

Implementation of Reminiscence Therapy on Stress Among Older Adults at the Potroyudan Social Service Center for Older Persons, Jepara Regency

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Abstract. The elderly are individuals aged 60 years and older, whether male or female. This definition aligns with Law of the Republic of Indonesia Number 13 of 1998 concerning the Welfare of the Elderly, which defines an elderly person as someone who has reached the age of 60 or older. The complex physical and psychological health issues faced by the elderly require special attention; difficulties in adapting to rapid physical changes, chronic illnesses, and acute loneliness serve as primary stressors contributing to stress among this population. Stress is a condition that arises when individuals encounter physical and psychological demands that exceed their available coping abilities or resources. Reminiscence therapy is an effective and accessible non-pharmacological intervention for reducing stress in the elderly. This therapy helps lower stress levels by encouraging elderly individuals to recall and share meaningful life experiences. This study aimed to determine the effect of reminiscence therapy on reducing stress levels among the elderly. A pre-experimental design utilizing a one-group pretest-posttest approach was employed with a sample of 20 respondents. The intervention was conducted over two weeks across five sessions, with each session lasting between 30 and 45 minutes. Data analysis using the Wilcoxon test yielded a p-value of 0.000 ($p < 0.05$). The study concludes that reminiscence therapy is effective in reducing stress levels among the elderly

Keywords: Elderly, Stress, Reminiscence Therapy

INTRODUCTION

The elderly are residents aged 60 years and above in accordance with Law Number 13 of 1998. The number of elderly people continues to increase as life expectancy increases and health services improve. This increase has an impact on various aspects, such as health, economy, and social, so accurate data is needed as a basis for policy formulation to support the welfare of the elderly and national development (Heryani, 2023).

According to WHO (2024), the number of people aged 60 years and above in the world continues to increase, from 1.1 billion in 2023 to 1.4 billion in 2030 and is projected to reach 2.1 billion by 2050. In Indonesia, based on data from the Central Statistics Agency (BPS) in 2024, around 12% of the total population has entered the elderly group. In line with these conditions, the number of elderly people in Central Java Province has also increased from 5.07 million people (13.50%) in 2023 to 5.28 million people (13.94%) in 2024. A similar increase occurred in Jepara Regency, where the number of elderly residents increased from 141.35 thousand people in 2023 to 148 thousand people in 2024. The data shows that the elderly population continues to increase from the global level to the region, so it

requires attention in efforts to improve welfare and health services for the elderly (WHO, 2024; BPS, 2025).

Aging is a stage of life characterized by various physical, psychological, social, and spiritual changes. As we age, the body's ability decreases so that the elderly are more susceptible to disease, decreased physical function, reduced social role, and dependence on others. This condition can increase the risk of stress in the elderly (Ilham et al., 2025; Endang, 2025). Stress in the elderly can be influenced by various factors, such as diseases that accompany the aging process, socioeconomic conditions, reduced social interaction, as well as changes in roles due to retirement and a decline in physical and psychological condition (Pratiwi et al., 2024). If left untreated, stress can reduce the quality of life and welfare of the elderly (Suharsono & Anwar, 2020). Stress management can be done through pharmacological and non-pharmacological therapies. Pharmacological therapy includes the administration of anti-anxiety and antidepressant drugs as indicated, while non-pharmacological therapy can be in the form of relaxation therapy, cognitive therapy, music therapy, spiritual therapy, and reminiscence therapy which have been proven to help reduce stress levels and improve the quality of life of the elderly (Erni Bosten, 2022; Puput Nugraha, Sheizi Prista Sari, 2025).

Reminiscence *therapy* is an intervention with a life review approach that aims to stimulate the elderly to recall past experiences or memories. This therapy can help reduce feelings of stress, improve quality of life, and support the independence of the elderly in living their daily lives.

Previous research by Erni Buston, Sariman Pardosi, Pauzan Efendi, Oktavia 2022, entitled The Effect of *Reminiscence* Therapy on Reducing Stress Levels with the results of peeling given for 1 minngu 2 times for 2 weeks obtained statistical test results using *marginal homogeneity* tests before and after *Reminiscence* therapy was obtained with a value of the meaning of $p = 0.000$ where $\alpha \leq 0.05$. which means that there is an effect of *Reminiscence therapy* on reducing stress levels in the elderly at the Tresna Werdha Social Home (Pstw) in Bengkulu Province.

METHODS

This study uses a pre-experimental design with a one group pretest-posstest design, which is a research conducted on one group of respondents with pretest and after-measurement (posstest) given implementation. The sampling technique used in this study is *purposive sampling* with a sample of 20 respondents who meet the research criteria. Inclusion Criteria Inclusion Criteria are characteristics that will be used as the subject of case studies, including: (1.) Elderly people aged 60 years and above, both men and women. (2). Elderly who experience light, moderate, and severe stress from DASS interpretation (3) Elderly who are willing to become respondents to the exclusion criteria. The exclusion criteria are criteria that are not used as the subject of the case study, among others: (1) Elderly people with severe mental disorders (2) Elderly with cognitive impairments (3) Elderly with visual and auditory impairments.

This study was conducted at the Potroyudan Social Institution in Jepara Regency. This study has two variables, namely: independent variables: Reminiscence therapy Dependent variables (bound) Stress level in the elderly. The implementation of reminiscence therapy is given for 2 weeks 5 times with a duration of 30-40 minutes per session.

RESULTS AND DISCUSSION

Table 1 Frequency Distribution of Respondent Characteristics by Age

	n	Minimal	Maximu m:	Mean	Mode	Median
Age	20	60	70	65,93	69	65,67

Source: Primary Data 2026

Based on table 1, it can be seen that the age characteristics of the respondents are mostly 69 years old, with a median result of 65.67 years and an average (mean) of 65.93 years then the minimum age of 60 years and a maximum of 70 years.

In general, the elderly are prone to experiencing stress. This condition occurs along with age accompanied by various physical, psychological, and social changes. Stress in the elderly can be

influenced by several factors, such as declining health conditions, loss of a partner or close people, reduced social interaction, changes in roles in the family, economic limitations, and difficulty adapting to changes that occur in old age.

Table 2 Frequency Distribution of Respondent Characteristics by Gender

Gender	Quantity (n)	Presentase (%)
Male	7	35,0%
Women	13	65,0 %
Quantity	20	100,0%

Source: Primary Data 2026

Based on table 2 above, it can be seen that the gender characteristics of the respondents were mostly female, namely 13 respondents (65.0%) and the male gender as many as 7 respondents (35.0%).

Elderly women have a higher risk of experiencing stress than older men. This condition is affected by hormonal changes after menopause, a decline in physical condition, and psychological and social changes that occur during the aging process. In addition, reduced social interactions, changes in roles in the family, and economic limitations can also increase vulnerability to stress. Therefore, elderly women need physical, psychological, and social support to maintain their well-being, which is supported by research (Hidayanti Rohimah, 2024).

Table 3 Frequency Distribution of Respondent Characteristics by Education Level

Education	Prekuensi	Presentase
No School	14	70,0%
SD	6	30,0%
Total	20	100%

Source : Primary Data 2026

Based on table 3 above, it can be seen that the educational characteristics of most respondents graduated from elementary school, namely 6 respondents (30.0%) and 14 respondents (70.0%) did not go to school.

Research shows that seniors with low levels of education tend to be more prone to stress. This is due to limitations in obtaining and understanding information, low ability to manage stress, and lack of optimal ability to adapt to various changes that occur in old age.

Table 4 Assess stress levels before *Reminiscence therapy*

Stress levels	Quantity (n)	Presentase (%)
Medium	19	95,0%
Good	0	0%
Weight	1	5,0%
Quantity	20	100,0%

Source: Primary Data 2026

From the results of the study in table 4, it can be seen that the characteristics before the administration of *Reminiscence therapy* were that there was a moderate stress level value with a score of (19-25) as many as 19 respondents (100%) and respondents who experienced a severe stress level as many as 1 respondent with a score of (26-33) none experienced a good level of stress (1-4).

Table 5 Value of stress levels after *Reminiscence therapy*

Stress levels	Quantity (n)	Presentase (%)
Medium	5	25,0%
Good	14	70,0%
Weight	1	5,0%
Quantity	20	100,0%

Source:Primary Data 2026

Based on table 5, it can be seen that the characteristics of the stress level value after *Reminiscence therapy* are that there are respondents with moderate stress levels with a score of (19-25), as many as 5 respondents (25.0%) and 14 respondents (70.0%) are still rated as stress quality with a score (15-18),

and 1 respondent (5.0%) is still rated as severe quality. This shows that *Reminiscence* therapy can reduce stress levels in the elderly.

Table 6 *Wilcoxon signed rank test results*

Variabel		Z	p-Value	Conclusion
Elderly Levels	Stress	-3.500	0,004	There are significant differences

From the results of table 6 above of the Wilcoxon Signed Rank Test, a value of $Z = -3,500$ was obtained with $p\text{-value} = 0.004$. The $p\text{-value}$ is smaller than the significance level of $\alpha = 0.05$ ($0.004 < 0.05$), so H_0 is rejected and H_1 is accepted. This suggests that there is a significant difference in the stress levels of the elderly before and after therapy *reminiscence*.

The results of the study using *the Wilcoxon Signed Ranks Test* obtained a significance value of 0.000 ($p < 0.04$). These results showed that there was a difference between the level of stress reduction in the elderly before and after *reminiscence* therapy. So it can be concluded that the results of *reminiscence* therapy have a significant influence on reducing stress levels in the elderly and helping the elderly to accept the aging process more positively through activities to recall meaningful life experiences so that the stress experienced is reduced. The results of this study are also supported by the research of Rosmin Ilham et al. (2025), which obtained *a p-value = 0.000, which shows a difference in stress levels before and after the administration of reminiscence therapy*

After being given *reminiscence therapy*, the level of stress of the elderly decreases which is characterized by a decrease in feelings of anxiety, sadness, loneliness, and an increase in enthusiasm and ability to interact with the surrounding environment. *Reminiscence therapy* is carried out by inviting the elderly to reminisce about pleasant life experiences through the process of sharing stories so that they feel proud, grateful, and more accepting of their life journey. This intervention helps the elderly form a more adaptive coping and increase self-esteem and social support among fellow residents of the home. The results of this study are in accordance with the theory that *reminiscence therapy* is able to stimulate positive memory so that it produces better emotional responses and reduces stress levels. The results of this study are also supported by the research of Rosmin Ilham et al. (2025). The effect of *reminiscence* therapy on the stress level of the elderly showed a difference in stress levels before and after the administration of *reminiscence therapy*. The study concluded that *reminiscence* therapy is effective in improving psychological adaptability, improving emotional well-being, and reducing stress levels in the elderly.

CONCLUSION

The results of the study on the effect of *reminiscence* therapy on the level of stress in the elderly at the Potroyudan Elderly Social Service Home, Jepara Regency, can be concluded that the characteristics of the respondents show an average age of 65.67 years with an age range of 60-70 years. Most of the respondents were female and had a low level of education, i.e. out of school and elementary school graduates. Before being given *reminiscence therapy*, most of the elderly experienced moderate

levels of stress and a small percentage experienced severe stress. After being given *reminiscence therapy*, the level of stress of the elderly decreased, which was characterized by an increase in the number of respondents who were in the category of mild or normal stress and a decrease in the number of respondents who experienced moderate stress and severe stress.

The results of the analysis using *the Wilcoxon Signed Ranks Test* showed a significance value of $p = 0.000$ ($p < 0.05$), which means that there was a significant difference between the stress levels before and after the administration of *reminiscence therapy*. Thus, it can be concluded that *reminiscence therapy* has a significant effect on reducing stress levels in the elderly at the Potroyudan Elderly Social Service Home, Jepara Regency.

ACKNOWLEDGEMENT [OPTIONAL]

1. For nurses

For nurses, it can be one of the implementation alternatives to reduce stress levels in the elderly.

2. For Respondents

For respondents who experience stress disorders, *Reminiscence therapy* is one of the therapies that is quite effective in the implementation of reducing stress levels

3. For the next author

1) It is hoped that the next study can develop this study with a larger sample size, using a longer intervention time.

2) It can develop this study with other variables as support in order to get a broader picture of the comparative effectiveness and need to be more closely observed for the implementation of *Reminiscence therapy*.

4. For Institutions

Can integrate *Reminiscence therapy* in education and health promotion programs, especially in the field of gerontics.

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