

Group Counseling Plan – Reminiscence Group Therapy

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## I. Introduction

Prior to the 1960's, reminiscing on the past was thought to be detrimental to mental health (Lin, Dai, & Hwang, 2003). When Erik Erikson developed his Personality Theory consisting of eight psychosocial stages of development in 1959, he labeled the late adulthood phase of life "Ego Integrity vs. Despair." This phase of development suggests that people come to realizations about the past and come to terms with the life they have lived (Broderick & Blewitt, 2014). A few years later, Dr. Robert Butler, wrote about life review and claimed that reminiscing on one's life was said to be a critical part of development in older adults. During the 1970's, research on reminiscence began and by the 1980's reminiscence group therapy emerged (Lin et al., 2003).

Research has shown that reminiscence group therapy improves the quality of life and wellbeing in older adults (ages 60+). Research has also shown group therapy to be more effective for older adults than individual therapy especially in the case of depression. Group therapy (as opposed to individual therapy) offers older adults support and feedback from peers dealing with similar issues which can improve self- concept and self-esteem. Groups also offer the chance for older adults to form new connections and have more effective interpersonal skills. Many adults in this population can experience loss, new life transitions, depression, illness, and cognitive decline such as dementia (Agronin, 2009). In addition to these varying issues, older adults might be at different stages within this phase of life. For instance, an adult from age 60-74 is considered a young-older-adult and is likely to have a different experience from that of an older adult from ages 80-90, or an old-older adult from 90+ (Musavi, Mohammadian, & Mohammadinezhad, 2017). Groups are usually formed around one subject in this age group or one particular issue and kept smaller with 6-8 participants. Treatments are typically held for 6

weeks or longer, include 1-2 sessions per week, and are 1-2 hours in length (Gaggioli, et al., 2014).

Therefore, I chose to lead a small group of 8 assisted living residents in a six-week (six session) structured reminiscence group. The ages of the men and women in this group will range from 74-89. None of the members will have severe mental health issues or neurological issues such as moderate-severe depression or dementia.

## II. Characteristics of Group Leaders

Reminiscence groups may be led by a number of different specialists from gerontologists to nurses, clinicians in an institution setting, psychologists, social workers, or counselors. In fact, much of the research done pertaining to reminiscence groups has been conducted by gerontologists or registered nurses. For this reason, any mention of group leader skills within the research typically pertains to medical health professions as opposed to mental health professionals. However, the skills that are generally required for working with the older adult population are universal and consist of patience, supportiveness, good listening skills, sensitivity, a sense of humor, a working memory, adaptability, imagination, and creativity. Other skills that are necessary in reminiscence work are awareness of age-specific factors, as well as the proper training and education to work with this population and provide evidence-based programming. Depending on the group and the challenges that group is facing such as physical illness or cognitive decline, it might be necessary for the group leader(s) to be able to assist with transportation, help with sensory aids, and toileting. It might also be necessary to have medical personnel nearby in case the need for medical help should arise (Agronin, 2009).

Three different types of reminiscence therapies are simple reminiscence, life review, and life review therapy. Simple reminiscence is typically unstructured and spontaneous and includes the recollection of positive events with the goal of increasing social well-being. This group is usually conducted with older adults in good health. Life review is more structured than simple reminiscence and will incorporate looking back at both positive and negative events that occurred throughout life. Participants from this type of group can range from being of good mental health to those dealing with mild mental health issues. Life review therapy is the most structured of the reminiscence therapies and is meant for older adults dealing with a particular issue such as severe depression or anxiety. The goal in this group would be to reduce the severity of the underlying issue and alleviate symptoms by helping participants develop more efficient coping skills and build a stronger sense of self-worth (Webster, Bohlmeijer, & Westerhof, 2010; Gaggioli, et al., 2014).

When selecting leaders or facilitators for these types of groups, it is necessary to make sure that they have the temperament, background, skills, and training required for each type of group. Simple reminiscence groups can be run with basic counseling skills and enough creativity to conduct a more spontaneous reminiscence group. However, facilitators for life review groups should have some more advanced skills such as the ability to structure group sessions, the ability to reframe the meaning of past events, and the ability to ask questions that will encourage problem-solving in participants. Life review therapy leaders should be the most skilled as they are working with group members whose issues are psychological in nature. For this reason, this type of group requires a specialist from within the mental health field (Webster et al., 2010). Generally speaking, when a group has a higher intensity of reminiscence, older participants, or participants with more severe mental illness, they require a more skilled and trained facilitator.

Often a group leader will select participants based on the type of reminiscence therapy they wish to conduct.

As mentioned, this group will be focused on reminiscence therapy in an assisted living facility. Because this is a reminiscence group with older adults in good health, the facilitator will need to have the basic counseling skills to be able to relate and reflect meaning with clients during sessions, but will not need the advanced skills of a clinician leading a life review therapy group that has severe depression or dementia. The leaders of this group should also be creative and adaptable as a reminiscence group is typically less structured and more spontaneous. That being said, this particular group will be a structured reminiscence group however, it will provide for more spontaneity than a life review group. One leader of this group (myself) will be a counselor-in-training and the other will be a Licensed Mental Health Counselor with the aforementioned qualities and skills.

### III. Culturally Relevant Strategies for Designing and Facilitating Groups

Research has indicated positive results of reminiscence group therapy in several countries such as Italy, Iran, Taiwan, the UK, and the US. Countries and cultures with a strong oral tradition typically show better results. However, only recently have studies begun to look at the similarities and differences in behavior between cultures as a result of reminiscence therapy. Further research is needed to compare cultures, ethnicities, and races. The area that studies find the most difference in, from a cultural perspective is gender (Webster et al., 2010). According to Webster et al. (2010), some studies show differences in results of reminiscence therapy between men and women and some do not. Women are more likely to recall a greater number of

important life events during reminiscence therapy likely due to gender socialization at a young age (Webster et al., 2010).

For this group, cultural and diversity factors are limited due to the somewhat homogenous population within an assisted living facility. Group members share similar experiences due to similar living and health conditions. However, possible differences in the group will be due to gender and country of origin. The applied strategy for working with this potentially diverse population are to discuss possible cultural differences between the group within the first session and lay appropriate ground rules such as respect for fellow group members and listening to others while they are speaking. Additionally, it might be necessary to ask questions that would indicate any possible roadblocks to group trust and cohesiveness. For instance, research has indicated that men do not share past experiences as readily as women, so it would be important to know up front if anyone felt uncomfortable sharing with the group.

#### IV. Research

Reminiscence therapy has been proven to be an effective means of working with the older adult population. Research has shown that it lifts mood, reduces depression, increases self-efficacy, improves cognition, and supports more effective interpersonal relationships (Lodha & De Sousa, 2019). Within reminiscence therapy, simple reminiscence, life review, and life review therapy have been effective for the different subpopulations within the older adult population. For a simple reminiscence therapy group, effective interventions include focusing on themes to allow for looking back at positive life memories, the use of props to encourage reminiscence, reliving past achievements and enjoyments, recounting lessons learned, discussing values and acquired knowledge, finding the meaning in life, integrating past and present to find patterns,

and ultimately gaining acceptance the past (Johnson-Highsmith, 2017; Musavi et al., 2017; Stinson 2009).

Research does not indicate ineffective interventions for reminiscence therapy, but does note limitations to each study. Group attrition is one factor that can lead to ineffectiveness of a reminiscence group. Older adults in this population may experience interruptions to group sessions or find the need to drop out due to medical circumstances or doctor's visits. Another limitation is the severity of depression or cognitive impairment at the baseline of the study. This can negatively impact the results of the study. Choosing the right modality for the members of the group is also an important factor in the success of a group. Therefore, an intervention will be ineffective if it does not suit the members of the group's issues, life situation, or age (Johnson-Highsmith, 2017).

## V. Group Plan

### **Session 1**

- A) Objectives – The objectives for the first group session are to lay the ground rules, have members introduce themselves, generate interest and enthusiasm for the group, to discuss member goals, encourage memory recall using the theme of the group session, to promote positive social interaction, to engage the sense of taste, and to provide homework for the next session.
- B) Materials Needed – The materials needed for this session are name stickers, a sharpie marker, a whiteboard, a whiteboard marker, (2) 1-liter bottles of Coca Cola, paper cups, and a handout about Reminiscence Group Therapy
- C) Instructions for Leading the Session –

- a. Have each member write their names on a name sticker and apply it to themselves in a visible location.
- b. Go around the circle and have each member introduce themselves and state their name, age, previous occupation, and what they hope to get out of the reminiscence group.
- c. Introduce the Reminiscence Group Therapy by giving a brief history, background, and setting up expectations for the upcoming sessions
- d. Discuss all rules and expectations for group sessions including mutual respect, confidentiality, not interrupting someone when they are speaking, no illegal drugs or alcohol before group, coming to group on time, members are not to discuss other members who are not present, and all group members must participate in each group session.
- e. Introduce the theme for this week “Firsts” and offer options for discussion (ex. first kiss, first boyfriend/girlfriend, first time trying a new activity, first pet, or first job)
- f. Have members of the group take turns writing their first on the white board and then have them describe their “firsts”
- g. Have members of the group pour themselves a cup of Coca Cola
- h. Find out about their first memories of drinking soda
- i. Summarize the session and wrap up by introducing the topic for the next session – “Family/Friends/Loved Ones” so group members can prepare and bring in old photographs of family, friends, and loved ones

D) Process Questions the Leaders Should Ask –

- a. What are your goals for this group and what are you hoping to take away from it?
- b. What objections (if any) do you have to the ground rules?
- c. What is your level of comfort in sharing with the group? Are there any hesitations?
- d. What is one “first” that you remember and how does that make you feel?
- e. What do you remember about your first time drinking Coca Cola or any soda?

**Session 2**

- A) Objectives - The objectives for the second group session are to provide the opportunity to revisit past experiences with family, friends, and loved ones, to encourage memory recall using the theme of the group session, to promote positive social interaction, to engage the sense of sight, sound and touch, and to provide homework for the next session.
- B) Materials Needed – The materials needed for this session are name stickers, a sharpie marker, a whiteboard, a whiteboard marker, photographs of family and friends, an iphone, and a Bluetooth speaker.
- C) Instructions for Leading the Session –
- a. Play “We Are Family” by Sister Sledge on the iphone using the Bluetooth speaker so that members are greeted with the song when they walk in
  - b. Have each member write their names on a name sticker and apply it to themselves in a visible location.
  - c. Go around the circle and have each member explain who is in their photo or photos and why they brought them into group

- d. Have each group member write down one memory of their family and friends on the whiteboard
- e. Have each group member explain who their closest relationships in life were with
- f. Summarize the session and wrap up by introducing the topic for the next session – “Work Life, Service, or Volunteering” so group members can prepare and bring in old photographs or objects that remind them of this time

D) Process Questions the Leaders Should Ask –

- a. What did you think about the last session?
- b. Were you able remember more “Firsts” after you left?
- c. Who is in your photograph and why are they important to you?
- d. Why did you choose this particular photograph?
- e. What is one memory you have of this person or with this person?
- f. How has this person impacted your life?

**Session 3**

- A) Objectives - The objectives for the third group session are to provide the opportunity to revisit past experiences with work, service to their country, or volunteering, to encourage memory recall using the theme of the group session, to promote positive social interaction, to engage the sense of sight and touch, to increase feelings of purpose and self-worth, and to provide homework for the next session.
- B) Materials Needed – The materials needed for this session are name stickers, a sharpie marker, photographs or any object that reminds members of a work, service, or volunteer experience
- C) Instructions for Leading the Session –

- a. Have each member write their names on a name sticker and apply it to themselves in a visible location.
- b. Go around the circle and have each member explain why they brought in this particular photograph or object
- c. Pass the objects around the group if the member is comfortable with that to engage the sense of touch
- d. Have each group member explain a significant work, service, or volunteer experience and how this experience made them feel
- e. Summarize the session and wrap up by introducing the topic for the next session – “Holidays” so group members can prepare by bringing in an object or photograph that reminds them of their favorite holiday

D) Process Questions the Leaders Should Ask –

- a. What did you think about the last session?
- b. What memories of your loved ones came to you after group ended?
- c. What is happening in your photograph and why is that important to you?
- d. Why did you choose to bring in the object you brought?
- e. What memories does this object evoke for you?
- f. How has your work, volunteer, or service experience impacted your life?
- g. How have these experiences changed you for the better?

**Session 4**

- A) Objectives - The objectives for the fourth group session are to provide the opportunity to revisit favorite holidays, to encourage memory recall using the theme of the group session, to promote positive social interaction, to reinforce a sense of belonging in the

group, to recall holiday traditions, to engage the sense of sight, smell, sound, touch, and taste, and to provide homework for the next session.

B) Materials Needed – The materials needed for this session are name stickers, a sharpie marker, a whiteboard, a whiteboard marker, holiday-related photographs or objects, a spruce tree candle, holiday cookies, an iphone, and a Bluetooth speaker.

C) Instructions for Leading the Session –

- a. Light a spruce tree candle to evoke a familiar scent of the winter holidays and engage the sense of smell
- b. Play “Let it Snow” by Dean Martin on the iphone using the Bluetooth speaker so the group members walk into the group to hear this classic winter holiday song
- c. Have each member write their names on a name sticker and apply it to themselves in a visible location.
- d. Talk about memories this song evokes if any
- e. Go around the circle and have each member explain what is happening in their photo or what the object they brought in means to them
- f. Have each group member write down one memory of their favorite holiday on the whiteboard
- g. Have each group member explain why their favorite holiday is special to them
- h. Ask the group members what traditions they value surrounding this holiday
- i. Talk about people they celebrated this holiday with
- j. Pass around my favorite holiday cookies that I brought in to share with the group for some appropriate self-disclosure and to engage their sense of taste

- k. Summarize the session and wrap up by introducing the topic for the next session – “Pop-culture from their youth” so group members can prepare by remembering movies, songs, television shows or other pop-culture references from childhood or adolescence
- D) Process Questions the Leaders Should Ask –
- a. What did you think about the last session?
  - b. Were you able recall other important work experiences after you left?
  - c. What is your favorite holiday and what are the traditions surrounding that holiday?
  - d. Why did you choose to bring in the photograph or object you brought in?
  - e. What is one memory you have of a particular holiday?
  - f. How do other group member’s holiday traditions remind you of your own?

### **Session 5**

- A) Objectives - The objectives for the fifth group session are to provide the opportunity to revisit pop-culture memories pertaining to music, art, television, or movies, to encourage memory recall using the theme of the group session, to promote positive social interaction, to engage the sense of sight and sound, to encourage laughter and singing, and to provide homework for the next session.
- B) Materials Needed – The materials needed for this session are a laptop computer, a monitor or screen to play youtube clips on, an iphone, and a Bluetooth speaker.
- C) Instructions for Leading the Session –
- a. Play “The Sound of Music” by Julie Andrews on the iphone using the Bluetooth speaker while group members arrive

- b. Have each member discuss their favorite movies, songs, television shows, or works of art with the group
  - c. Talk about the significance of the pop-culture memories
  - d. Have group members share how they feel about other group member's pop-culture memories
  - e. Allow group members time to explore whether these memories remind them of someone significant in their lives
  - f. Use the computer to play a video clip of a television show, movie, or song shared from each person
  - g. Encourage the group to laugh and sing
  - h. Summarize the session and wrap up by introducing the topic for the next session – “Wrap Up - Pizza Party” so group members can be prepared with their thoughts on reminiscence group therapy and reflect on previous sessions
- D) Process Questions the Leaders Should Ask –
- a. What did you think about the last session?
  - b. What other holiday memories did you have after the session ended?
  - c. What movie, song, or television show holds special meaning in your life?
  - d. Describe a memory you have surrounding the pop-culture from your youth or adolescence.
  - e. What memories shared by other group members remind you of memories you have?
  - f. How does seeing a clip of your favorite television show or movie make you feel and what are some thoughts that come to mind?

**Session 6**

- A) Objectives - The objectives for the sixth group session are to provide the opportunity to provide the group with closure to the group therapy process, to encourage memory recall using the previous themes of the past group sessions, to promote positive social interaction, to engage the sense of sight, sound, taste and touch, and to wrap up the session with positive feelings and thoughts.
- B) Materials Needed – The materials needed for this session are a whiteboard, a whiteboard marker, 2 large pizzas, (2) 1-liter soda bottles, brownies, an iphone, and a Bluetooth speaker.
- C) Instructions for Leading the Session –
- a. Play “I’ve Had the Time of My Life” by Bill Medley and Jennifer Warnes on the iphone using the Bluetooth speaker
  - b. Go around the circle and have each member talk about their favorite memories they discussed in group therapy
  - c. Have each group member write down a favorite memory someone else spoke about on the white board
  - d. Have each group member talk about their experience with the group and whether or not they accomplished the goals they had for themselves at the start
  - e. Ask group members about interest in joining other therapy groups and let them know they can see you after the session to make appropriate referrals
  - f. Let group members get out of their seats to get refreshments and mingle with members of the group

- g. Thank the group members for their participation and say good-bye

D) Process Questions the Leaders Should Ask –

- a. What did you think about all of the sessions?
- b. What was your favorite group session?
- c. What was your favorite memory discussed in all of the group sessions?
- d. What was your favorite memory someone else had from their lives that they discussed?
- e. What thoughts and feelings do you have at the end of reminiscence group therapy?
- f. What goals have you accomplished by participating in this group (if any)?
- g. How has this group affected you?

VI. Recommendations

In addition to the group, the counselor should ensure that the participants are healthy both mentally and physically during and after the group sessions. Counselors can encourage all members to see their doctors and refer them to a psychiatrist if necessary. Counselors can also recommend to members that they stay as physically active as possible and attend to their personal relationships to help their cognitions remain in-tact and avoid feelings of loneliness, isolation, or depression. Counselors can also encourage activities like scrapbooking and genealogy to help keep their memories strong and promote feelings of self-worth and purpose.

For any counselors planning to lead this group, I recommend focusing on the positive aspects of memories and using Cognitive Behavioral Therapy to reframe faulty beliefs into more constructive and productive beliefs. I recommend structured reminiscence therapy to make the

best use of time and resources. Group sessions need to be planned in advanced especially if you are using props that need to be brought in by the group members.

Some ethical considerations that should be integrated into the group are referring out if there are some mental health issues beyond the scope of the group. It's also important for group members to understand informed consent, confidentiality, and the limits of confidentiality. Group members should not talk about the group outside of the group setting. It's important to lay ground rules and talk about the consequences for breaking the ground rules. Group member screening is important to ensure group members are in the right group and stand to benefit from the group. For instance, a severely cognitively challenged older adult might not be able to remember and recall the same memories that a healthy older adult can. It would not be ethical to place them in a group together as neither stand to benefit from the group and member who can't remember might become agitated.

There are several multicultural competencies that should be integrated into the reminiscence group therapy. One multicultural competency is understanding our own biases, stereotypes, and views on the older population. It's important to be self-aware so that we keep any preconceived attitudes or notions outside of the group therapy setting. It's important to understand that each group member has a different place of origin and might have their own unique cultural backgrounds. Given this knowledge, it is necessary to be sensitive to different viewpoints and ask questions instead of making assumptions about others. In some of the research, group members have had experiences enduring wars such as WWII. One woman was a holocaust survivor before immigrating to the United States. Reminiscing on that part of her past was painful, but the counselor was able to point out the positive aspects of her life that occurred because she had that experience (Agronin, 2009). That being said, it is important to have

intervention strategies that make sense for the population and are sensitive to every culture. A gay or lesbian older adult might not have been able to get married as a younger adult due to federal laws at the time so a Wedding theme might not be appropriate to reminisce on for everyone in the group. Instead, the focus could be on romance or significant relationships in life.

## VII. Conclusion and Reflection

In conclusion, this assignment has taught me more about group therapy and reminiscence therapy for older adults. My inspiration for this assignment is my mother, who is 73 and dealing with the loss of her husband of 50 years. Having done this assignment, I am able to confidently recommend group therapy to her as it will be beneficial to her by lifting her mood and helping her make connections with other older adults that have similar experiences. I really enjoyed the creativity of the session/treatment planning process and look forward to leading a reminiscence group one day.

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