# Effect of Reminiscence Therapy on Self Esteem: A Systematic Review

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## **Abstract:**

Reminiscence therapy, sometimes referred to as psychological interventions in dementia patients, helps persons with dementia recall past experiences to enhance their cognitive, emotional, and general well-being. Reminiscence treatment helped dementia patients with their quality of life, cognitive function, and depressed and neuropsychiatric symptoms. A good non-pharmacological method for older adults to boost self-esteem may be remembered therapy. We systematically searched Systematic review of eight electronic academic databases from January 2012 to August 2022 was performed. The PRISMA standards were followed for conducting a systematic literature review. Six databases were systematically explored for this investigation. The requirements for inclusion included being an elderly patient, using applied reminiscence therapy, participating in randomized trials or quasi-experimental investigations, and having the research published in English. The eligibility requirements were met by a total of six studies with 2070 participants. Results showed that group recollection therapy greatly raised self-esteem in the aggregate. In nursing homes, reminiscence groups could promote elders' social interactions with one another and develop into members' support networks. A valuable non-pharmacological intervention for elderly adults residing in care facilities or other long-term care facilities is reminiscence therapy. For next research, a standardised recollection treatment procedure may be required.

### 1. Introduction

Aging is natural process in all human beings and leads to susceptibility towards various naturally occurring and degenerative diseases. On contrary, majority of human beings who are self-sufficient in old age manage to overcome aging problems (Patidar &Haya (2018). Scientifically, Old age means growing of cells about nearing lifespan of human beings. This leads to end of one's life cycle. Increasingly more people worldwide are getting older, according to the department of social and economic affairs. united states there are 703 million people are over 65 years aldo the study has projected that it could be double to 1.5 billion in 2050 globally. A survey was done by Ministry of health and welfare in 2019 found that 83 % of elerdly people are suffering fron chronic and acute disease, among these 28 % of people are facing difficulty to take care themselves (Ministry of health and Welfare. Taiwan 2017). Increased population of elder people Nowadays are all beliving in increased poopulation can expect the scoiety to change. Negative emotions leads to detoriation of india in 2013, to lead a positive life it is must to maintain both physical and mental health (Wu L G, 2011).

Both regional and foreign research also found that particular programs on physical and mental fitness have a beneficial impact on citizens who are particularly seniors. There are various methods to create positive engergy for old age people, among all the method reminiscence therapy create a postive energy and life satisfaction (Gaggioli et al., 2014) But still there is no implementation with this method, so many studies are going in this field to find the alternating way to satisfies the life of old age people especially people who are in homeages (Stinson 2009). There is a need for permanent therapy and care institution to take care basic life satisfaction than focusing on basic needs (Chao et al., 2008). Therefore

this review has planned to give an idea about reminiscence and its importance to create positive effects in homage people.

Fewer studies have examined older population as compared to younger generation. Older adults have needs, which generally remain unaddressed. Disciples like medical, psychology, nursing, and social welfare, etchave highlighted need to conduct research on old age population lately in the United States. (Sivis,2005). Self-esteem constitutes one of the important features of personality. Moreover, it effects other personal aspects, and its deficit may lead to various disturbances.

Additionally, it may aid in the emergence of emotional or psychological disorders like despair, shyness, guilt, anger, anxiety, and shame. Self-esteem entails the development of self-worth feelings based on competence and beauty, as well as two components—self-efficacy and self-worth feelings. Self-worth refers to the sentiments of satisfaction and approval that an individual has for themselves. Self-efficacy also encompasses the ability to deal well with one's physical and social environment. Self-worth is a temporal and spatial construct; therefore, experiences and job roles are what determine how one feels about oneself. These feelings are obtained differently in different ages (Refahi&Ghaforiyan, 2016).

Normally, Aged adults tend to forget Quality of life (QOL) in later years of their life. In some cases, they do not have access to basics of QOL. In their young life they go through lot of stress which on aging gratifies. It is important to theorise some elements of QOL to study its impact on patients going through multidimensional biopsychosocial (namely, physical, psychological, and social). It is seen that physical ageing is predominant and easily identifiable hence, QOL is ignored - Including AD and dementia, Insomnia (Jamjan&Jerayingmongkol, 2002). Some socially infused disorders in aged adults such as depression, emotional isolation, death anxiety is identified as psychological factors. Another injected problem such as loss of independence, Boredom, loss of spouse/closefriends, can lead to psychological disorders. The definition of Reminiscence therapy given by Chen T J et al. (2012): previous life repository (recorded in black and white/audio/visual) - the learning from this can improve the psychological

well-being of old aged persons. Therapy based intervention impacts life experiences of individuals, aimed to assist patients to maintain optimum mental health (Chen T J et al. (2012)). Most of the work done in this area focuses on elderly people suffering from moderate or chronic depression. However, alternative management approaches are sought in nations like India where there are not enough human resources and infrastructure to address such a massive burden at a relatively moderate cost. Present suggestions are made that RT has great potential in enhancing QOL & psychological positivity among old persons living in old, aged nursing homes. A recent work by McKee et al. (2005) utilised re-collection, re-evaluation and reviewing of past experiences recorded in patient's life. Thus, it is noteworthy to consider the use of RT as effective solution for bringing aged people to life and vigour.

### 2. Material and Methods

CINAHL, Medline, and Embase were among the electronic databases that were searched. Dementia, "intervention," "reminiscence," "wellness," and "treatment" were among the mental health-related search phrases. These terms were each combined with a further search term relating specifically to interventions. These consisted of 'reminiscence,' 'Mental health' and 'Mental disorders' 'role'. After that, the reviewer used previously created data gathering forms and quality assessment tools to independently assess a certain group of publications. To gain agreement, each single item on the standard rating tool was publicly discussed.

### **Inclusion Criteria**

- **1.** Articlereported theeffect of reminiscence therapy on Self Esteem
- 2. Full Text articles
- 3. Articles of any design written in English

### **Exclusion Criteria**

- 1.Articles reporting the assessment of mental disorders
- 2. Non peer reviewed articles

### **Quality Assessment**

While searching numerous resources, there were no language restrictions (both digital and printed). Multiple search engines were also employed to look for web content that may be used as references. There were written inclusion and exclusion standards. Selected studies underwent a more thorough quality evaluation using general critical evaluation guidelines.

These in-depth quality ratings were used to analyse heterogeneity and draw judgements about the suitability of meta-analyses. To choose the right sample group for this assessment, a thorough methodology was created. P.I.C.O. was taken into

consideration when developing the criteria for assessing the literature.

Both RCTs and uncontrolled clinical trials were deemed appropriate because the purpose of this study is to evaluate the effectiveness of an intervention. 2018's Pati &Lorusso Although it should be emphasised that the technology employed to avoid bias in a literature search may itself introduce bias, thorough documenting of the inclusion and the standards for inclusion may help to foster confidence and

### Criteria for PICO

Participants	Old age people above 60 years		
Intervention	Reminiscence therapy		
Comparison/Control	Randomised Control Trials or Quasi Experimental studies		
Outcome	Effect of Reminiscence therapy on Self Esteem		

## 3. Results

Table 1 Prisma Flow diagram depicted the inclusion of the articles. The total 3256 articles were identified from the search databases, 2192 duplicates were

removed. 1036 articles screened for the eligibility against the criteria. Out of the 30 eligible articles, 6 studies matched with the criteria. The characteristics of the eight articles for the review are explained in the table no 2.

Table no 1: PRISMA Flow Chart

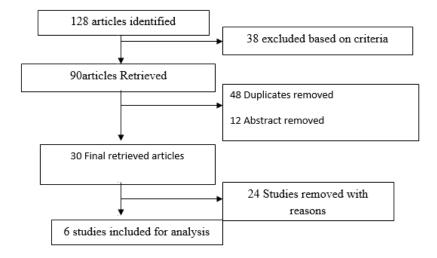


Table No 2 Characteristics of the studies

The completed compositions will be reviewed and analysed. The study is comprised of eight studies. Each article is summarised in the table below.

Author	Design and Participants	INTERVENTION	Outcome
Hassanat Ramadan Abdel-Aziz 2021	Quasi experimental study 50 year olders	. The reminiscence group received ten one-hour weekly sessions and the control group received only the routine club program.	significant improvements in reminiscence group self-esteem
IpsitaSahu 2019	Quasi experimental study 50 year olders	Total 3 biweekly reminiscence sessions for 45 minutes	self-esteem was improved
Wenjuan Zhou 2012	RCT Older adults	group reminiscence therapy for 6 weeks	Improved self esteem
ZhalehRefahi 2016	Quasi experimental study 48 year and olders	group reminiscence therapy of 8 sessions	Improved self esteem
Juan C 2015	Quasi experimental study 50 year olders	group reminiscence therapy of 8 sessions	Improved outcomes
Poorneselvan C, 2014	Quasi experimental study 50 year olders	Individual reminiscence therapy for 45 mins	Improved Self esteem

Hassanat Ramadan Abdel-Aziz (2021) The impact of group reminiscence therapy (RT) as a nursing intervention on older individuals' mental health and self-esteem was examined. A self-esteem scale and dimensions of emotional well-being were used in the pre- and post-intervention assessments (mental health continuum, emotion regulation, and satisfaction with life scale). Data analysis methods included chi-square and Fisher's exact tests, an independent-samples t-test, and a paired t-test. According to the study's findings, group memory treatment significantly improved all emotional well-being characteristics and self-esteem in memory groups when compared to the control group (p 0.01).

IpsitaSahu (2019)investigated how RGT affected older women living in nursing homes in terms of depression, self-esteem, and loneliness. receiving informed consent in writing from each participant, baseline data were gathered using the UCLA loneliness scale, Rosenberg self-esteem scale, Geriatric depression scale, and Sociodemographic data Performa. By separating the experimental group into 4 groups, a total of 3 bimonthly memory sessions lasting 45 minutes were held. Analysis showed that the experimental group experienced significant loneliness (before reductions in intervention 10.08±1.41 and after intervention 6.36±1.38), selfesteem (before intervention 23.4±2.69 and after intervention 29.56±2.58), and depression (before intervention  $36.92 \pm 4.57$  and after intervention

20.96±5.09) following RGT. Depression, self-esteem, and loneliness scores were statistically significantly different between the experimental group and the control group.(p<0.0001) (Sahu 2019).

Wenjuan Zhou (2012) discovered effects of group recollection therapy on older people living in communities' symptoms of depression, self-esteem, and affect balance. One hundred sixty-five of them had GDS scores between 11 and 25, and 125 of them ultimately took part in the study. While the senior participants in the control group got health education, those in the intervention group underwent group memory therapy in addition to health education for six weeks. Before and after the 6-week intervention, both groups were evaluated using the GDS, Self-Esteem Scale (SES), and Affect Balance Scale (ABS). In comparison to the control group, the GDS scores in the intervention group considerably declined after 6 weeks of therapy (p 0.001). In the intervention group, scores on the positive affect subscale and affect balance increased significantly more than those in the control group, and scores on the negative affect subscale declined significantly less than those in the control group (p 0.01). There was no significant statistical differences in self-esteem measures between the control and intervention groups following the intervention.( Zou et al 2012).

The impact of group reminiscence on elderly people's life satisfaction and sense of self-worth was studied by ZhalehRefahi. The Rosenberg Self-Esteem Scale and the Life Satisfaction Scale were the instruments employed in this investigation (1969) Reminiscence group therapy sessions and questionnaires. During the experimental investigation, the group Reminiscence group therapy for 8 sessions (90 minutes each), while the control group received no treatment. Both groups' participants' levels of life satisfaction and self-esteem were evaluated following the Reminiscence group therapy sessions. Reminiscence group treatment greatly increased, according to the findings of the analysis of covariance.(ZhalehRefahietal 2016)

Juan C (2015) To achieve a statistically significant reduction in depressive symptoms and a significant improvement in psychological well-being, life satisfaction, self-esteem, and integrity, integrated recollection intervention effects were explored. The intervention, which was carried out over the course of

eight sessions, involved 34 healthy older participants. A quasi-experimental methodology was used using pretest and posttest comparisons between the intervention group and a control group on a waiting list to assess the program's effectiveness. Individuals in a treatment sample of older adults participating in integrative reminiscence group showed a statistically significant decrease in depressive symptoms as well as a significant improvement in integrity, life self-esteem, satisfaction, psychological well-being when compared to the control group.(Juan C et al 2015).

Poorneselvan C, (2014)In order to accomplish a goal, such as getting to understand patients better and offering better care or treatments, nurses frequently elicit patients' tales. That act of listening itself, though, can be healing. Reminiscence therapy (RT) was used to increase the sense of wellbeing of senior inhabitants of an Indian nursing home by eliciting anecdotes from them. This article tells the tale of one resident while outlining a study on the application of RT.(Poorneselvan C et al 2014)

### 4. Discussion

There were some problems with assessment of the risk of bias in this study's literature review and metaanalysis of the effects of recollection therapy. In older persons, group RT is beneficial in boosting emotional health and raising self-esteem. Reminiscence therapy is described in the study as an effective and secure nursing intervention for enhancing the psychological health of older persons. According to IpsitaSahu (2019), RGT has a favourable impact on elderly women living in nursing homes. Elderly people who live in communities can benefit from group recollection therapy by having their depression symptoms reduced, their affect balance improved, and their mental health is promoted. (Sahu 2019).

Reminiscence therapy is one of the most effective psychotherapies and virtually without side effects. It is a straightforward, inexpensive treatment that is utilised with all age groups, especially the elderly, to raise mental health levels. Reminiscence actually helps elderly people feel better within and gives them a better sense of how their lives have gone. According to this strategy, having senior people around and having them participate in suggested activities leads to the creation of pleasant feelings and an atmosphere

that promotes happiness. It also makes elderly people socially intimate more collaborative.(ZhalehRefahietal 2016) Similar Zeinab examined the impact pharmacological treatment, including reflection, on depression and self-esteem in elderly people. The study's findings showed that while recollection therapy greatly raised self-esteem, it had no effect on depression levels.(Osman Z et al 2012). Similar Kai-Jo- Chiang et al, (2010) investigated how recollection therapy affected older institutionalised patients' psychological health, depression, and loneliness. The study's findings showed that after therapy, the experimental group's levels depression, of psychological well-being, and loneliness significantly lower than those of the control group in the short term.(Chiang et al 2010).

#### **Bias Assessment**

Because unpublished data are not included in systematic reviews of published studies, there is a risk of publication bias. However, this risk has not yet been evaluated using only a funnel plot or even other appropriate analytical techniques.

### Limitation of the study

This type of study may be subject to social desirability bias, yet certain observations imply that this was not a significant problem. The only reliable criterion for an individual's subjective assessments of their own level of confidence is they themselves. The outcome of a meta-analysis is retroactive and subject to various biases. Studies with poor methodological quality may have been incorporated into the meta-analyses, which might have changed how the benefit of the intervention was interpreted. Therefore, before performing a meta-analysis, it is crucial to evaluate the quality of the individual research.(Chalmers, Reference Chalmers1991: Felson, Reference Felson1992). In order in excluding low quality research such case control studies, cross sectional studies, and protocol studies, the current study solely included RCTs. Even though we made an effort to only include high-quality studies, we also had to take publication bias into account. As a result, even though three articles published in Korean did not explicitly explain how random sequence generation and allotment containment related to selection bias work, we included them.

### 5. Conclusion

Given the rapidly growing elderly population and the fact that some seniors now require institutional care, it has become crucial to offer seniors with adequate mental health care in nursing home settings. Reminiscence therapy is an autonomous treatment modality that may help older adults retain or improve their sense of self-worth and quality of life, but its results are difficult to gauge. This paper examined the historical evolution, theoretical underpinnings, and empirical research on the usage and efficacy of remembrance in the elderly in order to gain a better awareness of reminiscence as a nursing therapy. Future studies should evaluate the benefits of training for enhancing the abilities of aspiring healthcare professionals in mental health assessments and treatment, especially for common mental health illnesses that significantly impair a substantial segment of society. Future studies could examine how a semi-structured mental wellbeing examination affects the patient's habits of later consultation.

### **References**

- [1] Akanuma, K. et al. (2011). Improved social interaction and increased anterior cingulate metabolism after group reminiscence with reality orientation approach for vascular dementia. Psychiatry Research, 192, 183–187. doi: 10.1016/j.pscychresns.2010.11.012. CrossRefGoogle ScholarPubMed
- [2] American Psychiatric Association (2007). Practice Guideline for the Treatment of Patients with Alzheimer's Disease and Other Dementias. Arlington: American Psychiatric Association. Google Scholar
- [3] Azcurra, D. J. L. S. (2012). A reminiscence program intervention to improve the quality of life of long-term care residents with Alzheimer's disease. A randomized controlled trial. RevistaBrasileira de Psiquiatria, 34, 422– 433.
  - doi: 10.1016/j.rbp.2012.05.008.CrossRefGoogle Scholar
- [4] Bailar, J. C. (1997). The promise and problems of meta-analysis. The New England Journal of Medicine, 337, 559–561. doi: 10.1056/nejm199708213370810.CrossRefG
- [5] Baines, S., Saxby, P. and Ehlert, K. (1987). Reali

oogle ScholarPubMed

- ty orientation and reminiscence therapy. A controlled cross-over study of elderly confused people. The British Journal of Psychiatry, 51, 222–231.
- doi: 10.1192/bjp.151.2.222.CrossRefGoogle Scholar
- [6] Begg, C. B. and Mazumdar, M. (1994). Operating characteristics of a rank correlation test for publication bias. Biometrics, 50, 1088– 1101.CrossRefGoogle Scholar
- [7] Buchanan, K. and Middleton, D. (1994). Remini scence reviewed: a discourse analytic perspective. In Bornat, J. (Ed.), Reminiscence Reviewed: Perspectives, Evaluations, Achievements (pp. 61–73). Buckingham, UK: Open University Press.Google Scholar
- [8] Butler, R. N. (1963). The life review: an interpretation of reminiscence in the aged. Psychiatry, 26, 65–76. Cross Ref Google Scholar Pub Med
- [9] Carrion, C., Aymerich, M., Baillés, E. and López -Bermejo, A. (2013). Cognitive psychosocial intervention in dementia: a systematic review. Dementia and Geriatric Cognitive Disorders, 36, 363–375. doi: 10.1159/000354365.CrossRefGoogle ScholarPubMed
- [10] Chalmers, T. C. (1991). Problems induced by meta-analyses. Statistics in Medicine, 10, 971–980.
   doi: 10.1002/sim.4780100618. CrossRefGoogle
  - doi: 10.1002/sim.4780100618.CrossRefGoogle ScholarPubMed
- [11] Chang, W. S. and Je, S. (2008). A comparative study on the effect of group reminiscence therapy and group validation therapy for the elderly with dementia. Journal of Welfare for the Aged, 41, 301–325. Google Scholar
- [12] Chang, W. S. and Lee, J. M. (2006). The effect of group reminiscence therapy on depression, quality of life and social behavior of patient with dementia. Journal of Welfare for the Aged, 34, 239–269. Google Scholar
- [13] Chin, A. M. H. (2007). Clinical effects of reminiscence therapy in older adults: a meta-analysis of controlled trials. Hong Kong Journal of Occupational Therapy, 17, 10–22. doi: 10.1016/S1569-1861(07)70003-7. CrossRefGoogle Scholar
- [14] Committee for Proprietary Medicinal

- Products (2000). Points to Consider on Switching between Superiority and Non-Inferiority. London: The European Agency for the Evaluation of Medicinal Products. Google Scholar
- [15] DuruAşiret, G. and Kapucu, S. (2016). The effect of reminiscence therapy on cognition, depression, and activities of daily living for patients with Alzheimer disease. Journal of Geriatric Psychiatry and Neurology, 29, 31–37. doi: 10.1177/0891988715598233. CrossRefGoog le ScholarPubMed
- [16] Felson, D. T. (1992). Bias in meta-analytic research. Journal of Clinical Epidemiology, 45, 885–892. doi: 10.1016/0895-4356(92)90072-U.CrossRefGoogle ScholarPubMed
- [17] Gaggioli, A., Scaratti, C., Morganti, L. *et al.* Effectiveness of group reminiscence for improving wellbeing of institutionalized elderly adults: study protocol for a randomized controlled trial. *Trials* **15**, 408 (2014). https://doi.org/10.1186/1745-6215-15-408
- [18] Gitlin, L. N. et al. (2009). The tailored activity program to reduce behavioral symptoms in individuals with dementia: feasibility, acceptability, and replication potential. The Gerontologist, 49, 428–439. doi: 10.1093/geront/gnp087.CrossRefGoogle ScholarPubMed
- [19] Goldwasser, A. N., Auerbach, S. M. and Harkins, S. W. (1987). Cognitive, affective, and behavioral effects of reminiscence group therapy on demented elderly. The International Journal of Aging and Human Development, 25, 209–222. CrossRefGoogle ScholarPubMed
- [20] Gottfries, C. G. (2001). Late life depression. European Archives of Psychiatry and Clinical Neuroscience, 251, 57–61. doi: 10.1007/BF03035129.CrossRefGoogle ScholarPubMed
- [21] Gupta, S. K. (2011). Intention-to-treat concept: a review. Perspectives in Clinical Research, 2, 109–112. doi: 10.4103/2229-3485.83221.CrossRefGoogle ScholarPubMed
- [22] Haight, B. K., Gibson, F. and Michel, Y. (2006). The Northern Ireland life review/life storybook project for people with dementia. Alzheimers&

- Dementia, 2, 56–58. doi: 10.1016/j.jalz.2005.12.003.CrossRefGoogle ScholarPubMed
- [23] Hartling, L. et al. (2012). Validity and Inter-Rater Reliability Testing of Quality Assessment Instruments. Rockville, MD: Agency for Healthcare Research and Quality (US). Google ScholarPubMed
- [24] Higgins, J. P. T. and Altman, D. G. (2008). Assessing risk of bias in included studies. In Higgins, J. P. T. and Green, S. (Eds.), Cochrane handbook for systematic reviews of interventions (pp. 187–241). Chichester: John Wiley & Sons, Ltd.CrossRefGoogleScholar
- [25] Higgins, J. P. T., Thompson, S. G., Deeks, J. J. and Altman, D. G. (2003). Measuring inconsistency in meta-analyses. BMJ, 327, 557. doi: 10.1136/bmj.327.7414.557.CrossRefGoogle ScholarPubMed
- [26] Higgins, J. P. T. et al. (2011). The Cochrane Collaboration's tool for assessing risk of bias in randomised trials. BMJ, 343, d5928. doi: 10.1136/bmj.d5928.CrossRefGoogle ScholarPubMed
- [27] Hilgeman, M. M., Allen, R. S., Snow, A. L., Durkin, D. W., DeCoster, J. and Burgio, L. (2014). Preserving Identity and Planning for Advance Care (PIPAC): preliminary outcomes from a patient-centered intervention for individuals with mild dementia. Aging & Mental Health, 18, 411–424. doi: 10.1080/13607863.2013.868403.CrossRefG oogle ScholarPubMed
- [28] Hollis, S. and Campbell, F. (1999). What is meant by intention to treat analysis? Survey of published randomised controlled trials. BMJ, 319, 670–674. doi: 10.1136/bmj.319.7211.670. CrossRefGoogle Scholar PubMed
- [29] Hsieh, C. J. et al. (2010). Reminiscence group therapy on depression and apathy in nursing home residents with mild-to-moderate dementia. Journal of Experimental & Clinical Medicine, 2, 72–78. CrossRefGoogle Scholar
- [30] Huang, H. C. et al. (2015). Reminiscence Therapy improves cognitive functions and reduces depressive symptoms in elderly people with dementia: a meta-analysis of randomized controlled trials. JAMDA, 16, 1087–1094.

- doi: 10.1016/j.jamda.2015.07.010.Google ScholarPubMed
- [31] Ito, T., Meguro, K., Akanuma, K., Ishii, H. and Mori, E. (2007). A randomized controlled trial of the group reminiscence approach in patients with vascular dementia. Dementia Geriatric Cognitive Disorders, 24, 48–54. doi: 10.1159/000103631.CrossRefGoogle Scholar
- [32] Jamjan, L., & Jerayingmongkol, P. (2002). Self-Image of People in Their Fifties. Nursing & Health Sciences, 4(3), A4-A4.
- [33] Juan C. Meléndez Moral, Flor B. Fortuna Terrero, Alicia Sales Galán, Teresa Mayordomo Rodríguez (2015). Effect of integrative reminiscence therapy on depression, well-being, integrity, self-esteem, and life satisfaction in older adults: The Journal of Positive Psychology 10(3) doi.org/10.1080/17439760.2014.936968
- [34] Kai-Jo- Chiang. The effects of reminiscence therapy on psychological wellbeing, depression and loneliness among the institutionalized aged, Taiwan. Int J Geriatric Psychiatr. 2010;25(4):380-8.
- [35] Kwon, M., Jung, D. and Kim, S. (2012). The effects of group reminiscence program on social interaction and behavioral problems in the resident elderly with dementia. The Journal of Occupational Therapy for the Aged and Dementia, 6, 11–18. Google Scholar
- [36] Lai, C. K. Y., Chi, I. and Kayser-Jones, J. (2004). A randomized controlled trial of a specific reminiscence approach to promote the well-being of nursing home residents with dementia. International Psychogeriatrics, 16, 33–49.
  - doi: 10.1017/s1041610204000055.CrossRefGoo gle ScholarPubMed
- [37] Moher, D., Schulz, K. F. and Altman, D. G. (2001). The CONSORT statement: revised recommendations for improving the quality of reports of parallel group randomized trials. BMC Medical Research Methodology, 1, 2–7. doi: 10.1186/1471-2288-1-2.CrossRefGoogle Scholar
- [38] Morgan, S. and Woods, R. T. (2012). Life review with people with dementia in care homes: a preliminary randomized controlled trial. Non-Pharmacological Therapies in Dementia, 1, 43–59. Google Scholar

- [39] Nakamae, T., Yotsumoto, K., Tatsumi, E. and H ashimoto, T. (2014). Effects of productive activities with reminiscence in occupational therapy for people with dementia: a pilot randomized controlled study. Hong Kong Journal of Occupational Therapy, 24, 13–19. doi: 10.1016/j.hkjot.2014.01.003.CrossRefGoogl e Scholar
- [40] Nakatsuka, M. et al. (2015). A cluster randomized controlled trial of nonpharmacological interventions for old-old subjects with a Clinical Dementia Rating of 0.5: the Kurihara Project. Dementia and Geriatric Cognitive Disorders Extra, 5, 221–232. doi: 10.1159/000380816.CrossRefGoogle ScholarPubMed
- [41] Ngo, J. and Holroyd-Leduc, J. M. (2014). Systematic review of recent dementia practice guidelines. Age and Ageing, 44, 25– 33.CrossRefGoogle ScholarPubMed
- [42] O'Shea, E. et al. (2014). The impact of reminiscence on the quality of life of residents with dementia in long-stay care. International Journal of Geriatric Psychiatry, 29, 1062–1070. doi: 10.1002/gps.4099.CrossRefGoogle ScholarPubMed
- [43] Osman ZA, Kalil EA, Arafa MM, Gaber NM, et al. The Effect of Reminiscence on Self-Esteem, and Depression among Elderly People. J Am Science. 2012;8(4):53-61.
- [44] Poorneselvan C, Steefel L. The effect of individual reminiscence therapy on self-esteem and depression among institutionalized elderly in India. CreatNurs. 2014;20(3) 183-190. doi:10.1891/1078-4535.20.3.183. PMID: 25252382
- [45] Sahu, I., Mohanty, S., &Pahantasingh, S. (2019). Effect of reminiscence group therapy on depression, self-esteem and loneliness among elderly women residing in old age home. *International Journal of Research in Medical Sciences*, 7(10), 3685-3690. doi:http://dx.doi.org/10.18203/2320-6012.ijrms20194293
- [46] Staekenborg, S. S. et al. (2010). Behavioural and psychological symptoms in vascular dementia; differences between small- and large-vessel disease. Journal of Neurology, Neurosurgery & Psychiatry, 81, 547–551. doi: 10.1136/jnnp.2009.187500.CrossRefGoogle

### ScholarPubMed

- [47] Stinson, C. K. (2009). Structured group reminiscence: an intervention for older adults. The Journal of Continuing Education in Nursing, 40, 521–528. CrossRefGoogle ScholarPubMed
- [48] Subramaniam, P. and Woods, B. (2012). The impact of individual reminiscence therapy for people with dementia: systematic review. Expert Review of Neurotherapeutics, 12, 545– 555.CrossRefGoogle ScholarPubMed
- [49] Subramaniam, P., Woods, B. and Whitaker, C. (2 014). Life review and life story books for people with mild to moderate dementia: a randomised controlled trial. Aging & Mental Health, 18, 363–375. doi: 10.1080/13607863.2013.837144.CrossRefG oogle ScholarPubMed
- [50] Tadaka, E. and Kanagawa, K. (2007). Effects of reminiscence group in elderly people with Alzheimer disease and vascular dementia in a community setting. Geriatrics & Gerontology International, 7, 167–173. doi: 10.1111/j.1447-0594.2007.00381.x.CrossRefGoogle Scholar
- [51] Thorgrimsen, L., Schweitzer, P. and Orrell, M. ( 2002). Evaluating reminiscence for people with dementia: a pilot study. The Arts in Psychotherapy, 29, 93–97. CrossRefGoogle Scholar
- [52] van Bogaert, P., Van Grinsven, R., Tolson, D., Wouters, K., Engelbor ghs, S. and Van der Mussele, S. (2013). Effects of SolCos model-based individual reminiscence on older adults with mild to moderate dementia due to Alzheimer disease: a pilot study. Journal of the American Medical Directors Association, 14, 528–e9.

  doi: 10.1016/j.jamda.2013.01.020.CrossRefGoog le ScholarPubMed
- [53] Wang, J. J. (2007). Group reminiscence therapy for cognitive and affective function of demented elderly in Taiwan. International Journal of Geriatric Psychiatry, 22, 1235–1240. doi: 10.1002/gps.1821.CrossRefGoogle ScholarPubMed
- [54] Wang, J. J., Yen, M. and OuYang, W. C. (2009). Group reminiscence intervention in Taiwanese elders with dementia. Archives of Gerontology and Geriatrics, 49, 227–232. doi: 10.1016/j.archger.2008.08.007.CrossRefGo

- ogle ScholarPubMed
- [55] Wertz, R. T. (1995). Intention to treat: once randomized, always analyzed. Clinical Aphasiology, 23, 57–64. Google Scholar
- [56] Woods, B., O'Philbin, L., Farrell, E.
  M., Spector, A.
  E. and Orrell, M. (2018). Reminiscence therapy for dementia. Cochrane Database of Systematic Reviews, 3, CD001120.
  doi: 10.1002/14651858.CD001120.pub3.Google ScholarPubMed
- [57] Woods, B., Spector, A., Jones, C., Orrell, M. and Davies, S. (2005). Reminiscence therapy for dementia. Cochrane Database Systematic Reviews, 2, CD001120.Google Scholar
- [58] Woods, R., Bruce, E., Edwards, R., Elvish, R. an d Hoare, Z. (2012). REMCARE: reminiscence groups for people with dementia and their family caregivers effectiveness and cost-effectiveness pragmatic multicentrerandomised trial. Health Technology Assessment, 16, 1–121. doi: 10.3310/hta16480.CrossRefGoogle ScholarPubMed
- [59] World Health Organization and Alzheimer's Disease International (2012). Dementia: A Public Health Priority. Geneva: World Health Organization. Google Scholar
- [60] Refahi, Z., &Ghaforiyan, A. (2016). The Effect of the Group Reminiscence on the self-esteem

- and life satisfaction Elders daily centers in Yazd. International Journal of Pharmaceutical Research & Allied Sciences, 5(3), 535-46.
- [61] Siviş, R. (2005). The effect of a reminiscence group counseling program on the life satisfaction of older adults. Unpublished Doctorial Dissertation), Ankara. Middle East Technical University.
- [62] Patidar, M. J. Haya (2018). The Saudi Journal of Life Sciences (SJLS) ISSN 2415-623X (Print). Vol-3, Iss-3: 306-310.
- [63] McKee, K. J., Wilson, F., Chung, M. C., Hinchliff, S., Goudie, F., Elford, H., & Mitchell, C. (2005). Reminiscence, regrets and activity in older people in residential care: Associations with psychological health. British Journal of Clinical Psychology, 44(4), 543-561.
- [64] ZhalehRefahi, Ahamad Ghaforiyan (2016). The Effects of the Group Reminiscence on the self esteem and life satisfaction Elders daily centers in Yazd: International Journal of Pharmaceutical Research&Allied Sciences, 2016, 5(3):535-546
- [65] Zhou, W., He, G., Gao, J., Yuan, Q., Feng, H., & Zhang, C. K. (2012). The effects of group reminiscence therapy on depression, self-esteem, and affect balance of Chinese community-dwelling elderly. *Archives of gerontology and geriatrics*, *54*(3), e440–e447. https://doi.org/10.1016/j.archger.2011.12.003