Effectiveness of Reminiscence Therapy on Subjective Well Being and Memory among Elderly

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Abstract: *Reminiscence therapy is a procedure in which the participants shared their memories and feelings with each other. This form of therapeutic intervention respects the life and experiences of the individual with the aim to help the patient maintain good mental health and improves well being. Hence a pre-experimental design i.e. one group pre test- post test design was adopted to assess the effectiveness of reminiscence therapy on subjective well being and memory among elderly in selected old age homes of Indore. 30 elderly were selected using purposive sampling technique. The study findings revealed that the paired 't' test value between pre-interventional and post-interventional memory score ('t'=18.92) was significant at the level $p \leq 0.001$ confidence level which revealed the effectiveness of reminiscence therapy on memory. The statistical analysis also revealed a significant difference ('t'=11.22) among pre test - post test score of subjective well being score at the level $p \leq 0.001$.*

Keywords: Reminiscence Therapy, Subjective well being, Memory, Elderly

1. Introduction

Ageing is a universal process. Ageing is generally defined as a process of deterioration in the functional capacity of an individual that results from structural changes, with advancement of age. Number of people in the 60-plus age group in India is expected to increase from 100 million in 2013 to 198 million in 2030. India has thus acquired the label of "an ageing nation" with 7.7% of its population being more than 60 years old.

As people enter the old age, they begin to experience associated changes in their physical, mental and social health. Various factors might be associated with this like retirement, separation from an occupational identity, death of irreplaceable loved ones. While learning to adapt to the ageing process, elderly individuals often develop feelings of loneliness, sullenness, depression and loss of self confidence. Some old people may adjust effectively in this situation by disengaging from society or by re investing themselves in new pursuits. However, for others old age may necessitate a lowering of self-esteem which ultimately leads to lowering of their well being.

The elderly are reported to be at risk for decreased subjective well-being most likely due to increasing functional limitations and losing many important members of their personal networks. It is being reported that people living in old age homes, tends to have low subjective well being than living with their family.

Decades of psychological research has shown that many factors contribute to an individual's subjective well-being. Some of the key factors for well-being in old age are health, financial stability, love, life satisfaction and family and social support. It is being reported that people living in old age homes, tends to have low subjective well being than living with their family.

To help older adults cope with these challenges, adapt to the multiple changes and make successful transitions to later life, various mental health interventions have been developed. Reminiscence therapy is one the group activity that promotes the self esteem and reaffirms a sense of identity of elderly.

The term 'Reminiscence' refers to recollection of memories from the past. It involves exchanging memories with the old and young, friends and relatives, with caregivers and professionals, passing on information, wisdom and skills.

Reminiscence therapy uses prompts, such as photos, music or familiar items from the past, to encourage the patient to talk about earlier memories. It is generally offered to people in their later years that have mood or memory problems, or need help dealing with the difficulties that come along with aging. It helps older people find their lost individual inner resources and merits, establish their confidence, increase their self-esteem, develop positive thinking and resolve most of their mental problems. It gives the elderly an opportunity to socialize, and through sharing their experience, they can exert their deep recall to reduce their loneliness and increase their self-identity and belonging. Sometimes people remember because their memories have been triggered involuntarily by a favorite song or tune and sometimes people remember on purpose.

Reminiscing gives a pleasure and a sense of relatedness and connection with what has gone before. This can also help to regain their memories and past experiences. By valuing memories, people are helped to value themselves when developmental challenges, current circumstances, transitions, failing health and increasing age assail them.

1.1 Objectives of the study

1) To assess the level of subjective well-being among elderly before reminiscence therapy.
2) To assess the pre- interventional memory score among elderly.
3) To find out the association between subjective well-being and selected demographic variables.

4) To compare the pre-interventional and post-interventional level of memory after reminiscence therapy.
5) To evaluate the effectiveness of reminiscence therapy on subjective well being after reminiscence therapy.

2. Research Methodology

2.1 Research design

A pre-experimental research approach was adopted with pre-test post test design.

2.2 Subjects and setting

The sample comprised of total 30 elderly aged 60 years and above residing at selected old age homes of Indore.

2.3 Sampling technique

The sample was selected by non probability purposive sampling technique.

2.4 Variables under study

The independent variable was reminiscence therapy and dependent variables were subjective well being and memory. Inclusive criteria were male and female elderly in the age group of 60 years and above samples available at study period, samples understanding Hindi or local language and willing to participate. The Exclusive criteria were elderly with sensory impairments and psychotic disorder.

2.5 Description of Tool

The tools used in the study are divided into three sections.
Section A: Socio demographic characteristics of the participants in relation to their age, gender, educational status, marital status, previous occupational status, duration of stay in old age home, frequency of communication with family members and religion.
Section B: Structured questionnaire to assess the level of subjective well being by Subjective well being Inventory (SWBI).
Section C: Third tool was used to assess the memory by PGI memory scale.

2.6 Validity and reliability

Content validity was done by 7 experts from the field of psychology and nursing. The reliability of the tool was established by Cronbach Alpha Coefficient method and Split-Half Reliability coefficient.

2.7 Data Analysis

Data was analyzed by using descriptive and inferential statistics. Descriptive statistics used include mean, frequency, percentage, median and standard deviation. Inferential statistics include 't' test Chi square and Pearson's coefficient.

3. Results and analysis

3.1 Sample characteristics

Table1: Frequency and percentage distribution of selected socio-demographic variables.

S.no	Variables	Frequency	Percentage
1.	Age in years		
	a. 60-70	17	56.7%
	b. 71-80	10	33.3%
	c. ≥81	3	10%
2.	Gender		
	a) Female	24	80%
	b) Male	6	20%
3.	Marital status		
	a) Married	23	76.6%
	b) Unmarried	2	6.7%
	c) Divorced	3	10%
	d) Separated	2	6.7%
4.	Educational status		
	a) Primary	4	13.3%
	b) Secondary	17	56.7%
	c) Above Secondary	9	30%
5.	Previous occupational status		
	a) Service	11	36.7%
	b) Non- service	19	63.3%
6.	Duration of stay in old age home	15	50%
	a) 1-5 years	8	26.7%
	b) 6-10 years	7	23.3%
	c) > 10 years		
7.	Frequency of communication with family members		
	a) No communication	18	60%
	b) Once in a week	3	10%
	c) Once in a month	9	30%
8.	Religion		
	a) Hindu	26	86.7%
	b) Others	4	13.3%
9.	Extent of assistance required		
	a) Total compensatory	7	23.3%
	b) Partial compensatory	16	53.4%
	c) Supportive compensatory	7	23.3%
10.	Previous position in family		
	a) Main earning member	11	36.7%
	b) Supportive member	13	43.3%
	c) Dependent member	6	20%

Above table revealed that among 30 clients, majority of clients, 17 (56.7%) were from the age group of 60-70 years. Female clients 24(80%) outnumbered the male clients 6(20%). On viewing marital status 23(76.6%) of them were married. More than half of elderly 17(56.7%) were with secondary education. Only small numbers of clients were in service 11(36.7%). Half of clients 15(50%) were staying in old age home since 1-5 years. Regarding communication with family members 18(60%) of them had no communication. Considering extent of assistance required by clients, more than half of elderly 16(53.4%) required partial compensatory assistance Majority of elderly 13(43.3%) were supportive member in family and nearly similar number of elderly 11(36.7%) were main earning member.

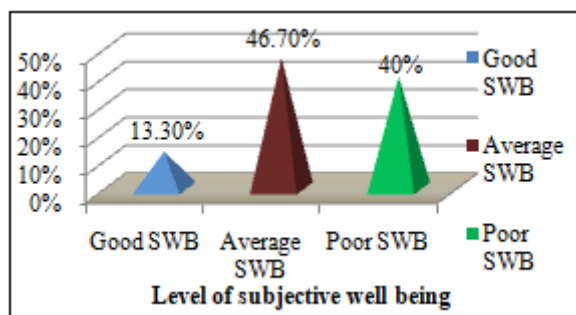## 3.2 Assessment of subjective well before reminiscence therapy

Figure 1: Pyramidal diagram showing the level of subjective well being before reminiscence therapy

The data presented in figure 1 showed that majority of the clients 14(46.7%) had average subjective well being, nearly similar number of elderly 12(40%) had poor subjective well being and only 4(13.3%) clients were with good subjective well being.

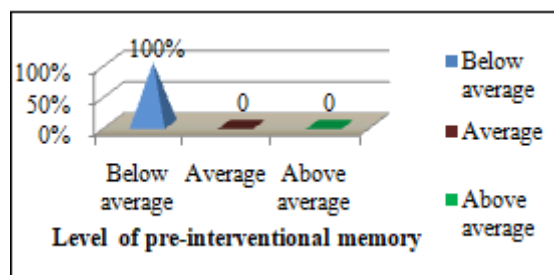### 3.3 Assessment of pre-interventional memory score

Figure 2: Pyramidal diagram showing the pre-interventional level of memory

The data presented in figure 2 revealed that all the elderly 30(100%) had below average memory score. This depicts that there was memory impairment in all clients.

3.4 Association of subjective well being and selected demographic variables

The study revealed that there is no significant association was found between subjective well being and selected demographic variables such as age, marital status, educational status, communication with family members, extent of assistance required and previous position in family at the level of $p \leq 0.05$.

3.5 Comparison of pre-interventional and post-interventional memory score

Table 2: Mean, Standard Deviation, Mean Difference, d.f. and 't' value of pre-interventional and post-interventional memory score (N=30)

Memory score	Mean	Mean difference	S.D	S.E	df	't' value
Pre-test	62.53	17.47	5.05	0.92	29	18.92***S
Post-test	80.00					

*$p \leq 0.05$, **$p \leq 0.01$, ***$p \leq 0.001$

Data in Table 2 depicts that the pre-test mean memory score was 62.53 and for post-test it was 80. The mean difference was 17.47 with SD of ±5.05. The computed 't' value was 18.92 at degree of freedom 29. This indicated that there was significant difference in pre-test and post-test memory score after reminiscence therapy at the level of $p \leq 0.001$. Hence, H_2 was accepted at the level $p \leq 0.05$.

3.6 Assessment of effectiveness of reminiscence therapy on subjective well being

Table 3: Mean, Standard Deviation, Mean Difference, d.f. and 't' value of pre-test and post-test subjective well being score (N=30)

Subjective well being score	Mean	Mean difference	S.D	S.E	df	't' value
Pre-test	65.56	12.94	6.31	1.15	29	11.22***S
Post-test	78.50					

*$p \leq 0.05$, **$p \leq 0.01$, ***$p \leq 0.001$

Data in Table 3 depicts that the pre-test mean SWB score was 65.56 which had increased to 78.5 at post-test. The mean difference was 12.94 with SD of ±6.31. The computed 't' value was 11.22 at degree of freedom 29. This indicated that there was significant difference in pre-test and post-test subjective well being score after reminiscence therapy at the level of $p \leq 0.001$. Hence, H_3 was accepted at the level $p \leq 0.05$.

4. Discussion

Assessment of level of subjective well being among elderly

The level of subjective well being among elderly was assessed by subjective well being inventory. The findings of the study revealed that majority 14(46.7%) had average subjective well being, nearly similar number of elderly, 12(40%) had poor subjective well being and only 4 clients (13.3%) were with good subjective well being.

Similar study was conducted on "the level of subjective well being among elderly in Swedish population". Result showed that out of 1000 elderly, 62.4% of elderly had showed lower subjective well being. The study also concluded that as age increases subjective well being score decreases.

Assessment of pre-interventional memory score

The study revealed that all the elderly, 30 (100%) showed below average memory score. The findings of the study showed that memory impairment increases with age.

The study finding was supported by another epidemiological study to estimate the prevalence of age associated memory impairment (AAMI). Result of the study showed that prevalence of AAMI vary from 39% in the age group 50 to 59 years , 24.1% in 60- to 79-year-old and high prevalence rate of 85% in the age group over 80 years.

Comparison of pre-interventional and post-interventional level of memory score

The result showed that there was a significant difference in the level of memory score after reminiscence therapy which is similar to the study on influence of a memory training

programme among elderly. After the programme a significant improvement was found in the experimental group. They concluded that cognitive abilities can be improved by memory training.

Effectiveness of reminiscence therapy on subjective well being

The result of present study revealed that the reminiscence therapy was efficient in bringing about statistical difference in the pretest and post test subjective well being score. This study was supported by another study to assess the effectiveness of reminiscence therapy on subjective well being. The researcher had used grab bag technique and health promotional video to promote subjective well being. The result showed that there was significant difference in the level of subjective well being after reminiscence therapy at the level $p \leq 0.05$ (t= 14.4).

5. Conclusion

Researcher concluded that as individual get older, they wanted to be respected, supported, loved and cared by their family and society. Elderly needed assistance and found it difficult to received help from others, mainly those who were away from their family. The elderly felt that living alone without their spouse and children's, adjusting to the changing health status, making decision alone was very distressing to them. All these factors lead to lower well being of an elderly. Researcher had found that reminiscence therapy was very effective in promoting subjective well being of an elderly, as therapy included the sharing of past experiences. Elderly were very interested in communicating their feelings and experiences with each other.

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