

## **Project Title**

Healthcare Professionals' Attitudes towards Doll Therapy in the Singapore Community

## **Project Lead and Members**

- Lin Yijun Carol
- Joanna Barlas

## **Organisation(s) Involved**

James Cook University Singapore

## **Healthcare Family Group(s) Involved in this Project**

Ancillary Care

## **Applicable Specialty or Discipline**

School of Health and Social Sciences

## **Aim(s)**

The current study sought to explore attitudes of health professionals in Singapore toward the use of doll therapy for dementia in the community. As doll therapy (which involves behaviours such as holding, talking to, or dressing an anthropomorphic doll) is a potentially effective but underutilised nonpharmacological intervention strategy for management of Behavioural and Psychological Symptoms of Dementia (BPSD).

## **Background**

See poster appended/ below

## **Methods**

See poster appended/ below

**Results**

See poster appended/ below

**Conclusion**

See poster appended/ below

**Project Category**

Applied/ Translational Research

Quantitative Research

**Keywords**

Doll Therapy for BPSD

**Name and Email of Project Contact Person(s)**

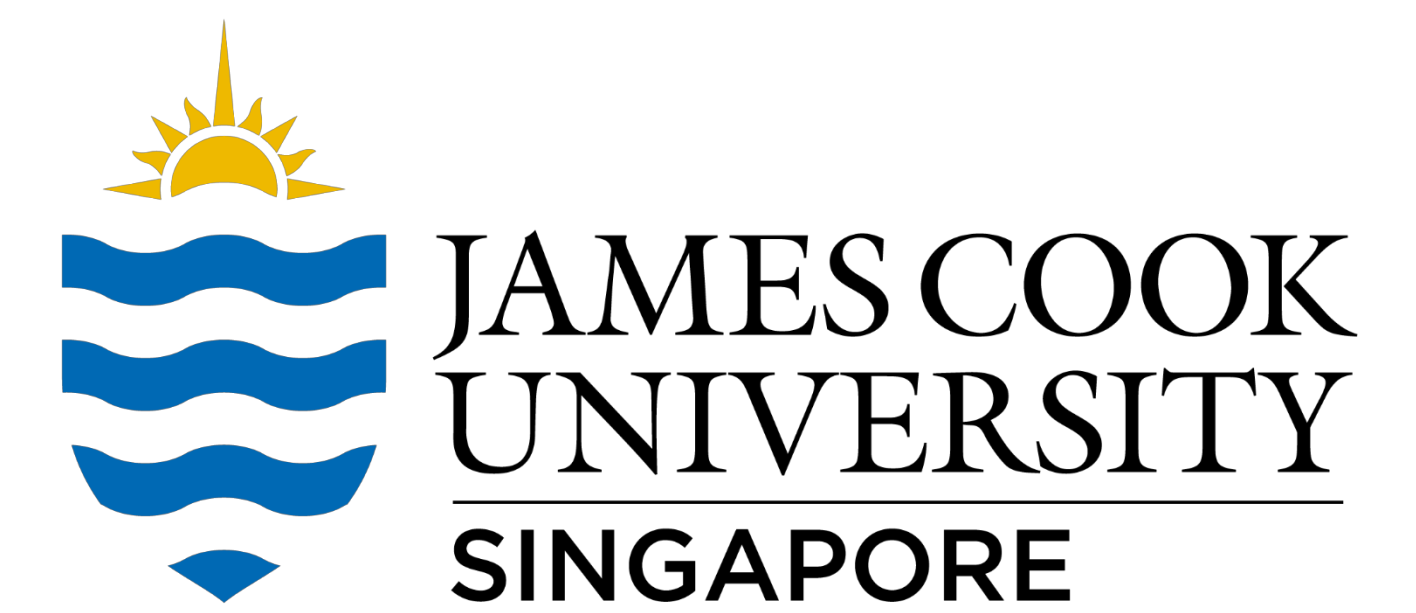
Name: Joanna Barlas

Email: [joanna.barlas@jcu.edu.au](mailto:joanna.barlas@jcu.edu.au)

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Lin Yijun Carol, Joanna Barlas

School of Health and Social Sciences, James Cook University Singapore



### INTRODUCTION

The number of persons with dementia in Singapore continues to increase, with more of them living in the community setting. Yet research into possible interventions for use in the community setting remains limited. Additionally, research (e.g., Clemson et al., 2018; Mokhtar et al., 2009) suggests that the attitudes of health professionals could impact on intervention implementation. As doll therapy (which involves behaviours such as holding, talking to, or dressing an anthropomorphic doll) is a potentially effective but underutilised nonpharmacological intervention strategy for management of Behavioural and Psychological Symptoms of Dementia (BPSD), the current study sought to explore attitudes of health professionals in Singapore toward the use of doll therapy for dementia in the community.

Research Question 1: How acceptable is doll therapy for dementia amongst health professionals in Singapore?

Research Question 2: How feasible would it be to implement doll therapy for individuals with dementia in the community?

### METHODOLOGIES

Participants were ten health professionals (five medical professionals either in the field of Geriatric Medicine or in working with elderly, and five allied health professionals who have had experience in using doll therapy for dementia). They were each individually interviewed in 2018, with questions and prompts from an interview schedule.

All participants were of Chinese descent. Five were medical professionals in the field of geriatric medicine/who work with elderly, and five were allied health professionals who have had experience in using doll therapy for dementia. The frequency of use varied due to need, setting, and availability of resources.

Specialization	Years of experience (elderly)	Years of experience, Frequency of use (doll therapy)	Gender	Age	Highest Educational Attainment
Psychiatry	8	5, limited use	Male	37	Postgraduate
Geriatric Medicine	10	7, frequent use	Male	42	Postgraduate
Geriatric Medicine	15	10, frequent use	Male	46	Postgraduate
Geriatric Medicine	10	3, frequent use	Male	40	Postgraduate
Geriatric Medicine	20	10, limited use	Male	46	Postgraduate
Psychology	1	1, frequent use	Female	24	Degree
Art Therapy	4	3, frequent use	Female	27	Postgraduate
Psychology	2	2, frequent use	Female	26	Degree
Psychology	5	1, frequent use	Female	32	Postgraduate
Occupational Therapy	7	1, frequent use	Female	29	Degree

Thematic analysis was used for the current study to derive general patterns of meaning across the attitudes of health professionals (specifically the feasibility and acceptability toward the use of doll therapy for dementia in the Singapore community) as opposed to personal accounts of their experiences.

### RESULTS

Overarching themes were identified:

- (1) Perceived usefulness of doll therapy
- (2) Suitability of doll therapy
- (3) Others' perception of doll therapy
- (4) Insufficient understanding leads to misconceptions; and
- (5) Resource considerations

- Perceived usefulness of doll therapy**
  - A form of engagement, could improve emotional wellbeing and alleviate behavioural symptoms
  - Provides meaning and purpose, fulfil need for identity
  - Nonpharmacological, few to no disadvantages

"I think if given the correct guidance, the correct framework, it is definitely an alternative that can be tried."
- Suitability of doll therapy**
  - Doll therapy appears to be stage-specific; suitability of its use increases with cognitive impairment of the person with dementia
  - Dependent on premorbid personality, culture, changing needs and preferences

"Those that I've observed are males. (...) Yeah. It was surprising for me too. But it really tied in with the family who shared with us that they like children."
- Others' perception of doll therapy**
  - Caregivers' perceptions of doll therapy determine implementation feasibility regardless of the perceived effectiveness of doll therapy for the person with dementia by the health professional
  - Variable according to caregiver knowledge, beliefs and experiences with children/doll therapy, negative societal responses

"The rest (of the residents) would actually condemn them. Like "Eh, you... you siao ah [are you crazy], you use this."
- Insufficient understanding leads to misconception**
  - Misconceptions founded in insufficient level of understanding of doll therapy and poor acceptance of dementia
  - All health professionals interviewed unanimously disagreed that doll therapy was truly infantilising. Doll therapy validated the shifting reality of the person with dementia

"Caregivers who provide that support to a loved one experiencing it, they may not be averse to it. (...) But it has to be supplemented with some education about the benefits of doll therapy and how to facilitate"
- Resource considerations**
  - Financial costs
  - Caregiver's limited emotional resources, time
  - Low accessibility to culturally-appropriate and realistic dolls

"After looking at the price, they may not want to try lah, because they're not sure whether it will work. Unless there's a so-called moneyback-guarantee..."

"More ang-moh-looking [Caucasian-looking] dolls, they can tell it's not... uh, their child."

Results suggest that doll therapy may be a useful and low-risk intervention that circumvents polypharmacy risks, and is acceptable to health professionals in Singapore, as a form of engagement which provides meaning and purpose. However, this is only when it has been deemed suitable for the person with dementia.

Health professionals seemed to be optimistic about its implementation in the community setting, provided that the necessary training and support are provided to caregivers.

### CONCLUSION

Doll therapy seems to be an intervention strategy worth considering, among other interventions targeting BPSD, provided it is used with sensitivity to individuals' unique needs and circumstances. However, when considering implementation in the community setting, challenges such as cost, insufficient understanding of dementia and doll therapy, as well as the negative perceptions of caregivers and the society still exist. As such, it continues to be underutilised in the community. To boost implementation feasibility, these challenges need to be overcome. Recommendations to do so include: (1) Ascertain suitability of doll therapy to reap its benefits; (2) Reduce misconceptions to improve others' perceptions of doll therapy; and (3) Improve access to resources to boost implementation feasibility.

### ACKNOWLEDGMENTS / REFERENCES

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