

Relationships Among Nostalgia, Depression and Death Anxiety of Elders in Reminiscence Therapy and Impression

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Abstract

Background: The number of elders increases in these days and for future. Depression or death anxiety is an important problem. There were few empirical studies about depression or death anxiety related with nostalgia.

Purpose: The purpose of this study was to investigate relationships between Nostalgia Proneness, depression or death anxiety of elders through the reminiscence therapy and impression of the therapy to get support of qualitative results.

Method: Elders in an elders' college participated in the Reminiscence Therapy. After the therapy, they completed questionnaires of the Nostalgia Proneness (positive and negative), the Geriatric Depression Scale (GDS) for depression, a Quick Inventory for Death Attitude 8-item (QIDA-8) for death anxiety, and impression for the therapy.

Results: The score of the Nostalgia Proneness (NP)-Positive was 4.77 of 8 point, and that of NP-Negative was 2.77. The score of GDS was 2.72, which was lower than the cutoff point. The NP-Negative significantly related with GDS ($r=.45$). The NP-negative significantly related with Death Anxiety ($r=.49$). Chosen categories from impression by qualitative analysis were: "Positive evaluation of the reminiscence therapy," "Positive evaluation of life history book," "Memorable memories and emotion," "Time crossed reconsideration of one's life," and "Negative comments for the reminiscence therapy".

Conclusion: Reminiscence Therapy may promote elders' nostalgia proneness positive and positive impression. Some of elders with nostalgia proneness negative felt depression and death anxiety, and felt negative impression the therapy. We need to consider both positive and negative proneness aspects.

Keywords: reminiscence therapy, nostalgia proneness, depression, death anxiety

1. Introduction

The number of elder is increasing all over the world. One of the most psychological problems is about depression and anxiety for their death in near future. One of the most effective care for elders is life review or reminiscence therapy. Butler proposed life review and defined life review as natural event for elders in which they recalls their past experiences, analyzes them in orders, evaluates them, to achieve a more profound self-concept (Butler, 1963). Life review is based on Erikson's developmental theory, in which, an individual tries to achieve integrity. Reminiscence therapy includes both life review in which a person review his life deeply for integrity and reminiscence therapy in which a person review his life not so deeply.

Previous studies showed effects of life review or reminiscence therapy on subjective happiness of elder living in community (Bohlmeijer, Roemer, Cuijpers, et al., 2007), on quality of life of the elderly (Sharif, Jahanbin, Amirsadat, et al., 2018), on depressive symptom in older adults (Liu, Yang, Lou, et al., 2021). About quality of life, Woods, O'Philbin, Farrell, et al. (2018) showed effects of life review on QOL, cognitive function, interaction, behavior, depression for dementia elderly, however, the effects of life review on QOL is not consistent among researches.

On the other hand, there are studies about Nostalgia (Westerhof & Bohlmeijer, 2014). Kusumi (2021) made a Japanese version of Nostalgia Proneness Scale based on Holbrook (1993) and demonstrated relationships between Nostalgia proneness and life satisfaction or loneliness by observational studies. Garrido (1918) demonstrated that nostalgia could represent parts of both adaptive and maladaptive coping strategies, depending

on the personality and coping style of the individuals.

Some previous studies reported about existential threat or death anxiety related to nostalgia. Sedikides & Wildschut (2018) showed that nostalgia helps people attain a more meaningful life, protects from existential threat, and contributes to psychological equanimity in a review article. Van Tilburg, Sedikides, Wildschut et al., (2019) showed relationships between nostalgia and meaning of life. Also, Juhl, Routledge, Arndt, et al (2010) showed that individuals high in nostalgia proneness did not have higher level of death anxiety after induces mortality proneness in an experimental study. These studies were observational studies by only questionnaires or experimental studies, not a clinical study. We needed studies about nostalgia, depression, and anxiety of elders from a clinical situation.

The purpose of this study was to investigate relationships among nostalgia proneness, depression and death anxiety of elders who participated in a group reminiscence therapy. Moreover, we searched impression of reminiscence therapy in order to confirm qualitative data.

2. Method

2.1 Participants

Participants were 22 elders who attended community college for elders. Mean age was 77 years old. Inclusion criteria was that a participant communicated with an interviewer and reviewed his life individually. Exclusion criteria was that a participant had serious mental problems and hard to review his life.

2.2 Questionnaires

We used the following questionnaires.

- 1) Nostalgia Proneness Scale (Kusumi, 2021): It consisted of 2 factors like Nostalgia Proneness Positive and Negative. There are 14 question items measured from 1 (not at all) to 8 (well true) point.
- 2) Quick Inventory for Death Attitude (Abe, 2019): It consisted of 4 factors and 2 question items for each factor, total 8 items. Threat and anxiety for death (Death anxiety), World after death (World), Awareness for memorial (Memorial), Death as release (Release). In the present study, we used death anxiety mainly.
- 3) GDS (Geriatric Depression Scale)-15-J (Sugishita & Asata, 2009): It consisted of 15 items. A participant answered by Yes (1 point) or No (0 point).
- 4) Free description for the reminiscence therapy.

2.3 Procedure

We recruited participants through community college for elders, which was set beside a university in Western Japan. A clinical psychologist conducted this therapy as a leader. A group consisted of 5 or 6 persons, then total was 5 groups. Elders got a group reminiscence therapy consisted of 7 sessions. Contents of each session were following: 1) lecture of purpose and method of the reminiscence therapy, group 2) reminiscence about memories of childhood, 3) elementary school, 4) adolescence, 5) adulthood, 6) old age, and 7) future life. Participants wrote down their main memories in their own life history book and made a book. They completed questionnaires before the first session and after all sessions, and submitted them by free will.

2.4 Data Analysis

We conducted 1) descriptive statistic, 2) correlation analysis among questionnaires, and qualitative analysis on free description.

2.5 Ethics

We performed this study in accordance with the Declaration of Helsinki. The research ethics committee approved this study (23ZDC11).

3. Results

Firstly, we calculated descriptive statistic (Table 1). The GDS mean score 2.72 was no problem, since the cutoff point was 7/6. The Nostalgia proneness positive score was 4.77 of 8.0, and it was generally high score. It means that participants remembered their memories with positive emotion. The Nostalgia proneness negative score was 2.77 of 8.00. Participants remembered those with a little negative emotion. The score of Death Anxiety was 2.20 of 4.00 full point, and it was not so high.

Table 1. Descriptive analysis of each questionnaire

Scale and factors	Mean score	SD
GDS (Geriatric Depression Scale)	2.73	3.49
Nostalgia Proneness: Positive	4.77	0.88
Nostalgia Proneness: Negative	2.77	1.17
Death attitude: Death Anxiety	2.20	0.77
World after death	1.86	0.86
Awareness for memorial	3.48	0.50
Release	1.84	0.79

We conducted the correlation analysis among variables (Table 2). About depression, NP-negative significantly related with GDS ($r=.45$). It means that people with nostalgia proneness negative felt depression. Moreover the NP-negative significantly related with Death Anxiety ($r=.49$). The NP-positive did not significantly related with GDS or Death Anxiety.

Different from purposeful results, the correlation coefficient score between World and Release was high ($r=.59$). It means that Japanese people in this sample who believe world after death recognize death as release.

Table 2. Correlation coefficient analysis among variables

	GDS	NP-positive	NP-negative	Death Anxiety	World	Memorial	Release
GDS							
NP-Positive	-.08						
NP-Negative	.45*	.08					
Death anxiety	.28	.21	.49*				
World	-.23	.09	.10	-.15			
Memorial	-.09	.18	.06	.08	-.56**		
Release	.18	-.07	.12	-.003	.59**	-.55**	

Lastly, we conducted a qualitative analysis on free description for impression of the RT.

Table 3. Categories from free description for impression of the Reminiscence Therapy (RT)

Code	Sub-categories	Category
<ul style="list-style-type: none"> • The RT was a chance to look back my life. • I could look back my life in the RT. • I could study the RT. 	<ul style="list-style-type: none"> • Importance of chance of life review 	Positive evaluation of RT
<ul style="list-style-type: none"> • RT was interesting to spend much time to look back. 	<ul style="list-style-type: none"> • Interests of reminiscence 	
<ul style="list-style-type: none"> • The RT is useful to tell parents' way of life to children. 	<ul style="list-style-type: none"> • Way of transmit to posterity 	Positive evaluation of life history book
<ul style="list-style-type: none"> • The RT was a chance to look back my life by making the book. • Making a life history book was good for me. • I want to complete the book in future. 	<ul style="list-style-type: none"> • Life history book left as a form 	
<ul style="list-style-type: none"> • I refreshed by writing what I could not tell others. • My mind was purified by writing what I did not want to remember 	<ul style="list-style-type: none"> • Purification of feeling or confirmation of 	

<p>memories.</p> <ul style="list-style-type: none"> • The RT was a chance to confirm my memories to express by sentences. 	<p>memories by writing</p>	
<ul style="list-style-type: none"> • Nostalgic remind me memories of time with younger age or parents. • Nostalgia is revived. • Most of my memories are pleasant ones. 	<ul style="list-style-type: none"> • Reviving nostalgia 	<p>Memorable memories and emotion</p>
<ul style="list-style-type: none"> • I feel nostalgic for what were bitter memories at that time. • I think that bad memories or pain changed to good ones later. • I is good for me that suffering at that time change to pleasant memories after time goes by. 	<ul style="list-style-type: none"> • Change from bitter memories to sweet memories 	
<ul style="list-style-type: none"> • I thought of future after RT. • I want to look back the time I lived in and put it. 	<ul style="list-style-type: none"> • Orientation for future 	<p>• Time crossed reconsideration of one’s life</p>
<ul style="list-style-type: none"> • It is important to recognize the present time is precious. 	<ul style="list-style-type: none"> • Orientation for present 	
<ul style="list-style-type: none"> • This is my life which including both good and bad things. 	<ul style="list-style-type: none"> • Reevaluation for one’s life 	
<ul style="list-style-type: none"> • To talk in a group was weakness. • I did not want to talk with unknown persons. 	<ul style="list-style-type: none"> • Weakness of group 	<p>Negative comments for RT</p>
<ul style="list-style-type: none"> • I do not want to talk about stories of my childhood. 	<ul style="list-style-type: none"> • Avoidance of past stories 	

We used < > for subcategory and [] for category.

Subcategories like <Importance of chance of life review> <Interests of reminiscence> <Way of transmit to posterity> were integrated in [**Positive evaluation of RT**].

Subcategories like <Life history book left as a form> <Purification of feeling or confirmation of memories by writing> were integrated in [**Positive evaluation of life history book**].

Subcategories like <Reviving nostalgia> <Change from bitter memories to sweet memories> were integrated in [**Memorable memories and good emotion**].

Subcategories like <Orientation for future> <Orientation for present> <Reevaluation for one’s life> were into [**Time crossed reconsideration of one’s life**].

Subcategories like <Weakness of group> <Avoidance of past stories> were integrated into [**Negative comments for RT**].

Most of categories showed positive impression, however the last one was not.

4. Discussion

4.1 About Descriptive Analysis

As for Depression, participants of elders were not depressive state. About nostalgia proneness, participants had high NP positive and low NP negative. Group reminiscence therapy might lead this state. The score of Death Anxiety was middle level and it was not problem. Generally, participants after reminiscence therapy were good mental health and mostly had positive nostalgia proneness, and standard death anxiety.

4.2 About Correlation Coefficient Analysis

The GDS significantly related with NP-Negative ($r=.45$). It means that people with nostalgia proneness negative felt depression. Though the mean score of NP-negative was low, some of them with negative proneness felt depression. This fact may be important, because there are many studies of positive aspects of nostalgia, such as meaning of life (van Tilburg, et al., 2019), functions like social connection or self-continuity (Sedikides &

Wildschut, 2017), or life satisfaction (Kusumi, 2021).

Addition to above relational variables, Westerhof & Bohlmeijer (2014) showed the process of depression as mental health and well-being. Garrido (2018) suggests that for people with tendencies to depression or maladaptive coping styles, nostalgic remembering may result in negative affective. That is, these factors might influence to depression.

In the impression, though memories changed from bitter to sweet, some did not want to review their past. Integrated these results and facts from previous studies, some elders with bitter memories, maladaptive coping, nostalgia proneness negative, and not changed memories might felt depression.

The NP-negative significantly related with Death Anxiety. That is, people reviewed their life with negative proneness has death anxiety. Though Juhl, et al. (2010) did not separate nostalgia into positive or negative, they showed that individuals high in nostalgia proneness did not have higher levels of death anxiety after mortality salience in an experiment. They say that nostalgia buffers existential threat. Since we separated nostalgia proneness into positive and negative, we added the new facts that negative proneness much more related with death anxiety than positive proneness.

Van Tilburg, et al. (2019) showed that nostalgia helps people attain a more meaningful life, protects from existential threat, and contributes to psychological equanimity. Integrating the results of the present studies with those of previous studies, participants with nostalgia proneness negative do not have protect from existential threat and may feel death anxiety.

For these people we need special method of reminiscence therapy or other care may be useful for their peace of mind.

4.3 Evaluation of Impression of Reminiscence Therapy

Categories for impression of the Reminiscence Therapy were **[Positive evaluation of RT]** **[Positive evaluation of life history book]** **[Memorable memories and emotion]** **[Time crossed reconsideration of one's life]** **[Negative comments for RT]**. Participants of elders had positive impression for the Reminiscence Therapy and life history book. Through the Reminiscence Therapy, participants deepen their past memories, felt nostalgic emotion, and reconsidered of their lives. However, small parts of participants had negative comments for the Reminiscence Therapy. The reasons may that they had not so good memories or those memories did not changed from bad to good. It is supported a previous study (Garrido, 2018) in which nostalgia can represent part of both adaptive and maladaptive coping strategies, depending on the personality and coping style of the individual.

5. Conclusion

Reminiscence Therapy promoted elders' nostalgia proneness positive and they had positive impression. However, elders with nostalgia proneness negative felt depression and death anxiety and some felt not useful. For future we need to add the number of participants of other elders and investigate evidence with pre and post design study to confirm these results.

Conflicts of Interest

The authors declare no conflicts of interest regarding the publication of this paper.

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