

# Dementia Gateway: Keeping active and occupied

This summary highlights key messages from the research on activities for people with dementia.

## Key messages

- There are promising results from some studies that have looked at the activities that people with dementia take part in. But in general, the research on activities is sparse, and often inconclusive and contradictory.
- When care staff want to look at the kinds of activities that a person with dementia may enjoy, they should consider the person's abilities, skills, interests and motivation.<sup>2,3</sup>
- If a person with dementia takes part in physical activity, this can help to reduce behaviours such as agitation, and it can also improve their ability to manage normal daily activities.<sup>5</sup>
- Arts approaches (such as dance, music and visual art) can improve wellbeing and quality of life. Art therapists are using these creative arts with people with dementia more and more.<sup>6</sup>
- Reminiscence therapy can enhance psychological wellbeing in people with dementia and improve their relationships with their carers. And it can help care staff to provide care that is 'person-centred', that is, care that takes into account the person's wishes, interests, beliefs, religion and so on.<sup>9</sup>

## Introduction

This summary highlights key messages from the research on activities for people with dementia. It is not intended to be a comprehensive review of the literature on this topic. The material on which this summary is based was identified through focused searching of the literature published from 2008 to 2012. Some material pre-dating 2008 is also referred to where relevant.

## What is the issue?

Activities do not need to be formal and highly organised.<sup>1</sup> According to the Personal Social Services Research Unit (PSSRU)<sup>3</sup> and dementia expert, Teepa Snow,<sup>4</sup> activities can be divided broadly into work, leisure, self-care and rest and people can do them on their own, with another person or in groups. Keeping people with dementia active and stimulated can help them, their family carers and staff. For example, in care homes, activity can reduce depression, falls, behaviour that other people find difficult as well as dependency in residents.<sup>1</sup>

When care staff want to look at the kinds of activities that a person with dementia may enjoy, they should take account of things like the person's background, such as the jobs they have had, personal care routines, abilities, skills, interests and motivation.<sup>3,4,6</sup> Activities should be engaging and pitched at the right level, and adjusted to cater for people with advancing dementia.<sup>2,3,4</sup>

## The status of research

There are promising results from some studies that have looked at the activities that people with dementia take part in. But in general, the research on activities is inadequate, with contradictory findings. This is not surprising, for various reasons. First, older people come from all walks of life. Second, care staff vary in terms of the level of skills they have. Third, activities take place in an enormous variety of settings. Fourth, there can be problems in finding the best way of measuring how effective activities are.<sup>1</sup> Another issue is that communication with people with dementia can be difficult especially those in the later stages of dementia and so it may be difficult to know whether or not an activity is helping them.<sup>9</sup>

Often studies are not designed well and they have only a relatively small number of people with dementia taking part in them. Also, not enough information about the people taking part is given,<sup>5,10</sup> such as what their exact diagnosis is and what stage of dementia they are at.

There is not much research on specific issues or certain groups of people with dementia, for example: activities for younger people with dementia and their families; activities for people with dementia and learning disabilities; activities in people's own homes; and the views of people with dementia and their carers. Studies mainly look at residential settings such as care homes.<sup>5</sup> There is not much sound evidence yet of what works for whom, when and in what setting.

## An overview of some activities

The activities described below have been grouped under one of five different themes but an activity can fall under more than one theme. The themes are:

- meaningful occupation
- physical activity
- creative arts
- therapeutic interventions such as life story work
- the natural environment.

### Meaningful occupation

Meaningful occupation is related to a person's normal activities, which includes doing things like housework and office work, and relates to a unique need to feel involved and busy. There is no specific research on helping people to continue with household and work-related tasks. This may be because these activities are less likely to happen in care homes (than in people's own homes), and this is where most research is done.

People with dementia want to enjoy activities that they feel are meaningful to them.<sup>1</sup> But there is not much agreement between people with dementia and their staff and family carers about what meaningful activity is.<sup>2</sup> Care home residents may think that meaningful activities are those that tie in with roles, pursuits and routines that they have had in the past.<sup>2</sup> For example, for residents who have grown up in a generation without leisure opportunities, 'working' leisure activities such as cleaning up after events

may be more meaningful than those normally associated with leisure.<sup>4</sup> Staff and family carers, on the other hand, may think that activities that keep people physically fit are meaningful and valuable.<sup>2</sup>

### Physical activity

Physical activity can reduce behavioural signs of distress, such as agitation. It can also improve a person's ability to take part in normal daily activities.<sup>5</sup> Some evidence indicates that physical activity among people with dementia with cognitive impairment (thinking, knowing and reasoning) reduces aggression.<sup>16</sup> Exercise has been found to reduce depression in nursing home residents with severe Alzheimer's disease.<sup>17</sup> And walking, other forms of exercise and structured daily routines make people less likely to wander and less agitated.<sup>13</sup>

Sometimes the literature on the impact that physical activity has on people with dementia seems to be contradictory and unclear.<sup>15,16</sup> Another drawback is that research does not describe the people who took part in studies in specific detail.<sup>10</sup> But generally, the evidence shows that there are positive results for people with dementia who take part in physical activity.

### Creative arts

The 'creative arts' embrace all art forms, including visual arts, poetry, music, dance and drama. When used as a form of therapy, the focus is on involving people with dementia and helping them to express themselves in different ways, rather than looking for a specific result from the therapy.

### *Arts programmes*

It is recognised that arts approaches can improve people with dementia's wellbeing and quality of life and so art therapists are increasingly using the creative arts with individuals.<sup>6</sup> For people with dementia, art helps them to have connections with their family, friends and neighbourhood. It also helps them to give meaning to their experiences, feelings and what they see around them.<sup>18</sup> Knowing that there is no right or wrong way to look at or to create art helps to boost their confidence and also helps them to communicate and express themselves.<sup>19</sup>

### *Art therapy*

Art therapy is a form of therapy where art is used as the main way of communicating and has promising outcomes. For example, in one study which compared art therapy sessions (with 45 people with dementia in a care home) with normal activities, it was found that those who attended the art therapy sessions did much better on tests of mental activity, physical activity and calmness when compared with those who just took part in normal activities.<sup>21</sup>

### *Poetry*

Poetry can be an effective way of connecting with people with dementia, regardless of which stage of dementia they are at.<sup>22</sup> Like music, poetry seems to be kept in a person's long-term memory and so they can remember it. For people in the early stages of Alzheimer's disease, when communication through the use of speech is generally less of a problem, a poem's emotional impact can help them to talk more, express their own feelings and rekindle memories.

Poems are also helpful to people who are in later stages of the illness by reaching into their life history and prompting reminiscence. Sharing poetry in a group helps people in the group to communicate and also makes them feel less agitated.<sup>23</sup>

### *Storytelling*

Storytelling is an important way of communicating and provides topics of conversation and a way of connecting with others. But the literature on storytelling with people with dementia is limited.<sup>24</sup>

For storytelling to be successful, the person who is telling their story should not be stopped or discouraged from continuing, as sharing their story is an important part of building relationships and making connections with other people. It is also important that people who are listening to the story are attentive and that they know that they have an important part to play in the process. No research was found on the value of reading aloud to people with dementia, although Pictures to Share ([www.picturestoshare.co.uk/](http://www.picturestoshare.co.uk/)) provides books specifically tailored for this activity.

### *Music therapy*

Music therapy is 'an established discipline, which is widely used to help people whose lives have been affected by injury, illness or disability'<sup>25</sup> and aims to pinpoint people's long-term goals.<sup>26</sup>

There are benefits from music therapy, usually when it involves listening, and in some cases performance, by people with dementia.<sup>27</sup>

### *Music activities*

Music activities have wider aims than music therapy, including a short-term improvement in people's well-being, better mood and more social interaction.<sup>28</sup>

In one study, residents with varying degrees of dementia living in a care home chose CDs that were played while care staff were giving them personal care. It was found that benefits included more interaction and communication and an increased sense of contentment for both residents and care staff.<sup>29</sup>

Opinion is divided about the benefits of music therapy and music activities and the evidence is sometimes unclear and inconclusive.<sup>8</sup> But many studies promote the use of these approaches in dementia care. There is a need for more rigorous and sophisticated research methods to address the gaps in knowledge in this area.<sup>28</sup>

### *Dance*

Communication without the use of speech is important as people move into the later stages of dementia.<sup>35</sup> Dance is one way of communicating in this way. Dance therapy helps people connect with their 'self' and memory; it helps them to connect with other people; and it helps them to achieve a feeling of personal control and meaningful experience.<sup>30</sup> But there is not much evidence on how effective dancing in care homes is, partly because of the challenges involved in carrying out such research.<sup>31</sup>

## **Therapeutic interventions**

### *Reminiscence therapy*

Reminiscence therapy is one of the most preferred interventions for people with dementia and can help to address psychological and social need.<sup>32,33</sup> It involves the person with dementia discussing past activities, events and experiences with another person or within a group setting, often with the use of prompts such as music or pictures.<sup>9,22,33,34</sup> Its purpose is for the person to remember and reflect on important events during the course of their lifetime that they are able to share and preserve. As well as interest and enjoyment, the stories shared can improve how people feel about themselves and their sense of identity.<sup>9</sup>

Reminiscence therapy can: improve relationships between people with dementia and their carers; and it can promote 'person-centred' care, that is, care that takes into account the person's wishes, interests, beliefs, religion and so on.<sup>9</sup> But limitations in the design and quality of research and the variability of reminiscence work reported suggests that evidence in support of this activity is weak.<sup>5</sup>

### *Life story work*

Life story work can help people with dementia to keep a sense of who they are by focusing on what they used to do, what they were good at and what they liked.<sup>35</sup> Family and friends have an important part to play in remembering events, experiences and so on from the past and getting anecdotes, photos and possessions together that can be organised into

a life story book about their loved one.<sup>2,3,32</sup> Life story work can help care staff to get to know the person behind the dementia and make it possible for people with dementia to be involved in this process.<sup>36</sup>

### *Doll therapy*

Doll therapy has generated a lot of controversy in the past and there are still people now who are against it, including family members who feel that it is 'infantilising' by treating relatives as if they were children.<sup>40</sup>

Although not all people with dementia will respond to a doll in a positive way, there is some evidence that the benefits of doll therapy for some people are increasing. These benefits include comfort and companionship for some residents with advanced dementia in care homes;<sup>37</sup> a reduction in behaviour that other people may find challenging, and in agitation;<sup>38,39</sup> increased communication between staff and residents where the doll is the focus of communication;<sup>40</sup> and purposeful activity where attention is concentrated on caring for and tending the doll.<sup>41</sup> In one study, care home staff saw that for residents who used dolls their feelings of wellbeing increased and almost all of the key workers believed that communication with residents was improved as a result of the intervention.<sup>42</sup>

To be successful, the use of dolls needs to be made a part of the person's everyday activities and not a replacement for them.<sup>40</sup> It also needs to be made a part of their care plan.<sup>40</sup>

### *Animal assisted therapy (AAT)*

Animal assisted therapy (AAT), where a dog or a cat is introduced to the person with dementia, appears to be a successful option for issues such as anxiety, depression and agitation.<sup>27</sup> Some reviews have reported that it might also help to manage aggression and help people to socialise more, but more research is needed to support these conclusions.<sup>4</sup>

### *Aromatherapy*

Some evidence suggests that aromatherapy is beneficial for people with dementia, for example in terms of reducing some of the behavioural and psychological problems that people with dementia may have.<sup>4</sup> It also reduces 'withdrawn social behaviour' and increases the time that residents spend involved in constructive activities.<sup>16</sup> But more evidence is needed to support the use of aromatherapy, evidence that is taken from research where larger numbers of people take part and from studies that use the same methods so that firm conclusions can be drawn from the results.<sup>4,16</sup>

### **The outdoor environment**

Some evidence suggests that open spaces and taking part in outdoor exercise in green spaces have positive effects on people with dementia, such as increased verbal fluency.<sup>43</sup>

People with young onset dementia say they that they appreciate the outdoor environment because of the opportunities for exercise, fresh air, and casual meetings with neighbours and friends and a sense of improved emotional well-being.<sup>8</sup> It is suggested that

taking part in outdoor activity over a period of time is likely to mean that people with dementia have a good quality of life for longer than they would do otherwise and also that the period when intensive services are needed may be reduced..<sup>8</sup>

## Implications from the research

Service providers and commissioners should look at how more structured group activities for people with dementia can be provided. Most of the interventions described in the literature seem to take place in small groups, which may make them both cheaper to run and give a social side to them.

Future studies need to address the challenges involved in collecting information; the weaknesses of methods used; and topics where research has not yet been done. There is a need to explore the results and benefits of interventions in a range of places where activities are being carried out as most of the research that is being done takes place in institutional settings such as care homes. Future research should include people living at home as growing numbers of people with dementia stay at home.<sup>4</sup>

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