Impact of the Life Review Program on Elders With Dementia: A Preliminary Study at a Day Care Center in Southern Taiwan

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ABSTRACT

Background: Life review, a type of reminiscence therapy, assists participants to seek personal value in order to enhance social status and maintain a high quality of life (QOL).

Purpose: This study aimed to examine the impact of an adaptive life review program (LRP) on perceived QOL in elders with mild to moderate dementia at a day care center and assess the effect, if any, of different cognitive impairment levels on intervention outcome.

Methods: This pre-experimental design used a single group of seven subjects for pretest and posttest and purposive sampling at a 2-week interval. Researchers administered to each subject a 10-day therapeutic recreation program modified from Tabourne’s (1991) LRP.

Results: Posttest results found no statistically significant improvements. However, subjects reported higher mean scores of perceived QOL as measured by the 36-Item Short Form Health Survey. This finding indicated a trend of improving physical and mental health after the intervention. In addition, subjects with moderate cognitive impairment reported a higher improvement in physical health perception than did subjects with mild cognitive impairment.

Conclusions/Implications for Practice: Future research should include a larger sample size and a longer period of intervention and adopt multiple dimensions of QOL measurements to increase research rigor. Suggestions from this study can be used to improve the LRP.

Key Words: life review, dementia, day care, quality of life, recreation therapy.

Introduction

The population with Alzheimer’s type dementia has rapidly increased worldwide. The world had 26.6 million cases in 2006 (Brookmeyer, Johnson, Ziegler-Graham, & Arrighi, 2007), and this number is expected to continue to increase unless new discoveries facilitate its prevention (Hebert, Scherr, Bienias, Bennett, & Evans, 2003). In Taiwan, 118,606 cases were recorded in 2009, representing some 4.8% of elders over 65 years of age (Taiwan Alzheimer Disease Association, n.d.). The care of demented elders is an increasingly important community health issue as this population gradually loses its ability for independent living (Small, Froggatt, & Downs, 2007). Specifically, some behavioral and psychological symptoms of dementia cause a loss of quality of life (QOL) not only for patients but also for families and caregivers. These represent a major reason that later-stage patients require institutionalized care (Hamuro et al., 2007).

The progressive pattern of cognitive and functional impairment typical of dementia varies from individual to individual: mild, moderate, and severe common classifications to describe the successive stages of the disease. People with mild to moderate dementia may exhibit several cognitive, affective, and social functional deficits (Buettner & Fitzsimmons, 2003; Hamuro et al., 2007; Reisberg, Javed, Kenowsky, & Auer, 2005; Whall et al., 2008):

1. Cognitive deficits: The level of impairment gradually increases in several cognitive functions, for example, memory loss, disorientation to time or to place, and concentration.

2. Affective deficits: Some may demonstrate disturbed behavior, such as aggressivity (i.e., verbal outburst, physical outburst, and agitation), affective disturbance (i.e., tearfulness and other depressive manifestations), and anxieties and phobias (i.e., anxiety...