

**Evaluative Research on Reminiscence
Partnership Program
for Elderly Persons in Community**

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(Abstract) The current paper examined the effect of group reminiscence for the community-dwelling elderly persons using cross-generational approach. The study was framed by Reminiscence Partnership Program that encompassed the intervention of reminiscence group, the training of the university students and the professionals of health and social division, and the evaluation. Sixteen elderly persons participated in the reminiscence group. They were divided into two groups of 8. They attended an hour-long group session once every two weeks over three months. The themes of the group were chronological and non-chronological, with the use of props of the local community. Evaluation of the program included pre- and post-test of MMSE, the Activity Scale of TMIG

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and Baum Test as well as focus group interview. The results of the focus group conducted to both the elderly and the students brought to light the socio- cultural and interactional aspect of group. It was suggested that the group reminiscence was effective for the elderly participants to bring out a sense of confidence towards the continuity of self. On the part of the students, it was found that it enhanced the students' learning in the possibilities in aging and their reflection on themselves as future career. A conceptual model is proposed in understanding the multi-dimensional effects of reminiscence intervention. The differences in the group development and dynamics between the two groups are also described. Themes of reminiscence and some ethical considerations in conducting reminiscence group are discussed. Evaluative research on the intervention of reminiscence group with both qualitative and quantitative account is highly invited.

[Key words: Community, Focus group, Life review, Reminiscence]

Introduction

The history of Reminiscence and Life review approach in Japan started in 1980s with the introduction of Robert Butler's work (1963). Butler's concept of reminiscence and life review echoed with the cultural tradition in Japan to value life stories of the elderly as socio-culturally shared knowledge (Nomura 1992). There was increasing expectation at the time towards development in care for elderly persons with dementia. Beck (1998) classified psychological and behavioral interventions for Alzheimer's disease into 6 approaches: approach for cognitive function, environmental conditions, provision of recreation, physical function, self-integrity, and for family. Reminiscence therapy is suggested as the approach for self-integrity. The theory and methods of reminiscence and life review has been applied in multiple ways across fields of gerontology, social work, psychology, nursing, medicine and rehabilitation (Bornat, 1994; Gibson, 1998; Haight &

Webster 1995).

Nomura (1998) presented the method of reminiscence and life review as Figure 1. Applications of reminiscence and life review in Japan include care for elderly persons with dementia, programs for preventing needs of nursing care, community programs for healthy elderly persons, and cross generational approaches. Programs for preventing needs of nursing care with its focus on community-living, in particular, have been developed under the new long-term care insurance system. The importance of cross-generational approaches has also been highlighted (Nomura 2004). Coleman (1994) pointed out the socio-cultural aspect of reminiscence and life review approach that “Reminiscence should not be a means of self-defense, but of cultural support and enrichment, something that the older generation passes on the younger.”

There were two general purposes of the study. The first was

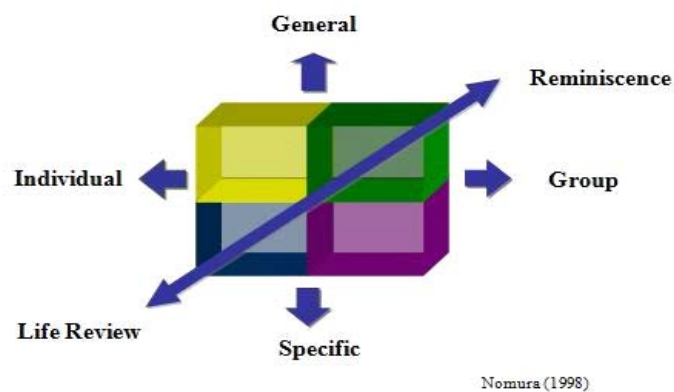


Figure 1. Methods of Reminiscence and Life Review

to examine the effect of group reminiscence for the elderly persons living in community in Japan. The second was to obtain basic information about community resources and effective ways to make the best of them in assuring today and tomorrow of the elderly persons there. More specifically, the study aimed to promote active involvement in community among the elderly who tend to be home bounds and to encourage the transcendence of the reminiscence and their experiences with the younger generation.

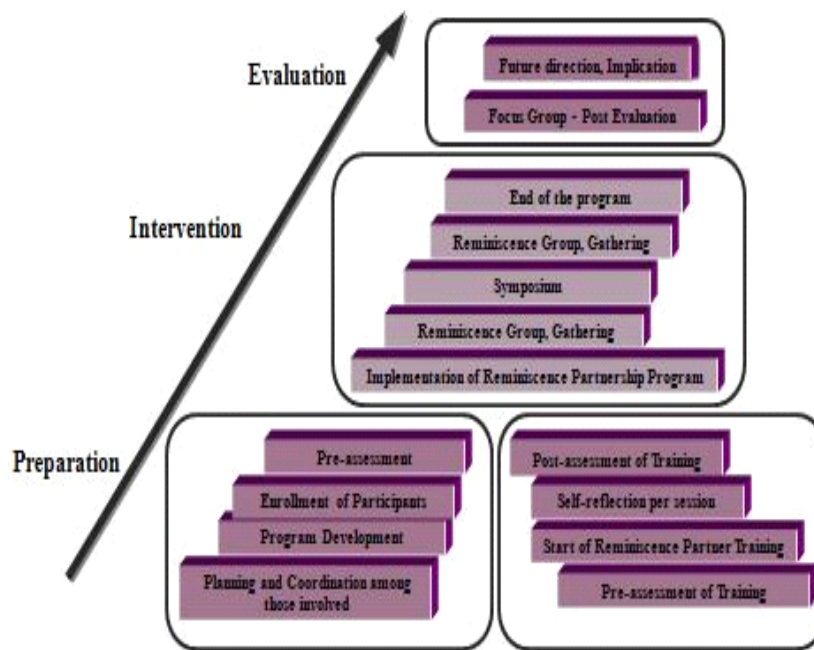
Method

The study was built on Reminiscence Partnership Program, which framed the reminiscence group for elderly persons living in community and the training of the university students and professionals of health and social division. Figure 2 shows the three phases of the reminiscence partnership program: the preparation, intervention and evaluation.

The preparation phase consisted of two parts that were organized at the same time. One was the planning and coordination among professionals involved. Preliminary education for reminiscence and life review were also given to them. The other was the education for the university students through which they learned the basics and the applications of reminiscence. The intervention phase was the core part of this project, which included the reminiscence group, gathering, and symposium. The evaluation phase consisted of focus group and consideration on future direction and implication of the study.

Preparation Phase

The reminiscence partnership education offered to the students focused on the theories of reminiscence and the practice of the per-



Nomura (2006)

Figure 2. Phases of Reminiscence Partnership Program

tinent skills. The students developed understanding in the history of reminiscence and the effects of reminiscence approach. The students, for example, engaged in a pair activity in which they shared the memories around the props. The students also experienced the learning and sharing of the past. They shared their memories of their teachers in elementary school. In addition, they developed understanding in the applications of reminiscence. They watched videos of reminiscence group in two different communities and discussed the socio-cultural aspects of the community-based approaches. Furthermore, they learned from research reports on reminiscence

applied in communities and future direction of reminiscence partnership program.

Intervention Phase

The overview of the reminiscence group is shown as Figure 3. The elderly were divided into two groups. The average age of the elderly of one group was 80.8, that of the other was 75.1. The community social welfare organization called for the advertisement in their monthly newspaper. The requirements of attendance were preferably with no absence and to come the meetings by themselves. They attended an hour-long group session once every two weeks

Reminiscence Group	Rainbow Group (Group 1)	Hydrangea Group (Group 2)
Participants	8 community living elderly people 2 male, 6 female Average age 80.8	8 community living elderly people 3 male, 5 female Average age 75.1
Meeting	Total of 5 group meeting +Symposium An hour long group meeting once every two weeks	
Program	Reminiscence Group and Gathering • Combination of Chronological and Non-chronological themes • Prompts of local community according to the group theme	
Place	M city in Tohoku area of Japan , Japanese ancient residence in the Samurai era	
Staff Members	Staff Members of health service, medicine, social work in M city, Students of Iwate Prefectural University	

Nomura (2006)

Figure 3. Overview of the Reminiscence Group



Figure 4. Some examples of Props Used

over three months. In addition, there was big symposium which one of the elderly members participated as presenter. In the symposium, the concept and approach for reminiscence were introduced by researchers and practitioners. The themes of the group were chronological and non-chronological, using props of local community as shown in the Figure 4.

Evaluation Phase

The examination into the impacts on the elderly included pre and post comparison by MMSE, TMIG and Baum Test. It also involved descriptive analysis of records and videos taken every session. The evaluation of educational effects on the students included analysis of the pre and post questionnaire along with the result of the focus group interview (see Figure 5).

Reminiscence Partnership Training		
Evaluation of educational effect on the students		
① Analysis of the result of the questionnaire conducted before and after training		
Reminiscence Partnership Program		
	Evaluation of the effect on the participating elderly	Evaluation of the effect on supporters
② Analysis of the students' self-reporting log written per session	① Pre and Post assessment by MMSE	① Evaluation by participating collaborators' self-report per session
③ Analysis of video recorded per session	② Pre and Post assessment by Index of Activity Ability of TMIG	
	③ Pre and Post assessment by Baum Test	
④ Analysis of the recorded video and observation notes of the gathering	④ Pre and Post assessment by questionnaire on significance of reminiscence	② Follow-up meeting per session
	⑤ Descriptive evaluation of records and video taken every session and videos	
⑤ Evaluation of the focus group conducted upon the completion of the whole Reminiscence Partnership program	⑥ Evaluation of focus group conducted upon the completion of the whole program	③ Evaluation of focus group conducted upon the completion of the whole program

Nomura (2006)

Figure 5. Methods of Evaluation

Results

Results of MMSE

In group 1, the individual MMSE scores ranged from 23 to 27. In group 2, there was little range in the MMSE scores. Half of the members had 28 points and the other half had 29 points. Whereas the mean score of group 1 increased from 25.38 to 27.50, that of group 2 slightly decreased from 28.50 to 28.38 (Figure 6). In group 1,

the individual MMSE scores ranged from 23 to 27. It can be suggested that the cut-off point of MMSE score is 27 for healthy elderly people in community.

Results of Activity Scales of

Tokyo Metropolitan Institute of Gerontology (TMIG)

According to the mean scores on Activity scale, group 1 and group 2 both showed only slight change: group 1 slightly decreased from 12.38 to 12.25, group 2 slightly increased from 12.25 to 12.50 (Figure 7). In group 1, the individual Activity scores ranged from 11 to 13. In group 2, they ranged 10 to 13. The increase in the mean scores of group 2 could be as a result of one of the participants' increased score from 10 to 12.

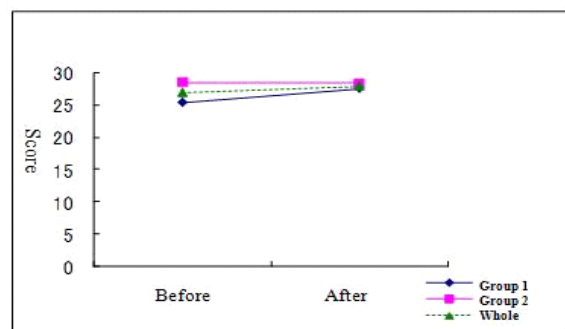


Figure 6. Mean MMSE Scores before and after the Intervention Period

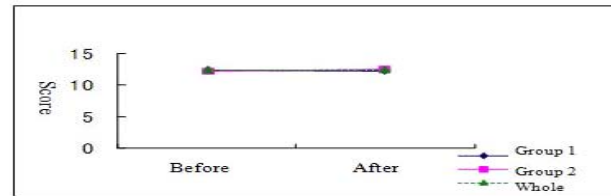


Figure 7. Mean Activity Scores on TMIG before and after the Interventive Period

Results of Baum Test

As for group 1, the results of Baum Test showed decrease in space use as well as increase in the number of fruits and leaves. As for group 2, the results indicated increase in both space use and in the number of fruits and leaves. They also suggested that the intensity of brushstroke strengthened (Kudo, Ishizaki, and Nomura 2005). Figure 8 shows two individuals' result of Baum Test in group 2.

Results of Focus Group of the Elderly People

The study suggested that group reminiscence was effective for the elderly participants to bring out a sense of confidence towards the continuity of self. It also suggested that the framework of valuing social interaction across generations encouraged their active participation. As for the students, it enhanced their understanding for possibility in aging and their reflection on themselves as future career.



Figure 8. Result of Baum Test of 2 Group Members

The results showed that most of the participants had little contact with the younger generation. Some said that they hardly had social interaction other than to say greetings to children in the neighborhood, while others said that occasions to talk with their grandchildren were limited. One of the members expressed on behalf of the members “We wish to have more active involvement with the young.” The results also indicated the participants’ positive feedback on the interaction with students in the reminiscence partnership program. One member put it as “The relationship between the elderly people and the students was situated in communicative relationship as speaker and listener, so that was good.” Another member commented that “By meeting students, the older members’ *wish to talk* changed to *want to send* with enhanced motivation.”

In addition, the results showed that the elder participants were positively and actively searching for what they can contribute, or what the elder could do for the young. Some voices that were heard were “What are some ways to make the best of the knowledge and experience of ours?” “We wish to tell our experience of the history and our memories to the community.”

Moreover, the results revealed positive changes in their attitude

towards reminiscing. The following was one of the participants' comments: "I used to think a lot to myself, but I tended to fall into rather negative feeling. There were times when I wanted to stop thinking about things that were no longer reversible. I even thought of keeping my stories to myself . When asked by the students, I found myself talking about it in so natural way. Thanks to this group, I now recall things when I'm alone and think to myself in a more positive way . Telling stories of mine to the students helped me reorganize things without feeling depressed."

Results of Focus Group of Students

The students enhanced their learning and positive experience through the reminiscence group. Here are excerpts of exchanges a few students had with the elderly and their reflection.

Student A

Mrs. K: (It's true that things were male-centered back then but instead of taking such closed environment in a negative way, there is another way to look at it.) Women do have more strength than men.

Student: I don't think I have such strength.

Mrs. K: Believe in yourself and keep your own philosophy of life. We can go on because we have such strength, no matter how different you may be from others.

Student's reflection: I was a little shocked to hear Mrs. K's words but I'm very encouraged by her message.

Student B

Student: When the topic of the reminiscence was the difficult times such as memories of war and poverty, I felt depressed taking records at the back.

Mrs. S: My dear, you may be too young to know yet, but life

is made in such a way that the ups and downs, or the pluses and minuses, always ends up 0.

Student's reflection: I have never received such generous advice of life so I almost cried in tears. I was so relieved to hear her words.

The following are passages of comments received from a few other students:

Student C

※ said to Mrs. U that the phrase is beautiful. The following day, she wrote the phrase in calligraphy for me. It touched my heart. I said it without any intention, but she remembered what I had said. I hope I can be like her who is caring and appreciates the relationships with others. That would be my goal.

Student D

※ found that the elderly people are opening their hearts to the young. I sensed their strong wish to tell stories of theirs. I felt that the young were not opening their hearts as the elderly people, so I encouraged myself to take a big step and get closer to them. The elderly people look so generous and seem to accept everything about us, and I felt strongly that we are supported by such warm-hearted elderly in our life. I rediscovered that I owe what I am today to such people. So, I believe views that look down on the elderly are not appropriate.

There is growing need for evaluative research with active involvement of members of a community. Collaboration and communication among the elderly people and younger generation as in this study can bridge the past, present and future of the community.

Discussion

The difference between the process of two groups

In group 1, the impact of various props in each session was greater than those of group 2. In group 2, the reminiscence type as evaluative and problem-solving function was expressed according to the development of group stage. In group 1, the retrospective type of reminiscence with enjoyment was expressed from the beginning of the group session. Since their age varied largely, the interaction in the group had a cross-generational nature. In comparison with group 1, the age of group 2 was similar. Stimulating each other, the members of group 2 tended to evaluate one's own life history and searched for meaning for their life, which continued from the past, present and future. The slight difference in the MMSE score between the two groups can be speculated to have influence on the process of the group. Since the number of the participants in the study was small, the extent to which we can generalize the results of various scales in the study are limited. We need to select careful research design and at the same time maximize the quality of practice components.

Themes of Reminiscence

There are two kinds of themes for reminiscence group. One is themes of reminiscence that reflect developmental stages (Figure 9) and the other is those that do not necessarily fit along particular developmental stages. The latter themes, for instance, include movements or actions of work then, travel, changing of seasons, neighborhood, medicine, sickness, and exercise. Themes used in the

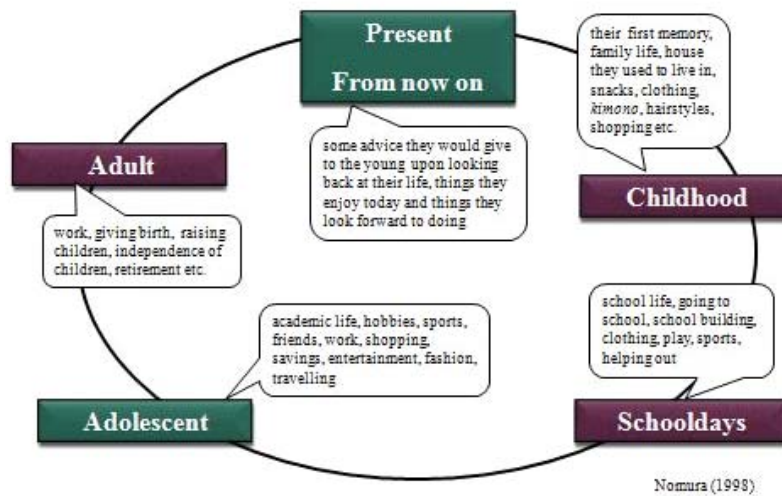


Figure 9. Themes of Developmental Stages

study were almost along with the developmental stages such as childhood, adolescence, present and future. Burnside (1995) pointed out that “A theme could also be effective because of the depth and breadth of the memories discussed.” In order to select appropriate themes of reminiscence for each group, it is essential to assess the life events and history of the members. Furthermore, we need to consider the following questions: Why choose the theme? Who chooses the theme? What is the significance and effect of the theme? What could have been different, if chosen other themes?

The themes selected in the study were based on the knowledge of community history informed by the local professionals. The inclusion of cultural and historical perspective in the selection of the themes facilitated and invited the group members to participate in reminiscence group with enthusiasm. The members had few occasions

in their everyday life to remember and discuss the cultural events in community. At the latter stage of the group development, some of the members brought in themes and props that were significant to them. In spite of the change in the schedule of themes, the other members welcomed the new themes and as a group, the members actively exchanged and shared their reminiscence.

Nomura (2006) suggested special attention in using themes of community events in rather homogeneous group of a particular community. Due to the nature of such themes, the privacy of group members may be threatened through the content of their reminiscence expressed. In the study, at the beginning of the group, the leader of the group asked the members for their consensus to keep other members' reminiscence to themselves and not to speak outside the group. While all the members of the group actively involved in exploring and listening to other members' reminiscence, they respected the confidentiality of what was being shared. The life history and reminiscence of particular themes of an individual belong to that individual and are part of him-/herself. It is essential to ensure the security of group members and to respect the dignity of each group member.

Multi-dimensional effects of reminiscence

In this study, the effects of reminiscence group involved multi-dimensional perspective. Figure 10 is a model of reminiscence intervention proposed by Nomura (2009). The model proposed that the reminiscence intervention involves empathy, resonance, listening, imagination and creativity. It has impacts on inner aspect, interactional aspects and social relations of the individual, leading to improvement of his/ her quality of life.

Little research on reminiscence group for healthy elderly in community

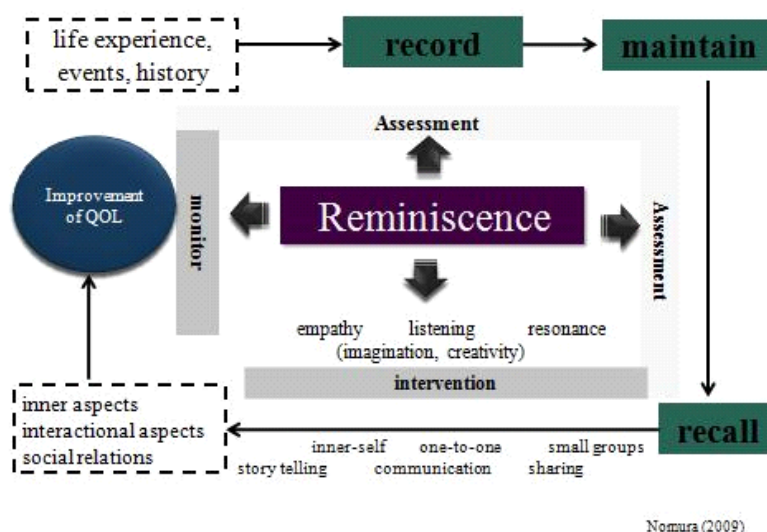


Figure 10. Intervention of Reminiscence

discuss from such viewpoint. The review of research on reminiscence therapy for persons with dementia (e.g. Woods & McKiernan 1995, Gibson 1998, Nomura 2002) suggests multi-dimensional effects of reminiscence therapy for persons with dementia in relation to socio-interactional aspects. To be more specific, improvement of emotional function, increase in motivation, increase in the frequency of speaking, enrichment of non-verbal expressions such as facial expression, increase in concentration, decrease in problematic behaviors, promoting social interaction, increase in interest to other, development of supportive and sympathetic relationship with others. In evaluating the effects of reminiscence group for healthy elderly living in community, there is a tendency to focus on the statistical data. The focus group in the evaluation of our study suggested that evaluation for healthy elderly living in community brings to light the

socio-cultural and interactional aspect of group therapy.

Our analysis of the content of reminiscence of the participants and focus group interview along with other evaluative methods showed two kinds of effect for the elderly person. One was the effect at the individual level. This included, for instance, ways of seeing such as promote life review, solving problems of the past and reorganization and reintegration, helpful for development of identity, bringing out a sense of confidence towards the continuity of self, comforting oneself, and increase in self-respect and self-worth. The other effect was at the level of socio-interactional relations. This concerned, for example, promoting development of social relationships, revitalizing life and helps find something of joy, taking on a new social role, and promoting cross-generational interaction.

As for the effects on the professionals, they ranged from micro level to community level. The professionals were very enthusiastic in participating in the group and in evaluating through focus group and follow-up interview. They deepened respect towards the life history and ways of living of each of the elderly. In addition, they rediscovered group members' sociability and power. They also obtained more information for developing person-centered care plan for the elderly. Through the cross-generational interaction among the elderly and university students, they developed richer perspective in community care.

Conclusion

In concluding the paper, I wish to quote passage from Nomura (1998).

*Life is like a textile
in which experiences of the past and*

*events of life are the warp and weft woven
in harmony as one piece of textile,
In each and every texture of the textile,
joy and happiness
pain and sadness are ingrained,
Each textile is one of its kind,
and there is not even one that is the same,
The only person who knows the meaning of
the textures or experiences woven in the textile
is the life reviewer him/herself,
Those who practice life review therapy are companion
who unfolds the textile called the life of the person with gentleness
and who accompanies the path to re-weave again,
with a half of a step behind the reviewer
and never ahead.*

There is growing interest in ethical considerations on practice of reminiscence and life review. Discussions and thoughtful examinations into ethical issues of the practice and research including confidentiality of clients and their content of reminiscence are welcomed to the field.

While there has been professional education and training for reminiscence in the area of nursing, social work, clinical psychology, therapy and care, more advancement in the quality of practice is essential. The 6W1H (What, Who, Whom, When, Where, Why, How) of reminiscence and life review needs to be reframed with clarification and updated conceptualization. Such clarification and updated conceptualization will also be helpful for developing well-thought examination into the effectiveness of reminiscence and life review. Evaluative research using both qualitative and quantitative data is highly invited. Active participation of elderly persons and young people can be a key resource for community support.

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