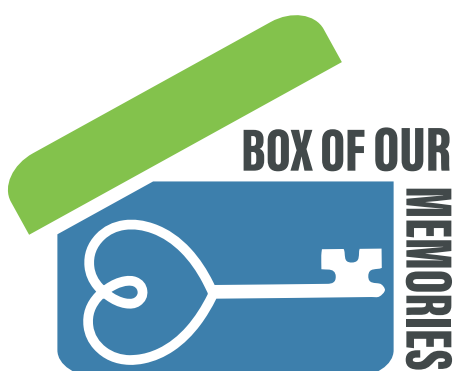


BOOM METHODOLOGY

HANDBOOK



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BOOM METHODOLOGY HANDBOOK

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INTRODUCTION

This methodology handbook composes the first Intellectual Output (IO) of the Box of our Memories - Adult Education Caring for Memory Loss (BooM) project. It will be accompanied by an implementation strategy that can support the sustainability and impact of the project's outputs.

The BooM project aims at enhancing the availability of reminiscence-based, digital, informal adult education interventions for elderly people. BooM will do that by working closely with museums and archives as particularly suitable environments where implementing such interventions. An impact is expected in raising the awareness on making cities accessible to people with dementia, as well as in strengthening the family caregivers' and educators' skills on how to treat dementia.

This document comprises the following contents:

1. A literature review on reminiscence-based practices with a specific focus on archives and museums.
2. Pan-European innovative examples of memory practices in archives and museums.
3. Didactical notes on how this methodological framework can be used by adult educators in care homes, social sector, archives, museums and galleries.
4. Didactical notes on how the project outputs can be used in informal adult education with carers, families and those with memory loss.
5. Insights on the later project outputs related to the design of the BooM toolkit and the BooM app.
6. Key terms of references to ensure common ground and understanding.

DEMENTIA AND REMINISCENCE

What is dementia?

Dementia is not a specific disease but rather describes a group of symptoms affecting memory, thinking and social abilities severely enough to interfere with daily life. Dementia is usually a chronic and progressive disease. Alzheimer's disease is the most common type of dementia.





These illnesses afflict large numbers of elderly people throughout the world; however, it is important to say that dementia should not be considered as a part of normal aging. In fact, according to the World Health Organisation (WHO), the estimated proportion of the general population aged 60 and over with dementia at a given time is between 5-8%.

Symptoms of dementia can vary depending on the cause but generally they can include a deterioration in cognitive function (i.e. the ability to process thought) beyond what might be expected from normal ageing. It affects memory, thinking, orientation, comprehension, calculation, learning capacity, language, and judgement.

The impairment in cognitive function is commonly accompanied by behavioural and psychological symptoms (BPSD) such as:

BEHAVIOURAL SYMPTOMS OF DEMENTIA	PSYCHOLOGICAL SYMPTOMS OF DEMENTIA
Wandering - Hyperactivity; Agitation; Inappropriate social behaviour; Verbal or physical aggressiveness; Refusal; Sleep disorders; Sexual disinhibition; Disorders of appetite; Persistent vocalisations; Confabulations; Hoarding disorders.	Hallucinations; Depression; Euphoric mood or, on the contrary, apathy and indifference; Anxiety and irritability.

As mentioned, dementia is a progressive disease: the development of dementia symptoms accompanies a progressive impairment in performing activities of daily life, such as preparing a meal or making a phone call, as well as in taking care of one's own personal hygiene.

The development of the disease also implies progressive worsening of memory impairment; difficulties in speaking and understanding; orientation in time and space; impaired social judgements and “unusual” behaviours.

Persons with dementia progressively need more and more assistance from informal and formal carers. Because of that, carers of patients with dementia experience high levels of burden, which not only damages the physical and psychological health of the carers, but also compromises their ability to care, creating a sort of vicious circle. This is why it is important not to underestimate carer wellbeing, recognising the impact of the disease, possible signs of stress and looking for ways to support the carer as well as the care recipient.

1.2 Pharmacological therapies vs non-pharmacological therapies: a review

Currently, only a few drugs are specifically authorised for dementia, aimed exclusively at Alzheimer’s disease. The drugs allow the control of symptoms for some time, but they can’t stop the disease progression. Besides, not every patient responds to pharmacological therapy. (Govoni et al. 2020).

Because there is not a deeply effective therapy for the treatment of dementias, the approach which shows the best results is the one that **combines pharmacological therapy with psychosocial intervention**.

There are three main approaches: cognitive; multi-strategic; behavioural-sensory.

- Cognitive-oriented interventions (stimulation/training/cognitive rehabilitation), involve the cognitive skills of the person with dementia (PwD) through exercises and tests, with compensatory and/or rehabilitative purposes.
- The multi-strategic approach includes non-specific or global interventions that do not specifically act on cognitive mechanisms, but use both internal and external resources of the patient. Reality Orientation Therapy (ROT), reminiscence therapy, Validation Therapy and employment therapy are some of the interventions that fall under this approach.
- Finally, the behavioural-sensory approach includes interventions such as musicotherapy, aromatherapy and phototherapy, or interventions that use different sensory inputs (music, essential oils, light) as vehicles for non-verbal information (Govoni et al. 2020).



Not every intervention here described has solid scientific-grounds, except for those belonging to the cognitive approach. However, their wide spread, the confidence of operators with such approaches, the absence of side effects and the positive results often found empirically in small samples, support clinical use and the opportunity for further studies. The main objective is to achieve a reduction in the impact of the disease, encouraging the PwDs to maintain their own role and autonomy (Govoni et al. 2020).

1.3 Reminiscence therapy in dementia

The therapy of reminiscence involves the discussion and re-enactment of past experiences, through different materials, based on the principle that these experiences tend to be remembered more easily by the elderly, compared to recent events, and can therefore represent a stimulating

activity even for subjects with significant memory impairment for recent events. The psychosocial improvement induced by RT can benefit PwDs as well as carers.

Reminiscence therapy (RT) is one of the most popular psychosocial interventions in dementia care. It was introduced in the 1980s, and it is based on evocation and discussion with another person or a group about past activities, events and experiences, using a variety of supporting materials. It includes the recall of past events with the use of music, images, photographs and other aids, often prepared with the involvement of carers (Cotelli et al. 2012).

More recently, ICT has been used as a method to support RT delivery, using multiple engaging media and allowing for multiple users; it can use webcams, photos, interactions with computer graphics, and personalised videos. This digital content may include more or stronger visual and auditory stimuli for enhanced PwD engagement.

Memory boxes are often used in RT, both in its traditional and digital performances. A memory box is basically a collection of items, music or images which are meaningful to that PwD and that bring back fond memories of important moments in the person's life. Contents of the memory box can be used to start conversation and meaningfully engage the PwD.

Although reminiscence is widely used in dementia care, and that available studies suggest that reminiscence therapy can improve mood, autobiographical memory and some cognitive abilities (Cotelli et al. 2012), it is certainly not the only approach which can be adopted to engage PwD in activities aimed to promote their wellbeing through non-pharmacological interventions. Other examples include creative story-telling, guided conversation and art-based occupational therapy.

1.4 Archives and museums potential in dementia care

Archives and museums can play an important role in supporting programmes aimed to stimulate memories and engagement of PwDs and their carers, providing sources for reminiscence-based as well as other psychosocial intervention methods.

➤ ARCHIVES

Archives can function as agents of social solidarity, serving as symbols of community identity and memory. A photograph of the high street in the 1950s, a poster of a local fair, records of a company, a music society or an old local newspaper, interviews with workers of a steel mill that does not exist anymore or a movie of a carnival festival long gone - all these stored collections can trigger memories. Memories that can make you feel 'home', trigger emotional longing and psychological processes of identity formation (Brown 2013).

Archives have been shown to be powerful agents in recovering forgotten memories (Tischler and Clapp 2020). Therefore they can be used for example to direct and inform resource materials by revealing popular and instantly recognisable brands, products and environments of the last century which can be used to assemble thematic "memory boxes" for PwDs. In this context there are significant examples offered by company archives of famous brands (such as Boots, Nestlé or Mark & Spencer) or broadcasting companies (such as BBC) that made their resources accessible to this purpose. On the local level a town archive can provide records directly related to a PwDs life – e.g. by showing photographs of their former workplace. Research has shown that archive records with direct relevance can trigger strong emotions and spark clear memories.

Moreover, archives have been involved in promoting reminiscence and story-telling sessions using items from their collections, including photos and video footage, to stimulate discussion.

› MUSEUMS

Many **museums** started offering programmes targeted to PwDs and their carers with the goal to offer opportunities for meaningful engagement, counteracting stigma associated with dementia and ultimately increase their well-being. Although programmes can differ widely, they generally include one or more of the following activities:

Art looking programmes, where a selection of art-work is presented to participants together with questions to facilitate discussion in small groups or where art-works are used to prompt creative storytelling. Using the museum as a starting point for conversation is not only possible, but also highly beneficial to all taking part in the dialogue. People with dementia and their loved ones have much to give, both to museums and to each other. No matter the stage of the disease, a person with dementia still possesses the ability to communicate, express, share, and feel - although progressively with more difficulties and a higher need to rely on non-verbal communication. Museums can encourage and promote that reflection and reaction, even if words are no longer available (Rhoads 2009).

Art-making programmes, where selected art-works are used as a source of inspiration to create simple artistic projects using different mediums, materials and techniques. These workshops allow individuals to express their creativity and experience moments of well-being and connection with others.

Object handling, where PwD are encouraged to handle heritage objects and talk about them. These objects can retrieve memories from the past, but they can also be of a slightly mysterious nature or whose purpose is not immediately obvious to stimulate curiosity and learning. The Camic et al. (2017) study demonstrated that touching and talking about original museum artefacts in small groups increased subjective well-being of participants across different types of dementia with mild or moderate levels of impairment.

Art therapy, which is a form of therapy that uses art media as its primary mode of communication. Although art-therapy can be provided in many different settings, the use of art therapy in museums has begun to emerge.¹



¹ In this handbook we will not focus specifically on art-therapy as a prerogative of trained therapists and therefore it is out of the scope of the BooM project.

CASE STUDIES OF INNOVATIVE METHODOLOGIES TO PROMOTE MEMORY PRACTICES IN ARCHIVES AND MUSEUMS

As mentioned, archives, museums and art can play an important role in supporting programmes aimed to stimulate memories and engagement of PwDs and their carers, providing sources for reminiscence-based as well as with other psychosocial intervention methods.



IN THIS SECTION YOU WILL FIND A SELECTION OF GOOD PRACTICES AND CASE STUDIES FROM ACROSS THE WORLD.

More best practices can be found on:

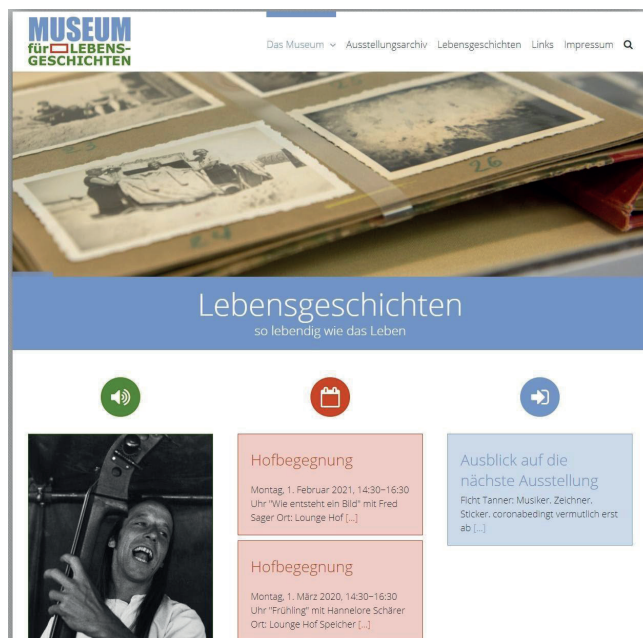
www.boxofourmemories.eu/best-practices

1

MUSEUM FOR LIFE STORIES

> CATEGORY: REMINISCENCE PRACTICES & MUSEUMS

📍 COUNTRY: SWITZERLAND



Source: <http://www.museumfuerlebensgeschichten.ch/web/wp-content/uploads/2017/12/Bild-49.jpg> Museum für Lebensgeschichten. Copyright: Museum für Lebensgeschichten

CONTEXT

The Museum for Life Stories is part of the retirement home Hof Speicher in Switzerland. The museum was an idea by Artist Hans Ruedi Fricker. Together with the staff of the retirement home they collect the life stories of its residents and locals - ordinary people of all education and social background. The Museum is hosted together with H.R. Frickers art project and remembrance project "Miin Ort" ("My place"): The people and what influences them should remain in the consciousness, that's why large-format photo panels are showing selected places with personal significance of a resident. Both concepts have been adapted by other retirement homes: Martinshaus in Visp, CH and Seniorenhaus am See in Hard, AT.

DESCRIPTION

The concept is simple: nowhere is the reservoir of stories greater than in old people's homes. Here, on site, the life stories of ordinary people of all education and social status are collected and saved from oblivion.

Their stories are collected by the staff, volunteers or a curator and presented through exhibitions, booklets, lectures and discussions.

The large photo panels are placed in the corridor next to each resident's room door - showing selected places with personal significance, which are determined in the Fricker couple's conversation with the residents. The pictures and texts are also shown on a monitor at the Entrance of the retirement home. The souvenir pictures are supplemented with the portrait photo and a text that refers to the person. H.R. Fricker is not concerned with the artistic expression of the photograph, but with the significance of the place depicted for the people.

STAKEHOLDERS

Elderly people living with dementia and their families, carers and direct care staff.

METHODOLOGICAL APPROACH

Collecting stories is done by interviewing, collecting photographs, documents or newspaper snippets by the staff, volunteers or a curator and presented through exhibitions, booklets, lectures and discussions. Pictures for "Miin Ort" can be done by the same person.

IMPACT

By using the collected material in conversations, the memory of one resident can help the others living there by bringing back their own memories. The collected stories are local or regional and thus relatable. It values ordinary people's memories, helping their families and themselves to not be forgotten.

SUCCESS FACTORS

Collecting pictures, audio interviews and objects triggering memories

MORE INFORMATION

<http://www.museumfuerlebensgeschichten.ch/web/>
<https://sozialesnetz.hard.at/de/museum-fuer-lebensgeschichten/>

2 MY HOUSE OF MEMORIES PROGRAMME AND APP

> CATEGORY: REMINISCENCE PRACTICES & MUSEUMS

📍 COUNTRY: UNITED KINGDOM



Create a Memory Box. National Museums Liverpool

Source: https://images.liverpoolmuseums.org.uk/styles/focal_point_2_1/public/2020-06/memory-box-house-of-memories.jpg



Screenshot from the 'My House of Memories' app

Source: https://play-lh.googleusercontent.com/aHBwYIUZchwpu6Gvnl8k4PYZBAMT_0l5pda5firYuEDvydz9JG_Fb2E-keePeUcaaZP36=w2560-h1296-rw

CONTEXT

Created by National Museums Liverpool, House of Memories is a museum-led dementia awareness programme which offers training, access to resources, and museum-based activities to enable carers to provide person-centred care for people living with dementia.

The Museum has developed a companion app, 'My House of Memories', which allows users to explore objects from contemporary history, curated from museum archives. Users can add these objects and upload personal photos into their personal memory box or memory tree. The app was originally developed for people with dementia or Alzheimer's disease and their carers but can be used by anyone.

DESCRIPTION

Museums are experts at recording and caring for people's memories. Using their experience in reminiscence work, as well as access to museum objects, House of Memories' training and resources support carers to creatively share memories with the people living with dementia that they are caring for.

The award-winning House of Memories dementia awareness programme was created by National Museums Liverpool. The programme includes:

Dementia training for family and friends

Dementia awareness training for health and social care professionals

Bespoke training

Activities within the programme include:

'Meet me at the museum'

'Memory Walks'

'When I was little'

'Memory suitcases'

'Create a memory tree'

'Create a memory box'

A memory box is a resource to help trigger memories for people living with dementia. It contains things from a person's past that have meaning for them. A physical memory box can be created at home, or it's possible to buy nostalgia packs or a ready-made memory box through the Museum's online shop. Objects could include photos of friends and family, letters, records/CDs of their favourite songs, items related to a hobby, and personal artefacts (for example, if the PwD used to be a doctor you could include a stethoscope).

My House of Memories is a free app, available for iOS and Android, which allows users to explore pictures of objects from across the decades, with added descriptions, sounds and music. Users can collect these objects together into their own virtual memory box (or tree) within the app to view later.

Objects in the app were initially taken from archives of National Museums Liverpool so were largely based on the local history of Liverpool but the catalogue has gradually been expanded to include more generic British and Irish content. The objects are grouped by themes for users to explore and save. Users can also upload their own photos and descriptions into the app.

All actions and descriptions within the app are spoken aloud by a human voice in English, to help those with visual impairment.

STAKEHOLDERS

People living with dementia and their families, carers and direct care staff (who need appropriate education to ensure they have the right knowledge and skills), educators and researchers, policymakers, and healthcare systems.

National Museums Liverpool is a collection of 7 museums in Liverpool. The House of Memories programme was initiated by the Museum of Liverpool.

METHODOLOGICAL APPROACH

Creating a dementia memory box is a simple activity where you can use reminiscence therapy to help people. By sitting down together and exploring a collection of items or images from the past you can help encourage short-term memories by stimulating long-term ones. The Museum offers free training for informal carers, families, friends and community volunteers. They also offer structured training in reminiscence therapy for health and social care professionals.

People living with dementia can use the app directly, with the support of a carer or family member. They can select a group of thematic objects to download to the app; including 'Liverpool Life', 'Irish Memories', 'Home and shopping', 'Work and family life', amongst others. Each group includes print images, photographs of objects, sounds and some groups include videos too.

In the Museum Memories section, users can explore the items they have downloaded. Each item contains a description and some include sound effects or music. Users can choose to add the item to their own personal memory box or tree. After creating a profile, the memory box/tree can be saved so that it can be viewed later. Users can also play a slide show of all of the objects in their personal box/tree.

The aim is for the objects, images, and music to trigger memories and possibly to initiate a discussion with the user's family member or carer.

Multiple user profiles can be created in the app, with each personal memory box/tree saved in the profile. This enables the same tablet to be used with multiple people, which is useful in a care home environment.

IMPACT

As of September 2020, 12,500 health and social care professionals and family carers have received the House of Memories dementia awareness training programme.

A memory box can open-up the lines of communication (something which people with dementia can find particularly difficult), as well as providing a calming effect and providing an activity that interests them. Pleasant memories can be activated through reminiscence therapy. Memory boxes and their contents help provide a good starting point for conversations that lead to healthy reminiscence. The memory boxes and their contents can act as catalysts for the creation and re-creation of identity. Memory boxes can provide a mechanism for care home staff to train and familiarise themselves with the residents. It can also benefit family members who get to learn more about their relatives and bring them closer.

The app was developed within the 'House of Memories' programme. There have been over 33,000 downloads of the app, which will include people with dementia, family members, carers and other interested parties.

In 2018, National Museums Liverpool worked with the Minnesota Historical Society (MNHS) to launch a localised version for the USA curating more than 100 pages from the MNHS museum collection.

In 2019 the British Council Singapore signed a Memorandum of Understanding with National Heritage Board (NHB), Singapore and National Museums Liverpool to develop a version of the app for Singapore. It was launched in September 2020 using over 100 objects from Singapore's National Collection and 11 additional objects from the Alzheimer's Disease Association (Singapore). The NHB is working with the British Council Singapore to translate the contents of the app into Mandarin, Malay and Tamil. These versions will be available in 2021.

SUCCESS FACTORS

Museums are experts at recording and caring for people's memories – whether they are thousands of years old or within 'living memory'. Museums enable people to explore and connect with their personal history and engage in relevant and meaningful cultural activity. Developing the app (supported by a wider dementia awareness project), which is tailored to engage people living with dementia, is an innovative use of the museums' vast collections.

MORE INFORMATION

House of Memories Programme: <https://www.liverpoolmuseums.org.uk/house-of-memories>

My House of Memories App: <https://www.liverpoolmuseums.org.uk/house-of-memories/my-house-of-memories-app>



3 THE OLD TOWN

> CATEGORY: REMINISCENCE PRACTICES & MUSEUMS

📍 COUNTRY: DENMARK



A Danish kitchen scene from the 1950s. Sidsel Overgaard for NPR

Source: https://media.npr.org/assets/img/2016/09/13/danish-museum-9-13-16_custom-aa8f3ac95f41b4f3b94f-fa804755a3cad67f28a2-s1600-c85.jpg

CONTEXT

Den Gamle By (The Old Town) Museum in Aarhus, Denmark with an entire apartment straight out of the 1950s.

DESCRIPTION

The exhibit is intended for visitors living with Alzheimer's and other forms of dementia. The fictional couple who would live in this apartment — a schoolteacher and his wife — ensuring a middle-class setting recognisable to any visitor, regardless of his or her situation in the 1950s.

STAKEHOLDERS

Den Gamle By Museum is open for all visitors - residents from nursing homes and local centers, individuals in groups or families of several generations.

Museum interpreters and curators - Den Gamle By Museum in Aarhus, Denmark

Students - in social and health education follow Den Gamle By's courses.

Researchers - Center on Autobiographical Memory Research at Aarhus University.

International - Den Gamle By has inspired museums in England, Holland and Sweden. Japanese social workers have recently visited Den Gamle By.

METHODOLOGICAL APPROACH

Methodology is intended for Alzheimer's patients or other forms of dementia whose memories may be triggered by the sights, sounds and smells from the period. The visitors are welcome to look around and the guests are happy to play along. The museum interpreters take on the role of willing students, asking guests for more information: "What can you tell me about this thing? Does this actually taste good? You probably know more about this than I do." At the House of Memories, each visit ends with a sing-along in the parlor.

IMPACT

Early memories are best preserved. Specifically, those memories from a person's teens and 20s, a period known as the "reminiscence bump". For many of the visitors, that period falls in the 1950s. As visitors leave, they are noticeably lightened. Some are talking for the first time in years, forgetting to use their canes, recalling stories their children have never heard.

SUCCESS FACTORS

There is a need for more research on associative triggers, which is something scientists are studying. But physical objects and music seem particularly promising. These things seem to have an effect even outside a holistic environment like the House of Memories.

MORE INFORMATION

<https://www.dengambleby.dk/om/presse/nyheder/n/den-gamle-bys-aabner-ny-erindringslejlighed-for-aeldre-ramt-af-demens>

4 MUSEUM PROGRAMME "ALBUM"

► CATEGORY: REMINISCENCE PRACTICES & MUSEUMS

📍 COUNTRY: CROATIA



Source: <https://www.facebook.com/tifoloskimuzej/photos/1527098957327855tos/1527098307327920>



Source: <https://www.facebook.com/tifoloskimuzej/photos/1527098957327855tos/1527098307327920>

CONTEXT

The museum programme "Album" is intended for people with Alzheimer's disease and dementia. The programme was designed in collaboration with the Typhological, Ethnographic and Technical Museum.

DESCRIPTION

The realisation that people with dementia are generally not included in the cultural programmes of museum institutions was the impetus for the implementation of the project called "Album" in the fall of 2017 at the initiative of Zeljka Susic, museum advisor to pedagogue and senior curator of the Typhological Museum. culture. It was realised in collaboration with Željka Jelavić from the Ethnographic Museum and Kosjenko Laszlo Klemar from the Nikola Tesla Technical Museum. By choosing the name of the project, the initiators wanted to suggest the similarity of creating their own albums of memories with museum work, because in both examples it is a matter of selection, development of criteria, description and presentation.

STAKEHOLDERS

Museum staff
Homes for the elderly and infirm
Croatian Alzheimer's Association
Social workers

METHODOLOGICAL APPROACH

The goals of the project were to increase the quality of life of sick people, to promote museums as places that contribute to the general condition of users, to present the social potentials and values of museums and to promote and increase awareness of the user group with the help of social networks.

The tasks of the programme were clearly defined, and included the selection of suitable museum objects to be used in working with users. One of the goals was to connect the three mentioned museum institutions with associations and institutions that care for people with Alzheimer's disease and dementia, as well as to connect museum and social experts in joint work. The created programme followed the ethical principles of working with patients and, using an informal, relaxing approach, first identified the situation and the established skill levels of future programme participants. After meeting and consulting with social workers and carers, museum objects were selected that were concluded to be able to stimulate and evoke the forgotten memories of the sick. The applied methods of work with the sick included an individual, appropriate approach, with a verbal (talking, explaining), visual (seeing, perceiving) and auditory method (listening), as well as direct work and contact with objects.

IMPACT

After looking at the subject, the participants were focused on a positive change of behaviour through various activities, conversation, painting and play - relaxation, conversation and laughter, which ultimately resulted in the improvement of their skills. Recalling the purpose of the object helped them recall the stories.

SUCCESS FACTORS

Closing the museum into a narrow, highly professional framework is no longer possible today. Namely, museums are a reflection of society, so it is necessary to develop various programmes that will recognise social problems through interdisciplinary cooperation, respond to them and act in the direction of their elimination.

MORE INFORMATION

<https://hrcak.srce.hr/218526>

<https://www.in-portal.hr/in-portal-news/kultura/14594/zagreb-tri-muzeja-u-jedinstvenom-projektu-za-osobe-obiljele-od-alzheimerove-bolesti>

<https://www.vecernji.hr/lifestyle/obiljele-od-alzheimerove-bolesti-odveli-u-muzej-da-vide-predmete-njihova-doba-evo-sto-se-dogodilo-1206353>

➤ **CATEGORY: ART LOOKING**

📍 **COUNTRY: USA**



Photographs by Jason Brownrigg.

Source: https://www.moma.org/visit/accessibility/meetme/_assets/momaorg/shared/pdfs/docs/meetme/MeetMe_FULL.pdf

CONTEXT

The "MoMA Alzheimer's Project – Meet Me at MoMA" was a special initiative in the Museum's Department of Education. The initiative took place from 2007 to 2014: during this time, MoMA staff expanded on the success of the Museum's existing education programmes for individuals with Alzheimer's disease and their care partners through the development of training resources intended for use by arts and health professionals on how to make art accessible to people with dementia using MoMA's teaching methodologies and approach.

DESCRIPTION

Meet Me is a monthly interactive gallery-discussion programme for individuals with dementia and their family or professional care partners. Through the development and evaluation of this programme, it became apparent that engagement with art offers participants an opportunity to enhance their quality of life through mental stimulation, communication, personal growth, and social engagement.

STAKEHOLDERS

Elderly people at an early stage of dementia
Families of the involved elderly people and their carers
Museum staff
Educators

METHODOLOGICAL APPROACH

The elderly people are divided into groups of small size, usually no more than eight people with dementia plus their family members and carers, for a total of sixteen people. Often, there are up to six groups in different Museum galleries simultaneously. Participants are greeted in a common registration area and given name tags, portable stools or wheelchairs, and personal listening devices for sound amplification, if needed. A trained educator leads each group through a tour of four or five artworks related to a theme and presented in a predetermined sequence. Each tour lasts one and a half hours, with about fifteen to twenty minutes spent at each artwork.

Several discussion questions are posed to engage participants in observing, describing, interpreting, and connecting to the works and to each other. Historical points about the artworks are transmitted throughout the tour, and smaller group discussions are also often used to spark further interaction among participants.

IMPACT

The attendees of the Meet Me at MoMA programme return month after month and it speaks eloquently to the meaning and value it holds for participants. They have the opportunity to learn, to be intellectually stimulated, to experience great art together. The family members expressed profound gratitude that the person they care about could have such an experience and, just as important, that they could share it together. For both the persons with dementia and their carers there were positive changes to mood both directly after the programme and in the days following the Museum visit. Carers reported fewer emotional problems, and all but one person with dementia reported elevated mood.

SUCCESS FACTORS

The value placed on the person with dementia removes the stigma of Alzheimer's disease so that participants can enjoy the MoMA experience.

MORE INFORMATION

<https://www.moma.org/visit/accessibility/meetme/>

► CATEGORY: ART LOOKING

📍 COUNTRY: GREECE



Source : https://en.wikipedia.org/wiki/Easter_egg#/media/File:Pasxalina_abga.jpg

CONTEXT

Occupational programmes, with hands-on, creative activities can be an excellent therapeutic exercise for elders with dementia aiming at the improvement of both their emotional wellbeing and cognitive abilities. Through art, like painting and simple handcrafts, the person has the opportunity to express their feelings in a safe and creative way. Care homes in Greece are implementing similar activities, and it should be noted that health and safety measures should always be considered when developing handcrafting activities. This particular practice is based on the fact that the celebration of Easter has held an important role in Greek traditions and social life throughout the years and is something that can spark pleasant memories and feelings in elders.

DESCRIPTION

The activity is simple; the elder is asked to select two to three loved ones (any person that comes to their mind, either alive or deceased) in order to create for each of them a Greeting Card. Then they are invited to paint and decorate each card with colours and handcrafted paper decorations, and if possible, to write down wishes to each loved one. Also, they are invited to paint a couple of Easter eggs, following the traditional way, using water and paint, to accompany each card.

STAKEHOLDERS

A carer or a family member can implement the activity together with the elder. It should be noted though that safety measures should be considered if scissors (for the paper cards and decorations) or boiled water (for the traditional dyeing of the eggs) are used.

METHODOLOGICAL APPROACH

Although a person dealing with dementia may give the impression that they have lost many of the abilities that they had when they were still healthy, it is striking how easily and successfully the same person corresponds to a pleasant activity; especially one that can spark pleasant recollections from their past. The methodological approach of this activity lies in the fact that co-creation and hands-on activities can improve not only the skills but also the well being of the target group. Easter traditions in the Greek context have played an important role in social life, thus elders occupying themselves in those traditions can be reminded of pleasant memories. This, together with the greeting cards to be created and symbolically sent to their loved ones, can support them to express their feelings in a creative and efficient manner.

IMPACT

When it comes to the elders: Positive impact on wellbeing, opportunity to recall pleasant memories and feelings and to express themselves creatively

For the carers: an opportunity to be engaged in hands-on participatory, pleasant activities that bond them and also increase their well being

SUCCESS FACTORS

It is individualised: the traditional dyeing of the eggs is a very familiar activity in the Greek context and can spark pleasant memories. Also, the cards to loved ones gives the opportunity for the elder to creatively express his feelings and potentially stimulate recollections.

Hand-on and simple to implement: elders are invited to create the cards and also to perform the necessary tasks related to the traditional dyeing of easter eggs

MORE INFORMATION

<https://tinyurl.com/4pursm6e>

DIDACTIC NOTES

HOW THE BOOM METHODOLOGICAL GUIDES CAN BE USED BY ADULT EDUCATORS IN CARE HOMES, SOCIAL SECTOR, ARCHIVE, MUSEUMS AND GALLERIES, ETC



3.1 Introduction

This didactical guide is aimed at professionals and volunteers engaged in formal contexts of caring for people with dementia and memory loss, who would be interested in using the BooM material. The target group for the guide is therefore; care staff in nursing homes, home carers, adult educators and trainers of carers, care students and volunteers. The guide is also relevant for stakeholders such as professionals in culture and social care, archive, museum and heritage as well as decision-makers and financiers of such programmes.

This guide is based on an educational analysis of six examples² chosen by the project team to represent best practice initiated by arts, archive, museums and heritage institutions for working with dementia. We aim to present an analysis of the positives of the examples and how they could be used in educational settings for training carers. We will introduce the educational concepts behind the BooM project's new digital APP and show what it can offer as a complement to existing material for direct use with people with dementia and in the training of carers and other professionals.

The chosen examples are summarised as follows:

1. Easter egg, art marking. An idea for a creative activity that can be performed by older persons and their carers (Greece)
2. Museum for Life Stories. Stories of residents of residential care homes are collected by the staff, volunteers or a curator and presented through exhibitions, booklets, lectures, and discussions (Switzerland)
3. ALBUM museum programme. Museum objects selected to stimulate and evoke the forgotten memories of persons with dementia (Croatia)
4. Alzheimer programme of MOMA museum - offers different activities to engage individuals with Alzheimers and their care partners with art. All activities are described in guides for replication (USA)
5. 'Den gamle by' in Aarhus has an exact replica 'House of Memories' of a 1950s apartment intended to stimulate memory of people with dementia (Denmark)

6. House of Memories, National Museums Liverpool. Creating a dementia memory box is an activity where you can use reminiscence therapy to help people. By sitting down together and exploring a collection of items or images from the past you can help encourage short-term memories by stimulating long-term ones (UK)

3.2 Method

The programmes and methods developed in arts, archives, museums and heritage institutions for working with memory loss are focused on stimulating early memories that often remain longer in people with dementia. The methods engage objects, images, sounds, smells, re-enactments, etc and give people the opportunity to relive a time when he or she was active and healthy. In dementia, short-term memory usually deteriorates first whilst long-term memories can survive. Remembering their past can make the person feel more secure, increase the quality of life, increase self-esteem and reinforce their identity.

Through reminiscence work in arts, archives, museums and heritage institutions, people with dementia get in touch with their past and can thus become more present and concentrated in the present. Carers gain increased knowledge of the individual and greater understanding of the person. Relatives are important resources in reminiscence in that they can give the carers a picture of the person's life history. The programmes can in some cases be carried out at home and in some by attending a centre. They can be individual, one to one or group sessions.

In the group reminiscence activities, the positive effects can be enhanced by:

- The people get to experience conversations with each other
- They get to listen and see others, which stimulates the desire to remember and tell
- They are seen and heard
- They use their senses and their body
- The group leader and other staff gain greater knowledge about the participants
- The group gets to know each other better, which reduces conflicts

² See chapter 2: Case studies of innovative methodologies to promote memory practices in archives and museums

3.3 Conversation

The most common form of reminiscence work is conversation. Oral tradition, i.e. to convey information through storytelling from generation to generation, is an old method of preserving the past. Reminiscence can be used in many ways. This method can be helpful to deepen the carers daily contacts with residents in care homes by:

- Planned reminiscence activities in groups, museum visits
- Individual meetings with carers and educators
- Spontaneous reminiscence in everyday life at home or in nursing homes
- Support from relatives

3.4 Preparation

Before the reminiscence work begins, it is important as a professional to try to get as much knowledge as possible about the person behind the situation. Who is the person? What interests the person? What has the person worked as? Where was the person born? What does the family look like? Increased knowledge of the person's life history makes it easier to have a meaningful conversation which helps keep memory functions alive. Reminiscence work evokes many kinds of emotions, thus it is important to be prepared to deal with the emotions that might come up. It is important to be prepared for good memories as well as bad ones and the emotions they rekindle.

3.5 Memory Box

There are many ways to implement the method of utilising memory boxes. Box of our Memories - Adult Education Caring for Memory Loss (BooM) has chosen examples of best practice from different contexts (see above) such as expressing oneself through art (painting Easter eggs in nursing homes, visits to museums of modern art), collecting the life stories of the elderly and the experience of images, objects, environments, music, and scents that are available as opportunities offered by museums and archives in the form of exhibitions. The most popular form is probably a memory box or bag that is available at museums or libraries, to be used in family or care homes. Some care homes put their own together and some programmes enable and guide the family through the process.

The memory box is intended to serve as a resource, introduction, or inspiration to continue reminiscence work in a workplace. With the help of the box and the tutorial you can create rewarding reminiscence moments and be able to apply the method regularly.

Remember - this is a guide in the reminiscence method. When using memory boxes, you are encouraged to design your own material so that you get the most out of the conversation. Identify possible memory triggers adapted to the person with dementia or collect your own memory material based on the life history of the person. The memory box can also be a support for relatives in communication with their loved one.

Collect questions to initiate conversation or a story related to the chosen objects, images, smells and sounds gathered in the memory box or in the epoch-typical environment recreated at the museum or heritage site. For example, regarding the contents of a toiletry bag, the following questions can be asked:

What products did you use to make yourself nice? Did you use makeup? What clothes did you wear on your holidays? What hairstyle did you have as a youngster? How did you shave and cut your hair? Was perfume and hair spray used? Who helped the children stay clean? How did you take a bath? What were your morning and evening routines? How were diseases cured? What medicines were available? What was it like when you were ill? How was the cold cured? Where did you seek help if someone in the family became ill? What were the most common diseases?

3.6 Individually or in groups

The reminiscence work can take place individually or as a group activity, i.e. it can be something that takes place between a single care recipient and a staff member or carer in a secluded place, or it can take place between people together in a group. The work can also be carried out in a museum or in another cultural heritage site that is suitable for the purpose.

Reminiscence work in groups usually aims to remember together or to exchange memories, which in practice often means that one memory leads to another. By being reminded of different events, you can “refresh” memories that you thought were gone. The groups should be small, well-planned, and structured. Smaller groups create a safer atmosphere at the same time it makes it easier for a demented person to follow what is being said.

3.7 General or specific reminiscence work

You can choose between general and specific reminiscence work. General Reminiscence work refers to a method in which several memory triggers are used as symbols to stimulate memories. Objects, scents, images or sounds start the thought process that makes one associate with times and situations associated with the “memory awakeners”. A good example of this is ‘Den Gamle By’ in Aarhus, Denmark, where people with dementia can experience an apartment that is decorated in an authentic 1950s style. They meet and have afternoon tea with a person dressed in authentic clothing and using the language of that time.

With specific reminiscence work, one aims at carefully selected and specific use of special “triggers”, selected with relevance to the participants. A good example of this is the Memory Box and activities found at the House of Memories at the Museum of Liverpool, UK.

3.8 Practical implementation

The first step in reminiscence work is to decide who should be included in the group. After the group leader decides the composition of the group, it is time to decide which subjects to be treated and which “memory wake-ups” are to be used. Remember not to use too many sensory impressions at a time. Feel free to start with a group of two to four people. Because if there are not so many participants, it will be easier for the group leader to make sure that everyone gets a chance to speak. If possible, use the same place every time because people with dementia need organised activities to structure the day.

Begin the reminiscence work by gathering the group and explaining what the session is about. Select broad themes until the group is used to the meetings or museum visits (e.g., childhood, holidays, or seasons). Feel free to sit in a ring without a table so that you can read the body language better. Try to have a clear structure at the meeting. Send around or show a memory trigger and wait for any reactions. Talk about the memories that come up. It is important that the group

leader stimulates the conversation in the group as the participants share the stories of their lives. There is no set template for what can be called reminiscence. A starting point is that when people together create experiences, which for the person becomes a confirmation of who he or she is, a reminiscence activity occurs.

3.9 Top tips for communication

Reminiscence is a tool to facilitate communication. It is therefore important to keep in mind the following when communicating with people with dementia:

- Use simple language
- Try to find several ways to say the same thing
- Be as specific as possible
- Be sensitive to signals that indicate if the person has understood
- Create a permissive atmosphere
- Show that you are listening and memorising what the person said
- Do not cancel or correct
- Speak slowly with short sentences
- Avoid questions that put the person in an impossible choice situation
- Reinforce your speech with gestures. Point to what you are talking about. If you instruct on something, show at the same time how it works
- Enhance the spoken word with pictures

3.10 Stakeholders

The engagement of all relevant stakeholders is an asset for the success of reminiscence programmes based on the involvement of cultural institutions. As well as the archives and museums being an asset for schools, staff in elderly care can benefit greatly from them in reminiscence work, especially if it takes place in collaboration with other local actors.

A good example, is the development project 'People, meetings, memories - a collaborative project in Klippan municipality in Sweden' (Människor, möten, minnen – ett samarbetsprojekt i Klippans kommun) shows new opportunities for the archives, especially locally, to be a resource in society .

The purpose was to test and develop new collaboration models within a municipality where both institutions, administrations and non-profit organisations were included. It was about making a specific cultural initiative for elderly care with archives and local associations as local resources. A concrete goal in the work was to create Memory Boxes, but also to spread ideas and methods to the nursing school in Klippan.

The project also included representatives from leisure and the cultural administration, the social administration, the municipal archives and the care programme at Klippan's upper secondary school. The collaboration gave rise to positive experiences and ideas about how cultural heritage institutions and reminiscence work could constitute an asset in the teaching at the upper secondary school nursing programmes.

The overall impression is positive, and it particularly emphasises the good co-operation that has arisen between administrations, institutions and non-profit associations at local and regional level. The collaboration has created new networks, led to new insights and knowledge about each other's activities, which in turn increased the opportunities for skills and resource exchange in the future. One municipal archivist believes that the project made it possible to "lift the archive a bit" and that it has found new ways to use the archive.

The same can apply to regional and local museums as well as libraries.



USING MEMORY PRACTICES BY INFORMAL CARERS



4

4.1 Engaging in meaningful activities

The symptoms of dementia can make it harder for a person to take part in activities and to engage socially but providing enjoyable and health-enhancing activities that are suitable for the stage of dementia can help with this.

On the other hand, it is important to find ways to support both people with dementia (PwD) and their carers to live well. Indeed, recent research suggests the relationship between the PwD and their main carer, social engagement and connectedness, may be important factors in wellbeing in dementia and they can be achieved for example through sharing a meaningful experience on an equal basis which helps to build a positive relationship.³

4.2 Reminiscence: how it can help

Talking about pleasant memories or reminiscing is one way in which carers can communicate with and meaningfully engage the person with dementia. However, engaging a person with dementia in conversation and activity can be quite challenging and reminiscence provides a structured approach that can be used to facilitate this engagement.

Reminiscence “involves the discussion of past activities, events and experiences with another person or group of people, usually with the aid of tangible prompts such as photographs, household and other familiar items from the past, music and archive sound recordings”



Although results of researches in this field are still limited, it was identified⁴ that reminiscence can help both PwD and their carers in many ways:

Reminiscence can benefit **people with dementia** by:

- Reducing depression
- Reducing behavioural symptoms
- Reducing apathy
- Increasing interest, attention and enjoyment
- Increasing social interaction
- Increasing well-being
- Increasing quality of life
- Improving cognition

However, it should be noticed that despite the many benefits, reminiscence has the potential to raise memories that are distressing to or sadden people with dementia, so in some cases, it might be better to avoid the topic to prevent distress

³ <https://www.tandfonline.com/doi/abs/10.1080/17533015.2019.1700536>

⁴ https://medicine.unimelb.edu.au/__data/assets/pdf_file/0020/2471312/Using-reminiscence-with-people-with-dementia-in-acute-and-subacute-care-manual.pdf

Informal carers can also benefit from the use of reminiscence as it assists families in:

- Connecting and communicating with the person
- Seeing the person behind the dementia
- Reducing caregiving related strain.

4.3 Practical implementation

Reminiscence activities are usually offered in groups in the framework of care services and programmes. However, they can also be implemented at home by informal carers on an individual basis.

The **1st step** would be to identify reminiscence topics, that is around which issue conversation can be initiated. Some questions that you can ask yourself are:

- ☐ What memory or memories does the person enjoy talking about?
- ☐ What roles have been important to the person during their life?
- ☐ What do family and friends talk about with the person?
- ☐ What interests is the person passionate about and enjoy talking about?
- ☐ What memories or events are distressing for the person if they are discussed⁵



The **2nd step** would be to gather resources of different kinds which are relevant to and/or important for the PwD and that can help initiating the discussion. These items may include: photos, memorabilia, toys but also music, videos or other meaningful items from the individual past. Note that it has proven to be helpful to engage all senses, thus it is recommended to include items which can stimulate touch, smell, taste and hearing besides visual elements.

The websites of museums and archives can be an amazing source of images and videos that can be exploited in the framework of reminiscence sessions.



4.4 Communication tips

- Plain, factual questions can be particularly challenging and stressful for people with dementia, who may fear they will get the answer wrong or be embarrassed about not being able to remember. 'How many children did you have?', 'Where were you born?', 'How old were you when...?' – These are all examples of questions which a person with dementia may find hard to answer.
- A good starting point might be to share a memory yourself as a way of leading into asking a question more gently. This helps give clues for the sorts of things you will talk about, and may help the person to relax and recall their memories more easily, without fear of mixing things up or forgetting.
- Sometimes it can work well to invite a person to show you a particular skill that relates to their past: indeed, when a person with dementia is struggling to use words, they may find it is easier to use actions to share something from their past.

⁵ https://medicine.unimelb.edu.au/__data/assets/pdf_file/0020/2471312/Using-reminiscence-with-people-with-dementia-in-acute-and-subacute-care-manual.pdf

4.5 Beyond reminiscence:

Reminiscence it's not the only approach which can be built on art and artefacts to support the well-being of PwD and their carers. Indeed, there are other methodologies that can be adopted:

■ **Art-looking programmes**⁶: this approach aims to engage PwD in a meaningful discussion sparked by artworks and based on "here and now" questions, which – instead of prompting memories – encourage verbal communication, imagination, expression of ideas and stories based on what they are seeing. Images can be selected based on a narrative-thread such as: landscapes; portraits; cities; colours...

Start with observation, allowing time to observe all aspects of the work. You can ask questions like "What do you see in this painting?" or "What colours does the artist use?"

Then you can move on to a more interpretive part. Touch on subject matter, composition, technique, and social and historical contexts with questions such as, "What would you title this painting?" or, "What do you think will happen next?"

As you continue your explorations, connect the artwork to your lives and experiences. This will encourage new insights and interactions. Toward the end of the exploration, bring together the various threads of conversation that have come up. Connect ideas and opinions, and consider the meaning and value of the day's experience.

■ **Art-making programmes**: you can engage the PwD in small art-making workshops which can also be linked to reminiscence. The ability to create and realise a piece of artwork can serve as an empowering experience for individuals. The completed art pieces can engender a sense of accomplishment, ownership, pride, and delight. Art-making involves tactility, creation that encourages imaginative play, and provides physical and sensory stimulation. These qualities are limited in reminiscence, which is largely conversation-based. When used with reminiscence, art-making can provide a more extensive range of stimulation and help deepen engagement.⁷

⁶ Based on MOMA's Meet Me programme <https://www.moma.org/visit/accessibility/meetme/>

⁷ https://www.researchgate.net/publication/324862982_Connecting_reminiscence_art_making_and_cultural_heritage_A_pilot_art-for-dementia_care_programme/link/5df0afa54585159aa474135a/download

THE BOOM TOOLKIT AND THE BOOM APP

To support the practical implementation of reminiscence-based programmes by professionals and informal carers in cooperation with archives and museums, the Box of Our Memories project will develop two dedicated resources, a toolkit and an APP.



5.1 The toolkit

The BooM toolkit is designed to help people with dementia, professionals and families understand the condition and what self-help programmes they can develop by using the products of the project. Informal learning is intrinsically valuable in and of itself for adults with memory loss. There are also many additional reasons why this programme of adult informal learning deserves sustained and careful attention from practitioners, researchers, and adult learners themselves.

The BooM online toolkit promotes adult informal learning about dementia by responding to the many changes and challenges facing contemporary society. These include improving health, life expectancy in growing numbers of older people and supporting well-being and happiness as a self-directed form of non-formal learning for adults with memory loss and their carers and families.

Specifically, the toolkit will contain modules, games, quizzes, etc. concerning:

- How to visit a museum with people with dementia
- How museum educators can prepare thematic workshops for people with dementia by exploiting the local heritage
- Using photographs with people with dementia
- Exploring objects
- Collecting and caring for memory documents
- Using audio material
- Using the built environment; buildings, statues, places, etc with people with dementia
- Making a personal timeline and family tree
- How to use the Box of our Memories app with people with dementia

5.2 The APP

The BooM app builds upon the concept of a box or bag of memories but allows the development of a personalised digital memory box that can be accessed via a computer or tablet, forming an informal adult education programme. Users can collect digital media and artefacts to stimu-

late the person with dementia.

The app is a personalised, digital repository of media artefacts that can be used directly and individually by people with dementia, supported by family members and carers. A sort of personal museum exhibition aimed at stimulating memory, improving mood, and reducing anxiety. It will also enable family members and carers to learn more about the person with dementia. The BooM app will be available as a Web App, via any browser, ensuring it is usable on all tablets/smartphones now and in the future. This also allows it to be accessible by the user from any device once logged in, so they could work on their personal online memory box at home with family members and on a different device with social care professionals elsewhere. It will be supported by “how to use” video and text guides available on the OER platform.

As described, the concept of the memory box has been successfully used in museums, care organisations and private families. It usually takes the form of a physical box filled with items such as family photos, postcards, newspaper clippings, musical recordings or souvenirs. The memory box paints a picture of a person's past. This ‘personal museum’ is curated usually by family members in conjunction with the person with dementia. For those living with dementia a memory box can function as more than just a link to the past, it can stimulate the senses, trigger recall, or even help them to make new friends or reconnect with old ones if shared on social media.

The BooM app utilises the vast amounts of media already available online and combines this with digitised versions of personal artefacts provided by family, friends and the PwD (the User). This can include Videos, Audio, Photos, 3D objects, maps; and more.

The user has access to an account which can be used (with support from a carer where required) to access their personalised BooM. Family members can work with them to add new artefacts and images. They can insert a media link from a popular online platform and have this embedded into the BooM app. Embedding media from the web enables a far greater

catalogue of content to be selected from and ensures observance of relevant copyrights. They can also upload personal images to the User's account. Only the User (and those verified) will be able to access the account to view the contents of the BooM. Strong encryption and password protection is used to ensure the contents remain private. A strong emphasis is placed on the user interface design and functionality to ensure it is easy to use, both for adding new media and viewing the artefacts.

Examples of the types of content included in a BooM:

- Audio – Music can be a positive trigger for those living with dementia. Even those who are minimally communicative can be brought to life by a special song from their past. Music can be curated from e.g. SoundCloud, YouTube. A vast library of songs from all genres is available and ready to be curated. Audio stories and sound effects can also be added.
- Video – YouTube or Vimeo videos can be embedded. This could include scenes from TV programmes or films, documentaries, highlights of former holiday destinations, and music videos. Family members can also add video clips from the User's past privately online and share these to the BooM, including family gatherings, vacations, sporting events, etc.
- Photos – Family members or the User themselves can directly upload photos to the BooM. In addition, photos which already exist online can be curated and added, for example an album of photos on Flickr.
- Maps – Embedded maps showing locations of important places from the User's past – where they grew up, worked, went out, got married, went on holiday, etc. Additional information can be added to their map points.
- 3D Objects – There exists a large catalogue of 3D objects (digitally created and 3D scanned) on Sketchfab, including objects the User will remember from their past. An increasing number of museums are digitally scanning objects from their archive and publishing them on Sketchfab. Family members can also use simple mobile apps to 3D scan personal objects, upload them to Sketchfab then share into a BooM.

6

Glossary

Accessibility

Giving equitable access to everyone along the continuum of human ability and experience. Accessibility encompasses the broader meanings of compliance and refers to how organisations make space for the characteristics that each person brings. .

Alzheimer's disease

Alzheimer's is a type of dementia that causes problems with memory (especially for learning new information), thinking (affecting language, praxis and executive function such as planning, abstract thinking, rule acquisition, initiating appropriate actions and inhibiting inappropriate actions, and selecting relevant sensory information) and behaviour (such as, for example depression, apathy, agitation, disinhibition, wandering). Symptoms usually develop slowly and get worse over time, becoming severe enough to interfere with daily tasks.

Archive

A place or collection containing records, documents, or other materials of historical interest.

Art looking programmes

A museum programme in which visitors, under the guidance of a museum pedagogue or curator, observe and enjoy works of art. The programme is suitable for professional interpretation of the work, as well as for more reminiscent therapies.

Art making programmes

A programme suitable for groups of different ages, whose focus is on participation in the creation of a work of art through conversation, introduction to techniques and practical application.

Art Therapy

Therapeutic application of an art form (visual art, dance, etc) as a vehicle to assist in a patient's recovery, special needs, etc.

Audience

All those interested in visiting your museum or taking part in its activities. Also referred to as user or visitor.

Carer

Anyone who provides care to a person with Alzheimer's disease or dementia. Carers can be family members or friends (usually called informal carers), or paid professional carers. Carers may provide full- or part-time help to the person with Alzheimer's.

Cognitive rehabilitation

Individually tailored intervention, working on personal goals, often using external cognitive aids and some use of learning strategies.

Cognitive stimulation (reality orientation)

Exposure to and engagement with activities and materials involving some degree of cognitive processing, usually within a social context. The intervention is often group-based, with the emphasis on enjoyment of activities.

Cognitive training

Involves training exercises geared to specific cognitive functions, and practice and repetition of these exercises. It may be computer assisted.

ed, and individual or group based.

Community

Each museum self-identifies the community or communities it serves. These may be geographically defined, they may be communities of common interests, or communities formed around identities or a combination of these types.

Community engagement

Engaging with and collaborating with diverse groups to jointly meet needs articulated by the community and taking actions that truly benefit the community. (see Activity Eight for a more detailed explanation and examples).

Creative arts therapy

Intentional usage of the creative arts as a form of therapy (for example, dance therapy, music therapy and drama therapy).

Culture

A group of people with shared experiences, beliefs, values, practices and norms.

Dementia

Dementia is not a specific disease. It's an overall term that describes a wide range of symptoms associated with a decline in memory or other thinking skills severe enough to reduce a person's ability to perform everyday activities. Alzheimer's disease is the most common type of dementia.

Digitisation

The process of making an electronic copy of a document or photograph, for example by scanning.

Digital content

Content that is digitized, e.g. recipes from old cookbooks, photographs, posters, etc., and can be used in art programmes with visitors in a way that is viewed and studied without damaging the originals.

Documentation

The process of recording information about items in collection, including what objects are, where they came from and how and where they are stored.

Exhibition

Exhibitions use a combination of objects, text, graphics, interactives, and/or props to create a physical space dedicated to the exploration of specific themes, messages, and ideas. An exhibition is a comprehensive grouping of all elements (including exhibits and displays) that form a complete public presentation of collections and information for public use.

Guide

Museum worker - pedagogue, curator or trained guide - who guides visitors through museum exhibitions or conducts educational and practical programmes.

Healthcare professional

A generic term used in this guideline to cover all health professionals such as GPs, psychologists, psychotherapists, psychiatrists, paediatricians, nurses, health visitors, counsellors, art therapists, music therapists, drama therapists, occupational therapists.

Heritage

Features belonging to the culture of a particular society, such as traditions, languages, or buildings,

that were created in the past and still have historical importance.

Heritage organisation

An organisation with an interest in preserving and promoting the natural or cultural environment, history, customs and traditions of a place. In practice some museums call themselves heritage centres and vice versa.

Immersive experience

Feeling deeply absorbed, involved and engaged.

Inclusion

The intentional, ongoing effort to ensure that diverse individuals fully participate in all aspects of organizational work, including decision-making processes. It also refers to the ways that diverse participants are valued as respected members of an organization and/or community. While a truly "inclusive" group is necessarily diverse, a "diverse" group may or may not be "inclusive."

In-home care

These care services involve professionals coming to the home to help the carer and the person with dementia. Services vary in type and can include companion services, personal care services and Home-maker services.

Interpretation

The media/activities through which a museum carries out its mission and educational role: interpretation is a dynamic process of communication between the museum and the audience, interpretation is the means by which the museum delivers its content, interpretation

media/activities include but are not limited to exhibits, tours, websites, classes, school programmes, publications, and outreach. Interpretation methods and design is based upon museum and educational learning theories. Knowledge of cognitive development, educational theory, and teaching practices are applied to the types of voluntary, personal, and life-long learning that occurs in museums.

Learning, Self-directed

Also known as independent learning. An individual takes ownership of their learning process (with or without guidance). The free-choice environment of many museums can be a foundation for creating self-directed learning opportunities through interpretive scaffolding and visitor choices that offer multiple points of access.

Legacy

Something that is a part of your history or that remains from an earlier time.

Long-term care facility

A long-term care facility is a nursing home or assisted living center designed for disabled adults.

Memorabilia

Objects that are collected because they are connected with a person or event that you want to remember.

Museum

Non-profit, permanent institution in the service of society and its development, open to the public, which acquires, conserves, researches,

communicates and exhibits the tangible and intangible heritage of humanity and its environment for the purposes of education, study and enjoyment. It includes live museums. Source definition: International Council of Museums (ICOM), Article 3, Statutes, 2007.

Museum educator

The museum educator, alone or in cooperation with programme partners, organizes educational exhibitions, thematic workshops and publishes educational publications.

Pedagogy

A method and practice of teaching.

Personal care

People with Alzheimer's disease or dementia may need help with personal care activities, including grooming, bathing and dressing.

Photography

A document of the time in which it originated, technology, intent and skills author, life and personal significance in certain environments, thereby meeting the criteria for participation in reality, but also a document of the event that recorded or the world in question what it transferred it from reality to reflection or to another dimension existence to be used in working with visitors in a way that is reviewed and studied without damaging the originals.

Quality of life

Used in some treatment studies to show improvement in a person's condition beyond reduction in symptoms, measures of QoL can be

defined broadly and include satisfaction, especially within important areas of one's life, the level of functioning in different areas and the objective circumstances in which one lives. In many studies, however, QoL is defined narrowly as the level of functioning or degree of handicap, which is one important aspect but limited as a marker of quality.

Reminiscence

Involves the discussion of past activities, events and experiences, usually with the aid of tangible prompts (for example, photographs, household and other familiar items from the past, music and archive sound recordings). Reminiscence therapy in a group context has the aim of enhancing interaction in an enjoyable, engaging fashion.

Social worker

A social worker offers residents and their families therapy, support services and planning for discharge. Social workers may also teach and counsel staff members.

Souvenir

An object that serves as a memory of a visit to a museum or participation in a museum programme; a souvenir often has a deeper meaning especially if it is part of an intangible or tangible cultural heritage that has significant value to the local community such as traditional embroidery or archaeological finds.

Stakeholders

People who have influence on your institution or are impacted by your institution.

Sustainability

A way of operating that supports the organization's current needs and can be continued without reducing resources or opportunities for the future.

Tours

Any type of tour of the exhibitions, grounds, buildings or surrounding area. This includes school, self-guided, audio, and guided tours.

Traditional knowledge

Knowledge, innovations and practices of indigenous and local communities around the world. Developed from experience gained over the centuries and adapted to the local culture and environment, traditional knowledge is transmitted orally from generation to generation. It tends to be collectively owned and takes the form of stories, songs, folklore, proverbs, cultural values, beliefs, rituals, community laws, local language and agricultural practices, including the development of plant species and animal breeds. Traditional knowledge is mainly of a practical nature, particularly in such fields as agriculture, fisheries, health, horticulture, forestry and environmental management in general. Source definition: Secretariat of the Convention on Biological Diversity (SCBD), Article 8(j): Traditional knowledge and the convention on biological diversity, 2007.

User

Anyone who visits your museum or website or who takes part in any of your activities.

Visitors

Groups and individuals who go to the museum's physical facilities to

use the museum services.

Visitor motivation

The reason why someone visits a museum, an exhibition or attends a programme. A visitor's expectations and needs are part of a visitor's motivation to attend or not attend.

Visitor experience

A visitor experience begins when a decision is made to visit, and continues through the planning and research, the onsite experience at the museum, and then post-visit activities such as online research or conversations with others about the visit. A visitor experience includes all interfaces or points of contacts a visitor has with the museum and its facility, services and products.

Visitor services

Facilities or services that provide comfort to visitors, including assistive devices, baby changing stations, checkrooms, dining area/food service, first aid stations, information desk, nursing areas, restrooms, seating, signage, water fountains, wheelchairs, and WiFi access.

Visitor studies

The use of data collection, research and evaluation to better understand and improve the visitor experience.

Visitor survey

A set of questions designed to gather information from visitors that will help a museum improve its programmes and services. Surveys may be done using different methods: verbally, online, on paper, by email.

Visual literacy

The ability to observe, interpret, analyze and make meaning from a still or moving image. A shared vocabulary used to describe and discuss an image is generally considered a foundation for literacy.

Wandering

Anyone who has memory problems and is able to walk is at risk for wandering. A person with Alzheimer's or dementia may not remember his or her name or address, and can become disoriented and lost, even in familiar places.

Younger-onset

Younger-onset (also known as early-onset) Alzheimer's affects people younger than age 65. Many people with early-onset are in their 40s and 50s. They have families, careers or are even carers themselves when Alzheimer's disease strikes.

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Resources for chapter 6 – Glossary

<https://www.museumplanner.org/glossary/>

<https://www.museumsgalleriesscotland.org.uk/advice/new-museums/museums-glossary-and-networks/>

<https://www.museumsgalleriesscotland.org.uk/advice/new-museums/museums-glossary-and-networks/>

<https://www.giarts.org/article/glossary-arts-and-education-terms>

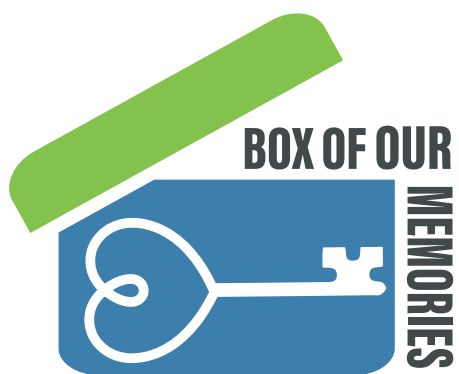
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<https://www.museumsgalleriesscotland.org.uk/advice/new-museums/museums-glossary-and-networks/>

<https://dictionary.cambridge.org/dictionary/english/memorabilia>

<https://www.alz.org/help-support/caregiving/care-options/glossary>

<https://www.ncbi.nlm.nih.gov/books/NBK55483/>



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