An exploratory study into the experience of reminiscence therapy amongst people with dementia and their caregivers in Ireland

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Dementia

Risk of developing dementia increases with age. For Alzheimer’s disease the prevalence rises from approximately 1% in persons under 65 to more than 25% for those over 85. (www.dementia.ie)

The changing demographic trend in Ireland is expected to lead to an increase in the elderly population (www.cso.ie) which will impact on the number of people with dementia.

Using 2006 census information and EURODEMN protocols, it is estimated that currently approximately 38,000 people are living in Ireland with some form of dementia (Diaz-Ponce 2008)

O’Shea has predicted that by 2036, the number of people with Dementia in Ireland will be approximately 103,998 (O’Shea 2007)
Reminiscence

For the purpose of this thesis, the definition of reminiscence used is taken from the 2005 Cochrane review of Reminiscence Therapy for dementia which describes Reminiscence Therapy as involving

“the discussion of past activities, events and experiences with another person or group of people, usually with the aid of tangible prompts such as photographs, household and other familiar items from the past, music and archive sound recordings” (Woods et al 2005)
My Thesis – reasons for choosing this topic

1. My background – Care Management

2. Why reminiscence might be relevant to people with dementia

3. Psycho-social models of dementia, the work of Kitwood and Sabat.
Kitwood’s cluster of psychological needs

- Comfort
- Identity
- Inclusion
- Attachment
- Occupation

Kitwood 1997
The work of Sabat

Self one – the self of personal identity,

Self two – the self of physical and mental attributes past and present

Self three – the self of the multiplicity of social personae that require the cooperation of others to be manifested

Sabat 2005
Reasons for choosing this topic

- Quantitative work existing on outcomes, processes, settings
- The experiences of taking part in Reminiscence Therapy
- The voice of the person with dementia, their carers – formal and informal
- Harmer and Orrell study – looking at meaningful activity for people with dementia living in care homes – reminiscence emerged as a theme – used focus groups with people with dementia, staff and family carers (Harmer and Orrell 2008)
- Case study research – Mills and Coleman 1994
Reminiscence and dementia – the literature

Butler a physician working in the USA was the first to recognise the therapeutic benefits of reminiscence therapy for older people and bring it to the attention of health professionals and researchers worldwide (Woodrow 1998).

Earliest published study identified looked at the effects of a group life review activity on 3 groups of nursing home residents (Kiernat 1979).

This uncontrolled study using subjective assessment concluded that there were beneficial effects on conversation, interest and attention span.
Reminiscence and dementia – the literature

A Cochrane review was undertaken in 2005 by Woods, Spector, Jones, Orrell and Davies, examining international literature on reminiscence and dementia. It included only 5 studies from an original selection of 31 with only 4 having extractable data.

Baines 1987; Goldwasser 1987; Thorgrimsen 2002; Lai 2004; Morgan 2000

Acknowledged several useful aims: to enhance communication, to increase a sense of personal identity, to have an enjoyable activity in company with others, to improve mood and well-being, to stimulate memories and to increase the individualisation of care.

Some significant results identified – improvements in cognition and mood 4 – 6 weeks after intervention, lower strain reported in caregivers participating with their relative, some indications of improved functional ability, no harmful effects identified on the outcome measures reported. Call for more quality research in the field.
Reminiscence Therapy – outcomes associated with

RT has also been associated with the maintenance of identity and the encouragement of feelings of self-worth (Coleman 1986; Gibson 1998).

RT has also been linked to improvements in caregiver strain (Woods et al 2005) and an improvement in staff motivation (Gibson 1994; Perese et al 2008).

Wong identified the use of memory during reminiscence, as a resource to expand coping capabilities and help maintain a positive self-concept (Wong 1995).

Incidences of negative outcomes have been few (Yamagami et al 2007) but caution is advised by many researchers in the field (Gibson 2004; Bender 1997).
This Thesis- Key Research Questions:

- How do individuals with dementia who participate in reminiscence therapy programmes experience the intervention?
- What are the attitudes, expectations and experiences of formal and informal caregivers who participate in reminiscence therapy?
- Are there differences between the way in which reminiscence is experienced in different care settings?
Research Methods

Qualitative study
A multiple case study approach
Purposive sampling – maximum variation
Case studies

Data Collection – MMSE, semi-structured interview schedules, observations
Analysis – all interviews will be taped and transcribed and with the rest of the data analysed with emerging themes identified using a Phenomenological approach.
Work to date

- Extensive literature search
- Methodology developed
- Transfer review
- Ethical approval from Trinity College
- Approval has been granted to commence work in four of the settings
- Pilot study – interview and observation schedules have been revised
- Seminar and conference presentations
Pilot Study Findings

- 3 interviews with persons with Dementia • Interview Schedule Adjusted
- 1 with formal caregiver • Interview Schedule Adjusted
- 1 with informal caregiver • Interview Schedule Adjusted
- 2 Observations
Future Developments

- Field Work to commence early March 2010, expected completion date November 2010
- Ongoing data analysis
- Writing up of findings
- Presentations to seminars, conferences and DSIDC Training days.
Thank You

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