Encouraging Active Ageing in a Complex Client Group

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Sharpen Your Thinking
Contents of Presentation

* Introduction to role emerging placements
* Active ageing with visually impaired clients
* Active ageing within a ‘wet house’
* Learning and Summary
A role-emerging placement may be set up by higher education institutions to capitalise on a potentially rich learning experience in a setting that does not have an existing occupational therapy service (College of Occupational Therapists [COT] 2006, Fieldhouse and Fedden, 2009)
Role Emerging Placement

- Voluntary Sector
- Marginalised groups may experience occupational alienation and other social and environmental barriers.
- No occupational therapist on site
- Aim to promote occupational engagement and active ageing
- Why?
Active aging is a broad and internally complex notion that plays a key part in a global strategy for the management of ageing populations (Kalachea and Kickbusch, 1997; Walker, 2009; World Health Organization, 2009).
Mission statement from SRSB about supporting people with sight loss (SRSB, 2012).

However....

What was our role?
- Identifying a gap in the service provision to promote active ageing
- To demonstrate the transferability of the core skills of Occupational Therapy
Needs of the Client Group

- Older Adults
- Retired
- Physical Disabilities
- Visual Impairment
- Decreased Mobility
- Socially Isolated
Potential Impact of Visual Impairment

- Loss of confidence
- Social Isolation
- Loss of independence
- Reliance on others
- Low mood
- Anxiety

Reduction in occupational engagement

**Aims**
- Promoting participation and independence
- Challenge occupational alienation (Townsend and Wilcox, 2004)

**Health Promotion Group**
- Exercise Group
- Cooking group
Rationale for Intervention Groups

- Clients narratives - stories of food and roles as the 'provider', clients complained of “feeling stiff” and “seizing up”.

- Cooking is an occupation of both self-care and leisure, and has therapeutic value physically, cognitively and socially (Bryant and Mckay, 2005; Haley and McKay, 2004).

- Low vision has a significant impact on falls and fractures among older people (De Borer et al, 2004).

Exercise Group Format

- 6 people for 8 weeks
- 8 weeks – 2 individual sessions and 6 group sessions
- Introduction
- Pre-group discussion
- Rating scale – outcome measures
- Exercise session
- Handout of the exercises
Cooking Group Format

Session 1 - Welcome Breakfast
Session 2 - Holiday Food
Session 3 - A Traditional Pie
Session 4 - Client Choice
Session 5 - Quick and Easy Oven Bake
Session 6 - Celebrating Success with a Roast
Evaluation of the Group
Charity supporting homeless and vulnerable people

**The project**
Older males
'Wet house'
History of homelessness or vulnerable housing
Aged prematurely due to mental health problems, alcohol misuse or poor nutrition
Group Needs

- Liver disease
- Anxiety
- Stroke
- Hepatitis
- Schizophrenia
- Korsakoff’s syndrome
- Neuropathy
- HIV
- Depression
Activity Timetable
# Health and Well-Being Group

<table>
<thead>
<tr>
<th>Week</th>
<th>Activity</th>
<th>Sustainability</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Nail care</td>
<td>Equipment provided</td>
</tr>
<tr>
<td>2</td>
<td>Relaxation</td>
<td>CD’s for the living area</td>
</tr>
<tr>
<td>3</td>
<td>Relaxation</td>
<td>CD’s for the living area</td>
</tr>
<tr>
<td>4</td>
<td>Chair exercises</td>
<td>Exercise options</td>
</tr>
<tr>
<td>5</td>
<td>Fruit tasting/quiz</td>
<td>Fruit introduced at the coffee afternoon</td>
</tr>
<tr>
<td>6</td>
<td>Nail care</td>
<td>Equipment provided</td>
</tr>
<tr>
<td>7</td>
<td>Art</td>
<td>Materials available</td>
</tr>
<tr>
<td>8</td>
<td>Trip out- Arboretum</td>
<td>Encourage walking/volunteer supported trips</td>
</tr>
</tbody>
</table>
Evaluation

Positive response to Occupational Therapy from both residents and staff

Attendance
Improved quality of life
Reduced social isolation
Reduced reliance on alcohol

A more actively aging group of older men!
Learning

- Interventions focused upon active ageing by encouraging social engagement and confidence through participation in self-care and leisure activities

- Recognised and challenged the societal barriers faced by clients - access to community, financial resources, attitudes

- Increasing client ownership

- Client feedback demonstrated that the interventions enabled clients to make a leap towards a more positive future involving a more confident, healthier lifestyle where they felt able to participate more fully in society.
Role emerging placements offered an opportunity to explore the complexities of working with marginalized groups, demonstrating the need to promote active ageing for all groups in society.

Occupational Therapists professional commitment to using occupation to promote social inclusion and the skills of OT can be exported into many contexts.

Outcome measures indicated that the offer of meaningful activities elicited a palpable change in the environments and outlook of individuals.
References


* COLLEGE OF OCCUPATIONAL THERAPISTS (2006a) Developing the occupational therapy profession: providing new work-based learning opportunities for students. London: COT


References


* STENNER, PAUL, MCFARQUHAR, TARA AND BOWLING, ANN (2010) Older people and ‘active ageing’: Subjective aspects of ageing actively. Journal of Health Psychology 16 (3) 467 – 477


