

Research Evaluation

**An Empirical Investigation of the Sporting Memories
Reminiscence Program**



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Research Summary

The purpose of this research study was to empirically evaluate the efficacy of the Sporting Memories reminiscence group therapy program. To do so, a mixed-methods paradigm was used with two sequential phases of work.

In the Phase 1, a qualitative investigation was conducted with one Sporting Memories group situated in the West of Scotland, with the chief aim of providing a systematic and in-depth exploration of any potential emotional, social and cognitive benefits for individuals living with dementia, depression and/or loneliness, including their carers. The findings from this initial study provided strong evidence for the four key outcomes demarcated in the Sporting Memories 'Theory of Change' Model (see Appendix 1) to include, improved mental and physical wellbeing, reduced loneliness and increased connections.

This warranted further follow-up investigation of the wider impact of SM by way of capturing the prevalence of these particular results across Sporting Memories groups within the UK. Therefore, the aim of this Phase 2 body of work was to systematically evaluate the wider impact of the Sporting Memories Foundation (SM), with a focus upon ascertaining the incidence of the four key outcomes demarcated in the Theory of Change Model.

Results are discussed in relation to the theoretical framework set out in the Theory of Change Model.

Study 1

A Qualitative Investigation of the 'Sporting Memories' Reminiscence Program

Background & Aim

The chief aim of this study was to evaluate the efficacy of the Sporting Memories (reminiscence group therapy program, identifying any potential social, emotional and cognitive benefits for individuals living with dementia, depression and/or loneliness and their carers, as well as elucidate any central processes and practices of the group integral to these specific outcomes.

One of the central tenets of the Sporting Memories Foundation is to provide an inclusive forum for individuals experiencing a variety of physical and mental health issues and this was thus reflected in the choice of methods here.

METHOD

Sample

Participation was both voluntary and unremunerated and individuals were recruited to the study using a convenience sampling method¹ from one established² Sporting Memories group in the West of Scotland. This group meet on a weekly basis for approximately 2.5 hours per session, led by one Sporting Memories practitioner and assisted by 3 volunteers (two males, one female). In addition, there were 14 group members present on the day of testing, all of whom were male. To minimise any potential disruption to the session and by way of ensuring the ecological validity of the observational data, no further demographic data was collected from these participants. Of this sample, 7 individuals were invited to take part in the focus group interview aged between 49 and 89³ with a variety of (comorbid) conditions to include depression, dementia, alcoholism and Parkinson's disease, with one participant undergoing stroke rehabilitation⁴. In addition to providing details regarding any physical or mental health conditions, many of the sample further alluded to the experience of social isolation and loneliness. Ethical approval for the research was granted by the School of Engineering & Built Environment at Glasgow Caledonian University.

Data Collection

A few weeks prior to the first day of testing, the practitioner was provided with information about the study to pass onto group members who were interested in participation, to provide ample time to consider participation and raise any concerns or ask any questions regarding the research. To allow for

¹ In accordance with ethical proceedings the researcher stratified for a sample to include only those with capacity to provide informed consent to participate in the research.

² At the time of testing the SPORTING MEMORIES group had been in existence for approximately three years prior.

³ The participants in the focus group sample were aged 49, 51, 61, 62, 72, 77 and 89.

⁴ The focus group participants were not specifically asked to solicit details regarding any specific physical/mental health conditions. However, the majority of the group routinely divulged information relating to their physical and mental wellbeing throughout the course of the interview itself.

a more nuanced understanding of the processes and outcomes of the group dynamic, data was firstly collected as field notes in situ from a non-participation, unstructured observation of one Sporting Memories group session ($t = 58$ minutes 8 seconds), thus providing descriptive data regarding the nature of the session as well as qualitative data regarding the group dynamic, via the documentation and analyses of verbal and non-verbal interactions. To reduce data selectivity and bias, the session was also video-recorded for the purposes of additional analyses. From there, a semi-structured focus group interview was conducted ($t = 46$ minutes 10 seconds) with 7 members of the Sporting Memories group immediately following the initial observation period to provide an in-depth exploration of the overall experience of participating in the group. The interview took place in a separate room from the rest of the group to allow for adequate privacy.

Of particular interest here was the identification of any perceived outcomes and opportunities from the perspective of the group member in accordance with the wider aims of the study. To this end, a series of open-ended questions were administered in line with a set of pre-defined interview topics, with further probes executed in instances where the participants mentioned anything of definitive significance in light of the overarching aims of the project.

A focus group method was purposively employed here to better simulate the real-world dynamics of the group (c.f. Krueger & Casey, 2000) and thus to observe interactions among participants and the overall social processes of the group. It was further reasoned that by creating a more naturalistic environment for discussion and thereby fostering greater social interaction between group members, any verbal communication difficulties experienced by many of the participants would be abridged with reduced pressure to respond, mutual support from familiar others and the potential for shared experience to stimulate further memory recall (Bamford & Bruce, 2000). To avoid any resultant social desirability bias owing to the presence of others and/or awareness of the project aims, the researcher encouraged free expression throughout by reminding participants that there were 'no right or wrong answers', all data would remain confidential and any direct quotes utilised for the purposes of analyses would remain confidential and that the research was being conducted by an institution independent to the Sporting Memories Foundation.

Following completion of the data collection all participants were thanked for their time, fully debriefed and afforded the opportunity to retrospectively withdraw from the research study, should they wish to do so. In addition, all participants were provided with a copy of the participant information sheet and contact details for the research team should they wish to gain access to the results of the study.

Data Analysis

Field notes from one non-participant, unstructured observation of one established Sporting Memories group session were recorded and combined with a further qualitative analyses of the recorded video session of the group. The focus here was upon the group dynamics and all verbal and non-verbal social interactions to firstly produce a descriptive account of the processes and outcomes of the session and a subsequent, in-depth analyses of the social and contextual data gathered. From there, audio recordings of the focus group interview were analysed using a thematic analysis approach (Braun & Clarke, 2006).

Accordingly, analytical proceedings commenced with repeated readings and inductive data-driven coding of these recordings and the analysis was framed around identification and extraction of data pertaining to overarching aims of the study⁵. Further organization at the semantic level gave rise to a

⁵The researcher's judgement as to the "keyness" of each theme (Braun & Clarke, 2006) was dependent on whether it captured something essential to the research inquiry and was not necessarily dependent on any "quantifiable measures" such as the

number of recurrent themes which were then organized into super-ordinate themes following latent analysis.

FINDINGS

Observation

The group meeting took place in a large church hall with 14 group members present on the day of testing, all of whom were seated in a circle around a table with the Sporting Memories practitioner positioned halfway between the group. The use of a public space, as opposed to a clinical or social care setting reinforced normality and inclusion. Refreshments were provided by one female volunteer and group members engaged in informal conversation with one another prior to commencing the session. At the outset of the session, the group sang their customary song and applauded to welcome two new members to the group that day. In addition to the sporting memorabilia displayed, a football was used to indicate each speaker in turn to avoid any overlap in conversation and to ensure that the focus would be only be on one individual at any time. Although not directly observed here, the practitioner further informed the researcher that group also employ the use of yellow and red cards to discourage any unwanted behaviour/discussion.

A current sporting event was used to prompt the initial discussion interspersed with additional questions as a stimulus for further recall and recognition. Each individual was provided with an opportunity to answer each question in turn and afforded ample time to respond. In instances where individuals appeared to experience difficulty, prompts were provided by the practitioner and/or other group members and the group were seen to congratulate, support and encourage each individual, irrespective of their ability to respond to a given question. For those who appeared to be less informed about a particular sporting event or category, the practitioner was seen to bring the individual into the conversation by linking the ongoing discussion to a known subject of interest to that person. Likewise, if an individual was unable to answer a particular question the practitioner routinely linked the sporting topic to known area of interest to allow that individual to engage with and provide a correct answer to the quiz. Indeed, whilst the individuals in the held an interest in sport, they also had other hobbies and preferences which therefore necessitated this generic and arguably more inclusive approach.

Across group members, each correct answer was met with unanimous applause from the group and any incorrect answers or missed questions sparked commiseration and encouragement. In addition to the questions posed and general discussion, talk surrounding a particular sport was also seen to be used as a vehicle to explore personal accounts of life events and experiences, with a particular focus on any achievements or salient memories, again with a focus upon each individual's area of interest or strength.

This person-centred approach was evident throughout the session with conversation topics guided by the group members themselves with minimal instruction provided. In instances where the conversation appeared to taper off or come to a natural close, the practitioner was seen to veer the conversation towards a topic of mutual interest across the group such as an event previously attended by the group members⁶. In terms of the perceived level of engagement and enjoyment, there were numerous non-verbal and verbal signs of pleasure, relaxation, humour and increased responsiveness, all of which are

number of instances across the data set. Moreover, the organization of themes into superordinate branches did not necessitate any assumption that the recurrent themes identified were in any way dissociated from others. Nonetheless, retention of each theme in terms of its specificity was empirically supported by the surrounding data.

⁶ Guest speakers and field trips are planned according to groups' interests and availability factors.

considered key outcomes for reminiscence therapy (Haight, Gibson & Michel, 2006). Peer interactions appeared positive and behaviours indicative of cohesion and camaraderie were evident throughout.

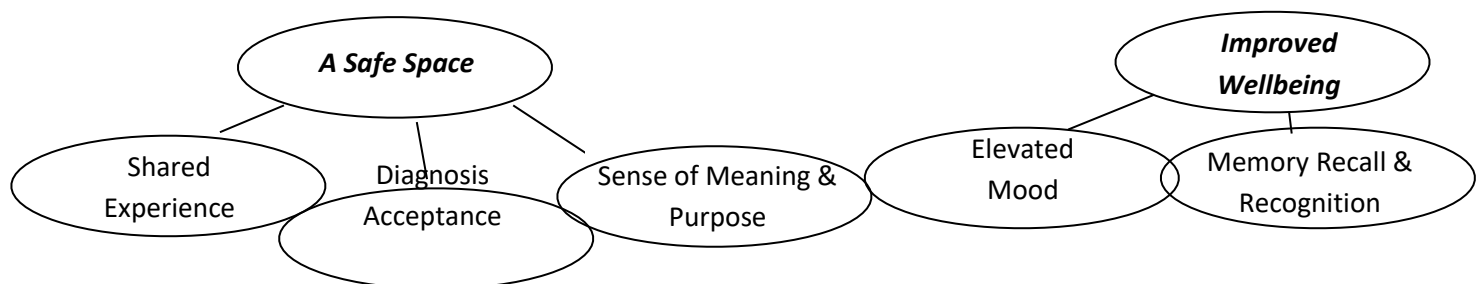
After approximately one hour, the group paused for a refreshment break and several of the group began to organise a sporting activity to follow the break. The rest of the group remained seated and continued to engage in conversation. The recording of the session then ceased to allow time to prepare for the subsequent focus group interview, which took place in a room adjacent to the main hall.



Focus Group Interview

Across the qualitative data-set, preliminary readings and semantic thematic analysis resulted in the identification of an initial set ($n = 5$) of recurrent themes. From there, clustering and further latent thematic analysis was used to organise the themes identified at the semantic level (refer to Figure 1). What follows is a brief overview of each of the five main recurrent themes established. Literal excerpts from the data set which capture the core of each initial theme are further provided as a means of illustrating each of the themes identified.

Figure 1: Thematic map of Superordinate and recurrent themes



i. A SAFE SPACE

Much of the behaviour exhibited throughout the focus group interview mirrored that of the reminiscence session itself with particular regard to the ostensible cohesiveness of the group and companionship between individuals. What's more, it appeared that this informal structure of the group had afforded individuals the opportunity to utilise sport as a catalyst to go on to discuss more salient topics such as health-related issues that, like sport, united all group members without defining it. Indeed, it appeared that sport had provided the backdrop to form initial friendship bonds, subsequently opening up the gateway for deeper connections, for example via talk surrounding one's **shared experience** of a particular physical or mental health condition:

"I really felt comfortable was probably the best way to put it because there was guys that were all suffering different things in their life or going through different things" Stephen⁷, Aged 49

"It's company. We've all got things going on, health issues and maybe loneliness and different things and it's just, there's a good feel about the place" Michael, Aged 61

What saturated such discourse was the further notion that one of the palpable benefits of this shared experience was the ability to also support and learn from each other, with specific regard to the use of various coping mechanisms and techniques:

"It's all about learning how to deal with whatever you're going through in your life...in ways that you never even thought about... we've all got various problems...and yeah I think it's the learning sort of process of it that helps a lot of us a lot, well me definitely...it's just what others guys bring in terms of their life experiences, what they're going through, how they've dealt with things...everybody's got their own experience of things but they've got a different way of coping with it and I think you take wee bits out what everybody says" Stephen, Aged 49

Bound to these literal excerpts was the further belief that these shared experiences had perhaps led to a greater **acceptance of one's diagnosis** of a particular physical or mental health condition. This particular finding is of definitive significance here, particularly in relation to dementia where an acceptance of one's condition is considered crucial to making a positive adjustment and maintain a sense of wellbeing (Clare, 2002):

"You're able to talk about how you're feeling at the time and I think for me a lot of it is the realisation that I'm no [not] this one person trying to get through what I'm going through...myself...there's whole load of other guys...I got diagnosed with dementia as well and it's...I think one of the reactions to somebody telling you that you've got dementia is...although they said it was early onset...you're like....'Oh. I've no [not] got a dementia, no [not] me! I know everything!' But I think it's about...kinda trying to accept that yeah, things are happening to you

⁷ Pseudonyms have been applied for the purposes of anonymity.

and yeah, just facing up to it...there's a high chance that what somebody says, you'll click with... ..there's always a kind common theme for people and you might think that you're...isolated in what you're going through...and a lot of people think that, t 'Oh poor me, nobody else is going through what I'm going through', but when you come to something like this it kinda opens your eyes up to the...well people are going through things and this is how they deal with it" Stephen, Aged 49

"You all get dealt a pack of cards, and you've just got to accept that's your cards and there's nothing you can do about it...and there's always somebody worse off than you...always" Michael, Aged 61

Again, evidence of the natural tendency for group members to support each other littered such utterances, particularly in instances where individuals chose to speak about their apparent struggle to accept a particular diagnosis:

"Yeah, see I couldnae handle it in the beginning either...facing up to it...I've got dementia, the brain's away" Christopher, Aged 72

"You're doing great...you really are, you're doing great!" Michael, Aged 61

It is with reference to this latter quote in particular where the full extent of the impact of this quality of friendship and support is realised, where one participant openly attributes improvements in his physical wellbeing to the nature of the support garnered from being part of the group.

"I used to come with my bike, and a stick and I've no used it since I've come here and that's because Stephen said 'Do it! And learn' and that's what I've done...and because I cannae use that side (gestures towards the right-hand side of his body) I strug-...I'll no use the stick or anything like that I just eh, eh...trying to without it and that's it" Bob, Aged 51

Indeed, it is with reference to this level of social support and encouragement that perhaps gave rise to the emergence of the third recurrent theme in terms of the **sense of meaning and purpose** owing to the friendships cultivated by the cohesiveness and comradeship within the group:

"We're all at different stages and some folk are a wee bit sharper than others....but it's great when you see someone who would normally struggle a wee bit, getting something right....see when that happens it, it gives you a buzz! (Sporting Memoriesiles) If they manage something that maybe they wouldn't normally manage...it gies [gives] you that wee bit, feel good factor about it... when you're not there [at the SPORTING MEMORIES Group] you wonder how they are doing. It's the best thing I've done, if I hadn't come, I wouldn't be here today" Michael, Aged 61

"People don't always agree with each other, but they understand each other and I think it's been great, it's been great for me... you get to know, the more that come, you get to know real nice people" Peter, Aged 77

“This has been the best thing for me...we’re all idiots (everyone laughs)...and I enjoy it...coming here has made a tremendous difference...it’s a family” Christopher, Aged 72

Central to the development of these friendships and thus the perceived meaningfulness of the group was one’s individual sense of purpose within the group. As mentioned at the outset, a key facet of the Sporting Memories approach pertains to the notion of inclusivity with a focus upon one’s strengths and capabilities again a method deemed permissible as a result of the informal nature of the group. By way of example, one particular group member had just recited a poem in full to the group and had informed the researcher that this was their unique contribution to the group:

“I have dementia. It’s getting worse and worse and believe it or not I can forget all the names in this room....and very often I can’t remember things that have happened to me within the last half hour and yet, I can remember that one poem...”it’s just a hobby of mine I’ve had for years...and I like to find poems, and these are all poems of people that I don’t even know...” Anthony, Aged 89



ii. IMPROVED WELLBEING

Over the course of the focus group interview, respondents frequently alluded to improvements in one’s social, emotional and cognitive wellbeing. Indeed, all participants unanimously and explicitly cited the group as being integral to an improved sense of wellbeing, particularly in relation to the perceived **positive impact upon one’s mood**:

“I had a lot of issues going on, all at-, you know one right after the other...felt a bit low....probably because I always worked and then not to be working...probably got in a bad state at one point. Didnae want to go out the house, didnae want to go anywhere...I came along and I really enjoyed it...it’s the best thing I’ve probably done is joined this group” Michael, Aged 61

“You feel refreshed after it...your mind is clear and you can see down the road” Christopher, Aged 72

Moreover, what permeated much of this discussion was the perceived importance of laughter.

“I was probably a wee bit apprehensive...oh, what’s this gonna be about?’ and things like that...but since I’ve come to it, I look forward to coming...you have a laugh“ Stephen, Aged 49

“You get a good laugh and a wind-up as well (laughs)” Archie, Aged 62

As documented in the observation of the session, the use of humour and resultant displays of laughter was evident across the session and throughout the focus group interview. This is of particular importance here given the widely documented psychosocial benefits of laughter for physical and mental wellbeing to include, improved coping strategies function as well as decreased stress response (Takeda, Hashimoto, Kudo, Okochi, Tagami, Morihara, et al., 2010).

Inextricably linked to this particular theme was the further belief that the group could facilitate **memory recall and recognition**. What’s important to note here is that this perceived ability to ‘remember’, in turn, may also engender positive a positive sense of self and improvements in one’s mood.

“It seems to bring out things that you’d forgot you knew about...and there’s always something somebody will say, that will trigger a memory that you’ve got in there somewhere...it’s all about memories...it seems to drag things up that you thought you’d forgot about or...so for me that’s what it was about....when they say ‘Sporting Memories’, it’s all about, it’s memories you thought you, although you’ve got them...you’ve forgotten about them or you don’t know they exist and it brings things to the fore” Stephen, Aged 49

“You think way back about certain things and it has been a help with us” Archie, Aged 62

Quite often discussion surrounding such improvements would expand to include cognitive functions thought to have previously declined and references to the ability to acquire and retain new information were also noted:

“Even if you couldn’t spell when you came in this morning...you’ll learn that wee bit, you know? And then when you go home you talk about what goes on today” Christopher, Aged 72

“I see a huge difference in Stevie from when he first came, to see him now...he would get all mixed up with his words and what he was trying to sayhe knew what he was trying to say but he couldn’t put it in words...I see a tremendous difference in Stevie” Michael. Aged 61

Discussion

When taken together, the results from the two main phases of analyses can be interpreted in relation to the activities and outcomes delineated in the Theory of Change Model, utilised by the Sporting Memories Foundation to predict and measure the wider impact of their work. What follows is a brief encounter with each of the four outcomes demarcated in the Theory of Change Model in relation to the findings from the current project.

Improved Mental Wellbeing

The first outcome stipulated in the Theory of Change Model predicts that via 'regular participation in Sporting Memories activities and associated social interactions users will develop confidence, self-esteem and resilience that builds positive routines, reaffirms a sense of identity and develops agency', owing in part to the group's 'safe and welcoming environment'. In line with this, findings from the observational data lend credence to this particular supposition with specific regard to the person-centred approach utilised throughout the session. Indeed, from the outset of the session the practitioner appeared to facilitate and scaffold the session in accordance with the desired subjects of interest across the group, rather than dictate and lead the session. This somewhat rather loose and participant-led structure ultimately gave rise to a greater sense of autonomy amongst group members, therefore fostering a greater sense of agency as well as increased self esteem and confidence. For it is widely accepted that environments that are supportive of personhood routinely give rise to a greater preponderance of greater self-confidence and self-esteem and thus an overall improvement in mental wellbeing (Brooker & Latham, 2015).

This particular finding was further reaffirmed and expanded upon in the latter phase of analysis with particular regard to the emergence of the first superordinate theme, pertaining to the notion of the Sporting Memories group as a 'safe space'. Specifically, the palpable cohesiveness of the group in tandem with the informal, person-centred approach to the session appeared to cultivate and harness greater mental wellbeing whereby the group was often viewed by members as a platform for open discussion surrounding one's health and wellbeing and an opportunity to share individual experience. What's more, it appeared that these particular facets of the group further gave rise to a greater acceptance of one's own given physical or mental health condition, thus helping to either maintain or renegotiate a positive sense of self at post-diagnosis (Clare, 2002).

Inextricably linked to this particular finding was the discovery of the second superordinate theme which, of definitive significance to the first desirable outcome from the Theory of Change Model, directly cited the Sporting Memories group as a source of enhanced wellbeing. For throughout the course of the interview, all participants were keen to voice the notion that their participation within the group had led to an improved sense of mental wellbeing, with elevated mood levels routinely cited as the source for this particular output. Moreover, the researcher witnessed an abundance of non-verbal and verbal indicators of enjoyment and engagement not only throughout the session itself but for the duration of the focus group interview thus corroborating and supporting this particular outcome here.

Reduced Loneliness

In terms of the second desirable outcome, the Theory of Change Model asserts that the development of 'strong and mutually supportive relationships with fellow participants, volunteers and members of staff' gives rise to resultant levels of 'decreased social isolation and perceived loneliness'. Correspondingly, many of the participants here reported feeling a concordant reduction in social isolation and loneliness as a direct outcome from their membership with the group and the formation of friendships and bonds with one another. Indeed, to hark back to the preliminary findings from the observational data, the very presence of these relationships was illustrated from the outset with positive peer interactions throughout and numerous displays of camaraderie and cohesiveness witnessed across the session.

It is important to note however that this reduction in social isolation and loneliness was not viewed as merely the result of one's membership in the group itself but as a direct consequence of the quality of social interactions and thus the deeper connections made as well as the perception of the group as personally relevant and meaningful to the individual brought forth by one's individual sense of purpose within the group. In view of this, one of the central tenets of the Sporting Memories Foundation is the belief that each person has 'something to contribute'. Thus, via the adoption of a strengths-based approach and thus a more accessible and inclusive platform, the individuals observed here voiced a resultant feeling of belonging and purpose within the group.

Improved Physical Wellbeing

The third outcome from the Theory of Change Model states that individuals who regularly participate in sporting activities '(including many with chronic, degenerative conditions) become more physically active and feel more confident in pursuing physical activities both within the group and in their daily lives'. In accordance with this assertion, many of the respondents frequently cited the inclusion of the activity segment of the session as particularly crucial to their enjoyment of the session, often owing to the personal relevance of the sporting activity itself and the intrinsic value of one's ongoing participation in a sporting activity.

Indeed, perhaps somewhat unsurprisingly given the nature of the group, many of the group members were united in their fondness for one or more sporting interests and whilst levels of each individual's prior engagement with a given sport varied across participants, from a fondness for a particular event or activity to one's previous participation at a professional level, what appeared to be key here was that this partiality for a sport was also integral to one's sense of identity. As a result, the affordance of a dedicated slot to pursuing these pastimes was seen to provide an opportunity for individuals to continue to participate and enjoy a sporting activity and thus maintain a sense of identity and furthermore, feel able to do so as a direct result of the accessibility and inclusive nature of the session.

Again, it makes intuitive sense to reason that the purported increased levels of confidence in pursuing physical activities and wider improvements in daily life is not just simply the result from one's participation in such activities but as a consequence of the additional levels of help and encouragement from group members that accompany such activities, as vindicated by one particular group member who reported the ability to walk unaided following a stroke as a result of support from other group members.

Increased Connections

Tied to the second output regarding reduced loneliness, the final outcome to be discussed here pertains to that of the increased connections said to emerge as a result of one's participation in the group. That is, via 'participating in and organising regular community-based sessions, and inter-generational activities', attendees are said to 'develop strong, pro-social networks, and develop the skills, confidence and awareness to engage with wider health and community networks in their locality'.

In relation to this, many of the individuals cited the Sporting Memories group as a gateway for additional membership to other social networks and their participation in more than one Sporting Memories session across locations. Indeed, many participants frequently alluded to their membership in the Sporting Memories group as being pivotal to their subsequent engagement in similar activities and thus their expanding networks. Likewise, it appeared that the connections between members often extended beyond the group session itself. The centrality of the Sporting Memories group here was routinely cited here, with many of the participants keen to highlight the unequivocal importance of the group in allowing one to engage with the wider community owing to the creation of strong social bonds within the group, as well as greater confidence and desire to want to do so. Indeed, many of the individuals who took part in the research here stated that prior to joining the Sporting Memories group, they were often reluctant to participate in any activity outside of the home and remained completely disengaged from the wider community.

Overall, it appears that the outcomes stipulated in the Theory of Change Model were supported by the totality of findings from both the observational and focus-group phases of data collection. Moreover, it is with reference to the person-centred, strengths-based approach of the Sporting Memories group reported here, coupled with the quality of the connections made within the group itself, that appears key to the emergence of these particular outputs and thus it is advocated that future research should seek to further explore the features of this approach to allow for a greater understanding and a more systematic and consistent replication across Sporting Memories groups.

Study 2

A Survey Investigation of the 'Sporting Memories' Reminiscence Program

Background & Aims

In Study 1, a preliminary, qualitative investigation of the Sporting Memories was conducted with one group situated in the West of Scotland, with the chief aim of providing an in-depth investigation of any potential emotional, social and cognitive benefits for individuals living with dementia, depression and/or loneliness and their carers. Findings from this initial phase of work provided strong evidence for the four key outcomes demarcated in the Sporting Memories Theory of Change Model to include, improved mental and physical wellbeing, reduced loneliness and increased connection, thus warranting a further follow-up investigation of the wider impact of Sporting Memories by way of capturing the prevalence of these particular results across groups within the UK.

Accordingly, the overarching aim of the present study was to systematically evaluate the wider impact of the Sporting Memories Foundation, with a focus upon further ascertaining the incidence of the aforementioned four key outcomes from the Theory of Change Model.

METHOD

Sample

The final participant pool consisted of 116 Sporting Memories attendees from 19 groups across the UK, representing approximately 20% of the total number of Sporting Memories groups that are currently running to-date. Participation was both voluntary and unremunerated; all participants had responded to the Sporting Memories 'End of Year' survey 2016/17 (see '*Data Collection*' below for further details regarding the survey). Of this sample, 54 (46.6%) males and 16 (13.8%) females responded individually with a further 10 male-female dyads representing 8.6% of the sample. Data regarding gender was not provided for the remaining 36 respondents⁸. At the time of participation one individual was unable to communicate verbally and thus non-verbal responses to questions were recorded and one individual (female) completed the survey on behalf of one male participant. In terms of frequency of attendance, 12 (63.2%) of the 19 groups recorded here met on a weekly basis at the time of participation with 5 (26.3%) groups attending monthly. Only one group (5.3%) met fortnightly and data regarding attendance was not collected for the remaining group. Data was primarily collected for the purposes of a service evaluation and thus no external ethical approvals were sought.

Data Collection

Sporting Memories End of Year (2016/2017) Questionnaires were distributed to potential participants in accordance with the existing protocols for inhouse evaluation purposes. The questionnaire itself comprises three closed-response (YES/NO) items, four statements with responses scored on a 5-point Likert scale in terms of agreement (1 = '*Agree Strongly*', 5 = '*Disagree Strongly*'). The remaining 5 open-

⁸ Data regarding gender was not recorded for individuals who completed the survey using their initials only.

ended questions follow on from the initial closed-response items whereby respondents are asked to elaborate upon their previous (closed) response. Participants are further asked to record the Sporting Memories group to which they belong as well as their name or initials. No further demographic data is recorded and the questionnaire takes approximately 20 minutes to complete. Individuals are free to opt out of completing the survey and likewise, can elect not to respond to particular items. For those with communication difficulties, the questionnaire can be completed by a known contact. The chief function of the questionnaire is to evaluate the efficacy of Sporting Memories with a focus upon measuring perceived satisfaction with the group, reduction in loneliness and impact upon social isolation as well as the identification of any recommendations for best practice.

Data Analysis

Responses to the closed questions and 5-point Likert scale items was transformed to numerical data, providing the quantitative descriptive data whereas open-ended responses were analysed using a thematic analysis approach for qualitative data (c.f. Braun & Clarke, 2006). Specifically, a deductive approach was used here whereby the Theory of Change Model was used as the theoretical framework in order to analyse the data and thus identify the prevalence of key themes pertaining to this model. accordingly, the analysis commenced with repeated readings of open-ended responses to the survey, operating a theory-driven coding system to map recurrent themes to the Theory of Change Model.

FINDINGS

Descriptive Statistics

As demarcated in Figure 1 below, all 116 respondents reported feeling as if they were ‘benefiting from attending’ their Sporting Memories group, with a further (91%) 106 respondents stating that they would further recommend Sporting Memories to a friend, thus indicating an overall positive perception of one’s personal gain from attending a Sporting Memories group. In addition, 95% either ‘strongly agreed’ (61, 52.6%) or ‘agreed’ (50, 43.1%) that they enjoyed contributing to the group, further indicating not only a high level of enjoyment but also an equally high level of active participation within the group⁹.

Figure 1: Descriptive statistics for perceived benefit and future recommendation across participants

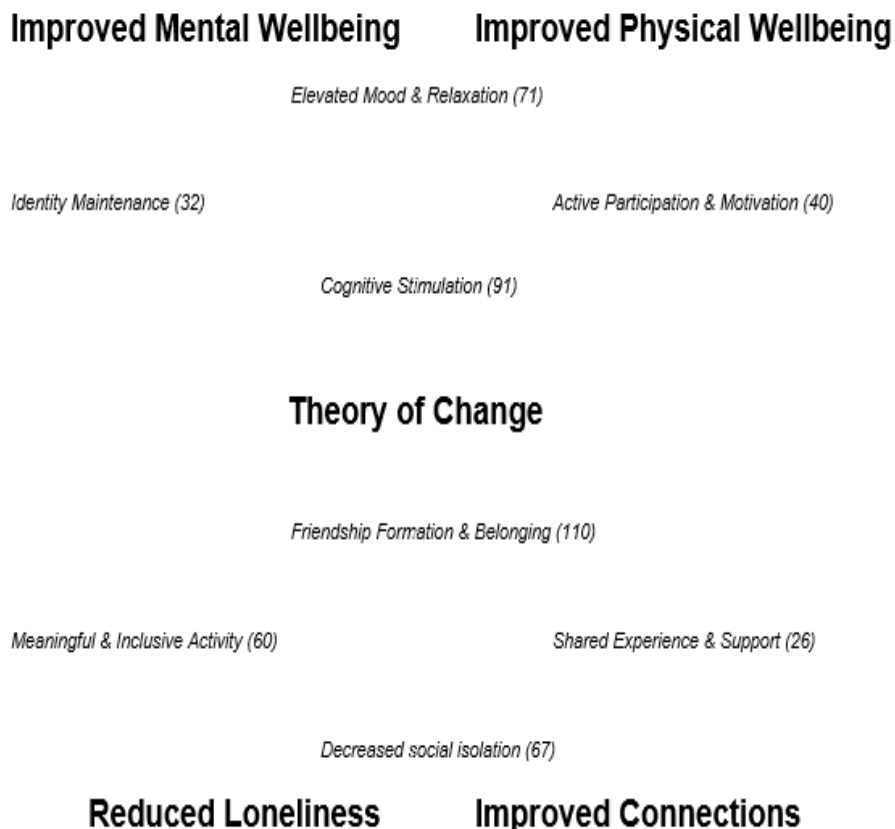
	Yes	No	No response
Perceived benefit of participation	100% (116)		
Likelihood of Recommendation	91% (106)		9% (10)

⁹ 5 (4.3%) participants responded with ‘don’t know’.

Qualitative Analysis

Responses to three open-ended questions provided the overarching qualitative data-set from which 8 recurrent themes were extracted following preliminary readings and semantic thematic analysis. From there, a deductive approach was utilised to map each of these themes identified at the semantic level, to the four main outcomes from the Theory of Change Model, thus utilising the model throughout as the theoretical framework to guide this latter phase of analysis. Figure 2 illustrates each recurrent theme established alongside the number of instances each theme was coded for across all participant responses by way of investigating the prevalence of each particular theme¹⁰. In addition, the relationship between each recurrent theme and the four potential outcomes from the Theory of Change Model is further demonstrated. As Figure 2 below shows, there was notable overlap in terms of the position of each theme in relation to each of the four outcomes, with many of the recurrent themes spanning more than one particular outcome.

Figure 2: Thematic map of recurrent themes and relationship to the four main outcomes from the Theory of Change Model



¹⁰ Responses were coded depending on the prevalence of each theme identified and thus a given response could be coded for multiple themes.

The remainder of this section will provide a brief overview of each of the eight themes identified. For descriptive purposes, direct quotations from the data set are provided in order to illustrate the essence of each theme.

i. Elevated Mood & Relaxation

Across the data set, many of the respondents frequently alluded to the palpable enjoyment gained from attending one of the Sporting Memories groups and, what's more, the potential for the group to elevate one's mood following participation, particularly in relation to the central role of reminiscence:

"It makes me happy"

"We get such a lot of pleasure coming"

Triggering lost/hidden memories generally makes me feel better about myself"

Indeed, this third quote here falls directly in line with the Theory of Change outcome regarding improved mental wellbeing, specifically in relation to the supposition that via 'regular participation in Sporting Memories activities and associated social interactions users will develop confidence, self-esteem'. In addition, this potential of the group to elevate one's mood often appeared to transcend beyond that one group session where, for many, such feelings of enjoyment and pleasure remained with that person in anticipation of the next meeting:

"I look forward to this time, I really enjoy Sporting Memories"

For carers on the other hand, the positive impact seemed to derive more from the ability to take a break from their role as a carer for the duration of the session:

"I'd miss my afternoon break"

This latter finding is particularly important given that there is extensive evidence surrounding the negative impact of care-giving in terms of physical and emotional health and thus the need to provide adequate and sustainable forms of carer respite to combat this (McConaghy, & Caltabiano, 2005). In terms of the fit with the Theory of Change Model, this particular theme also corresponds with the outcome pertaining to improved physical wellbeing when one considers the propensity to provide an additional opportunity for relaxation.

ii. Identity Maintenance

Littered across the data set were further references to the propensity for Sporting Memories to enhance mental wellbeing in relation to the potential to 'reaffirm a sense of identity':

"The joy of sharing and reliving beautiful younger times and moments. Like feeling young again, sport can do that for you"

"I like to share my past playing for the Rovers [pseudonym applied] and would miss that opportunity"

Furthermore, it was evident from such talk that whilst sport would provide the initial catalyst for identity maintenance, such discussions were not confined to that of 'sporting memories' but rather opened up a 'safe and welcoming environment' for further identity exploration:

"Helps me to recall iconic moments of my youth"

"It's good to get together and talk about working pasts"

Given that many individuals attending Sporting Memories groups report experiencing dementia and/or other cognitive impairments that can impact upon one's sense of self-identity, the potential for the group setting to foster and scaffold one's identity is of definitive importance here, particularly with regard to enhanced mental wellbeing. For it is well-attested that whilst one's sense of identity can come under attack with the onset of such conditions, a particular merit of reminiscence therapy is the potential to preserve and protect one's sense of self via personal narrative and shared exploration of memories (Cohen-Mansfield, Golander & Arnheim, 2000).



iii. Active Participation and Motivation

The third theme to be reported here stems from discourse surrounding the pivotal role that the Sporting Memories group plays with specific regard to the second outcome in terms of improving physical wellbeing. Yet whilst the Theory of Change Model cites the importance sporting activities within the session as, the results from the present study indicate that it is equally important not to overlook the power of merely attending the group as a source of physical activity:

“It keeps us active walking to the group”

“It gets me out of the house and socialising”

“Getting me out of the house more often”

Indeed, for some it was quite apparent that the group itself represented their primary source of physical activity and what’s more, the sole impetus for remaining physically active. By way of illustration, the following quotations are taken from responses in consideration of the Sporting Memories group ceasing to exist:

“I’d be stuck in a flat not doing anything”

“I would have to stay in bed longer”

This particular finding is of crucial significance when one considers the abundance of evidence that suggests that being physically active in late adulthood is linked to enhanced cognitive function and, to hark back to the first Theory of Change outcome, greater mental wellbeing (Erickson, Gildengers, & Butters, 2013).

iv. Cognitive Stimulation

Inextricably linked to the aforementioned theme of ‘identity maintenance’, the fourth theme to emerge stemmed from numerous instances across the data set in which the group was commended in terms of providing the optimum environment for enhanced cognitive function. Indeed, a bulk of the respondents here frequently cited ($n = 91$) the group as being critical in terms of aiding memory recall and recognition:

“Keeps my memory sharp”

“Working my brain trying to think of the answers”

“Interacting with other sports fans and hearing their memories often triggers some of my own that I wasn’t aware of”

“It makes me think and stirs up memories”

Recall that many of the respondents here will likely be experiencing some form of cognitive impairment, thus the finding that the reminiscence-based activities contained within the group may aid the preservation of one’s cognitive function is particularly promising. Indeed, in terms of neurological rehabilitation this represents the chief goal of such therapies (Cotelli, Manenti, Zanetti, 2012). Moreover, in addition to fostering greater memory recall and recognition, many respondents further espoused the belief that group also benefited other higher order cognitive abilities, such as the acquisition and

retention of new information and skills brought forth by the 'stimulating' environment provided for such learning:

"Adds variety and interest for us. Stimulating atmosphere from people who are enthusiastic and full of knowledge"

"I am learning a lot of new things"

"Lots to learn about different aspects of sports"

In terms of the wider connection to the Theory of Change Model, it makes intuitive sense to reason that the potential to imbue a cognitively stimulating environment fits directly with the notion of improved mental wellbeing. However, it is further asserted here that there is an additional link to the outcome relating to improved physical wellbeing in consideration of the widely-held belief across participants here that the 'encouraging' and 'stimulating' environment further harvested greater confidence amongst individuals in terms of willingness to engage in physical activity within the group.



v. Friendship Formation and Belonging

In terms of quantity, the most routinely discussed theme that transpired from this data set centred upon talk surrounding the formation of friendships and a concordant sense of belonging owing to one's participation in the group. Indeed, almost all individuals naturally spoke about the perceived benefits of the group in terms of the positive nature of the interactions across the group and the resultant friendships gained:

"Everyone is always pleased to see each other"

"I have made friends with lovely people"

In relation to the Theory of Change Model, it became very apparent that this particular theme bore a direct relevance to the third and fourth outcomes from the model with regards to reduced loneliness and improved connections, especially when one considers the following responses from individuals when asked to consider how they would feel if the group no longer existed:

“I would miss the camaraderie that has built up with the other members”

“I would miss...the friends I've made”

“It is a very welcoming group of like-minded people”

“I would miss the group of like minded people I have met”

“I would miss everyone I have met at the group”

What's more, whilst the formation of friendships is not a specific goal of reminiscence therapy itself, one of the central aims of the SPORTING MEMORIES Foundation overall is to address the current call for psychosocial interventions that can combat feelings of loneliness particularly amongst older adults. The finding therefore, that the overwhelming majority of individuals here attested to the potential for the group to do so is of definitive significance here.

vi. Decreased Social Isolation

In tandem with the aforementioned theme of 'friendship formation and belonging', the sixth theme to arise from the present study naturally arose from discussions surrounding the potential for the group to decrease social isolation, providing a platform for those experiencing loneliness and as a means of inciting wider connections beyond the group:

“It helps to get you to mix again”

“I get to talk to people”

“I have Parkinson's and felt very isolated”

“Stops people from feeling lonely”

What is perhaps most striking about this specific theme is the notion that without the group, many of it's members would indeed suffer from social isolation and loneliness:

“I would have nobody to talk to”

“I would have less social interaction with other people”

“I wouldn't get out of the house as much and I wouldn't see as many people”

The quotations above not only illustrate the perceived personal importance of the group to the individuals who attend, they provide additional evidence for the SPORTING MEMORIES Foundation to successfully address the pressing need to tackle social isolation and loneliness. What's more, it is important to note that this particular asset was not solely confined to those attending the group. Indeed, many of the carers of attendees were equally keen to highlight the positive impact of the group upon their own experience of social isolation:

"As a carer it gives me the chance to talk to others"

"We both wouldn't get a lot of social contact. We would both be socially isolated if we didn't come along to the group"



vii. Shared Experience & Support

As with the previous theme, the seventh theme to arise from the data set was also the result of the analysis of attendee and carer responses combined, in this instance pertaining to the perceived psychological importance of the group in terms of being able to engage with other individuals experiencing similar issues, be it a health condition or the act of caring for someone with that particular condition:

"Everyone's in the same boat"

"Stress relieving, helps to know others have the same problems"

"Good for everyone, individuals and carers, we feel as though you aren't alone"

The resultant impact of these shared experiences was further evidenced by the increased connections felt by these individuals and concordant level of social support that derived from the quality of these interactions:

“It feels like a community”

“Peer support from other carers, feel normal again. Reassuring that others are facing the same struggles”

“Really great group of people have helped me to adjust”

“Being with the group is a definite help to me and makes me feel confident again”

Note once more from the above quotations the psychosocial relevance of these particular outcomes for individuals in terms of coping strategies, peer support and the overall positive impact upon one's wellbeing.

viii. Meaningful & Inclusive Activity

The final theme to manifest here bore a direct relationship to the strengths-based approach employed by the Sporting Memories Foundation in terms of proffering an accessible and inclusive forum for individuals, brought forth by the nature of using a personally relevant and meaningful subject as a vehicle for connecting and engaging individuals with a variety of different skills and requirements:

“Everyone has their own needs and issues but the group seems to lighten things for people, lets them just enjoy themselves”

“It's friendly are you aren't made to feel there is something wrong”

“Everyone is included and visual aids and artefacts help all people to get involved”

“The group and ages blend together and the group has a lovely spirit/feel to it”

Crucially, the ostensible merit of adopting this widening access approach to participation was the development of a strong pro-social network and thus in terms of the fourth outcome of the Theory of Change Model, providing the necessary means for improved wider connections.

General Discussion

The purpose of Study 2 was to evaluate the wider impact of the Sporting Memories Foundation by way of ensuring that each of the four postulated outcomes from the Theory of Change Model were being adequately met. To do so, responses to a UK-wide survey were firstly analysed to provide an initial overview of the prevalence of key themes. From there, in order to gauge a deeper understanding of how these themes relate to the Theory of Change outcomes and thus identify the processes and practices that give rise to these particular outcomes, these findings were subsequently mapped to the Theory of Change Model. As a result, when taken together the findings from this particular study lend credence to those from the previous, providing empirical evidence for the outcomes stipulated in the Theory of Change Model as well as elucidate key themes across Sporting Memories groups that give rise to these particular outcomes and thus a better understanding of the wider efficacy of the Sporting Memories Foundation overall.

Based on the combined results from Study 1 and 2 it is therefore asserted here that the Sporting Memories Foundation is uniquely efficacious in terms of enhancing the quality of life of those experiencing dementia, depression and/or loneliness, including those who care for these individuals. However, it is with reference to the latter social issue of loneliness in particular where the cumulative results from Study 1 and 2 exposed perhaps the most significant impact that Sporting Memories has upon its primary users and their caregivers.

For throughout both studies almost all individuals routinely cited Sporting Memories as critical to their perceived reduction in loneliness and social isolation. Indeed, for many, it became apparent that the group quite often represented their sole source of social interaction with others, with whom close bonds and connections had been established. For others, the group had provided the initial building blocks for wider engagement with other services, as well as developing an intrinsic motivation and instilling the confidence to go on and do so. What's more, upon closer inspection of the data it was further apparent that these ostensible benefits were ultimately due to the unique practices and processes utilised in the Sporting Memories paradigm, as vindicated by the themes that emerged in relation to the outcome of 'reduced loneliness' in the Theory of Change Model. In particular, the use of sport as a foundation for initially capturing the interest of and uniting individuals, providing a community and gateway for deeper connections, as well as the informal nature of the sessions and the safe space created to allow these connections to flourish and develop greater personal meaning and value.

This crucial finding is particularly timely given the widespread loneliness epidemic across the UK and the associated risk of mortality (Holt-Lunstad, Smith, Baker, Harris & Stephenson, 2015). Indeed, figures suggest that between six and thirteen percent of the older population in the UK are consistently lonely, with numerous psychological and physical detrimental impacts, including depression and suicide (Campaign to end loneliness, 2011). To address this, it is currently advocated that community-based approaches (Foxwell, 2015) present the most efficacious mode of challenging this particular issue. Thus, in view of this, it is argued here that the Sporting Memories Foundation offers a unique, sustainable and empirically evidenced approach to successfully tackling the loneliness epidemic.

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Appendix 1: Theory of Change Model

Theory of Change: Sporting Memories Groups

