The brunt of the intense staffing pressures faced by nursing homes often falls heaviest on nurses. Indeed, an RN may have as little as 15 minutes per resident each shift to provide a full range of care, including time absorbed by charting and interacting with other members of the health care team. Nursing assistants are under pressure as well, with often less than 1 hour per resident each shift to complete all aspects of personal care (Harrington et al., 2012). As a result, there is significant value attainable through the implementation of effective interventions that can occur as staff members simultaneously provide daily care.

By age 80, approximately 75% of all individuals with Alzheimer's disease will experience nursing home admission (Alzheimer's Association, 2017). It is therefore not surprising that many nursing homes have a high proportion of residents requiring memory care. In fact, among the population of Medicare beneficiaries living in nursing homes, 64% have Alzheimer's disease and other cognitive problems (Alzheimer’s Association, 2017). In addition to memory loss, nursing homes typically contend with the challenges wrought by other significant mental health issues faced by their residents, such as depression and anxiety. Simply put, the need to develop efficient, specialized care for the mental health needs of nursing home residents has never been more critical.

The body of research conducted over recent decades has established that the impact stemming from reminiscence—the exercise of reflecting on one’s life events, sometimes with the aid of tangible prompts—is material and statistically significant. Reminiscence has been shown to improve psychological well-being (Westerhof & Bohlmeijer, 2014; Westerhof, Bohlmeijer, & Webster, 2010). Further, evidence has emerged that its practice can reduce feelings of loneliness and depression, improve self-esteem, and help individuals find meaning in life (Bluck, Alea, & Demiray, 2010; Merriam, 1993; Romaniuk & Romaniuk, 1981; Taft & Nehrke, 1990). More specifically, for residents with cognitive impairment, reminiscence can improve mood, well-being, and life satisfaction (Cotelli, Manenti, & Zanetti, 2012; Fry, 1991; Subramaniam & Woods, 2012; Testad et al., 2014).

For many nurses, the personal connections formed with patients and their families provide fulfillment and increase job satisfaction. In nursing homes, this dynamic is particularly pronounced, as caregivers often enjoy...
the opportunity to establish bonds with residents over the course of many months, celebrating holidays and sharing life events. Inherently, these personal connections can be more difficult to establish between nurses and residents with dementia. Further, as these residents begin to experience impaired language capabilities, connections between nurses and residents are often more difficult to maintain. Reminiscence provides a valuable means to foster a personal relationship, even as a patient’s sense of identity and memory are diminished.

Despite the powerful findings in support of reminiscence, it is an underused practice in nursing homes. Among nursing home staff surveyed, 37.7% reported engaging in reminiscence activities “seldom” or “almost never” (Kris, Henkel, Krauss, & Birney, 2017). Although the aforementioned staffing pressures are likely somewhat responsible, it would appear that the current limited awareness and training in the techniques of reminiscence are also to blame.

On a positive note, several recent studies have demonstrated the broad therapeutic rewards of using reminiscence. From simply reorienting confused residents to more powerful clinical benefits, such as the alleviation of anxiety, the practice of reminiscence in the nursing home setting shows promise. Our research has further demonstrated that reminiscence is not only a pleasurable and valuable activity for nursing home residents, but also yields similar benefits to their caregivers (Henkel, Kris, Birney, & Krauss, 2017; Kris et al., 2017).

Reminiscence offers the unique opportunity to enhance the well-being of caregivers and their residents in nursing homes. Further exploration into the use of novel approaches involving reminiscence is warranted, and such exploration may establish reminiscence as a suitable alternative to traditional treatments involving psychological and pharmacological interventions.

REFERENCES


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