

Dementia & Spirituality

Resources and Reference Articles

- Practical Implications of Procedural and Emotional Religious Activity Therapy for Nursing J Gerontol Nurs. 2010 Aug; 36(8): 22–3
- Neuropsychological Correlates of Behavioral Symptoms in Alzheimer's Disease, Frontal Variant of Frontotemporal, Subcortical Vascular, and Lewy Body Dementias: A Comparative Study Journal of Alzheimer's disease: JAD 39(3), November 2013
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- A Spirituality of Aging in Religious Congregations: Sister Janet Malone, CND, EdD., Ph.D. Human Development Volume 34 Number Two Summer 2013
- Areum Han, PhD, Jeff Radel, PhD, Joan M. McDowd, PhD, Dory Sabata; Perspectives of People with Dementia About Meaningful Activities, A Synthesis; AM J ALZHEIMERS DIS OTHER DEMEN March 2016 vol. 31 no. 2 115-123
- Tami Borneman, RN, MSN, CNS, FPCN, Betty Ferrell, RN, PhD, MA, FAAN, FPCN, and Christina M. Puchalski, MD, MS, FACP; Evaluation of the FICA Tool for Spiritual Assessment; Journal of Pain and Symptom Management 163Vol. 40 No. 2 August 2010
- Astrid Norberg, Berit Lundman; Yngve Gustafson, Catharina Norberg, Regina Santamäki Fischer, Hugo Lövhelm; Self-transcendence (ST) among very old people Its associations to social and medical factors and development over five years; Archives of Gerontology and geriatrics; September–October, 2015Volume 61, Issue 2, Pages 247–253

The aims of this study were to describe the associations between ST and psychological and physical wellbeing among oldest old people and to test the influence of negative life events on ST, and the predictive value of the self-transcendence scale (STS) for mortality.

ST was positively associated with psychological wellbeing, self-rated health, having someone to talk with and being able to go outdoors independently. Diagnoses of depression, dementia disease, and osteoporosis were associated with lower STS scores as were living in a residential care facility, and feeling lonely. There was a significant relationship between the index of negative life events and ST between baseline and follow-up. More negative life events were associated with a larger decline in STS scores over five years.

- Hanne Voldby Jensen, Karen P. Munk, and Svend Aage Madsen; Gendering late-life depression? The coping process in a group of elderly men; Nordic Psychology Vol. 62 , Iss. 2, 2010

The increase in suicide rates in older men poses a serious challenge in terms of better detection and diagnosis of depression, as the increase could suggest that there are a number of aging, depressive men who are not diagnosed and therefore remain untreated for their depression. This study is an interview study with 8 elderly men (between 66 and 85 years of age) diagnosed with depression in late-life. It examines how the men discuss, perceive and act in relation to stressful situations in late life, and how their perception may influence the coping process and the presentation of depressive symptoms. It was found that the men only used two types of coping strategies: Restoration strategies and Palliative strategies. The coping strategies used were mainly aimed at continuing life as it was before (or trying hard and working hard to maintain that illusion) and to avoid, divert or distract from the stress, but not to solve the underlying problems. The men did not use any active resignation strategies, which are strategies for normalizing the situation after a stressful situation, and bring in an acceptance of limitations or changes in life circumstances. The exclusive use of restorative and palliative strategies in the stressful situations leads to poorer psychological adjustment than when active resignation strategies are included in the repertoire. These findings suggest that focusing on the male coping process to stressful situations

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in late life may offer new perspectives with regard to early detection of depression and offer a new understanding of the complex symptoms representation and incongruent depressive behaviors in elderly males.

- Meaning in life and mastery mediate the relationship of negative reminiscence with psychological distress among older adults with mild to moderate depressive symptoms; *European Journal of Ageing*, December 2012, Volume 9, Issue 4, pp 343–351

Finding meaning in life is often cited as an important outcome of reminiscence, but this theoretical claim has not been empirically tested until now. A new intervention combining integrative reminiscence and elements of narrative therapy was developed and the effects on meaning in life were studied. A total of 106 older adults with depressive symptomatology participated in a quasi-experimental study with two parallel conditions: integrative reminiscence vs a waiting list control group. Measurements were taken before and after the intervention. Integrative reminiscence within a narrative therapeutic framework may be an effective intervention for enhancing meaning in life with depressed older adults. The intervention has to be developed further and should then be studied in a randomized controlled trial with a larger sample and with follow-up measurements.

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