


# Chapter 9

## Utilise Artmaking for Its Therapeutic–Like Effects in Integrative Care Settings: The Non–Art Therapist’s Guide

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### ABSTRACT

*Whilst professional art therapy is a well-established discipline with proven clinical benefits, access to formal services is often limited, especially for individuals in long-term care. This chapter defines clear boundaries between clinician-led art therapy and carer-delivered creative activities and positions itself as a bridge between the two. It summarises the theoretical rationale, the quality of existing evidence of art therapy to establish a foundational understanding of the discipline. Building on this, it offers practical guidance for self-organising simple art activities that utilise these mechanisms. The aim is to enable low-risk, evidence-informed creative activities that support emotion regulation, meaning-making and social connection in domestic care environments.*

Whilst interest in integrative approaches to health is growing, a practical challenge often faces by family caregivers (or carers or home carers) is accessing reliable, evidence-informed strategies and methods that can be safely and effectively adapted

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for domestic settings. It is particularly important when formal therapeutic services are not consistently available.

Whilst this chapter does provide some information about formal art therapy and its clinical efficacy, its main objective is to serve as a bridge between the specialised domain of art therapy and the everyday realities of post-treatment or long-term home care. Recognising that the main audience of this chapter is family caregivers who normally do not possess intensive therapeutic training or accredited qualifications, the focus will be on translating the established principles and therapeutic mechanisms derived from formal art therapy into more accessible, easy-to-implement art-based activities. These activities are not only pastime hobbies but also have therapeutic nature, which may include promoting emotional expression, cognitive engagement, relaxation, or granting sense of accomplishment for the person-in-care (or client or patient or participant). Again, they are not formal art therapy sessions and are not meant to replace them. The intention here is to empower caregivers with practical knowledge about how to facilitate simple, safe, and meaningful creative experiences that draw upon the understanding of why art can be healing, without requiring the skills or knowledge of a clinical therapist.

In general, this chapter will first provide foundational context on the importance of integrative care, then offering an overview of formal art therapy to ground the adaptive practices, as well as exploring the science and mechanisms that explain how art engagement can foster well-being. Next, it dedicates significant attention to the practical application of these principles in home-setting, at a much lower level of clinical formality compared to institutional environments. This will include guidance on creating supportive environments, suggestions for specific activities, and considerations regarding potential challenges and limitations to ensure safe and beneficial use.

## **THE CALL FOR INTEGRATIVE SUPPORT**

The shift from institutionalised to community-based models of care is increasingly presented. Institutionalisation occurs when certain assumptions about problems and their solutions become routinised and taken for granted (Weaver, 2000). The belief that care must be centralised in specialised hospitals or state-owned centres is one of the prime examples. Over time, this assumption was deeply embedded in policy, funding, professional training and public expectation, so that hospital-based care came to define legitimacy in health provision. However, when expectations shift or conflict, normative uncertainty may follow, and institutions' way of operation begins to drift away from everyday practice. In reality, persistent disagreement and changing political economies have weakened the dominance of the centralised model.

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