

# Increased memory strategy use following a single-session 'memory group' intervention

## Andy Champion, Mark Giles & Aileen Thomson

## 1. Background

Although group-based memory rehabilitation interventions commonly run over several sessions, the resources needed to facilitate this are not necessarily available in an acute general hospital setting.

An initial pilot study by the Health Psychology Department at Gloucestershire Royal Hospital indicated that the provision of a single-session group-based memory rehabilitation intervention was associated with increased use of memory strategies at one-month follow-up; hence such a session has been offered regularly by the neuropsychology service in the health psychology department for a number of years.

#### 2. Aim

The aim of the current analysis is to evaluate further the efficacy of the single-session 'memory group' intervention in increasing memory strategy use, in order to ascertain its ongoing value in making good use of limited resources in the acute hospital setting.

### 3. Intervention

The session lasts approximately two hours and is facilitated by a clinical psychologist. It covers sufficient background information to provide a rationale for the fifteen memory strategies (8 external, i.e. using accessories, and 7 internal, i.e. using strategies to do with manipulating information) that are then described and demonstrated.

Attendees are outpatient referrals identified as having memory difficulties by a treating member of staff; the criterion for inclusion is the ability to engage with the group setting. Attendees represent a wide range of ages and neurological conditions. Relatives/carers are encouraged to attend.

#### 4. Method

Attendees complete self-report measures of strategy use prior to the session and again one month later. At follow-up they are also asked to answer some questions relating to their satisfaction with the group session and its impact upon their perceived ability to manage their memory difficulties.

## 5. Results: strategy use

Before and after responses have been collected from 106 attendees, mean scores calculated, and paired t-tests carried out (Table 1). There is a statistically significant increase in the total number of memory strategies used by attendees post-intervention (p<0.001) (Figure 1), representing statistically significant increases in the numbers of both internal (p<0.001) and external (p<0.001) memory strategies used (Figure 2).

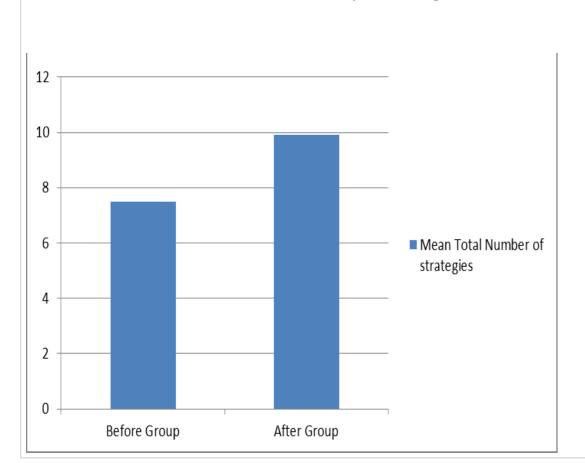
#### Table 1

Mean number of strategies used in a week, before and after the group

	Pre- intervention	Post- intervention	Significance
Total strategies used	7.5	9.9	p<0.001
External strategies used	5.3	6.1	p<0.001
Internal strategies used	2.2	3.8	p<0.001

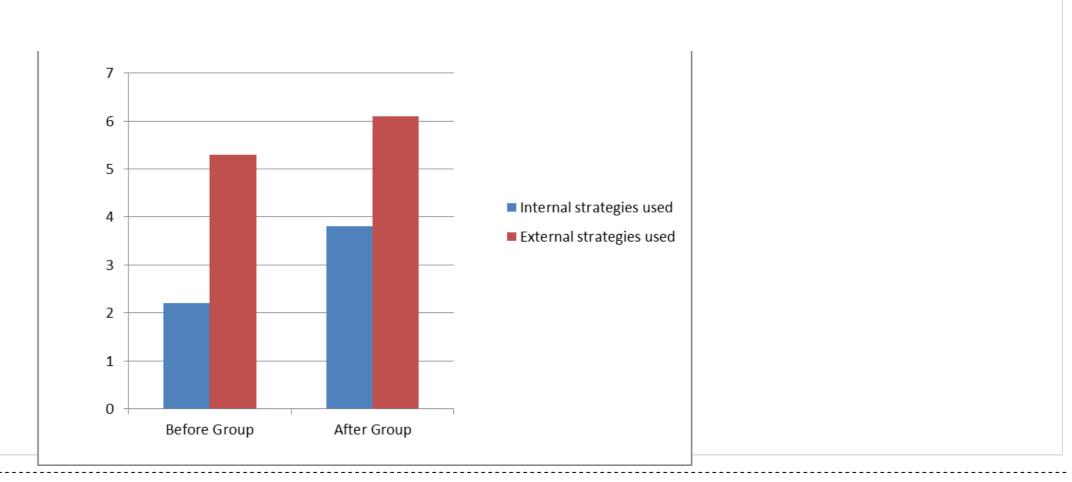
#### Figure 1

Mean total number of memory strategies used in a week, before and after the group



## Figure 2

Mean number of external and internal strategies used per week, before and after intervention



## 6. Results: impact and satisfaction

72% of attendees reported using more memory strategies one month after the memory group session. The mean increase equates to each attendee using 2.4 more strategies each week.

93% of respondents reported being satisfied with group attendance. 74% reported feeling less distressed about their condition afterwards, and 78% reported feeling more confident in their ability to cope with their memory difficulties.

#### 7. Conclusions

The results indicate that a single-session group intervention providing information about memory difficulties and describing/demonstrating the use of compensatory strategies is related to increased use of memory strategies at one-month follow-up.

The high proportion of attendees reporting improvements in self-management of symptoms, reduced distress and increased confidence in managing their memory difficulties suggests benefits relating to increased quality of life for individuals and carers, and also potential reduction in the need to access services in relation to memory difficulties.

This suggests that it is a worthwhile use of resources in an acute general hospital setting in which limited time and resources are available for such rehabilitation input.

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