Chapter 13

The Arts in Clinical Health Programs for the Recovery of Diseases and to Improve Quality of Life

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Abstract

The Psicoballet is a tool, which combines science and art. This method uses art and its different expressions (dance, ballet, theater, and pantomime) to improve the quality of life of people with disabilities and psychiatric problems and, in some cases, to rehabilitate these patients and help them become incorporated into society. In 1984, after analyzing over 25,000 cases successfully treated using this method, the recognition was granted by the UNESCO with the establishment of this organization as the UNESCO Psicoballet Company of Cuba and appointed Georgina Fariñas as its director. Since 1989, in the University King Juan Carlos, we are adapting and validating the Methodology of the Psicoballet to our culture, with clinical applications and social intervention in different contexts: (1) the intervention with victims of gender-based violence, terrorism, violation, sexual exploitation, all of them with optimal results. (2) Neurodegenerative disorders (Parkinson and Alzheimer). The works of investigation of some doctoral thesis directed by the author and realized in collaboration with the IMSERSO. (3) We have verified its efficiency in the problems of corporal image and eating disorders, chronic diseases (acquired immunodeficiency syndrome (AIDS) and breast cancer), and people with disability.

Keywords: Psicoballet, gender-based violence, quality of life, mental illness, anxiety

1. Introduction

The pioneer works in this line of intervention and investigation arose in Cuba, in the decade of 1970. The late Dr. Eduardo B. Ordaz, the former director of the Havana Psychiatric Hospital, the mythical Prima Ballerina Assoluta Ms. Alicia Alonso, director of the Cuban Company “The National Ballet of Cuba” and the prestigious Cuban Psychologist, Dra. Georgina Fariñas, all together created Cuban psychotherapeutic method known as “Psicoballet” [1].
The Psicoballet is a tool, which combines science and art. This method uses art and its different expressions (dance, ballet, theater, and pantomime) to improve the quality of life of people with disabilities and psychiatric problems and, in some cases, to rehabilitate these patients and help them become incorporated into society. In 1984, after analyzing over 25,000 cases successfully treated using this method, the recognition was granted by the UNESCO with the establishment of this organization as the UNESCO Psicoballet Company of Cuba and appointed Georgina Fariñas as its director [2].

The Psicoballet arises as method of infantile psychotherapy to treat children with disorders of conduct that they were not evolving with play therapy and occupational activities. As method psychotherapeutic and psycho-corrective, the Psicoballet was applied to pre-school and school that were presenting disorders of conduct, as anxiety, hyperactivity, aggressiveness, isolation, and so on. In addition, the parents of these children received education in the school for parents.

From the year 1977, the Department of Public Health does a review of the method of the Psicoballet and verifies its therapeutic character; for what in the same year named officially and assigned to the Psychiatric Hospital of the Havana, already as department. Once the method was made official, they realized its normalization and introduced a code of practice for what, having perfected the methodology, its use is extending and in the treatment are included children and teenagers with mental delays, blind and visual problems, deaf weak and deaf/hard of hearing; adult and the elderly with moderate, severely, and deeply mental problems [3].

In February 1984, the National Commission of Cuba of the UNESCO constituted the group UNESCO of Psicoballet, due to the scientific welfare contribution and the achievements obtained in the treatment of the children, teenager, and adults with psychic, mental, motor, and sensory neuropathies. Today, its efficiency has led it to apply to a wide group of mental and neurotic severe patients and old people.

In 1989, in the Foundation Dance “Alicia Alonso,”—it was located in the Complutense University, where we started as pioneer studies of dance with the guide and support of his Magnificent Rector Mr. Gustavo Villalpos—we started the first investigations to adapt and to validate the Psicoballet’s Methodology to our culture with clinical applications and social intervention in different contexts. With the direct advice of Alicia Alonso, in the practical part of the procedure, and Alberto García, who guided us in the forms of theoretical work of the model as the first Cuban expert, we were mounting the Chair Alicia Alonso in the Complutense University. Simultaneously, we began the studies with a Magister based on the program of the existing studies on Cuba and, later, developing the Master with an experimental program, as we were confirming the discipline with the legal agreements of the Council of Education and the Department of Education.

In addition, a network of national institutions participating in the project was established with University of Alcalá of Henares in Madrid and with University of Castellón and Alicante. Also with the Valencian Generality that, in that time, was when the University of Valencia which had awarded a Honoris Causa Doctorate to Alicia Alonso, May 6, 1998. In this year, the University of Valencia only awarded two doctorates Honoris, the other one went to the
historical maker of the Spanish transition to the democracy Mr. Adolfo Suárez González. It was there, in the preparatory ones of her appointment like Doctorate Honoris where, in very emotive conversations, we took the initiative to start working toward a legal validation of the Psicoballet’s Cuban Methodology in Europe, but that process is not yet complete.

From these dates, different historical dancers of the National Ballet of Cuba, who have been exercising the teaching in our Institution and who have been occupying prominent positions in the international world of art, showed us procedures experienced for them in the National Ballet of Cuba. Not only they were showing to the world the ballet company, the most virtuous and universal global acclaimed, they also realized social and clinical labor in the shape of cultural enrichment and social positive action to raise the quality of life of the Cuban population with special needs.

Other companies have followed this example. At present, the English National Ballet, directed by the brilliant and prestigious ballerina, Dra. Tamara Rojo—“Prince of Asturias Prize” and the maximum distinction of the British Government, that realized her studies in our Institution and she took doctor degree [4] under the direction of the author of this chapter—is realizing meetings held in her headquarters in London of support to needy groups.

At that time of development of Psicoballet’s processes in Spain, we have been fortunate to have been supported by Loipa Araujo, Aurora Bosch, Marta Bosch, Mirta Pla, Lienz Chang, and Adolfo Roval; they were indispensable until we are in direct relation with Georgina Fariñas and her historical equipment who supervises, advises, and supports all our projects.

2. Eating disorders and mental illness

The first work and subject matter that we develop arose being the author the person in charge of the psychological direction of the Olympian Equipment of Gymnastics. One matter called us the attention, the dancers of the National Ballet of Cuba, neither had problems of corporal image nor the consequences derived from eating disorders. For this, we began an agreement of cooperation with the Royal Spanish Federation of Gymnastics that they adopted, to complete their trainings, the methodology of the Cuban School, which supposed a radical change that benefited to both institutions and that led to win a Golden Medal of the Spanish Equipment of Rhythmic in the 1996 Atlanta Olympics. Later, it applied to other disciplines obtaining also historical achievements as the First Medal of Gold of World Champion of Artistic Feminine Gymnastics and the First Olympian Medal of Artistic Feminine Gymnastics [5–7].

We realized the first intervention with 28 teenagers with problems of eating disorders that managed to overcome their problems of corporal image with the Psicoballet and with it to improve and to overcome finally their eating disorders [8–12].

These positives changes encourage us to develop later works with serious mental illness, realizing in 1989 the first process. The study was performed at the Psychiatric Hospital of the Havana, with a small group of 17 psychiatric patients where they obtained an enormous improvement of their quality of life and of a good number of symptoms.
In 1990, we began the first interventions of support to groups of elder people generating a system of intervention in psycho-geriatrics, a process that has taken us to the current pioneering experiences in neurodegenerative diseases, as the investigations in process that we are realizing in “CREA” in Salamanca, center of reference of the IMSERSO over Alzheimer. They show the beneficial usefulness of the dance in the processes of support to the cognitive recovery, advances already gathered in different presentations in international congresses of maximum level, and in a doctoral thesis that the author has directed [13].

The intervention with victims of violence of gender, terrorism, violation, sexual exploitation, and so on had obtained ideal results. In neurodegenerative disorders (Parkinson and Alzheimer) this method has proved to be an effective instrument to reduce the speed of the degeneracy and helps to recover cognitive plots –it has been mentioned in the works of investigation of some doctoral theses directed by the author and realized in collaboration with the IMSERSO.

We have verified its efficiency in the problems of corporal image and eating disorders, chronic diseases (human immunodeficiency virus (HIV)/acquired immunodeficiency syndrome (AIDS), and breast cancer), and disabled persons. We have realized several interventions with patients with these illnesses [14–16].

A new intervention was made with patients diagnosed of fibromyalgia [17]. We are facing here a disease that does not find an organic test to explain an intense and diffuse pain, together with a great quantity of symptoms such as sleep problems, fatigue, depressive symptoms and anxiety, morning stiffness, and irritable bowel syndrome. From the Psicoballet, the person works with the body, with the movement, and with the expression. The objective psychotherapy is through the art as, developed and practiced with patients, that the changes in the movement will produce changes on the psychic level and emotional level. They pay attention to the pain and try to make the person explore through the body and the movement and in a secure space and with other people in the same situation, which will make all communications very easy.

This study was performed with a group of 27 women diagnosed of fibromyalgia and pharmacological therapy, of a middle age of 41 years. Before beginning the process and on having finished it, several clinical interviews were conducted on them and different tests of psychological evaluation were applied: Spielberger’s STAI and Rosenberg’s Self-Esteem Scale and POMS. They received 20 sessions of 90 min (60-min session of Psicoballet and 30-min session of cognitive technologies). A session lasted a week for 5 months.

The activity physics-artistic that the Psicoballet contributes improves the quality of life of this type of patients, strengthening their capacity of communication, improving the self-esteem and the vigor, and reducing the fatigue and the perception of the pain. The arts are a tool validated of great usefulness in therapeutic and social interventions: improve the quality of life, the self-esteem, and the self-confidence level, and reduce the anxiety.

Starting on our valuation of the usefulness of the ballet as therapeutic instrument, we want to mention by exposing the illustrious intellectual Cuban Alejo Carpentier in his closing speech to the IV Festival IV of Ballet of the Havana (December 9, 1976). The speech described an experience personal that Georgina Fariñas has told us often and that exemplifies the value of
the Ballet as channel of communication extra-verbal naturally. Carpentier narrated us that his friend, an anthropologist, transferred two aborigines from Amazonian jungle to Caracas. He wanted to obtain some type of communication with the aborigines. He took them to several places, as way of stimulation, but the aborigines were not interested for anything in the new civilization. Carpentier and his friend, without many hopes already to achieve the wished communication, took these men to a ballet representation, but the aborigines had the same attitude during the presentation. Already frustrated in their attempts, they left the men in the room at the hotel that they were occupying and they withdrew theirs. In the middle of the night, Carpentier and his friend listened to a few strange noises in the room of the aborigines. They observed, with great surprise, as these men, smiling, with grotesque movements, were repeating the delicate variations of the ballet that they had observed in the theater. Carpentier concludes that from this moment, the aborigines showed them receptive and then it turned out to be very easy to establish relation with these men, seemingly apathetic and insensitive. For the observed, Carpentier assures that “About our culture, established on the word, we do not think that, in certain circumstances, it turns out to be difficult and in occasions impossibly to communicate across it.”

We think that this is the case of the majority of the mental patients, in occasions, so severely upset that they can have lost the whole contact with the world that surrounds them and, without having to come to extreme cases, we know that this case is also of anyone who suffers an emotional severe alteration. Anyone who is in deep condition of worry, melancholy or depression, finds it difficult to support a conversation beyond a few minutes, but the artistic forms, with intention of communication, have a great importance for these patients immersed in intense problems.

In the interventions that we have realized with chronic diseases, the works realized with AIDS patients stand out. The process of the disease of the AIDS is complex and very little understood for the population in general. It has different phases in which they have different emotional conditions that can be attenuated by physical and artistic activity, as we have seen in the Cuban experience of using the technologies of the Psicoballet for the treatment of different ailments.

3. The sexual infantile violence

Another area that we have investigated and adapted the experiences of the Psicoballet is the intervention with children and teenagers who have been victims of sexual abuse [18]. In this experience of adjustment of the methods of Cuba to our culture, 19 children and 13 teenagers took part, where a battery of tests were applied (Self-esteem of Rosenberg, Spielberger’s STAIC/STAI, CDS depression) before the meetings to begin Psicoballet. Two meetings took place for 6 months every week, and on having finished, 81% of the participants were showing low self-esteem to the pretreatment. To the posttreatment, this number descends to 53%. The level of anxiety in the pretreatment was 77% and to the posttreatment it descended to 41.3%; the depressive symptoms that before initiating the treatment had an incident of 83% descended to 51.03%. In the controls after 6 months of finishing the process, 47.6% not only improved in these variables but also recovered from the point of view clinic.
The sexual infantile violence has consequences in their victims. The whole series of repercussions and adverse psychological sequela, emotional and social, puts in commitment the integral development of the person and determines a series of neurological pathologies. A meta-analysis with articles of 22 countries showed that 7.9% of men and 19.7% of women have suffered some form of sexual abuse before 18 years [19].

The sequels of a sexual abuse committed in the infancy or adolescents studied by several authors are fear, nightmares, disorder of posttraumatic stress, depression, social withdrawal, neurosis, regressive conduct, somatic disorders, inappropriate conduct sexual, regressive social behaviors, delinquency, problems of learning and hyperactivity, disruptive conduct, or direct affectation in the development psychosocial. All this can affect in the future conduct of the person with an increase in the delinquency and the sexual problems during the adulthood.

The Psicoballet occupies a modality inside the Therapies Artistic Creative or inside of the Body-oriented therapies and psychotherapies (BOT/BOP) [20]. It defined the use of psychotherapeutic movement inside a process that chases the psychophysical (body-mind) of the individual. It is characterized by the use that it does of the way and artistic process (in this case, the dance and the movement) to help settle the emotional or psychological conflicts. Part of the basic premise that any corporal movement can take in turn to change in the psyche promotes the health and the personal growth: The body, its movement, its language, and its forms of expression. The Psicoballet promotes and provides a soft way to repair the damages caused by the sexual abuse, in this case, occurred in the infancy. It offers a way of approaching the memories and painful recollections with dynamics and body techniques that are less challenging for the patient, promoting a therapeutic work embodied, focused on the emotional objection through the corporality that could offer well-being in the current and future life of the patient. The Psicoballet introduces the use psychotherapeutic of the movement and the dance as a creative form of the emotional, cognitive, and social integration, using the body and its own corporal language. In addition to suffering significant physical, psychological and emotional consequences, these victims are often limited in their ability to work and to interact day in and day out.

The Psicoballet is a very useful tool to work with these problems because facilitates the access to the body to psychiatrists and psychologists, breaking the cuirasses that block the body with the movement and the communication [21].

4. The Psicoballet’s methodology

The Psicoballet can be defined as a therapeutic method that integrates science and art, specifically the Psychology and the Ballet of harmonic and balanced form. From these two previous systems, the Psychology and the Ballet, the Psicoballet conforms as a new dynamic integral system in which diverse elements or subsystems are interrelated: technologies and psychological methods, which use it as base, dance, music, pantomime, dramatization, physical culture, movement, and games.
Psicoballet’s method takes elements of the educational methods as the learning that is achieved in elementary technologies of ballet and dance; it is in addition a therapy of movement, where we use the action, the movement systematized inside the ballet technology, which is the instrument to realize the therapy. This forms part of the group of artistic therapies, specifically dancing, which is of great usefulness as a method psycho-corrective, given to the rectification of the structure of the personality and of the mechanisms psycho-corrective.

This method chases as aim the psychic and social adequacy of the patient across the correction and compensation of his disability, achieving independence, self-confidence, self-assessment, self-esteem, improvement in their communication, and familiar and social interrelationship, with the results of the Psicoballet as therapy of movement.

The systematizing of the steps helps in the development of the muscular coordination, the control of movements, the sense of the space, and the rhythm. The use of the dance in the meetings of Psicoballet helps in the royal enjoyment of the activity, which is very important for a therapy; by this way, an easy and agreeable communication establishes extra-verbal that it is not required, it does not attack, and it provides happiness and possibilities of creation.

The general aim of this work is the rehabilitation, fitting out, or reeducation of these people in search of a feeling of self-realization, as human beings are more part of their community and of their family of society. The preventive aspect develops in addition, with the aim to anticipate possible emotional disorders. The correct position is about obtaining a correct aesthetics of the body and a socially suitable behavior. In consequence of their diseases, these patients are inclined to choose a shod position that makes them look like guilty; it is important to work on the position, a matter that the ballet technologies facilitate. This constant growth, that is required in any class of ballet, help them to get a correct placement of the body.

The process of the education is a joint activity between teacher and student who possesses a double aspect: the instruction and the education. The method and technology for the therapeutic treatment of the Psicoballet possesses a methodological program, where the elementary level of the Cuban School of Ballet is selected. This program develops in five levels. In addition, the program possesses an offer of exercises as guide for the teacher and therapist to achieve that the mental is to the physical united.

The session of Psicoballet divides in three parts:

Motivation in bar is the moment where the therapeutic exchange begins to achieve the best correction of the steps with the fastened patients of the ballet bar. Here, it is where the steps are taught for the first time and a better balance is achieved for his future development; this is where the motivation of the therapy begins for the continuity of other meetings.

The fitting out in the center is already in the center of the lounge, where the steps that have been studied in the bar by a major balance are executed. These steps have the purpose of enabling the patient to move to this new form, with the rigor and pertinent adjustments.

The creative liberation is the moment of inter-relationship, maximum communication, of discovery, and where the equipment can analyze to the patient in certain secret messages that
they find hard to transmit verbally and to use the movement to express his personality. This is where the aim of the class is valued and where they look for the acceptance and not the conformity.

Taking advantage of this benefit that the ballet brings to us is the use of it as therapy to improve, in this case, the life of the persons with HIV/AIDS improving his quality of life, raising their conditions, finding the reasons of stress, the self-confidence, in routes to optimize, and to balance the system of defense.

A very narrow relation exists between the emotional disorders and the lack of harmony of the movements. This lack of harmony appears across a sign of discomfort because any disorder concerns equally the body and the mind, the psychological problem reflects in physical problems and vice versa [22].

An abundant number of experimental studies show that the establishment of a program of exercise consistent and prolonged in the time has the effect of increasing the self-esteem and of reducing the anxiety. The accomplishment of exercise can eliminate the anxiety and the tension. It is verified that the program of exercises of moderate intensity has a beneficial effect on the immune system. Specifically, we found that the exercise of moderate intensity was reducing the number of days of disease. The improvement of the immune function can derive from the reduction in the stress and from the benefits of the exercise as for the reduction of the concentrations of the hormones related to the stress as the cortisol [23].

The effects of the movement imply from the decrease of the immunosuppressant up to the increase of the self-esteem. The increase of the self-esteem transformed into an improvement in the quality of life. As for the physical qualities, an increase is registered in the perception of the force, the resistance, the flexibility and the balance as well as also in the physical appearance and in the physical skill. All the dimensions of the physical auto-concept are transformed into strength and flexibility.

5. The victims of gender-based violence

From the numerous established educational programs, it is necessary to distinguish the line of applications of the dance in situations of posttraumatic stress that we initiate immediately after the tragic events of the terrorist attack on Madrid in March 2004. The attempts of March 11, 2004, were a series of terrorist assaults in four trains of the network of Surroundings of Madrid carried out by the jihadist terrorists. It is a question of the second major attempt committed in Europe up to the date, with 10 almost simultaneous explosions in four trains to the rush hour of the morning (between 07:36 and 07:40). Later, after an attempt of deactivation, the police would detonate, of controlled form, two appliances that had not exploded, and deactivate a third party that would allow, thanks to their contents, to initiate the first inquiries that they would lead to the identification of the authors. A total of 191 people died and other 1858 were hurt. On December 17, 2004, Gregorio Peces Barba was high Commissioned for the Support to the Victims of the terrorism for the Cabinet.
The own Gregorio Peces Barba, connoisseur of the Cuban experience, put in touch with our Institution to suggest us the creation of a program of attention to the victims of the attempt. We created a system of intervention combining the artistic therapeutic activities of the dance. We used and verified Cuban experience of treatment with the Psicoballet with cognitive technologies of treatment of the posttraumatic stress, incorporating new technologies in that moment in our country as the EDMR, desensitization, and prosecution for ocular movements, a psychological therapeutic technology used to desensitize and to re-process psychological traumas in a natural and rapid way.

We initiate the contacts with victims of the attempt and their treatments, but the political questions ended up by bringing over to the victims of gender violence. We have realized seven programs with this group and have attended more than 700 victims of this type of violence, with very beneficial results of the decrease of anxiety and depression and elevation of self-esteem [24, 25]. To the beginning of the last course, they requested a similar intervention with victims of sexual violence; the dance is a great auxiliary tool of support to an experience who realized Psicoballet by 21 women of an average age of 32 years who had suffered violation and had symptoms of posttraumatic stress [26–32].

On having finished the procedure, the participants showed positive changes to psychological and corporal level; 37% diminished his levels of anxiety in 45% as average and those of depression and their self-esteem increased significantly, 42%, which allows us to affirm that the dance therapy is useful to treat this type of patients.

It is slightly functional to treat patients who present experiences from sexual abuse without a specific attention of the body, question that the Psicoballet allows and that canalizes and amplifies any therapeutic process. The utilization of the art-therapy technologies under a cognitive behavioral model of intervention is very advisable for a problematics as the treated one. The use of an instrument to mobilize the body as the dance amplifies the effect of the psychological conventional treatments, and it allows overcoming the corporal inflexibilities that this type of disorders generates in their victims. On having unified the mental work with technologies of movement that allow to liberate tensions and be aware of the corporal condition, joining this fact the positive effect of being employed at a group of persons with same and delicate problematic opens channels of communication.

The tango is a dance characterized by passionate and marked movements; generally, it is associated with the Argentine and Uruguayan culture. Though it needs concentration and agility at the same time, a study realized in Washington verified that the dance turns out to be an excellent physical therapy for the patients with Parkinson’s disease. Besides favoring physically the persons with Parkinson, the tango might be a great source of social integration that, at the same time, would improve the self-esteem of the patients and with this one, their emotional health.

The movement alterations seen in Parkinson’s disease are one of the most important symptoms and are the more concerning the quality of life. The dance-like artistic and therapeutic practice can help in the rehabilitation of alterations neuromuscular and motor skill. We realize an exhaustive evaluation of studies that were investigated which brings over if the dance favors the rehabilitation of the patients with Parkinson.
Styles different from dance showed favorable results in parameters such as physical function, balance, walk, risk of fall, and quality of life. In spite of few clinical tests, the analysis of the results will arise that the dance can improve the rehabilitation of motor skill alterations; it appreciates a diminution of risk of fall on having improved the balance and the walk. All this would carry a better quality of life.

The Parkinson is one of the neurodegenerative diseases more prevalent in the population of advanced age and one of the principal reasons of falls. Difficulty with walking and the balance are common between the individuals with Parkinson, contributing to a major incident of falls. In these patients, the alterations of the movement are characterized by slowness and the accomplishment of short steps dragging them for the soil with a flexed position. Haste and/or freezing of their movement can be included. They are in the habit of presenting difficulties of balance on having realized drafts and having walked backward. The works of investigation that have studied alternatives of movement across the dance in patients of Parkinson have demonstrated benefits in the neurological condition and the initiation of the movement. The Argentine tango has arisen recently as a promising approach to lessen the problems of balance and walk. It is a combination of the following steps: they imply the beginning and frequent cessation of the movement, spontaneous way changes, rhythmic variation, alternative change of center of mass of a leg to other one, and a wide range of speeds.

These characteristics can direct for him specifically the alterations motorboats associated with Parkinson’s disease, as the difficulties with the beginning of the movement, the deficiency of the length of the stride, the freezing of the walk, and the drafts and the bradykinesia that these patients suffer. The Argentine tango is a form of expression artistic and full of meaning. The music of tango believes an environment of contemplation, desire, and intellectual stimulation. Provided the attention of a dancer must be divided between the navigation and the balance, the tango helps to develop cognitive skills, as the double task. On having used the Psicoballet with a group of patients of Parkinson, we could state benefits in the quality of life and improvements in their processes of walk and major safety and self-esteem.

To psychiatric level and of severe mental illness, we have realized several interventions; some of them in process form a part of doctoral theses in process of ending, besides the pioneering investigation mentioned with schizophrenics, and recently we finish a process with bipolar patients. The bipolar disorder, considered a mental serious disorder, named traditionally as maniacal-depressive disease, is characterized by a changeable state of mind that fluctuates between two opposite ends: the obsession, or phase of exaltation, euphoria and grandeur, and the depression, or phase in which they predominate over the sadness, the inhibition, and the ideas of death. A chronic disease limits the functionality of the patient, needs a mixed pharmacological boarding and psychosocial. In the cases badly diagnosed and with bad orientation of treatment, the effect in the disease is devastating and implies important economic loads and socio-sanitary.

Often, the results for the patients with bipolar disorder where they are treated with medicament therapy only are suboptimal. The evidences suggest that the exercise is an adjuvant treatment psychosocial for the treatment of these patients. The exercise increases the aptitude to adapt to stressful environmental and it might reduce scoreboards of allostatic load reducing the activity.
of the axis hypothalamic-pituitary-adrenal (HPA), the sympathetic nervous system, and the corticosteroids. The experiences of the Havana’s Psychiatric Hospital with the introduction of the Psicoballet in these problematic complement the effects of the physical exercise on having included, plus the own exercise, adjuvant therapy of communication, accomplishment, and an increase of the self-esteem.

An experience was realized with a group of 21 adults of bipolar disorder applying Psicoballet’s Cuban Methodology—the same way as carried out at the Havana’s Psychiatric Hospital—to study the effects with patients, of our culture, to whom a follow-up was realized with clinical interviews [33].

The dance as physical exercise has the advantage of that the effort can graduate and adapt to the needs of every participant, without demanding a physical effort that fatigues and demotivates the people. The dance increases the communication and turns into a motive of expansion into the day that helps to the treatment.

This original therapeutic production, which had his historical origin in Cuba and which has spread over numerous countries of America, Europe, and Asia, was recognized by the UNESCO. We have studied and adapted, in our University in Madrid, Spain, the original Cuban methods to our culture and have studied their effects in different groups of disease and contexts, finding an undoubted usefulness of support for the clinical evolution of some disorders and in the evolution of the quality of life of the patients who suffer these problematics [34–37].

Psychology and Psychiatry have forgotten the body. The psychologists and the psychiatrists work on mind, thoughts, emotions and behaviors but they do not observe body, nor intervene on it, but art therapy is a way to get back to the body.

The patients work with the body and with the movement in company of other persons who have the same problems, traumas, and emotions with similar blockades. They enter a spontaneous communication of their problems that favor the work in groups, and moving and using the body as part of the therapeutic process, they liberate the blockades and inflexibilities shooting the efficiency of the psychological treatment.

The great contribution of this group of artists and clinical Cuban is an important advance to raise the quality of life of the patients for the effects that the art has in the brain: the music, the dance, the dramatization, and the singing [38].

Clinical meetings with psychologists, psychiatrists, doctors and professional artists to plan and to supervise the processes of treatment take place at all time.

6. Conclusions

We can conclude that the number of clinical tests with a suitable randomization and methodologically rigorous is not numerous in the international bibliography, being necessary to increase the investigation in this matter in order to obtain clear conclusions.
Nevertheless, several studies coincide in indicating the efficiency of the art therapy in the reduction of the negative symptomatology in mental illnesses as the schizophrenia. In this respect, there are promising results referred to the dance therapy and to the corporal psychotherapy, being, of between all the modalities, the most robust evidence for the music therapy. With regard to other variables, the superiority of the art therapy could not have demonstrated opposite to standards care, and though the music therapy has presented positive effects on the mental general condition or the social functioning, these are not considered in all the studies.

In September, 2008, the National Institute for Clinical Excellence National (NICE) published a document “Draft Full Guideline for Consultation” that dedicates a few pages to the expressive therapies and to the scientific evidence that has been demonstrated in the last studies of investigation. This study concludes that the principal benefit of the application of artistic therapies is the improvement in the negative symptomatology of people with psychosis. In the same document, details that the person who guides or executes the abovementioned practices must possess a specific formation in the matter.

In 2009, this Institute included a paragraph which mentioned the Artistic Therapies including them inside the “Psychosocial Interventions.” NICE recommends prescribing artistic therapies such as art therapy, dance movement therapy, corporal therapy, drama therapy, and music therapy as complement to the psychotherapy and to the pharmacotherapy.

The Cochrane Library has published different studies which have an effect on exhaustive review of articles that evaluate the art therapy as adjuvant treatment for the mental illnesses in comparison with the standard treatment and other psychosocial treatments. In its introduction quote “The British Association of Art Therapists (BAAT) [39] defines Art Therapy as: Art Therapy is the use of art materials for self-expression and reflection in the presence of a trained art therapist. Clients who are referred to an art therapist need not have previous experience or skill in art, the art therapist is not primarily concerned with making an aesthetic or diagnostic assessment of the client’s image. The overall aim of its practitioners is to enable a client to effect change and growth on a personal level through the use of art materials in a safe and facilitating environment.”

The arts have a clear future in the clinical, social, and educational applications, and their utilization, consolidated in some pioneering countries in the matter as Australia, Cuba, Canada, The United States of America, the United Kingdom, and Israel, is universalizing according to evidence confirmed of their utilization and attested by a certificate by transnational organizations as the UNESCO.

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