable to accept threatening information about their mortality and hence, the therapist may engage their clients to discuss about their illness in a client centered environment that may result in gradual rediscover of their lost information. Authors further suggested to reengage them in social environment that will help to recollect their self fulfilling past with nostalgia and this process is likely to create ample possibilities to uplift their self esteem as well as to find purpose and meaning in life. Not only that apart from the

problems of dementia, they will possibly be capable to deal with deepest life problems through their enriched internalized experiences.

An understanding of dementia care from the Indian perspectives separately as well as in combination with existentialism

According to the Indian perspectives meaning in life is to be derived somewhat differently. As per Indian Psychology the psychophysical organization of human being is contemplated by their personality or prakrti which is comprised of sattvic, rajasic and tamasic guna or in combination popularly known as triguna (Rao & Paranjpe, 2016). As stated in Indian Psychology, psychological distress or sufferings develop whenever disequilibrium results in these three opposing forces of personality (sattvic, rajasic and tamasic guna) or the person gets overemphasized by either rajasic or tamasic guna or both (Malakar & Bandyopadhyay, 2020; Rastogi, 2005). Such changes in personality results changes in life style for worse which inevitably invites the risk of developing various diseases for the people of all developmental ages and for older adults with increase in age the risk is surely much higher. Considering interventions of dementia in elderly as focus of the present study, the various psychotherapeutic mechanisms and some common preventive measures such as real and perceived social support have been successfully implemented for management of depression (Malakar, Mukherjee & Tarannum, 2017), suicidal ideations, anxiety and behavior changes in dementia. Interventions which are based on traditional Indian culture such as traditional scriptures, yoga have also been reported to be effective for overall personal growth as well as particularly for improvement of sleep and cognitive functioning in elderly people with dementia (Jeste, 2015; Varghese & Sivakumar, 2015). In relation to the humanistic-existential view of western Psychology which maintains that developing meaning and purpose at any phase of life is essential for human wellbeing (Cheston et al., 2015), the Indian Psychology also maintains that for wellbeing people need to experience an evolutionary journey that is journey from darkness to light (Pandey, 2011). In this regard, both the Indian and Western perspectives indicate that such meaning is to be achieved through wisdom and wisdom is to be

achieved through experiences (Jeste, 2015). According to the great 'Bhagavad Gita' of India this wisdom can be achieved by developing knowledge or experiencing about how to perform activities or duties without regarding results or consequences and this approach can only be maintained by being detached from one's preferences as well as desires (Pandey, 2011). In regard to the wellbeing, 'Buddhist psychology' which is another great Indian perspectives indicates that psychological disturbances results when the life experiences which are developed on the basis of causes and circumstances, are erroneously strived to stick to self (Ananda & Prasad, 2011). Therefore, relief from the disturbances results whenever individuals can efficiently detach their favorable or unfavorable experiences from the self by gradually learning to become selfless (Ananda & Prasad, 2011). Therefore, sufficient researches need to be conducted to evaluate this new proposed psychotherapeutic approach in dementia where the psychotherapist will focus to positively guide their clients to conceptualize and practice these illuminating concepts of humanistic-existentialism and Indian Psychology with discipline and dedication. To be illuminated through this proposed blended psychotherapeutic process may further require to develop positive lifestyles such as consuming food in a constructive manner, developing disciplined behaviors, regular physical exercises like Asana and deep breathing exercises like pranayama as well as developing concentration by the different phases of meditation (Manickam, 1992).

Conclusion and recommendation for future study

The present study concludes with an important understanding that the phenomena which people experience have all possibilities to lead them to search for meaning through the process of transformation. Therefore, therapists are required to direct individuals who are inherently capable to develop a state of mind to accept and learn from experiences without regarding the consequences. Hence, the therapeutic approaches may be developed following Viktor Frankl (1963) who mentioned about provisional as well as ultimate meaning and according to Missine and Willeke-Kay (1985) provisional meaning is short term experiences whereas ultimate meaning is development of deeper

understanding which is usually spiritual in nature. In this connection psychotherapy may be developed in guiding people to search for both provisional and ultimate meaning following the client centered approaches of Humanistic-Existentialism as well as the perspectives of Indian Psychology. In future, longitudinal studies may be conducted on the people with dementia to observe and detect the effective ways to employ psychotherapeutic measures as well as also the changes they experience after being treated with such proposed measures by existential perspectives in combination with the perspectives of Indian Psychology.

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