



الجامعة الإسلامية العالمية ماليزيا
INTERNATIONAL ISLAMIC UNIVERSITY MALAYSIA
وَتَبَرَّكْتَ بِسُلْطَانِ الْبَارِئِينَ بِالْمَدِينَةِ

A review of spiritual reminiscence therapy for older people with mental health problems

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INTRODUCTION

- ❑ Interventions for mental health problems
 - ❑ Pharmacological intervention
 - ❑ Prescription of pharmacological treatment is low
 - ❑ Misdiagnosis is a problem (Voyer & Martin, 2003)
 - ❑ Adverse effects (Coupland et al., 2011)
 - ❑ Non-pharmacological intervention such as
 - ❑ Cognitive behavioural therapy
 - ❑ Reminiscence therapy



INTRODUCTION



WHAT IS REMINISCENCE THERAPY?

- Reminiscence therapy uses the recall of past events, feelings and thoughts
- To facilitate pleasure, quality of life or adaptation to current circumstance (Bulechek, Butcher, & Dochterman, 2008).
- Groups or individuals



INTRODUCTION

- ❑ Current reminiscence therapy need to be adapted
 - ❑ Malaysian population is highly influenced by cultural practices
 - ❑ Cultural practices intertwined with religious practices
- ❑ Spirituality can be a protective agent and provide support (Abolfathi Momtaz, Hamid, Ibrahim, Yahaya, & Abdullah, 2012; Han & Richardson, 2010), offering healing action towards mental health (Haque, 2008).
- ❑ Spiritual reminiscence therapy (SRT) is an intervention that involves evaluation of life experiences by sharing memories with others that guide individuals to understand the **purpose of their life and future hopes.**
- ❑ The effectiveness of SRT needs greater interrogation before this intervention can be recommended.



OBJECTIVE

- To review the literature related to spiritual reminiscence therapy for older people



METHODOLOGY

- ❑ An integrative review of the literature was conducted to explore this objective.
- ❑ This review included experimental, non-experimental, observational and qualitative studies. The population of interest was people aged 60 years and over.
- ❑ The search involved published and unpublished studies using the keywords: spiritual reminiscence OR spiritual life review OR religious life review OR spiritual therapies AND older people OR older adults.



METHODOLOGY

- Search strategy
 - Electronic databases of Medline, CINAHL and PsycINFO.
 - Reference lists of retrieved articles were read to identify additional studies eligible for inclusion
 - The search was limited to studies published in English from 2000 to 2017
 - Studies were included if they employed or developed SRT.
 - The review excluded studies that did not mention spiritual or religious elements in SRT.



RESULTS

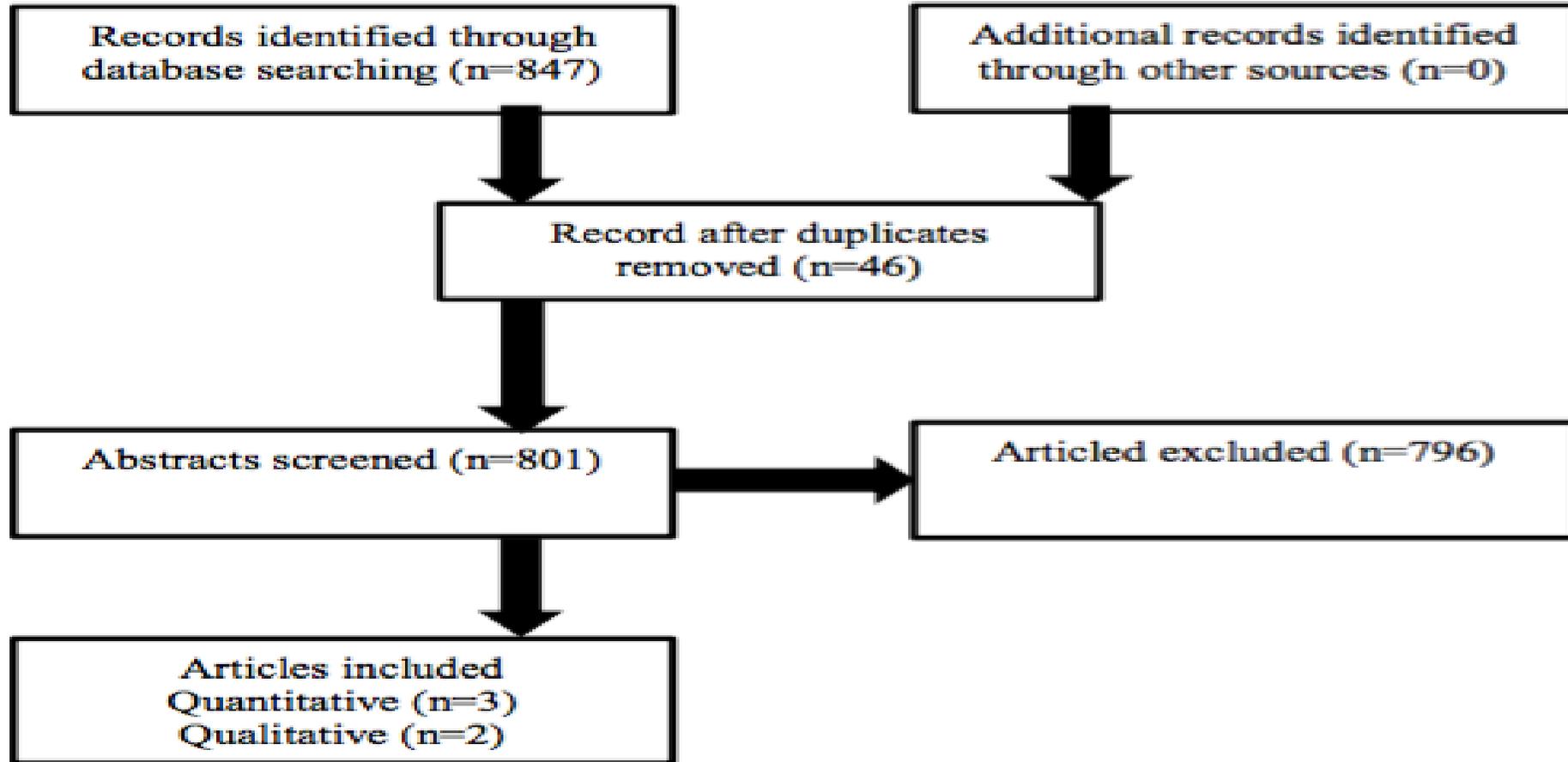


Figure Modified PRISMA flow diagram of article screening and selection for SRT

Authors	Population/Religion	Types of SRT	Duration	Theories	Program details	Measurement	Results
Emery (2002)	United States of America/Caucasians / Christians	Story based	8 weeks	Erikson's theory	Self-developed Week 1: First Week 2: School Days Week 3: Life Work Week 4: Traditions Week 5: Battles Won & Lost Week 6: Turning points Week 7: Then & Now Week 8: Words of Wisdom	ERC, GDS, PG, PLI, PWB, R-COPE, SNI, STAI	No significant improvement on measures of depression ($p = 0.62$), anxiety ($p = 0.28$) and self-acceptance ($p = 0.52$) SRT group reported more personal growth ($p = 0.01$), spiritual support ($p = 0.04$), and purpose in life ($p < 0.05$)

Authors	Population/Religion	Types of SRT	Duration	Theories	Program details	Measurement	Results
Haslam et al. (2013)	Australia/ Caucasians/ Christians	Song and story based	6 weeks [12 sessions , two per week]	Religion identity and Social identity theory	No information included	GAI, ICC, IRG, RI, SAGE, SLS	No significant effect on cognition, anxiety and depression.* no p- values were reported Initial fit: SRT was associated with Geriatric Anxiety Inventory (r = -0.66, p = 0.014) & Life Satisfaction Scale (r = 0.68, p = 0.011)

Authors	Population/Religion	Types of SRT	Duration	Theories	Program details	Measurement	Results
Wu and Koo (2015)	Taiwan/ Taiwanese/Traditional folk religion	Story based	6 weeks	Erikson's theory and Continuity theory	SRT program established by MacKinlay and Trevitt (2006) Week 1: Life meaning Week 2: Relationships, isolation and connecting Week 3: Hope, fears, and worries Week 4: Growing older and transcendence Week 5: Spiritual and religious beliefs Week 6: Spiritual and religious practices	HHI, LSS, MMSE, SIWB	Improved hope ($p = 0.005$), life satisfaction ($p < 0.001$) and spiritual well-being ($p = 0.001$)

Authors	Population/Religion	Types of SRT	Duration	Theories	Program details	Measurement	Results
MacKinlay (2009)	Australia/Latvian/No information on religion	Story based	6 weeks	-	<p>SRT established by MacKinlay and Trevitt (2006)</p> <p>Week 1: Life meaning</p> <p>Week 2: Relationships, isolation and connecting</p> <p>Week 3: Hope, fears and worries</p> <p>Week 4: Growing older and transcendence</p> <p>Week 5: Spiritual and religious beliefs and</p> <p>Week 6: Spiritual and religious practices</p>	MMSE	<p>Eight themes were <u>connectedness, spiritual and religious practices,</u> vulnerability and transcendence, physical health issues, wisdom and memory, war experiences, hope/fear and communication style of facilitator</p>

Authors	Population/Religion	Types of SRT	Duration	Theories	Program details	Measurement	Results
Mackinlay and Trevitt (2010)	Australia / Caucasian/Christians	Story based	6 weeks	Erikson's theory	<p>SRT established by MacKinlay and Trevitt (2006)</p> <p>Week 1: Life meaning</p> <p>Week 2: Relationships, isolation and connecting</p> <p>Week 3: Hope, fears and worries</p> <p>Week 4: Growing older and transcendence</p> <p>Week 5: Spiritual and religious beliefs and</p> <p>Week 6: Spiritual and religious practices</p>	MMSE	Two themes revealed 'meaning in life' and 'vulnerability and transcendence'



RESULTS

- ❑ Outcomes & population of interest:
 - ❑ The quantitative studies measured different outcomes: anxiety, depression, hope, life satisfaction, spiritual wellbeing, meaning, social support, personal growth, self-acceptance and spiritual support.
 - ❑ The qualitative studies involved older people with dementia.

- ❑ Countries
 - ❑ The majority of studies were conducted in Western countries: one in the United States of America and three in Australia
 - ❑ One study in Asian country - Taiwan



RESULTS

Religions

- One study involved Taiwanese older people with traditional folk religion in Taiwan.
- The majority of participants were Caucasian and Christian.

Program duration

- The SRT program durations were from six to eight weeks. Program details including themes addressed were reported in four studies.



DISCUSSION

- ❑ The evidence regarding the effectiveness of SRT was limited.
- ❑ No significant effect on anxiety and depression
 - ❑ Emery (2002) was conducted almost 16 years ago and the study was quasi-experimental design
 - ❑ Haslam et al.'s (2013) study
 - ❑ Those in the religious identity group had reduced anxiety levels.
 - ❑ This demonstrated that religious integration in SRT may have some usefulness for older people with anxiety.



DISCUSSION

- ❑ The SRT programs used in two qualitative studies reported the positive values of SRT for older people
 - ❑ SRT emphasised the sense of “connectedness” that is important for older people to improve their wellbeing (MacKinlay, 2009; Mackinlay & Trevitt, 2010)

- ❑ The qualitative results of previous SRT studies supported the notion that SRT guided older people to find meaning in their life (MacKinlay, 2009; Mackinlay & Trevitt, 2010).



CONCLUSION

- Despite limited evidence from the quantitative findings, the qualitative findings suggested that SRT can be a worthwhile intervention for older people. Therefore, there is a need in future research to further understand SRT as an intervention for older people especially for those with mental health problems.



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THANK YOU
