Medicine Insights

Article

The Healing Function and Institutional Construction of Aesthetic Education for the Elderly from the Perspective of Active Aging

Yi Jiang[1,*], Qingfeng Wu[1] and Li Zhao[1]

[1] Sichuan Preschool Educators College, Mianyang, China
* Correspondence: Yi Jiang, Sichuan Preschool Educators College, Mianyang, China

Abstract: As global population aging deepens continuously, a growing number of older adults experience inner spiritual emptiness, psychological imbalance, and weakened social interaction, which have become key obstacles restricting the effective implementation of active aging strategies. Compared with pharmacological therapies and professional psychological interventions that are limited by high access thresholds and inherent operational constraints, aesthetic education for senior citizens adopts immersive aesthetic experience and inclusive artistic practice as core carriers. It constructs a non-medical, daily, and sustainable intervention system for spiritual nourishment and psychological rehabilitation, which closely aligns with the core principles of health, participation, and security underpinning active aging. Based on an interdisciplinary research framework encompassing aesthetics, gerontological sociology, and health psychology, this study redefines the connotation of aesthetic healing for the elderly and distinguishes its essential differences from professional clinical art therapy. It further systematically elaborates four core healing dimensions, including emotional rehabilitation, cognitive maintenance, social bond reconstruction, and life value reshaping. By analyzing multiple practical scenarios involving visual arts, performing arts, digital aesthetic education, and community-rooted aesthetic services, this paper empirically verifies the positive effects of aesthetic education on relieving seniors' negative emotions, slowing cognitive deterioration, and alleviating social isolation. Targeting prominent industry bottlenecks including inadequate age-friendly curriculum design, insufficient professional teaching talent, and unbalanced urban-rural resource distribution, this research proposes a comprehensive institutional development framework from four perspectives: curriculum optimization, teacher team construction, multi-party collaborative guarantee, and inclusive balanced development. This study aims to transform scattered exploratory practices of senior aesthetic education into standardized, popularized, and high-quality public services, empower the spiritual health of aging populations via aesthetic education, and provide practical support for the national strategic deployment of actively addressing population aging.

Keywords: aesthetic healing; elderly education; active aging; aesthetic experience; spiritual wellness

Received: 29 May 2026
Revised: 18 July 2026
Accepted: 31 July 2026
Published: 03 August 2026

1. Introduction

China's aging population continues to expand, with over 280 million residents aged 60 and above, necessitating comprehensive upgrading and structural optimization of the national elderly service system. While material support and physical health safeguards have advanced significantly, mental well-being and spiritual-cultural service systems remain underdeveloped relative to societal expectations. Many older adults experience emotional challenges such as persistent solitude, heightened psychological tension, and low mood states; widespread perceptions of diminished life purpose further compromise overall quality of life. Global data indicate that more than 10% of older adults live with clinically significant mental health conditions, and approximately 25% report enduring

feelings of isolation—highlighting a pronounced mismatch between available spiritual health resources and the needs of China's aging population [1].

Conventional approaches to supporting psychological well-being among older adults face notable practical constraints. Pharmacological support may entail physiological side effects, while specialized clinical arts-based support requires dedicated facilities and certified professionals, resulting in elevated costs and limited accessibility for grassroots elderly communities. In contrast, senior aesthetic education emphasizes immersive aesthetic engagement and accessible, low-threshold artistic participation. Designed specifically for the physical and cognitive characteristics of older adults, it offers a cost-effective, non-invasive, and sustainable means of daily psychological enrichment and spiritual sustenance.

Rather than focusing on addressing established psychological difficulties, senior aesthetic education adopts a proactive, capacity-building orientation grounded in principles of active aging and lifelong learning. This study clarifies the conceptual scope and operational parameters of aesthetic approaches to elder well-being, examines their multi-level functional mechanisms, identifies varied implementation pathways, assesses critical barriers to sectoral development, and proposes a contextually appropriate institutional framework. The findings aim to inform theoretical advancement and practical innovation in elderly spiritual health services, contributing to the refinement of social governance models in aging societies [2].

2. Concept Definition and Theoretical Foundation

2.1. Analysis of Core Concepts

Aesthetic education is endowed with the core value of nurturing individual minds and shaping sound personalities, with profound theoretical origins in both Chinese and Western academic traditions. Foundational propositions on aesthetics laid the groundwork for modern aesthetic education research. In China, the ideological origin of aesthetic education can be traced back to the ritual-music civilization and six arts education traditions of the pre-Qin era [3]. In modern times, the viewpoint of "emotional cultivation through aesthetics" further enriched and improved the localized theoretical system of aesthetic education, consolidating a solid theoretical foundation for the popularization of lifelong aesthetic education and age-specific aesthetic education for older adults.

Also referred to as silver-haired aesthetic education, senior aesthetic education is a vital extension of social aesthetic education and lifelong learning systems [4]. Centering on the unique spiritual and psychological needs of aging populations, it moves beyond utilitarian assessment mechanisms and technical skill training objectives. With immersive aesthetic experience as the core approach, it supports physical and mental well-being, fosters social connection, and promotes self-fulfillment among older adults. As an innovative practical form of cultural and healthy elderly care in the new era, it addresses the unmet spiritual development needs of contemporary older adult groups.

The aesthetic healing explored in this study is defined as an inclusive spiritual nurturing model suitable for general aging populations. It refers to a positive psychological support process in which older adults engage regularly in aesthetic appreciation, artistic creation, and shared aesthetic activities to achieve emotional regulation, cognitive maintenance, strengthened social engagement, and reconstruction of life meaning. This model is fundamentally distinct from clinical art therapy: the latter belongs to specialized medical practice, targeting the treatment of diagnosed psychological conditions; by contrast, senior aesthetic healing falls within the scope of public welfare services. Characterized by prevention-oriented design, broad accessibility, and integration into daily life, it requires no medical involvement, emphasizes spiritual empowerment for the general older adult population, and aligns with the goals of grassroots elderly public service development in China [5].

2.2. Multi-Dimensional Theoretical Support System

From a neuroscientific perspective, aesthetic appreciation and artistic creation can activate multiple functional regions of the human brain and stimulate the secretion of positive neurotransmitters such as dopamine, which contributes to psychological well-being and supports mental resilience [6]. Meanwhile, diversified artistic practices can comprehensively engage seniors' sensory perception, memory capacity, attention regulation, and physical coordination, enhance neural activity, and help maintain cognitive functions during aging.

Gerontological sociological theories provide core academic support for understanding the benefits of aesthetic education [7]. The activity theory of aging indicates that sustained, age-appropriate social engagement plays an important role in enhancing subjective well-being among older adults, and group-based aesthetic activities offer accessible, inclusive, and low-barrier participation opportunities. The aging transcendence perspective highlights the later life stage as a period of meaningful personal growth and reflection; aesthetic experiences can assist seniors in developing constructive perspectives on aging, fostering emotional stability, and supporting holistic personal development.

Analytical psychology reveals internal mechanisms through which aesthetic engagement contributes to personality integration and psychological equilibrium [8]. Practices informed by this perspective—including structured color-based activities and symmetrical pattern creation—are characterized by simplicity, accessibility, and broad applicability across diverse elder populations. These approaches can effectively support emotional regulation and promote harmonious physical and mental states, making them well-suited for community-level implementation.

Active aging theory and lifelong education theory jointly constitute the foundational framework of this study. Lifelong education emphasizes that learning is a continuous process across all life stages, and senior aesthetic education represents the natural extension of aesthetic learning into later life, aligning with older adults' aspirations for ongoing personal growth and self-fulfillment. The three interrelated dimensions of active aging—health promotion, social participation, and security enhancement—as articulated in international frameworks, resonate closely with the core values of senior aesthetic education. Their integrated advancement supports the practical realization of national strategies promoting healthy and engaged aging [9].

3. Participation Characteristics and Practical Dilemmas of Elderly Aesthetic Education

3.1. Differentiated Participation Characteristics of Elderly Groups

Elderly life involves social role transitions and a significant increase in leisure time. As material living conditions stabilize, older adults increasingly prioritize emotional belonging, spiritual and cultural enrichment, and self-fulfillment, making artistic and aesthetic engagement a vital means of enhancing daily life quality. Motivations for participating in aesthetic education exhibit a hierarchical structure: personal interest forms the foundational driver, interpersonal connection serves as a key supportive element, and spiritual growth alongside cultural resonance represents the highest-level aspiration—manifesting distinct preferences across demographic subgroups [10].

Variations in age, gender, and residential setting shape divergent patterns of engagement in aesthetic education among older adults. Those aged 60 to 75—often termed the 'young-old'—typically possess stronger physical stamina, cognitive flexibility, and learning readiness, leading them to favor skill-oriented activities such as calligraphy, painting, instrumental music, and dance. By contrast, individuals in advanced age or with physical limitations tend to gravitate toward accessible, experience-centered options like art appreciation, basic craft-making, and color-based creative expression. Female participants show greater inclination toward socially interactive activities, whereas male participants more frequently select individual, contemplative practices such as calligraphy and painting. Disparities in public resource allocation between urban and rural areas result in broader access and higher participation rates among urban seniors,

while rural seniors encounter structural barriers that limit involvement—contributing to a pronounced regional disparity.

3.2. Practical Constraints on the Development of Elderly Aesthetic Education

First, the overall supply of public aesthetic education resources remains limited, resulting in significant mismatches between available offerings and actual demand [11]. Elderly education resources nationwide exhibit narrow coverage, with many universities for the elderly experiencing low enrollment rates and insufficient course variety, thereby creating a substantial shortfall in accessible, everyday aesthetic education opportunities for older adults. Additionally, community spaces and public cultural venues have not fully realized their potential for delivering aesthetic education, and the utilization efficiency of existing public cultural infrastructure remains suboptimal, failing to adequately support the daily aesthetic engagement and spiritual well-being needs of grassroots elderly populations.

Second, curriculum systems tailored to older adults have not kept pace with evolving societal expectations. Most current senior aesthetic education programs adopt frameworks originally designed for younger and middle-aged learners, overemphasizing technical skill evaluation while underprioritizing immersive, experiential aesthetic learning. Such curricula often overlook age-related physiological and psychological characteristics—such as slower information processing speed and heightened emotional responsiveness—leading to misaligned pacing and content that diminishes the capacity of aesthetic education to foster psychological resilience and spiritual enrichment [12].

Third, a shortage of multidisciplinary educators hinders the advancement of high-quality senior aesthetic education [2]. This field requires integration of artistic instruction, age-responsive pedagogy, and foundational knowledge of psychological wellness—posing elevated demands on professional competence. Currently, many practitioners are either specialized art instructors or social volunteers lacking formal training in gerontological education and mental health support, limiting the consistency, professionalism, and contextual appropriateness of instructional delivery.

Finally, disparities in resource distribution between urban and rural areas constitute a key structural challenge. High-caliber senior aesthetic education services are heavily concentrated in central urban districts, whereas rural and remote regions face persistent deficits in stable curriculum provision, dedicated facilities, and qualified personnel. The near absence of such services in rural settings highlights gaps in the equitable delivery and age-appropriate adaptation of public cultural services, impeding the realization of cultural participation rights and spiritual fulfillment for rural elderly residents [4, 9].

4. Internal Mechanisms of Elderly Aesthetic Healing from the Perspective of Active Aging

The healing effects of senior aesthetic education are grounded in robust physiological, psychological, and social scientific evidence rather than subjective experience [4]. Through the integrated operation of four core mechanisms—emotional regulation, cognitive engagement, social connection formation, and life meaning construction—it effectively addresses common psychological challenges faced by older adults while enriching their inner lives, aligning closely with the principles of active aging.

4.1. Emotional Regulation Mechanism: Alleviating Negative Emotions and Cultivating Positive Moods

Emotional modulation is the most direct and foundational supportive function of aesthetic education for older adults. The later stages of life often involve multiple psychosocial transitions—such as shifts in occupational roles following retirement, gradual declines in physical capacity, and the loss of peers and family members—which may contribute to feelings of solitude, inner tension, and low mood. Concurrently, age-related changes can reduce the capacity for self-directed emotional adjustment, potentially leading to prolonged periods of psychological discomfort. Diverse aesthetic

and artistic activities offer gentle, non-demanding avenues for emotional expression, helping to ease physical and mental strain while fostering uplifting affective experiences.

Rigorous synthesis studies have confirmed the psychological benefits of group-based aesthetic engagement among older adults. A recent empirical analysis integrating findings from 39 controlled trials—including data from 3,360 older adults experiencing low mood and 949 with elevated inner tension—demonstrated that structured group aesthetic activities yield consistent, moderate-to-substantial improvements in emotional well-being. These benefits are especially evident in residential elder care settings, where participation correlates with measurable enhancements in overall psychological resilience and life satisfaction [3, 7].

4.2. Cognitive Activation Mechanism: Activating Cerebral Vitality and Delaying Cognitive Decline

Cognitive function decline is a major physical and mental challenge among older adults, commonly presenting as diminished memory, reduced attentional capacity, and slowed information processing. Advanced cognitive decline may progress to impairments that significantly affect daily functioning and overall quality of life. Conventional pharmacological approaches offer limited efficacy and carry potential adverse effects. As a safe, non-invasive, and complementary non-pharmacological approach, aesthetic education serves as an effective strategy for supporting cognitive health in older adults.

Artistic practices—including calligraphy, painting, instrumental music learning, and choreographed movement—engage multiple sensory modalities and higher-order cognitive processes, thereby stimulating neural activity and supporting the maintenance of brain function with age [2]. Comparative survey data indicate that older adults who regularly engage in aesthetic and artistic activities demonstrate greater cognitive vitality and enhanced mental flexibility compared to their less active peers, exhibiting a markedly slower trajectory of age-related cognitive change—affirming the beneficial role of aesthetic education in sustaining cognitive well-being during aging.

4.3. Social Reconnection Mechanism: Reconstructing Social Networks and Eliminating Elderly Loneliness

Retirement often results in the loss of professional identity and a significant reduction in opportunities for social engagement, potentially leading to prolonged social isolation among older adults. Sustained feelings of loneliness may contribute to various psychological challenges. Senior aesthetic education inherently fosters group participation and interaction. Organized platforms—including art associations, choral groups, and community-based aesthetic learning spaces—provide consistent, accessible, and supportive environments for meaningful social exchange [11].

Through collective artistic practice, older adults transition from routine solitude to renewed interpersonal engagement, establishing durable social ties via skill sharing, collaborative creation, and shared performances. Involvement in such artistic communities also supports the redefinition of social roles, mitigates concerns related to aging, strengthens group affiliation, enhances perceived self-worth, and promotes ongoing, constructive social integration during later life.

4.4. Life Meaning Mechanism: Reconstructing Life Cognition and Realizing Personality Integration

The core psychological development task in the elderly stage is to integrate life experiences and reconstruct individual life value. Faced with ultimate life propositions such as physical aging and limited life span, older adults are prone to negative psychological states such as emptiness and confusion. Aesthetic experience can guide seniors to objectively reflect on life experiences, accept aging with equanimity, and discern the essential meaning of life.

Aesthetic experience helps seniors transcend immediate practical constraints and excessive preoccupation with physical decline, facilitating a shift from material survival concerns toward spiritual enrichment. Sustained engagement in aesthetic activities refines

self-perception, integrates fragmented life narratives, elevates the spiritual dimension, alleviates inner emptiness, and ultimately supports personality coherence and spiritual self-fulfillment.

5. Diverse Practical Paths of Elderly Aesthetic Healing

5.1. Visual Art Healing: Lightweight Immersive Physical and Mental Nourishment

Visual art represents one of the most mature and adaptable modalities in senior aesthetic education, encompassing calligraphy, painting, intangible cultural heritage paper-cutting, flower arrangement, and mandala coloring. Characterized by low entry barriers and broad accessibility across age and ability levels, it consistently yields stable and measurable psychological benefits. The practice of calligraphy and painting engages coordinated hand-eye-brain activity, facilitating both emotional regulation and cognitive preservation, thereby enhancing mental well-being through sustained participation.

Lightweight visual art activities—such as flower arrangement, colored pencil drawing, and simplified paper-cutting—are especially appropriate for older adults with limited mobility or mild cognitive impairment, helping to alleviate anxiety and foster social interaction. Mandala coloring, grounded in depth psychological principles, requires no prior artistic training and has been shown to effectively elevate mood and reduce physical and mental fatigue among institutionalized seniors. Furthermore, incorporating intangible cultural heritage elements into aesthetic education simultaneously advances cultural continuity and strengthens elderly individuals' sense of purpose and self-worth.

5.2. Music and Performing Art Healing: Collective Interaction Empowering Physical and Mental Development

Performing arts such as music, dance, and drama offer distinctive benefits for emotional well-being and social engagement among older adults through rhythmic experience and expressive release [2, 4]. Musical patterns can influence the human nervous system, ease physiological stress responses, and support cognitive maintenance and interpersonal connection. The beneficial outcomes of group-based music activities have received broad scholarly recognition.

Immersive performing art practices—including dance and drama—enable older adults to express inner experiences, enhance physical coordination and psychological resilience, and deepen interpersonal ties through shared rehearsal and presentation. Community-based art initiatives offer consistent opportunities for older adults to participate socially and foster confidence and purpose. Grounded in embodied cognition theory, specially designed dance curricula align with seniors' emotional and value-oriented needs, shifting aesthetic education from technical instruction toward holistic, life-enriching empowerment.

5.3. Digital Aesthetic Healing: Inclusive Empowerment Breaking Temporal and Spatial Barriers

Digital technology effectively overcomes the temporal and spatial constraints and resource disparities inherent in traditional senior aesthetic education. Emerging digital modalities—including AI-assisted painting, online art instruction, and virtual museum access—eliminate reliance on fixed physical venues, making them especially accessible to seniors with mobility limitations or those residing in remote areas, thereby significantly broadening the reach of inclusive aesthetic education for older adults.

Through digital public service platforms such as the National Senior Citizens University online system, older adults can access high-quality aesthetic education resources flexibly and independently of location or physical condition. This approach not only enriches their aesthetic engagement but also supports aging populations in bridging the digital divide, adapting to contemporary digital environments, and strengthening self-identity and perceived personal value—establishing digital aesthetic education as a central innovation pathway in the new era.

5.4. Community-Embedded Aesthetic Education: Daily Healing Scenarios Close to People's Livelihood

Communities constitute the primary living environment for older adults [6]. Community-embedded aesthetic education offers low barriers to participation and high accessibility, serving as the foundational platform for the routine implementation of aesthetic interventions for the elderly. Through regularly scheduled aesthetic education activities hosted at new era civilization practice stations and community-based elderly service centers, local governments can develop distinctive, age-appropriate aesthetic education initiatives and establish scalable, replicable grassroots service models.

The 'Senior Aesthetic Education Program' implemented in Bishan Community, Jinjiang City, exemplifies such grassroots practice. Leveraging local intangible cultural heritage and traditional arts, the program delivers sustained instruction and participatory aesthetic experiences for resident seniors. Survey data from 850 valid responses indicate that these community-based aesthetic activities increase daily activity frequency for 56.47% of participants, alleviate negative psychological states for 65.53%, and broaden social networks for 44.94%, yielding measurable benefits for physical and mental well-being as well as social inclusion.

6. Institutional Construction Paths of Elderly Aesthetic Education Guided by Active Aging

6.1. Building a Hierarchical and Age-Adapted Curriculum System

Grounded in the physical and cognitive characteristics and learning patterns of older adults, this study develops a hierarchical, age-adapted curriculum system guided by the principles of low entry threshold, experiential priority, minimal formal assessment, and strong spiritual empowerment. Moving beyond utilitarian skill acquisition, the system integrates aesthetic experience, psychological well-being, cultural continuity, and personal growth, and comprises four core curriculum modules designed to address the diverse needs of heterogeneous elderly populations.

Instructional delivery employs age-responsive strategies—including a deliberate pace, iterative knowledge reinforcement, and experience-centered interaction. Artistic techniques are streamlined, standardized performance evaluation is de-emphasized, and immersive aesthetic engagement is prioritized. Curriculum differentiation is implemented across subgroups—including younger seniors, older seniors, persons with disabilities, and rural elders—to address longstanding challenges of curricular homogeneity and age-inappropriateness.

6.2. Constructing a Compound and Professional Teacher Training System

To address the shortage of compound professional teachers in senior aesthetic education, this study proposes a diversified teacher training system comprising university-based professional training, recruitment of social talent, and supplementary volunteer service. Leveraging university disciplinary strengths, targeted training programs are delivered on age-adapted pedagogical methods, psychological support for older adults, and integrated art-based wellness theories to cultivate a stable core team of professional educators.

The teaching team actively incorporates retired literary and artistic professionals, intangible cultural heritage bearers, and qualified social workers. A dual-mentor instructional model—pairing cultural inheritors with social work practitioners—is adopted to ensure both artistic rigor and psychosocial responsiveness to elderly learners. Establishing a centralized teacher resource database and implementing a structured volunteer incentive mechanism effectively enhance participation motivation and mitigate structural teacher shortages.

6.3. Improving the Multi-Party Collaborative Policy Guarantee Mechanism

Guided by the national strategy for active aging, a multi-party collaborative development mechanism has been established, characterized by government leadership, university support, community implementation, and social participation [9]. In May 2025, nineteen national departments, including the Ministry of Civil Affairs, jointly issued a

policy guidance document emphasizing innovation in elderly education models, the downward extension of high-quality elderly education resources to grassroots communities, and the expansion of inclusive elderly education coverage—thereby strengthening institutional and standardized development of senior aesthetic education.

Local governments are encouraged to integrate senior aesthetic education into public cultural services, elderly care systems, and lifelong education frameworks, ensuring coordinated allocation of venues, funding, and human resources. Collaborative construction across universities, open universities, elderly universities, and community service centers should be advanced to enable cross-platform resource sharing and establish a sustainable, long-term support system for senior aesthetic education.

6.4. Promoting Inclusive Balanced Development and Scientific Effect Evaluation

To address the uneven distribution of aesthetic education resources between urban and rural areas, high-quality urban public cultural resources should be directed toward rural and remote regions. Mobile aesthetic education services and community-based micro-courses are delivered through rural public service stations to reduce disparities in public service access. Targeted volunteer-led aesthetic activities are offered to vulnerable elderly populations—including empty-nest, solitary, and physically disabled seniors—to ensure inclusive, comprehensive spiritual support for older adults.

This study establishes a four-dimensional quantitative evaluation framework encompassing emotional well-being, cognitive engagement, social integration, and perception of life meaning, enabling dynamic monitoring of aesthetic education outcomes. Curriculum design and pedagogical approaches are iteratively refined using empirical evaluation data, advancing senior aesthetic education from generalized implementation toward precise, high-quality, and individualized spiritual enrichment [1].

7. Conclusion

Senior aesthetic healing is an inclusive spiritual health service model with profound humanistic value and relevance to social governance in the context of active aging. Distinct from clinical psychological approaches focused on correction, it centers daily aesthetic experience as a primary means to support older adults' psychological well-being through four-dimensional collaborative empowerment mechanisms. The four aesthetic education practice modes developed in this study constitute a multi-scenario service system, offering a novel non-pharmacological approach to supporting mental wellness among older adults.

Although senior aesthetic education benefits from current policy momentum, practical challenges persist—including limited curriculum design tailored to older adults' developmental needs, shortages of qualified educators, and disparities in resource access between urban and rural settings. To advance high-quality development, it is essential to uphold the principles of active aging, strengthen four key institutional frameworks, and support the evolution of aesthetic healing from localized, exploratory initiatives toward standardized, institutionalized, and widely accessible public services.

The central purpose of senior aesthetic education is not the cultivation of professional artistic expertise, but rather the nurturing of older adults' inner lives through sustained aesthetic engagement. Such engagement supports emotional resilience, encourages reflection on life meaning, and affirms personal dignity. Amid accelerating population aging, embedding aesthetic education routinely into the everyday experiences of older adults represents a vital strategy for promoting holistic well-being, enhancing the quality of elder-focused public services, and enriching the human-centered character of societal responses to aging.

References

1. Y. Wang, "Intangible cultural heritage art education for older adults: A scoping review of empowerment frameworks, practice pathways and cross-cultural insights," *Educational Gerontology*, pp. 1–21, 2026.

2. N. E. Netshivhambe, "Promoting elderly wellbeing through indigenous music and choral performance," *Explore*, vol. 21, no. 3, p. 103145, 2025.
3. Y. H. Shih, "Methods for successful aging: An aesthetics-oriented perspective derived from Richard Shusterman's somaesthetics," *Int. J. Environ. Res. Public Health*, vol. 19, no. 18, p. 11404, 2022.
4. C. F. Almqvist and N. Andersson, "To offer dance as aesthetic experience and communication among elderly people: An art-based study," *Int. J. Educ. Arts*, vol. 20, no. 12, 2019.
5. L. T. Lin, "Digital belonging in later life: participatory art facilitators' insights on reimagining socially engaged art for online elder health and well-being," 2025.
6. C. F. Reynolds III, D. V. Jeste, P. S. Sachdev, and D. G. Blazer, "Mental health care for older adults: recent advances and new directions in clinical practice and research," *World Psychiatry*, vol. 21, no. 3, pp. 336–363, 2022.
7. N. Onishi and T. Nagamatsu, "The Role of Aesthetics in Elderly Care," in *Gerontology as an Interdisciplinary Science*, Singapore: Springer Nature Singapore, 2024, pp. 215–223.
8. H. Chatterjee, S. Vreeland, and G. Noble, "Museopathy: Exploring the healing potential of handling museum objects," *Museum Soc.*, vol. 7, no. 3, pp. 164–177, 2009.
9. H. C. Tsai and R. L. Liu, "Action study of community-based aesthetic education course design and practice for senior citizens," *Syst. Pract. Action Res.*, vol. 33, no. 2, pp. 137–147, 2020.
10. B. M. Wikström, "Older adults and the arts: the importance of aesthetic forms of expression in later life," *J. Gerontol. Nurs.*, vol. 30, no. 9, pp. 30–36, 2004.
11. L. Jangi Jahantigh, Z. Latifi, and M. Soltani Zadeh, "The effectiveness of self-healing education on the quality of life in the elderly," *Aging Psychol.*, vol. 7, no. 4, pp. 359–345, 2021.
12. B. Marques, "Healing spaces: Improving health and wellbeing for the elderly through therapeutic landscape design," 2020.