



SCHOOL OF PSYCHOLOGY
DOCTORATE IN CLINICAL AND COMMUNITY PSYCHOLOGY
MAJOR RESEARCH PROJECT

Memory, Identity and Well-Being: Preserving Selfhood in Dementia

Adam Bevins
(Trainee Number 05/01055)

Research Supervisor: **Dr Catherine Haslam, School of Psychology, Washington Singer Laboratories, Perry Road, University of Exeter, EXETER, EX4 4QG**

Field Collaborator: **N/A**

Target Journal: **Journal of the International Neuropsychological Society**

Word Count **Manuscript: 7981**
Appendices: 6347

NB University, rather than journal word count has been used for this project

Submission Date: **15th August 2008**

"I certify that all the material in this dissertation which is not my own work has been identified and that no material is included for which a degree has been previously confirmed"

**Submitted in partial fulfilment of requirements for the Doctorate Degree in
Clinical and Community Psychology
University of Exeter**

TABLE OF CONTENTS

Prologue	1
<i>Main Manuscript</i>	
Abstract	3
Introduction	4
Method	15
Results	25
Discussion	29
References	39
<i>Appendixes</i>	
1 Extended Introduction	53
2 Extended Method	63
3 Extended Results	108
4 Dissemination Plan	119
5 Instructions for Authors	121

PROLOGUE

The purpose of this Prologue is to contextualise the present study because it underwent a departure from the original research proposal. This study was run alongside another project carried out by a second trainee clinical psychologist (Sophie Hayward). It is acknowledged that elements of the planning and consultation process have been shared, and there are a number of broad similarities in terms of the research design and methodology. Both projects were conducted as part of a larger research group at the University of Exeter investigating social identity processes called IPSIS (Identity and the Psychology of Self in Society).

This project, in its original form, exclusively concerned residents of specialist dementia care facilities. It was anticipated that the second project in this area would recruit a sample of older adults living in standard residential care facilities without cognitive impairment. Each project therefore targeted a distinct sample group. From the outset it was always an expectation that data from both projects would be analysed comparatively, although not as part of the two DClinPsy major research projects.

Both projects originally planned to allocate residents to three conditions: group reminiscence, individual reminiscence; and group skittles. However, as a result of lower than expected recruitment and higher attrition, the required number of participants indicated by the initial power calculation was not achieved. Conducting the proposed statistical analyses with fewer numbers would have resulted in reduced statistical power, thereby increasing the probability of

making a type II error. The original plan could therefore not be maintained. In response to this problem, and in consultation with the programme research director, it was decided to combine the subject pools from the two DCLinPsy projects.

An examination of the range of cognitive abilities in the data indicated a further reason for taking this action. The mean total score on the Addenbrooke's Cognitive Examination, Revised (ACE-R) for residents in dementia care was 40.56 ($SD = 17.06$). By comparison the mean total score in standard care was 58.40 ($SD = 19.76$). The ACE-R has a suggested cut-off of 88 for dementia, indicating a significant degree of cognitive impairment in both samples. Essentially a subset of the overall sample (i.e., standard care) was simply found to be *less* impaired. This is consistent with recent findings suggesting that a large proportion of older adults in residential care who are not in dementia-registered beds have significant cognitive impairment (e.g. Alzheimer's Society, 2007a; Macdonald, Carpenter, Box, Roberts, & Sahu, 2002; Matthews & Denning, 2002).

Having decided to combine the datasets, a decision was needed in order to distinguish the two projects. In consultation with an external examiner it was agreed that one project would compare group reminiscence to group skittles (the present study) and the other would compare group reminiscence to individual reminiscence. Each DCLinPsy project therefore benefits from a different comparison group, and takes a different emphasis to the other, although group reminiscence data is shared.

ABSTRACT

People with dementia face considerable challenges to preserving identity. It has frequently been observed that group reminiscence work helps sufferers re-establish their past identities as well as position themselves as members of a group in the present. To date, little research has attempted to put these claims directly to empirical test. Drawing on social identity theory (Tajfel & Turner, 1979) this study explores the impact of a group reminiscence intervention in a sample of 58 cognitively impaired older adults living in residential care. Measures of identity, well-being and cognition were taken before and after participants took part in six weekly sessions of either group reminiscence or a group control activity. A Pretest-Posttest Control design was employed to explore the difference in average change between treatment conditions. The main findings showed no difference in average change between the two groups on measures of identity and well-being. However, the reminiscence group showed a greater overall improvement in memory than the control group. The theoretical implications and future directions for working clinically with cognitively impaired populations are considered.

Keywords: Reminiscence, Cognition, Aging, Depression, Quality of Life, Group Membership