

# Spiritual Reminiscence Group Therapy for Depression of Indonesian Older People Living In Social Institution – An Analytical Review

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**Abstract—** Impact caused by the aging process is the existence of health-related problems. Health-related problems experienced by the older people are not only related to physical health but also mental health. Mental disorders occur in the older people population with depression as the most common disorder. One of nursing intervention that can be conducted in older people with depression is spiritual reminiscence group therapy. This article aims to explore how spiritual reminiscence group therapy can be performed on Indonesian older people with depression. This article used an analytical review method. The review themes are about definition, reasons, benefits, principles, and procedure of spiritual reminiscence group therapy. Furthermore, the results are also explanation about spiritual reminiscence group therapy that is included in community nursing intervention and roles of community nurse in the older people with depression. In the end, spiritual reminiscence group therapy has proven effective in overcoming depression. This therapy is very possible to conduct for older people in Indonesia due to a simple and easy therapy process. However, the research on spiritual reminiscence is still limited, especially in Indonesia. This analytical review suggests to conduct future research about spiritual reminiscence group therapy in the Indonesian older people with depression.

**Keywords—** *Depression, Group Therapy, Older people, Spiritual reminiscence*

## I. INTRODUCTION

Indonesia is a middle-income country and also one of the developing countries that has an increasing number of older people population [1,2]. Increasing older people population will have both positive and negative impacts. The positive impact of this increase in the number of older people is that the older people can contribute in many ways to their families and communities [3]. However, the extent to which these opportunities and contributions depend on one factor, namely health [4]. Meanwhile, the negative impact caused by the aging process is the existence of health-related problems. Indonesia morbidity rate of the older people is 28.62%, which means that from 100 older people, there are around 28 sick older people [5].

Health-related problems experienced by the older people are not only related to physical health but also mental health. Older people in the world around 15% experience mental disorders. Mental disorders in the older people cause 6.6% disability of total disability in this age group [6]. The prevalence of the Indonesian population experiencing mental

emotional disorders is 6% in 2013, increasing to 9.8% in 2018 [7]. Mental disorders occur in the older people population with depression as the most common disorder [8]. So, the increase in mental emotional disorders is quite significant with depression as the most frequent disorder in the older people.

One of the risk factors that contributes to the depression among older people is living in social institution or nursing homes. Major depression in the older people living in home have range from less than 1% to around 5%, but increases to 13.5% in the older people who live in nursing homes [9]. The research reported that 66.66% of older people in nursing homes or social institutions experience mild depression [10]. A similar study conducted in Indonesia also showed that most of the older people in nursing homes experience moderate depression (62.5%), while the majority of older people who live in homes experience low depression level (51.9%) [11]. The incidence of depression in the older people can be said to be high, so, it is very necessary to overcome this problem.

Older people to deal with depression need a coping strategy [12]. Spirituality and religion are widely known as the main coping source that has a positive effect on many aspects of psychosocial functioning for the older people, one of that is to overcome depression [13]. Spiritual and religious aspects can be developed from group activities such as religious community groups or group interventions [13,14]. This suggests that spiritual and religious aspects can be developed from spiritual and religious integration in group interventions such as reminiscence therapy [14].

Spiritual reminiscence is an intervention for complete spiritual care for older people at social institutions. This intervention explores the problems that occur among older people so that it can help them rearrange a number of events and then generate new understandings of the meaning and purpose of their lives [15]. Research on spiritual reminiscence is still limited, especially in Indonesia. Therefore, this article aims to explore how spiritual reminiscence group therapy can be performed on Indonesian older people with depression who live in social institutions.

## II. METHOD

The method used in this paper was the analytical review. The process of review included finding and selecting literature from Proquest, Science Direct, EBSCOhost, and Google Scholar database that were published from 2013 to 2019. The

keywords used in this analytical review were Depression, Older People, Reminiscence, Group Therapy, Spiritual, Nursing. There were 20 articles that found in accordance with these keywords. After the articles were evaluated according to the criteria, namely the problem of depression of the older people in social institution and the spiritual reminiscence group therapy, 8 main articles were obtained for review. Supporting literature were also used in this analytical review to strengthen this paper.

### III. ANALYTICAL REVIEW

#### A. *What is spiritual reminiscence group therapy?*

One of the reminiscence therapy developed is spiritual reminiscence group therapy [15]. According to *Kamus Besar Bahasa Indonesia* (The Great Dictionary of Indonesian Language), spiritual means dealing with or having a psychological nature (spiritual, inner) [16]. Spiritual concepts are about core meaning and connectedness, this is the basis of the individual to respond to everything in life. Anger, hatred, love, forgiveness and hope come from this core [17].

Spiritual reminiscence is a way of telling a life story with an emphasis on meaning. Spiritual reminiscence can identify meanings related to joy, sadness, anger, guilt or remorse [15]. Thus, it can be concluded that spiritual reminiscence group therapy is a non-pharmacological intervention that uses techniques to review events or experiences of life in the past with an emphasis on the meaning of the events or experiences.

#### B. *What are the reasons to conduct spiritual reminiscence group therapy in Indonesian older people?*

Older people population in Indonesia is highly influenced by cultural practices, many of which are based in religious traditions. There are six religion in Indonesia, including Islam, Christian, Catholic, Buddha, Hindu and Kong Hu Cu [18]. Religious and mental-spiritual guidance at social institutions was carried out as an effort to maintain and improve mental-spiritual and spiritual conditions of the older people, especially in carrying out daily worship [19]. The role of the spiritual aspect in Indonesia older people becomes more prominent. Older people with a high spiritual level is better to manage their well-being [20]. Spiritual can be used as a coping strategy to adapt to changes due to aging [21].

The spiritual aspects of the older people have a significant relationship with the level of depression. This aspect can be an effort to reduce the risk of depression in the older people [22]. Moreover, a low spiritual level in older people is also a contributing factor to depression in the older people [23]. So, spiritual is an important aspect for the older people and develops with age.

The integration of spirituality with reminiscence therapy may enhance a sense of meaningful identity among older people [15]. The integration of spiritual and religious practices in reminiscence therapy may also increase the acceptability of this intervention for older people population [14]. Older people reported that they were more interested in joining activities that involved spiritual and religious elements [13]. Given the deep significance of spiritual and religious aspects in Indonesian culture, the integration of the spiritual and religious in reminiscence therapy could be particularly suitable for older people population in Indonesia.

#### C. *What are the benefits of spiritual reminiscence group therapy?*

Aging as a "spiritual journey" with challenges that come in the future. This journey is to find meaning in one's life and that is the reason for continuing life and hope. This view helps the older people to accept death and allows people living with disabilities to find hope even in the face of uncertainty [17]. The meaning is the center of man and loss of meaning can be an important factor in sadness and depression. If God is central in meaning, then worshipping, praying, reading scripture or meditation can be a means of responding to that meaning [15]. Depressed people may feel that life is meaningless and may feel difficult or impossible to respond to life unless their depression is treated [17].

Spiritual reminiscence helps people find meaning in life in the present and develop strategies to accept changes in the future, including loss of significant relationships and increased disability [17]. The spiritual reminiscence process can identify events that cause anger, guilt or remorse. Some of these problems when expressed by older people can help rearrange events and provide a new understanding of how they live [24]. The purpose of spiritual reminiscence is to make connections between the past, present and future of the older people; to encourage sociability and the formation of new relationships; to confirm a sense of personal identity and encourage feelings of self-esteem; to assist in the assessment of the overall function and establishment of a treatment plan [25].

Research on spiritual reminiscence is based on research by Elizabeth MacKinlay published in the book "Spiritual Growth & Care in the Fourth Age of Life" in 2006 [25]. Spiritual reminiscence has more benefits compared to reminiscence therapy. MacKinlay and Trevitt's (2010) study states that spiritual reminiscence provides an opportunity for the older people to talk about important relationships and connect with others in older people care facilities. This therapy offers an opportunity for the older people to talk about fears, hopes and what they expect when entering old age or the end of their lives [15]. Meanwhile, reminiscence therapy does not have specific benefits as described above. Reminiscence therapy focuses more on remembering various experiences or pleasant past events [26].

Wu and Koo (2016) found that other benefits of hope, life satisfaction, and spiritual well-being in the older people with mild or moderate dementia could be significantly improved by a 6-week intervention in spiritual reminiscence [27]. Elias (2017) found that the reminiscence spiritual group therapy was an intervention that could overcome loneliness and depression in the older people who were left in older people care homes. This spiritual reminiscence group therapy is also carried out only with a duration of 6 weeks [14]. When compared with reminiscence therapy, this therapy has proven effective if given to older people with depression for 8-12 weeks [28,29]. So, the existence of spiritual aspects in reminiscence therapy gives more influence to reduce depression in the older people.

*D. What are the principles of spiritual reminiscence groups therapy?*

The spiritual reminiscence group therapy can be used in a multi-religious and cultural population [14,27,30]. Reminiscence can include a variety of techniques used by both professionals and non-professionals in different settings. This intervention can be used in hospitals, older people care centers and communities [26]. Reminiscence can be done individually and in groups [31].

Therapy carried out in groups provides an opportunity for older people to interact more with other older people [32]. Meanwhile, therapy is carried out individually if the older people is not ready to tell stories in groups and researchers want to know more about the personality of each older people person [33]. However, as far as is known, reminiscence group therapy is more often done and proved significant in reducing depression among older people [28,29,34,35].

Spiritual reminiscence group therapy differs from reminiscence in terms of its contents, which focuses on the meaning of life through life stories, including connection and belief context (where this is part of people's stories) and about what has given joy or sadness [24]. The spiritual reminiscence process can function effectively when effective facilitators are available, a supportive environment can be provided and size group remain small, with no more than six people in each group [15].

An effective facilitator must have the ability to listen actively to the "third ear"; empathy; physical presence-for the older people; sensitive; able to appreciate and value the older people as unique individuals; not afraid of painful emotions; able to enjoy reminiscence and be interested in the past; discipline; reminiscence is a process, not carried out in a hurry; able to criticize what he did himself; and able to accept criticism from others [31]. So, facilitator have to exercise more to get that abilities.

*E. What is the procedure of spiritual reminiscence group therapy?*

The spiritual reminiscence group therapeutic process includes two steps: first, reviewing spiritual history (i.e. broad questions about one's involvement in certain religious traditions, significant activities and relationships, and general coping strategies) and second, asking questions to get stories of life and individuals' spiritual reminiscence [25]. Spiritual reminiscence group therapy is conducted once a week for six weeks. Every week this program consists of one session [14,27].

Therapy is done in groups with members of three to six people. Participants are arranged to sit in a circle to allow them to have eye contact and communicate with others [27]. Each session addresses a particular problem. The themes are 1) the meaning of life; 2) relationships; 3) hopes, fears, and worries; 4) become old and transcendent; 5) spiritual and religious beliefs; and 6) spiritual and religious practices [14,36]. Each session is about 45-90 minutes [14,15]. Each

participant is expected to share their stories for at least five minutes each person [14].

Each therapy session includes preparation and planning phases, beginning, implementation (middle) and closing (end) [14,31]. According to Gibson (1994), the preparation and planning phase must be done in full before the session begins. The first meeting with the group must confirm their hopes and not their fears. The facilitator needs to start for the introduction of the group members (participants) who have known each other or not in the initial phase. After the introduction, followed by a brief statement of the reasons the members of the group gathered and the purpose of the meeting. Then, introduce the topics that will be discussed in the session [31].

The implementation phase is carried out with regulations that develop naturally. Trust and courtesy arise, participants learn to pay attention and respect each other. The member who dominates speaking learns to listen and the shy and quiet member will feel valued and start talking. The facilitator must avoid questions that have right or wrong answers. Open questions stimulate responses that other members can add, complement and develop [31].

The facilitator also needs present skills for everyone, uses eye contact, learns to approach people, gives signals to encourage silent members to contribute. The facilitator must not rush or pressure participants, but also be aware of the possibility of boredom, anxiety, or rejection. The closing phase will find out whether the group is successful in doing therapy or not. A successful group is one that can collaborate well and share many stories. The facilitator needs to evaluate the therapy sessions that have been carried out and conclude the activities according to the topic. This phase also contains a reinforcement from facilitators to participants for their participation [31].

*F. Is spiritual reminiscence group therapy included in community nursing interventions?*

Community nursing interventions use interventions that focus on the population or aggregate. Population-focused interventions emphasize changes in awareness, attitudes, and community behavior with the aim of increasing health and population capacity [37]. Community nurses have long intervened with groups to effectively meet health care needs. Groups are defined as associations of several people who work together to achieve a specific goal [38].

Interventions using groups are interventions that focus on goals to meet varying client needs or to achieve specific tasks. Intervention using groups is an effective population-focused intervention [37,38]. With groups, community nurses are able to help clients with similar needs to learn new knowledge and skills, to support group members, or to solve problems. Promotion and maintenance of population health is the main focus of community nursing practice. Clinical and empirical evidence suggests that groups are an approach to achieving various health promotion goals. Groups can provide a supportive environment that can help clients with

similar problems by working together to achieve the same goals [38].

Intervention using groups has several advantages. These potential benefits are group intervention providing stimulus to solve problems and make creative and productive decisions; promote a shared vision of goals and outcomes that are common to participants; bringing together the capabilities of several people for complex problem solving; bringing together various skills and resources for collective action; help participants focus on priorities; help group members complete their tasks effectively and efficiently; provide a supportive environment for solving group problems individually or as a group [38].

Group formation has several principles. These principles are the homogeneity of objectives and certain personal characteristics of group members; heterogeneity of coping abilities, expertise and life experiences of group members; and overall structure which includes the quality and abilities of group members [38,39]. Apart from group members, the place setting also plays an important role in the group. Groups can function maximally if the group meeting place is right, can make it comfortable and easily accessible to groups. Another factor that must be considered when forming a group is the size of the group. The size of the group depends on the age of the client, group leader experience, type of group and problems explored [38].

Community nurses can form various group interventions [37]. The three main types of groups in community settings are task groups, psychoeducation groups and supportive groups or counseling [38]. In addition, there are types of therapy groups, these groups are used to intervene psychological or behavioral problems [39]. One of this therapy group is spiritual reminiscence group therapy. This therapy conducts with small group that contains three to six older people.

*G. What are the roles of community nurses in providing care for older people with depression?*

Community nursing is a professional nursing service based on the population. Community nurses focus on the health of the population, prioritizing community needs, paying attention to all aspects of health (physical, mental, social, cultural and spiritual) [40]. The role of advanced nurses especially in community nursing includes nursing care providers, educators, consultants, administrators and researchers [37].

The scope and standards of community nursing practices related to the implementation of spiritual reminiscence group therapy consist of evidence-based practice, research, communication and leadership [37]. Evidence from previous studies stated that spiritual reminiscence group therapy had an effect of reducing depression among older people living in social care institutions. The intervention in the spiritual reminiscence group also require communication and leadership skills. Communication skills are used because the entire therapeutic process involves communication between nurses and the older people. Leadership skills are used

because nurses will be facilitators who guide therapy in groups.

The role of providing nursing care is given by community nurses to individuals, families, groups and communities with the primary responsibility of creating innovative programs that are in accordance with the needs of the community. The specificity of community nurse intervention is population-focused interventions [37]. Nurse uses the reminiscence spiritual group therapy in the older people population with depression who lived in social care institutions. Interventions are given in groups.

The role of the educator and consultant is given by the community nurse by teaching about health information and providing direction / solutions to solve existing problems [37]. Community nurse provide information and direction about one of the interventions that can be used to overcome depression that occurs in the older people. The administrator's role is carried out by community nurse as decision makers and problem-solvers [37]. Community nurses become a problem-solver to solve depression problems that commonly occur in the older people who live in the social institution.

The role of researchers is carried out by community nurses to improve nursing services by developing knowledge through research, answering questions or phenomena that arise in nursing practice [37]. One of research topic for community nurses is spiritual reminiscence group therapy for older people with depression.

#### IV. CONCLUSION

Depression is a common problem in the older people. Various methods carried out by health workers including nurses to resolve the problem. Many nursing interventions are found and developed to deal with depression in the older people. One of them is the spiritual reminiscence group therapy.

Spiritual reminiscence group therapy has proven effective in overcoming depression among older people. The focus of this therapy is to find meaning in past experiences or events to be used to solve problems that arise when entering old age. Thus, it is feasible to conduct this therapy for older people in Indonesia due to a simple and easy therapy process. However, the research on spiritual reminiscence is still limited, especially in Indonesia. Based on results of this analytical review, it is suggested that later research can be carried out on spiritual reminiscence group therapy in the Indonesian older people with depression.

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