

# Assessing the Impact of Reminiscence Therapy on Elderly Well-Being: A Pretest-Posttest Experimental Design

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#### **Abstract**

The elderly are a group that faces complex challenges in this phase of their lives, including loneliness, social isolation, and decreased independence. This condition is often exacerbated by the loss of people close to them and a decline in physical health. Depression and anxiety often haunt older adults, which can go undiagnosed or ignored as part of the aging process. This study aims to evaluate the effect of providing reminiscence therapy on increasing the happiness of the elderly at the Adinda Mulia Bahagia Nursing Home. The method used is a one-group pretest-posttest design using a happiness scale-based questionnaire developed by Seligman (2002). The research was carried out at the Adinda Mulia Bahagia Foundation, Bekasi Regency, West Java on June 2 2024. The population consisted of all elderly people living in the institution, with samples taken using saturated sampling techniques. The results of data analysis using the t-test statistical test showed that there was a significant difference between the pretest and posttest scores (p < 0.05), indicating that reminiscence therapy had a positive effect on increasing the happiness of the elderly. Nevertheless, the correlation between pre- and post-treatment results shows inconsistent response variations among individuals. The conclusion of this research is that there is a significant change in the level of happiness of the elderly after being given reminiscence therapy, although individual responses may vary. As a suggestion, further research could expand the sample and consider additional factors that could influence the research results.

**Keywords**: happiness; elderly; reminiscence; therapy

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# INTRODUCTION

Entering old age is not an easy thing for someone to accept with the changes, decline and problems that occur. Problems that occur in the elderly are related to economic, health, social, psychological problems, post power syndrome, helplessness, uselessness and unhappiness (Pornamasari, 2016). Happiness will increase when the elderly receive services to improve the quality of life of the elderly, and the biggest factor in the elderly that can improve their quality of life is that they need special attention and treatment to fulfill their



welfare, Suardiman (2011). Family support has an effective contribution (SE) to happiness in the elderly by 47.78%. As for the phenomenon that occurs in the elderly, there are 2.8 million elderly people experiencing neglect in Indonesia. Cases occurring among the elderly related to neglect are increasing, causing the elderly to experience exclusion, discrimination, and lack of support from the family, coupled with inadequate housing which is part of the social problems experienced (Suryani and Akbar, in Mastuti 2016).

Happiness in old age is important because it is closely related to health indicators. Happy elderly people reflect healthy elderly people, and this indicator can be used to evaluate elderly health promotion programs (Lima et al., 2012). Moeini et al. (2016) emphasized the importance of programs to increase the happiness of the elderly as a strategy to improve physical, mental and social health. Research by Nassab and Allahvirdiyani (2013) shows that a program to increase happiness is effective in reducing depression in the elderly. A study by Hariri and Khodami (2011) found that a happiness training program could increase the life expectancy of the elderly.

Social interaction can overcome loneliness through communication. Elderly people who feel listened to will no longer feel lonely. Reminiscence therapy, which involves remembering and sharing past memories with family, groups, or staff, can help remember past memories (Manurung, 2016). According to Wu (2011), reminiscence therapy aims to increase self-esteem, self-awareness, and ability to adapt to stress, as well as creating togetherness and increasing social intimacy. This therapy also changes negative emotions into positive ones, thereby reducing psychosocial problems such as anxiety and stress, and improving the quality of life of the elderly (Ilham et al., 2020).

Reminiscence therapyproven to have a positive influence on mental health and happiness levels in the elderly, because remembering past memories will cause the elderly to feel confident and feel like a useful individual. Apart from that, when the elderly review their life journey through reminiscence therapy, it will help the elderly to understand how they have grown as an individual until now. This will then help the elderly to be able to learn lessons and convey them to others about how they have learned from their positive or negative experiences which then guide them in living their lives to date (Ildarabadi et al., 2020). The same thing was also found in the research results of Pourlayavali et al (2016) which showed that reminiscence therapy was able to increase happiness and life satisfaction in the elderly.

Elderly people who feel unhappy and meaningless will experience an increase in life expectancy after giving reminiscence therapy, so that they are able to prepare themselves to face their old age (Hidayatulloh et al., 2021). Reminiscence therapy has been proven to be able to increase self-esteem and self-satisfaction in the elderly (Yen & Lin, 2018) so that they are able to adapt to life's challenges and achieve personal integrity (Gati et al., 2016). Based on the previous explanation, the researcher is interested in this case to evaluate the effect of providing reminiscence therapy on increasing the happiness of the elderly at the Adinda Mulia Bahagia Nursing Home.

# **METHOD**

#### Design

This research uses quantitative research with an experimental approach method. In this research, the type used was Pre-Experimental Design because no other groups were found that could be used as material for research. Pre-Experimental Design is called that because this design is not yet a true experiment. This is because there are external variables that still influence the dependent variable, so that the experimental results which are the dependent variable are not completely influenced by the independent variable (Sugiyono, 2013). Robinson (2005) explains that research is generally divided into three types of design based on the number of dependent variables, namely one-group posttest, one-group pretest-posttest, and time-series design. This research uses a one-group pretest-posttest design. The research design can be seen in the following table:



## One Group Pretest Posttest Design Table

Pretest	Treatment	Posttest		
O1	X	O2		

#### Information:

O1 : Initial test before treatment is given
X : Providing reminiscence therapy treatment.
O2 : Final test after being given treatment

#### Place and Time

This research was carried out at the Adinda Mulia Bahagia Foundation at the address Jl. Kp. Kemurang village, RT.01/RW.01, Cikedokan, Kec. West Cikarang, Bekasi Regency, West Java 17530. This research was carried out on Sunday, June 2 2024 starting from 09.00-15.00.

#### Subject

In this study, those included in the population were all elderly people living in the Adinda Mulia Bahagia Foundation orphanage. It is not possible for this research to have sampling, so the sampling technique used is a saturated sampling technique. Saturated sampling is a method where every element of the population is included in the sample, this is very useful in research with small populations where every element is important to analyze to achieve accurate and comprehensive results (Cooper & Schindler, 2020).

#### Instrument

The measuring tool used in this research is a questionnaire with a happiness scaledesigned by Seligman (2002) with data collection techniques through methods *reminiscence therapy* where this measuring instrument can obtain data related to increasing the happiness of the elderly.

## Data analysis

In supporting the hypothesis that has been proposed, after obtaining the collected data, the researcher carried out several stages to calculate and process the data. The data analysis used is the t statistical test (T-test). To compare pretest and post-test.

According to Creswell (2012), the t-test is often used in experimental research to compare the averages of two groups, such as pretest and posttest results, to determine whether there are statistically significant differences between the two groups after treatment is given. The test conditions are as follows:

- 1. Hypothesis Formulation:
  - Null Hypothesis (H0): There is no significant difference between the pretest and posttest
  - Alternative Hypothesis (Ha): There is a significant difference between the pretest and posttest
- 2. Determine the Significance Level ( $\alpha$ ): The significance level used is 0.05.
- 3. t Statistical Test:
  - Calculate t value: Using the appropriate formula for t-test (paired t-test)
  - Comparison with t table: Compare the calculated t value with the critical value of the t distribution at a certain level of significance and degrees of freedom (df).
- 4. Decision Based on t Value:
  - If |t count| > t table, then H0 is rejected. This means there is a significant difference between the pretest and posttest.
  - If |t count| ≤ t table, then H0 is accepted. This means there is no significant difference between the pretest and posttest.
- 5. Significance Value (p-value):
  - If the p-value  $\leq \alpha$  (0.05), then H0 is rejected, indicating that the results are statistically significant.
  - If the p-value  $\geq \alpha$  (0.05), then H0 is accepted, indicating that the results are not statistically significant.



# RESULTS AND DISCUSSION

Based on the results of data analysis using SPSS, the following is a detailed explanation of the results of this research.

Table 1. Case Processing Summary

				0	-		
Case Processing Summary							_
	Case	es					_
	Vali	d	Mis	sing	Tota	al	
	N	Percent	N	Percent	N	Percent	
PRE	9	100.0%	0	0.0%	9	100.0%	
POST	9	100.0%	0	0.0%	9	100.0%	

The total number of data used in the analysis was 9. All data were valid and there were no missing data.

Table 2. Descriptives

Descripti	ves			
			Statistics	Std. Error
PRE	Mean		108.78	2,650
	95% Confidence Interval for Mean	Lower Bound	102.67	
		Upper Bound	114.89	
	5% Trimmed Mean		108.64	
	Median		108.00	
	Variance		63,194	
	Std. Deviation		7,949	
	Minimum		100	
	Maximum		120	
	Range		20	
	Interquartile Range		16	
	Skewness		,255	,717
	Kurtosis		-1,869	1,400
POST	Mean		174.56	10,320
	95% Confidence Interval for Mean	Lower Bound	150.76	
		Upper Bound	198.35	
	5% Trimmed Mean		176.34	
	Median		178.00	
	Variance		958,528	
	Std. Deviation		30,960	
	Minimum		105	
	Maximum		212	
	Range		107	
	Interquartile Range		35	
	Skewness		-1,398	,717
	Kurtosis		3,039	1,400

This research shows that reminiscence therapy is effective in increasing the happiness of the elderly at the Adinda Mulia Bahagia Foundation Nursing Home, Central Cikarang. The happiness score before therapy



(PRE) showed an average of 108.78 with a median value of 108.00. The distribution of happiness scores before therapy was slightly skewed to the right with a skewness of 0.255 and was flatter than the normal distribution with a kurtosis of -1.869. The variation in happiness scores before therapy was relatively low with a variance of 63,194 and a standard deviation of 7,949, with a value range between 100 and 120.

After being given reminiscence therapy (POST), the average happiness score for the elderly increased significantly to 174.56 with a median value of 178.00. The distribution of happiness scores after therapy became skewed to the left with a skewness of -1.398 and was sharper than the normal distribution with a kurtosis of 3.039. The variation in happiness scores after therapy increased significantly with a variance of 958,528 and a standard deviation of 30,960, indicating greater differences between individual happiness scores. The range of happiness scores after therapy was also wider, ranging from 105 to 212.

Overall, the results of this study show that reminiscence therapy can significantly increase the happiness of the elderly. Although there was an increase in variation in happiness scores among older adults, this suggests that each individual responds to therapy in different ways. These results support the alternative hypothesis (Ha) that reminiscence therapy is effective in increasing the happiness of elderly people in nursing homes.

Table 3. Tests of Normality

Tests of Normality											
	Kolmogor	ov-Smirnov	a	Shapiro-W	Shapiro-Wilk						
	Statistics	df	Sig.	Statistics	df	Sig.					
PRE	,211	9	,200*	,882	9	,164					
POS T	,231	9	,180	,882	9	,165					

<sup>\*.</sup> This is a lower bound of the true significance.

The results of the normality test using the Kolmogorov-Smirnov and Shapiro-Wilk methods show that the significance value for these two methods is greater than 0.05 for both PRE and POST data. In the Kolmogorov-Smirnov test, the statistical value for PRE data is 0.211 and for POST data is 0.231. In the Shapiro-Wilk test, the statistical values for PRE and POST data are both 0.882.

A significance value greater than 0.05 indicates that there is no reason to reject the null hypothesis, which means that the PRE and POST data are normally distributed. Thus, it can be concluded that the pre-test and post-test results follow a normal distribution, allowing the use of further parametric statistical tests for data analysis. This result is important because the validity of many parametric statistical tests, such as the T test, relies on the assumption that the data are normally distributed.

Table 4. Paired Samples T-Test

Paired Samples Statistics									
		Mean	N	Std. Deviation	Std. Error Mean				
Pair 1	PRE	108.78	9	7,949	2,650				
	POST	174.56	9	30,960	10,320				

This output shows the descriptive statistical summary results of the two samples or pre-test and post-test

Paired Samples Correlations
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a. Lilliefors Significance Correction



			N	Correlation	Sig.
Pair 1	PRE POST	&	9	108	,782

The second part of this output is the result of the correlation or relationship between the two data, namely pre-test and post-test. It is known from the data above that the significance value is 0.782. This value is greater than 0.05 as the basis for decision making in the correlation test. Because the significance value is greater than 0.05, there is no relationship between the pre-test and post-test.

# Paired Samples Test

		Mean	Std. Deviation	Std. Error Mean	95% Confidence Differe Lower		t	df	Sig. (2-tailed)
Dated	DDF DOOT	05.770	22.700	40.000	00.000	40.570	0.040	0	2000
Pair 1	PRE - POST	-65.778	32.786	10.929	-90.980	-40.576	-6.019	8	.000

It is known that the sig (2-tailed) value is 0.000, <0.05 because our data is smaller than 0.05 and according to the provisions of the T-test, we can conclude that there is a real difference between the level of happiness of the elderly before the test and after given reminiscence therapy. So it can be concluded that reminiscence therapy is effective in increasing happiness in the elderly. From the correlation data above, the significance value is 0.782. So this value is 0.782 > 0.05 because this value is greater than 0.05 as is the basis for decision making in the correlation test, if the significance value is greater than 0.05 then there is no relationship between the pre-test and post-test. So it can be concluded that reminiscence therapy is effective in increasing the happiness of the elderly in the Adinda Mulia Bahagia Foundation nursing home, Central Cikarang but there is no correlation between the pre-test and post-test.

#### CONCLUSION

Based on the results of the T-Test, the Ha hypothesis that is accepted (sig < 0.05) is 0.000. This shows that there is a significant change in the pre-test and post-test results after being given treatment. Although the correlation between the results before and after treatment was weak, the changes observed were sufficient to conclude that there was a real effect of treatment. Theoretically, these results indicate that the treatment provided has the ability to produce significant changes in the observed variables. However, weak correlations suggest that these changes are not consistent across subjects or samples tested. This could indicate that other factors may influence the results, or that response to treatment varies between individuals.

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