

# ROLE OF MUSEUMS IN PROMOTING HEALTH AND WELL-BEING OF SENIORS AND DEMENTIA PATIENTS: REMINISCENCE SESSIONS

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## **Abstract**

Museums worldwide are increasingly announcing themselves as potential partners in promoting public health and well-being. Responding to the population ageing and its consequences, seniors, including persons diagnosed with dementia, become active target audiences in museums. Reminiscence sessions are one of the most frequently used approaches in museums working with seniors and dementia patients in promoting their health and well-being. Considering the subject's topicality, the article investigates tendencies and main challenges in implementing reminiscence sessions in museum environments. The author analyses previous researches, case studies, and public programs of museums and concludes that museums, with their specific resources, suitable environments, and wide geographical spread, have an underestimated potential to become essential institutions providing reminiscence sessions. Therefore, museums should strengthen cross-sectoral cooperation networks with the health and social care sectors and implement measurable reminiscence activities for further research. In such a manner, it would promote awareness among policymakers and broader society concerning museums as credible partners for enhancing health and well-being for seniors and patients with dementia.

**Keywords:** *Museum, Well-being, Seniors, Dementia.*

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## Introduction

United Nations research shows that people over 65 are the fastest-growing age group in the world [United Nations 2017]. Population ageing will soon become one of the most serious challenges in the European Union. Although life expectancy is increasing, it is concluded that healthy life expectancy and the age at which individuals are free from any form of disability have not increased [Hamblin and Harper 2016]. Aggravations of chronic or cardiovascular diseases and mental illnesses such as dementia and Alzheimer's disease are becoming severe challenges for seniors, their relatives, and health and social care providers. The necessity for seniors' long-term care increases the burden of national health and social services and related expenditure [Paskaleva and Tufkova 2017]. In order to promote integrated health and social care system, cross-sectoral solutions are being identified, assessing the potential of the cultural sector, including museum institutions. Considering the subject's topicality, the aim of this article is to investigate tendencies and main challenges in implementing one of the most frequently used activities for senior audiences – reminiscence sessions in museum environments. Theoretical and literature review has been developed analysing previous researches, guidelines, public programs of museums. The selected case studies reflect the diverse possibilities of reminiscence activities. The research questions addressed in this paper is as follows: What are the different forms and key prerequisites for ensuring successful reminiscence activities within museums in museum practice for senior audiences and people with dementia in promoting their well-being?

Tendencies reveal that in preventing health problems and promoting well-being, state-managed health, and social care will be directed to greater community involvement [Todd and Camic 2017]. Meanwhile, research reveals that cultural activities delay the deterioration of cognitive functions and reduce chronic pain, dementia, depression-related symptoms, and risks of violence [Bernardo and Reinoso 2020]. Despite the diversity of cultural institutions, museums are most often indicated as senior-friendly places to promote health and well-being [Bernardo and Reinoso 2020]. Pier Sacco highlights the valuable benefits of increasing cultural participation for senior audiences, as it significantly affects life expectancy and psychological well-being [Nicholls et al. 2013]. The innovative non-medical approach, social prescribing, including the subsection – museums on prescription, which has experienced pilot projects in Canada, Belgium, and Great Britain, reveals the development of interdisciplinary cooperation in promoting public health and well-being. Hamish Robertson emphasizes that museum specialists must develop more knowledge about senior audiences and related challenges. Already, museums in many parts of the world have established successful collaborations with nursing homes, hospitals, medical schools, and research institutes to improve their

knowledge. Thus, museums as institutions will be irreversibly involved in a broader political context related to aging processes in society [Robertson 2015].

### **Museums as health and well-being promoters of seniors and dementia patients**

One of the most significant challenges in the senior audience is dementia. Dementia is a general term for a neurodegenerative disorder of brain function characterized by the progressive and continuous loss of cognitive function, impaired short-term memory, and language abilities. As the disease progresses, the patient may become unable to perform daily activities, becoming dependent on caregivers. Alzheimer's disease is the most common cause of dementia [Bansal and Parle 2014]. Compared to 2005, researchers predict that by 2040 the prevalence of dementia in the world context will have tripled [Silverman 2009]. Responding to the forecast, in 2012, British Prime Minister David Cameron launched the *Challenge on Dementia* initiative, which included promoting dementia-friendly societies and environments. It provided independent living opportunities for people with dementia, including access to museums.

Research has shown that visiting museums improve dementia patients' well-being, mood, self-awareness, and cognitive abilities [Hamblin and Harper 2016]. At the same time, in more than half of the United Kingdom museums that offered health and well-being programs, people with dementia were the second largest target audience [The Heritage Alliance 2020]. The well-being factor has been present in museums before. It became particularly relevant at the beginning of the 21<sup>st</sup> century when the Metropolitan Museum of Art and the Ateneum Art Museum in Helsinki already offered independent programs for seniors to increase positive emotions, well-being, and mutual communication between people with specific diagnoses, for example, Alzheimer's disease and their caregivers [Silverman 2009]. A notable contribution to the museum field in working with seniors and dementia patients made the Museum of Modern Art (New York). In 2007 it developed a program for people with mild or moderate dementia. The program, with art-viewing and discussion activities in the presence of a museum educator, served as an example of good practice for many museums worldwide to develop further inventions. Helen Chatterjee and Guy Noble have devoted considerable attention to research on the topic, analysing the impact of museum-initiated practices on various audiences, including seniors, and people with dementia, showing positive results, reduced depression, blood pressure, as well as stress and anxiety reduction [Thomson and Chatterjee 2016]. Currently, there is a growing number of art-for-dementia programs within museum settings [Tan 2018]. Opportunities for the participation of seniors and dementia patients are diverse. Visiting museums is only one of the dimensions

that museums can offer, opening up opportunities for volunteer work, community projects, creative workshops, and other activities, ensuring seniors' communication, social inclusion, and the opportunity to share knowledge.

Further, the author will analyse one of the museums' most frequently used activities for senior audiences and patients with dementia to improve their health and well-being: reminiscence sessions. At the same time, the author does not reject other approaches, which are determined by the specificity of the museum and available resources. It should be considered that senior audiences and, in the case of dementia patients, the stage of the disease has diverse nature. Various socio-economic factors exist between countries and regions, so it is necessary to adapt every form of activity by analysing the specificity of geographical location [Jamtli 2017].

### **Reminiscence activities in a museum environment**

Reminiscence therapy was formed in the 1960s related to Robert Butler's theory regarding the importance of reviewing life in strengthening an individual's memories and cognitive abilities, which is particularly important for people diagnosed with dementia. A personal-centred approach determines the importance of a person's perception of the past. Reminiscence therapy is a general term for several related but different therapeutic approaches to promote seniors' well-being, communication ability, and intellectual functionality in some cases [Macleod et al. 2021]. Since the mid-1970s in Europe and North America, reminiscence sessions have been one of the most widely used activities for seniors and people with different stages of dementia.

In various derivations, cultural heritage institutions use this approach for senior audiences [Morse and Chatterjee 2017]. Considering historical knowledge, the availability of resources, and the appropriate environment, museums as memory institutions can increasingly become widely used organizations providing reminiscence sessions in the future. Reminiscence sessions in museums are organized in various forms, allowing a wide range of museums to be involved. Amanda Burke and research colleagues point out that museum-led reminiscences are valuable in a broader perspective – for museum institutions, senior audiences, and their caregiving institutions. At the same time, museums must critically evaluate the possibilities of providing such activities in high quality, being aware of priorities and available resources, choosing the most appropriate model [Burke et al. 2012].

During reminiscence sessions in museums, participants encounter their past experiences, and the individual's perception of history and memories is recognized and evaluated. Stimulated memories allow the individual to perceive better and adequately assess current situations. All human senses are often activated during the session – touch, sight, smell, taste, and hearing. Most often, reminiscence sessions in museums offer the environment of a particular historical period with audio and

visual stimuli. It promotes self-awareness, improved mood, and overall quality of life [Jamtli 2017]. This form is often used at open-air museums. They have the necessary resources to work multisensory with the museum environment, acting on the senses that can promote connection, for example, with the participant's childhood or middle age periods. Art museums use related themes from art history to serve as a stimulus for memory. Customized tours, selected artwork viewing, hands-on and creative activities are used under the guidance of museum staff. Considerable in-depth research in the context of reminiscence programs in museums was developed from 2014 to 2017. The project incorporated museums from Sweden, Norway, Denmark, Hungary, and Great Britain, as well as higher education institutions, to improve informal educational opportunities for seniors with declining health, and physical abilities as well as to develop reminiscence opportunities in museums for people with dementia. A multisensory environment was created in the museums, presenting the historical period of the 1940s to 1970s and offering appropriate artistic activities. The sessions included an introduction, a tour of the exposition, a coffee break, discussions about a specified period of history, and tactile engagement. After the session, the participant had the opportunity to take an object from the venue with them, such as a postcard, which provided further memory stimulation. However, the research did not measure the long-term effect of the reminiscence sessions; meanwhile, elements of well-being such as a positive mood, interest, and attention were significantly increased. The participants' memory impulses were raised as soon as they entered the venue. The study revealed differences in the intensity of memories between genders. For women, memories were promoted more intensively, which is related to the use of the household environment. The research authors emphasize that reminiscence sessions in museums have a sufficient impact on the well-being of seniors with dementia to position themselves as valuable cooperation partners for caregiving organizations. The positive result of the holistic approach, combining objects, environment, managers, and social and sensory experience, is emphasized [Jamtli 2017].

In addition, the National Wool Museum in Australia has significantly contributed to the development of reminiscence sessions in the museums by creating a specialized environment – a *Reminiscence Cottage* for people with dementia and their caregivers. It was created to improve the quality of life and positive emotions of people with dementia and to promote the interaction of people with dementia in public spaces [Pearce 2016]. The cottage is designed like the 1930–1950 typical household. In an accessible multisensory environment, visitors have the opportunity to interact meaningfully. Caregivers or relatives of dementia patients were provided with information and guidance on how to use the cottage, while specific programs were developed for the groups of caregiving institutions. Representatives of the

institution Alzheimer's Australia trained museum staff and volunteers to work with patients who have Alzheimer's disease or other forms of dementia. The project's authors emphasize the importance of interdisciplinary partner organizations and the expert group's participation in the project's implementation, allowing to comprehend the specifics of the target group and the project's relevance to it [Pearce 2016]. Following a similar principle, a *House of Memories* was created for the needs of dementia patients in The Old Town Museum in Aarhus, Denmark. It is not open to the public but is meant for Alzheimer's patients [Heersmink 2017]. Experimental approaches are also implemented elsewhere in Europe, for example, in Swedish and Norwegian museums [Cutler 2019].

### **Diverse forms of reminiscence activities**

Reminiscence sessions in museums are organized in various forms. Experimental sessions enable museums to find the most appropriate solution. It is worth developing a broad program that shifts the focus from passive nostalgic participation to active learning of participants. For example, the Peranakan Museum's in Singapore created a program for clients of the Alzheimer's Association Day Center, *Let's Have Tea at the Museum*, which combines reminiscence sessions with the use of collection items and creative activities. In the program *Memory Lane* at the Museum of Oxford, the reminiscence sessions took place in different venues, such as the Oxford Church, creating collaborations with partner organizations [Hamblin and Harper 2016].

Reminiscence sessions in museums can also be provided with separate elements: *object-handling* activity and *Loan boxes* (other sources *Memory boxes*). If the museum cooperates with partner organizations, these approaches allow reaching a broader audience in hospitals and care facilities for seniors and dementia patients with limited physical mobility. *Object-handling* is a widespread reminiscence activity, allowing participants to get to know museum objects tactilely (3D replicas are also used). Activity promotes discussion, develops sensory perception, evokes memories, and stimulates individual interpretation of the subject. Especially for seniors, it can strengthen social interaction, reduce anxiety, divert attention from the medical environment, and improve physical and mental stimulation [Eveland 2020]. One direction of use involves acquiring and analysing new information, assuming equality of knowledge if the chosen object is previously unknown to all. The other direction involves using objects to stimulate memories [Gough 2016]. Discussion is particularly important for dementia patients, who often lose confidence in their knowledge [Turk et al. 2020]. Canterbury Christ Church University study involved 300 hospital patients and care clients in object-handling sessions. Quantitative measures showed significant increases in participants' well-being and happiness. Qualitative analysis revealed that patients who participated in activities increased social interactions and

sensory stimuli and improved emotional, energy, and motivational levels [Thomson et al. 2017].

*Loan boxes* or *Memory boxes* can be used to provide reminiscence sessions inside and outside the museum, making it more appropriate for the cooperation organization to include the activity in the daily routine [Jamtli 2017]. The box contains a set of museum objects or their replicas (objects, photographs, and documents) and recommendations. They can be designed for use with or without the presence of a museum specialist. Usually, subjects are assembled in themes (childhood games, sports, transport, etc.) or for a certain period of history. *Loan boxes* or *Memory boxes* are used for different audiences, for example, educational institutions, but additional in work with seniors and people with different stages of dementia. The activity provides an opportunity for discussion in a group with caregivers or relatives to stimulate memories and promote the overall mental state.

In 2009, National Museum Liverpool collaborated with Liverpool Primary Care Trust, and the mental health center Mary Seacole House created *Memory box* to make culture more accessible to seniors. Following the positive experience, the *Houses of Memories* initiative was developed to promote the contribution of art and museums to public mental health and well-being. The museum created a training program for health and social care professionals and developed guidelines for *Memory box* implementation in different museums. As a result, the connection between dementia patients and the museum's potential to promote well-being was strengthened [Hamblin and Harper 2016].

Meanwhile, museums are implementing approaches to be used above museums. For example, Museums Victoria offers a traveling museum in a minibus, similar to National Museums Liverpool provides *House of Memories on the Road*. This mobile museum focuses on people with dementia. The minibus, equipped with 3D cinema and other sensory stimuli, visits local communities, care facilities, and interactively engages seniors.

### **Prerequisites for ensuring successful reminiscence activities in museums**

Before planning reminiscence sessions for seniors and patients with dementia, the general accessibility of the museum should be considered. Different barriers can prevent visiting a museum – physical, cultural, social, intellectual, psychological, emotional, etc. When planning activities, the venue, accessibility for persons with limited mobility, room lighting, air temperature, proximity to facilities, etc., must be evaluated. Nina Silverstein points out the importance of an advisory group representing the interests and needs of seniors in museums [Silverstein et al. 2001]. It is essential to find an appropriate partner organization that can fully inform about the specifics of the audience. Providing reminiscence sessions requires intense

preparation and education for museum employees. With partner organizations, it is recommended to provide training sessions for museum staff. Reminiscence specialist Helen Fountain (Museum of Oxford) has put forward principles for the development of successful reminiscence programs:

- Use spaces that are not accessible to other museum visitors;
- Organize group sessions, ensuring eye contact with participants;
- Involve caregiving staff from the participant organization;
- Ensure that the items used are suitable for the audience of seniors (heaviness, fragility, etc.);
- Make sure that participation is voluntary and participants are aware of the subject and objectives;
- Organize sessions for up to 15 participants;
- Create a session plan with the flexibility to focus on issues that appeal to participants;
- Use a variety of resources to stimulate memories, such as photographs, audio recordings, and scents;
- Listen and show interest in what the participants say, evaluate achievements;
- Encourage the caregiving staff for further actions after the etc. [Fountain 2015].

In mentioned activities, providing enough time for communication and discussion is essential. It can become the most valuable part of the session for seniors and patients with dementia. Communication skills can be crucial when working with seniors, especially dementia patients as cognitive decline is often associated with adverse changes in communication skills. Reminiscence sessions can also stimulate negative feelings and memories.

Among researchers, there is no consensus regarding the possibilities of assessing the impact of artistic and cultural activities in the context of health and wellness [Hamblin 2016]. However, separate tools have been implemented that allow measuring such activities, for example, UCL Museum Wellbeing Measures Toolkit, Museum Engagement Observation Tool, etc. Measuring the impact of activities is essential for promoting program quality and cross-sectoral cooperation, as well as acquiring funding and strengthening support from policymakers.

## **Conclusion**

Meanwhile, the author emphasizes that it is vital to be aware of the limits that can be achieved with the involvement of museums and other heritage organizations

activities in promoting the health and well-being of seniors and dementia patients. It is essential to separate creative and cultural activities that can be useful in achieving therapeutic goals from the therapy of a psychological nature. Anna Hansen indicates that it is necessary to define that museums cannot cure, for example, people with dementia through activities. Museum cannot diagnose health problems, and used activities cannot improve health and well-being to the extent of reducing an individual's caregiving needs. However, museums can provide individuals with meaningful activities that promote health and well-being and work preventively [Jamtli 2017]. On the one hand, the role of museums is not to replace health and social care services, but on the other hand, museum activities include long-term cooperation with local health and social organizations.

A cross-sectoral collaboration with the health and caregiving sectors is an essential factor in developing and providing successful reminiscence sessions in a museum environment. Although the benefits of the mutual partnership are significant for all parties, challenge of the collaboration between the cultural heritage sector and the public health and care sectors and its planning is highlighted [Camic and Chatterjee 2013]. Therefore, further research is needed to develop more integrated potential mechanisms between those sectors to form partnerships for public health and well-being.

The role of organizations and educational institutions representing the international and local museum sector is essential for promoting the health and well-being of seniors and dementia patients in the museum environment. This applies to museum specialists' education and strengthening cross-sectoral cooperation networks while recording good practice examples for further research. National and municipal policy planning and management institutions should develop a direction of action in integrating the cultural sector, including museum institutions, in promoting public health and well-being. Thus, individual museum initiatives today could serve as examples of good practices for sustainable solutions for the common good of society in the future.

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