Doll Therapy and Dementia

The origins of Doll Therapy

In the 1990’s, long-term care institutions were introduced to doll therapy with the aim of reducing behavioural and psychological disorders in people with dementia. Doll therapy is a non-pharmacological intervention suitable to some people living with dementia.

The rationale was inspired British Psychologist John Bowlby’s ‘Attachment Theory’. Although Bowlby’s work focused on children, his theoretical explanation for attachment was thought helpful to apply in people with dementia to ease emotional problems and anxiety.

Doll Therapy is also known as Child Representation Therapy and Nurture Therapy.

Attachment behaviours are instinctive

Bowlby believed that attachment behaviors are instinctive and are activated by conditions that threaten the achievement of proximity, such as separation, insecurity and fear.

Attachment behaviours can be observed in people with dementia. Parent fixation (searching for long deceased parents) is said to be an expression of an attachment need. This searching behaviour indicates that the person is insecure and seeking to be reunited with or attached to a familiar figure in order to find safety.

Doll therapy can meet this attachment need in some people with dementia. Although conclusive research data has not yet been produced, positive anecdotal and empirical studies are gathering momentum.

Doll Therapy as a therapeutic intervention

Doll therapy as a care tool is similar to other therapeutic interventions including music therapy, aromatherapy, art therapy and other sensory pursuits. As the number of people affected by dementia dramatically increases, more research into nonpharmacological interventions like doll therapy is taking place. This is fueled by concerns about the effectiveness and side effects of pharmacological treatments to manage the challenging behaviours of people with dementia.

Controversy and misconceptions

The introduction of Doll Therapy to treat people with dementia was met with much controversy and strong resistance from some staff and healthcare professionals which continues to this day. The therapeutic use of dolls for people with dementia can be a contentious issue for numerous reasons including an absence of clinical guidelines and misconceptions about the doll therapy as a demeaning
practice. Those critical to the practice argue that:

- Evidence of benefits is mainly anecdotal
- Staff validating the doll as 'real' is inappropriate
- Infantilisation of old age as a second-childhood is patronizing
- Enabling older adults to engage with dolls is a breach of trust

The Benefits of Doll Therapy

For those in favor of doll therapy, the empirical evidence supporting its use is compelling. Research in various countries including the United States, England, Australia and Canada indicate that there are strong benefits to the use of doll therapy including:

- An increase in positive social behaviour
- A decrease in medication
- Diminished agitation, aggression & wandering
- Maintaining abilities they are still able to engage in (dressing, hugging, rocking, cuddling, dancing, and singing for a doll)
- Assistance in expressing other unmet needs

There are a growing number of care facilities embracing doll therapy as an effective intervention for people with dementia.

Related:

- [How to Manage Wandering Behaviour](#)
- [Social Isolation - How to Support your Clients](#)

Getting started with Doll Therapy

Before implementing a doll therapy program, time and resources need to be allocated to the following:

- Training staff on how to practice doll therapy
- Educating relatives on the benefits of doll therapy
- Purchasing dolls that are as life-like as possible.
- Purchasing baby clothes, shoes, hats, and cribs for the dolls.
How to determine who would benefit from Doll Therapy

Doll therapy is not for everyone and candidates should be carefully chosen. People who may benefit from doll therapy include those with Alzheimer’s Disease. More women than men will choose a doll to nurture, but some men do benefit greatly from holding a doll, so don’t rule them out.

Assist residents with dementia to make their own choices by having them ‘find’ the doll rather than giving it to them. Leave it in a cot or lying on a table where it will be easily found.

How to practice Doll Therapy

Standard guidelines are not yet available and every facility implements their own procedures which leisure staff must comply with. Here are some general guidelines that may be helpful:

- If a resident perceives the doll as a real baby, do not correct him/her. Make sure staff on other shifts are aware of this to avoid contradicting each other and the resident.
- Do not share dolls as this is bound to cause ownership confrontations. Infection control is another reason dolls should not be shared.
- Monitor fatigue in residents caring for dolls.
- If a doll has a name, use it; the doll should be treated in a manner conducive to how the
Doll Therapy can be considered an appropriate therapeutic intervention by care staff when the person caring for the doll displays any of the following:

- Serene emotional engagement with the doll
- Improved attitude towards their peers and staff
- Improved communication
- Decline in aggressive behaviour
- A sense of wellbeing and liveliness
- Agitation is abated
- Anxiety is diminished leading to a reduction in medication.

Related:

- Goal-Directed Behaviour
- Sundowning: Symptoms, Triggers & Strategies

My Experience with Doll Therapy

I have witnessed the positive effects of doll therapy as an intervention numerous times in my working life. In my experience, the use of doll therapy promotes feelings of contentment in the person with dementia and improves their social rapport with staff.

Doll Therapy can provide satisfaction and comfort to people with dementia. It provides them with the opportunity to nurture and satisfy an emotional need that wouldn’t be fulfilled otherwise.

Related: 15 Activities for Late-Stage Alzheimer's Disease

We'd love to hear your feedback.

What has been your experience with doll therapy?