LIFE REVIEW: IMPLEMENTATION, THEORY, RESEARCH, AND THERAPY

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ABSTRACT

A selective literature review of publications on life review generated ideas on implementation, theory, research, and therapy. The review begins by differentiating life review from reminiscence, and summarizing ways to conduct a life review. A dozen theories that have been influenced by the life review technique are presented, with a focus placed on Erikson's Stages of Psychosocial Development. Erikson's theory has not only been influenced by the life review, it has had a major impact on life review research. Three research topics are discussed: Erikson's ego integrity versus despair in old age, demographical differences in the practice of life reviews, and the impact of conducting life reviews on staff in institutional settings. Most practitioners of life reviews are institutional staff, university students, and family members, many of whom have had limited prior training. The prospect of a certified life review training program is discussed.

> Rather than seeing ones life as simply one damned thing after another, the individual attempts to understand life events as systematically related . . . a life story (Gergen & Gergen, 1983).

To understand life, people tell stories. Storytellers in traditional societies were older adults, the ones who remembered the past and helped the young learn from it. For many years, this storytelling tradition not only served as a means for passing down information from one generation to the next, but enhanced the elder's status within the community.

Along with many other changes associated with modernity, this storytelling role among older citizens fell by the wayside. And, some argue, the prestige, status, and self-esteem of older adults have been diminished as well. In contemporary society, however, a growing number of community practitioners and educators are attempting to revive the storytelling role and enhance the mental health of older adults through a life review.

This selective literature review differentiates life review from reminiscence, summarizes ways to conduct a life review, compares theoretical frameworks, and examines research and therapeutic topics. The review was guided by four search engines—Medline, AARP Ageline, CINAHL, and PsycINFO—using the terms life review, reminiscence, life story, and oral history. About 600 abstracts were identified, and 140 publications were selected for review.

LIFE REVIEW VERSUS REMINISCENCE

Though life review and reminiscence are by far the most commonly used terms in the literature, there are many similar expressions in use, such as life story, life history, oral history, guided autobiography, personal narrative, and narrative gerontology. These terms are oftentimes uniquely defined by a particular author, and other times used interchangeably. Standard definitions of these terms have not been achieved, though progress has been made toward the important goal of differentiating life review from reminiscence.

The simplest definition of reminiscence is the recall of memories. This is usually characterized as simple daydreaming, storytelling, or nostalgia by oneself or with others. Reminiscence is likely a universal experience from at least the age of 10 (King, 1982). It is a passive and spontaneous process that may be part of a life review but is not synonymous with it. Sometimes the terms reminiscence and reminiscence therapy are used as synonyms for life review. In these instances, the terms do not refer to the simple and spontaneous recall of memories, but a structured and systematic process deliberately implemented with willing participants.

A life review is typically structured around one or more life themes, most often family themes—ranging from ones own childhood, to the experience of being a parent, to being a grandparent; and work themes—from first job, to major life's work, to retirement. Other commonly used themes, but by no means the only ones, are: major turning points; impact of major historical events; role of education, health, holidays, music, literature, or art in ones life; experiences with aging, dying and death; and meaning, values, and purpose.

Life review is also more likely than reminiscence to be an evaluative process, in that participants examine how their memories contribute to the meaning of their life, and they may work at coming to terms with more difficult memories. Individuals who engage in reminiscence or life history, in contrast, often detail the events of their life in more of a descriptive fashion.

While life review is similar to reminiscence in that people enjoy doing it, it is also done for educational or therapeutic purposes. Life review conducted for educational purposes can teach or inform others, pass on knowledge and experience to a new generation, or enhance understanding of ones own life or oneself. Life review conducted for therapeutic purposes can help people cope with loss, guilt, conflict or defeat; or help someone find meaning in ones accomplishments.

Robert Butler's (1963) landmark article on life review and reminiscence, "The Life Review: An Interpretation of Reminiscence in the Aged," was the major impetus in the field even though some contentions in his article have been disputed. Several analysts, for instance, have disagreed with Butler that life reviews are universal (Lieberman & Tobin, 1983; Merriam, 1995; Taft & Nehrke, 1990). Butler, however, makes a distinction between reminiscence and life review, and the universality that he referred to in his article may have been exclusively focused on reminiscence.

Another Butler contention that has not received unanimous support is that reminiscence becomes more frequent with age. This has been confirmed by some researchers (Lieberman & Falk, 1971; Revere & Tobin, 1980) but not others (de Vries, Blando, & Walker, 1995; Romaniuk & Romaniuk, 1983; Webster, 1994). And Butler's assertion that reminiscence appears to be precipitated by approaching death is not supported by one research study (Merriam, 1995).

What is indisputable about Butler's article, though, is that he began to remove the stigma associated with reminiscence and life review among older adults. Butler argued that these activities were not predominantly triggered by pathological tendencies for the purpose of escaping the realities of the present, but were normal processes that emerged from a desire to enjoy, grow, cope, or change.

Birren and Cochran (2001) observe that life review is not therapy, but it often can be therapeutic. Lewis and Butler (1974) go one step further and note that the life review can be a very useful tool for therapists. ". . . the life review obviously is not a process initiated by the therapist. Rather the therapist taps into an already ongoing self-analysis and participates in it with the older person" (p. 166). The authors then describe several techniques for using life review to enhance individual and group psychotherapy.

CONDUCTING A LIFE REVIEW

Recognizing the universality and value of reminiscence, Butler encouraged more formal life reviews that systematically elicit memories for educational and therapeutic purposes. And increasingly over the four decades since Butler's seminal article was published, practitioners in the community have translated the desire to reminisce among older adults into more formal life reviews.

Activity directors in retirement communities and nursing homes, for example, are providing an enjoyable or educational life review experience for older residents. Students instructed by university professors or high school teachers are initiating intergenerational life review experiences that benefit both generations. And family members are recording life reviews for the benefit of younger generations.

A life review requires few resources and modest training. It can be done by oneself, but more often it is guided by a partner, or by a facilitator as part of a group experience (Birren et al., 1996; Birren & Cochran, 2001). Haight (1995) surveyed 41 guided life reviews in the literature and reported that they were roughly equally divided between paired and group interventions.

Paired life reviews tend to be of shorter duration, up to six meetings; group life reviews tend to range from 1 to 11 months (Haight, 1995). Paired sessions allow for easier access and less complicated confidentiality issues; group sessions add the benefit of helping older adults establish new peer relationships or adjust better to a new congregate housing site or institutional setting.

Based on considerable experience with conducting life reviews, Haight and colleagues (2000) report that for a life review to have substantial impact on the participants' mental health it should involve a sufficient investment in time (6 weeks or longer), scope (birth to present), intimacy (listening by other), and evaluation (analysis and synthesis). The ideal length of a single interview session is unknown, but sessions often last between one and two hours, unless physical frailty requires a shorter time period (Detzner, 1981).

Often a life review involves the use of memorabilia to inspire memories, such as scrapbooks, family photo albums, letters, cherished possessions, and genealogies (Sherman, 1995b). Music can be used to enhance memories, especially as they relate to weddings, wars, holidays, religion, or popular songs of a particular era (Kartman, 1991). In addition, some older adults take pilgrimages to significant sites in their past in order to stimulate memories. Although a life review may be just an oral experience, an additional written version is likely to add to its potential impact on mental health (Sherman, 1991, 1995a). The interview sessions may initially be recorded by tape recorder or by written notes, followed by repeat editing and multiple drafts.

Conducting life reviews with college or high school students as interviewers requires making sure that students have two skills: writing and interviewing (Myerhoff & Tufte, 1975). Writing skills include not only knowledge of gram- mar but editing skills to enhance the meaning of the content. Interviewing skills include setting up meetings in a reliable fashion, avoiding interference with the flow of memories, stimulating additional memories when necessary, listening with great attention and openness, and focusing the interview if the older adults' memories wander. Facilitating group life reviews, however, requires additional skills typically obtained through training and experience (Burnside & Haight, 1994).

There are an increasing number of persons who have gone into the business of preserving life reviews through written materials, audio tapes, video tapes, and CD-ROMS (Kunz, 1998). In 1994, the Association of Personal Historians was founded, and in 1995, an international biannual conference was launched, called The Reminiscence and Life Review Conference.

LIFE REVIEW THEORY

Erikson's Stages of Psychosocial Development

Erik Erikson's (1950) Stages of Psychosocial Development was focused primarily on childhood development, due to the prevailing influence of Sigmund Freud at that time. The last two of Erikson's eight stages, though, were focused on the second half of life, and this inclusion was particularly innovative for its time. Erikson directly addressed the importance of conducting a life review during the last stage of life.

Each of Erikson's developmental stages embodies a fundamental issue that challenges the individual who attempts to resolve it and move on to the next stage. The issue in stage seven is external in focus and deals with generativity versus stagnation. Generativity refers to whether the individual is able to help guide the next generation in parenting, teaching, mentoring, and other behaviors that contribute a positive legacy that will outlive the self.

Although this stage directly relates to life stories and the ability to transmit culture to younger generations, no empirical study was found that uses generativity as its guiding theory. One contributing factor may be the lack of an operational definition for generativity. Erikson (1975) defines it as not just procreativity and productivity, but any activity that contributes to the life of generations.

The issue in stage eight, however, has drawn considerable attention from researchers, theoreticians, and therapists. Stage eight is aimed inward and deals with the central issue of ego integrity versus despair. Ego integrity is defined as a basic acceptance of ones life as having been inevitable, appropriate, and meaningful. Despair, in contrast, is associated with resentment, guilt, and regret.

Erikson viewed life review or reminiscence as vital to the task of stage eight, the stage associated with old age. Life review can help older individuals acquire ego integrity and avoid despair. A life review, according to Erikson, can help create an acceptance of one's one and only life cycle with few or no regrets. It does this by helping individuals integrate memories into a meaningful whole, and to provide a harmonious view of past, present, and future (Clayton, 1975). Those who are unable to accept and integrate their life experiences will be filled with despair.

If life review is vital for achieving ego integrity, Erikson does not address why some individuals may achieve ego integrity without this intervention. Nor does Erikson address why some individuals fail to make progress toward ego integrity through a life review, and some may even experience a deeper despair.

Erickson's developmental theory has generated an enormous amount of attention to psychosocial development in the second half of life. One study reported that when older adults are cued to recall memories, content analyses of the resulting memories shows them to be systematically related to Erikson's psychosocial stages (Conway & Holmes, 2004). Nonetheless, as with any theory, there has been criticism generated as well. A substantial amount of this criticism has been leveled at the way stage theory emphasizes developmental process at the expense of cultural variability and cohort effects (Pietikainen & Ihanus, 2003; Weiland, 1993). On a related note, Cole (1992) points out how stage- and age-structured perspectives tend to reduce the historical role of religion and spirituality in guiding the life course.

Wallace (1992) has argued that "growing old differs across settings and contexts . . . and that developmental views are biased in assuming that aging is the same for all people, at all times, and in all situations" (p. 120). Erikson's methodology, in fact, was based on personal constructs of identity that reflected the moods of his own life (Kushner, 1993; Thorson, 2000), and he did not subject his personal observations to systematic data collection and analysis in his own country and time, much less cross-culturally or with cohorts from substantially different eras (Pietikainen & Ihanus, 2003).

Erikson's contention that individuals attempt to resolve the issue of ego integrity once and for all in the eighth stage of life has been challenged by Melia (1999). She argues that ego integrity is an issue that emerges repeatedly throughout adulthood, and in any adult stage of life. She studied the lives of 39 older Catholic religious, and found that ego integrity was never established definitively, but needed to be grappled with as each new loss—death of a significant other, health problems, and so forth—was encountered throughout adulthood. The author of this review refers to Melia's contention as a "coming to terms" perspective, and this will be addressed in the next section, after one final criticism of Erikson's stages, by Erikson himself.

Erikson, with an addendum by his wife (Erikson & Erikson, 1997), modified his own eight stages by adding a ninth stage, in a work called: *The Life Cycle Completed: Extended Version.* The ninth stage is when the individual truly enters a life cycle; i.e., cycling back to the issues they were born with. This stage, typically in one's late 80s and 90s, is marked by loss of strength, control, and autonomy. The key issue is to gain hope and trust, which mirrors the issue of the first stage, infancy. The challenge in stage nine is to avoid giving up, and to be as fully alive as possible until one is dead.

Coming to Terms

A "coming to terms" perspective provides an alternative to developmental theory where ego integrity is or is not resolved once and for all in the eighth stage of life. Coming to terms may instead be a repeated experience that

arises with each loss in adulthood, and this psychological adjustment may occur independently within each of several dimensions of life (e.g., family, work). This perspective was applied by the author to life review projects competed by students in his introductory gerontology classes over the years (Haber, 1986). Adults come to terms, or fail to come to terms, with their past in three ways:

1) Value the Good Things—Adults look back on their lives and recognize the good things they have achieved in their family life, work career, personal endeavors, religious orientation, and other domains of life. Older adults, in comparison to younger adults, may be more oriented toward maximizing emotional rewards through the life review process (Pasupathi & Carstensen, 2003). Students in the author's classes, therefore, have been encouraged to draw out positive experiences, emphasize them, and maximize the mental health benefits that can be accrued by emphasizing and valuing positive memories.

2) Come to Terms with the Difficult Things—Older adults come to terms with most of the major challenges of life, such as adjusting to widowhood, retirement, and diminished physical vigor. Students in the author's classes have been encouraged to support older adults when they choose to examine these experiences, but not dwell on them when the older adult appears ready to move on. This moving on process may involve a shift to a more neutral or positive topic, with students being encouraged to end each interview session on a positive note.

3) Not Come to Terms with the Difficult Things—Older adults may not be able to come to terms with some aspects of their life. They may obsess on the perceived good old days, or fixate on failures or conflicts in ones past or present. A longstanding feud with a family member or the death of a child, for instance, may become an obsessive and anxiety-producing memory (LoGerfo, 1981). Depending on the setting, such as a nursing home or a retirement community, students may need to terminate the interview as gracefully as possible, and inform the staff at these facilities of a possible need for a mental health referral.

Unlike Erikson's developmental theory, which culminates with the issue of resolving integrity versus despair in the last stage of life, coming to terms is an ongoing process throughout adulthood. However, in comparison to Erikson's eighth stage of development which has inspired a substantial number of empirical studies, a coming to terms perspective has not been subjected to many investigations. Perhaps this is due to the subjective nature of analyzing a coming to terms with ones life, and the smaller number of qualitative–versus quantitative–studies that are being published in academic journals.

Other Theories

There are many other theories that relate to the life review perspective that have also received scant attention in the literature. In general, these theories note that life stories are constructed and reconstructed through the telling of story after story in order to maintain a positive identity (Gergen, 1980; Meacham, 1995; Molinari & Reichlin, 1985; Randall & Kenyon, 2002; Tarman, 1988). One threat to an individual's identity is the increasingly rapid pace of social and cultural change with each succeeding generation, combined with a negative stereotype of aging.

Thus, memories that may have once been positive tend to fade, and may need to be retrieved, reaffirmed, and validated in the context of present day life. And negative memories may need to be ignored or minimized in their emotional import through selective reminiscing about positive experiences. There is evidence to suggest that older adults who engage in life review do this more effectively in comparison to younger adults (Pasupathi & Carstensen, 2003).

Another theory along these lines is Erving Goffman's (1963) dramaturgical presentation of self. "Older individuals attempt to present a positive impression of themselves in order to combat the growing stigma of old age" (Tarman, 1988, p. 172). Goffman (1959) proposes that individuals continually manipulate the impressions that others make of them in order to maintain their self-esteem.

Life review can also be interpreted in the context of several gerontology theories. Continuity theory, for instance, suggests that as individuals transition from one stage to the next over the life cycle, the primary need is to seek order and meaning by linking past events with the present (Atchley, 1989). As stated by Parker (1995) "Individuals build life stories as they age, and these stories incorporate past events into an organized sequence, giving them a personal meaning and a sense of continuity."

Life review has also been associated with both the disengagement and activity theories in the field of gerontology. Prior to Robert Butler's reinterpretation of reminiscence and life review, there was widespread speculation that this type of activity is part of the disengagement process; i.e., living in the past versus seeking new experience (Butler, 1963). Conversely, one can interpret the life review process as part of activity theory (i.e., an active mental activity) that might sharpen mental acuity and postpone dementia (Wilson et al., 2002).

Many theorists have posited that the life review enhances therapeutic techniques. Butler (2002) proposes that the life review skill may be a valuable component of family therapy, "facilitating consensus and clarification of specific family issues" (p. 9). Puentes (2004) suggests that life review can be integrated with, and strengthen, cognitive therapy through the review of major themes in ones life and examining them for cognitive distortions.

Crose (1990) proposes that life review can be a valuable addition to gestalt therapy by bringing significant past events into the here and now in order to resolve a persistent issue and achieve closure. Ray (1998) examines life review in

the context of feminist theory. Kralik and colleagues (2004) suggest that the life review process may be an important component of self-efficacy theory, and can fortify coping strategies with chronic illness.

Reker and Chamberlain (2000), in their edited book: *Exploring Existential Meaning*, point out that the life review process may be interwoven with existential theory. Both address the same questions: How do events in my life fit into a larger context? What is the purpose of my life? Is there meaning in my life? What is worth living for? Except for "fixed reminiscence," when the story is told repeatedly in the same way to affirm a particular value, most memories are told through "dynamic reminiscence," with feelings and meanings still evolving (Chandler & Ray, 2002).

Merriam and Clark (1993) suggest that life review can bring together theorists who tend to work in separate domains. The authors note that most, if not all, important aspects of our lives are within the domains of work and love. Work is task and achievement oriented, and tends to attract analysts from the fields of sociology, organizational behavior, or management. Love, however, is focused on feelings and relationships, and attracts psychologists and related therapists. Life review practitioners, however, can bridge the theoretical divide by asking the following questions: Does activity and energy devoted to one area stimulate or deplete development in the other? Do men emphasize work and women love, to the neglect of the other? If one area *is* neglected is there necessarily a diminution of life satisfaction?

LIFE REVIEW RESEARCH TOPICS

Ego Integrity versus Despair

Given that Erikson's eighth stage of psychosocial development is the most widely cited component of a theory in the life review literature, it is not surprising that the outcome variables drawing the most attention correlate with his two basic concepts: ego integrity versus despair.

Many life review studies measure ego integrity, or related dependent variables such as life satisfaction, psychological well-being, and self-esteem (Haight et al., 2000). One study of elderly nursing home residents reported that completing a life review was positively correlated with high ego integrity scores (Taft & Nehrke, 1990). In a carefully controlled study, a randomly selected group of 60 homebound elderly subjects increased life satisfaction and psychological well-being in comparison to a friendly visit control group and a no-treatment group (Haight, 1988).

A study of 36 female residents in three nursing homes noted that life review led to increased life satisfaction (Cook, 1998). Another study reported that a life review intervention was effective in improving the life satisfaction of 31 older adults living in sheltered housing (Fielden, 1990).

A substantial number of life review studies measure depression, which can be viewed as an operational definition of Erikson's despair. Depression is the most common emotional disorder among older adults, and it is often overlooked and under-treated by health professionals (Haber, 2003). When treated, the primary modality has been medication which, while effective, can be expensive and may have substantial side effects. Several studies, however, have demonstrated that an inexpensive life review can be effective in treating depression without harmful side effects.

Haight and colleagues reported that a life review intervention in comparison to a friendly visit was not only an effective intervention for reducing depression among residents in a nursing home (Haight, Michel, & Hendrix, 1998), but a 3-year follow-up revealed lasting effects with some of the residents (Haight et al., 2000). Similar—though shorter-term—positive results were obtained with older adults who were: clients of a social service agency (Serrano, Latorre, Gatz, & Montanes, 2004); older women living in an assisted living facility (Jones, 2003); older residents living in nursing homes (Ashida, 2000; Taft & Nehrke, 1990; Youssef, 1990); and clinically depressed hospital patients (Bacher et al. 1991; McDougall, Blixen, & Suen, 1997).

Beecham and colleagues (1998) speculate that life reviews allow institutionalized residents in particular an opportunity to gain a sense of control over their life story, in contrast to a lack of control over independence, medical decisions, and their institutional environment. In addition, high pretest depression scores in institutional settings allow for a reduction to take place, in contrast to community settings where low pretest depression scores make further reduction unlikely (Haight, 1988; Stevens-Ratchford, 1993).

One study of older adults with moderate or severe depression reported that life reviews led to significant improvements in depressive symptoms within a short 6-week time frame (Watt & Cappeliez, 2000). The researchers noted that this psychosocial treatment appeared to work more quickly than traditional clinical interventions, because it is more familiar to the client—the interviewee is already an expert in the material (personal memories), and does not need to learn new therapeutic skills or vocabulary.

As noted by Weiss (1995): "The life review process is often seen by older adults as a more appealing and less threatening activity than most counseling interventions, because it invites older adults to discuss their past and to uncover positive life experiences and inner strengths" (p. 168).

Demographical Differences

The content of life reviews may be influenced by demographic variables, such as gender, ethnicity, age, and so forth. The demographic variable that has received more research attention than most is gender. Males appear to focus life reviews

more on instrumental activities, personal achievements, and historical events, while females focus more on relationships and emotional events (Davis, 1999; DeGenova, 1995; Keller, 2002; Ray, 1998).

Sherman (1991) found men to relate memorabilia used in life reviews more to personal values or ideals, while women relate them more to individuals. David (1995) found men more attentive to their own selves, women more on significant others. deVries and colleagues (1995) and Webster (2001) found men reminisce less frequently, and when they did reminisce they remembered fewer events, while women reminisce more frequently and reported more enriched, interpersonal memories.

Ethnic differences with life reviews are only beginning to receive attention. Blacks used reminiscence more than whites to understand life in general and their own lives in particular, as well as to teach others about the past and their own accomplishments (Merriam, 1993). Another study reported that both Chinese-American and Mexican-American elders demonstrated as much willingness to participate in life reviews as Anglo-Americans (Atkinson, Kim, Ruelas, & Lin, 1999), though in another study the earliest memories of Chinese adults occurred significantly later than the earliest memories of white Americans (Han, Leichtman, & Wang, 1998).

These isolated studies do not begin to tap systematic differences among ethnic groups. Even the most basic question has not been addressed: Do the oral traditions of different ethnicities influence receptivity toward, or outcomes from, life reviews?

Finally, life review and reminiscence are being studied more with children, adolescents, and young adults. Though participants of all ages recall episodes of wisdom through their autobiographical experiences, it seems that ". . . wisdom itself manifests differently in different life phases, and full use of one's wisdom appears to be a developmental achievement. Adolescents may not yet have developed the ability to take full advantage of their life experiences by embedding them in a life story and learning lessons from them" (Bluck & Gluck, 2004, pp. 568-569). Autobiographical memory may be an emerging capacity, along with the understanding of self (Fivush & Haden, 2003).

Staff Impact

Another area beginning to receive research attention is the impact that life reviews have on the staff persons administering them. Three studies reported that conducting life reviews had positive effects on staff perceptions toward older persons (Goldwasser & Auerbach, 1996; Pietrukowicz & Johnson, 1991; Ross, 1990). One study reported that home health aides were enthusiastic about learning life review techniques and applying them to older clients, but because of initially strong attitudes toward aging these aides did not improve their attitudes (Haight &

Olson, 1989). They did, however, express appreciation about having a therapeutic tool to enhance their clinical practice.

Another study of nurse's aides compared those who received a medical chart along with life history information, with a control group of aides who only received a medical chart. Aides who received additional life history information and training demonstrated significantly improved attitudes toward nursing home residents in comparison to control aides (Pietrukowicz & Johnson, 1991). These findings are particularly significant given the huge problem of nursing home personnel turnover.

Haight's Review

Barbara Haight and colleagues have done three comprehensive summaries of life review studies through annotated bibliographies. They report that life review and reminiscence articles have increased to about 15 a year over the past decade, up from just two or three a year immediately after Robert Butler's seminal article in 1963. The most recent annotated bibliography covered 80 life review publications between 1994 and 2000, and was organized by type: scholarly discussions, research studies, applications, and methods (Hendrix & Haight, 2002). The authors concluded that life review research interventions have become lengthier and more likely to produce better outcomes, and that life review research methodologies have become more sophisticated and varied.

THERAPEUTIC IMPLICATIONS

Most practitioners of life reviews are staff persons, students, and family members with limited prior training. Oftentimes, life reviews are practiced with the most vulnerable populations, not only with older adults in nursing homes, but more recently with older persons grappling with serious disease (Overcash, 2004) or terminal illness (LeFavi & Wessels, 2003).

The most pressing need, therefore, is to reduce the likelihood that practitioners harm the mental health of older adults. Researchers, in fact, have warned against allowing well-meaning but inadequately trained practitioners to break down the use of purposeful denial or non-reflection as a primary defense mechanism (Hewett, Asamen, Hedgespeth, & Dietch, 1991; Shute, 1986). Denial, in fact, may be adaptive in early bereavement and some health setbacks, and the encouragement of individuals to review their past or current situation may distress them (Luborsky, 1993).

The development of a brief training program may help practitioners adequately screen older adults and identify those who might not benefit from a life review. Even more ambitious would be a training program for practitioners to help their clients come to terms with difficult memories from the past, as well as to identify

additional sources of self-worth from the past. One way to accomplish this may be to emphasize the themes (e.g., work or family) that are associated with higher levels of life satisfaction, and to assist them with crafting a more balanced interpretation of past events (Watt & Cappeliez, 2000).

Haight (1995) reviewed nearly 100 life reviews and reported that only 7% were associated with negative outcomes. Although this finding is promising, it must be assessed in the context that negative outcomes may be more difficult to get published in research journals than studies that report positive outcomes.

Even if this small percentage of negative outcomes is representative of the larger practice of conducting life reviews, a considerable minority of persons may be ill-served by educators, practitioners, students, and family members who are not trained to provide therapeutic assistance. This danger may be enhanced in institutional settings where depression is widespread and where, in one sample, 30% reported that the retrieval of memories was undesirable (Tobin, 1972). Thus, greater caution and supervision may be needed in certain settings or situations.

An expanding group of life review practitioners are college and high school students who implement them as part of their educational curriculum. To enhance the safety and efficacy of student efforts, more in-depth analyses of educational programs, similar to McGowan's (1994) mentoring-reminiscence program with college students interviewing homebound older adults, need to be made available to faculty and teachers. McGowan encourages students to focus more on the historical dimension of life reviews rather than the evaluative aspects. He notes, however, that when older adults want to evaluate an aspect of their life review, and student interviewers are willing, the evaluation is likely to have a good outcome.

A long term goal of life review practice, therefore, may be the development of a certified training program that enhances the likelihood of safe and effective interventions.

CONCLUSION

Progress is being made toward a consensus definition of life review, though standard definitions in this field have proven elusive. There is less consensus, however, on how to conduct a life review, including what type of questions to ask, the frequency and duration of interviews, and the content of the training of interviewers or group facilitators.

A dozen theoretical frameworks are noted as having been influenced by the life review technique. Erikson's Stages of Psychosocial Development is examined in more depth because it has not only been influenced by the life review practice, but it has had a major impact on life review theory and research. Most of the research attention has been focused on Erikson's eighth developmental stage: ego integrity

versus despair, while the seventh stage: generativity versus stagnation, has been largely ignored.

Three research topics are examined. Erikson's concepts of ego integrity versus despair is a primary focus of life review research. Another area of research interest is the demographical differences in the practice of life review, particularly on how gender influences the content of life reviews. Studies also suggest that life reviews can impact favorably on staff, with the potential for reducing high rates of personnel turnover among nursing home staff and home health aides.

There has been inadequate research attention on the qualitative process of coming to terms with ones past, to reaffirm positive events and to reinterpret difficult memories in the quest to enhance mental health. This neglect raises the question of whether the growing numbers of staff persons, students, and family members conducting life reviews are adequately trained to assist others. A goal with therapeutic implications, therefore, is the development of a certified training program that enhances the likelihood of safe and effective interventions.

The future direction of the field of life review may best be served by the advancement of a greater number of coordinated sessions at professional conferences, so that researchers, practitioners, and educators can systematically address issues of high priority.

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