

# Case Study (5)

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Dylan Quinn Dance Theatre

*Dance Leaders*

The Arts Council of Northern Ireland (ACNI)

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# Contents

1. Introduction.....	1
2. Context.....	1
3. The Arts Intervention .....	3
4. Methods .....	3
5. Dylan Quinn Dance Theatre (DQDT).....	5
6. The Dance Leaders Project.....	8
6.1 Getting Started.....	8
6.2 Making Connections .....	9
6.3 Physical Health.....	11
6.4 Mental Health and Cognitive Function .....	13
6.5 Creativity .....	14
6.6 Policy.....	16
6 Discussion .....	19
Authors.....	21
References .....	22

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## 1. Introduction

The Arts Council of Northern Ireland (ACNI) is recognised for its pioneering work in championing the power of the Arts to promote health and wellbeing. In 2009, as part of its five-year Strategy *Ambitions for the Arts* (ACNI, 2013) the ACNI established an innovative Arts and Older People's programme (AOP). Now in phase three, funding for the AOP is provided through a partnership comprised of the ACNI (Lottery), the Baring Foundation and the Public Health Agency. Activities and priorities within the AOP are governed by five themes: isolation and loneliness, social inclusion, poverty, health and strengthening the voice of older people. In September 2016 a total of £127,000 worth of funding was allocated to 20 organisations across Northern Ireland. The value of the grants allocated ranged from £1,025 to £9,055.

Dylan Quinn Dance Theatre (DQDT) received a grant of £6,775 from the AOP to fund the training and mentoring of 'dance leaders' to deliver a programme for residents in three rural nursing homes.

Dylan Quinn, founder and director of DQDT is the primary focus of this case study and it outlines his vision of a dynamic and innovative dance programme for older people in rural Northern Ireland.

The case study describes challenges and obstacles encountered in establishing a contemporary dance centre in rural Northern Ireland and the strategies used to overcome them. It highlights the potential of contemporary to alleviate social isolation and loneliness for older people who are living in nursing homes.

The case study draws on an in-depth interview with Dylan at his dance studio in Enniskillen and telephone interviews with two of the dance leaders.

Dylan was photographed throughout his interview and images from it are used in this report to illustrate his determination, passion and zeal for making contemporary dance accessible to all people irrespective of age, ability or geographical location.



## 2. Context

In 2015 the global population of people aged over 60 years was 901 million people, by 2050 this figure will be 2.1 billion (UN, 2015). The growth of the population of older people is paralleled by an increase in age related conditions, including Parkinson's disease and dementia. As an illustration of the what lies ahead —there are currently 60,000 people with dementia living on the island of Ireland; by 2050 there will be 60,000 with dementia in Northern Ireland alone (Casey et al. 2016). There is therefore an onus on us all to find ways to support people to age well and with dignity. The importance of keeping physically and mentally engaged is the central message in the Active Ageing Strategy for NI (NIE,2016). Dance has long been recognised as a fun way to stay fit and to lose weight and researchers are increasingly examining the impact of dance on health and well-being of older people. The results are impressive with dancing shown to be an effective way of improving brain function (Kshtriya et al., 2015) and memory and balance (Rehfeld et

al (2017). In addition, Coupland (2013) suggests that the connection with the body that is intrinsic to dance helps overcome stereotypical notions of ageing and the self-imposed limits that result from ageist attitudes.

Societal changes have resulted in an increase in social isolation and loneliness. Older people, especially those living in rural areas are recognised as being particularly vulnerable (Pearce and Lillyman, 2015). Loneliness and social isolation are associated with higher all cause mortality rates (Holt-Lunstad, et al., 2011; Steptoe et al. 2013) and an increased incidence of Alzheimer's disease (Holtzman, 2004; Wilson et al. 2007). The risk to health posed by social isolation is comparable to the risk associated with cigarette smoking, hypertension and obesity (Pantell et al., 2013). Social isolation and feelings of loneliness can exacerbate symptoms associated with mild cognitive impairment (MCI) and dementia. Moreover, the protective effects of a rich and large social network on preventing dementia (Wang, et al., 2002) and promoting good cognitive function (Sorman et al. 2017) are recognised.

This case study uses the experience of DQDT, a small rural dance company, based in county Fermanagh to highlight the power of contemporary

dance in alleviating social isolation and loneliness for older people, including those living in nursing homes in rural NI.



### **3. The Arts Intervention**

DQDT has a well-established contemporary dance programme for older people. Building on the success and popularity of the existing programme a proposal was developed to use some of the older dancers as leaders of a contemporary dance programme for older people living in nursing homes. The idea for the intervention was conceived by Dylan Quinn and is part of his vision to make contemporary dance available to all people irrespective of their age, ability and geographical location.

The AOP funding of £6,775 was used to support delivery of two contemporary dance programmes in three care homes. Two of the homes were in Enniskillen and the third was in Lisnaskea. Each programme ran for six weeks. The director of DQDT and his apprentice accompanied the 'dance leaders' throughout the programme to mentor and guide them. The 'dance leaders' had all been attending 'contemporary dance' classes at DQDT for many years.<sup>1</sup> Continued participation in

these classes was part of the dance leader's capacitation.

In advance of the programme going into the nursing homes the Director of DQDT worked closely with care staff. Time was spent explaining what contemporary dance was, outlining the potential benefits for residents and clarifying the role of care home staff within the programme.

### **4. Methods**

Dylan Quinn, Director of the DQDT was interviewed at his studio in Enniskillen and two of the dance leaders were subsequently interviewed by telephone. Consent was obtained for audio-recording of each of the three interviews and for the photographs of Dylan taken during his interview to be used in all ACNI materials. Contributions from the dance leaders are anonymised to protect their identities.

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<sup>1</sup> A video featuring older people who participate in contemporary dance with Dylan Quinn Dance Theatre including some who participated in the dance leaders programme

can be viewed at:  
<https://vimeo.com/176767084>







## 5. Dylan Quinn Dance Theatre (DQDT)

Dylan Quinn's passion and enthusiasm for the liberating power of contemporary dance is infectious.

*"That joy of being creative, of being different and thinking differently and providing alternative voices and understanding that that's how we as a human race evolved. By having a whole variety of voices in there and not people who fit into a norm to be like everybody else."*

In a career spanning more than 20 years, that has taken him to study and work with various centres of excellence across the UK and Spain, making dance accessible to all has become his raison d'être. He attributes post graduate studies in Peace and Development, experience working in prisons and time spent working with the world renowned Ludus dance in Lancashire as awakening his social conscience and desire to take dance into a political sphere.

*"Our creative classes are about people going this is who I am, I don't need to be like anybody else in fact the benefit of this is*

*that I am not like anybody else – I am me and I can present my dance or my performance as myself."*

In 2009 he returned to Enniskillen to set up home with his young family and to fulfil his life's dream of establishing an inclusive, dynamic contemporary dance centre in rural Northern Ireland.

*"I can see it in the young people who do it and the older people who do it. There is a sense of being in your body, being present and being part of a community that is enjoying something that is creative."*

Dylan found that the NI that he has returned to had improved on the surface in terms of political landscape and improved physical infrastructure. Below that surface however, he encountered minds that appeared to be set in an early era:

*"We are running to try and catch up. I think it's interesting there are a lot of people who have come back to NI and looked around and gone 'my God things happen here which are just bizarre'. There's a lot of cognitive dissonance and they just keep on doing it and they can't admit that*

*it is wrong because if they admit that it is wrong they have to admit that the last 10 years of doing it was wrong.”*

Establishing a contemporary dance centre in a rural area that lacked the economies of scale was also challenging. A testimony to his determination to succeed is that nine years later DQDT is very well established and respected in the area.

*“We have close to 10,000 repeat people coming back every year for dance classes.”*

In the early days development of the DQDT was supported by Peace II money which was used to deliver a range of projects with young people. In recent years sustainability has been achieved through creation of bespoke classes for a variety of groups in the local community.

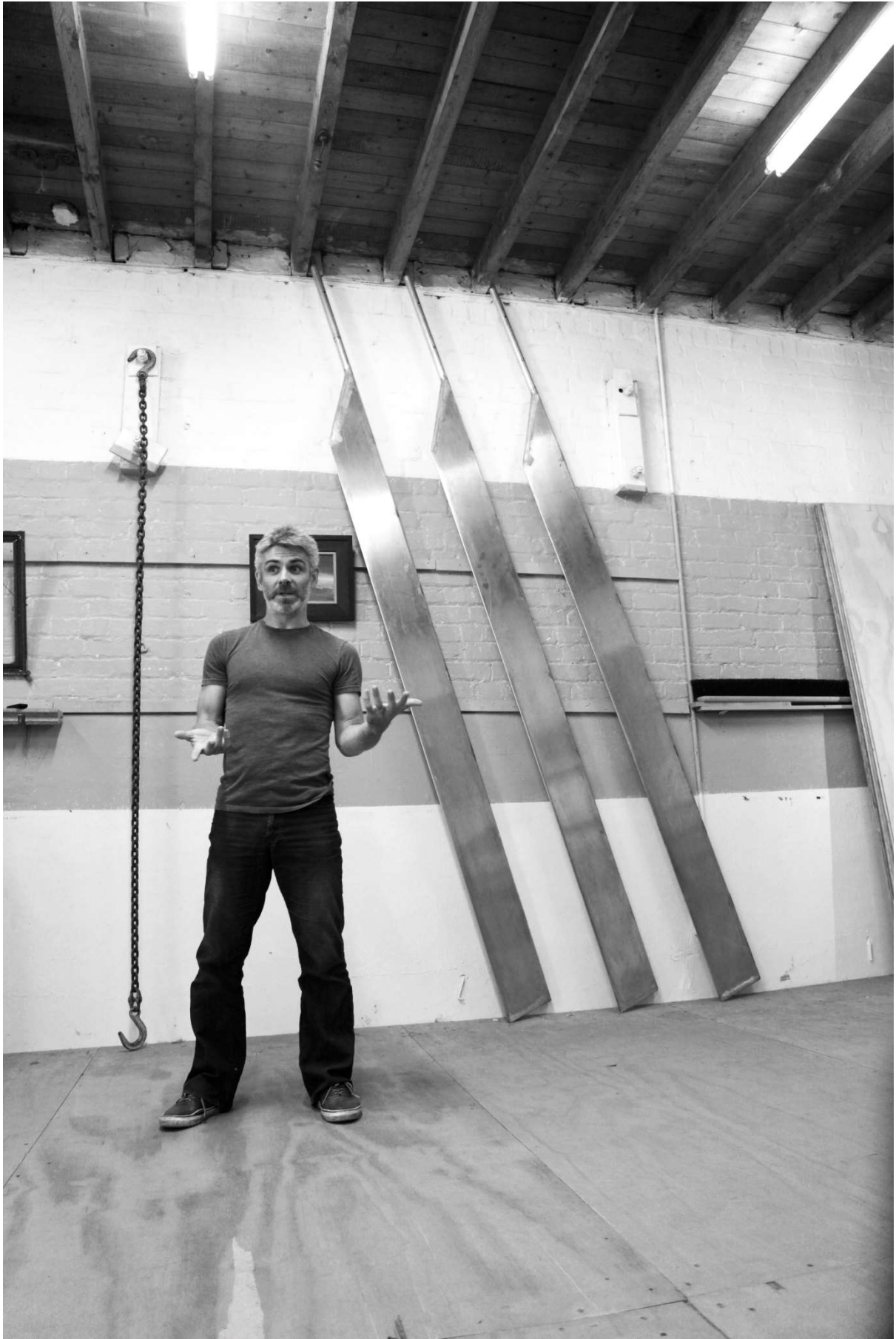
*“Zumba, dance fitness... Mini movers and funky feet are our branded classes. We started to deliver those and over the years they have developed a name for themselves and parents want to send their children to them.”*

The success of DQDT and its branded classes brings the new challenges of having to employ more staff and retain them.

*“you have to be there all the time delivering classes so nine years later (we) have to employ people. We now have an apprentice who has been with us six months and will stay for two years.”*

City based dance companies have access to larger pools from which to recruit, and dancers who can work on a sessional basis. Rural areas such as County Fermanagh do not have that luxury. Dylan highlighted that high turnover of dancers and performers who had come to work with the company and the challenges they had encountered.

*“It can be quite a hard place to work. If you move here from a place externally —then you are living here, and you are working here— it can be hard to break into because there are tight networks - very firmly established, because people have grown up here or they have returned here. So, it is very hard for new people.”*



## 6. AOP Dance Leaders

### 6.1 Getting Started

Five dance leaders, all women, agreed to help DQDT deliver the two six-week contemporary dance programmes in three local nursing homes.

*“We would train older people living in the community to come into the nursing homes with us and they would get confidence and eventually be able to go into nursing homes and start leading classes themselves.”*

Before the AOP project could begin Dylan needed to spend time with care home staff explaining what contemporary dance entailed and the likely benefits to residents.

*“If you were doing it with a care home in Belfast they would maybe have a wee bit more experience of it and understand it – they would understand what is required of them.”*

It was soon apparent that the idea for the dance leaders to deliver the programme was too ambitious. The leaders had been with DQDT for many years and were experienced in contemporary dance. They were also from the same age group as

the residents. However, their inexperience as dance leaders, an overly protective attitude towards residents and reluctance to ‘push’ them soon became evident.

*“Some dance leaders would say things like ‘I don’t know if they would be able to do this’ or ‘that it might be too much for them’. It’s an interesting separation between people who were living in the community and of the same (age) category as the people living in the nursing home and to me that said a lot about how people view people living in care homes.”*

An additional challenge arose from the lack of understanding of contemporary dance amongst care staff, which resulted in the inclusion of residents who were unable to participate in the activity.

*“People were brought out who were clearly not suitable. They were asleep or there was very little or no communication. The assumption was that we were there for entertainment... the approach was to just bring everyone in and seat them in a circle and whatever happened, happened.”*



## 6.2 Making Connections

The AOP project was structured to promote human connections. Small groups comprised of two or three residents and a dance leader sat together in small circles. The dance instructor, Dylan/Anna, would demonstrate the movements and the dance leader would copy it for residents. This intimate setup promoted instant connections:

*“when you look into somebody’s eyes they tend to respond to you.” (D2)*

Consequently, the impact on social isolation was instantaneous.

*“Normally you would see people just sitting there not reacting or interacting. But when they go to one of these dance classes they are laughing, they are joking, and it gets them moving.” (D2)*

Music was an integral part of the AOP and the dance leaders commented on the positive impact that it had on the atmosphere within the home.

*“... when they hear the music, it sort-of brightens them up a bit.*



*You could see it in them that they respond, and they enjoy it. (D1)*

Working with the residents challenged notions of the age group of people who live in nursing homes. Consequently, ideas about what music would be appropriate for a group of 'older people' was not as straightforward as initially anticipated.

*"We did general movements to music rolling down and moving from side to side – gentle little movements to music that they would recognise – and that's an interesting thing in itself – what is music for older people. We tend to think of 20s and 30s music– but there was a woman in the nursing home in her 60s – so what's her music?"*

The importance of using music that resonated with everyone was also emphasized by the dance leaders as being key to motivation.

*"I remember talking to one lady she was ninety- six and she used to go dancing every single Saturday night. She loved it and missed it. She loved Dylan's class. He plays music that everybody knows like the Can-Can and he has people kicking*

*their legs and at the end of the session there's a tremendous buzz about the place." (D2)*

The AOP dance intervention proved to be effective in attracting male residents and helping them to feel connected to the wider group. The fact that the dance leader was also a man was judged to be an important factor in the initial stages of the programme. Reflective of how comfortable the men felt and how much they enjoyed the sessions they continued to participate when the dance leaders were women.

*"There were a couple of men came to the classes. The interesting thing is that when we got into the nursing homes initially I think that the men were happy to participate because Dylan was taking it. He being a man was a great motivational factor. However, they would still come back when Anna was there, they enjoyed it and enjoyed the craic." (D2)*



### 6.3 Physical Health

The work of DQDT is informed by a life-course understanding of ageing and belief in the need for people to have a connection with their body,

*“We as creatures are physical. You know if you put music on a child dances they enjoy moving around. We just did a summer school last week and the kids loved when we cleaned the floor with their bums so we’d squidge around the floor and then we’d clean the floor with their belly and all of those are really strong learning points for children. But as we get older we tend to*

*reduce our engagement with our bodies, so we do a lot less of that. So, we sit down a lot more - we sit down to watch TV, we sit down with our phone, we sit down with our iPad, we sit down in front of the computer so we are not engaging with that physical-ness of our bodies as much.” (Artist)*

The AOP dance leaders enthused about the benefits that they personally had gained through contemporary dance. One of them dance has arthritis and the other osteoporosis; each one attributed significant improvements in their flexibility



and stamina and balance to their dancing.

*“I have arthritis and when I started doing it (dance) I really felt the benefit. My movement was better, more flexible and more stamina.” (D1)*

By helping people connect with their bodies the contemporary dance movements served to enhance strength, co-ordination and balance.

*“I remember when I realised a few years ago that there was something wrong with me (osteoporosis). I suddenly realised that I couldn't touch my toes (laughed). But that has*

*gone, and I am much more flexible, and I can touch my toes with ease and able to balance much better.” (D2)*

Dylan highlighted the benefits of contemporary dance in supporting the body to retain its natural defences, ageing well and preventing falls.

*“If we were to engage with our bodies more – simple things like moving around and dancing not only would you feel better because you are up and moving around but actually you are after. You are looking after your body's natural – balance, coordination and strength.”*



## 6.4 Mental Health and Cognitive Function

Contemporary dance was viewed as way of relaxing, strengthening cognitive function and improving the way people feel about themselves.

*“We were doing a tap dancing routine today – a very short one and you don’t have time to think about anything else – so you have to concentrate on what you are doing, and so you don’t have any time to think about anything else - in that way it is relaxation.”*

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*“I am 68 at the minute and Dylan was very proactive in explaining why he was doing particular moves and why he was doing particular exercises. For example, crossing over the body is very good for using different sides of your brain.”*

Some of the nursing home residents with dementia had responded to or engaged very well with the contemporary dance. Others with more complex needs were identified as requiring additional support from the occupational therapist to help them engage.

*“... just started playing music at the end and one of the guys got up and he just started dancing.*

*You could see the faces of the people around him they were just enjoying it and it was a little moment for him.”*

The nursing home residents who participated in the AOP dance programme included people with dementia. This group of participants needed a additional support and to that end an occupational therapist was brought in.

*“We had quite a number of people with mild dementia. Dealing with people with dementia – would need a bit more support – that’s why we had the OT”*

Other residents had Parkinson’s disease and Dylan was keen to highlight the emerging evidence of how improvements in mental health through dance can enhance quality of life for them.

*“Dance with Parkinson’s has really raised up. People with Parkinson’s obviously can also suffer from depression because of the Parkinson. If they engage with dance – it is helping them to feel better about themselves and about the Parkinson’s as well and possibly then you don’t end up with someone with Parkinson’s and depression.”*



## 6.5 Creativity

The freedom to be oneself and explore individual sense of creativity drives work of DQDT.

*“There is no right or wrong. I can be as creative as the next person. It is just a different type of creativity.”*

Notwithstanding the creative element the dance leaders spoke of how surprisingly challenging they had found contemporary dance in the beginning.

*“In the beginning I was nearly about to give it up...” (D1)*

Motivation and encouragement from the instructors helped them

to persevere and reap the benefits.

*“It feels good – Anna is always emphasising that you are strengthening through your arms and making nice shapes and almost telling a story so there is a creative element to it.” (D2)*

The freedom that comes from creative expression was core to the contemporary dance in the nursing home project. Mentoring and teaching the dance leaders to develop this skill was done through example.

*“Well Dylan he is so lively, and everybody is affected by that.”*

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*“He expects everybody to be able to do it.”*

Recognition of the rights of all people to have access to contemporary dance was at the crux of the programme. Central to this idea was interacting with the residents in a respectful and non-patronising way.

*“I’ve noticed, particularly working in the nursing home – Dylan takes no prisoners what-so-ever. He chats to everybody as he*

*would chat to you and to me. I think that is a great help to people who are in nursing homes. Because you tend to come in and say ach are you alright?” (D2)*

The dance leaders reflected on how over time the nursing home residents were motivated to ‘push’ themselves to do more and more.

*“They were putting their arms up higher you know. They were putting a bit of effort into it. They do the leg movements and they do their best.” (D1)*



## 6.6 Policy

Involvement with the AOP dance leaders project has raised expectations for future work. It has also whetted appetite for exploring ways in which dance could be used as a force for political change.

*“If we ended up training some of the older people in the care home why couldn’t that then be something that they start to deliver. That they start to be in charge of that sort of activity and then start to be in charge a little bit of their own care. You know that they are starting to improve their life experience.”*

Deficits in the current health system were identified in terms of the focus on ill health at the expense of health.

*“We have a health system that deals with problems rather than how to stop people getting those problems in the first place.”*

The lack of focus on prevention within the health system and the skewing of resources towards Belfast and Derry/L’Derry were identified as major impediments to the creation of a dynamic and inclusive culture of contemporary dance and creativity across Northern Ireland.

*“In NI we need long term vision “we have no community dance network at all so if you live in Banbridge, or you live in Limavady, or if you live in Enniskillen or you lie in Dungannon it is luck of the draw as to whether there is someone delivering services there is no structure to that at all.”*

The valuable contribution that the arts and dance made to lives was recognised. The need for politicians to raise their game, show greater empathy and become better informed about the arts was deemed essential in creating a society that values all members.

*“We went through a peace process and then we had elections and they became leaders but what sort of experience do they have and then of course so many of them are ideological led and I think we are reaping the results of that – yes, we have altered society, but it could have changed so much more.” (Artist)*

Having experienced the benefits of the arts in their lives the dance leaders were keen that others would have access to the opportunity.

*“They’d (politicians) have to come to our time in life to appreciate it. They’d be glad of it then maybe.” (Woman aged 81 years)*

*“In this day and age, you can’t just shelter people and feed them and say, ‘well there you are now, you are not going to die of starvation and you are not going to die of cold’. You have to feed somebody’s soul. You have to make somebody feel useful in society. And people are useful even if they are in nursing homes.” (Woman aged 67 years)*

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## 6 Discussion

The AOP case study of Dylan Quinn Dance Theatre demonstrates the power of contemporary dance to promote connections between people and as a result alleviate social isolation and loneliness for older people, including those living in nursing homes in rural areas.

In keeping with other studies (Kshtriya et al., 2015 and Rehfeld et al., 2017) the potential of contemporary dance to improve flexibility, stamina and balance and to promote mental health and cognitive function was deemed to be key.

Coupland (2013) suggests that the connection between mind and body in dance helps build confidence, self-esteem and self-worth. This argument also finds resonance in the lives of DQDT dance leaders and the anecdote of the male resident dancing spontaneously to the delight of others in the nursing home.

The evidence base for the positive impact of dance on health and wellbeing is strong and growing. Improved flexibility and balance reduces the risk of falls, enhanced confidence reduces the likelihood of

loneliness and the connection with other people reduces the risk of social isolation.

Investment in dance as an intervention to support public health, promote active ageing and alleviate social isolation is therefore likely to yield great rewards and enable people to age with dignity.

The DQDT case study presents a vision of contemporary dance that is accessible to all. It identifies the challenges of overcoming a political culture that is rooted in ideological politics; establishing a contemporary dance centre in a rural area, the absence of a regional infrastructure to support and nurture a culture of contemporary dance, pervasive ageist and self-limiting attitudes and a health system that is focused on the treatment of illness.

The AOP was crucial in making the DQDT project happen. A relatively small amount of money enriched the lives of residents in three care homes by promoting social connections between them and with the dance leaders. The use of peer dance leaders served to illustrate the perceived 'otherness' of people in residential care.

Images of residents sitting in passive solitude are at odds with the Active Ageing Strategy. The positive impact of the DQDT project serves to accentuate the need for training of care home staff with regards to the use of contemporary dance. The use of peripatetic dance tutors to work with residential care facilities would go some way in promoting equity of opportunity for residents and their integration into society.

The AOP project has highlighted the benefits of dance in

alleviating social isolation for older people living in residential care. If future case study work was to focus directly on the nursing home residents it could yield powerful insights into their experiences of social isolation and loneliness. Furthermore, in-depth interviews with residents and observations of dance sessions would help illuminate the impact of dance in terms of promoting social inclusion.



## **Authors**

**Dr Una Lynch** (D.Gov, MSc (Community Health), RGN, RM, RPHN), Director of Sonrisa Solutions Ltd. A career in public health for over 30 years, she has worked in practice, education, research and policy across the island of Ireland, in Latin America, Australia, and Ghana and with the World Health Organisation. Her doctoral research (2007) was a case study of Public Health governance in Cuba. She is currently a board member for two international research projects on active ageing led by National University of Ireland, Galway and the University of Sheffield; and is a Senior Associate with the Dementia Services Development Centre in University of Stirling. A focus on ageing with dignity across the lifespan, stakeholder engagement and the translation of research into policy and practice informs her work. She led the ACNI study 'Not so cut off' (Lynch & Alexander, 2016). This case study work used qualitative interviews in conjunction with shadow casting and shadow mapping to illuminate the impact of the Arts in alleviating isolation and loneliness for older people.

**Ms Joan Alexander** is an innovative and award-winning photographer whose accolades include the University of Brighton Bright Spark award, the Santander Innovation award; the Danny Wilson Memorial Award for most outstanding emerging photographer in Brighton Photo Fringe. Her work has been showcased by contemporary arts organisations including Fabrica and Night Contact. In 2015 she was nominated for the prestigious Drawing Rooms London Bursary Award for creating innovative and ambitious work during Dear Serge series at the De La Warr Pavillion. An associate with Sonrisa Solutions Ltd she combines a degree in Scholastic Philosophy (QUB 2001) with an MA Photography (Brighton, 2011) and a wealth of experience photographing older people. She contributed innovative shadow to the ACNI publication 'Not so Cut Off' (Lynch & Alexander, 2016). More recently she has been developing her 'shadow boxes' as bespoke arts education package, Shadow Studio.

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