Activation of Seniors in Residential Care Facility

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Abstract

Introduction: It has become a common practice to place elderly people in residential care facilities, providing a relatively good standard of living, but seniors often experience isolation from their families and wider social environment. An elderly person may thus feel lonely and useless. Leisure time activation reduces the negative effects of ageing, gives a greater sense of satisfaction and helps the clients eliminate their possible social isolation.

Aim: To find out how a selected senior care home applies activation approaches when working with their clients.

Method: Quantitative method was selected for the survey, utilizing a self-designed questionnaire as the research survey tool. The survey took place from early December 2016 to late January 2017. Descriptive statistics was used for evaluating the data.

Results: The care facility of interest applies activation approaches to achieve their clients' satisfaction. A prevailing portion of the clients is not bored in the facility and regularly participates in activation work. Seniors mostly dedicate themselves to fitness training, memory training and musical activities. They prefer group activities. The respondents see minor weaknesses in the limited range of offered activities, which could be extended to cooking, baking and animal therapy.

Conclusion: Although respondents have slight reservations to the practice of activation programs at the residential care facility, they are largely satisfied. All respondents are aware of the support provided by the staff. Involving volunteers might help extend and improve the range of activation programs, or integrating seniors into the community life.

Keywords: activation, leisure activities, senior, senior care home

Introduction

The notion of *activation* originates from the word *to activate*, meaning to bring something to movement or enhanced activity (Wehner & Schwinghammer, 2013). Only recently, the activation of seniors has started to develop as a specialized activity especially in senior care homes. According to Musil, Kubalčíková and Hubíková (2006), the terminology and the content of activation workers' profession are also still developing. The titles in use are, for instance, activation worker, activation program worker or activator. As part of their job content, these employees are expected to create and organize interest activities matching the clients' interests, habits, abilities and health condition. Such activities should provide the clients with psychological support to maintain their potentials, motivation, cognitive abilities, fine motor skills and to continuously educate them and help them apply the new knowledge in practice. Act No. 108/2006 Coll. on Social Services (Czech Republic) describes activation workers in social services, practising activation with their clients, as persons performing basic educative, non-teaching activities consisting in deepening and consolidating fundamental hygienic and social habits that influence the creation and development of work habits, manual skills and work activities. Furthermore, their scope of work involves the provision of leisure

activities focused on developing personality, interests, knowledge and creative skills in the form of art, musical and sports education, providing interest and cultural activities.

As part of a multidisciplinary approach, social workers, healthcare staff, pedagogical staff, marriage and family counsellors and other expert staff are involved in care for clients in social services area, directly providing social services, as well as volunteers under conditions laid down by a special legal regulation (44a). This special legal regulation is Act No. 198/2008 Coll., on Voluntary Service (Czech Republic). Musick and Wilson (2008) highlight volunteers who devote, free of charge, their time and effort to working with others as a natural phenomenon of today's modern society. In senior care homes, social workers, direct-care workers, activation nurses, occupational therapists, physiotherapists and leisure activity workers may participate in the activation of the elderly (Malíková, 2011). Volunteers occupy an important place in seniors' activation and leisure time (Mühlpachr, 2009).

Activation programs usually take place in seniors' leisure time in the form of activities bringing joy, contentment, pleasure and satisfaction (Janiš & Skopalová, 2016). The amount of leisure activities is constantly expanding and enriching the areas of cultural, social, educative, interest, recreational and public life, such as integrating a person into the community life (Duffková, Urban, & Dubský, 2008). The leisure time-focused research by Sak and Kolesarova (2012) suggests that the key joint leisure activity of current seniors is watching TV. The research has shown that an average senior person spends 2.9 to 3.5 hours a day watching television, which is up to twice as much as the younger generation. The computer and the internet occupy a special position among seniors' leisure activities. Unlike in the case of television, these phenomena only evolved after the zenith of their lives and thus were not part of their education. Nevertheless, a number of seniors have learned to use these technologies for their own sake. Boredom with a typical feeling of inner emptiness is often mentioned in the context of leisure time, as an unpleasant transient mental state in which the individual notices a profound lack of interest in his or her usual activities and has difficulties to concentrate on them (Spielberger, 2004). Mlýnková (2011) addresses boredom in relation to leisure time in old age, when an old person gets a lot of free time due to retirement and may not be able to fill it with appropriate activities. Seniors that are forced to leave their natural environment and move into a senior care home often develop dependency on others. Their earlier self-confidence, selfesteem and independence gradually vanish. They may experience feelings of vanity or loss of will to live. Therefore, it is necessary to stimulate elderly persons' interest in themselves (Wehner & Schwinghammer, 2013). The basic services provided to seniors living in senior care homes also include social-therapy activities, activation programs and social mediation services. It is desirable to adapt the activation program to the seniors' daily routines in terms of their habits. Activities attended by the senior should be regular, at a stable place and with workers they know well. Every senior is an individual being who wants to do his or her own activities. While offering activities, the client's past should also be taken into account (Suchá, Jindrová, & Hátlová, 2013).

An important principle of activation is to choose the appropriate difficulty of the activities. The activity itself must be neither too complicated, nor too simple. An activity will not be entertaining for the seniors if they fail or become fatigued. Contrariwise, trivial activities may make the senior feel undignified (Suchá et al., 2013). Activation programs may take place in groups or individually. The senior may pursue them in pairs with the personnel, housemates or family members. Activities are subdivided into passive and active ones. In the course of passive activities, the senior may listen to music, spoken word etc. Active activities involve arts, fitness training etc. (Burda & Šolcová, 2016).

Ideally, the senior's passive and active program should be balanced over the day. Mlýnková (2011) further differentiates activities to support mental abilities (e.g. reminiscence, cognitive training), physical abilities (e.g. fitness training, physical exercises, self-service activities) and sensory abilities (such as music therapy, dance, animal therapy, art therapy). Finally yet importantly, in the context of the activities provided, the senior residential facility should also respect clients' spiritual needs. Religion or spirituality may be one of the coping mechanisms helping to find resources, which may strengthen the person in decision-making and active behaviour to overcome problems (Křížová, 2016).

The clients should not be forced to any activity against their will, but it is important to inform them that the possibility is provided in the given option, is available in the home and can be used any time (Malíková, 2011).

Aim

The aim was to find out how a selected senior care facility applies activation approaches when working with their clients. The research questions were as follows: How do the clients spend their leisure time in the senior home? What is the participation of clients in the activation programs offered? How do clients perceive working with employees in activation programs?

Methods

Sample

The respondents were seniors without dementia diagnosis and respondents had to have experience with activation in the facility. The sample of respondents were 32 clients of a selected senior care home in South-Moravian Region, aged over 70, with half of the respondents aged between 80 and 89. Nine respondents were above 90 years of age. The respondents included 27 women and 5 men, who were in most cases living in the care home for longer than one year. More than half of the respondents had elementary or no education, another large group consisted of secondary-educated persons and the lowest number of respondents had higher professional or tertiary education.

Questionnaire

A quantitative method was selected for the survey, utilizing a questionnaire consisting of 22 self-designed questions, as the research survey tool. The queries were based on the research questions and were conceived as closed-ended dichotomous, polytomous and semi-closed questions.

Procedure

The survey took place from early December 2016 to late January 2017. The following criteria for inclusion in the research survey were applied: the facility had to be a registered senior care home. The questionnaires were administered personally in the selected facility. A total of 33 questionnaires were distributed with a return rate of 96.96% (32 questionnaires).

Statistical analysis

The questionnaires were processed in Microsoft Excel 2013. Descriptive statistics working with relative and absolute frequency was used to evaluate the data. Absolute frequency n_i expresses how many times the given character (variant, variation) occurs throughout the n range file (Evangelu & Neubauer, 2014). Relative frequency f_i is given by the ratio of absolute frequency n_i and total frequency n_i . To express the relative frequency in percent, the f_i value is multiplied by 100%. For

multiple questions, the relative frequency does not correspond to the total number of respondents (n \neq 32), but is related to the number of respondents' answers to the specific option.

Results

Clearly, the most frequent leisure-time activity among the respondents is watching TV. Further frequent activities of the seniors involve resting ($n_i = 18$; $f_i = 56.25\%$), meeting other people ($n_i = 15$; $f_i = 46.88\%$), pursuing interests and hobbies ($n_i = 14$; $f_i = 43.75\%$). Listening to the radio is less frequent ($n_i = 10$; $f_i = 31.25\%$). We expected a higher occurrence of the possibility to walk outside the facility – only 9 (28.13%) respondents chose this option, which suggests that seniors rather spend their leisure time indoors. Furthermore, we should also draw attention to respondents' answer concerning the option of free-time education, chosen by 5 respondents (15.63%) – namely only those with higher or tertiary education (Fig 1).

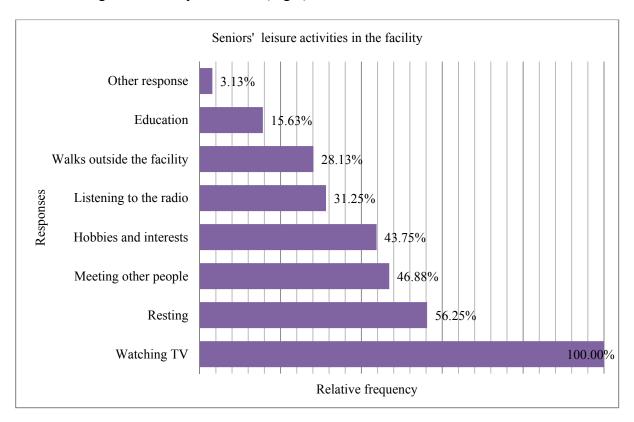


Fig. 1 Graph of variables under consideration – Respondents' participation in leisure activities

More than three quarters of the respondents participate in activation at least once a week. Most respondents ($n_i = 12$; $f_i = 37.50\%$) participate in activation programs 2–3 times a week; a similar frequency ($n_i = 11$; $f_i = 34.38\%$) was also encountered in the response category of 4-7 times a week. Only 6 (18.75%) respondents reported a small rate of participation in activation programs. It can thus be generally implied that the rate of participation in activation programs is high (Fig. 2).

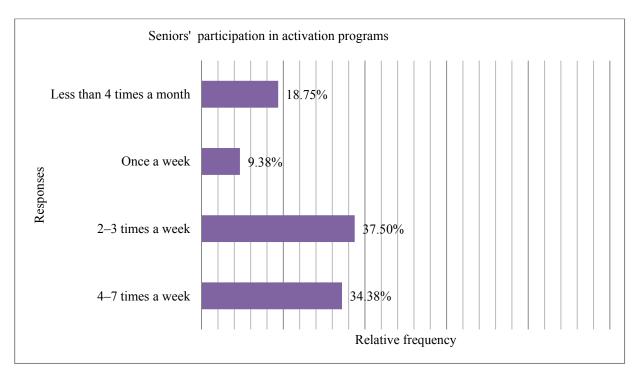


Fig. 2 Graph of variables under consideration – Respondents' participation in activation programs

As for the question concerning surveying the perception of activation workers' cooperation with the seniors, none of the respondents gave a negative answer. Twenty-nine respondents (90.63%) reported that they were encouraged by the staff when they failed in the course of activation programs. The remaining 3 respondents (9.38%) expressed their views in another response, agreeing that the staff respected their health issues. It can be generally stated that the personnel supports the clients in their activation programs (Fig. 3).

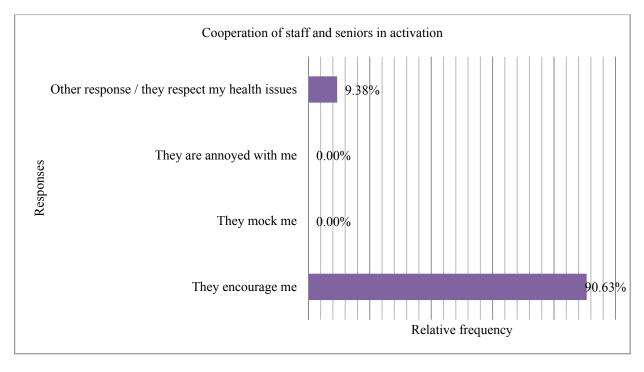


Fig. 3 Graph of variables under consideration - Staff's co-operation with seniors in activation

Discussion

The survey showed that the entire sample (32 respondents) watched TV in their leisure time. Also Sak and Kolesárová (2012) stated in their research that watching television was one of the major leisure activities. Janiš and Skopalová (2016) consider this activity risky but add that watching TV may also have certain positive aspects, mainly when watching educative or expert programs. Additionally, the respondents in our research also reported that their frequent leisure time activities included resting, meeting other people, attending worship or practising their interests and hobbies. Only a very small proportion of the seniors go out for walks outside the residential facility, which is in line with the similarly alarming results by Svobodová (2013), stating that her entire research group spent their leisure time indoors. Mühlpachr (2009) points out seniors' isolation from the society and claims that senior care facilities live a life of their own, not integrating their clients into the community life, which is what ultimately leads to a loss of social bonds. Based on the findings by Östlund (2010), TV viewing is considered as an active occupation, both mentally and emotionally, and communication in front of the TV can be developed as a part of the caring strategy. The respondents in our research tended to spend their leisure time rather passively by watching TV and resting but it turned out that a large proportion of seniors take part in activation programs offered by the facility. A high level of participation in activation programs is desirable as people's active involvement supports the function of social and emotional perceptions, increases seniors' self-sufficiency and satisfaction, strengthens social contacts and prevents social isolation (Haber, 2013). Rather than selecting individual activities, the respondents in our research pursued group activities; the seniors' most commonly practised activity was fitness training. Similar results were obtained by Svobodová (2013); her respondents also reported physical activities as the most frequently visited one. Slepička, Mudrák and Slepičková (2015), who consider appropriate physical activity to be a necessary part of active aging, mention the importance of physical activity because regular movement slows down involutional changes and postpones seniors' dependence on other people. A frequently pursued activity in the selected facility is memory training and high participation was also noticed in activities related to music. The popularity of musical activities in seniors, also involving high therapeutic effects, was described and evidenced in research papers by Edwards (2016), as well. Respondents' least frequently attended activity was commemorative gatherings, art groups, and animal therapy. There was concordance among all the respondents concerning their positive assessment of collaboration with the personnel as they were supported by the staff despite possible failures. The fact that seniors mostly require support, help and acceptance of their weaknesses is also highlighted by Janiš and Skopalová (2016).

Conclusion

In connection with the main research objective, it can be stated that the selected senior home uses activation programs to their clients' satisfaction. A prevailing part of the clients are not bored in the home and regularly attend activation and other leisure activities on a voluntary basis with staff members. Seniors mostly dedicate themselves to fitness training, memory training and musical activities. Contrariwise, the lowest frequency was reported for canistherapy, reminiscence and art therapy. This could be an impulse for the senior home workers to find a way to stimulate the clients' interest in participating in these activities. The survey has also shown that the activities offered are too easy for some clients. Respondents see moderate-level weaknesses also in the range of offered activities that could be extended to cooking, baking and animal therapy. Procuring small

domestic animals to be kept in the facility permanently could be considered a possible solution, which is frequently applied in other residential facilities. Similarly, the staff of the selected facility might consider introducing new cooking and baking activities. The results of this research also show that the facility is not working with volunteers to the extent that clients would welcome. One quarter of the research group does not have an opportunity to attend outdoor activities. A volunteer could be the solution for realizing such outdoor activities and also the respondents themselves wish to collaborate with volunteers. The fact that our survey was only carried out in one selected senior care home can be seen as a limitation. The results obtained thus cannot be linked to all seniors but only to the surveyed research sample. Statistical testing was not done due to the small research sample. Our study might be considered as an inspiration for further research on larger samples of respondents that would allow statistical testing.

Ethical Aspects and Conflict of Interest

None

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