



Reminiscence therapy

DEMENTIA CARE

This evidence theme on reminiscence therapy summarises one of the key topics identified by a scoping review of dementia research

Key points

- Reminiscence therapy (which may include life story work) invites a person living with dementia to review past events in their history, which can be a positive and rewarding activity for the person.
- These approaches can help staff understand people living with dementia as individuals with unique needs and preferences.
- Evidence from 11 systematic reviews showed that reminiscence therapy may improve quality of life and reduce symptoms of apathy.
- The evidence on the benefits of reminiscence therapy for depression, cognitive function, and agitation is inconclusive.
- Studies found no benefit of reminiscence therapy for the physical function of the person living with dementia. There was also no benefit found for stress, wellbeing, mood, and quality of life for the carer.

What is reminiscence therapy?

Reminiscence therapy (which may include 'life story work') involves a discussion of past experiences and events between a person living with dementia and staff or family members.

This approach often uses photos, old newspaper articles, and items from the person's past to evoke memories and stimulate storytelling. [1] These may be presented in print format or using digital media.

A final product of this work might be a life-story book of personal memory triggers. [1] It is also a good way for family and care staff to get to know the person's interests and preferences to help with decision-making when the person is no longer able to communicate. [2]

Are reminiscence therapy and life story work effective approaches?

We found 11 systematic reviews that assessed the impact of reminiscence therapy, including one focused on the outcomes of life story work.

Reviews found that reminiscence therapy and creating a life story book had a positive impact on the quality of life of the person living with dementia. [2, 3, 10, 11] In addition, reminiscence therapy has been found to reduce apathy. [4]

Work on life story books was also shown to improve:

- The person's autobiographical memory [2]
- Family member satisfaction with care and positive perceptions of their loved one [2]
- Staff members' knowledge of the person in their care and the quality of the relationship between them. [2]

The evidence for the effectiveness of reminiscence therapy is inconclusive for:

- Depression [3, 5-8, 10, 11]
- Cognitive function [3, 5-7, 9-11]
- Agitation [7, 8]
- Other neuropsychiatric symptoms [11]
- Dependency. [11]

This is because some studies reported benefits, while other studies did not.

There was no clear evidence of benefit for carers' stress, wellbeing, mood, or quality of life. [7] In other words, studies have assessed the relationship between reminiscence therapy and these outcomes, but they did not report any benefits. Overall, reminiscence appears most likely to be effective when people are living in residential aged care. [6]

Evidence limitations

The reviews highlighted concerns about the methods used in some of the studies. This reduces the degree of certainty we might have about the benefits of reminiscence therapy. For example:

- Studies did not compare the effectiveness of reminiscence therapy activity across varying stages of dementia. [7]
- It was unclear how long benefits last. [3]
- There were not enough people in some studies. [3, 5]

What can an individual do?

- Be aware that some people may find discussing their past distressing.
- On first meeting a person with dementia, find out if they are willing to share information about their previous work, interests, hobbies, accomplishments, and memories of family and special events such as holidays. This can form a basis for conversation with the person or help you understand their personal likes and dislikes.

- Ask family members to provide photographs of events and people in the person's life which can be used to communicate with the person.
- Keep notes updated if you have noticed that an individual enjoys talking about their past, pay attention to any of their favourite topics (or topics to avoid).
- Even if the person living with dementia is not able to participate verbally in reminiscence therapy and life story work, they may still experience feelings of pleasure from being involved in reflections on their past.
- View the resources provided in the ARIIA Knowledge Hub.

What can the organisation do?

- Consider conducting workplace training on reminiscence therapy and life story work.
- Encourage and support staff to keep notes on what certain individuals may like to talk about.
- Make staff aware of some of the practical resources available on this topic. View the resources provided in the ARIIA Knowledge Hub.

References

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