	系統編號 RN9704-1302			
	• 計畫中文名稱	名稱 懷舊團體治療對老人憂鬱與神經認知功能之實證性研究		
• 計畫英文名稱 The Effects of Reminiscence Group Therapy on Older People's Depression and Neurocognitive FunctionAn Evidence-Based Stu			nitive FunctionAn Evidence-Based Study	
	• 主管機關	行政院國家科學委員會	• 計畫編號	NSC95-2314-B038-073
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	• 研究人員	周桂如; 陸汝斌 Chou, Kuei-Ru; Lu, Ru-Band 懷舊團體治療; 機構老人; 憂鬱; 孤寂感 Reminiscence group therapy; Institutionalized elder people; Depression; Loneliness		
	• 中文關鍵字			
	• 英文關鍵字			
	• 中文摘要	回顧過去之文獻,有些研究之樣本同質性不高、有些在實驗設計上有部分限制,如:無實驗組與對照組相互比較,或無訓練後之長期追蹤測量,因此研究者基於上述限制,期望本研究能探討機構老人懷舊治療團體之建立與成效,並針對此介入方案進行隨機分組(實驗組與比較組),並進行受試老人之憂鬱程度、神經認知功能、身心健康狀態與孤寂感之短期(三個月)之評值分析。本研究是探討懷舊治療介入前後,機構老人的憂鬱、身心健康及孤寂感的改變情形,採類實驗設計,將有意願參與研究的老人隨機分配至實驗組與對照組,以前、後測及追蹤測的方式來評估懷舊治療之影響效果,追蹤測量爲治療結束後的一個月及三個月。介入措施爲期八週,以每週一次的方式來進行懷舊治療。研究對象以台北地區某一家養護機構爲研究場所,合乎下列選樣條件: (1)意識清楚且能國、台語溝通者; (2)年齡爲六十五歲及以上; (3)自願參與者。使用下列測量工具來收集個案之成果評量指標及可能影響之干擾因素; (1)流行病學研究中心憂鬱量表; (2)身心健康量表; (3)UCLA 孤寂感修正量表; (4)個案基本資料表。正式研究收案時間從95年8月至96年7月,本研究收集資料方式爲一對一的訪談,首先將本研究的目的、懷舊治療進行的方式向個案詳加說明,將有意願參加治療者隨機分配至實驗組與對照組,於實驗組實施爲期八週的懷舊治療,主題依次爲:認識你我他、我的家人、話說童年時光、回想當年、快樂的記憶、我的家鄉、人生轉折、珍重再見。實施場所位於機構內的文康中心,每週一次,每次進行一至一個半小時的懷舊治療。實驗組在懷舊治療介入後,其憂鬱、身心健康及孤寂感之改變情形(憂鬱程度下降、身心健康提升、孤寂感減輕),達統計顯著意義(p<0.0001;		

• 英文摘要 Reminiscence group therapy received the attention in recent years in the non-pharmacological therapy for older people. Most of the outcome studies of the

p<0.0001;p=0.0007)。研究結果可知,透過懷舊治療,可增加成員社會化、成就感及改善憂鬱程度,建議在老人照護機構中,應多表達對老人的

關懷與體諒,善用對老人具有意義的物品或事件作爲啓發回憶的工具,以促進其心理健康,協助增加人際互動,完成老年期自我統整的任務。

reminiscence group therapy have been concerned with dementia patients. There were some limits in the design of past clinical studies. For example, there was no long-term follow-up measurement after training, and factors that can influence outcome indicators, such as gender, age, social and economic status, and mini-mental status were not controlled and modulated during statistically analyzed processes. In this study, these limits will be considered when designing reminiscence group therapy for older people. The aim of the study was to establish and evaluate the effect of the reminiscence group therapy on institutionazed older people and the results are compared between experimental and comparison groups. The study further explores the short-term and mid-term outcome of the reminiscence group therapy of older people's depression and loneliness. In the study, a longitudinal study with reminiscence group therapy was evaluated at three waves of data collection: before group after and 3-month follow-up. Permuted block randomization were used to assign subjects into a professionally lead reminiscence group or a comparison group. This same procedure was repeated five times of potential participants. Therefore, there are five groups in the support group condition, and each of these groups has 10-12 members. A total of 120 individuals were recruited for the study. Groups have a close and time-limited format. For each group, 8-weekly session of 1 and half hours a session are scheduled according subjects' preference. The reminiscence group therapy was conducted by a senior nursing staff and receives ongoing supervision in the Mental Health Research Team. The effectiveness is measured by positive change in depression status and loneliness, about their participation in the program. Quantitative data analysis includes descriptive statistics and GEE (Generalized Estimation Equation) for longitual data analysis. Pre-difference examination between key variables on basic characteristics between experimental and control group will also be conducted through ANOVA (analysis of variance). The study subjects had a mean age of 77.24 years. The generalized estimating equation was used to compare alterations in the depression and loneliness of the elderly before and after the intervention. The alterations in depression and loneliness in the experimental group after the reminiscence therapy were significantly improved compared to the control group. Three month after reminiscence therapy was completed, the depression and loneliness of the experimental group continued to improve when compared with pre-intervention levels.