

Dolls as an alternative therapy for dementia and Alzheimer's sufferers

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This literature review looks into the usage of dolls as an alternative therapy for those suffering with Alzheimer's disease or dementia. Ethical difficulties and the way they could be dealt with by family members and caregivers are discussed in relation to the benefits this therapy provides the users. The aim is to ascertain if the benefits outweigh the ethical issues and allow doll therapy to become a standard practice of care for those with dementia and Alzheimer's disease.

Introduction

With dementia and Alzheimer's on the rise, newer methods of dealing with these diseases must be explored. Little research has been carried out on dolls as an alternative treatment for those suffering with Alzheimer's and dementia. Only one pilot study has been carried out⁶. Art, music and picture therapy have predominantly been the alternative therapies of choice, however, they are not offered in many clinical settings due to budget problems, staffing and time. Doll therapy focuses on the relationship between child and parent, bringing the person back into the parent role which is both instinctive and natural.

Ethical problems exist with this type of alternative therapy. Initial reactions of family and staff believed that doll therapy promoted deceit, infantilised the adult and compromised dignity. However, there are also benefits for the person with dementia or Alzheimer's disease. It can make life easier for the person, family and staff by helping with challenging behaviours, increasing communication, reduce amount of neuroleptics needed and increase happiness. A lot of the evidence provided is anecdotal and there are gaps in the literature resulting in no available set of guidelines for the use of the dolls. This review will explore the ethical issues surrounding dolls as an alternative therapy and the benefits to all of doll therapy. The aim is to decide if the benefits outweigh the ethical 'dilemmas'.

Ethical Issues

Dignity

Family members had negative views when it came to the idea of dolls as a therapy for dementia and Alzheimer's sufferers. They saw it as demeaning and that it compromised their loved one's dignity. People who observed the

dolls being used were less likely to be concerned about the ethical issues⁹. This shows that it is vital for those with misgivings to witness the use of doll therapy. It is quite common for people with these diseases to display challenging behaviours such as, aggression, agitation, wandering and confusion, which could compromise the person's dignity. These behaviours are managed via sedative methods, but in most cases doll therapy can manage them while maintaining their dignity.

Infantilisation

Infantilisation 'refers to the societal treatment of old age as a second childhood, with little or no recognition of a lifetime of experiences that separate the elderly from children'⁴. This means that encouraging a person with dementia or Alzheimer's disease to use a doll can be seen as treating them like children. This raises the question if dolls are appropriate and whether or not the benefits can outweigh this ethical issue.

Validation

'Reality orientation can do little except drag its unwilling subjects back into an intolerable reality – provoking, anger, misery or both'¹. Validation can be used by family or staff members, by entering into the person's reality and confirming their beliefs that their doll is a 'baby'. Telling the person the truth could compromise their dignity. By telling the person that 'their baby' is a doll can frustrate and confuse them, which can lead to further challenging behaviour. They then become upset and question their perception of reality. 'Validation' is the supporting and confirmation of the patient's concepts of reality, thus maintaining their dignity¹.

Deception v. Truth Telling

'Deception' can be said to be a large part of doll therapy,

which may cause distress and ethical dilemmas for those involved. Should the user believe that the doll is in fact a baby, then family and staff should validate this. To tell the person different may lead to them becoming confused and upset. It is avoiding an unnecessary truth⁹. The therapeutic value here is the belief that the doll is a real baby¹ and this is 'justifiable benevolence deception'⁹. Staff can avoid this ethical problem by using the name that the user uses for the doll e.g. doll, baby or name¹³.

Utilitarianism

Utilitarianism is concerned with the results of an action, not the motives. Increases in challenging behaviour will have an unpleasant effect on the person, and other residents. This means that if the end result of doll therapy means that there is less challenging behaviour, increased happiness, increased dignity and increased communication, then deception can be seen as only a minor flaw in a huge breakthrough. This is about the person with dementia and not our preconceptions¹¹.

Benefits

Doll therapy works well for dementia and Alzheimer's sufferers because they 'live in the moment'. The values and beliefs they used to have are no longer important to them¹³. Many of the users tend to call the doll after one of the children, believing that they are back in the time when their child was a baby. It is suggested that doll therapy can return a man or woman back to when they themselves had young children, therefore returning to the parent role⁴.

Communication

People who suffer from Alzheimer's disease or dementia tend to become unsociable and withdraw as the disease progresses. Staff and family found they could communicate and converse more effectively with the person when they had a doll¹⁴. One event of a resident who rarely spoke would be seen chatting, smiling, stroking the doll and singing lullabies. Prior to the introduction of the doll, the lady would usually sit in silence all day long⁵.

Improvements in Challenging Behaviours

The term challenging behaviour can be used as an umbrella term for wandering, agitation, aggression, verbal and physical abuse, refusing care and possessiveness. These can cause difficulties for staff, embarrass family and frighten other residents. Dolls distract them from how they are feeling at the time and helps them to communicate more effectively, feel more content, express their needs better, decreases levels of wandering and agitation^{10,14}.

A Non-pharmacological Approach

Research carried out shows that some drugs used to treat agitation in dementia and Alzheimer's, such as neu-

roleptics may increase the speed of cognitive decline and the progression of the disease⁵. One person, after the introduction of the doll, never had to be administered neuroleptics as the challenging behaviour had ceased totally². 'After the introduction of the dolls, those residents using dolls will have been prescribed less neuroleptic medications'².

Increased Contentedness

Staff members and family noted how the majority of the doll users tended to be much happier in themselves and more content. For a lot of people, once they witnessed the impact of doll therapy on the user, the ethical 'issues' no longer seemed to be 'demeaning' as they felt that the happiness of their loved one was more important.

Disadvantages

Although Doll Therapy may not suit every person with Alzheimer's, it has many benefits and advantages to those who do. There can also be many disadvantages that must be taken into account. Arguments over ownership and compromise of care seem to crop up in long-term care settings. Arguments have occurred in nursing home between residents over ownership of the dolls. The confused person with dementia or Alzheimer's disease would pick up the wrong doll causing the owner to become upset and possibly violent. Also, dolls were being mislaid and then caused extreme stress to the user when they could not find them⁵. Doll therapy can possibly compromise the person's care as they may put the doll's welfare before their own⁸.

Conclusion

Ethical problems and dilemmas face staff and family when they introduce dolls as a type of therapy for dementia and Alzheimer's sufferers. These problems and dilemmas seem to be outweighed by the benefits and advantages outlined above. The aim was to decide whether or not the benefits outweighed these issues.

As these diseases continue to progress, the individual tends to lose their abilities in reverse order to when they learned them. The use of a doll brings them back to the fulfilling and important role of a parent. They feel that they have responsibility, give them a chance to give care and make them feel needed.

Anecdotal evidence suggests that this aids to slow down the progression of the disease and cognitive decline, improves communication, reduces challenging behaviour, increases contentedness, decreases amount of neuroleptics required while being extremely cost effective. However, the majority of the evidence is anecdotal and it is clear that more research must be obtained to further develop and expand dolls as an alternative therapy for those suffering with dementia and Alzheimer's disease.

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