



2022

Enhancing the Leisure, Social Participation, and Quality of Life of Older Adults Isolated during the COVID-19 Pandemic

Mariah LeRoux

Follow this and additional works at: <https://commons.und.edu/ot-grad>



Part of the [Occupational Therapy Commons](#)

Recommended Citation

LeRoux, Mariah, "Enhancing the Leisure, Social Participation, and Quality of Life of Older Adults Isolated during the COVID-19 Pandemic" (2022). *Occupational Therapy Capstones*. 515.
<https://commons.und.edu/ot-grad/515>

This Scholarly Project is brought to you for free and open access by the Department of Occupational Therapy at UND Scholarly Commons. It has been accepted for inclusion in Occupational Therapy Capstones by an authorized administrator of UND Scholarly Commons. For more information, please contact und.common@library.und.edu.

Enhancing the Leisure, Social Participation, and Quality of Life of Older Adults Isolated
during the COVID-19 Pandemic

by

Mariah LeRoux, OTDS

Advisor: Janet Jedlicka, PhD, OTR/L, FAOTA

A Scholarly Project

Submitted to the Occupational Therapy Department of the

University of North Dakota

In partial fulfillment of the requirements


for the degree of

Doctor of Occupational Therapy

Grand Forks, North Dakota

May, 2022

This scholarly project, submitted by Mariah LeRoux in partial fulfillment of the requirement for the Degree of Occupational Therapy Doctorate from the University of North Dakota, has been read by the Faculty Advisor under whom the work has been done and is hereby approved.



[Janet S. Jedlicka, PhD, OTR/L, FAOTA]

4-18-22

Date

PERMISSION

Title: Enhancing the Leisure, Social Participation and Quality of Life of Older Adults Isolated during the COVID-19 Pandemic

Department: Occupational Therapy

Degree: Occupational Therapy Doctorate

In presenting this scholarly project in partial fulfillment of the requirements for a graduate degree from the University of North Dakota, I agree that the library of this University shall make it freely available for inspection. I further agree that permission for extensive copying for scholarly purposes may be granted by the professor who supervised my project or, in their absence, by the Chairperson of the department or the Dean of the School of Graduate Studies. It is understood that any copying or publication or other use of this scholarly project or part thereof for financial gain shall not be allowed without my written permission. It is also understood that due recognition shall be given to me and the University of North Dakota in any scholarly use which may be made of any material in my scholarly project.


[Mariah LeRoux, OTDS]

04/18/2022
Date

TABLE OF CONTENTS

ACKNOWLEDGEMENTS.....	v
ABSTRACT.....	vi
CHAPTERS	
I. INTRODUCTION.....	1
II. REVIEW OF LITERATURE.....	4
III. METHODOLOGY.....	19
IV. PRODUCT.....	23
V. SUMMARY.....	31
REFERENCES.....	34
APPENDICES	
Appendix A.....	42
Appendix B.....	212
Appendix C.....	262
Appendix D.....	265
Appendix E.....	268
Appendix F.....	281

ACKNOWLEDGEMENTS

The author of this program would like to thank their advisor Janet Jedlicka, PhD, OTR/L, FAOTA, for her guidance and support throughout this project, and Doctoral Experiential Placement supervisor Christen Conrad, OTA, for her continued support, positivity and insight regarding the assisted living facility and its residents throughout the development of these products. The author would also like to take this time to thank their family and friends for their unconditional support throughout this experience.

ABSTRACT

Title: Enhancing the Leisure, Social Participation and Quality of Life of Older Adults Isolated during the COVID-19 Pandemic

APA Citation

Mariah LeRoux, OTDS. *Enhancing the Leisure, Social Participation and Quality of Life of Older Adults Isolated during the COVID-19 Pandemic*. Department of Occupational Therapy, University of North Dakota School of Medicine and Health Sciences, 1301 N Columbia Rd, Grand Forks, ND 58203.

Purpose

The purpose of this scholarly project was to enhance the performance range of older adults in assisted living by equipping them with the skills to engage in meaningful occupations throughout a pandemic. The meaningful occupations outlined in this project include leisure and social participation occupations to promote positive mental and physical health.

Methodology

This scholarly project was completed over 18 months. It began with a thorough literature review of current evidence to serve as the needs assessment. The process began in 2021 while looking at the mental health impact of COVID-19 lockdown precautions on older adults. The research identified a significant increase in mental health symptoms in older adults due to social distancing protocols and extreme isolation. It was also noted that there were few interventions to address this societal issue. The literature review then led to the impact of participation in social and leisure occupations on older adults and found positive mental and physical health benefits.

This scholarly project was guided by the Ecology of Human Performance (EHP) model. This model places heavy emphasis on the social, physical, temporal, and cultural contexts, which are key factors limiting older adults' participation in meaningful activity (Dunn, 1994).

Results

The products developed throughout this scholarly project were a program (product one) titled: *Increasing Occupational Engagement in Older Adults during a Pandemic*, and an education session for facilitators (product two) titled: *Promoting Positive Mental Health through Social Participation and Leisure during a Pandemic*. Product one has six sections including: mental health, leisure exploration, social participation, routine modification, community mobility, and technology. Product two is a 30-minute education session for occupational therapists (OT) and certified occupational therapy assistants (COTA) who will facilitate this program. The education session informs them on the mental and physical health impact of the COVID-19 pandemic and the benefits of leisure, social participation, and meaningful engagement to promote this participation in residents.

Conclusions

It is anticipated that this program will fill the gap in addressing the mental health, leisure, and social participation needs of older adults amidst the pandemic. This contributes to occupational therapy practice by providing more resources and to decrease occupational deprivation and isolation in older adults in assisted living facilities.

CHAPTER I

INTRODUCTION

Problem Statement

The COVID-19 pandemic dramatically changed everyday life for older adults, leaving them isolated from loved ones and deprived of opportunities to engage in meaningful occupations. According to Simard and Volicer (2020), 24% of the population over 65 were socially isolated, and those in long-term care settings were at an increased risk for isolation. These issues of isolation were compounded by the impact and duration of the COVID-19 pandemic. The research identified, that as a result of the COVID-19 pandemic, older adults experienced exacerbated feelings of loneliness, fearfulness, anxiety, and depression (Kotwal et al., 2020; Minahan et al., 2020; Montgomery et al., 2020). Occupational therapy was identified as an effective means of increasing the quality of life of older adults through leisure and social participation occupations (Chilvers et al., 2010; O’Sullivan, 2004; O’Sullivan, 2005; Jackson et al., 1998; Smallfield & Molitor, 2018). Research identified that engagement in leisure and social participation occupations throughout one’s life led to greater physical, mental, and cognitive health outcomes (Aroogh & Shaboulaghi, 2020; Ibrahim et al., 2020; Sala et al., 2019). Overall there is a need for intervention regarding the overwhelming amount of isolation present in older adults within assisted living facilities.

Purpose Statement

The purpose of this scholarly project was to enhance the performance range of older adults by equipping them with the skills to meaningfully engage in occupations throughout a pandemic. These products were intended to educate older adults on strategies to cope with current stressors, navigate their community, modify their routine to incorporate meaningful activity, explore leisure occupations and stay connected with others through technology or in-person contact. The facility where this project took place was a low-income assisted living facility in Minneapolis, Minnesota, where the budget and access to resources were limited. This scholarly project addressed the occupational needs of the residents to help them manage stress and participate in meaningful leisure and social participation occupations to increase their overall health and well-being.

Project Objectives

The first objective of this scholarly project was to identify the needs of older adults within an assisted living facility. This objective was completed through a thorough literature review and informal interviews conducted with staff and residents on-site to further inform the needs assessment. Another objective of this scholarly project was to develop a program for older adults to increase their quality of life through mental health support, and engagement in leisure and social participation occupations. This objective was completed throughout the author's time at an assisted living facility catering interventions for the population of residents related to mental health, leisure, and social participation. These objectives were intended to increase the quality of life of older adults who experienced extreme isolation throughout the COVID-19 pandemic.

Theoretical Framework

The Ecology of Human Performance (EHP) model was chosen to guide this project due to the contextual emphasis of the model involving the person, context, and task factors (Dunn, 1994). EHP allowed a more thorough analysis of older adults' experiences and engagement within an assisted living facility amidst the pandemic. This understanding helped inform the creation of the products to enhance the performance range of older adults physically and psychologically within an assisted living facility. This was done by providing them with the skills and abilities to meaningfully engage in occupations and cope with the stressors of the pandemic.

Significance of Project

Older adults are part of a high-risk population for contracting the virus; which has resulted in an exacerbation of anxiety and fearfulness (Banerjee & Rai, 2020; CDC, 2021; Torres, 2020). These older adults also experienced occupational deprivation and isolation at an alarming rate in preventing the contraction of the virus (CDC, 2021). Over time, this has had a detrimental effect on both the physical and mental well-being of older adults. It was important to create a program applicable to older adults in an assisted living facility to help them learn positive coping strategies to manage stressors, participate in leisure and social participation occupations, learn about community mobility options, modify routines and learn how to use technology to stay in touch with loved ones and the world around them. These interventions helped address a gap in literature targeting interventions for older adults who have experienced isolation and occupational deprivation as a result of the COVID-19 pandemic.

CHAPTER II

REVIEW OF LITERATURE

In 2020, the COVID-19 pandemic dramatically changed everyday life, through social distancing and quarantine precautions to minimize the spread of the virus. Today, in 2022, COVID-19 is still present and a mental and physical health concern for people of all ages. It is especially concerning for older adults who are at a higher risk of experiencing medical complications related to the virus and people who have experienced increased isolation (CDC, 2021). When thinking about older adults specifically, this population is more isolated than children, and young adults. The literature identified that 24% of adults over 65 were socially isolated (Simard & Volicer, 2020). The COVID-19 pandemic has left the world isolated from friends and family causing an increase in negative mental health symptomology (Kotwal et al., 2020; Minahan et al., 2020).

Problem

One concern that guided this project was the mental and physical health impact of limited social context on the aging adult. Humans are social beings, and literature showed that completing daily activities and making social connections with others is good for one's overall health (Chilvers et al., 2010; O'Sullivan, 2005; Sala et al., 2019). However, these opportunities are limited due to COVID-19 lockdown precautions.

COVID-19 has inflicted numerous stressors among many Americans, but older adults have a unique perspective. Reported stressors resulting from isolation and lockdowns included

anxiety about contracting the virus, concern about the future while in lockdown, fewer social connections, and isolation in general (Banerjee & Rai, 2020; Torres, 2020). These stressors are compounded by the significantly increased rates of depression, anxiety and loneliness overall due to the COVID-19 pandemic (Banerjee & Rai, 2020; Kotwal et al., 2020; Minahan et al., 2020; Stickley & Koyanagi, 2016; Torres, 2020). These mental health effects are not solely due to the COVID-19 pandemic but general prolonged isolation (Banerjee & Rai, 2020; NIA, 2021). The research identified that increased isolation causes an increase in dementia-related symptoms in older adults by up to 50% (Montgomery et al., 2020). Overall, the COVID-19 pandemic has resulted in numerous mental health consequences for older adults.

It is also important to note that as people age, they can often become isolated from friends and family as mobility and accessibility options change (Polgar, 2011). One study identified that increased loneliness could directly correlate to a rise in depressive symptoms and suicidal behavior (Kotwal et al., 2020; Stickley & Koyanagi, 2016). While this research is directly related to the mental health impact of COVID-19 on older adults, similar research was conducted on the SARS epidemic in Hong Kong in 2003, resulting in similar psychosocial implications (Yip et al., 2010). This study looked at the suicide deaths during the SARS epidemic. The authors found that fear of contracting the virus, isolation, limited social interactions, lack of normalcy in day-to-day life, and feelings of being a burden on their family were factors that affected the number of suicide deaths (Yip et al., 2010). These are all similar findings that older adults reported experiencing during the COVID-19 pandemic.

Throughout the pandemic, many individuals lacked meaningful relationships and interactions. This lack of meaningful interaction caused people to become lonely and withdraw from meaningful occupations and physical activity, whether by choice or due to COVID-19

lockdown precautions. Physical and social outings also became limited, which impacted mental and physical health (Sepulveda-Loyola et al., 2020). This lack of enjoyment and physical movement had a negative effect on the physical and mental health of older adults (NIA, 2021). Avoidant coping strategies resulted in negative mental health symptoms (Minahan et al., 2020; NIA, 2021). While mental illness and isolation are identified as pertinent issues today, older adults have difficulty coping with these feelings while using healthy strategies. A qualitative study evaluating the coping strategies of older adults during the COVID-19 pandemic identified that over 20% of older adults did not use any coping strategies (Finlay et al., 2021). In contrast, others used food and substances as coping mechanisms to handle the stress and social distancing measures (Finlay et al., 2021). Individuals who used negative coping strategies, such as avoidance, emotional venting, and substance use perceived threats as more significant (Heffer & Willoughby, 2017; Hsu & Tung, 2011; Labadi et al., 2021; Moos et al., 2006). It is essential to promote positive coping strategies among all individuals going forward, especially those who have felt the negative mental and physical health impacts of isolation and the COVID-19 pandemic.

Physical Health

As individuals age, their ability to access the community, friends, family, and other resources becomes difficult. Many older adults are more isolated than young adults due to physical and community mobility limitations (Polgar, 2011). Research has shown that learning how to navigate the community increases older adults' confidence, and community involvement and decreases feelings of isolation (Mulry et al., 2017). The literature has shown that education on community mobility for older adults can help reduce overall isolation (Mulry et al., 2017).

While it has been identified that isolation can significantly affect mental health, it has also been shown to decrease physical abilities, affecting independence in daily living occupations (Kotwal et al., 2020; Sepulveda-Loyola et al., 2020). Due to concerns related to COVID-19, older adults are not attending events or activities, and many are isolating in their rooms, limiting the regular everyday movement that maintains their strength and physical abilities. This caused older adults to need a higher level of care with self-care activities (Kotwal et al., 2020). Mental and physical health are interrelated and extended time in isolation leads to difficulties with daily occupations.

Occupational Therapy Role

Occupational therapy is a unique profession that serves individuals of all ages in nine different realms of occupations. These realms include: “activities of daily living (ADLs),” “instrumental activities of daily living (IADLs),” “health management,” “rest and sleep,” “education,” “work,” “play,” “leisure,” and “social participation” (AOTA, 2020, p.30-34). Occupational therapy is a profession that helps people complete their necessary and daily occupations by establishing, restoring, adapting, modifying, altering, preventing, and creating interventions catering to each specific client (Dunn, 1994). With occupational therapy’s expertise in many areas of occupation, it is appropriate to investigate interventions and the effects of positive coping strategies, leisure, and social participation on the quality of life and mental health of older adults affected by the COVID-19 pandemic.

Research demonstrates that occupational therapy is effective at promoting nine areas of occupations, specifically the importance of leisure, education, and social participation for the increased health of older adults (AOTA, 2020; Chilvers et al., 2010; O’Sullivan, 2004;

O’Sullivan, 2005; Jackson et al., 1998; Smallfield & Molitor, 2018). Occupational therapy supports the client in their environment while teaching and collaborating with them to find positive coping strategies, to handle stressful or difficult situations (AOTA, 2016; Bassett & Lloyd, 2001; Kirsh et al., 2019). Occupational therapists can also help aging individuals learn about bus routes and other transportation services that they can use within their community to continue to complete meaningful daily occupations, including social participation and leisure. Occupational therapy promotes positive coping strategies, leisure, social participation, community mobility, and technology occupations for older adults to be equipped with the skills to manage isolation present during the COVID-19 pandemic.

Coping and Stress Management

Numerous research articles identify that there is a need to assist older adults in developing positive coping strategies to handle life and COVID-19 related stressors (Finlay et al., 2021; Labadi et al., 2021). The literature identified chronic stress is a common cause of negative coping strategies and an unending cycle unless supplemented with positive coping strategies. Chronic stress is shown to increase symptoms of depression, risk of suicide, alcohol misuse, avoidance coping, and causes individuals to perceive stressors as a more significant threat (Moos et al., 2006). Chronic stressors are more difficult to combat, and intervention needs to focus on helping individuals who experience frequent stressors develop more effective skills.

Occupational therapy has a role in helping older adults develop positive coping skills to combat the increased rates of mental illness due to the COVID-19 pandemic. The literature identifies multiple coping strategies, including problem and emotion-focused coping (Aldwin & Yancura, 2004; Carr & Pudrovskaya, 2007). Problem-focused coping serves as a coping strategy in

which one takes action on a situation (Aldwin & Yancura, 2004; Carr & Pudrovskaya, 2007). On the other hand, emotion-focused coping entails internally handling the emotions that come with a situation or stressor (Aldwin & Yancura, 2004; Carr & Pudrovskaya, 2007). Unfortunately, emotion-focused coping is not always identified as a positive coping strategy. Some negative avoidance coping strategies include alcohol and substances (Aldwin & Yancura, 2004; Carr & Pudrovskaya, 2007). Occupational therapy interventions consider the different coping strategies and equip older adults with the skills necessary to manage life stressors.

Research on positive coping strategies includes leisure activities like exercise, reading, listening to music, praying, volunteering, and others (Finlay et al., 2021; Judson, n.d.). Other effective positive coping strategies included emotional regulation practice, increased self-esteem, meditation, and virtual and in-person social participation (Finlay et al., 2021; Heffer & Willoughby, 2017; Hsu & Tung, 2011; Labadi et al., 2021). Utilizing the most helpful strategies allows individuals to be equipped with positive strategies to better manage difficult situations. Frequent use of positive coping strategies is shown to reduce an individual's risk of depression, while a sense of connection with others helps individuals feel supported and equipped to handle stressful situations (Finlay et al., 2021; Labadi et al., 2021). Other helpful coping strategies include recognizing life stressors, balancing stressors, finding the positive in the situation, problem-solving therapy, and reminiscence therapy (Bassett & Lloyd, 2001; Moos et al., 2006; SAMHSA, 2011). Utilizing positive coping skills in older age is associated with a greater ability to adapt to stressors and reduce one's risk of depression (Finlay et al., 2021). Older adults who use positive coping strategies, leisure, and social participation are equipped to handle stressful situations and live healthy lives.

Social Participation

Social participation is activities that you complete socially with others like family or friends (AOTA, 2020). Social participation is identified as essential throughout aging, as it positively affects one's overall health (Aroogh & Shahboulaghi, 2020; Ibrahim et al., 2021). Social participation is important for all individuals' overall health and well-being because it gives one a sense of relatedness and belonging. Social participation is an area of occupation that has been dramatically affected by the COVID-19 pandemic because of various social distancing measures preventing or restricting access to others. Loneliness and lack of social participation opportunities are influenced by a variety of factors. These factors include environmental influences, such as social settings and interpersonal interactions, personal factors such as volition, and temporal factors related to interventions and social interactions (Aroogh & Shahboulaghi, 2020; Dunn, 1994; Ibrahim et al., 2021). Studies identify that volition and personal willingness to participate in social participation interventions directly impacts the effectiveness of the intervention (Ibrahim et al., 2021; Paggi et al., 2016). Personal satisfaction with interactions provides the individual a sense of autonomy and personal choice while also allowing for greater engagement in the task (Ibrahim et al., 2021; Paggi et al., 2016). It is essential that social participation interventions are intrinsically motivating and that contextual influences are considered when programming is developed.

The research identified social participation interventions are helpful in reducing cognitive decline in older adults (Fallahpour et al., 2016). One study found that visits from friends and family increased motivation for social participation while also increasing the individual's happiness (Dickens et al., 2011). Volunteering allows individuals to interact socially with others who share similar interests and is found to increase overall life satisfaction (Chilvers et al., 2010;

Paggi et al., 2016; Webber & Fendt-Newlin, 2017). Chilvers et al. (2010) identified that older adults who considered themselves healthy spent more time interacting with others. Social participation intervention can be conducted in various ways to promote healthy aging.

Social participation interventions are effective when implemented in various settings including groups, individual, community-based, group discussions, and online interactions with others (Ibrahim et al., 2021; Smallfield & Molitor, 2018; Webber & Fendt-Newlin, 2017). Group interventions are shown to allow for greater carryover and generalization through active discussion (Ibrahim et al., 2021; Webber & Fendt-Newlin, 2017). Writing helps tap into loneliness and promotes social interaction and increased positive mental health effects (Ibrahim et al., 2021). The action of writing is a unique way to get to know other people in a social setting and it allows older adults to reflect on personal experiences (Ibrahim et al., 2021). According to Ibrahim et al., community-based interventions increase life satisfaction and overall health (2021). This same study also found that community-based interventions reduce older adults' feelings of anxiety and depression and increase overall social connectedness with others (Ibrahim et al., 2021). Social participation can occur in various ways while promoting positive mental health and healthy aging.

Technology group interventions are helpful in increasing social contacts while being physically distanced from others (Ibrahim et al., 2021). One intervention includes educating older adults on how to initiate Zoom or FaceTime calls and coordinate with family or friends to call at the same time each week (Suttie, 2021). This weekly social participation provides consistency and regular social interaction among older adults (Suttie, 2021). The literature also noted that training older adults to use technology reduced isolation by allowing them greater opportunities to connect with others and the world around them (Chen & Schultz, 2016; Fields et

al., 2020). Technology training for older adults improved their confidence in using devices, which allowed them to engage in social and leisure activities in a new context (Chen & Schultz, 2016). It is helpful for older adults to have consistent access to a telephone to communicate with friends or family at their preferred time while also reducing the risk of depression by 33% (Montgomery et al., 2020). This transition to greater use of technology is difficult for some older adults; however, some can adapt better than others (Kotwal et al., 2020). The literature identified a need to train older adults on technology usage to enhance their connection with others and the world around them. Overall, social participation interventions were essential to promote social connectedness in many ways to decrease loneliness and increase older adults' overall well-being.

Leisure

Leisure is an activity that is completed during free time for pleasure and not relating to other obligations (AOTA, 2020). The literature states that leisure occupations have various physical and mental health benefits, including greater quality of life, greater life satisfaction, healthy aging, and a reduction in life stressors overall (Chen & Chippendale, 2018; Chilvers et al., 2010; Jackson et al., 1998; O'Sullivan, 2005; Paggi et al., 2016; Sala et al., 2019). Leisure improves symptoms of mental illness, including depression and anxiety, while increasing the quality of life (Chen & Chippendale, 2018; Paggi et al., 2016). Healthy older adults spent more time engaging in leisure occupations, which positively impacted their overall health (Chen & Chippendale, 2018; Chilvers et al., 2010). Some of these activities are individual; however, leisure is also tied to social participation. Some activities qualify for both areas of occupation and promote healthy aging in multiple ways (Sepulveda-Loyola et al., 2020). Leisure activities reduced feelings of isolation thus promoting improved physical and mental health (Nyman &

Szymczyńska, 2016; Sala et al., 2019). Overall, leisure occupations are shown to be beneficial for overall healthy aging.

While leisure positively impacts community-dwelling older adults' physical and mental health, it also helps decrease cognitive decline associated with age. Leisure participation is significantly correlated with a reduction in cognitive decline, including dementia-related symptoms, and slowing the process (Chen & Chippendale, 2018; Chiu et al., 2013; Fallahpour et al., 2016; Nyman & Szymczyńska, 2016). Specifically, active cognitive tasks related to leisure are shown to have restorative properties regarding cognition in older adults (Chiu et al., 2013). Within the pandemic-related guidelines, these leisure occupations can take place to provide physical and cognitive activity promoting healthy aging of older adults in long-term care settings.

Leisure activity is identified as a way to improve mental and physical health outcomes. Leisure can also improve ADL and IADL performance, to increase the performance range of older adults (Chen & Chippendale, 2018). Other leisure activities include exercise, art, book clubs, and telephone calls (Montgomery et al., 2020; Suttie, 2021). Promoting leisure participation first starts with leisure exploration. Leisure exploration allows individuals to experience different activities while finding hobbies and meaningful occupations they enjoy (Chen & Chippendale, 2018; Smallfield & Molitor, 2018). It is noted that there are various categories of leisure activities to participate in, including creative, physical, mental, cognitive, sensory, relaxation, spiritual, and social leisure (O'Sullivan, 2005; Pettry, 2006). This literature identified that leisure engagement is essential for overall mental and physical health, especially in long-term care settings like assisted living facilities.

Lifestyle Redesign®

Lifestyle Redesign® is an occupational therapy program that helps people create healthy habits to promote a healthier lifestyle (University of Southern California, n.d.). Lifestyle Redesign® promotes healthy aging by incorporating healthy habits and routines, including social participation and leisure pursuits. In a hallmark study by Jackson et al., it was found that occupational participation promoted healthy aging through the intervention of Lifestyle Redesign® (1998). This article also reports participants increased their engagement in meaningful occupations due to this intervention (Jackson et al., 1998). Not only did Lifestyle Redesign® increase occupational engagement, it also demonstrated improved physical health and quality of life among participants (Jackson et al., 1998). Another study looking at Lifestyle Redesign® for social participation and leisure found that participants demonstrated significant mental health outcomes and interest in leisure activities after completing the program (Levasseur et al., 2019). However, social participation interventions have a less significant impact on the participants (Levasseur et al., 2019). Lifestyle Redesign® is identified as an effective intervention to promote healthy habits and routines for older adults.

Experience within an Assisted Living Facility

An assisted living facility is one location where many precautions have been put in place during the COVID-19 pandemic such as isolation, in addition to social distancing and masking. These precautions are implemented to protect the health of the residents during the pandemic. Within this setting, individuals report feeling isolated in their new environment due to a lack of support upon moving in and limited access to friends and family (Fidanza et al., 2020). Often, this isolation and lack of support lead to the decreased motivation of residents to attend events

and partake in meaningful occupations, causing greater deterioration in mental and physical health (Fidanza et al., 2020; Sepulveda-Loyola et al., 2020). In a similar environment, nursing homes found that during the COVID-19 pandemic, less than one-fifth of the number of residents who used to attend activities before the pandemic continue to attend during the pandemic (Montgomery et al., 2020). This is a dramatic difference in the number of residents socially interacting with peers and engaging in leisure occupations. Due to having limited social contacts, residents felt superficiality with the connections made at the facility (Fidanza et al., 2020). They report needing more profound social connections to feel satisfaction in their interactions (Fidanza et al., 2020). Isolation and COVID-19 precautions have greatly affected residents within an assisted living facility. It is essential to equip residents with the skills and coping strategies to make meaningful social connections and maintain engagement in meaningful occupations to gain valuable mental and physical health benefits.

Conclusion

In creating this program, it was pertinent to research effective interventions related to coping, social participation, leisure, and community mobility to identify effective interventions for older adults in an assisted living facility. This program was created encompassing secondary prevention principles for this at-risk group within the scope of occupational therapy for residents lacking meaningful occupational engagement.

The Ecology of Human Performance Model (EHP) guided this needs assessment and identified key factors to create a program applicable to residents at an assisted living facility (Dunn, 1994). Key psychosocial person factors include an increase in loneliness, disruption in typical social routines, and limited social support within an assisted living facility, which

increased and exacerbated anxiety, depression, and the risk of suicide (Banerjee & Rai, 2020; Fidanza et al., 2020; Kotwal et al., 2020; Minahan et al., 2020; Stickley & Koyanagi, 2016; Torres, 2020). When considering the cognitive factors of the person, it is reported that extreme isolation and the increase in mental health symptomology can cause a significant increase in cognitive decline (Montgomery et. al., 2020). This isolation leads to difficulty completing meaningful and necessary daily occupations due to overall weakness and balance difficulties (Kotwal et al., 2020). The EHP model allowed an in-depth analysis of all person factors to properly evaluate the population in order to increase the performance range of older adults amidst a pandemic.

The limitations within the social context amongst social distancing protocols make social interaction difficult, and many resorted to using technology to fill this gap. However, some older adults struggle with this transition (Ibrahim et al., 2021; Kotwal et al., 2020). It is noted that older adults have limited physical contexts due to physical and community mobility limitations (Polgar, 2011). These limitations made it harder to access necessary or desired places in the community and visit friends and family (Polgar, 2011). During the COVID-19 pandemic, many facilities also put their own rules in place restricting people from leaving their rooms or leaving the building, which also restricted the physical context of residents. The temporal context is also important to note within an assisted living facility. The temporal context includes the time of day that activities are held and individual routines; this became a barrier to participation in facility-held activities (Torres, 2020). The cultural context is influenced by the closing of religious services, restricting religious participation, as well as the changes associated with the culture of the facility throughout pandemic protocols. The influence of all EHP contexts impacted the performance range of older adults and restricted access to many meaningful occupations.

The tasks included coping, leisure, social participation, routine modification, community mobility, and technology use for older adults. Occupational therapy has been identified to help increase both mental and physical health benefits through social participation and leisure intervention (Jackson et al., 1998; Levasseur et al., 2019). Positive coping strategies increases one's ability to adapt to and manage stressors (Heffer & Willoughby, 2017). Healthy older adults who had routines involving hobbies and other leisure activities also interacted with peers more often and demonstrated greater mental and physical health outcomes (Aroogh & Shahboulaghi, 2020; Chen & Chippendale, 2018; Chilvers et al., 2010; Ibrahim et al., 2021; Jackson et al., 1998; O'Sullivan, 2005; Sala et al., 2019). The literature identified that educating individuals on community mobility options increases their confidence and use of resources in the future, reducing isolation (Mulry et al., 2017; Polgar, 2011). Occupational therapy has a distinct role in promoting overall well-being by assisting individuals to participate in meaningful occupations like leisure and social participation, which can also help manage stressors.

All of these components of evaluation and intervention through EHP are impacted by the volition, engagement, and interest of residents. Personal, contextual, and task factors are utilized to increase the performance range of older adults. Promoting positive coping strategies, leisure, social participation, routine modification, and community mobility intervention for positive mental and physical health outcomes can increase the performance range of older adults.

In order to establish positive coping skills, interventions take the form of problem or emotion-focused coping through strategies like increasing self-esteem, social support, and emotional regulation practice (Aldwin & Yancura, 2004; Carr & Pudrovska, 2007; Heffer & Willoughby, 2017; Judson, n.d.; Labadi et al., 2021). Establishing new routines for older adults, especially with family and friends, is beneficial for social participation opportunities (Dickens et

al., 2011). Intervention involves establishing leisure occupations through leisure exploration (Chen & Chippendale, 2018; Smallfield & Molitor, 2018). It also identified that establishing volunteering opportunities is a great way for older adults to participate in something they enjoy while meeting others who enjoy the same activities or experiences (Chilvers et al., 2010; Paggi et al., 2016; Webber & Fendt-Newlin, 2017). Establishing skills related to community mobility is intervention that allows older adults to learn how to navigate the community with their new mobility limitations, increasing confidence and participation (Mulry et al., 2017). These occupational therapy-related interventions better equip older adults with the establishment of skills to promote mental and physical health amidst a pandemic.

Technology is another effective intervention that alters the social environment to maintain social connections (Ibrahim et al., 2021). Altering an individual's physical context is also effective by planning "home visits" and community interventions to improve mental health overall (Dickens et al., 2011; Ibrahim et al., 2021). Effective prevention interventions include structured routines to promote engagement in leisure and social participation occupations for healthy aging and prevention of overall cognitive decline (Chiu et al., 2013; Fallahpour et al., 2016; Nyman & Szymczynska, 2016). Effective create interventions include Lifestyle Redesign® or routine modification to create new healthy habits and routines involving leisure and social participation to improve mental and physical health outcomes of older adults (Jackson et al., 1998; Levasseur et al., 2019).

Overall, leisure and social participation occupations are important for mental and physical health as they promoted enjoyable activities, engagement, positive coping, and reduced loneliness in older adults. These interventions are found to equip older adults with the skills to promote mental and physical health amidst a pandemic.

CHAPTER III

METHODOLOGY

Project Design

This Doctoral Experiential Placement (DEP) is designed to equip older adults with coping strategies and meaningful occupations to promote healthy aging amidst isolation and mental health concerns caused by the COVID-19 pandemic. This scholarly project was inspired by personal experience and a desire to address occupational deprivation present in older adults in an assisted living facility. This program consists of 22 group sessions including two optional sessions. It addresses six broad topics, including mental health, leisure exploration, social participation, routine modification, community mobility, and technology usage. These sessions are to be facilitated by an occupational therapist (OT) or certified occupational therapy assistant (COTA) under the supervision of an OT. These topics were identified as needs for the residents through a thorough literature review and time-on-site at an assisted living facility.

The Ecology of Human Performance (EHP) model guided this project to address all person, context, and task factors associated with decreased participation and occupational deprivation in older adults (Dunn, 1994). This model utilized seven intervention types that increase the performance range of older adults to allow them to age in place. The interventions used include: establish, restore, adapt, modify, alter, prevent, and create (Dunn, 1994).

Timeline

This project was developed over the course of 18 months. Initial needs assessment and program development literature review was conducted from the fall of 2020 until the end of 2021. Additional literature was explored as the actual project was developed. During this time, the research found identified the need for intervention regarding occupational deprivation and mental and physical health concerns for older adults in long-term care. During the literature review phase, a meeting was held to confirm the DEP site between University of North Dakota (UND) faculty and DEP site faculty. The initial literature review was completed before attending the DEP site in January of 2022. Residents and care staff were informally interviewed during the first four weeks on-site to gather information related to the needs of the residents and to further inform program development for this population of older adults in assisted living.

Procedures

The needs assessment for this project was a literature review that included 48 resources supporting the need for occupational therapy to address concerns related to mental health, leisure, and social participation for older adults in an assisted living facility. Electronic databases were utilized through the UND School of Medicine and Health Sciences (SMHS), including CINAHL, PubMed, and Google Scholar. Professional organizations utilized include the American Occupational Therapy Association (AOTA) and the American Journal of Occupational Therapy (AJOT). Government websites and databases used include the Centers for Disease Control and Prevention (CDC), Substance Abuse and Mental Health Services Administration (SAMHSA), and the National Institute on Aging (NIA). In addition, one continuing education seminar was utilized in this needs assessment from Occupationaltherapy.com. Initial research

investigated the mental and physical health impacts of the COVID-19 pandemic on older adults. Through this, it was noted that leisure and social participation were evidence-based interventions for this societal issue. The mental health and psychosocial impact literature preceded the literature supporting leisure and social participation interventions for older adults.

Search terms used, included: “Isolation AND (mental health OR mental illness) AND (geriatrics OR older adults OR community dwelling older adults)”, “(MH ‘Occupational Therapy’) AND (leisure OR leisure pursuits OR leisure exploration)”, “Lifestyle Redesign® AND (older adults OR community dwelling older adults OR geriatrics)”, “(‘Occupational Therapy’) AND (older adults OR geriatrics) AND (social participation OR social isolation OR isolation) AND (physical health OR health)”, “(‘Occupational Therapy’) AND (older adults OR geriatrics) AND (social participation OR socialization OR hobbies) AND (community mobility OR taxi OR bus OR car OR train)”. Other related search terms utilized were isolation, loneliness, COVID-19, mental health, coping strategies, technology, community mobility, geriatrics, and overall health.

Informal interviews with open-ended questions took place with staff and residents at the assisted living facility to further understand the impact of COVID-19 on residents. Each staff member had a different perspective and different roles within the facility. The interviews helped identify specific topics addressed within the program targeting residents’ individual and group needs.

Ethical Considerations

Based on the comprehensive review of literature available, most research was published after 2010, while other hallmark studies, theoretical models, and programming-related research were included. Websites and research articles were cited appropriately throughout the product in their usage. Images were gathered via Microsoft stock images and require no copyright. Graphics were created by the writer and did not require copyright. An affiliation statement was also written to give readers notice that the author of these products is in no way associated with the companies and platforms utilized in programming sessions.

Inclusion and Exclusion Criteria

Inclusion and exclusion criteria narrowed the focus of this project. Articles were included if they related to community-dwelling older adults, aging, occupational therapy, isolation, COVID-19 from a psychosocial perspective, loneliness, suicide, coping, stigma, mental health, physical health, social networking, social participation, leisure, community mobility, Lifestyle Redesign®, technology, and ADLs. Literature was not included if it focused on other therapies, senior centers, substance abuse, psychopharmacologic effects, or isolation equipment. Articles were not included if the population focus was too narrow, for example, low vision, MS, Alzheimer's, low back pain, or intellectual disabilities. By excluding these terms, it allowed the focus on older adults and their experience during the COVID-19 pandemic. This literature addressed the problem, while other literature addressed coping, leisure, social participation, community mobility, and Lifestyle Redesign® to inform program development interventions.

CHAPTER IV

PRODUCT OVERVIEW

Two products were developed for this scholarly project; a program and an educational session for the facilitators of the program. The first product of this scholarly project was a program titled *Increasing Occupational Engagement in Older Adults during a Pandemic*. This product includes 22 group sessions to address isolation and occupational participation in older adults in an assisted living facility. Product one is located in Appendix A. Product one is intended to be facilitated by a certified occupational therapist (OT) or certified occupational therapy assistant (COTA). The second product of this scholarly project is an educational session for the facilitators on the program created (product one) titled: *Promoting Positive Mental Health through Social Participation and Leisure during a Pandemic*. This product is a 30-minute education session outlining product one and describing the importance of positive mental health practices, social participation, and leisure for older adults. Product two is located in Appendix B.

Theoretical Model

The Ecology of Human Performance (EHP) model was the guiding theory for this scholarly project. EHP assumes that persons and contexts influence one another, impacting an individual's performance range (Dunn, 2017). This emphasis on the context was necessary for this scholarly project. Older adults have experienced many limitations in their context due to pandemic protocols. Approaching an assisted living facility through this lens allowed for a deeper analysis of participation among older adults. According to Dunn, the performance range

is the number of occupations that an individual is able to effectively complete based on the person, context, and task factors, equaling the outcome of the intervention (Dunn, 2017).

Overall, the model strives to increase the performance range of persons through intervention in context, person, and tasks through five means of intervention (Dunn, 1994).

Research Questions

Questions that guided the creation of this project included:

- How does minimal social context influence older adults' mental health?
- How does social isolation impact older adults' overall physical health?
- How can occupational therapy increase the performance range of older adults who experience isolation?
- How effective is Lifestyle Redesign® at promoting healthy aging of older adults?
- What evidence-based interventions are effective at promoting social participation in older adults?
- How does leisure participation influence the person?
- What evidence-based interventions promote leisure pursuits/exploration in older adults?

These questions were answered in the literature review. The information found informed the products of this scholarly project.

Purpose

The purpose of this program, *Increasing Occupational Engagement in Older Adults during a Pandemic*, was to address the occupational deprivation and isolation experiences of

older adults in an assisted living facility. This program was designed to be facilitated by an OT or COTA. If no occupational therapy professional is available, it is suggested that the facility explore grants to provide funding for skilled occupational therapy services to facilitate this program.

This program was created based on literature and experiences within a low-income assisted living facility in a metropolitan area. Individuals living in this facility must be over 55 and receive assistance in at least three support categories to qualify for this facility. These categories include laundry, food, medication management, housekeeping, and activities of daily living (ADLs). Through the literature review process and informal interviews, older adults have experienced more stressors and mental health symptoms due to the COVID-19 pandemic. It has also been noted that older adults had fewer social interactions due to transportation and pandemic limitations (Polgar, 2011).

Program (Product One)

The program titled: *Increasing Occupational Engagement in Older Adults during a Pandemic* is split into six sections, each covering different topics related to experiences throughout a pandemic and participation in social and leisure opportunities.

Program Goals: By the end of the program

- Participants will increase their performance range by spending more time in leisure and social participation occupations throughout the day.
- Participants will establish skills in new contexts while participating in daily occupations.

- Participants will establish the skills to reduce isolation in their home context during the pandemic.
- Participants will establish the skills to properly cope with the negative mental health consequences of the pandemic.

This program begins with one overarching session to introduce the topic of the program. Other supplemental sections include:

1. Mental Health During a Pandemic
2. Leisure Exploration
3. Social Participation for Older Adults in an Assisted Living Facility
4. Routine Modification
5. Community Mobility for Leisure and Social Participation
6. Technology for Leisure and Social Participation

These sessions can be facilitated in individual or group formats. However, group formats are more beneficial to promote overall carryover and generalization for multiple participants (Ibrahim et al., 2021; Webber & Fendt-Newlin, 2017). Sessions can be adapted and graded for the appropriate population. The completed product is located in Appendix A.

The first section of this program, *Mental Health During a Pandemic*, helps guide older adults through coping with stressors surrounding the pandemic or other life stressors. This section is best facilitated in a group format to allow older adults to understand that they share similar stressors with others. This section begins with the identification of stressors and allows older adults to explore coping strategies and create a toolbox to use during difficult situations, like the pandemic.

The second section of this program, *Leisure Exploration*, goes through five categories of leisure, including creative, social, physical, cognitive, and relaxation/spiritual. This section allows older adults to explore different leisure activities to promote leisure as a coping strategy and meaningful occupation where they can spend their time. This section is best facilitated in a group format to encourage the social aspects of the presented occupations.

The third section of this program, *Social Participation for Older Adults in Long-Term Care Settings*, includes education about effective communication and forming meaningful connections. This way, older adults can learn appropriate social cues and skills to connect with peers for social support during the pandemic.

The fourth section of this program, *Routine Modification*, entails analyzing and modifying current routines. It involves an in-depth analysis of a participant's daily routine. Then another session works on modifying the everyday routine to promote greater leisure and social participation for health promotion.

The fifth section of this program, *Community Mobility for Leisure and Social Participation*, educates older adults on mobility options and leisure opportunities present in their community. These opportunities enable older adults to engage in meaningful occupations in a different context through education on the proper resources.

The sixth and final section of this program is *Technology for Social Participation and Leisure*. This section educates older adults on using iPads and other technology for various reasons, including online shopping, video calling with family and friends, or learning new things on the internet. Overall, this session applies a new virtual context for older adults to participate with others during a pandemic.

This program is intended to increase the overall performance range of older adults through mental health support, community mobility, leisure, and social participation occupations. Participation in these occupations is intended to promote increased mental and physical health, happiness, and life satisfaction.

Education Session (Product Two)

This product titled: *Promoting Positive Mental Health through Social Participation and Leisure during a Pandemic*, is a 30-minute educational session for OTs and COTAs. This educational session aims to educate the facilitators on factors that affect the implementation of product one. It focuses on the benefits of social participation and leisure for older adults during a pandemic to minimize feelings of isolation. This educational session also outlines the importance of each of the six sections entailed in the program (product one). The literature identified that when staff is educated on the mental and physical health benefits of leisure and participation, they can help promote overall resident participation (Aroogh & Shahboulaghi, 2020). It was essential to also produce a product to educate the facilitators of the program so that they can encourage resident participation in all occupations.

Education Session Goals: By the end of the education session

- Participants will understand the mental and physical health consequences of occupational deprivation present in older adults during the pandemic.
- Participants will increase their understanding of the impact of leisure and social participation on the healthy aging of older adults.

- Participants will understand how to conduct the program: *Increasing Occupational Engagement in Older Adults during a Pandemic*.

Program Evaluation Methods

These products must be evaluated to understand the effectiveness of the interventions provided. Product one: *Increasing Occupational Engagement in Older Adults during a Pandemic* is evaluated through resident and facilitator surveys. The facilitator will be an OT or COTA, and they will be responsible for administering resident surveys and completing their own facilitator surveys. It is intended that residents are given a pre, and post-program, non-standardized Likert scale, and free-response survey to complete. The resident pre-program survey is located in Appendix C, and the post-program survey is located in Appendix D. It is intended that information from both surveys are to be compared after the program to evaluate the effectiveness of interventions provided. The facilitator also completes their own post-program evaluation survey and daily logs for each session. The facilitator is also expected to document overall facility statistics related to resident move-outs and hospitalizations to evaluate program effectiveness for aging in place. The facilitator's surveys are located in Appendix E.

Product two: *Promoting Positive Mental Health through Social Participation and Leisure during a Pandemic* is to be evaluated through a facilitator survey at the conclusion of the educational session. This survey is located in Appendix F. This survey demonstrates the understanding and effectiveness of education on the topics presented in the program. Educating facilitators on the program allows them to properly conduct interventions, and encourage and support residents throughout its facilitation to increase health benefits.

Sustainability

The key “pillars” influencing the sustainability of a product are economic, environmental, and social factors (Purvis et al., 2019). Regarding the economic factors, these two products were given to the facility as a hard copy booklet and PDF file. All of these products were provided free to the facility. This program was designed to be implemented by occupational therapy practitioners. It is recommended that the facility pursue grant funding to hire appropriate personnel. As for the environmental factors involved in sustainability, the program is set up to utilize different contexts consistent with EHP to enhance overall participation for older adults. Finally, considering social factors, this program was written at a higher academic reading level for the facilitator. However, handouts and educational content were created at an 8th-grade reading level to fit the average literacy level of the intended population of older adults in low-income housing. The products were also designed to be facilitated in individual and group formats so that interventions are conducive to all learners.

Conclusion

This scholarly project was created to assist older adults in combatting the negative mental and physical health consequences of the COVID-19 pandemic through healthy strategies and participation in meaningful occupations. Two products were created to accomplish this goal: a comprehensive program for leisure and social participation followed by an education session for occupational therapy facilitation staff. These products are to be evaluated through non-standardized surveys to show understanding and changes in overall engagement as a result of the program and education session. This program was intended to reduce the isolation of older adults through meaningful activity during a pandemic.

CHAPTER V

SUMMARY

This scholarly project was designed to promote positive coping, leisure, and social participation among older adults experiencing isolation during the COVID-19 pandemic. Two products were created as part of this scholarly project. Product one is a program created to address isolation and occupational deprivation in older adults during the pandemic titled: *Increasing Occupational Engagement in Older Adults during a Pandemic*. This product is designed to be facilitated by either an occupational therapist (OT) or certified occupational therapy assistant (COTA). Product two is an education session for the facilitators of the program. This education session focuses on establishing an understanding of the theoretical and research background of the program. This education session was intended to promote a more comprehensive understanding of the health benefits of leisure and social participation and the mental and physical health impact of the COVID-19 pandemic on older adults. This education session is titled: *Promoting Positive Mental Health through Social Participation and Leisure during a Pandemic*. These products were guided by the Ecological Model of Human Performance (EHP) model. Within the COVID-19 pandemic, personal and contextual factors influenced overall participation and isolation in older adults, making this model an appropriate choice to guide this scholarly project.

Implications for Occupational Therapy Practice

These products are intended to be used by occupational therapy clinicians working with older adults in an assisted living facility. Product one will equip older adults with the skills to cope with pandemic-related and other life stressors while engaging in leisure and social participation activities. Product two provides the background needed for effectively implementing the sessions. The program sessions promote mental and physical health during the COVID-19 pandemic by providing meaningful engagement in occupations, tying to the core principles of occupational therapy.

These products fill a gap in research regarding intervention for older adults suffering from adverse mental health symptoms due to the increased isolation and decreased social connection tied to the COVID-19 pandemic. These are intended to increase social connection, and leisure engagement in older adults amidst the COVID-19 pandemic.

Strengths and Limitations

These products were created based on an assisted living facility in the metropolitan area of Minneapolis, Minnesota. Some content, specifically section five, will need adaptation for different contexts with differing mobility options. This program encompasses multiple concepts that contribute to isolation and quality of life to present a comprehensive protocol to address this societal issue and promote older adults aging in place.

Future Recommendations

These products need to be piloted with participants living in an assisted living facility. Based on feedback from this pilot study, revisions will need to be made.

Anticipated Outcomes

It is anticipated that this program will fill the gap in addressing the mental health, leisure, and social participation needs of older adults amidst the COVID-19 pandemic. In addition, this program will provide more resources to help older adults establish and restore meaningful occupations to promote health and well-being while aging in place.

References

- Aldwin, C. M., & Yancura, L. A. (2004). Coping. In C. Spielberger (Ed.) *Encyclopedia of Applied Psychology*, (1st ed., pp.507-510). Elsevier Academic Press.
- American Occupational Therapy Association. (2016). *Mental health promotion, prevention and intervention: Across the lifespan*. <https://www.aota.org/-/media/Corporate/Files/Practice/MentalHealth/Distinct-Value-Mental-Health.pdf>
- American Occupational Therapy Association. (2020). Occupational therapy practice framework: Domain and process (4th ed.). *American Journal of Occupational Therapy*, 74 (Suppl. 2), 7412410010. <https://doi.org/10.5014/ajot.2020.74S2001>
- Aroogh, M. D., & Shahboulaghi, F. M. (2020). Social participation in older adults: A concept analysis. *International Journal of Community Based Nursing and Midwifery*, 8(1), 55-72. <https://doi.org/10.30476/IJCBNM.2019.82222.1055>
- Banerjee, D., & Rai, M. (2020). Social isolation in Covid-19: The impact of loneliness. *International Journal of Social Psychiatry*, 66(6), 525-527. <https://doi.org/10.1177/0020764020922269>
- Bassett, H., & Lloyd, C. (2001). Occupational therapy in mental health: Managing stress and burnout. *British Journal of Occupational Therapy*, 64(8), 406-411. <https://doi-org.ezproxylr.med.und.edu/10.1177/030802260106400807>
- Carr, D., & Pudrovskaya, T. (2007). Mid-life and later-life crises. In J. E. Birren (Ed.) *Encyclopedia of Gerontology*, (2nd ed., pp.175-185). Academic Press.
- Centers for Disease Control and Prevention. (2021). *COVID-19 risks and vaccine information for older adults*. <https://www.cdc.gov/aging/covid19/covid19-older-adults.html>

- Chen, S. W., & Chippendale, T. (2018). The issue is- Leisure as an end, not just a means, in occupational therapy intervention. *American Journal of Occupational Therapy*, 72, 7204347010. <https://doi.org/10.5014/ajot.2018.028316>
- Chen, Y. R., & Schultz, P. (2016). The effect of information communication technology interventions on reducing social isolation in the elderly: A systematic review. In G. Eyezbach, N. Diviani, & J. Clemens (Eds.). *Journal of Medical Internet Research*, 18(1), e18. <https://doi.org/10.2196/jmir.4596>
- Chilvers, R., Corr, S., & Singlehurst, H. (2010). Investigation into the occupational lives of healthy older people through their use of time. *Australian Occupational Therapy Journal*, 57, 24-33. <https://doi.org/10.1111/j.1440-1630.2009.00845.x>
- Chiu, Y. C., Huang, C. Y., Kolanowski, A. M., Huang, H. L., Shyu, Y., Lee, S. H., Lin, C. R., & Hsu, W. C. (2013). The effects of participation in leisure activities on neuropsychiatric symptoms of persons with cognitive impairment: A cross-sectional study. *International Journal of Nursing Studies*, 50(10), 1314-1325. <https://doi.org/10.1016/j.ijnurstu.2013.01.002>
- Dickens, A. P., Richards, S. H., Greaves, C. J., & Campbell, J. L. (2011). Interventions targeting social isolation in older people: A systematic review. *BMC Public Health*, 11(1), 647-647. <http://www.biomedcentral.com/1471-2458/11/647>
- Dunn, W., Brown, C., & McGuigan, A. (1994). The ecology of human performance: A framework for considering the effect of context. *American Journal of Occupational Therapy*, 48, 595-607. <https://doi.org/10.5014/ajot.48.7.595>

- Dunn, W. (2017). The ecological model of occupation. In J. Hinojosa, P. Kramer, & C. B. Royeen (Eds.) *Perspectives on Human Occupation: Theories Underlying Practice*, (2nd ed., pp. 207-235). F. A. Davis.
- Fallahpour, M., Borell, L., Luborsky, M., & Nygard, L. (2016). Leisure activity participation to prevent later-life cognitive decline: A systematic review. *Scandinavian Journal of Occupational Therapy*, 23(3), 162-197.
<http://dx.doi.org/10.3109/11038128.2015.1102320>
- Fidanza, N., Bondoc, S., & Kowal, J. (2020). Short, spontaneous and superficial: An exploration of social participation among older adults in an assisted-living facility (ALF). *American Journal of Occupational Therapy*, 74(Suppl. 1). <https://doi.org/10.5014/ajot.2020.74S1-PO5606>
- Fields, J., Cembali, A. G., Michalec, C., Uchida, D., Griffiths, K., Cardes, H., Cuellar, J., Chodos, A. H., & Lyles, C. R. (2020). In-home technology training among socially isolated older adults: Findings from the tech allies program. *Journal of Applied Gerontology*, 40(5), 489-499.
<https://doi-org.ezproxylr.med.und.edu/10.1177/0733464820910028>
- Finlay, J. M., Kler, J. S., O'Shea, B. Q., Eastman, M. R., Vinson, Y. R., & Kobayashi, L. C. (2021). Coping during the COVID-19 Pandemic: A qualitative study of older adults across the United States. *Frontiers in Public Health*, 9, 1-12.
<https://doi.org/10.3389/fpubh.2021.643807>
- Heffer, T., & Willoughby, T. (2017). A count of coping strategies: A longitudinal study

- investigating an alternative method to understand coping and adjustment. *PLoS One*, *12*(10), e0186057. <https://doi.org/10.1371/journal.pone.0186057>
- Hsu, H. C., & Tung, H. J. (2011). Coping strategies and adaptation for disabled elderly in Taiwan. *Geriatric Gerontology International*, *11*(4), 488-495. <https://doi.org/10.1111/j.1447-0594.2011.00701.x>
- Ibrahim, A. F., Tan, M. P., Teoh, G. K., Muda, S. M. & Chong, M. C. (2021). Health benefits of social participation interventions among community dwelling older persons: A review article. *Experimental Aging Research*, *1*-27. <https://doi.org/10.1080/0361073X.2021.1939563>
- Jackson, J., Carlson, M., Mandel, D., Zemke, R., & Clark, F. (1998). Occupation in lifestyle redesign: The well elderly study occupational therapy program. *American Journal of Occupational Therapy*, *52*(5), 326-336. <https://doi.org/10.5014/ajot.52.5.326>
- Judson. (n.d.). *5 ways older adults can reduce stress*. <https://www.judsonsmartliving.org/blog/5-ways-older-adults-can-reduce-stress/>
- Kirsh, B., Martin, L., Hultqvist, J., & Eklund, M. (2019). Occupational therapy interventions in mental health: A literature review in search of evidence. *Occupational Therapy in Mental Health*, *35*(2), 109-156. <https://doi.org/10.1080/0164212X.2019.1588832>
- Kotwal, A., Holt-Lunstad, J., Newmark, R., Cenzer, I., Smith, A., Covinsky, K., Escueta D., Lee, J., & Perissinotto, C. (2020). Social isolation and loneliness among the San Francisco bay area older adults during the COVID-19 shelter-in-place orders. *Journal of the American Geriatrics Society*, *69*(1), 20-29. <https://doi-org.ezproxylr.med.und.edu/10.1111/jgs.16865>
- Labadi, B., Arato, N., Budai, T., Inhof, O., Stecina, D. T., Sik, A., & Zsido, A. N. (2021).

- Psychological well-being and coping strategies of elderly people during the COVID-19 pandemic in Hungary. *Aging & Mental Health*, 1-18.
<https://doi.org/10.1080/13607863.2021.1902469>
- Levasseur, M., Filiatrault, J., Lariviere, N., Trepanier, J., Levesque, M. H., Beaudry, M., Parisien, M., Provencher, V., Couturier, Y., Champoux, N., Corriveau, H., Carbonneau, H., & Sirois, F. (2019). Influence of Lifestyle Redesign® on health, social participation, leisure and mobility of older French-Canadians. *American Journal of Occupational Therapy*, 73, 7305205030. <https://doi.org/10.5014/ajot.2019.031732>
- Minahan, J., Falzarano, F., Yazdani, N., & Siedlecki, K. L. (2020). The COVID-19 pandemic and psychosocial outcomes across age through the stress and coping framework. *The Gerontologist*, 61(2), 228-239. <https://doi.org/10.1093/geront/gnaa205>
- Montgomery, A., Slocum, S., & Stanik, C. (2020). *Experiences of nursing home residents during the pandemic*. Altarum. https://altarum.org/sites/default/files/uploaded-publication-files/Nursing-Home-Resident-Survey_Altarum-Special-Report_FINAL.pdf
- Moos, R. H., Brennan, P. L., Schutte, K. K., & Moos, B. S. (2006). Older adults' coping with negative life events: Common processes of managing health, interpersonal and financial/work stressors. *International Journal of Aging and Human Development*, 62(1), 39-59.
<https://doi.org/10.2190/ENLH-WAA2-AX8J-WRT1>
- Mulry, C. M., Papetti, C., De Martinis, J., & Ravinsky, M. (2017). Facilitating wellness in urban-dwelling, low-income older adults through community mobility: A mixed-methods study. *American Journal of Occupational Therapy*, 71(4), 1-7.
<https://doi.org/10.5014/ajot.2017.025494>
- National Institute on Aging. (2021). *Loneliness and social isolation- Tips for staying connected*.

- <https://www.nia.nih.gov/health/loneliness-and-social-isolation-tips-staying-connected>
- Nyman, S. R., & Szymczynska, P. (2016). Meaningful activities for improving the wellbeing of people with dementia: Beyond mere pleasure to meeting fundamental psychological needs. *Perspectives in Public Health, 136*(2), 99-107.
<https://doi.org/10.1177/1757913915626193>
- O'Sullivan, G. (2004). Leisure activity programming: Promoting life satisfaction and quality of life for residents in long-term care. *New Zealand Journal of Occupational Therapy, 51*(2), 33-38.
- O'Sullivan, G. (2005). Protocols for leisure activity programming. *New Zealand Journal of Occupational Therapy, 52*(1), 17-25.
- Paggi, M. E., Jopp, D., & Hertzog, C. (2016). The importance of leisure activities in the relationship between physical health and well-being in a life span sample. *Gerontology, 62*(4), 450-458. <https://doi.org/10.1159/000444415>
- Petry, D. W. (2006). *Learning about Leisure through Activities*.
http://www.dannypetry.com/ebook_leisure.pdf
- Polgar, J. (2011). Enabling community mobility is an opportunity to practice social occupational therapy. *Canadian Journal of Occupational Therapy, 78*, 67-71.
<https://doi.org/10.2182/cjot.2011.78.2.1>
- Purvis, B., Mao, Y., & Robinson, D. (2019). Three pillars of sustainability: In search of conceptual origins. *Sustainability Science, 14*, 681-695. <https://doi.org/10.1007/s11625-018-0627-5>
- Sala, G., Jopp, D., Gobet, F., Ogawa, M., Ishioka, Y., Masui, Y., Inagaki, H., Nakagawa, T.,

- Yasumoto, S., Ishizaki, T., Arai, Y., Ikebe, K., Kamide, K., & Gondo, Y. (2019). The impact of leisure activities on older adults' cognitive function, physical function and mental health. *PLOS One*, *14*(11), e0225006.
<https://doi.org/10.1371/journal.pone.0225006>
- Sepulveda-Loyola, W., Rodriguez-Sanchez, I., Perez-Rodriguez, P., Ganz, F., Torralba, R., Oliveira, D. V., & Rodriguez-Manas, L. (2020). Impact of social isolation due to COVID-19 on health in older people: Mental and physical effects and recommendations. *Journal of Nutrition, Health & Aging*, *24*(9), 938-947. <https://doi.org/10.1007/s12603-020-1469-2>
- Simard, J., & Volicer, L. (2020). Loneliness and isolation in long-term care and the COVID-19 pandemic. *Journal of American Medical Directors Association*, *21*(7), 966-967.
<https://doi.org/10.1016/j.jamda.2020.05.006>
- Smallfield, S., & Molitor, W. L. (2018). Occupational therapy interventions supporting social participation and leisure engagement for community-dwelling older adults: A systematic review. *American Journal of Occupational Therapy*, *72*(4), 7204190020.
<https://doi.org/10.5014/ajot.2018.030627>
- Stickley, A., & Koyanagi, A. (2016). Loneliness, common mental health disorders and suicidal behavior: Findings from a general population survey. *Journal of Affective Disorders*, *197*, 81-87. <http://doi.org/10.1016/j.jad.2016.02.054>
- Substance Abuse and Mental Health Services Administration. (2011). *Treatment of depression in*

older adults evidence-based practices (EBP) kit.

<http://www.dmh.ms.gov/pdf/SAMHSA%20Toolkit.pdf>

Suttie, J. (2021). *How older people can cope with isolation*. Greater Good Magazine.

https://greatergood.berkeley.edu/article/item/how_older_people_can_cope_with_isolation

Torres, E. A. (Presenter). (2020). *OT's mental health response to the COVID pandemic: Older adults*. [Video Presentation]. <https://www.occupationaltherapy.com/otceus/course/occupational-therapy-s-mental-health-4940>

University of Southern California. (n.d.). *USC chan division of occupational science and*

occupational therapy practice: About Lifestyle Redesign®. <https://chan.usc.edu/patient-care/faculty-practice/about>

Webber, M., & Fendt-Newlin, M. (2017). A review of social participation interventions for

people with mental health problems. *Social Psychiatry and Psychiatric Epidemiology*, 52,

369-380. <https://doi.org/10.1007/s00127-017-1372-2>

Yip, P. S. F., Cheung, Y. T., Chau, P. H., & Law, Y. W. (2010). The impact of the epidemic

outbreak: The case of severe acute respiratory syndrome (SARS) and suicide among

older adults in Hong Kong. *Crisis: The Journal of Crisis Intervention & Suicide*

Prevention, 31(2), 86-92. <https://doi.org/10.1027/0227-5910/a000015>

APPENDIX A

Increasing Occupational Engagement in Older Adults during a Pandemic

By: Mariah LeRoux, OTDS

Purpose Statement

The purpose of this program is to enhance the performance range of older adults by equipping them with the skills to engage in meaningful occupations amidst the COVID-19 pandemic. This program will improve the performance range of older adults by educating them on coping with current stressors, navigating their community, modifying their routine to incorporate meaningful activity, exploring leisure occupations, and staying connected with others through technology or in-person contact. In addition, this program will help older adults establish new habits and routines to promote healthy engagement in leisure and social participation occupations promoting mental and physical well-being.

Acknowledgments

The author of this program would like to thank their advisor Janet Jedlicka, PhD, OTR/L, FAOTA, for her guidance and support throughout this project, and Doctoral Experiential Placement supervisor Christen Conrad, OTA, for her continued support, positivity, and insight regarding the assisted living facility and its residents throughout the development of the products. The author would also like to take this time to thank their family and friends for their unconditional support throughout this experience.

Affiliation Statement

This product includes sessions involving the use of various company products and services and the author is in no way affiliated with the stated companies. Company names or products used include but are not limited to Amazon, Facebook, Google, Apple, Zoom, Skype, Target, Walmart, Postmates, Mom's Meals, Instacart, Amazon Fresh, Metro Mobility, Metro Transit, Transit Link, Uber, Lyft, Help at Your Door, Blue & White taxi, Rainbow taxi, Yellow Cab, Transportation Plus, or any community organizations listed throughout this protocol.

Table of Contents

EHP Analysis and Literature.....	47
Program Overview.....	57
Introduction Session 1: Participation during a Pandemic.....	62
Section 1: Mental Health during a Pandemic.....	71
Session 1: Identifying Stressors.....	72
Session 2: Healthy Coping Strategies.....	77
Session 3: Exploration of Coping Strategies.....	84
Session 4: Building a Healthy Coping Strategies Toolbox.....	94
Section 2: Leisure Exploration.....	98
Session 1: Creative Leisure.....	99
Session 2: Social Leisure.....	104
Session 3: Physical Leisure.....	108
Session 4: Cognitive Leisure.....	113
Session 5: Relaxation/Spiritual Leisure.....	116
Section 3: Social Participation for Older Adults in an Assisted Living Facility	122
Session 1: Effective Communication.....	123
Session 2: Making Meaningful Connections.....	129
Section 4: Routine Modification.....	135
Session 1: Routine Analysis.....	136
Session 2: Routine Modification.....	144
Session 3 (optional): Routine Modification for Depression.....	153
Section 5: Community Mobility for Leisure and Social Participation.....	164
Session 1: What is Community Mobility?	165
Session 2: Leisure & Social Participation in the Community.....	175
Session 3: Community Outing Utilizing Community Mobility.....	183
Section 6: Technology for Leisure and Social Participation	186
Session 1: Introduction to Technology.....	187
Session 2: Technology for Social Participation.....	192
Session 3: Technology for Leisure.....	197
Session 4 (optional): Amazon Alexa for Leisure.....	207

Model: *Ecology of Human Performance (EHP)*

This model is appropriate for this program because of the unique interactions of different contexts on the person, such as social, physical, temporal, and cultural (Dunn, 1994). The interaction of person factors and contexts influences overall occupational participation. This model was effective in analyzing participation in older adults to appropriately create a program to promote overall participation.

EHP Terminology: This program includes language consistent with the EHP model.

Terminology utilized in this program includes: person factors, contexts, tasks, performance range, establish, restore, adapt, modify, alter, create, and prevent (Dunn, 1994). This terminology is threaded throughout the program and guided the program to increase the performance range of older adults through a pandemic.

- Person: This is the psychosocial, sensorimotor, and cognitive factors that influence the involvement in occupations (Dunn, 1994).

Psychosocial	<ul style="list-style-type: none">• Research has noted an increase in isolation as individuals age (Simard & Volicer, 2020).• All people have experienced limited social interactions due to pandemic-related protocols.• Older adults have experienced an increase in isolation for an extended time due to pandemic protocols (Banerjee & Rai, 2020).• Extended time in isolation and other pandemic-related stressors have caused older adults to develop increased mental health symptoms including anxiety, depression, and loneliness (Banerjee & Rai, 2020; Kotwal et al., 2020; Minahan et al., 2020; Stickley & Koyanagi, 2016; Torres, 2020).• Many individuals experienced a disruption in daily routines during the COVID-19 pandemic (Torres, 2020).• Older adults have experienced limitations in social support due to social distancing measures and a lack of understanding of technology and accessibility (Fidanza et al., 2020; Kotwal et al., 2020).• Many individuals have had to cope with the loss of a loved one, some whom they may not have been able to say goodbye (Torres, 2020).• Volition was shown to be directly tied to the effectiveness of leisure and social participation activities influencing older adults' participation in occupations (Ibrahim et al., 2021).
Sensorimotor	<ul style="list-style-type: none">• Many older adults experienced limitations in participation and leisure which led to a decrease in physical function, requiring older adults to need more assistance with activities of daily living (ADLs) and instrumental activities of daily living (IADLs) (Kotwal et al., 2020).• The lack of social connection and leisure engagement caused consequences for physical and mental health.
Cognition	<ul style="list-style-type: none">• Older adults experienced an increase in isolation which can exacerbate cognitive decline (Montgomery et al., 2020).

- Context: The context is the environmental or outside factors surrounding the person (Dunn, 1994).

Social	<ul style="list-style-type: none"> • Older adults experienced fewer social interactions with both staff working from home and friends and family not able to visit due to pandemic-related and facility protocols (Sepulveda-Loyola et al., 2020) • Older adults experienced reduced contact and care from staff to maintain a safe distance minimizing the spread of COVID-19 (Torres, 2020). • A reduction in social contact caused isolation and occupational deprivation in older adults minimizing connections with others (Banerjee & Rai, 2020; Simard & Volicer, 2020). • Many facilities shut down opportunities for social gatherings to reduce virus transmission.
Physical	<ul style="list-style-type: none"> • Older adults experienced limitations in physical context due to quarantine measures when leaving home. • Some facilities required residents to isolate themselves in their rooms, limiting changes in their physical context. • Older adults experienced mobility limitations associated with age and assisted living facilities (Polgar, 2011).
Temporal	<ul style="list-style-type: none"> • The time of day activities were held, or services were available, dictated older adults' participation. • An older adult's participation in an activity may be related to how long an activity will last. • COVID-19, in general, disrupted daily routines (Torres, 2020).
Cultural	<ul style="list-style-type: none"> • Religious services were shut down due to pandemic protocols, limiting religious participation. • The culture within a facility changed during pandemic-related protocols with limited peer interactions and cohesiveness of group activities.

- Task: The task is the occupations completed (Dunn, 1994).

Coping Strategies	<ul style="list-style-type: none"> • Learning how to cope with difficult situations like a pandemic is easier when individuals are equipped with the skills to do so (Finlay et al., 2021; Labadi et al., 2021). • Older adults are at an increased risk of having medical complications when contracting the COVID-19 virus, thus would benefit from coping skills education (CDC, 2021). • Problem and emotion-focused coping strategies can be helpful in different situations; so understanding both and having the resources will help older adults cope with stressors
-------------------	---

	<p>better in the future (Aldwin & Yancura, 2004; Carr & Pudrovskaya, 2007).</p>
Leisure	<ul style="list-style-type: none"> • Leisure activities are shown to have positive mental and physical health outcomes for older adults, such as greater quality of life, greater life satisfaction, healthy aging, and a reduction in life stressors (Chen & Chippendale, 2018; Chilvers et al., 2010; Jackson et al., 1998; O’Sullivan, 2005; Paggi et al., 2016; Sala et al., 2019). • Leisure activities were identified to reduce mental health symptoms like anxiety and depression (Chen & Chippendale, 2018; Paggi et al., 2016). • Leisure occupations can reduce feelings of isolation (Nyman & Szymczynska, 2016; Sala et al., 2019). • Leisure activities can minimize cognitive decline associated with age and dementia (Chen & Chippendale, 2018; Chiu et al., 2013; Fallahpour et al., 2016; Nyman & Szymczynska, 2016). • Leisure participation was also identified to help improve performance in activities of daily living (ADL), promoting greater independence in self-care (Chen & Chippendale, 2018).
Social Participation	<ul style="list-style-type: none"> • Social participation interventions have been shown to be most effective when they are coupled with individual volition (Ibrahim et al., 2021). • Social participation can reduce cognitive decline associated with age (Fallahpour et al., 2016). • Volunteer participation promoted happiness and relatedness among other individuals with similar interests (Chilvers et al., 2010; Paggi et al., 2016; Webber & Fendt-Newlin, 2017). • Group social participation interventions were shown to have greater generalization and carryover of content into daily life (Ibrahim et al., 2021; Webber & Fendt-Newlin, 2017). • Journaling or writing within a social setting allowed for reflection and interactions with peers (Ibrahim et al., 2021).
Routine Modification	<ul style="list-style-type: none"> • Lifestyle Redesign® is an occupational therapy intervention that helps promote occupational engagement through modifying routines, which has proven to be effective (Jackson et al., 1998; University of Southern California, n.d.). • Lifestyle Redesign® helped increase interest in leisure activity and promote social participation for positive mental health outcomes (Levasseur et al., 2019). • Routines were identified to be important for people’s mental health by managing anxiety, allowing predictability and creating a structure for the day (Brenner, 2020; Ginsberg, 2020).

Community Mobility	<ul style="list-style-type: none"> • Older adults have experienced greater isolation due to limitations in physical abilities and community mobility (Polgar, 2011). • One research article demonstrated that when individuals learn about their community mobility options and better understand the resources available, they are more confident in using them and more likely to access the community in the future (Mulry et al., 2017).
Technology use	<ul style="list-style-type: none"> • Group interventions involving technology increased social contacts and provided social connections while maintaining a safe distance (Ibrahim et al., 2021). • Initiating video calls with family members was an effective method to promote social participation during the pandemic (Suttie, 2021). • The literature identified that training older adults on technology use can increase their confidence and decrease isolation by allowing them opportunities to connect with others and the world around them (Chen & Schultz, 2016; Fields et al., 2020).

- **Performance Range:** The performance range is the occupations or abilities that someone is able to do based on their person, context, and task factors (Dunn, 1994).

Setting: This program is intended to be used in an assisted living facility setting, in-person with residents.

Group membership size: This group is open to all members within an assisted living facility. This group is structured to have anywhere from 3 to 8 group members. The ideal group size would be 5 participants for thorough discussion and interaction. The intention is that participants would attend all sessions to get the most benefit. However, they could also attend individual sessions. This program can also be modified to fit the one-on-one needs of older adults.

Population Definition: The population intended for this group is an adult, 55 and older. They will be referred to as older adults throughout the program. This population may have a variety of mental and/or physical abilities that do not interfere with group content. Older adults of all abilities are encouraged to join.

Common risk factors: The population intended for this program includes older adults, who are more susceptible to the COVID-19 virus due to medical complications and older age (CDC, 2021). This population of older adults is at risk of severe isolation due to their limitations in contexts and community mobility (Polgar, 2011). This severe isolation can lead to increased feelings of loneliness, depression, anxiety, and suicide, causing this population to be at-risk for mental health symptoms influencing their occupational performance (Banerjee & Rai, 2020; Kotwal et al., 2020; Minahan et al., 2020; NIA, 2021; Stickley & Koyanagi, 2016; Torres, 2020). In addition, older adults throughout the pandemic have demonstrated fewer interactions with

others, negative coping strategies, and less movement due to isolation (Finlay et al., 2021; Montgomery et al., 2020). Older adults are at a higher risk of mental and physical health limitations due to COVID-19 and the social distancing precautions associated.

Client characteristics: Older adults have more mobility limitations than young adults; thus, activities must be accessible to their needs, impacting participation. These older adults are also less familiar with technology when compared to young adults. Interventions were catered to the community of learners.

OT’s Role: Health Promotion, Leisure, & Social Participation

Program Goals: By the end of the program

- Participants will increase their performance range by spending more time in leisure and social participation occupations throughout the day.
- Participants will establish skills in new contexts while participating in daily occupations.
- Participants will establish the skills to reduce isolation in their home context during the pandemic.
- Participants will establish the skills to properly cope with the negative mental health consequences of the COVID-19 pandemic.

EHP Intervention Approaches Used

Establish/Restore:	<ul style="list-style-type: none"> • This program will assist older adults in establishing emotion and problem-focused healthy coping strategies to handle difficult times, such as a pandemic. • This program will assist older adults in establishing/restoring leisure interests through leisure exploration in five realms of leisure including: creative, social, physical, cognitive, and relaxation/spiritual. • This program will assist older adults in establishing skills in social participation for effective communication and meaningful connections with others to promote a sense of belonging and understanding. • This program will assist older adults in establishing regular social interactions with loved ones for meaningful connections. • This program will assist older adults in establishing new routines to combat adverse mental health symptoms. • This program will assist older adults in establishing new routines to increase time spent in leisure and social participation occupations.
---------------------------	--

	<ul style="list-style-type: none"> This program will assist older adults in establishing the skills and understanding of how to use community mobility options for leisure and social participation opportunities.
Adapt/Modify:	<ul style="list-style-type: none"> This program will assist older adults in modifying their daily routines to include health-promoting behaviors like leisure and social participation.
Alter:	<ul style="list-style-type: none"> This program will assist older adults in altering their social context by educating them on how to initiate video calls via technology platforms. Using technology will help bridge the gap in social participation during a pandemic. This program will assist older adults in altering their context to entail virtual leisure opportunities through technology.
Prevent:	<ul style="list-style-type: none"> This program will assist older adults in frequently participating in leisure and social participation occupations to prevent cognitive decline associated with age.
Create:	<ul style="list-style-type: none"> This program will assist older adults in creating new routines to entail health-promoting behaviors for positive mental health outcomes during the pandemic.

Interventions are structured using Cole’s seven steps to promote a cohesive group dynamic and application of information into daily life (Cole, 2018).

Occupational Therapy Practice Framework Domain areas to be addressed:

- Occupations: This program will assist older adults in establishing health-promoting behaviors to promote leisure and social participation occupations (AOTA, 2020).
- Client Factors: This program will assist older adults in improving psychosocial skills and global mental functions while enhancing expression through spirituality to handle difficult situations throughout a pandemic (AOTA, 2020).
- Performance Patterns: This program will assist older adults in improving habits and routines to promote a healthy lifestyle and incorporate leisure and social participation into their daily life (AOTA, 2020).
- Contexts & Environments: This program will assist older adults in occupational participation in all four contexts consistent with EHP, including physical, social, temporal, and cultural contexts (AOTA, 2020; Dunn, 1994). These contexts may also be altered to fit a virtual setting based on circumstances.

Psychosocial

Psychosocial factors addressed in this program include healthy coping strategies for managing difficult situations. This concept is important for this population because of the many mental health risk factors present during a pandemic. This program will assist older adults in

establishing healthy coping mechanisms for different contexts by equipping them with problem and emotion-focused strategies for the appropriate situations.

Another psychosocial factor addressed includes routine modification to promote healthy behaviors and increased time spent in social participation and leisure tasks to promote overall mental and physical well-being, increasing the performance range (Dunn, 1994). Routine is important for all individuals, but specifically, those individuals experiencing symptoms of mental illness to provide a sense of structure and allow them to plan what they would like to do, including more meaningful occupations (Ginsberg, 2020; Sarris et al., 2014).

Contextual

The context was a large factor addressed in this program due to assisted living facilities having restrictions on social and physical contexts throughout the pandemic. One context addressed was the social context to enhance social connections within the facility and social leisure exploration. Educating older adults on making meaningful connections and confiding in people they trust is an important skill that will help manage stress and increase engagement in the facility. This social context is also altered to address the limitations of physical interactions. This intervention focuses on assisting older adults in using technology to interact with friends and family to stay connected and provide a sense of belonging. Another context that is addressed is the temporal context through routine modification. Routine is important for all individuals but especially those with symptoms of mental illness.

Evaluation Plan

To evaluate this program, a participant pre and post-survey can be used, and this is located in Appendix C and D of this protocol. The pre-survey is to be given at the beginning of the initial program session. The post-survey is to be given at the conclusion of the final session of the program. The facilitator also has continuous evaluation surveys to complete, including one survey after each session, along with a survey after the program itself. The facilitator evaluation measures are located in Appendix E of this protocol.

References

- Aldwin, C. M., & Yancura, L. A. (2004). Coping. In C. Spielberger (Ed.) *Encyclopedia of Applied Psychology*, (1st ed., pp.507-510). Elsevier Academic Press.
- American Occupational Therapy Association. (2020). Occupational therapy practice framework: Domain and process (4th ed.). *American Journal of Occupational Therapy*, 74 (Suppl. 2), 7412410010. <https://doi.org/10.5014/ajot.2020.74S2001>
- Banerjee, D., & Rai, M. (2020). Social isolation in Covid-19: The impact of loneliness. *International Journal of Social Psychiatry*, 66(6), 525-527. <https://doi.org/10.1177/0020764020922269>
- Brenner, B. (2020). *The mental health benefits of having a daily routine*. Therapy Group of NYC. <https://nyctherapy.com/therapists-nyc-blog/the-mental-health-benefits-of-having-a-daily-routine/>
- Carr, D., & Pudrovska, T. (2007). Mid-life and later-life crises. In J. E. Birren (Ed.) *Encyclopedia of Gerontology*, (2nd ed., pp. 175-185). Academic Press.
- Centers for Disease Control and Prevention. (2021). *COVID-19 risks and vaccine information for older adults*. <https://www.cdc.gov/aging/covid19/covid19-older-adults.html>
- Chen, S. W., & Chippendale, T. (2018). The issue is- Leisure as an end, not just as a means, in occupational therapy intervention. *American Journal of Occupational Therapy*, 72, 7204347010. <https://doi.org/10.5014/ajot/2018.028316>
- Chen, Y. R., & Schultz, P. (2016). The effect of information communication technology interventions on reducing social isolation in the elderly: A systematic review. In G. Evenbach, N. Diviani, & J. Clemens. (Eds.) *Journal of Medical Internet Research*, 18(1), e18. <https://doi.org/10.2196/jmir.4596>
- Chilvers, R., Corr, S., & Singlehurst, H. (2010). Investigation into the occupational lives of healthy older people through their use of time. *Australian Occupational Therapy Journal*, 57, 24-33. <https://doi.org/10.1111/j.1440-1630.2009.00845.x>
- Chiu, Y. C., Huang, C. Y., Kolanowski, A. M., Huang, H. L., Shyu, Y., Lee, S. H., Lin, C. R., & Hsu, W. C. (2013). The effects of participation in leisure activities on neuropsychiatric symptoms of persons with cognitive impairment: A cross-sectional study. *International Journal of Nursing Studies*, 50(10), 1314-1325. <https://doi.org/10.1016/j.ijnurstu.2013.01.002>
- Cole, M. B. (2018). *Group leadership: Cole's seven steps*. In M. B. Cole (Ed.) *Group Dynamics in Occupational Therapy*. SLACK
- Dunn, W., Brown, C., & McGuigan, A. (1994). The ecology of human performance: A framework for considering the effect of context. *American Journal of Occupational Therapy*, 48, 595-607. <https://doi.org/10.5014/ajot.48.7.595>
- Fallahpour, M., Borell, L., Luborsky, M., & Nygard, L. (2016). Leisure activity participation in preventing later-life cognitive decline: A systematic review. *Scandinavian Journal of Occupational Therapy*, 23(3), 162-197. <http://dx.doi.org/10.3109/11038128.2015.1102320>
- Fields, J., Cembali, A. G., Michalec, C., Uchida, D., Griffiths, K., Cardes, H., Cuellar, J., Chodos, A. H., & Lyles, C. R. (2020). In-Home technology training among socially isolated older adults: Findings from the Tech Allies program. *Journal of Applied Gerontology*, 40(5), 489-499. <https://doi-org.ezproxylr.med.und.edu/10.1177/0733464820910028>
- Fidanza, N., Bondoc, S., & Kotwal, J. (2020). Short, spontaneous and superficial: An exploration

- of social participation among older adults in an assisted-living facility (ALF). *American Journal of Occupational Therapy*, 74(Suppl. 1). <https://doi.org/10.5014/ajot.2020.74S1-PO5606>
- Finlay, J. M., Kler, J. S., O'Shea, B. Q., Eastman, M. R., Vinson, Y. R., & Kobayashi, L. C. (2021). Coping during the COVID-19 pandemic: A qualitative study of older adults across the United States. *Frontiers in Public Health*, 9, 1-12. <https://doi.org/10.3389/fpubh.2021.643807>
- Ginsberg, L. (2020). *Why routines are important for mental health*. Hackensack Meridian Health. https://www.hackensackmeridianhealth.org/en/HealthU/2020/06/02/why-routines-are-important-for-mental-health#.YhZT_ZPMLeo
- Ibrahim, A. F., Tan, M. P., Teoh, G. K., Muda, S. M., & Chong, M. C. (2021). Health benefits of social participation interventions among community dwelling older persons: A review article. *Experimental Aging Research*, 1-27. <https://doi.org/10.1080/0361073X.2021.1939563>
- Jackson, J., Carlson, M., Mandel, D., Zemke, R., & Clark, F. (1998). Occupation in lifestyle redesign: The well elderly study occupational therapy program. *American Journal of Occupational Therapy*, 52(5), 326-336. <https://doi.org/10.5014/ajot.52.5.326>
- Kotwal, A., Holt-Lunstad, J., Newmark, R., Cenzer, I., Smith, A., Covinsky, K., Escueta D., Lee, J., & Perissinotto, C. (2020). Social isolation and loneliness among the San Francisco bay area older adults during the COVID-19 shelter-in-place orders. *Journal of the American Geriatrics Society*, 69(1), 20-29. <https://doi-org.ezproxylr.med.und.edu/10.1111/jgs.16865>
- Labadi, B., Arato, N., Budai, T., Inhof, O., Stecina, D. T., Sik, A., & Zsido, A. N. (2021). Psychological well-being and coping strategies of elderly people during the COVID-19 pandemic in Hungary. *Aging & Mental Health*, 1-18. <https://doi.org/10.1080/13607863.2021.1902469>
- Levasseur, M., Filiatrault, J., Lariviere, N., Trepanier, J., Levesque, M. H., Beaudry, M., Parisien, M., Provencher, V., Couturier, Y., Champoux, N., Corriveau, H., Carbonneau, H., & Sirois, F. (2019). Influence of Lifestyle Redesign® on health, social participation, leisure and mobility of older French-Canadians. *American Journal of Occupational Therapy*, 73, 7305205030. <https://doi.org/10.5014/ajot.2019.031732>
- Minahan, J., Falzarano, F., Yazdani, N., & Siedlecki, K. L. (2020). The COVID-19 pandemic and psychosocial outcomes across age through the stress and coping framework. *The Gerontologist*, 61(2), 228-239. <https://doi.org/10.1093/geront/gnaa205>
- Montgomery, A., Slocum, S., & Stanik, C. (2020). *Experiences of nursing home residents during the pandemic*. Altarum. https://altarum.org/sites/default/files/uploaded-publication-files/Nursing-Home-Resident-Survey_Altarum-Special-Report_FINAL.pdf
- Mulry, C. M., Papetti, C., De Martinis, J., & Ravinsky, M. (2017). Facilitating wellness in urban-dwelling, low-income older adults through community mobility: A mixed-methods study. *American Journal of Occupational Therapy*, 71(4), 1-7. <https://doi.org/10.5014/ajot.2017.025494>
- National Institute on Aging. (2021). *Loneliness and social isolation- Tips for staying connected*. <https://www.nia.nih.gov/health/loneliness-and-social-isolation-tips-staying-connected>
- Nyman, S. R., & Szymczynska, P. (2016). Meaningful activities for improving the wellbeing of people with dementia: Beyond mere pleasure to meeting fundamental psychological needs. *Perspectives in Public Health*, 136(2), 99-107.

- <https://doi.org/10.1177/1757913915626193>
- O'Sullivan, G. (2005). Protocols for leisure activity programming. *New Zealand Journal of Occupational Therapy*, 52(1), 17-25.
- Paggi, M. E., Jopp, D., & Hertzog, C. (2016). The importance of leisure activities in the relationship between physical health and well-being in a life span sample. *Gerontology*, 62(4), 450-458. <https://doi.org/10.1159/000444415>
- Polgar, J. (2011). Enabling community mobility is an opportunity to practice social occupational therapy. *Canadian Journal of Occupational Therapy*, 78, 67-71. <https://doi.org/10.2182/cjot.2011.78.2.1>
- Sala, G., Jopp, D., Gobet, F., Ogawa, M., Ishioka, Y., Masui, Y., Inagaki, H., Nakagawa, T., Yasumoto, S., Ishizaki, T., Arai, Y., Ikebe, K., Kamide, K., & Gondo, Y. (2019). The impact of leisure activities on older adults' cognitive function, physical function and mental health. *PLOS One*, 14(11), e0225006. <https://doi.org/10.1371/journal.pone.0225006>
- Sarris, J., O'Neil, A., Coulson, C. E., Schweitzer, I., & Berk, M. (2014). Lifestyle medicine for depression. *BMC Psychiatry*, 14(107), N. PAG-N. PAG. <http://www.biomedcentral.com/1471-244X/14/107>
- Sepulveda-Loyola, W., Rodriguez-Sanchez, I., Perez-Rodriguez, P., Ganz, F., Torralba, R., Oliveira, D. V., & Rodriguez-Manas, L. (2020). Impact of social isolation due to COVID-19 on health in older people: Mental and physical effects and recommendations. *Journal of Nutrition, Health & Aging*, 24(9), 938-947. <http://doi.org/10.1007/s12603-020-1500-7>
- Simard, J., & Volicer, L. (2020). Loneliness and isolation in long-term care and the COVID-19 pandemic. *Journal of American Medical Directors Association*, 21(7), 966-967. <https://doi.org/10.1016/j.jamda.2020.05.006>
- Stickley, A., & Koyanagi, A. (2016). Loneliness, common mental health disorders and suicidal behavior: Findings from a general population survey. *Journal of Affective Disorders*, 197, 81-87. <http://dx.doi.org/10.1016/j.jad.2016.02.054>
- Suttie, J. (2021). *How older people can cope with isolation*. Greater Good Magazine. https://greatergood.berkeley.edu/article/item/how_older_people_can_cope_with_isolation
- Torres, E. A. (Presenter). (2020). *OT's mental health response to the COVID pandemic: Older adults*. [Video Presentation]. <https://www.occupationaltherapy.com/ot-ceus/course/occupational-therapy-s-mental-health-4940>
- Webber, M., & Fendt-Newlin, M. (2017). A review of social participation interventions for people with mental health problems. *Social Psychiatry and Psychiatric Epidemiology*, 52, 369-380. <https://doi.org/10.1007/s00127-017-1372-2>

Program Overview

This program entails 21 group sessions and one individual session for older adults in an assisted living facility. This program has 22 sessions total.

Session 1: Participation during a Pandemic

This session is an overview of leisure and social participation and the associated health benefits. This session also helps older adults understand how much the pandemic has affected their overall routine and activities they participate in to bring awareness to the content and its relation to them.

Section 1: Mental Health during a Pandemic

Mental health is an important topic to incorporate into this program because of the significant mental health consequences present in older adults due to the COVID-19 pandemic. Older adults have experienced exacerbated feelings of loneliness, fearfulness, anxiety, and depression at an alarming rate (Kotwal et al., 2020; Minahan et al., 2020). In addition, many of these older adults have experienced chronic stressors, putting them at an increased risk of using negative coping strategies like alcohol and substances (Moos et al., 2006). This section helps older adults identify and recognize the physiological impact of stressors within their bodies, which is important for managing them in the future (Haertl, 2019). This section also includes educating older adults on the different problem and emotion-focused coping strategies so that they can appropriately manage stressful situations in the future (Aldwin & Yancura, 2004; Carr & Pudrovska, 2007). To conclude this section, participants will create their own *Healthy Coping Strategies Toolbox* so that they are equipped with healthy coping strategies in multiple categories to better manage life stressors.

- Session 1: Identifying Stressors
- Session 2: Healthy Coping Strategies
- Session 3: Exploration of Coping Strategies
- Session 4: Building a Healthy Coping Strategies Toolbox

Section 2: Leisure Exploration

The sessions within this section can be facilitated in any order. However, it is important to note that this is the only section structured this way.

This section introduces the concept of leisure exploration to older adults. It allows them to experience various leisure activities in five different categories including creative, social, physical, cognitive, and relaxation/spiritual leisure. These categories were inspired by a research article and previous leisure programming (O'Sullivan, 2005; Pettry, 2006). Leisure exploration is intended to allow older adults to restore previous leisure activities or establish new ones so that they can use them in the future to meaningfully occupy their time or use them as coping strategies. Included in the *Healthy Coping Strategies Toolbox* from section one is a category dedicated to leisure so that additional leisure activities from this section can be added to the toolbox. The literature identified leisure as a positive strategy for mental health and overall aging. It was identified that leisure was shown to increase life satisfaction, as well as decrease isolation and symptoms of anxiety and depression (Chen & Chippendale, 2018; Nyman & Szymczynska, 2016; Paggi et al., 2016). Another significant advantage of using leisure exploration is the ability of leisure activity to reduce life stressors (Chen & Chippendale, 2018).

The literature identified leisure as an effective strategy to promote positive mental health, and meaningful use of time especially throughout a pandemic.

- Session 1: Creative Leisure
- Session 2: Social Leisure
- Session 3: Physical Leisure
- Session 4: Cognitive Leisure
- Session 5: Relaxation/Spiritual Leisure

Section 3: Social Participation for Older Adults in an Assisted Living Facility

Communication and social connection are important skills, especially amidst a pandemic when many individuals were left isolated from loved ones. Due to this lack of social connection throughout the pandemic, it was appropriate to incorporate communication skills in this program. The topics presented in this program include effective communication and making meaningful connections. One piece of literature that directly related to assisted living facilities stated that individuals felt more isolated when they did not make the proper social connections upon moving into the facility (Fidanza et al., 2020). These meaningful connections provide social and emotional support throughout difficult times, such as a pandemic (Lloyd & Deane, 2019). These topics are meant to enhance the social communication skills of participants so that they can appropriately have their needs met on-site and utilize the meaningful connections in their lives.

- Session 1: Effective Communication
- Session 2: Making Meaningful Connections

Section 4: Routine Modification

Routines are important for all individuals, especially those experiencing isolation and negative mental health symptoms during the COVID-19 pandemic. Routines are beneficial for providing structure, predictability, and decreasing anxiety in daily life (Brenner, 2020; Ginsberg, 2020). One article identified that some older adults adapted their routine to incorporate more leisure activity as a coping strategy throughout the pandemic (Finlay et al., 2021). This section begins with a thorough analysis of participants' routines. Then the subsequent session will focus on making modifications to that routine by utilizing positive mental health strategies and increasing time spent engaging in leisure and social participation occupations.

It is important to note that only one routine modification session should be conducted with group members. The facilitator must choose which session is most applicable to their population of participants.

- Session 1: Routine Analysis
- Session 2: Routine Modification
- Session 3 (optional): Routine Modification for Depression

Section 5: Community Mobility for Leisure and Social Participation

Older adults experience more isolation than other populations due to physical and community mobility limitations (Polgar, 2011). One piece of the literature identified that training individuals on their community mobility options decreased their feelings of isolation and increased their confidence and use of community mobility options in the future (Mulry et al., 2017). Training and educating older adults on community mobility, leisure, and social participation opportunities within their community can allow them the confidence to participate in different contexts more often.

The first two sessions are intended to be conducted in a group format. However, the final session (3- *Community Outing Utilizing Community Mobility*) should be facilitated in a one-on-one session so that older adults can practice independent transportation in the community. This session will also need to be planned in advance, depending on the mobility service chosen.

- Session 1: What is Community Mobility?
- Session 2: Leisure and Social Participation in the Community
- Session 3: Community Outing Utilizing Community Mobility

Section 6: Technology for Leisure and Social Participation

Technology is a way to bridge the gap between isolation and social connection during the pandemic. The literature identified that some older adults transitioned to online communication while others struggled with this transition (Kotwal et al., 2020). In addition, the literature identified that older adults who were trained on technology usage improved their confidence and connectedness to loved ones and the world around them, thus decreasing isolation (Choi et al., 2022; Fields et al., 2020). Video calling platforms were one way to stay connected to loved ones that were comparable to in-person contact. Video calling was found to be a helpful strategy for social interaction with loved ones during the pandemic (Suttie, 2021). Through analysis of this literature, there is a need to educate and train older adults on technology use to interact with loved ones, maintain meaningful connections and stay connected with the world around them. This section introduces older adults to technology in a graded-down activity exploring key features of different technological devices. The subsequent sessions teach older adults how to use technology to initiate video calls on various platforms while also teaching them how to shop and complete other leisure activities online. Through these interventions, technology can help increase the performance range of older adults through social and leisure interactions.

- Session 1: Introduction to Technology
- Session 2: Technology for Social Participation
- Session 3: Technology for Leisure
- Session 4 (optional): Amazon Alexa for Leisure

References

- Aldwin, C. M., & Yancura, L. A. (2004). Coping. In C. Spielberger (Ed.) *Encyclopedia of Applied Psychology*, (1st ed., pp. 507-510). Elsevier Academic Press.
- Brenner, B. (2020). *The mental health benefits of having a daily routine*. Therapy Group of NYC. <https://nyctherapy.com/therapists-nyc-blog/the-mental-health-benefits-of-having-a-daily-routine/>
- Carr, D., & Pudrovska, T. (2007). Mid-life and later-life crises. In J. E. Birren (Ed.) *Encyclopedia of Gerontology*, (2nd ed., pp. 175-185). Academic Press.
- Chen, S. W., & Chippendale, T. (2018). The issue is- Leisure as an end, not just as a means, in occupational therapy intervention. *American Journal of Occupational Therapy*, 72, 7204347010. <https://doi.org/10.5014/ajot/2018.028316>
- Chilvers, R., Corr, S., & Singlehurst, H. (2010). Investigation into the occupational lives of healthy older people through their use of time. *Australian Occupational Therapy Journal*, 57, 24-33. <https://doi.org/10.1111/j.1440-1630.2009.00845.x>
- Choi, N. G., DiNitto, D. M., Marti, C. N., & Choi, B. Y. (2022). Telehealth use among older adults during COVID-19: Associations with sociodemographic and health characteristics, technology device ownership, and technology learning. *Journal of Applied Gerontology*, 41(3), 600-609. <https://doi.org/10.1177/07334648211047347>
- Chopik, W. J. (2016). The benefits of social technology use among older adults are mediated by reduced loneliness. *Cyberpsychology Behavior & Social Network*, 19(9), 551-556. <https://doi.org/10.1089/cyber.2016.0151>
- Fidanza, N., Bondoc, S., & Kotwal, J. (2020). Short, spontaneous and superficial: An exploration of social participation among older adults in an assisted-living facility (ALF). *American Journal of Occupational Therapy*, 74(Suppl. 1). <https://doi.org/10.5014/ajot.2020.74S1-PO5606>
- Fields, J., Cembali, A. G., Michalec, C., Uchida, D., Griffiths, K., Cardes, H., Cuellar, J., Chodos, A. H., & Lyles, C. R. (2020). In-Home technology training among socially isolated older adults: Findings from the Tech Allies program. *Journal of Applied Gerontology*, 40(5), 489-499. <https://doi-org.ezproxylr.med.und.edu/10.1177/0733464820910028>
- Finlay, J. M., Kler, J. S., O'Shea, B. Q., Eastman, M. R., Vinson, Y. R., & Kobayashi, L. C. (2021). Coping during the COVID-10 pandemic: A qualitative study of older adults across the United States. *Frontiers in Public Health*, 9, 1-12. <https://doi.org/10.3389/fpubh.2021.643807>
- Ginsberg, L. (2020). *Why routines are important for mental health*. Hackensack Meridian Health. https://www.hackensackmeridianhealth.org/en/HealthU/2020/06/02/why-routines-are-important-for-mental-health#.YhZT_ZPMLeo
- Haertl, K. (2019). Coping and resilience. In C. Brown, V. C. Stoffel & J. P. Munoz, (Eds.) *Occupational Therapy in Mental Health: A Vision for Participation*, (2nd ed., pp.342-365). F. A. Davis.
- Jackson, J., Carlson, M., Mandel, D., Zemke, R., & Clark, F. (1998). Occupation in lifestyle redesign: The well elderly study occupational therapy program. *American Journal of Occupational Therapy*, 52(5), 326-336. <https://doi.org/10.5014/ajot.52.5.326>
- Kotwal, A., Holt-Lunstad, J., Newmark, R., Cenzer, I., Smith, A., Covinsky, K., Escueta D., Lee, J., & Perissinotto, C. (2020). Social isolation and loneliness among the San Francisco bay area older adults during the COVID-19 shelter-in-place orders. *Journal of the American*

- Geriatrics Society*, 69(1), 20-29.
<https://doi-org.ezproxylr.med.und.edu/10.1111/jgs.16865>
- Lloyd, C. & Deane, F. P. (2019). Social Participation. In C. Brown, V. C. Stoffel & Munoz, J. P. (Eds.) *Occupational Therapy in Mental Health: A Vision for Participation*, (2nd ed., pp.881-895). F. A. Davis.
- Minahan, J., Falzarano, F., Yazdani, N., & Siedlecki, K. L. (2020). The COVID-19 pandemic and psychosocial outcomes across age through the stress and coping framework. *The Gerontologist*, 61(2), 228-239. <https://doi.org/10.1093/geront/gnaa205>
- Moos, R. H., Brennan, P. L., Schutte, K. K., & Moos, B. S. (2006). Older adults' coping with negative life events: Common processes of managing health, interpersonal and financial/work stressors. *International Journal of Aging and Human Development*, 62(1), 39-59. <https://doi-org.ezproxylr.med.und.edu//10.2190/ENLH-WAA2-AX8J-WRT1>
- Mulry, C. M., Papetti, C., De Martinis, J., & Ravinsky, M. (2017). Facilitating wellness in urban-dwelling, low-income older adults through community mobility: A mixed-methods study. *American Journal of Occupational Therapy*, 71(4), 1-7. <https://doi.org/10.5014/ajot.2017.025494>
- O'Sullivan, G. (2005). Protocols for leisure activity programming. *New Zealand Journal of Occupational Therapy*, 52(1), 17-25.
- Paggi, M. E., Jopp, D., & Hertzog, C. (2016). The importance of leisure activities in the relationship between physical health and well-being in a life span sample. *Gerontology*, 62(4), 450-458. <https://doi.org/10.1159/000444415>
- Petry, D. W. (2006). *Learning about Leisure through Activities*. http://www.dannypetry.com/ebook_leisure.pdf
- Polgar, J. (2011). Enabling community mobility is an opportunity to practice social occupational therapy. *Canadian Journal of Occupational Therapy*, 78, 67-71. <https://doi.org/10.2182/cjot.2011.78.2.1>
- Sala, G., Jopp, D., Gobet, F., Ogawa, M., Ishioka, Y., Masui, Y., Inagaki, H., Nakagawa, T., Yasumoto, S., Ishizaki, T., Arai, Y., Ikebe, K., Kamide, K., & Gondo, Y. (2019). The impact of leisure activities on older adults' cognitive function, physical function and mental health. *PLOS One*, 14(11), e0225006. <https://doi.org/10.1371/journal.pone.0225006>
- Suttie, J. (2021). *How older people can cope with isolation*. Greater Good Magazine. https://greatergood.berkeley.edu/article/item/how_older_people_can_cope_with_isolation

Participation during a Pandemic

Description

This is the first session within this program; so it is important to set the stage for the rest of the group sessions. It is essential to educate participants at an assisted living facility about the benefits of leisure and social participation and the associated mental and physical health benefits.

This session will begin with an introduction on the topic and warm-up to introduce all members and begin to form therapeutic relationships with participants. Then moving on to the activity, this will encompass education on the topics of leisure, leisure exploration, and social participation. Then participants will think deeper about the leisure and social participation occupations that they complete in a brainstorming exercise. This session will conclude with a discussion about the activity to apply content to daily life.

Session Objectives

- Participants will be able to describe the meaning and definition of social participation.
- Participants will be able to describe the meaning and definition of leisure.
- Participants will be able to describe how leisure and social participation are related.
- Participants will be able to describe how their leisure and social participation occupations have been impacted by the COVID-19 pandemic.

General Time Outline

- Introduction - 5 minutes
- Activity - 25 mins
- Sharing - 5 minutes
- Processing - 10 minutes
- Generalizing - 5 minutes
- Application - 5 minutes
- Summary - 5 minutes

Time: 60 minutes

Supplies

- *Leisure and Social Participation benefits flashcards*
- *Brainstorming worksheet*
- Writing utensil (1 for each participant)
- Timer

Session Outline

Introduction

- Welcome participants to the group session.

- “Today, we will be discussing the definition and importance of leisure and social participation. Then we will discuss how this relates to the difficulties we have all experienced during the pandemic.”
- Go over group expectations/rules.
 - Stay for the entire session.
 - Participate in group discussions and activities.
 - Be respectful of facilitator and participant comments.
 - All group conversations must remain confidential and should not be discussed outside of the group.
- Introduce Objectives.
 - Participants will be able to describe the meaning and definition of social participation.
 - Participants will be able to describe the meaning and definition of leisure.
 - Participants will be able to describe how leisure and social participation are related.
 - Participants will be able to describe how their leisure and social participation occupations have been impacted by the COVID-19 pandemic.
- Warm-Up.
 - Name.
 - “Share something that you like to do.”
 - Give participants the pre-program evaluation survey to complete at this time.

Activity

- Education Session
 - “We will talk about how COVID-19 has affected our day-to-day living and what stressors or difficulties you may be experiencing.”
 - Stress during COVID-19
 - “How many of you have felt stressed lately?”
 - “What has caused this stress?”
 - “How many of you have felt stressed during the COVID-19 pandemic?”
 - “What about the pandemic causes stress?”
 - “What are some of these pandemic-related stressors?”
 - “How do you currently cope with the stressors of the pandemic?”
 - “Does this help?”
- Education about Leisure and Social Participation.
 - “What is leisure?”
 - Leisure: “nonobligatory activity that is intrinsically motivated and engaged in during discretionary time, that is, time not committed to obligatory occupations such as work, self-care, or sleep.” (AOTA, 2020, p.34)
 - “What are some examples?”
 - “What is social participation?”
 - Social Participation: “activities that involve social interaction with others, including family, friends, peers and community members, and that support social interdependence.” (AOTA, 2020, p.34)
 - “What are some examples?”
 - “Why are leisure and social participation important?”

- “What are the benefits of leisure and social participation?”
- Hand out one flashcard from the *Leisure and Social Participation benefits flashcards* to each participant. Go around the room and have each participant read their leisure or social participation benefit and answer the question associated.
 - Social Participation benefits.
 - Greater content with life (Ibrahim et al., 2021; Jackson et al., 1998).
 - Prevents a decline in brain activity associated with age (Fallahpour et al., 2016).
 - Reduced feelings of loneliness (Ibrahim et al., 2021).
 - Healthy aging (Aroogh & Shahboulaghi, 2020; Ibrahim et al., 2021).
 - Increase happiness (Dickens et al., 2011).
 - Increase relatedness/belonging.
 - Leisure benefits.
 - Greater content with life (Chen & Chippendale, 2018).
 - Prevents decline in brain activity associated with age (Chen & Chippendale, 2018; Chiu et al., 2013; Fallahpour et al., 2016; Nyman & Szymczynska, 2016).
 - Healthy aging (Chilvers et al., 2010).
 - Improve mental health by decreasing isolation (Nyman & Szymczynska, 2016; Sala et al., 2019).
 - Used as a coping strategy for difficult emotions or situations (Chang, 2015).the
 - Improves the ability to complete self-care tasks (Chen & Chippendale, 2018; Nyman & Szymczynska, 2016).
 - Reduction in life stress (Chen & Chippendale, 2018).
- “Can a leisure activity be a social participation activity?”
 - “How?”
- “What is leisure exploration?”
 - “Leisure exploration is the act of trying different leisure tasks to identify activities that you feel engaged in, and align with your interests.”
- Hands-on Activity
 - Hand out a *Brainstorming worksheet* for participants to complete.
 - Give participants 3-5 minutes to complete each question listed on the worksheet.
 - When participants are done with this brainstorming exercise, have them star two new activities that they would like to try.

Sharing

- “How many leisure activities have you participated in this week?”
- “How many social participation activities have you participated in this week?”
- “Which activity is your favorite of the ones you identified?”
- “How many leisure activities were you able to come up with?”
- “How many social participation activities were you able to come up with?”
- “What two would you like to try in the future?”

Processing

- “Was it difficult to think of all the leisure/social participation activities you did last week?”
- “Were you surprised by the number you came up with?”
- “Is this number different than it would have been before the pandemic?”
- “How do these activities make you feel?”
- “How do these numbers make you feel?”
- “Do you participate in these activities as often or not as often as you expected?”

Generalization

- “What did you learn about yourself today?”
- “How does this differ from what you participated in before the COVID-19 pandemic?”

Application

- “How can you take what you learned today and utilize it in daily life?”
- “What is your biggest takeaway from this session?”

Summary

- Ask a participant to make a summary statement about the group session.
- “This activity was meant to allow you to identify how often you are engaging in leisure and social participation activities within your own life. Knowing this allows you to make adjustments if you would like to.”
- Review Objectives.
 - Participants will be able to describe the meaning and definition of social participation.
 - Participants will be able to describe the meaning and definition of leisure.
 - Participants will be able to describe how leisure and social participation are related.
 - Participants will be able to describe how their leisure and social participation occupations have been impacted by the COVID-19 pandemic.
- Concluding Questions.
 - “Did you feel engaged?”
 - “Was today’s session helpful?”
 - “Were you interested in the concepts introduced?”
 - “Were you satisfied with the interactions in this group today?”
- Thank participants for attending.
- Introduce the next session’s topic: Identifying Stressors.

References

- American Occupational Therapy Association. (2020). Occupational therapy practice framework: Domain and process (4th ed.). *American Journal of Occupational Therapy*, 74 (Suppl. 2), 7412410010. <https://doi.org/10.5014/ajot.2020.74S2001>

- Aroogh, M. D., & Shahboulaghi, F. M. (2020). Social participation in older adults: A concept analysis. *International Journal of Community Based Nursing and Midwifery*, 8(1), 55-72. <https://doi.org/10.30476/IJCBNM.2019.82222.1055>
- Chang, L. C. (2015). Reexamining the relationship between leisure and stress among older adults. *Journal of Leisure Research*, 47(3), 358-372. <https://www.nrpa.org/globalassets/journals/jlr/2015/volume-47/jlr-volume-47-number-3-pp-358-372.pdf>
- Chen, S. W., & Chippendale, T. (2018). The issue is- Leisure as an end, not just a means, in occupational therapy intervention. *American Journal of Occupational Therapy*, 72, 7204347010. <https://doi.org/10.5014/ajot.2018.028316>
- Chilvers, R., Corr, S., & Singlehurst, H. (2010). Investigation into the occupational lives of healthy older people through their use of time. *Australian Occupational Therapy Journal*, 57, 24-33. <https://doi.org/10.1111/j.1440-1630.2009.00845.x>
- Chiu, Y. C., Huang, C. Y., Kolanowski, A. M., Huang, H. L., Shyu, Y., Lee, S. H., Lin, C. R., & Hsu, W. C. (2013). The effects of participation in leisure activities on neuropsychiatric symptoms of persons with cognitive impairment: A cross-sectional study. *International Journal of Nursing Studies*, 50(10), 1314-1325. <https://doi.org/10.1016/j.ijnurstu.2013.01.002>
- Cole, M. B. (2018). *Group leadership: Cole's seven steps*. In M. B. Cole (Ed.) *Group Dynamics in Occupational Therapy*. SLACK
- Dickens, A. P., Richards, S. H., Greaves, C. J., & Campbell, J. L. (2011). Interventions targeting social isolation in older people: A systematic review. *BMC Public Health*, 11(1), 647-647. <http://www.biomedcentral.com/1471-2458/11/647>
- Fallahpour, M., Borell, L., Luborsky, M., & Nygard, L. (2016). Leisure activity participation to prevent later-life cognitive decline: A systematic review. *Scandinavian Journal of Occupational Therapy*, 23(3), 162-197. <http://dx.doi.org/10.3109/11038128.2015.1102320>
- Ibrahim, A. F., Tan, M. P., Teoh, G. K., Muda, S. M., & Chong, M. C. (2021). Health benefits of social participation interventions among community dwelling older persons: A review article. *Experimental Aging Research*, 1-27. <https://doi.org/10.1080/0361073X.2021.1939563>
- Jackson, J., Carlson, M., Mandel, D., Zemke, R., & Clark, F. (1998). Occupation in lifestyle redesign: The well elderly study occupational therapy program. *American Journal of Occupational Therapy*, 52(5), 326-336. <https://doi.org/10.5014/ajot.52.5.326>
- Nyman, S. R., & Szymczynska, P. (2016). Meaningful activities for improving the wellbeing of people with dementia: Beyond mere pleasure to meeting fundamental psychological needs. *Perspectives in Public Health*, 136(2), 99-107. <https://doi.org/10.1177/1757913915626193>
- Sala, G., Jopp, D., Gobet, F., Ogawa, M., Ishioka, Y., Masui, Y., Inagaki, H., Nakagawa, T., Yasumoto, S., Ishizaki, T., Arai, Y., Ikebe, K., Kamide, K., & Gondo, Y. (2019). The impact of leisure activities on older adults' cognitive function, physical function and mental health. *PLOS One*, 14(11), e0225006. <https://doi.org/10.1371/journal.pone.0225006>

Cut out flashcards on cardstock and mix them up for group activity.

Leisure Benefit: Greater content with life (Chen & Chippendale, 2018).

Have you ever felt this way about a leisure activity?

Describe.

Social Participation Benefit: Greater content with life (Ibrahim et al., 2021; Jackson et al., 1998).

Have you ever felt this way about social interactions?

Describe.

Leisure Benefit: Prevents decline in brain activity associated with age (Chen & Chippendale, 2018; Chiu et al., 2013; Fallahpour et al., 2016; Nyman & Szymczynska, 2016).

Have you ever felt this way about a leisure activity?

Describe.

Social Participation Benefit: Prevents a decline in brain activity associated with age (Fallahpour et al., 2016).

Have you ever felt this way about social interactions?

Describe.

Leisure Benefit: Healthy aging (Chilvers et al., 2010).

Have you ever felt this way about a leisure activity?

Describe.

Social Participation Benefit: Reduced feelings of loneliness (Ibrahim et al., 2021).

Have you ever felt this way about social interactions?

Describe.

Leisure Benefit: Improve mental health by decreasing feelings of isolation (Nyman & Szymczynska, 2016; Sala et al., 2019).

Have you ever felt this way about a leisure activity?

Describe.

Social Participation Benefit: Healthy aging (Aroogh & Shahboulaghi, 2020; Ibrahim et al., 2021).

Have you ever felt this way about social interactions?

Describe.

Leisure Benefit: Used as a coping strategy for difficult emotions or situations (Chang, 2015).

Have you ever felt this way about a leisure activity?

Describe.

Social Participation Benefit: Increase in happiness (Dickens et al., 2011).

Have you ever felt this way about social interactions?

Describe.

Leisure Benefit: Improves ability to complete self-care tasks (Chen & Chippendale, 2018; Nyman & Szymczynska, 2016).

Have you ever felt this way about a leisure activity?

Describe.

Leisure Benefit: Reduces life stress (Chen & Chippendale, 2018).

Have you ever felt this way about a leisure activity?

Describe.

References

- Aroogh, M. D., & Shahboulaghi, F. M. (2020). Social participation in older adults: A concept analysis. *International Journal of Community Based Nursing and Midwifery*, 8(1), 55-72. <https://doi.org/10.30476/IJCBNM.2019.82222.1055>
- Chang, L. C. (2015). Reexamining the relationship between leisure and stress among older adults. *Journal of Leisure Research*, 47(3), 358-372. <https://www.nrpa.org/globalassets/journals/jlr/2015/volume-47/jlr-volume-47-number-3-pp-358-372.pdf>
- Chen, S. W., & Chippendale, T. (2018). The issue is- Leisure as an end, not just as a means, in occupational therapy intervention. *American Journal of Occupational Therapy*, 72, 7204347010. <https://doi.org/10.5014/ajot.2018.028316>
- Chilvers, R., Corr, S., & Singlehurst, H. (2010). Investigation into the occupational lives of healthy older people through their use of time. *Australian Occupational Therapy Journal*, 57, 24-33. <https://doi.org/10.1111/j.1440-1630.2009.00845.x>
- Chiu, Y. C., Huang, C. Y., Kolanowski, A. M., Huang, H. L., Shyu, Y., Lee, S. H., Lin, C. R., & Hsu, W. C. (2013). The effects of participation in leisure activities on neuropsychiatric symptoms of persons with cognitive impairment: A cross-sectional study. *International Journal of Nursing Studies*, 50(10), 1314-1325. <https://doi.org/10.1016/j.ijnurstu.2013.01.002>
- Dickens, A. P., Richards, S. H., Greaves, C. J., & Campbell, J. L. (2011). Interventions targeting social isolation in older people: A systematic review. *BMC Public Health*, 11(1), 647-647. <http://www.biomedcentral.com/1471-2458/11/647>
- Fallahpour, M., Borell, L., Luborsky, M., & Nygard, L. (2016). Leisure activity participation to prevent later-life cognitive decline: A systematic review. *Scandinavian Journal of Occupational Therapy*, 23(3), 162-197. <http://dx.doi.org/10.3109/11038128.2015.1102320>
- Ibrahim, A. F., Tan, M. P., Teoh, G. K., Muda, S. M., & Chong, M. C. (2021). Health benefits of social participation interventions among community dwelling older persons: A review article. *Experimental Aging Research*, 1-27. <https://doi.org/10.1080/0361073X.2021.1939563>
- Jackson, J., Carlson, M., Mandel, D., Zemke, R., & Clark, F. (1998). Occupation in lifestyle redesign: The well elderly study occupational therapy program. *American Journal of Occupational Therapy*, 52(5), 326-336. <https://doi.org/10.5014/ajot.52.5.326>
- Nyman, S. R., & Szymczynska, P. (2016). Meaningful activities for improving the wellbeing of people with dementia: Beyond mere pleasure to meeting fundamental psychological needs. *Perspectives in Public Health*, 136(2), 99-107. <https://doi.org/10.1177/1757913915626193>
- Sala, G., Jopp, D., Gobet, F., Ogawa, M., Ishioka, Y., Masui, Y., Inagaki, H., Nakagawa, T., Yasumoto, S., Ishizaki, T., Arai, Y., Ikebe, K., Kamide, K., & Gondo, Y. (2019). The impact of leisure activities on older adults' cognitive function, physical function and mental health. *PLOS One*, 14(11), e0225006. <https://doi.org/10.1371/journal.pone.0225006>

Leisure and social participation activities that you did this week.

--

Total Number = _____

Leisure and social participation activities that you can think of.

--

Total Number = _____

Section 1:

Mental Health During a Pandemic

Session 1: Identifying Stressors

Description:

The focus of this session is to help participants identify stressors in their lives and identify how they currently manage them. This way occupational therapy specialists can assist participants in navigating these stressors and educate them on healthy coping strategies. Older adults coping with the COVID-19 pandemic are at risk of dealing with chronic stressors, which can cause higher symptoms of depression, suicidal thoughts, and alcohol and substance misuse contributing to adverse health effects (Moos et al., 2006). It is also known that stress can have physical and psychological implications present in the body that is important to recognize in order to manage stressors (Haertl, 2019). This session is meant to help older adults in assisted living facilities start identifying stressors so that they are equipped with the skills to handle these life stressors in the future.

This session opens with an introduction to stress and goes through the objectives to be attained within the session. The group then completes a discussion to help identify their stressors and how they physically respond to stress. The session then discusses stress and how it influences them mentally and physically while applying it to daily life.

Session Objectives

- Participants will be able to identify at least two stressors in their life.
- Participants will be able to describe their physical reactions to stress.
- Participants will be able to identify at least one way that they currently cope with stressors.

Time: 60 minutes

General Time outline

- Introduction - 5 minutes
- Activity - 25 minutes
- Sharing -13 minutes
- Processing - 5 minutes
- Generalizing - 2 minutes
- Application - 5 minutes
- Summary - 5 minutes

Supplies

- Writing utensil (1 for each participant)
- Dry erase board/Whiteboard
- Dry erase marker
- *My Stressors worksheet*

Session Outline

Introduction

- Welcome participants to the group session.
- “Today, we are going to talk about stress and how we manage it.”
- Go over group expectations/rules.
 - Stay for the entire session.
 - Participate in group discussions and activities.
 - Be respectful of facilitator and participant comments.
 - All group conversations must remain confidential and should not be discussed outside of the group.
- Introduce Objectives.
 - Participants will be able to identify at least two stressors in their life.
 - Participants will be able to describe their physical reactions to stress.
 - Participants will be able to identify at least one way that they currently cope with stressors.
- “Who here has ever felt stressed before?”
- Warm-Up.
 - Name.
 - “Share something that is a significant stressor in your life currently.”

Activity

- “What is stress?”
- “What causes stress?”
- “What are stressors in your life?”
 - Discuss stressors and write participant responses on a dry-erase board. This will begin the discussion and jog participants’ memory for the activity.
- *My Stressors worksheet*
 - Discuss worksheet responses.
 - “What situations are stressful for you?”
 - “What feelings or emotions are stressful for you?”
- “Where do you feel stress in your body?”
 - Give examples.
 - “Can you recognize the initial signs of stress?”
 - “What is your physical reaction to stress?”
 - “What is your emotional reaction to stress?”
- “How do you currently cope with these stressors?”

Sharing

- “What were the top two stressors that you identified?”
 - “How does stress make you feel?”
- “How do you know you are stressed?”
 - Physical reaction.
 - Emotional reaction.
- “How did you handle these stressors in your daily life?”
- “What did you think about this activity?”

Processing

- “How did this activity make you feel?”
- “What was difficult about this activity?”
- “What was easy about this activity?”
- “Tell me about your experience identifying stressors.”

Generalizing

- “What did you learn during this activity?”
- “Did you learn something new about yourself from this group session?”

Application

- “How can knowing what stress feels like physically and emotionally help you manage it later?”
- “How can you apply what you learned today into your daily life?”
- “What is your biggest takeaway from this session?”

Summary

- Ask a participant to make a summary statement about the group session.
- Review Objectives.
 - Participants will be able to identify at least two stressors in their life.
 - Participants will be able to describe their physical reactions to stress.
 - Participants will be able to identify at least one way that they currently cope with stressors.
- Concluding Questions.
 - “Did you feel engaged?”
 - “Was today’s session helpful?”
 - “Were you interested in the concepts introduced?”
 - “Were you satisfied with the interactions in this group today?”
- Thank participants for attending.
- Introduce the next session’s topic: Healthy Coping Strategies.
 - “In the next session, we will work on managing our stressors, so I am going to collect your worksheets so that you can use them in the next session.”

References

- Cole, M. B. (2018). *Group leadership: Cole’s seven steps*. In M. B. Cole (Ed.) *Group Dynamics in Occupational Therapy*. SLACK
- Haertl, K. (2019). Coping and resilience. In C. Brown, V. C. Stoffel & Munoz, J. P. (Eds.) *Occupational Therapy in Mental Health: A Vision for Participation*, (2nd ed., pp.342-365). F. A. Davis.
- Moos, R. H., Brennan, P. L., Schutte, K. K., & Moos, B. S. (2006). Older adults’ coping with negative life events: Common processes of managing health, interpersonal and financial/work stressors. *International Journal of Aging and Human Development*, 62(1), 39-59. <https://www.doi.org/10.2190/ENLH-WAA2-AX8J-WRT1>

My Stressors

My Major Stressors

1. _____

Cause of stress. _____

What can I control? _____

How do I respond? _____

2. _____

Cause of stress. _____

What can I control? _____

How do I respond? _____

My Minor stressors

1. _____

Cause of stress. _____

How do I respond? _____

2. _____

Cause of stress. _____

How do I respond? _____

3. _____

Cause of stress. _____

How do I respond? _____

Session 2: Healthy Coping Strategies

Description

The focus of this session is to help older adults identify negative coping strategies and how to shift those to positive coping strategies for combatting life stressors during the COVID-19 pandemic. Research has identified that many individuals with adverse mental health symptoms tend to use avoidant coping strategies (Minahan et al., 2020). However, avoiding the issue at hand is not a healthy way to handle stress or difficult situations in life. Finding healthy ways to manage stress will provide participants with the tools to more effectively and confidently cope with stressful situations.

This session will begin with an introduction to healthy coping strategies with a group brainstorming activity. Then participants will be given flashcards to categorize into positive and negative coping strategies. After this, the participants complete a worksheet about coping with daily stressors by turning negative strategies into positive ones. This activity is followed by an active discussion about concepts learned for greater generalization.

Session Objectives

- Participants will identify at least one coping strategy that they use regularly.
- Participants will identify at least one new coping strategy that they learned during the group.
- Participants will distinguish negative from positive coping strategies during a group activity.

General Time Outline

- Introduction - 5 minutes
- Activity - 26 minutes
- Sharing - 5 minutes
- Processing - 7 minutes
- Generalizing - 5 minutes
- Application - 5 minutes
- Summary - 7 minutes

Time: 60 minutes

Supplies

- *Healthy Coping Strategies worksheet*
- 2 sets of *Positive vs. Negative Coping Strategies cards*
- Writing utensils (1 for each participant)
- Whiteboard/Dry-Erase board
- Two dry-erase markers

Session Outline

Introduction

- Welcome participants to the group session.
- Introduce the topic of Healthy Coping Strategies.
- Go over group expectations/rules.
 - Stay for the entire session.
 - Participate in group discussions and activities.
 - Be respectful of facilitator and participant comments.
 - All group conversations must remain confidential and should not be discussed outside of the group.
- Introduce Objectives.
 - Participants will identify at least one coping strategy that they use regularly.
 - Participants will identify at least one new coping strategy that they learned during the group.
 - Participants will distinguish negative from positive coping strategies during a group activity.
- Warm-Up.
 - Name.
 - “How do you typically cope with stressors?”

Activity

- Group brainstorm on Dry-Erase board. (write positive and negative strategies in different colors)
 - “What are examples of positive coping strategies?”
 - “What are examples of negative coping strategies?”
- Compare the lists.
 - “What is the difference between these lists?”
- Split participants into two groups. The groups will use *Positive vs. Negative Coping Strategies cards* and categorize the strategies. If the large group is less than four participants, create one group.
- Hand out the *Healthy Coping Strategies worksheet* for participants to complete individually.

Sharing

- “How did the coping strategy sorting go?”
 - “What went well during this activity?”
 - “What did not go well during this activity?”
- “How did completing the *Healthy Coping Strategies worksheet* go?”
 - “What went well?”
 - “What was difficult?”

Processing

- “Was it easy to identify coping strategies within yourself?”
- “Tell us about your experience turning negative coping strategies into positive ones?”

Generalizing

- “Did you learn something new about yourself while completing this activity?”
 - “Did this surprise you?”
- “What is a new coping strategy that you learned today?”

Application

- “In what situation(s) can you use these positive strategies?”
- “How can you apply this information to other areas of your life?”
- “What is your biggest takeaway from this session?”

Summary

- Ask a participant to make a summary statement about the group session.
- Review Objectives.
 - Participants will identify at least one coping strategy that they use regularly.
 - Participants will identify at least one new coping strategy that they learned during the group.
 - Participants will distinguish negative from positive coping strategies during a group activity.
- Concluding Questions.
 - “Did you feel engaged?”
 - “Was today’s session helpful?”
 - “Were you interested in the concepts introduced?”
 - “Were you satisfied with the interactions in this group today?”
- Thank participants for attending.
- Introduce the next session’s topic: Exploring Positive Coping Strategies.

References

- Cole, M. B. (2018). *Group leadership: Cole’s seven steps*. In M. B. Cole (Ed.) *Group Dynamics in Occupational Therapy*. SLACK
- Flannery, B. (n.d.). *A list of coping skills for anger, anxiety, and depression*. Infinite Mind Care. <https://www.infinitemindcare.com/single-post/2016/12/18/a-list-of-coping-skills-for-anger-anxiety-and-depression>
- Minahan, J., Falzarano, F., Yazdani, N., & Siedlecki, K. L. (2020). The COVID-19 pandemic and psychosocial outcomes across age through the stress and coping framework. *The Gerontologist*, 61(2), 228-239. <https://doi.org/10.1093/geront/gnaa205>

Directions: Print this page onto cardstock, cut out the cards, and mix them together.

Positive Coping Strategies

Exercise

**Leisure
activity**

**Calling a
friend**

**Calling a
family
member**

Cry

**Write down
how you
are feeling**

**Take a
walk**

Play a game

Read

Meditation

**Make a list
of things
you are
thankful for**

**Write down
your
strengths**

Reference

Flannery, B. (n.d.). *A list of coping skills for anger, anxiety and depression*. Infinite Mind Care. <https://www.infinitemindcare.com/single-post/2016/12/18/a-list-of-coping-skills-for-anger-anxiety-and-depression>

Negative Coping Strategies

Avoidance	Using drugs & alcohol	Blaming others
Isolating from others	Responding in a mean way	Denying a problem exists
Yelling	Blaming yourself	Binge Eating
Crying continuously	Dwelling on the problem	Refusing help from others

Reference

Flannery, B. (n.d.). *A list of coping skills for anger, anxiety and depression*. Infinite Mind Care. <https://www.infinitemindcare.com/single-post/2016/12/18/a-list-of-coping-skills-for-anger-anxiety-and-depression>

Healthy Coping Strategies

Isolation

How do you currently cope with isolation?

What kind of strategy is this? Positive Negative

How can you turn this into a positive coping strategy?

Anxiety

How do you currently cope with anxiety?

What kind of strategy is this? Positive Negative

How can you turn this into a positive coping strategy?

Community Access

How do you currently cope with struggles surrounding community access?

What kind of strategy is this? Positive Negative

How can you turn this into a positive coping strategy?

Pandemic-Related Stressors

How do you currently cope with pandemic-related stressors?

What kind of strategy is this? Positive Negative

How can you turn this into a positive coping strategy?

Money Stress

How do you currently cope with stress around money?

What kind of strategy is this? Positive Negative

How can you turn this into a positive coping strategy?

Medical Stress

How do you currently cope with medical stressors?

What kind of strategy is this? Positive Negative

How can you turn this into a positive coping strategy?

Depression

How do you currently cope with depressive symptoms?

What kind of strategy is this? Positive Negative

How can you turn this into a positive coping strategy?

Create your own situation

How do you currently cope with it?

What kind of strategy is this? Positive Negative

How can you turn this into a positive coping strategy?

Session 3: Exploration of Coping Strategies

Description

In this session, participants will learn about the different types of coping strategies including problem and emotion-focused coping (Aldwin & Yancura, 2004; Carr & Pudrovska, 2007). It is important to learn about both types of coping strategies and the skills that fall into both of them so that participants can utilize these skills appropriately based on the situation. Participants will learn the difference and apply it while exploring and participating in different coping strategies. Exploring different strategies allows participants to understand what strategies are best for them so that they will be more likely to utilize them in the future.

This session will educate participants about the two types of coping strategies and participate in exercises applying each in different situations. The session will conclude with a discussion to generalize information into their daily lives.

Session Objectives

- Participants will participate in a coping skills exploration exercise.
- Participants will identify at least one emotion-focused coping strategy that was helpful today.
- Participants will identify at least one problem-focused coping strategy that was helpful today.

Time: 60 minutes

General Time Outline

- Introduction - 5 minutes
- Activity - 28 minutes
- Sharing - 7 minutes
- Processing - 5
- Generalizing - 5
- Application - 5
- Summary - 5

Supplies

- Writing utensil (1 per participant)
- *Coping Strategies handout*
- *Deep Breathing handout*
- *Journaling Prompts worksheet*
- *Positive Thoughts worksheet*
- *To-Do List worksheet*
- *Case Study worksheet*

- Deck of 52 Cards
- Small Puzzle

Session Outline

Introduction

- Welcome participants to the group session.
- “Today, we are going to try different coping strategies that we have talked about in previous sessions. Trying these coping strategies allows you to get a better understanding of whether or not they are helpful for you.”
- Go over group expectations/rules.
 - Stay for the entire session.
 - Participate in group discussions and activities.
 - Be respectful of facilitator and participant comments.
 - All group conversations must remain confidential and should not be discussed outside of the group.
- Introduce Objectives.
 - Participants will participate in a coping skills exploration exercise.
 - Participants will identify at least one emotion-focused coping strategy that was helpful today.
 - Participants will identify at least one problem-focused coping strategy that was helpful today.
- Warm-Up.
 - Name.
 - “Share something that you like to do when you experience a high amount of stress.”

Activity

- Education on two types of coping
 - Give participants the *Coping Strategies handout* to follow along.
 - Discussion on two types of coping.
 - Problem-focused.
 - Emotion-focused.
 - Have participants develop three strategies for each and write them on the handout.
- Coping skills exploration
 - Emotion-focused. (Flannery, n.d.)
 - Meditation→ Play video (The Honest Guys-Meditation-Relaxation, 2019)
 - <https://www.youtube.com/watch?v=L1QOh-n-eus>
 - Deep Breathing→ Lead the group through Deep Breathing exercises.
 - *Deep Breathing handout* (Fowler & Ambardekar, 2022)
 - Journaling
 - *Journaling Prompts worksheet*
 - Positive Thinking
 - *Positive Thoughts worksheet*
 - Exercise→ Lead the group through various stretches and bodyweight exercises that they can do at home.
 - Virtual & social participation

- Talk with peers
- Leisure activity
 - Card game
 - Puzzle
- Music→ Listen to one song of the group’s choosing.
- Problem-focused. (Flannery, n.d.)
 - Make a To-do list
 - *To-Do List worksheet*
 - Brainstorm strategies to problem-solve→ Complete the case studies in small groups.
 - *Case Study worksheet*
 - Talk with a professional→ Share contact information/resources with participants.
 - Suicide Hotline
 - Other relevant resources in the area.

Sharing

- “How did this activity make you feel?”
- “What emotion-focused coping strategy was most appealing to you?” “Why?”
- “What problem-focused coping strategy was most appealing to you?” “Why?”
- “Are there any other strategies that you identified that we did not explore today that you would like to share?”

Processing

- “Which strategy resonated with you most?”
- “How can it help you manage stressors?”

Generalizing

- “What did you learn about yourself today?”

Application

- “When can you utilize problem-focused coping strategies?”
- “When can you utilize emotion-focused coping strategies?”
- “How can you make sure to use these strategies during real-life stressful situations?”
- “What is your biggest takeaway from this session?”

Summary

- Ask a participant to make a summary statement about the group session.
- Review Objectives.
 - Participants will participate in a coping skills exploration exercise.
 - Participants will identify at least one emotion-focused coping strategy that was helpful today.
 - Participants will identify at least one problem-focused coping strategy that was helpful today.
- Concluding Questions

- “Did you feel engaged?”
- “Was today’s session helpful?”
- “Were you interested in the concepts introduced?”
- “Were you satisfied with the interactions in this group today?”
- Thank participants for attending.
- Introduce the next session’s topic: Healthy Coping Skills Toolbox.

References

- Aldwin, C. M., & Yancura, L. A. (2004). Coping. In C. Spielberger (Ed.) *Encyclopedia of Applied Psychology*, (1st ed., pp. 507-510). Elsevier Academic Press.
- Carr, D., & Pudrovskaya, T. (2007). Mid-life and later-life crises. In J. E. Birren (Ed.) *Encyclopedia of Gerontology*, (2nd ed., pp. 175-185). Academic Press.
- Cole, M. B. (2018). *Group leadership: Cole’s seven steps*. In M. B. Cole (Ed.) *Group Dynamics in Occupational Therapy*. SLACK
- Flannery, B. (n.d.). *A list of coping skills for anger, anxiety and depression*. Infinite Mind Care. <https://www.infinitemindcare.com/single-post/2016/12/18/a-list-of-coping-skills-for-anger-anxiety-and-depression>
- Fowler, P. & Ambardekar, N. (2022). *Breathing techniques for stress relief*. WebMD. <https://www.webmd.com/balance/stress-management/stress-relief-breathing-techniques>
- The Honest Guys-Meditation- Relaxation. (2019, August, 6). *5-minute stress relief guided meditation*. [Video]. YouTube. <https://www.youtube.com/watch?v=L1QOh-n-eus>

Coping Strategies

Problem-Focused: These are strategies where you manage the stressor by problem-solving through it (Aldwin & Yancura, 2004; Carr & Pudrovska, 2007).

1.

2.

3.

Emotion-Focused: This strategy is about managing the emotions that come with a stressor (Aldwin & Yancura, 2004; Carr & Pudrovska, 2007).

1.

2.

3.

References

- Aldwin, C. M., & Yancura, L. A. (2004). Coping. In C. Spielberger (Ed.) *Encyclopedia of Applied Psychology*, (1st ed., pp. 507-510). Elsevier Academic Press.
- Carr, D., & Pudrovska, T. (2007). Mid-life and later-life crises. In J. E. Birren (Ed.) *Encyclopedia of Gerontology*, (2nd ed., pp. 175-185). Academic Press.

Deep Breathing

1. Close your eyes.
2. Place your hands on your stomach.
3. Breathe in through your nose for 4 seconds.
4. Hold for 4 seconds.
5. Breathe out through your mouth for 4 seconds.
6. Repeat for 5-10 minutes for the greatest benefits.

References

Fowler, P. (2022). *Breathing techniques for stress relief*. In N. Ambardekar (Ed.). WebMD. <https://www.webmd.com/balance/stress-management/stress-relief-breathing-techniques>

Journaling Prompts

What am I frustrated with?

What can I control in this situation?

What can't I control in this situation?

What can I do?

What is something that I am grateful for?

Positive Thoughts Worksheet

Write down four positive thoughts about yourself.

1.

2.

3.

4.

To Do List

Case Studies

You have not received your social security check in the mail yet. Your rent is due by the end of the week. This stresses you out. What do you do?

How can you problem solve?

You are out of groceries in your apartment and can't get a ride with your friend for another week. This stresses you out. What do you do?

How can you problem-solve?

Your ride is late to pick you up for a doctor's appointment, and you are afraid that you will miss your appointment. This stresses you out. What do you do?

How can you problem solve?

Session 4: Building a Healthy Coping Strategies Toolbox

Description

A toolbox is a hallmark term describing tools utilized for a specific reason. In this toolbox, participants will identify different coping strategies, both problem and emotion-focused, that can be created by reflecting on the previous sessions and identifying leisure or social participation activities that they joy. This way, participants have thought through and are equipped with the proper tools to handle stressors, especially during a pandemic.

In this session, group members will complete a worksheet that helps them create their *Healthy Coping Strategies Toolbox*. This session builds off the previous mental health sessions and is a culminating activity. This toolbox can help participants identify coping strategies in four different categories: problem-focused, emotion-focused, social connection, and leisure. This way, participants have a variety of healthy coping strategies for different situations in life. Then the session will conclude with a group discussion about what they chose and how they can apply it in their daily life.

Session Objectives

- Participants will create a personal toolbox with individualized coping strategies with one strategy per category.

General Time Outline

- Introduction - 5 minutes
- Activity - 26 minutes
- Sharing - 7 minutes
- Processing - 5 minutes
- Generalizing - 5 minutes
- Application - 5 minutes
- Summary - 7 minutes

Time: 60 minutes

Supplies

- *Healthy Coping Strategies Toolbox worksheet*
- Writing utensil (1 for each participant)
- Colored drawing tools (markers or colored pencils)
- Blank sheet of paper (1 for each participant)

Session Outline

Introduction

- Welcome participants to the group session.
- Go over group expectations/rules.
 - Stay for the entire session.
 - Participate in group discussions and activities.
 - Be respectful of facilitator and participant comments.
 - All group conversations must remain confidential and should not be discussed outside of the group.
- Introduce Objective.
 - Participants will create a personal toolbox with individualized coping strategies with one strategy per category.
- Warm-Up.
 - Name.
 - “Share your favorite healthy coping strategy.”

Activity

- Introduce the concept of a “Toolbox.”
 - “Does anyone know what a toolbox is?”
 - “A toolbox is a set of tools to handle a specific condition or situation, in this case, a coping strategies toolbox.”
 - Examples: (Flannery, n.d.)
 - Meditation
 - Journaling
 - Calling a friend or family member
 - Listening to music
 - Leisure activities
 - List
 - Social participation activities
 - List
 - Positive thinking
 - Exercise
 - Self-Care
 - Brainstorm solutions
 - Make a To-Do list
 - Deep breathing
 - Talk with a professional
- Give participants a *Healthy Coping Strategies Toolbox worksheet* to complete.
 - There are extra blank boxes on the worksheet where participants can add other coping strategies.
- Give participants a blank sheet of paper and colored pencils/markers.
 - Participants can then draw their toolbox on a blank sheet of paper with icons of what each coping strategy represents. This will help provide a mental image of their healthy coping strategies to use in the future.

Sharing

- “What coping strategy did you choose for the problem-focused category?”
- “What coping strategy did you choose for the emotion-focused category?”
- “What coping strategy did you choose for the social connection category?”
- “What coping strategy did you choose for the leisure category?”

Processing

- “What went well during this activity?”
- “What did not go well during this activity?”
- “Describe your experience identifying personal coping strategies.”

Generalizing

- “What did you learn as a result of this session?”
- “Did this surprise you?”

Application

- “In what situations can you use each type of coping strategy?”
- “Is there a specific time to use each type of coping strategy?”
- “How can you make sure to utilize your *Healthy Coping Strategies Toolbox*?”
- “What is your biggest takeaway from this session?”

Summary

- Ask a participant to make a summary statement about the group session.
- Review Objective.
 - Participants will create a personal toolbox with individualized coping strategies with one strategy per category.
- Concluding Questions.
 - “Did you feel engaged?”
 - “Was today’s session helpful?”
 - “Were you interested in the concepts introduced?”
 - “Were you satisfied with the interactions in this group today?”
- Thank participants for attending.
- Introduce the next session’s topic: Social Participation.

References

- Cole, M. B. (2018). *Group leadership: Cole’s seven steps*. In M. B. Cole (Ed.) *Group Dynamics in Occupational Therapy*. SLACK
- Fitzgerald, D. (n.d.). *The coping toolbox*. Pinterest.
<https://i.pinimg.com/originals/30/d8/b0/30d8b0ac7e5562b1ac5cedf0b11f8fb3.jpg>
- Flannery, B. (n.d.). *A list of coping skills for anger, anxiety, and depression*. Infinite Mind Care.
<https://www.infinitemindcare.com>

Healthy Coping Strategies Toolbox

Emotion-focused strategy

Problem-focused strategy

Something to connect with others

Something relating to leisure

Other helpful items:

Section 2:

Leisure Exploration

***These sessions can be completed in any order.**

Section 2: Leisure Exploration
Session 1: Creative Leisure

Description

Creative leisure allows people to express their creativity through words and many artistic products and has been identified as one of the key categories of leisure. Creative leisure can also incorporate social participation when completing these tasks with others (O’Sullivan, 2005, Pettry, 2006). Leisure activity has been shown to have restorative effects on cognition and overall health in older adults (Chen & Chippendale, 2018; Chiu et al., 2013; Fallahpour et al., 2016; Nyman & Szymczynska, 2016). Specific creative leisure interventions like art and writing were identified as effective evidence-based leisure interventions (Montgomery et al., 2020; Suttie, 2021). In addition, leisure exploration is essential. This session will allow participants to do this within the realm of creative leisure so that they can identify what they like and dislike within this realm of leisure.

This session will inform participants about what creative leisure is, allow them to interact with different creative leisure occupations of their choice, and add their favorite creative leisure occupations to their toolbox. This session will conclude with a discussion about their experience engaging with different creative leisure occupations.

Session Objectives

- Participants will be able to describe creative leisure.
- Participants will identify at least two creative leisure activities.
- Participants will describe how creative leisure relates to social participation.

General Time Outline

- Introduction - 3 minutes
- Activity - 35 minutes
- Sharing - 5 minutes
- Processing - 5 minutes
- Generalization - 2 minutes
- Application - 6 minutes
- Summary - 4 minutes

Time: 60 minutes

Supplies

- Blank sheet of paper (1 for each participant)
- Lined sheet of paper (1 for each participant)
- Writing utensil
- Colored pencils/markers
- Arts & craft supplies (depending on activity) → can change depending on the resources on site
 - Watercolor paint in various colors

- Cardstock paper
- Paintbrushes
- Small cups (to rinse brushes)
- *Writing Prompt worksheet*
- White Board/Dry-Erase Board
- Dry-Erase Marker

Session Outline

Introduction

- Welcome participants to the group session.
- Introduce the topic of creative leisure.
- Go over group expectations/rules.
 - Stay for the entire session.
 - Participate in group discussions and activities.
 - Be respectful of facilitator and participant comments.
 - All group conversations must remain confidential and should not be discussed outside of the group.
- Introduce Objectives.
 - Participants will be able to describe creative leisure.
 - Participants will identify at least two creative leisure activities.
 - Participants will describe how creative leisure relates to social participation.
- Warm-Up.
 - Name.
 - “Share something good that happened this week.” Or “Share a leisure activity that you participated in this week.”

Activity

- “What is the first thing you can think of when you hear the word creative?”
- “What is creative leisure?”
 - “Engaging in an activity that is enjoyable and allows you to express yourself in creative ways.”
- “What are examples of creative leisure activities?” Group conversation and brainstorming. Write participant responses on Dry-Erase Board.
 - Creative writing
 - Biographical writing
 - Short story writing
 - Letter writing (pen pals)
 - Woodworking
 - Arts & crafts
 - Painting
 - Drawing/sketching
 - Scrapbooking
 - Poetry
 - Singing
 - Playing an instrument
 - Going to a museum

- Embroidering
- Knitting
- Leisure can be used as a coping strategy and a stress management strategy by taking your mind off the stressor and allowing yourself enjoyment in an activity (Chen & Chippendale, 2018).
 - “Who here currently feels overly stressed?”
- Have group members choose one or more activities within the creative leisure category to participate in for the next 30 mins.

Sharing

- “What activities did you participate in?”
- “How many activities did you participate in?”
- “How did this activity/these activities make you feel?”
- “What activity was your favorite and why?”
- “Is there an activity you wanted to participate in but did not have time for?”
- “Is there an activity that was not mentioned or offered within the category of creative leisure?”

Processing

- “What made you decide on the creative leisure activity that you did?”
- “Have any of you participated in an activity like this before?”
- “Would you do a different creative leisure activity next time?” “If so, which one?”
- “How was your stress level impacted by the activities you participated in today?”

Generalizing

- “Do any of these creative leisure activities resonate with you?”
- “Will you participate in any of these activities on your own time?”
- “When can you participate in these activities?”
- “What did you learn today?”

Application

- “How is creative leisure related to social participation?”
- “How can you use these activities to cope with negative emotions or difficult times?”
- “How can you use creative leisure activities to manage stress?”
- “Could you add something you tried today to your *Healthy Coping Strategies Toolbox*?”
- “What is your biggest takeaway from this session?”

Summary

- Ask a participant to make a summary statement about the group session.
- Review Objectives.
 - Participants will be able to describe creative leisure.
 - Participants will identify at least two creative leisure activities.
 - Participants will describe how creative leisure relates to social participation.
- Concluding Questions.
 - “Did you feel engaged?”

- “Was today’s session helpful?”
- “Were you interested in the concepts introduced?”
- “Were you satisfied with the interactions in this group today?”
- Thank participants for attending.
- Introduce the next session’s topic: _____.

References

- Chen, S. W., & Chippendale, T. (2018). The issue is- Leisure as an end, not just as a means, in occupational therapy intervention. *American Journal of Occupational Therapy, 72*, 7204347010. <https://doi.org/10.5014/ajot.2018.028316>
- Chiu, Y. C., Huang, C. Y., Kolanowski, A. M., Huang, H. L., Shyu, Y., Lee, S. H., Lin, C. R., & Hsu, W. C. (2013). The effects of participation in leisure activities on neuropsychiatric symptoms of persons with cognitive impairment: A cross-sectional study. *International Journal of Nursing Studies, 50*(10), 1314-1325. <https://doi.org/10.1016/j.ijnurstu.2013.01.002>
- Cole, M. B. (2018). *Group leadership: Cole’s seven steps*. In M. B. Cole (Ed.) *Group Dynamics in Occupational Therapy*. SLACK
- Fallahpour, M., Borell, L., Luborsky, M., & Nygard, L. (2016). Leisure activity participation in preventing later-life cognitive decline: A systematic review. *Scandinavian Journal of Occupational Therapy, 23*(3), 162-197. <http://dx.doi.org/10.3109/11038128.2015.1102320>
- Montgomery, A., Slocum, S., & Stanik, C. (2020). *Experiences of nursing home residents during the pandemic*. Altarum. https://altarum.org/sites/default/files/uploaded-publication-files/Nursing-Home-Resident-Survey_Altarum-Special-Report_FINAL.pdf
- Nyman, S. R., & Szymczynska, P. (2016). Meaningful activities for improving the wellbeing of people with dementia: Beyond mere pleasure to meeting fundamental psychological needs. *Perspectives in Public Health, 136*(2), 99-107. <https://doi.org/10.1177/1757913915626193>
- O’Sullivan, G. (2005). Protocols for leisure activity programming. *New Zealand Journal of Occupational Therapy, 52*(1), 17-25.
- Pettry, D. W. (2006). *Learning about Leisure through Activities*. http://www.dannypettry.com/ebook_leisure.pdf
- Suttie, J. (2021). *How older people can cope with isolation*. Greater Good Magazine. https://greatergood.berkeley.edu/article/item/how_older_people_can_cope_with_isolation

Creative Writing Prompts

Write about your dream day.

Write about working at your dream job.

Write about a favorite memory.

Write about an animal.

Write about your favorite song.

Write about someone who is important to you.

Section 2: Leisure Exploration
Session 2: Social Leisure

Description

Social leisure is one of the categories of leisure that entails social participation with others as a form of leisure (O’Sullivan, 2005, Pettry, 2006). Many leisure activities can qualify for this category as many activities can be completed alongside others to make them social. The overall concept of leisure has been identified as important to increase one’s overall health (Chilvers et al., 2010; O’Sullivan, 2005; Sala et al., 2019). In addition, social leisure is an important concept to introduce to older adults so that they can engage in leisure exploration. Leisure exploration allows them to learn new avenues to participate in leisure and social participation as a way to meaningfully spend their time and cope with the stressors of the COVID-19 pandemic.

This session will include an introduction to the topic of social leisure, along with an activity allowing participants to explore different social leisure activities with their peers. This activity is followed by an active discussion about what social leisure activities were engaging and what activities can be used for stress relief in the future.

Session Objectives

- Participants will be able to describe social leisure.
- Participants will be able to identify at least two social leisure activities.
- Participants will be able to describe how social leisure relates to social participation.

General Time Outline

- Introduction - 3 minutes
- Activity - 35 minutes
- Sharing - 5 minutes
- Processing - 5 minutes
- Generalizing - 2 minutes
- Application - 6 minutes
- Summary - 4 minutes

Time: 60 minutes

Supplies (*other social leisure activities may be substituted based on facility resources*)

- Deck of cards (2) → Cribbage, Kings in the corner, etc.
- Four different board games (Sorry, Trouble, Scrabble, Yahtzee etc.)
- Other games: (i.e. old maid, connect 4, dominos, etc.)
- White Board/Dry-Erase Board
- Dry-Erase Marker

Session Outline

Introduction

- Welcome participants to the group session.
- Introduce the topic of social leisure.
- Go over group expectations/rules.
 - Stay for the entire session.
 - Participate in group discussions and activities.
 - Be respectful of facilitator and participant comments.
 - All group conversations must remain confidential and should not be discussed outside of the group.
- Introduce Objectives.
 - Participants will be able to describe social leisure.
 - Participants will be able to identify at least two social leisure activities.
 - Participants will be able to describe how social leisure relates to social participation.
- Warm-Up.
 - Name.
 - “Share something that you remember from the last group session.” or “Name a creative leisure activity.”

Activity

- Education
 - “What is social leisure?”
 - “Social leisure is an enjoyable activity that you can do with others.”
 - “What are examples of social leisure activities?” Group conversation and brainstorming. Write participant responses on Dry-Erase Board.
 - Examples:
 - Board games
 - Card games
 - Trivia/Jeopardy team questions
 - Active discussion about a topic
 - Outdoor games/sports
 - Eating out
 - Religious activity
 - Volunteering
 - Outings
 - Going to a movie
 - Indoor games/sports
 - Going to a museum with friends
 - Watching something together of common interest
- Leisure can be used as a coping strategy and a stress management strategy by taking your mind off of the stressor and allowing yourself enjoyment in an activity (Chen & Chippendale, 2018).
 - “Who here currently feels overly stressed?”
- Social leisure exploration activity.
 - Invite participants to try two or more social leisure activities presented.

- Give participants 25 mins to engage in social leisure activity with peers.

Sharing

- “What activity/game did you participate in?”
- “How many activities did you participate in?”
- “What was your favorite activity?”
- “Is there any activity that you wanted to try but were unable to?”
- “Can you think of other social leisure activities not discussed or completed today?”
- “Tell me about your experience interacting with others during this leisure activity.”

Processing

- “What did you think about these activities?”
- “How did this activity make you feel?”
- “Were you surprised by the activities you enjoyed?”
- “How did it make you feel to socialize while completing an activity/game?”
- “How was your stress level impacted by the activities you participated in today?”

Generalizing

- “What did you learn about yourself today?”
- “How does this relate to the activities you usually participate in?”
- “How can you participate in social leisure activities throughout the week?”

Application

- “When can you complete these activities during the day?”
- “Who can you complete these activities with?”
- “Is this something you would do on your own time?”
- “How does social leisure relate to social participation?”
- “How can you use social leisure to cope with negative emotions or a difficult time?”
- “How can social leisure help you manage stress?”
- “What are barriers to completing social leisure activities on your own time?”
- “Could you add something you tried today to your *Healthy Coping Strategies Toolbox*?”
- “What is your biggest takeaway from this session?”

Summary

- Ask a participant to make a summary statement about the group session.
- Review Objectives.
 - Participants will be able to describe social leisure.
 - Participants will be able to identify at least two social leisure activities.
 - Participants will be able to describe how social leisure relates to social participation.
- Concluding Questions.
 - “Did you feel engaged?”
 - “Was today’s session helpful?”
 - “Were you interested in the concepts introduced?”
 - “Were you satisfied with the interactions in this group today?”

- Thank participants for attending.
- Introduce the next session's topic: _____.

References

- Chilvers, R., Corr, S., & Singlehurst, H. (2010). Investigation into the occupational lives of healthy older people through their use of time. *Australian Occupational Therapy Journal*, 57, 24-33. <https://doi.org/10.1111/j.1440-1630.2009.00845.x>
- Cole, M. B. (2018). *Group leadership: Cole's seven steps*. In M. B. Cole (Ed.) *Group Dynamics in Occupational Therapy*. SLACK
- O'Sullivan, G. (2005). Protocols for leisure activity programming. *New Zealand Journal of Occupational Therapy*, 52(1), 17-25.
- Petry, D. W. (2006). *Learning about Leisure through Activities*. http://www.dannypetry.com/ebook_leisure.pdf
- Sala, G., Jopp, D., Gobet, F., Ogawa, M., Ishioka, Y., Masui, Y., Inagaki, H., Nakagawa, T., Yasumoto, S., Ishizaki, T., Arai, Y., Ikebe, K., Kamide, K., & Gondo, Y. (2019). The impact of leisure activities on older adults' cognitive function, physical function and mental health. *PLOS One*, 14(11), e0225006. <https://doi.org/10.1371/journal.pone.0225006>

Section 2: Leisure Exploration
Session 3: Physical Leisure

Description

Physical leisure is another important category in leisure exploration (O’Sullivan, 2005; Pettry, 2006). Helping older adults establish meaningful leisure occupations will serve as a form of enjoyment and even a coping strategy for managing negative emotions, especially throughout the COVID-19 pandemic. In addition, increased leisure participation has been shown to increase life satisfaction and overall health in older adults (Chen & Chippendale, 2018; Chilvers et al., 2010; Jackson et al., 1998; O’Sullivan, 2005; Paggi et al., 2016; Sala et al., 2019).

This session introduces the concept of physical leisure and allows participants to brainstorm as a group about different leisure occupations. After this, participants will explore some of these physical leisure occupations through group video demonstrations to inform their interests. These strategies may be used for enjoyment and coping in the future.

Session Objectives

- Participants will be able to describe physical leisure.
- Participants will be able to identify at least two examples of physical leisure activities.
- Participants will be able to describe how physical leisure relates to social participation.

General Time Outline

- Introduction - 5 minutes
- Activity - 30 mins
- Sharing - 5 minutes
- Processing - 5 minutes
- Generalization - 3 minutes
- Application - 7 minutes
- Summary - 5 minutes

Time: 60 minutes

Supplies

- Chairs (1 per person)
- Large space
- White Board/Dry-Erase Board
- Dry-Erase Marker

Session Outline

Introduction

- Welcome participants to the group session.
- Introduce the topic of physical leisure.
- Go over group expectations/rules.
 - Stay for the entire session.
 - Participate in group discussions and activities.
 - Be respectful of facilitator and participant comments.
 - All group conversations must remain confidential and should not be discussed outside of the group.
- Introduce Objectives.
 - Participants will be able to describe physical leisure.
 - Participants will be able to identify at least two examples of physical leisure activities.
 - Participants will be able to describe how physical leisure relates to social participation.
- Warm-Up.
 - Name.
 - “Share something you remember from the last group.” or “Share something you like to do in your free time.”
 - Gentle stretching (if time permits)

Activity

- “What is physical leisure?”
- “What are examples of physical leisure?” Group conversation and brainstorming. Write participant responses on Dry-Erase Board.
 - Walking
 - Tai chi
 - Yoga
 - Chair yoga
 - Dance
 - Stretching
 - Gardening
 - Playing sports
 - Putting together model cars
 - Going to a museum or sporting event
 - Cooking
- Leisure can be used as a coping strategy and a stress management strategy by taking your mind off the stressor and allowing yourself enjoyment in an activity (Chen & Chippendale, 2018).
 - “Who here currently feels overly stressed?”
- Go through 3 videos and have participants try each while explaining its benefits.
 - Chair yoga
 - Yoga promotes increased activity and engagement through movement (Schmid, 2019).
 - Yoga improves symptoms of depression (Schmid, 2019).

- <https://www.youtube.com/watch?v=1DYH5ud3zHo> (1:05-9:32)
 - (Yoga with Cassandra, 2019)
 - Complete together as a group.
 - Tai Chi
 - Explain what Tai Chi is.
 - Tai Chi: Chinese tradition entailing “graceful exercise” incorporating self-paced light physical movements and stretching, which can be used for stress reduction, improving mood, and promoting balance and free movement (Mayo Clinic, 2021).
 - Tai Chi involves minimal stress on the body (Mayo Clinic, 2021).
 - Tai Chi can help reduce depression, anxiety, and stress (Mayo Clinic, 2021).
 - Tai Chi can improve well-being (Mayo Clinic, 2021).
 - https://www.youtube.com/watch?v=_lKO03x_5OU (3:20-12:20)
 - (TaijiFit with David-Dorian Ross, 2018)
 - Complete together as a group.
 - Chair Dancing
 - Chair dancing promotes balance, activity posture, and allows social participation (Age Space, n.d.).
 - Chair dancing promotes positive mental health outcomes like reduced depression, anxiety, and stress (Age Space, n.d.).
 - <https://www.youtube.com/watch?v=ERnJCyMLWHM>
 - (Barreto, 2020)
 - Complete together as a group.

Sharing

- “Share with the group an activity you felt most engaged in.”
- “How did this make you feel?”

Processing

- “What activity did you most enjoy?”
- “Would you like to do these activities more often?”
- “How was your stress level impacted by the activities you participated in today?”

Generalizing

- “What did you learn today?”
- “Do any of these physical leisure activities resonate with you?”

Application

- “Would you participate in any of these activities on your own time?”
- “When can you participate in these activities?”
- “How can physical leisure relate to social participation?”
- “How can you use this activity to cope with negative emotions?”
- “Could you add something you tried today to your *Healthy Coping Strategies Toolbox*?”
- “What is your biggest takeaway from this session?”

Summary

- Ask a participant to make a summary statement about the group session.
- Review Objectives.
 - Participants will be able to describe physical leisure.
 - Participants will be able to identify at least two examples of physical leisure activities.
 - Participants will be able to describe how physical leisure relates to social participation.
- Concluding Questions.
 - “Did you feel engaged?”
 - “Was today’s session helpful?”
 - “Were you interested in the concepts introduced?”
 - “Were you satisfied with the interactions in this group today?”
- Thank participants for attending.
- Introduce the next session’s topic: _____.

References

- Age Space. (n.d.). *6 benefits of senior dance classes for your elderly parent*.
<https://www.agespace.org/senior-dance-classes>
- Barreto, R. (2020, May 14). *Seated dance workout for seniors- 50s dance music* [Video].
YouTube. <https://www.youtube.com/watch?v=ERnJCyMLWHM>
- Chen, S. W., & Chippendale, T. (2018). The issue is- Leisure as an end, not just as a means, in occupational therapy intervention. *American Journal of Occupational Therapy, 72*, 7204347010. <https://doi.org/10.5014/ajot.2018.028316>
- Chilvers, R., Corr, S., & Singlehurst, H. (2010). Investigation into the occupational lives of healthy older people through their use of time. *Australian Occupational Therapy Journal, 57*, 24-33. <https://doi.org/10.1111/j.1440-1630.2009.00845.x>
- Cole, M. B. (2018). *Group leadership: Cole’s seven steps*. In M. B. Cole (Ed.) *Group Dynamics in Occupational Therapy*. SLACK
- Jackson, J., Carlson, M., Mandel, D., Zemke, R., & Clark, F. (1998). Occupation in lifestyle redesign: The well elderly study occupational therapy program. *American Journal of Occupational Therapy, 52*(5), 326-336. <https://doi.org/10.5014/ajot.52.5.326>
- Mayo Clinic. (2021). *Tai chi: A gentle way to fight stress*. <https://www.mayoclinic.org/healthy-lifestyle/stress-management/in-depth/tai-chi/art-20045184>
- O’Sullivan, G. (2005). Protocols for leisure activity programming. *New Zealand Journal of Occupational Therapy, 52*(1), 17-25.
- Paggi, M. E., Jopp, D., & Hertzog, C. (2016). The importance of leisure activities in the relationship between physical health and well-being in a life span sample. *Gerontology, 62*(4), 450-458. <https://doi.org/10.1159/000444415>
- Pettry, D. W. (2006). *Learning about Leisure through Activities*.
http://www.dannypettry.com/ebook_leisure.pdf
- Sala, G., Jopp, D., Gobet, F., Ogawa, M., Ishioka, Y., Masui, Y., Inagaki, H., Nakagawa, T., Yasumoto, S., Ishizaki, T., Arai, Y., Ikebe, K., Kamide, K., & Gondo, Y. (2019). The impact of leisure activities on older adults’ cognitive function, physical function and

- mental health. *PLOS One*, 14(11), e0225006.
<https://doi.org/10.1371/journal.pone.0225006>
- Schmid, A. A., Van Puymbroeck, M., Fruhauf, C. A., Bair, M. J., Portz, J. D., & Rice, V. J. (2019). Yoga improves occupational performance, depression and daily activities for people with chronic pain. *Work*, 63(2), 181-189.
<https://doi.org.ezproxylr.med.und.edu/10.3233/WOR-192919>
- TaijiFit With David-Dorian Ross. (2018, June 5). *Seated tai chi exercises for seniors- Easy to follow* [Video]. YouTube. https://www.youtube.com/watch?v=_lKO03x_5OU
- Yoga with Cassandra. (2019, July 11). *Gentle chair yoga for beginners and seniors* [Video]. YouTube. <https://www.youtube.com/watch?v=1DYH5ud3zHo>

Section 2: Leisure Exploration
Session 4: Cognitive Leisure

Description

Cognitive leisure is a category of occupation not always identified; however, it is important and can strengthen brain function and reduce cognitive decline associated with age (Chiu et al., 2013; Fallahpour et al., 2016). Leisure engagement, in general, helps reduce cognitive decline; however, cognitive leisure specifically has restorative properties (Chiu et al., 2013). It is important to include cognitive leisure in this program for a population of older adults within an assisted living facility because of these positive cognitive effects. In addition, one can engage in a cognitive leisure task in groups or individually, depending on the task. This way, older adults can engage in leisure occupations both with others and individually.

This session will introduce cognitive leisure and allow participants to brainstorm and engage in cognitive leisure tasks. The activity will be followed by an active discussion about the different cognitive leisure tasks related to relaxation, stress management, and enjoyment.

Session Objectives

- Participants will be able to describe cognitive leisure.
- Participants will be able to identify at least two cognitive leisure activities.
- Participants will be able to describe how cognitive leisure relates to social participation.

General Time Outline

- Introduction - 3 minutes
- Activity - 35 minutes
- Sharing - 5 minutes
- Processing - 5 minutes
- Generalizing - 2 minutes
- Application - 6 minutes
- Summary - 4 minutes

Time: 60 minutes

Supplies

- Puzzles with minimal pieces
- Crossword puzzles
- Word searches
- Sudoku

Session Outline

Introduction

- Welcome participants to the group session.
- Introduce the topic of cognitive leisure.
- Go over group expectations/rules.
 - Stay for the entire session.
 - Participate in group discussions and activities.
 - Be respectful of facilitator and participant comments.
 - All group conversations must remain confidential and should not be discussed outside of the group.
- Introduce Objectives.
 - Participants will be able to describe cognitive leisure.
 - Participants will be able to identify at least two cognitive leisure activities.
 - Participants will be able to describe how cognitive leisure relates to social participation.
- Warm-Up.
 - Name.
 - “Share a physical leisure activity with the group.”

Activity

- “Who knows what cognitive means?”
- “What is cognitive leisure?”
- “What are examples of cognitive leisure activities?”
 - Puzzles
 - Riddles
 - Word Puzzles (crosswords, word search)
 - Sudoku
 - Brain Games
 - Memory game
 - Learn something new
 - History
 - Putting things together
 - Educational topics
 - Jeopardy
- “How can cognitive leisure relate to social participation?”
- Leisure can be used as a coping strategy and a stress management strategy by taking your mind off the stressor and allowing yourself enjoyment in an activity (Chen & Chippendale, 2018).
 - “Who here currently feels overly stressed?”
- Invite participants to try two or more cognitive leisure activities for the next 25 minutes.

Sharing

- “How many cognitive leisure activities did you try?”
- “What cognitive leisure activities did you choose?”
- “How did these activities make you feel?”
- “What activity did you feel the most engaged in?”

Processing

- “What activity resonated with you the most?”
- “Have you participated in any of these activities before?”
- “How was your stress level impacted by the activities you participated in today?”

Generalization

- “What did you learn today?”
- “Would you complete any of these activities at home during your free time?”
- “When can you participate in these cognitive leisure activities?”

Application

- “How can cognitive leisure relate to social participation?”
- “How can you use cognitive leisure activities to cope with negative emotions?”
- “Could you add something you tried today to your *Healthy Coping Strategies Toolbox*?”
- “What is your biggest takeaway from this session?”

Summary

- Ask a participant to make a summary statement about the group session.
- Review Objectives.
 - Participants will be able to describe cognitive leisure.
 - Participants will be able to identify at least two cognitive leisure activities.
 - Participants will be able to describe how cognitive leisure relates to social participation.
- Concluding Questions.
 - “Did you feel engaged?”
 - “Was today’s session helpful?”
 - “Were you interested in the concepts introduced?”
 - “Were you satisfied with the interactions in this group today?”
- Thank participants for attending.
- Introduce the next session’s topic: _____.

References

- Chiu, Y. C., Huang, C. Y., Kolanowski, A. M., Huang, H. L., Shyu, Y., Lee, S. H., Lin, C. R., & Hsu, W. C. (2013). The effects of participation in leisure activities on neuropsychiatric symptoms of persons with cognitive impairment: A cross-sectional study. *International Journal of Nursing Studies*, 50(10), 1314-1325.
<https://doi.org/10.1016/j.ijnurstu.2013.01.002>
- Cole, M. B. (2018). *Group leadership: Cole’s seven steps*. In M. B. Cole (Ed.) *Group Dynamics in Occupational Therapy*. SLACK
- Fallahpour, M., Borell, L., Luborsky, M., & Nygard, L. (2016). Leisure activity participation to prevent later-life cognitive decline: A systematic review. *Scandinavian Journal of Occupational Therapy*, 23(3), 162-197.
<http://dx.doi.org/10.3109/11038128.2015.1102320>

Session 5: Relaxation/Spiritual Leisure

Description

Leisure exploration allows individuals to engage in leisure activities to find interests. Education on leisure is essential to promote the overall quality of life in older adults (Chen & Chippendale, 2018; O’Sullivan, 2005; Smallfield & Molitor, 2018). Exploring leisure strategies can improve overall participation, promoting positive mental and physical health benefits for older adults (Chen & Chippendale, 2018). Relaxation/spiritual leisure is a component identified by Pettry (2006) in which relaxation strategies and spiritual techniques are used to calm an individual. Relaxation/spiritual leisure can also be used as a coping strategy to cope during difficult times (Chen & Chippendale, 2018). Leisure has been identified as an effective strategy for decreasing the impact of life stressors, such as the COVID-19 pandemic (Chang, 2015; Chen & Chippendale, 2018). Relaxation/spiritual leisure can allow participants to connect with their spirituality and find a leisure technique to reduce life stressors.

This session begins with an introduction to relaxation/spiritual leisure and allows participants time to interact with different leisure activities that fall into this category. The activity will be followed by an active discussion about the topic and how it can be generalized into their daily life. The discussion will also entail topics about how the leisure activities selected can reduce stress and relate to social participation.

Session Objectives

- Participants will be able to describe relaxation/spiritual leisure.
- Participants will be able to identify at least two examples of relaxation/spiritual leisure activities.
- Participants will be able to describe how relaxation/spiritual leisure activities relate to social participation.

General Time Outline

- Introduction - 5 minutes
- Activity - 28 minutes
- Sharing - 5 minutes
- Processing - 7 minutes
- Generalizing - 2 minutes
- Application - 7 minutes
- Summary - 6 minutes

Time: 60 minutes

Supplies

- Books/magazines (~10)
- Podcast options
- A technology device to play podcast/music

- Bible
- Bible study outline
- Guided meditation video
- Blank paper
- Writing utensil
- *Deep Breathing handout*
- *Journaling prompts worksheet*

Session Outline

Introduction

- Welcome participants to the group session.
- Introduce the topic of creative leisure.
- Go over group expectations/rules.
 - Stay for the entire session.
 - Participate in group discussions and activities.
 - Be respectful of facilitator and participant comments.
 - All group conversations must remain confidential and should not be discussed outside of the group.
- Introduce Objectives.
 - Participants will be able to describe relaxation/spiritual leisure.
 - Participants will be able to identify at least two examples of relaxation/spiritual leisure activities.
 - Participants will be able to describe how relaxation/spiritual leisure activities relate to social participation.
- Warm-Up.
 - Name.
 - “Share a leisure activity that you participated in this week.”

Activity

- “What do you think of when you hear the word relaxation?”
- “What do you think of when you hear the word spiritual?”
- “What is relaxation/spiritual leisure?”
- “What are examples of relaxation/spiritual leisure?” Group conversation and brainstorming. Write participant responses on Dry-Erase Board.
 - Book club
 - Reading
 - Listening to music
 - Listening to a podcast
 - Praying
 - Going to a religious service/event
 - Bible study
 - Meditation
 - https://www.youtube.com/watch?v=_iGWdUTifiQ (The Mindful Movement, 2016)
 - Watching TV/movies/sports

- Journaling
 - *Journaling prompts worksheet*
- Deep Breathing
 - *Deep Breathing handout*
- “How does relaxation/spiritual leisure relate to social participation?”
- Leisure can be used as a coping strategy and a stress management strategy by taking your mind off the stressor and allowing yourself to relax and engage in an activity where you feel at peace (Chen & Chippendale, 2018).
 - “Who here currently feels overly stressed?”
- Group activity: Exploring different leisure activities within this category for 20 minutes.

Sharing

- “What relaxation/spiritual leisure activity/activities did you participate in?”
- “What made you decide on that relaxation/spiritual leisure activity?”
- “Can you think of any relaxation/spiritual leisure activities not mentioned?”
- “How did this activity make you feel?”

Processing

- “Has anyone participated in an activity like this before?”
- “What did you like about the activity/activities you engaged in?”
- “What didn’t you like about the activity/activities you engaged in?”
- “Would you choose a different relaxation/spiritual activity next time?”
- “How was your stress level impacted by the activities you participated in today?”

Generalization

- “What did you learn today?”

Application

- “How can relaxation/spiritual leisure activities incorporate social participation?”
- “Would you participate in any of these activities on your own time in the future?”
- “When can you participate in these activities?”
- “How can you use these activities to cope with negative emotions?”
- “Could you add something you tried today to your *Healthy Coping Strategies Toolbox*?”
- “What is your biggest takeaway from this session?”

Summary

- Ask a participant to make a summary statement about the group session.
- Review Objectives.
 - Participants will be able to describe relaxation/spiritual leisure.
 - Participants will be able to identify at least two examples of relaxation/spiritual leisure activities.
 - Participants will be able to describe how relaxation/spiritual leisure activities relate to social participation.
- Concluding Questions.
 - “Did you feel engaged?”

- “Was today’s session helpful?”
- “Were you interested in the concepts introduced?”
- “Were you satisfied with the interactions in this group today?”
- Thank participants for attending.
- Introduce the next session’s topic: _____.

References

- Chang, L. C. (2015). Reexamining the relationship between leisure and stress among older adults. *Journal of Leisure Research*, 47(3), 358-372.
<https://www.nrpa.org/globalassets/journals/jlr/2015/volume-47/jlr-volume-47-number-3-pp-358-372.pdf>
- Chen, S. W., & Chippendale, T. (2018). The issue is- Leisure as an end, not just as a means, in occupational therapy intervention. *American Journal of Occupational Therapy*, 72, 7204347010. <https://doi.org/10.5014/ajot.2018.028316>
- Cole, M. B. (2018). *Group leadership: Cole’s seven steps*. In M. B. Cole (Ed.) *Group Dynamics in Occupational Therapy*. SLACK
- O’Sullivan, G. (2005). Protocols for leisure activity programming. *New Zealand Journal of Occupational Therapy*, 52(1), 17-25.
- Petry, D. W. (2006). *Learning about Leisure through Activities*.
http://www.dannypetry.com/ebook_leisure.pdf
- Smallfield, S., & Molitor, W. L. (2018). Occupational therapy interventions supporting social participation and leisure engagement for community-dwelling older adults: A systematic review. *American Journal of Occupational Therapy*, 72(4), 7204190020.
<https://doi.org/10.5014/ajot.2018.030627>
- The Mindful Movement. (2016, Nov. 21). *Guided meditation for inner peace and calm-Mindful movement* [Video]. YouTube. https://www.youtube.com/watch?v=_iGWdUTiflQ

Journaling Prompts

What is the weather like today?

What are you most looking forward to this year?

What is something that you are grateful for?

Write about someone you admire.

What is something that you are good at?

What does your dream day look like?

Where is your favorite place in the world?

What is something that you are proud of?

Write about a time when you overcame something difficult.

Write about how you are genuinely feeling today.

What is something that is currently stressful for you?

Deep Breathing

1. Close your eyes.
2. Place one hand on your stomach and one hand on your chest.
3. Breathe in through your nose for 4 seconds.
4. Hold for 4 seconds.
5. Breathe out through your mouth for 4 seconds.
6. Repeat for 5-10 minutes for the most significant benefits.

References

Fowler, P. (2022). *Breathing techniques for stress relief*. In N. Ambardekar (Ed.). WebMD. <https://www.webmd.com/balance/stress-management/stress-relief-breathing-techniques>

Section 3:

Social Participation for older adults in an Assisted Living Facility

Section 3: Social Participation

Session 1: Effective Communication

Description

Effective communication is essential for older adults to be able to communicate their needs to staff and others. Unfortunately, throughout the pandemic, many older adults, especially in assisted living facilities, were unable to have all of their needs met. These older adults may need refreshments of these skills to communicate their needs and make meaningful connections appropriately.

This session introduces concepts for effective communication including the different communication styles. In addition, this will educate participants on other concepts to be considered for effectively communicating needs. These concepts are practiced in a role-play activity and discussed to generalize information into daily life.

Session Objectives

- Participants will identify the type of communicator that most resembles themselves.
- Participants will practice communicating a need to a staff member during a role-play activity.

Time: 60 minutes

General Time Outline

- Introduction - 5 minutes
- Activity - 32 minutes
- Sharing - 5 minutes
- Processing - 5 minutes
- Generalizing - 3 minutes
- Application - 5 minutes
- Summary - 5 minutes

Supplies

- Blank sheet of paper
- Writing utensil (1 for each participant)
- *Communication Styles handout*
- *Communication worksheet*

Session Outline

Introduction

- Welcome participants to the group session.
- Go over group expectations/rules.
 - Stay for the entire session.
 - Participate in group discussions and activities.
 - Be respectful of facilitator and participant comments.
 - All group conversations must remain confidential and should not be discussed outside of the group.
- Introduce Objectives.
 - Participants will identify the type of communicator that most resembles themselves.
 - Participants will practice communicating a need to a staff member during a role-play activity.
- Warm-Up.
 - Name.
 - “Share a time when it was difficult for you to communicate.”

Activity

- “Why do you think it is important to learn about effective communication?”
 - Give participants a *Communication worksheet* to complete.
- “We are circling back to our warm-up.”
 - “Please write down a situation when it is difficult for you to communicate.”
 - “Why is it difficult?”
 - “Is it a complex topic?”
 - “Are you unsure how to word the question?”
 - “What prevents you from effectively communicating something to someone else?”
 - “Write down what makes it challenging to communicate in that situation.”
 - Share responses from the worksheet in active discussion.
- Factors that are important to consider for effective communication. (Indeed, 2021)
 - Eye contact
 - “Why?”
 - Being clear in what is being stated and concise in what is being asked.
 - “Why?”
 - Avoid interrupting others
 - “Why?”
 - Active listening
 - “Why?”
 - “Why are these skills important?”
- Communication Styles
 - “Does anyone know about the different communication styles?”
 - “What are they?”
 - “Why are they important?”
 - There are four main styles, and knowing this can help you better communicate with others. (Stromsdorfer, n.d.)→ Give participants a *Communication Styles handout*.

- Analytical→ facts, data, concrete information, logic
 - Intuitive→ bigger picture, direct communication
 - Functional→ detail-oriented, timeline, steps
 - Personal→ emotional, empathetic, values connections and relationships
- “Now that you have learned about the different communication styles, can you identify which one most aligns with you?”
 - Give participants time to think about this.
 - “How might different communication styles cause difficulties with communication?”
 - “How might knowing someone’s communication style help with communication?”
- Role-Play Activity
 - “Identify two needs you typically have during the week/month and one need that is not easy to ask for. Role-play asking for these with a peer utilizing eye contact, clarity, and active listening skills.”
 - Other situations to practice good communication include:
 - Requesting a need.
 - Asking for help from a staff member.
 - Asking for help from a family member or friend.
 - Telling a staff member something.
 - Telling the Activity Director something that you would like to have as a group activity.

Sharing

- “How did the role-play go?”
- “Was it challenging to ask for something that you needed?”
- “Was it challenging to identify your communication style?”

Processing

- “How can knowing this information make you a good communicator?”
- “How do non-verbal factors impact communication?”

Generalizing

- “What is something new you learned today?”
- “What did you learn about yourself from this activity?”

Application

- “How can you translate this information into your daily life?”
- “How can you use these skills when communicating a need to staff?”
- “What is your biggest takeaway from this session?”

Summary

- Ask a participant to make a summary statement about the group session.
- Review Objectives
 - Participants will identify the type of communicator that most resembles themselves.

- Participants will practice communicating a need to a staff member during a role-play activity.
- Concluding Questions
 - “Did you feel engaged?”
 - “Was today’s session helpful?”
 - “Were you interested in the concepts introduced?”
 - “Were you satisfied with the interactions in this group today?”
- Thank participants for attending.
- Introduce the next session’s topic: Making Meaningful Connections.

References

- Cole, M. B. (2018). *Group leadership: Cole’s seven steps*. In M. B. Cole (Ed.) *Group Dynamics in Occupational Therapy*. SLACK
- Indeed. (2021). *Ten ways to improve verbal communication skills*.
<https://www.indeed.com/career-advice/career-development/how-to-improve-verbal-communication-skills>
- Stromsdorfer, S. (n.d.). *Building strong communication in OT*.
<https://www.myotspot.com/communication-skills-ot/>

Communication

Describe a situation when it is hard for you to communicate your needs.

What makes it hard to communicate in this situation?

What keeps you from clearly communicating your needs to someone else?

Communication Styles

- **Analytical:** These people like using facts, a lot of information, and good judgment.
- **Intuitive:** These people look at the bigger picture and like it when people are direct communicators.
- **Functional:** These people like to use a planner, focus on details, and like step-by-step directions.
- **Personal:** These people value relationships with others.

Reference

Stromsdorfer, S. (n.d.). *Building strong communication in OT*.
<https://www.myotspot.com/communication-skills-ot/>

Session 2: Making Meaningful Connections

Description

Making meaningful connections is an important topic that allows individuals to feel valued and supported by one another. One article noted that older adults felt more isolated when they did not make meaningful social connections within an assisted living facility (Fidanza et al., 2020). The literature demonstrates that there is a need to address this topic. Satisfaction in social interactions is important for both health and sustained interactions with others in the future (Aroogh & Shahboulaghi, 2020). Meaningful social connections can provide individuals with a sense of belonging and provide emotional support and companionship that is key to recovering from a mental illness (Lloyd & Deane, 2019).

This session will introduce meaningful connections, utilizing personal traits and contexts. It will begin with an introduction and analysis of current/past meaningful relationships. Then there will be a group discussion about what makes a connection meaningful, followed by helpful tips when interacting with others. The activity is concluded with an active discussion on the topic and how it can be generalized into their daily life.

Session Objectives

- Participants will identify at least one meaningful connection (past/ present) in their lives.
- Participants will identify where they can seek out a meaningful connection in their lives.

Time: 60 minutes

General Time Outline

- Introduction - 5 minutes
- Activity - 32 minutes
- Sharing - 5 minutes
- Processing - 4 minutes
- Generalizing - 4 minutes
- Application - 5 minutes
- Summary - 5 minutes

Supplies

- *Meaningful Connections worksheet*
- *Meaningful Connections handout*
- Writing utensil (1 per person)
- Whiteboard/Dry-Erase board
- Dry-Erase marker

Session Outline

Introduction

- Welcome participants to the group session.
- Go over group expectations/rules.
 - Stay for the entire session.
 - Participate in group discussions and activities.
 - Be respectful of facilitator and participant comments.
 - All group conversations must remain confidential and should not be discussed outside of the group.
- Introduce Objectives.
 - Participants will identify at least one meaningful connection (past/ present) in their lives.
 - Participants will identify where they can seek out a meaningful connection in their lives.
- Warm-Up.
 - Name.
 - “Identify someone that you are close to and why.” (Family member/friend/staff)

Activity

- Discussion about meaningful connections.
 - “Why is it important to make meaningful connections?”
 - “Does anyone here struggle to make meaningful connections?”
 - “Why do you think that is?”
 - “What makes this difficult?”
- Hand out the *Meaningful Connections worksheet*. Have participants complete this worksheet independently and share responses.
 - “Tell me about a meaningful connection you have or have had in your life.”
 - “What made/makes this connection meaningful?”
 - Write on the Dry-Erase board group responses for group discussion.
 - “What makes it different than other relationships?”
 - “How does that person make you feel?”
 - Examples: Respected, heard, comforted.
 - Write responses on the Dry-Erase board for group discussion.
 - “What qualities does this person have?”
 - “Do you share common values? Hobbies? Experiences?”
- Give participants the *Meaningful Connections Handout*.
- “Has anyone noticed that they share similar interests or values among the people they have meaningful connections with?”
 - “Why is that?”
 - Finding similar hobbies, interests, values, and beliefs is one way to connect and form a meaningful connection.
- Tips for creating meaningful connections or friendships (12 keys to cultivating meaningful friendships, 2019):
 - Listen to the other person; active listening also means no interrupting.
 - Be honest with the person

- Be consistent with the person
- No gossiping about the person
- Build trust by keeping information confidential when appropriate
- Give advice when appropriate
- Respect the person
- Empathize with the person
- Spend time with the person
 - Use effective communication principles as well.
- “Where can you seek out a meaningful connection?”

Sharing

- “Was it easy to identify a meaningful relationship in your life?”
 - “Why or why not?”
- “Were the reasons for this meaningful relationship similar to what was shared in the handout and group discussion?”

Processing

- “How can these tips help you make meaningful connections?”

Generalizing

- “Who can you make meaningful connections with?”
- “Where can you make meaningful connections?”

Application

- “How can you apply this information in your daily life?”
- “What is your biggest takeaway from this session?”

Summary

- Ask a participant to make a summary statement about the group session.
- Review Objectives.
 - Participants will identify at least one meaningful connection (past/present) in their lives.
 - Participants will identify where they can seek out a meaningful connection in their lives.
- Concluding Questions.
 - “Did you feel engaged?”
 - “Was today’s session helpful?”
 - “Were you interested in the concepts introduced?”
 - “Were you satisfied with the interactions in this group today?”
- Thank participants for attending.
- Introduce the next session’s topic: Routine Analysis.

References

- Aroogh, M. D., & Shahboulaghi, F. M. (2020). Social participation in older adults: A concept analysis. *International Journal of Community Based Nursing and Midwifery*, 8(1), 55-72. <https://doi.org/10.30476/IJCBNM.2019.82222.1055>
- Cole, M. B. (2018). *Group leadership: Cole's seven steps*. In M. B. Cole (Ed.) *Group Dynamics in Occupational Therapy*. SLACK
- Fidanza, N., Bondoc, S., & Kotwal, J. (2020). Short, spontaneous and superficial: An exploration of social participation among older adults in an assisted-living facility (ALF). *American Journal of Occupational Therapy*, 74(Suppl. 1). <https://doi.org/10.5014/ajot.2020.74S1-PO5606>
- Lloyd, C. & Deane, F. P. (2019). Social Participation. In C. Brown, V. C. Stoffel & Munoz, J. P. (Eds.), *Occupational Therapy in Mental Health: A Vision for Participation*, (2nd ed., pp.881-895). F. A. Davis.
- 12 keys to cultivating meaningful friendships. (2019). <https://poibelieve.com/12-keys-to-cultivating-meaningful-friendships/>

Making Meaningful Connections

Identify someone you have/have had a meaningful connection with.

What makes these connections meaningful?

What makes them different from other relationships?

How do these people make you feel?

What traits do these people have?

What values do you share with these people?

Meaningful Connections

Interpersonal Interactions:

- Spend time with the person
- Build a trusting relationship with the person
- Respect the other persons' values and beliefs
- Be honest with the person
- Be consistent with the person
- Listen to the person
- Do not share personal information about the person with others
- Offer advice to the person if appropriate

How to:

- Share similar values
- Share similar beliefs
- Share similar hobbies
- Share similar life experiences
- Attend similar activities
- Share similar interests in the community
- Share similar personality

How it should feel:

- Comforting
- Trusting
- Happy
- Heard
- Excited
- Improved self-confidence

Reference

12 keys to cultivating meaningful friendships. (2019). <https://poibelieve.com/12-keys-to-cultivating-meaningful-friendships/>

Section 4:

Routine Modification

Session 1: Routine Analysis

Description

This session assists older adults in evaluating their current routine and learning how much time they spend on specific activities throughout the day. Occupational therapists are trained and educated in environmental modification and adaption as well as thorough activity analysis. This skill set helps occupational therapists effectively modify routines. One research article about older adults coping with the COVID-19 pandemic stated that some older adults restructured their daily routine to incorporate leisure activity as a coping mechanism (Finlay et al., 2021). This session will be followed by another session, identifying and making the new modifications to routines. This includes incorporating healthy behaviors to promote greater mental and physical health benefits.

This session will start with an introduction to the topic of routine and why it is important, followed by an activity for participants to evaluate their current routines for a more comprehensive understanding of the concept. This activity is followed by a discussion about the activity and the concept of routine overall.

Session Objectives

- Participants will be able to describe their daily routine with moderate detail.
- Participants will be able to identify how much time is put towards leisure occupations daily.
- Participants will be able to identify how much time is put towards social participation occupations daily.

Time: 60 minutes

General Time Outline

- Introduction - 5 minutes
- Activity - 30 minutes
- Sharing - 5 minutes
- Processing - 5 minutes
- Generalizing - 3 minutes
- Application - 5 minutes
- Summary - 7 minutes

Supplies

- *Daily Routine worksheet*
- Writing utensil (1 for each participant)

Session Outline

Introduction

- Welcome participants to the group session.
- Introduce the topic of routine.
 - “Everyone has a routine that they complete every day, which includes the time they typically wake up in the morning, the activities they do each day, and the time they go to bed each night. We will look deeper at our daily routines to incorporate more enjoyment through leisure and social participation activities.”
- Go over group expectations/rules.
 - Stay for the entire session.
 - Participate in group discussions and activities.
 - Be respectful of facilitator and participant comments.
 - All group conversations must remain confidential and should not be discussed outside of the group.
- Introduce Objectives.
 - Participants will be able to describe their daily routine with moderate detail.
 - Participants will be able to identify how much time is put towards leisure occupations daily.
 - Participants will be able to identify how much time is put towards social participation occupations daily.
- Warm-Up.
 - Name.
 - “Share something that you do each day as part of your daily routine.”

Activity

- “Who here thinks they have a daily routine?”
 - We all have routines.
- “What does your typical daily routine look like?”
- “Is this consistent, or does it vary each day?”
 - “What time do you typically get up?”
 - “Natural or alarm clock?”
 - “What is your routine after waking up?”
 - “Is this something you always do?”
 - “Do you eat a meal soon after waking up?”
 - “What are typical occupations/activities you engage in during the day?”
 - “What time of day?”
 - “Do these activities vary each day?”
 - “How much time do you spend doing this?”
- “When do you participate in leisure occupations?”
 - “How often?”
 - “For how long?”
- “When do you participate socially with others?”
 - “How often?”
 - “For how long?”
 - “Who do you engage with socially?”
- “Do you go into the community often?”

- “How often?”
- “For how long?”
- “Has the COVID-19 pandemic impacted your daily routine?”
 - “How so?”
- After going over how to evaluate participants’ routines. Have participants complete the *Daily Routine worksheet* column two individually.
 - Column two is where the occupations are described corresponding to the times listed in column one.
 - Once that is finished, have participants complete column three, writing a “+” if the activity is something that they like and do not want to be modified or a “-“ if it is a negative activity and they want to modify or get rid of it. Have participants also answer the questions on the back.
 - “Did these preferences change during the COVID-19 pandemic?”
- Discussion about routine.
 - “Do you plan activities/hobbies/appointments based on the time of day?”
 - “Does your spiritual or religious association influence your routine?”
 - “Are there daily occupations that take more time or energy than others?”
 - “What do you like about your current environment?”
 - “What modifications can you make to your daily routine?”
 - “Why do you want to modify this occupation?”

Sharing

- “What was easy about this activity?”
- “How many of you were surprised by how much goes into a daily routine?”
- “How much time do you devote to leisure occupations daily?”
- “How much time do you devote to social participation occupations daily?”
- “Do you prefer morning, afternoon, or evening for your activities?”
- “What time of day do you typically have the most energy?”
- “What time of day do you typically have appointments?”

Processing

- “How did this activity make you feel?”
- “What were the challenges you faced during this activity?”
- “How did it feel to discuss this information as a group?”
- “Did your responses surprise you at all?”

Generalizing

- “What did you learn from this activity?”

Application

- “How can you apply this information in your daily life?”
- “What is your biggest takeaway from this session?”

Summary

- Ask a participant to make a summary statement about the group session.

- Review Objectives.
 - Participants will be able to describe their daily routine with moderate detail.
 - Participants will be able to identify how much time is put towards leisure occupations daily.
 - Participants will be able to identify how much time is put towards social participation occupations daily.
- Concluding Questions.
 - “Did you feel engaged?”
 - “Was today’s session helpful?”
 - “Were you interested in the concepts introduced?”
 - “Were you satisfied with the interactions in this group today?”
- “We are going to use your completed *Daily Routine worksheet* for the next session, so I will collect the worksheets so that you can use them next time.”
- Thank participants for attending.
- Introduce the next session’s topic: Routine Modification (*Routine Modification for Depression- if you choose this session*).

References

- Cole, M. B. (2018). *Group leadership: Cole’s seven steps*. In M. B. Cole (Ed.) *Group Dynamics in Occupational Therapy*. SLACK
- Finlay, J. M., Kler, J. S., O’Shea, B. Q., Eastman, M. R., Vinson, Y. R., & Kobayashi, L. C. (2021). Coping during the COVID-19 pandemic: A qualitative study of older adults across the United States. *Frontiers in Public Health, 9*, 1-12.
<https://doi.org/10.3389/fpubh.2021.643807>

Routine Analysis

Time	Occupations	+/-
4:00am		
4:30am		
5:00am		
5:30am		
6:00am		
6:30am		
7:00am		
7:30am		
8:00am		
8:30am		
9:00am		
9:30am		
10:00am		
10:30am		
11:00am		

11:30am		
12:00pm		
12:30pm		
1:00pm		
1:30pm		
2:00pm		
2:30pm		
3:00pm		
3:30pm		
4:00pm		
4:30pm		
5:00pm		
5:30pm		
6:00pm		
6:30pm		
7:00pm		
7:30pm		
8:00pm		

8:30pm		
9:00pm		
9:30pm		
10:00pm		
10:30pm		
11:00pm		
11:30pm		
12:00am		
12:30am		
1:00am		
1:30am		
2:00am		
2:30am		
3:00am		
3:30am		
4:00am		

What time of day do you prefer?

Morning

Noon

Evening

What time of day do you have the most energy?

Morning

Noon

Evening

What time of day do you typically have appointments?

Morning

Noon

Evening

Notes from the discussion for later:

Session 2: Routine Modification

**Only one Routine Modification session should be facilitated with participants. This decision can be made by the facilitator and their understanding of the population of older adults they are working with.*

Description

This session allows participants to analyze what impacts their routine and how they can implement healthy strategies. This session aimed to help participants implement more leisure and social participation into their daily routine. It will also help individuals struggling to form a routine amidst the pandemic to enhance meaning and structure in their daily lives (Finlay et al., 2021). This session is meant to be facilitated in conjunction with the *Routine Analysis* session to apply those principles and incorporate healthy and leisurely activities into daily routines. This session will also help participants identify barriers to incorporating healthy routines.

This section complements the previous *Routine Analysis* session by taking into account all of the identified factors in the routine and re-creating a routine conducive to mental and physical health by implementing more leisure and social participation occupations. This activity is followed by an active group discussion on implementing these skills consistently in daily life.

Session Objectives

- Participants will find at least one place in their individual routine to add leisure/social participation occupations.
- Participants will complete a new outline of their daily routine.

Time: 60 minutes

General Time Outline

- Introduction - 5 minutes
- Activity - 30 minutes
- Sharing - 5 minutes
- Processing - 5 minutes
- Generalizing - 3 minutes
- Application - 5 minutes
- Summary - 7 minutes

Supplies

- *Daily Routine worksheet* (from the previous session)
- *New Daily Routine worksheet*
- *Yay and Nay worksheet*
- Writing utensil (1 for each participant)
- *Healthy Routine Practices handout*

Session Outline

Introduction

- Welcome participants to the group session.
- Go over group expectations/rules.
 - Stay for the entire session.
 - Participate in group discussions and activities.
 - Be respectful of facilitator and participant comments.
 - All group conversations must remain confidential and should not be discussed outside of the group.
- Introduce Objectives.
 - Participants will find at least one place in their individual routine to add leisure/social participation occupations.
 - Participants will complete a new outline of their daily routine.
- “Did you apply anything you learned from the last session into your routine?”
- Warm-Up.
 - Name.
 - “Share one leisure or social participation occupation that you do every day.”

Activity

- “We will continue looking at your daily routine that we evaluated in the last session and modify it to meet your needs, desires, and health.”
- Discussion about changing routine and what should stay and go.
 - “What do you dislike about your current environment?”
 - “What would you change about your environment?”
 - “What keeps you from going out in the community more often?”
 - “What are barriers to this?”
 - “What would you do with two more hours in the day?”
 - “What time of day could you add more leisure activities into your routine?”
 - “What time of day could you add more social participation activities into your routine?”
 - “Have your routine preferences changed due to the COVID-19 pandemic?”
- Brainstorm what you would like to include in your daily routine.
 - Write on the Dry-Erase/whiteboard to help participants brainstorm. Have every participant identify something.
 - Give participants a *Healthy Routine Practices* *handout* to make decisions based on their current daily routine.
 - Hand out *Yay or Nay worksheet* to participants and use the previous *Daily Routine worksheet*.
 - “In the *Yay* column, write a list of things you would like to continue doing or add to your daily routine.”
 - “In the *Nay* column, write down what you don’t like about your routine or things you would like to eliminate from your day.”
- Give participants a new *Daily Routine worksheet* to fill out as an ideal daily routine.
 - “This is the same worksheet that you completed in the previous session. This time based on what we discussed, you will create a new ideal daily routine. I also want you to plan time in your day for more leisure and social participation activity, specifically one place during the day to add it.”

- Have participants complete the new *Daily Routine worksheet*.

Sharing

- “How did you feel completing the new *Daily Routine worksheet*?”
 - “Was the routine similar or different?” Describe.
- “What was difficult about this activity?”
- “What was easy about this activity?”
- “How did this activity make you feel?”

Processing

- “Were you successful in adding more time for leisure and social participation occupations?”
- “What challenges did you face in this activity?”

Generalizing

- “What did you learn from this activity?”

Application

- “How will you make sure you stick to this routine daily?”
- “What are barriers to implementing this new routine daily?”
 - “How can you overcome those barriers?”
- “Did you learn something new about yourself?”
- “What is your biggest takeaway from this session?”

Summary

- Ask a participant to make a summary statement about the group session.
- Review Objectives.
 - Participants will find at least one place in their individual routine to add leisure/social participation occupations.
 - Participants will complete a new outline of their daily routine.
- Concluding Questions.
 - “Did you feel engaged?”
 - “Was today’s session helpful?”
 - “Were you interested in the concepts introduced?”
 - “Were you satisfied with the interactions in this group today?”
- Thank participants for attending.
- Introduce the next session’s topic: What is Community Mobility?

References

- Cole, M. B. (2018). *Group leadership: Cole’s seven steps*. In M. B. Cole (Ed.) *Group Dynamics in Occupational Therapy*. SLACK
- Finlay, J. M., Kler, J. S., O’Shea, B. Q., Eastman, M. R., Vinson, Y. R., & Kobayashi, L. C. (2021). Coping during the COVID-19 pandemic: A qualitative study of older adults across the United States. *Frontiers in Public Health, 9*, 1-12.
<https://doi.org/10.3389/fpubh.2021.643807>

Healthy Routine Practices



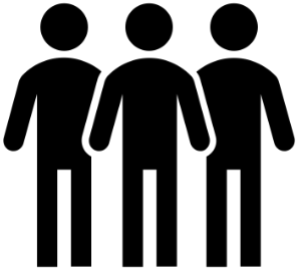
Time

Getting up at the same time each day helps to create a routine so that the mind and body can predict the amount of time to stay awake, and allow better sleep (Brenner, 2020; Ginsberg, 2020). It also helps the body organize the day better (Ginsberg, 2020).



Sleep

Getting a good amount of sleep at night is important for mood throughout the day. However, it is important not to get too much or too little sleep (Sarris et al., 2014; Wong et al., 2021).



Social Interaction

Having trusted people around is important for health and support during hard times. These are people to talk to about feelings and experiences (Sarris et al., 2014). These people can help healthy aging.



Leisure Activity

Leisure activities/hobbies placed within the day provide enjoyment and something to look forward to (Sarris et al., 2014). Spending time doing enjoyable activities is good for mental and physical health (Sarris et al., 2014).

References

- Brenner, B. (2020). *The mental health benefits of having a daily routine*. Therapy Group of NYC. <https://nyctherapy.com/therapists-nyc-blog/the-mental-health-benefits-of-having-a-daily-routine/>
- Ginsberg, L. (2020). *Why routines are important for mental health*. Hackensack Meridian Health. https://www.hackensackmeridianhealth.org/en/HealthU/2020/06/02/why-routines-are-important-for-mental-health#.YhZT_ZPMLeo
- Sarris, J., O'Neil, A., Coulson, C. E., Schweitzer, I., & Berk, M. (2014). Lifestyle medicine for depression. *BMC Psychiatry, 14*(107), N. PAG-N. PAG. <http://www.biomedcentral.com/1471-244X/14/107>
- Wong, V., W. H., Ho, F. Y. Y., Shi, N. K., Sarris, J., Chung, K. F., & Yeung, W. F. (2021). Lifestyle medicine for depression: A meta-analysis of randomized control trials. *Journal of Affective Disorders, 284*, 203-216. <https://doi.org/10.1016/j.jad.2021.02.012>

Yay	Nay

Daily Routine

Time	Occupations	+/-
4:00am		
4:30am		
5:00am		
5:30am		
6:00am		
6:30am		
7:00am		
7:30am		
8:00am		
8:30am		
9:00am		
9:30am		
10:00am		
10:30am		
11:00am		

11:30am		
12:00pm		
12:30pm		
1:00pm		
1:30pm		
2:00pm		
2:30pm		
3:00pm		
3:30pm		
4:00pm		
4:30pm		
5:00pm		
5:30pm		
6:00pm		
6:30pm		
7:00pm		
7:30pm		
8:00pm		

8:30pm		
9:00pm		
9:30pm		
10:00pm		
10:30pm		
11:00pm		
11:30pm		
12:00am		
12:30am		
1:00am		
1:30am		
2:00am		
2:30am		
3:00am		
3:30am		
4:00am		

Optional Session 3: Routine Management for Depression

**Only one Routine Modification session should be facilitated with participants. This decision is made by the facilitator and their understanding of the population of older adults they are working with.*

Description

Routine is an important concept for those individuals who have been diagnosed or have symptoms of mental illness, such as depression. Routines allow individuals to feel a sense of predictability and accomplishment throughout the day (Brenner, 2020; Ginsberg, 2020). This session will entail routine modifications specifically for depression. The literature has noted that older adults have experienced increased rates of depression throughout prolonged isolation during the COVID-19 pandemic (Banerjee & Rai, 2020; Minahan et al., 2020). Many sources have identified effective routine interventions to support positive mental health outcomes (Brenner, 2020; Telloian, 2019; Wong et al., 2021).

This session identifies positive and negative mental health practices within the daily routine to help participants incorporate healthy strategies relating to leisure, social participation, and health. This activity is followed by an active discussion about implementation into daily life.

Session Objectives

- Participants will find at least one place in their daily routine to add leisure/social participation occupations.
- Participants will add at least two concepts to promote positive mental health in their daily routine.
- Participants will complete a new outline of their daily routine.

Time: 60 minutes

General Time Outline

- Introduction - 5 minutes
- Activity - 30 minutes
- Sharing - 7 minutes
- Processing - 6 minutes
- Generalizing - 2 minutes
- Application - 5 minutes
- Summary - 5 minutes

Supplies

- *Routine Changes for Positive Mental Health* handout
- *Routine Analysis worksheet* (from session 1)

- *Daily Routine worksheet*
- *Goals worksheet*
- Writing utensil (1 per participant)

Session Outline

Introduction

- Welcome participants to the group session.
- “Last session, we discussed your daily routine. Today we are modifying your routine to implement healthy strategies to improve mental health and increase time spent with others and participating in enjoyable activities.”
- Go over group expectations/rules.
 - Stay for the entire session.
 - Participate in group discussions and activities.
 - Be respectful of facilitator and participant comments.
 - All group conversations must remain confidential and should not be discussed outside of the group.
- Introduce Objectives.
 - Participants will find at least one place in their daily routine to add leisure/social participation occupations.
 - Participants will add at least two concepts to promote positive mental health in their daily routine.
 - Participants will complete a new outline of their daily routine.
- Warm-Up.
 - Name.
 - “Share something that you like about your daily routine.”

Activity

- “Routine is a concept that is good for overall mental health, specifically depression.”
- “Why is routine important for depression?” (Brenner, 2020; Ginsberg, 2020)
 - Predictability.
 - Sense of accomplishment.
- Education about healthy routines.
 - “What about your daily routine promotes positive mental health?”
 - “What about your daily routine works against your mental health?”
 - Education on health-promoting behaviors for mental health, specifically depression, that can be incorporated into a daily routine. (Telloian, 2019; Sarris et al., 2014)→ Give participants a *Routine Changes for Positive Mental Health handout*.
 - Time (wake up/go to sleep)
 - Light exposure
 - Hydration
 - Nutrition
 - Sleep
 - Physical Movement
 - Gratitude
 - Social Interaction

- Leisure
 - Mindfulness/meditation
- “Routines are important for mental health and anxiety management by making your day predictable and planned” (Brenner, 2020).
- “21 days of consistency can help form a new habit, in this case, a modified routine or lifestyle incorporating more health-promoting behaviors” (Brenner, 2020).
- Go through routine worksheets from the previous session.
- Discussion about making changes to the routine along with what should stay and go.
- Have participants identify goals for their new routine and write them on the *Goals worksheet*.
- Give participants a new copy of the *Daily Routine worksheet* and give them time to complete their new routine. Encourage participants to incorporate:
 - Add at least one more leisure activity into the daily routine.
 - Add at least one more social participation activity into the daily routine.
 - Add at least two concepts for positive mental health practices into the daily routine.

Sharing

- “How did this activity go for you?”
- “What did you like?”
- “What did you not like?”
- “What was challenging about this activity?”

Processing

- “How did this activity make you feel?”
- “Were you successful in adding more time for leisure and social participation occupations?”
- “Were you successful in adding more time for positive mental health strategies?”

Generalizing

- “What did you learn from this activity?”
- “What did you learn about yourself from this activity?”

Application

- “How can you make sure to stick to your new routine daily?”
- “What are barriers to implementing this new routine in your daily life?”
 - “How can you overcome these barriers?”
- “What is your biggest takeaway from this session?”

Summary

- Ask a participant to make a summary statement about the group session.
- Review Objectives.
 - Participants will find at least one place in their daily routine to add leisure/social participation occupations.

- Participants will add at least two concepts to promote positive mental health in their daily routine.
- Participants will complete a new outline of their daily routine.
- Concluding Questions.
 - “Did you feel engaged?”
 - “Was today’s session helpful?”
 - “Were you interested in the concepts introduced?”
 - “Were you satisfied with the interactions in this group today?”
- Thank participants for attending.
- Introduce the next session’s topic: What is Community Mobility?
 - “Next, we will be moving on to a new section about community mobility. In this section, you will learn about different community mobility options and practice using them.”

References

- Banerjee, D., & Rai, M. (2020). Social isolation in Covid-19: The impact of loneliness. *International Journal of Social Psychiatry, 66*(6), 525-527. <https://doi.org/10.1177/0020764020922269>
- Brenner, B. (2020). *The mental health benefits of having a daily routine*. Therapy Group of NYC. <https://nyctherapy.com/therapists-nyc-blog/the-mental-health-benefits-of-having-a-daily-routine/>
- Ginsberg, L. (2020). *Why routines are important for mental health*. Hackensack Meridian Health. https://www.hackensackmeridianhealth.org/en/HealthU/2020/06/02/why-outines-are-important-for-mental-health#.YhZT_ZPMLeo
- Minahan, J., Falzarano, F., Yazdani, N., & Siedlecki, K. L. (2020). The COVID-19 pandemic and psychosocial outcomes across age through the stress and coping framework. *The Gerontologist, 61*(2), 228-239. <https://doi.org/10.1093/geront/gnaa205>
- Sarris, J., O’Neil, A., Coulson, C. E., Schweitzer, I., & Berk, M. (2014). Lifestyle medicine for Depression. *BMC Psychiatry, 14*(107), N. PAG-N. PAG. <http://www.biomedcentral.com/1471-244X/14/107>
- Telloian, C. (2019). *11 tips for a morning routine that supports mental health*. Good Therapy. <https://www.goodtherapy.org/blog/11-tips-for-a-morning-routine-that-supports-mental-health-1022197>
- Wong, V., W. H., Ho, F. Y. Y., Shi, N. K., Sarris, J., Chung, K. F., & Yeung, W. F. (2021). Lifestyle medicine for depression: A meta-analysis of randomized control trials. *Journal of Affective Disorders, 284*, 203-216. <https://www.doi.org/10.1016/j.jad.2021.02.012>

Lifestyle Changes for Positive Mental Health



Time

Getting up at the same time each day helps to create a routine so that the mind and body can predict the amount of time to stay awake, and allow better sleep (Brenner, 2020; Ginsberg, 2020). It also helps the body organize the day better (Ginsberg, 2020).



Light exposure

Introducing the body to light at the beginning of the day can help the body wake up and start the day in a positive way (Telloian, 2019).



Hydration

Drinking enough water throughout the day can help improve mood and help manage energy throughout the day (Telloian, 2019). Not drinking enough water can affect mood and brain functioning, which can cause anger and confusion (Telloian, 2019).



Nutrition

Eating nutritious food soon after waking up can improve mood throughout the day, reducing anger (Telloian, 2019). An unhealthy diet can even cause depression and other mental health concerns. (Sarris et al., 2014).



Sleep

Getting a good amount of sleep at night is important for mood throughout the day. However, it is important not to get too much or too little sleep (Sarris et al., 2014; Wong et al., 2021).



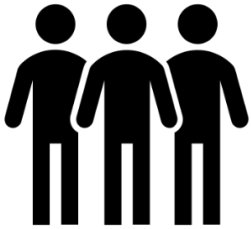
Exercise

Exercise can improve mood and can decrease symptoms of anxiety and depression (Sarris et al., 2014; Telloian, 2019). Exercise can be something as simple as taking a walk or stretching (Telloian, 2019).



Gratitude

Writing down things that an individual is grateful for can help them be more aware of the positive things in their life. Being grateful can also increase happiness and reduce depression and anxiety (Telloian, 2019).



Social Interaction

Having trusted people around is important for health and support during hard times. These are people to talk to about feelings and experiences (Sarris et al., 2014). These people can help healthy aging.



Leisure Activity

Leisure activities/hobbies placed within the day provide enjoyment and something to look forward to (Sarris et al., 2014). Spending time doing enjoyable activities is good for mental and physical health (Sarris et al., 2014).



Meditation

Meditation can reduce stress and help relax the body, improving mood for the day (Sarris et al., 2014; Telloian, 2019).

References

- Brenner, B. (2020). *The mental health benefits of having a daily routine*. Therapy Group of NYC. <https://nyctherapy.com/therapists-nyc-blog/the-mental-health-benefits-of-having-a-daily-routine/>
- Ginsberg, L. (2020). *Why routines are important for mental health*. Hackensack Meridian Health. https://www.hackensackmeridianhealth.org/en/HealthU/2020/06/02/why-routines-are-important-for-mental-health#.YhZT_ZPMLeo
- Sarris, J., O'Neil, A., Coulson, C. E., Schweitzer, I., & Berk, M. (2014). Lifestyle medicine for Depression. *BMC Psychiatry*, 14(107), N. PAG-N. PAG. <http://www.biomedcentral.com/1471-244X/14/107>
- Telloian, C. (2019). *11 tips for a morning routine that supports mental health*. Good Therapy. <https://www.goodtherapy.org/blog/11-tips-for-a-morning-routine-that-supports-mental-health-1022197>
- Wong, V., W. H., Ho, F. Y. Y., Shi, N. K., Sarris, J., Chung, K. F., & Yeung, W. F. (2021). Lifestyle medicine for depression: A meta-analysis of randomized control trials. *Journal of Affective Disorders*, 284, 203-216. <https://doi.org/10.1016/j.jad.2021.02.012>

Goals Worksheet

1.

2.

3.

4.

Daily Routine

Time	Occupations	+/-
4:00am		
4:30am		
5:00am		
5:30am		
6:00am		
6:30am		
7:00am		
7:30am		
8:00am		
8:30am		
9:00am		
9:30am		
10:00am		
10:30am		
11:00am		

11:30am		
12:00pm		
12:30pm		
1:00pm		
1:30pm		
2:00pm		
2:30pm		
3:00pm		
3:30pm		
4:00pm		
4:30pm		
5:00pm		
5:30pm		
6:00pm		
6:30pm		
7:00pm		
7:30pm		
8:00pm		

8:30pm		
9:00pm		
9:30pm		
10:00pm		
10:30pm		
11:00pm		
11:30pm		
12:00am		
12:30am		
1:00am		
1:30am		
2:00am		
2:30am		
3:00am		
3:30am		
4:00am		

Section 5:

**Community Mobility for Leisure and
Social Participation**

Session 1: What is Community Mobility?

Description

Older adults have a unique perspective on the COVID-19 pandemic and isolation due to mobility changes that affect participation, causing greater feelings of isolation (Polgar, 2011). The literature identified that educating individuals on how to use community mobility options reduced isolation, and increased their confidence and use of community mobility in the future (Mulry et al., 2017). Interventions targeting community mobility will allow participants of all ages to navigate their community appropriately to engage in their desired occupations.

This session will allow participants to learn more about what community mobility entails, discuss their past experiences with community mobility, and learn about other mobility options available in their community. Then, participants will apply the information they have learned and complete an activity deciding between different mobility options based on which one is right for them considering the person, context, and task factors. They will then go through the process of arranging rides for an appointment or another activity of their choosing within the community. After this activity, there will be a group discussion on mobility options and how to apply this information in their daily life.

Session Objectives

- Participants will participate in a discussion about supports/barriers to community mobility.
- Participants will identify one community mobility service they can use in the future.

Time: 60 minutes

General Time Outline

- Introduction - 7 minutes
- Activity - 30 minutes
- Sharing - 5 minutes
- Processing - 4 minutes
- Generalizing - 2 minutes
- Application - 7 minutes
- Summary - 5 minutes

Supplies

- *Community Mobility Options* handout for the participants
- *Community Mobility Options* handout for the facilitator
- Blank sheet of paper
- Writing utensil (1 for each participant)
- 1 Electronic device per person (phone, laptop, iPad)

Session Outline

Introduction

- Welcome participants to the group session.
- “Today, we are going to be talking about community mobility.”
- Go over group expectations/rules.
 - Stay for the entire session.
 - Participate in group discussions and activities.
 - Be respectful of facilitator and participant comments.
 - All group conversations must remain confidential and should not be discussed outside of the group.
- Introduce Objectives.
 - Participants will participate in a discussion about supports/barriers to community mobility.
 - Participants will identify one community mobility service they can use in the future.
- Warm-Up
 - Name.
 - “Share what you know about community mobility?” or “Share what you would like to learn about community mobility?”

Activity

- Discussion about community mobility.
 - “What is community mobility?”
 - “Tell me about your experience with community mobility?”
 - “How often do you leave your current residence?”
 - “Are you satisfied with this?” “Why or why not?”
 - “What do you typically use community mobility for?”
 - “Why is this?”
 - “Do you go out into the community independently or with another individual?”
 - “Would you like to get out into the community more?”
 - “What do you currently use to navigate the community?”
 - “What are supports for navigating the community?”
 - “What are barriers to navigating the community?”
 - “How do limitations in community mobility make you feel?”
 - “What do you want to/wish you could access in the community?”
 - “What are ways that you can increase connection and participate in the community?” Examples include:
 - Learn about different community mobility options.
 - Identify leisure and social participation opportunities in the area to attend.
 - Go with a friend or family member to navigate mobility options and try different experiences.
 - Advocate for yourself at your residence and within the state.
- Community mobility options in Minneapolis, MN. (Ask for participant responses before giving examples).
 - Metro Mobility

- Taxi
- Uber/Lyft
- Metro Transit (bus/light rail)
 - Transit link
- Help at Your Door
- Give participants a *Community Mobility Options handout (for participants)*.
- “Pick a transportation service and pretend to make a pickup appointment.”
 - Write down the information you need and utilize the paper to plan your trip.
 - “What mobility service did you choose?”
 - “Why did you choose this service?”
 - “What factored into your decision to choose this service?”
 - “What must be considered when choosing a transportation service?”

Sharing

- “Did you know about your community mobility options before today?”
- “Which mobility option resonated with you the most?”

Processing

- “How did this activity make you feel?”
- “Tell me about your confidence with community mobility after this session?”

Generalizing

- “What did you learn today?”
- “Are you more likely to use community mobility after learning about it in this session?”

Application

- “When can you apply this information?”
- “Where can you apply this information?”
- “How can you apply this information to your daily routine?”
- “Why is community mobility important?”
- “Could you add something you learned today to your *Healthy Coping Strategies Toolbox*?”
- “What is your biggest takeaway from this session?”

Summary

- Ask a participant to make a summary statement about the group session.
- Review Objectives.
 - Participants will participate in a discussion about supports/barriers to community mobility.
 - Participants will identify one community mobility service they can use in the future.
- Concluding Questions.
 - “Did you feel engaged?”
 - “Was today’s session helpful?”
 - “Were you interested in the concepts introduced?”

- “Were you satisfied with the interactions in this group today?”
- Thank participants for attending.
- Introduce the next session’s topic: Leisure and Social Participation in the Community.
 - “Next session, we will look at the different leisure and social participation opportunities within the community and how you can utilize community mobility options to participate in desired activities.”

References

- Cole, M. B. (2018). *Group leadership: Cole’s seven steps*. In M. B. Cole (Ed.). *Group Dynamics in Occupational Therapy*. SLACK
- Lyft. (n.d.). *Cars. Bikes. Transit. All in one app*. <https://www.lyft.com/rider>
- Metropolitan Council. (n.d.A). *Metro mobility*.
<https://metrocouncil.org/Transportation/Services/Metro-Mobility-Home.aspx>
- Metropolitan Council. (n.d.B). *Transit link*.
<https://metrocouncil.org/Transportation/Services/Transit-Link.aspx>
- Metro Transit. (n.d.). *METRO gives you more*. <https://www.metrotransit.org/metro>
- Mulry, C. M., Papetti, C., De Martinis, J., & Ravinsky, M. (2017). Facilitating wellness in urban-dwelling, low-income older adults through community mobility: A mixed-methods study. *American Journal of Occupational Therapy, 71*(4), 1-7.
<https://doi.org/10.5014/ajot.2017.025494>
- Polgar, J. (2011). Enabling community mobility is an opportunity to practice social occupational therapy. *Canadian Journal of Occupational Therapy, 78*, 67-71.
<https://doi.org/10.2182/cjot.2011.78.2.1>
- Thompson, N., & Kuennen, C. (2019, April 10). *Metro mobility program overview*. [Presentation]. [https://metrocouncil.org/getattachment/Council-Meetings/Committees/Metropolitan-Council/2019/4-10-19/Agenda/2019_Metro-Mobility-Council-presentation-10April-\(1\).pdf.aspx?lang=en-US](https://metrocouncil.org/getattachment/Council-Meetings/Committees/Metropolitan-Council/2019/4-10-19/Agenda/2019_Metro-Mobility-Council-presentation-10April-(1).pdf.aspx?lang=en-US)

Community Mobility Options

Metro Mobility (Metropolitan Council, n.d.A; Thompson & Kuennen, 2019)

- This service is for those who cannot use regular bus/transportation routes due to health or disability limitations.
- \$4.50 fare for a 1-way ride during busy hours (6-9 am & 3-6:30 pm).
- \$3.50 fare for a 1-way ride at all other times.
- There is a 30-minute block of time for a scheduled pick-up.
- Reservations can be made 1-4 days before a ride is needed.
- Return rides using this service cannot be scheduled less than 1 hour after drop-off.
- Call or schedule online.
- People must meet the criteria before using this service. This can be done by reaching out to the case manager.

Metro Transit (Metro Transit, n.d.)

- This service includes bus and light rail options.
- To understand routes and how to use Metro Transit, call and get connected with an agent who can assist.
- Pick-up occurs at bus stops scattered throughout the Twin Cities metro area.
- Passengers can bring a wheelchair on board.
- This service can be paid for by cash, credit, debit, app, or Go-To card.

Transit Link (Metropolitan Council, n.d.B; Metropolitan Council, n.d.C)

- Transit link is intended to bring people to standard Metro Transit services or Metro Mobility services and does not provide an entire ride from one place to another.
- There is a 30-minute block of time for a scheduled pick-up.
- \$3.50 for a 1-way trip.
- This service is unavailable on the weekends.
- If assistance is needed boarding and exiting the bus, request assistance upon scheduling the ride.

Help at your Door (Help at Your Door, 2021)

- Fee-based upon income.
- \$10 for a 1-way trip
- Multiple stops are allowed when scheduling a ride.

Taxis

- Companies within the Twin Cities:
 - Blue & White Taxi
 - Rainbow Taxi
 - Yellow Cab
 - Transportation Plus
- Book a trip by calling the service's phone number, through the app, or online.
- This service typically includes wheelchair-accessible vans when specified in making the reservation.
- Reservations using this service can be made in advance or last minute.
- This service may be more expensive but is more flexible.
- This service can be covered through specific insurances for medical appointments. Contact the insurance company to reserve rides for medical appointments.

Uber/ Lyft (Lyft, n.d.)

- To reserve this service, book online and pay online through the website or the app. (need a smart device or computer)
- This service requires using a credit card for the account.
- This service can be booked at late notice.
- This option can be expensive. However, it allows individuals to make short trips.
- This is similar to a cab/taxi service but in another person's personal vehicle.

References

- Help at Your Door. (2021). <https://helpatyourdoor.org/>
- Lyft. (n.d.). *Cars. Bikes. Transit. All in one app*. <https://www.lyft.com/rider>
- Metropolitan Council. (n.d.A). *Metro mobility*.
<https://metro council.org/Transportation/Services/Metro-Mobility-Home.aspx>
- Metropolitan Council. (n.d.B). *Transit link*.
<https://metro council.org/Transportation/Services/Transit-Link.aspx>
- Metropolitan Council. (n.d.C). *Transit link service details*.
<https://metro council.org/Transportation/Services/Transit-Link/Service-Details.aspx#Areas>
- Metro Transit. (n.d.). *METRO gives you more*. <https://www.metrotransit.org/metro>
- Thompson, N., & Kuennen, C. (2019, April 10). *Metro mobility program overview*. [Presentation]. [https://metro council.org/getattachment/Council-Meetings/Committees/Metropolitan-Council/2019/4-10-19/Agenda/2019_Metro-Mobility-Council-presentation-10April-\(1\).pdf.aspx?lang=en-US](https://metro council.org/getattachment/Council-Meetings/Committees/Metropolitan-Council/2019/4-10-19/Agenda/2019_Metro-Mobility-Council-presentation-10April-(1).pdf.aspx?lang=en-US)

Community Mobility Options (Facilitator Copy)

Metro Mobility (Metropolitan Council, n.d.A; Thompson & Kuennen, 2019)

- This service is for those individuals who cannot use regular bus/transportation routes due to health or disability limitations.
- \$4.50 fare for a 1-way ride during busy hours (6-9 am & 3-6:30 pm).
- \$3.50 fare for a 1-way ride at all other times.
- There is a 30-minute window for scheduled pick-up time. The exact time of arrival and pick-up is not guaranteed; however, if they are more than 30 minutes late, the ride is FREE.
- Reservations can be made 1-4 days before a scheduled pick-up.
- Return rides using this service cannot be scheduled less than one hour after drop-off time.
- To book this service, call or book online.
- Requires qualification before using this service & qualification lasts four years.
 - Inability to utilize already established bus/transportation routes.
 - Inability to board and exit the bus independently.
 - Unable to navigate current bus routes independently.
 - Unable to board the bus at specific locations.
- Trips that are farther than 15 miles away will cost an extra 75 cents.
- Translation services are available.
- Masks are required.

Metro Transit (Metro Transit, n.d.)

- This service includes bus and light rail options.
- To understand routes and how to use Metro Transit, call and get connected with an agent who can assist.
- Pick-up at bus stops scattered throughout the Twin Cities Metro → get to the bus stop 5 minutes early.
- Individuals must signal the driver near their stop by pulling on a cord near the window at least one block before the desired destination.
- Passengers can bring a wheelchair or personal scooter on the bus/light rail.
- This service can be paid for by cash, credit, debit, app, or Go-To card.
- The light rail has different “lines”: depending on the direction of the destination or if it is the inner city.
- Light Rail Options
 - Blue Line
 - Green Line
 - Orange Link
 - Red Line

Transit Link (Metropolitan Council, n.d.B; Metropolitan Council, n.d.C)

- Transit link is intended to link up to standard Metro Transit services or Metro Mobility services & does not provide an entire ride from one place to another.
- There is a 30-minute window for a scheduled pick-up time; if the ride shows up more than an hour late, the ride is FREE.
- It helps connect passengers to Metro Transit stations.
- \$3.50 for a 1-way trip.
- This service is unavailable on the weekends.
- If help is needed with a mobility device, it is important to bring someone who can assist with this.
- If assistance is needed boarding and exiting the bus, request assistance upon scheduling the ride.

Help at your Door (Help at Your Door, 2021)

- Fee-based upon income
- \$10 for a 1-way trip
- Multiple stops are allowed when scheduling a ride.
- This service also has grocery shopping, home maintenance, and outdoor work services.

Taxis

- Companies within the Twin Cities:
 - Blue & White Taxi
 - Rainbow Taxi
 - Yellow Cab
 - Transportation Plus
- Book a trip by calling the service's phone number, through the app, or online.
- This service typically includes wheelchair-accessible vans when specified in making the reservation.
- Reservations using this service can be made in advance or last minute.
- This service may be more expensive but is more flexible.
- This service can be covered through specific insurances for medical appointments. Contact the insurance company to reserve rides for medical appointments.

Uber/ Lyft (Lyft, n.d.)

- To reserve this service, book online and pay online through the website or the app. (need a smartphone or computer)
- This service requires uploading a credit card to the account.
- This service can be booked at late notice.
- This option can be expensive. However, it is convenient and can make short trips.
- This is similar to a cab/taxi service but in another person's personal vehicle.
 - This service allows anyone to sign up through this company and drive their car to transport others.
- Drivers can help with mobility devices that collapse to stow in the vehicle.

References

- Help at Your Door. (2021). <https://helpatyourdoor.org/>
- Lyft. (n.d.). *Cars. Bikes. Transit. All in one app.* <https://www.lyft.com/rider>
- Metropolitan Council. (n.d.A). *Metro mobility.*
<https://metro council.org/Transportation/Services/Metro-Mobility-Home.aspx>
- Metropolitan Council. (n.d.B). *Transit link.*
<https://metro council.org/Transportation/Services/Transit-Link.aspx>
- Metropolitan Council. (n.d.C). *Transit link service details.*
<https://metro council.org/Transportation/Services/Transit-Link/Service-Details.aspx#Areas>
- Metro Transit. (n.d.). *METRO gives you more.* <https://www.metrotransit.org/metro>
- Thompson, N., & Kuennen, C. (2019, April 10). *Metro mobility program overview.* [Presentation]. [https://metro council.org/getattachment/Council-Meetings/Committees/Metropolitan-Council/2019/4-10-19/Agenda/2019_Metro-Mobility-Council-presentation-10April-\(1\).pdf.aspx?lang=en-US](https://metro council.org/getattachment/Council-Meetings/Committees/Metropolitan-Council/2019/4-10-19/Agenda/2019_Metro-Mobility-Council-presentation-10April-(1).pdf.aspx?lang=en-US)

Session 2: Leisure and Social Participation in the Community

Description

As people age, their physical abilities change, causing participation in occupations to change. For example, many older adults in an assisted living facility have had to adjust to limited mobility due to the inability to drive and needing assistance attending appointments and leisurely interests in the community. This limitation in mobility can decrease their performance range in many areas of occupation, including leisure and social participation opportunities. Instead, these limitations in physical abilities keep them isolated in one place, increasing the risk of mental health symptoms (Polgar, 2011).

In this session, participants will discuss their recent experiences in the community related to social participation and leisure occupations. This session will also include a discussion about interests within the community, followed by a handout with various leisure and social participation activities offered within the Minneapolis community. Participants will then practice as if they will attend a community outing independently or with a friend during the week. They will decide on a location of something they want to do based on the open hours, the fee for entry, location, and public transportation to get to this location. After this activity, there will be a group discussion to apply the material to everyday life.

Session Objectives

- Participants will identify at least one leisure or social participation opportunity in the community that interests them.
- Participants will complete an activity by identifying and reserving transportation for a leisure/social participation activity in the community.

Time: 60 minutes

General Time Outline

- Introduction - 5 minutes
- Activity - 25 minutes
- Sharing - 7 minutes
- Processing - 5 minutes
- Generalizing - 4 minutes
- Application - 7 minutes
- Summary - 7 minutes

Supplies

- *Leisure & Social Participation in the Community handout* (Participants)
- *Leisure & Social Participation in the Community handout* (Facilitator)
- Blank sheet of paper

- Writing utensil (1 for each participant)

Session Outline

Introduction

- Welcome participants to the group session.
- “Today, we are going to be talking about leisure and social participation opportunities within the community.”
- Go over group expectations/rules.
 - Stay for the entire session.
 - Participate in group discussions and activities.
 - Be respectful of facilitator and participant comments.
 - All group conversations must remain confidential and should not be discussed outside of the group.
- Introduce Objectives.
 - Participants will identify at least one leisure or social participation opportunity in the community that interests them.
 - Participants will complete an activity by identifying and reserving transportation for a leisure/social participation activity in the community.
- Warm-Up.
 - Name.
 - “Share with the group, a leisure or social participation activity that you have attended in the community.”

Activity

- Discussion about interests within the community.
 - “What would you like to do in the community?”
 - “Where have you gone in the community in the past for leisure or social participation?”
 - “What are some of your leisure interests?”
 - “What are some of your social participation interests?”
- Give participants a copy of the *Leisure & Social Participation in the Community* *handout*. Give them a few minutes to look through it.
 - Ask participants to circle which items they are interested in.
- Then have participants go through the process of attending one of these activities, including setting up mobility options discussed in the previous session. Participants should also consider the hours the service is open, fees, guidelines, and the location of the chosen activity/activities.
 - Utilize blank sheets of paper to write down pertinent information for trip planning.

Sharing

- “What went well during this activity?”
- “What activities did you circle that interested you?”
- “Tell me what you thought about the options listed?”
 - “Is this a comprehensive list?”
 - “Can you think of anything that could be added?”

Processing

- “How did this activity make you feel?”
- “Did this activity increase your knowledge and/or confidence in using community mobility to participate in community activities?”

Generalization

- “What did you learn today?”
- “Are you more likely to utilize these resources and attractions now that you know about them?”

Application

- “When can you use this information in the future?”
- “How can you apply this information to your daily routine?”
- “How can this help you engage with others?”
- “How can this help you participate in leisure activities?”
- “Could you add something you learned today to your *Healthy Coping Strategies Toolbox*?”
- “What is your biggest takeaway from this session?”

Summary

- Ask a participant to make a summary statement about the group session.
- Review Objectives.
 - Participants will identify at least one leisure or social participation opportunity in the community that interests them.
 - Participants will complete an activity by identifying and reserving transportation for a leisure/social participation activity in the community.
- Concluding Questions.
 - “Did you feel engaged?”
 - “Was today’s session helpful?”
 - “Were you interested in the concepts introduced?”
 - “Were you satisfied with the interactions in this group today?”
- Thank participants for attending.
- Introduce the next session’s topic: Community Outing Utilizing Community Mobility.
 - “Next time, we are going to utilize the information we learned over the last two sessions and go out into the community. Where would you like to go?”
 - Note that the next session is meant to be facilitated individually rather than in the group format that has been used in previous sessions.
 - Participants must choose a location within 15 miles of the facility.

References

- Cole, M. B. (2018). *Group leadership: Cole’s seven steps*. In M. B. Cole (Ed.). *Group Dynamics in Occupational Therapy*. SLACK
- Polgar, J. (2011). Enabling community mobility is an opportunity to practice social occupational therapy. *Canadian Journal of Occupational Therapy, 78*, 67-71.
<https://doi.org/10.2182/cjot.2011.78.2.1>

Leisure & Social Participation in the Community

Creative/Arts

- Ceramics (MPRB, 2022)
- Craft Time (55+) (MPRB, 2022)
- The Southern Theatre
- Minneapolis Institute of Art
- Walker Art Center
- Minneapolis Sculpture Garden
- Weisman Art Museum
- American Swedish Institute
- Minneapolis College of Art & Design
- Children's Theatre Company

Physical/Active (MPRB, 2022)

- Basketball
- Pickleball
- Aerobics
- Indoor walking group
- Open dodgeball
- Open gym
- Open table tennis
- Yoga
- Zumba
- Online fitness classes (Silver Sneakers, n.d.)

Spiritual/Cultural

- Minnesota African American Heritage Museum & Gallery
- Somali Museum of Minnesota
- Let's Do Lunch Café
- Calvary Baptist Church
- St. Olaf Catholic Church
- First Christian Church (Disciples of Christ)
- Uptown Church
- Wooddale Church-Loring Park Campus
- Temple Israel-Minneapolis
- Hope Community Church- Downtown

Cognitive/General Leisure

- Hosmer Library
- MN Firefighters Museum

Volunteer opportunities

- AmeriCorps RSVP (Volunteers of America, n.d.)

Social

- Game Lounge (MPRB, 2022)
- Open Billiards (MPRB, 2022)
- Card Games (MPRB, 2022)
- Ice Cream Social
- 55+ Coffee & Chat
- Coffee & Talk (Little Brothers Friends of the Elderly, n.d.)
- Elderly Friend (Little Brothers Friends of the Elderly, n.d.)

Technological

- Computer Lab (MPRB, 2022)
- Computer Rental (MPRB, 2022)

Outdoors (MPRB, 2022)

- Outdoor Walking
- Rent/Borrow Outdoor equipment
- Nordic Walking
- Adult Bean Bags
- Hiking
- Bird Watching
- Trail Trekkers
- Community Sap Tapping
- Community Garden Volunteers
- Drop-in Canoeing

References

- American Swedish Institute. (n.d.). *Museum admission tickets*. <https://asimn.org/visit/tickets/>
- Explore Minnesota. (n.d.A). *Firefighters hall & museum*. <https://www.exploreminnesota.com/profile/firefighters-hall-museum/3076>
- Explore Minnesota. (n.d.B). *Minneapolis college of art and design*. <https://www.exploreminnesota.com/profile/minneapolis-college-art-design/4732#:~:text=Minneapolis%20College%20of%20Art%20and%20Design%20%E2%8C%A9&text=With%20an%20ever%2Dchanging%20roster,a%20reason%20to%20visit%20MCAD.&text=Exhibition%20events%20are%20free%20and%20open%20to%20the%20public>
- Little Brothers Friends of the Elderly. (n.d.). *Our programs*. <https://www.littlebrothersmn.org/>
- Mill City Museum. (n.d.). *Raw power, dramatic views, hands-on fun*. <https://www.mnhs.org/millcity>
- Minnesota African American Heritage Museum and Gallery. (n.d.). *Minnesota African American Heritage Museum and Gallery*. <https://www.maahmg.org/>
- Minneapolis Parks and Recreation Board. (2022). *Current and upcoming MPRB activities*. https://www.minneapolisparcs.org/activities__events/current-and-upcoming-mprb-activities/
- Minnesota Seniors. (n.d.). *Community events*. <https://www.mnseniorsonline.com/events.php>
- Silver Sneakers. (n.d.). <https://tools.silversneakers.com/>
- The Somali Museum of Minnesota. (n.d.). *Hours and admission*. <http://www.somalimuseum.org/hours-and-admission1.html>
- Volunteers of America. (n.d.). *AmeriCorps seniors RSVP- Greater twin cities*. <https://www.voamnwi.org/amicorps-seniors-rsvp-greater-twin-cities>
- Weisman Art Museum. (n.d.). *Free membership at WAM*. <https://wam.umn.edu/free-membershipwam/#:~:text=The%20Weisman%20Art%20Museum%20has,membership%20program%20free%20to%20join>
- Walker. (n.d.A). <https://walkerart.org/visit/garden>
- Walker. (n.d.B). *Gallery admission: Get tickets*. <https://walkerart.org/visit>

Leisure & Social Participation in the Community

This facilitator copy includes more detail to help assist residents in making mobility and scheduling decisions.

MPRB= Minneapolis Park & Recreation Board, all of these classes need to be registered for ahead of time.

Creative/ Arts

- Ceramics→ 55+, (MPRB, 2022)
- Craft Time (55+)→ (MPRB, 2022)
- The Southern Theatre
- Minneapolis Institute of Art→ FREE
- Walker Art Center→ Admission fee, Adults =\$12, Seniors 62+=\$13, EBT cardholders= \$2 (Walker, n.d.A; Walker, n.d.B)
- Minneapolis Sculpture Garden→ FREE
- Weisman Art Museum → FREE (Weisman Art Museum, n.d.)
- American Swedish Institute→ seniors 62+= \$12 (American Swedish Institute, n.d.)
- Minneapolis College of Art & Design→ FREE (Explore Minnesota, n.d.B)
- Children's Theatre Company

Social

- Game Lounge→ Active Pass (MPRB, 2022)
- Open Billiards→ Active Pass (MPRB, 2022)
- Card Games→ (MPRB, 2022)
- Ice Cream Social→ (MPRB, 2022)
- 55+ Coffee & Chat→ (MPRB, 2022)
- Coffee & Talk→ Drop in and chat to find friends and form connections (Little Brothers Friends of the Elderly, n.d.)
- Elderly Friend→ connect with older adults needing someone to connect with (Little Brothers Friends of the Elderly, n.d.)

Technological

- Computer Lab→ Active Pass (MPRB, 2022) FREE; no registration needed
- Computer rental→ Active Pass (MPRB, 2022), FREE, no registration needed

Cognitive/ General Leisure

- Hosmer Library
- MN Firefighters Museum→ open Saturdays and weekdays only with an appointment, seniors \$6 admission fee (Explore Minnesota, n.d.A)

Outdoors

- Outdoor Walking→ Active Pass (MPRB, 2022)
- Nordic Walking→ 55+, (MPRB, 2022)
- Adult Bean Bags→ 55+, (MPRB, 2022)
- Hiking→ (MPRB, 2022)
- Bird Watching→ (MPRB, 2022)
- Trail Trekkers→ individuals with disabilities get to hike and bring a companion along (MPRB, 2022)
- Community Sap Tapping→ (MPRB, 2022)
- Community Garden Volunteers→ (MPRB, 2022)
- Drop-in Canoeing→ (MPRB, 2022)
- Rent/borrow outdoor equipment through Adventure Hub (MPRB, 2022)

Spiritual/ Cultural

- Minnesota African American Heritage Museum & Gallery→ FREE, open Tuesday-Friday, and Saturday (Minnesota African American Heritage Museum and Gallery, n.d.)
- Somali Museum of Minnesota→ open Tuesday & Friday- Sunday, Adult admission = \$11, Senior admission 60+= \$8 (The Somali Museum of Minnesota, n.d.)
- Let's Do Lunch Café→ conversations between those in the LGBTQ+ community every 2nd Tuesday.
- Calvary Baptist Church
- St. Olaf Catholic Church
- First Christian Church (Disciples of Christ)→ Protestant Christian church
- Wooddale Church- Loring Park Campus→ Evangelical church
- Uptown Church
- Temple Israel- Minneapolis→ Jewish synagogue
- Hope Community Church- Downtown→ Baptist Church

Volunteer opportunities

- AmeriCorps RSVP→ gives individuals 55+ opportunities to interact in the community in things they enjoy (Volunteers of America, n.d.)
 - Eligibility to receive supplemental insurance or other benefits
 - Consistent or one-time volunteer opportunities

Physical/ Active

- Basketball→ Active Pass (MPRB, 2022), FREE, no registration needed
- Pickleball→ Active Pass (MPRB, 2022), FREE, no registration needed
- Aerobics→ Active Pass (MPRB, 2022), FREE, no registration needed
- Indoor Walking Group→ Active Pass (MPRB, 2022), FREE, no registration needed
- Open Dodgeball→ Active Pass (MPRB, 2022), FREE, no registration needed
- Open Gym→ Active Pass (MPRB, 2022), FREE, no registration needed, and Silver Sneakers
- Open Table Tennis→ Active Pass (MPRB, 2022), FREE, no registration needed
- Yoga→ 55+ (MPRB, 2022)
- Zumba→ 55+ (MPRB, 2022)
- Online Fitness Classes→ Silver Sneakers (online or home), 65+ through Medicare eligibility
 - Blaisdell YMCA (Silver Sneakers, n.d.)

Some locations available for MPRB, Active Pass, and Renting of outdoor equipment include: (MPRB, 2022)

- Whittier Park
- Stewart park
- Kenwood Park

How to utilize Adventure Hub and borrow outdoor equipment: (MPRB, 2022)

- Choose a location to pick up items
- First come, first serve equipment rental at the site
- Return the equipment on the same day before facility closes

References

- American Swedish Institute. (n.d.). *Museum admission tickets*. <https://asimn.org/visit/tickets/>
- Explore Minnesota. (n.d.A). *Firefighters hall & museum*.
<https://www.exploreminnesota.com/profile/firefighters-hall-museum/3076>
- Explore Minnesota. (n.d.B). *Minneapolis college of art and design*.
<https://www.exploreminnesota.com/profile/minneapolis-college-art-design/4732#:~:text=Minneapolis%20College%20of%20Art%20and%20Design%20%E2%BB%BF&text=With%20an%20ever%2Dchanging%20roster,a%20reason%20to%20visit%20MCAD.&text=Exhibition%20events%20are%20free%20and%20open%20to%20the%20public>
- Little Brothers Friends of the Elderly. (n.d.). *Our programs*. <https://www.littlebrothersmn.org/>
- Mill City Museum. (n.d.). *Raw power, dramatic views, hands-on fun*.
<https://www.mnhs.org/millcity>
- Minnesota African American Heritage Museum and Gallery. (n.d.). *Minnesota African American Heritage Museum and Gallery*. <https://www.maahmg.org/>
- Minneapolis Parks and Recreation Board. (2022). *Current and upcoming MPRB activities*.
https://www.minneapolisparcs.org/activities__events/current-and-upcoming-mprb-activities/
- Minnesota Seniors. (n.d.). *Community events*. <https://www.mnseniorsonline.com/events.php>
- Silver Sneakers. (n.d.). <https://tools.silversneakers.com/>
- The Somali Museum of Minnesota. (n.d.). *Hours and admission*.
<http://www.somalimuseum.org/hours-and-admission1.html>
- Volunteers of America. (2013). *RSVP volunteer interest/ experience checklist*.
<https://www.voamnwi.org/sites/default/files/download-file/Volunteer%20Interest%20Experience%20Checklist.pdf>
- Volunteers of America. (n.d.). *AmeriCorps seniors RSVP- Greater twin cities*.
<https://www.voamnwi.org/amicorps-seniors-rsvp-greater-twin-cities>
- Weisman Art Museum. (n.d.). *Free membership at WAM*. <https://wam.umn.edu/free-membershipwam/#:~:text=The%20Weisman%20Art%20Museum%20has,membership%20program%20free%20to%20join>
- Walker. (n.d.A). <https://walkerart.org/visit/garden>
- Walker. (n.d.B). *Gallery admission: Get tickets*. <https://walkerart.org/visit>

Session 3: Community Outing Utilizing Community Mobility

**This session is intended to be completed in a one-on-one session due to the complications of public transportation options for a group. It is also recommended that this session be completed on two occasions. The first occasion will occur days ahead of time to decide the transportation option and destination of choice so that rides can be scheduled in advance. The second occasion is meant to complete the outing as this session outline follows.*

Description

This session will allow participants to leave their current residence and go somewhere of interest in the community. This gives them a different physical and social context to combat any feelings of isolation while also helping them become more confident in navigating their community. Older adults may not understand or feel comfortable with public transportation options, so going through the process can be helpful and give them more confidence to use community mobility in the future.

Session Objectives

- The participant will utilize a transportation service for community mobility.
- The participant will experience a new context in the community.

Time: 3 hours (*this will vary depending on ride and time at the destination*)

General Time Outline

- Introduction - 5 minutes
- Activity - 2.5 hours (*varies*)
- Sharing - 5 minutes
- Processing - 5 minutes
- Generalizing - 5 minutes
- Application - 5 minutes
- Summary - 5 minutes

Supplies

- Phone or internet access to request a pickup ride
- Money in various forms for rides and activities (if the activity has a fee)

Session Outline

Before the outing: Allow the participant to choose a destination they would like to go to. They can utilize the *Leisure and Social Participation in the Community* handout from session two if desired. Have the participant go through utilizing the community mobility option of their choice to arrange a ride to their desired destination. Make sure that participants also schedule a return ride if applicable beforehand. (*This should be completed days in advance depending on the service used*)

Introduction

- Welcome participants to the group session.
- “Today, we are going to go on a community outing to *(a destination that the participant chose)*.”
- Go over group expectations/rules.
 - Stay for the entire session.
 - Participate in discussions and activities.
 - Be respectful of facilitator comments.
 - All conversations must remain confidential and should not be discussed outside of the group.
- Introduce Objectives.
 - The participant will utilize a transportation service for community mobility.
 - The participant will experience a new context in the community.
- Warm-Up (can be done on bus/transportation)
 - Name.
 - “What are you looking forward to on this outing?”

Activity

- Assist the participant in using the community transportation option of their choice. (*This stage may occur days prior, depending on the transportation choice.*)
- Participate in desired leisure/social participation community event of the participant’s choosing.

Sharing (do not start the discussion until the participant has returned to the assisted living facility/not to be discussed on transportation for lack of privacy)

- “How did this activity/outing go?”
- “What was easy?”
- “What was challenging?”
- “What did you like/dislike about the community mobility option you chose?”
- “What surprised you today?”
- “What did you enjoy during this activity?”

Processing

- “How did this activity make you feel?”
- “How confident do you feel utilizing this community mobility option after this experience?”
- “How confident are you in attending leisure and social participation opportunities in the community after this experience?”

Generalizing

- “What did you learn today?”
- “How likely are you to use these resources in the future?”

Application

- “When can you utilize this community mobility option in the future?”
- “How can you apply what you learned today, in the future when navigating the community?”
- “Could you add something you learned today to your *Healthy Coping Strategies Toolbox*?”
- “What is your biggest takeaway from this session?”

Summary

- Ask the participant to make a summary statement about the group session.
- Review Objectives.
 - The participant will utilize a transportation service for community mobility.
 - The participant will experience a new context in the community.
- Concluding Questions.
 - “Did you feel engaged?”
 - “Was today’s session helpful?”
 - “Were you interested in the concepts introduced?”
 - “Were you satisfied with the interactions in this group today?”
- Thank the participant for attending
- Introduce the next session’s topic: Introduction to Technology.

References

Cole, M. B. (2018). *Group leadership: Cole’s seven steps*. In M. B. Cole (Ed.). *Group Dynamics in Occupational Therapy*. SLACK

Section 6:

**Technology for Social Participation
and Leisure**

Session 1: Introduction to Technology

Description

Throughout the COVID-19 pandemic, many older adults were left isolated from family and friends due to social distancing protocols. Technology is one way to bridge the gap, allowing older adults to interact with others while staying safe. Research has identified that some older adults took the initiative to use technology to bridge the gap; however, others struggled to transition to online communication (Kotwal et al., 2020). Furthermore, the literature identified that educating and training older adults on technology use, especially those with low income, improved their confidence, quality of life, and use of technology in the future (Choi et al., 2022; Fields et al., 2020). In addition, training older adults to use technology platforms allowed them to feel more connected to the outside world and to use social support within the community (Fields et al., 2020). There is a need to help older adults use technology appropriately for social participation and leisure purposes throughout the COVID-19 pandemic.

This session introduces technology to older adults and educates them about the basic concepts involved. The session includes education and practices appropriately using the buttons on each device while working in groups to accomplish tasks. This session also educates older adults on independently using an iPad for leisure and social participation purposes. This activity is followed by a discussion about operating technology for greater generalization of information.

Session Objectives

- Participants will identify at least one thing they would like to learn about technology.
- Participants will identify at least one thing they can do with technology.
- Participants will complete assigned tasks in groups while utilizing technology.

Time: 60 minutes

General Time Outline

- Introduction - 5 minutes
- Activity - 32 minutes
- Sharing - 5 minutes
- Processing - 5 minutes
- Generalization - 3 minutes
- Application - 5 minutes
- Summary - 5 minutes

Supplies

- *List of Tasks worksheet*
- Two iPads
- One technology device per participant (mix between iPads and personal devices)
- TV with the ability to screen share

Session Outline

Introduction

- Welcome participants to the group session.
- Go over group expectations/rules.
 - Stay for the entire session.
 - Participate in group discussions and activities.
 - Be respectful of facilitator and participant comments.
 - All group conversations must remain confidential and should not be discussed outside of the group.
- Introduce Objectives.
 - Participants will identify at least one thing they would like to learn about technology.
 - Participants will identify at least one thing they can do with technology.
 - Participants will complete assigned tasks in groups while utilizing technology.
- Warm-Up.
 - Name.
 - “What are you hoping to learn about technology?”

Activity

- Discussion about technology.
 - “Has the pandemic caused anyone to use technology more often?”
 - “Why might technology be more important today than in previous years?”
 - “What do you currently know about technology?”
 - “What are you worried about when it comes to technology?” “Why?”
 - “What can you do with technology?”
 - Pay bills
 - Online shopping (including groceries)
 - Video calls with friends and family
 - Communication with others
 - Play games
 - Video calls with care providers
 - Learn new things
 - Stay updated on world events.
- “Who here has a technology device?”
- “Who knows how to work their technology device?”
- “Who here knows what an iPad is?”
 - “Is anyone interested in learning how to use one?”
- Technology education and exploration.
 - Each participant will have a technology device and explore the different features surrounding the use of the device. Participants will switch devices and complete the same tasks to generalize their skills. Give participants time to complete this activity.
 - Features for participants to find on each device:
 - On/off button
 - Volume
 - Voicemail

- Calling feature
 - Internet
- iPad usage education
 - Use the screen share feature from an iPad to a TV and demonstrate the use of different applications.
 - Give participants the *List of Tasks worksheet* to complete in groups. Give each group an iPad to complete these tasks.

Sharing

- “How did this activity go?”
- “What was easy?”
- “What was challenging?”

Processing

- “How did completing these tasks make you feel?”
- “How did the group activity help you understand the content?”
- “How confident do you feel utilizing technology after this session?”

Generalization

- “What did you learn from this activity?”

Application

- “How can you use this information in your daily life?”
- “What was your biggest takeaway from this session?”

Summary

- Ask a participant to make a summary statement about the group session.
- Review Objectives.
 - Participants will identify at least one thing they would like to learn about technology.
 - Participants will identify at least one thing they can do with technology.
 - Participants will complete assigned tasks in groups while utilizing technology.
- Concluding Questions.
 - “Did you feel engaged?”
 - “Was today’s session helpful?”
 - “Were you interested in the concepts introduced?”
 - “Were you satisfied with the interactions in this group today?”
- Thank participants for attending.
- Introduce the next session’s topic: Technology for Social Participation.

References

Choi, N. G., DiNitto, D. M., Marti, C. N., & Choi, B. Y. (2022). Telehealth use among older adults during COVID-19: Associations with sociodemographic and health characteristics, technology device ownership, and technology learning. *Journal of Applied Gerontology*, 41(3), 600-609. <https://doi.org/10.1177/07334648211047347>

- Cole, M. B. (2018). *Group leadership: Cole's seven steps*. In M. B. Cole (Ed.) *Group Dynamics in Occupational Therapy*. SLACK
- Fields, J., Cembali, A. G., Michalec, C., Uchida, D., Griffiths, K., Cardes, H., Cuellar, J., Chodos, A. H., & Lyles, C. R. (2020). In-home technology training among socially isolated older adults: Findings from the tech allies program. *Journal of Applied Gerontology, 40*(5), 489-499.
<https://doi-org.ezproxylr.med.und.edu/10.1177/0733464820910028>
- Kotwal, A., Holt-Lunstad, J., Newmark, R., Cenzer, I., Smith, A., Covinsky, K., Escueta D., Lee, J., & Perissinotto, C. (2020). Social isolation and loneliness among the San Francisco bay area older adults during the COVID-19 shelter-in-place orders. *Journal of the American Geriatrics Society, 69*(1), 20-29.
<https://doi-org.ezproxylr.med.und.edu/10.1111/jgs.16865>

Complete the Tasks in your groups

1. Set an alarm for 5:00 pm.
2. Check the weather for tomorrow, with the high and low temperatures. Write this down.
3. Search the internet for a funny cat video to share with the group.
4. Draft a text message to a friend.
5. Create an appointment for tomorrow at 9:00 am on your calendar.

Session 2: Technology for Social Participation

Description

Technology is a way for older adults to stay connected to loved ones and the world around them during the COVID-19 pandemic. Video calls are one effective way to connect people face-to-face while they are not at the same location. Video calling platforms include Zoom, FaceTime, Facebook Messenger, Google Duo, and Skype. Using these video calling platforms is a way to socially interact in a context that feels more realistic during a pandemic. It is helpful for older adults to learn how to use these platforms to interact with friends and family regardless of where they are living. This form of technology decreases loneliness and gives older adults a way to cope with limitations in their physical and social contexts (Chopik, 2016). Additionally, educating older adults on using technology platforms allows them to feel more connected to the world and stay in touch with loved ones (Fields et al., 2020). By educating older adults on methods to interact with friends and family they are able to gain or maintain social and emotional support throughout the pandemic.

This session introduces and educates participants on video calling platforms. It first starts with a discussion about the differences in social participation practices before and during the pandemic. Then participants receive education on different video calling platforms, followed by time to practice using these platforms. The activity is followed by an active discussion about participant experiences learning about this topic and initiating video calls.

Session Objectives

- Participants will identify someone they can socially interact with via technology.
- Participants will successfully initiate a FaceTime call using an iPad.

Time: 60 minutes

General Time Outline

- Introduction - 5 minutes
- Activity - 30 minutes
- Sharing - 7 minutes
- Processing - 4 minutes
- Generalizing - 4 minutes
- Application - 5 minutes
- Summary - 5 minutes

Supplies

- Two iPads
- *Video Calling Platforms handout*

Session Outline

Introduction

- Welcome participants to the group session.
- Go over group expectations/rules.
 - Stay for the entire session.
 - Participate in group discussions and activities.
 - Be respectful of facilitator and participant comments.
 - All group conversations must remain confidential and should not be discussed outside of the group.
- Introduce Objectives.
 - Participants will identify someone they can socially interact with via technology.
 - Participants will successfully initiate a FaceTime call using an iPad.
- Warm-Up.
 - Name.
 - “Share your experiences interacting with others throughout the pandemic.”

Activity

- Introductory discussion about technology for peer interaction.
 - “How often do you see friends and family?”
 - “Has this changed due to COVID-19?”
 - “Would you like to see them more or less often?”
 - “What are barriers to interacting with friends and family?”
 - “Has anyone used technology to interact with others?”
 - “What was your past experience using technology like?”
 - “Describe your experience using technology to interact with others.”
 - “What platform did you use?”
- Education and discussion about using technology for social participation.
 - “How can you use technology to interact with others?”
 - Platforms- Give participants a copy of the *Video Calling Platforms handout*.
 - FaceTime (FREE- only works between two Apple products)
 - Facebook Messenger (FREE- requires a Facebook account-and only works between two Facebook accounts)
 - Google Duo (FREE- requires a Google account-and only works between two Google accounts)
 - Zoom (requires account, paid subscription for calls longer than 40 minutes, and only works between two Zoom accounts) (Copeman, 2021)
 - Skype (FREE- requires an account- and only works between two Skype accounts)
 - “On what technology devices can you use these platforms?”
 - Smartphones (i.e. mobile phones with internet access, camera and screen)
 - Tablet
 - Laptop
 - iPad
- Group activity
 - Put participants in 1-2 groups. Each group will get an iPad to explore.

- Participants will initiate one video call via FaceTime and another video call from a different video calling platform of the group’s choosing.
- “Now that you learned how to initiate video calls. Now let’s brainstorm whom you can call.”
 - “Who would you like to video call?” “Why?”
 - “How would you video call them?”
 - “What device would you use to video call this person?”
 - “When could you set up a time to video call?”
 - Consistency in talking to loved ones is good for social support and belonging.
 - Scheduling weekly calls with family allows consistency and something to look forward to (Suttie, 2021).
 - “Coordinate with family or friends to make video calling consistent.”

Sharing

- “How did initiating a video call go?”
- “How did it compare to your previous experience with technology?”
- “What platform was easier to initiate a video call from?”
- “What was challenging about this activity?”

Processing

- “How did the group facilitate your learning?”
- “How confident do you feel in utilizing technology to video call loved ones after this session?”
- “Does this information make it easier for you to interact with others?”

Generalization

- “When can you use this information?”
- “When can you call family members?”
- “Who can you set up weekly calls with?”

Processing

- “How can this help reduce feelings of isolation present today?”
- “How can you use this information in the future?”
- “Could you add something you learned today to your *Healthy Coping Strategies Toolbox*?”
- “What is your biggest takeaway from the session?”

Summary

- Ask a participant to make a summary statement about the group session.
- Review Objectives.
 - Participants will identify someone they can socially interact with via technology.
 - Participants will successfully initiate a FaceTime call using an iPad.
- Concluding Questions.
 - “Did you feel engaged?”
 - “Was today’s session helpful?”

- “Were you interested in the concepts introduced?”
- “Were you satisfied with the interactions in this group today?”
- Thank participants for attending.
- Introduce the next session’s topic: Technology for Leisure.

References

- Chopik, W. J. (2016). The benefits of social technology use among older adults are mediated by reduced loneliness. *Cyberpsychology Behavior & Social Network*, *19*(9), 551-556.
<https://doi.org/10.1089/cyber.2016.0151>
- Cole, M. B. (2018). *Group leadership: Cole’s seven steps*. In M. B. Cole (Ed.) *Group Dynamics in Occupational Therapy*. SLACK
- Copeman, A. (2021). *How to get around Zoom’s 40-minute limit*. Tech Advisor.
<https://www.techadvisor.com/how-to/software/zoom-40-minute-limit-3785767/#:~:text=How%20long%20is%20a%20Zoom,kicked%20out%20of%20the%20call>
- Fields, J., Cembali, A. G., Michalec, C., Uchida, D., Griffiths, K., Cardes, H., Cuellar, J., Chodos, A. H., & Lyles, C. R. (2020). In-home technology training among socially isolated older adults: Findings from the tech allies program. *Journal of Applied Gerontology*, *40*(5), 489-499.
<https://doi-org.ezproxylr.med.und.edu/10.1177/0733464820910028>
- Suttie, J. (2021). *How older people can cope with isolation*. Greater Good Magazine.
https://greatergood.berkeley.edu/article/item/how_older_people_can_cope_with_isolation

Video Calling Platforms

FaceTime

- FREE
- Only on Apple devices
- This platform can only be used between two Apple products.

Facebook Messenger

- FREE
- Requires the person to create a Facebook account.
- This platform only works between two Facebook accounts.
- Sign in to the Facebook account to initiate this call.

Google Duo

- FREE
- Requires the person to have a Google account (this includes Gmail) and download the Google Duo app.
- This platform only works between two Google accounts.
- Sign in to the Google account to initiate this call.

Skype

- FREE
- Requires the person to create a Skype account.
- This platform only works between two Skype accounts.
- Sign in to the Skype account to initiate this call.

Zoom

- This service is FREE for the first 40 minutes of the call, then becomes a paid service (Copeman, 2021).
- Requires the person to create a Zoom account.
- This platform only works between two Zoom accounts.
- Initiating a Zoom call takes a few more steps than other platforms. A Zoom “link” must first be created and sent to those that an individual is intending to call.

References

- Copeman, A. (2021). *How to get around Zoom's 40-minute limit*. Tech Advisor. <https://www.techadvisor.com/how-to/software/zoom-40-minute-limit-3785767/#:~:text=How%20long%20is%20a%20Zoom,re%20limited%20to%2040%20minutes.>

Session 3: Technology for Leisure

Description

Research has identified technology as a way to bridge the gap for older adults to participate in daily occupations with others (Kotwal et al., 2020). However, some older adults have struggled with this transition, making it essential to dedicate a session to educate them on what they can use technology for and how to stay safe online. Technology is a new way to access important resources and contact others while staying connected to the world around them (Fields et al., 2020).

This session focuses on what technology can be used for and identifies leisure activities that involve technology. This session also emphasizes tips to stay safe while utilizing technology. Participants will get to actively participate in a desired leisure activity using an iPad or personal device. This session will conclude with an active discussion on technology use to generalize skills to daily life.

Session Objectives

- Participants will identify at least one leisure activity they can complete online.
- Participants will identify at least one way to stay safe online.

Time: 60 minutes

General Time Outline

- Introduction - 5 minutes
- Activity - 27 minutes
- Sharing - 7 minutes
- Processing - 5 minutes
- Generalizing - 5 minutes
- Application - 6 minutes
- Summary - 5 minutes

Supplies

- *Grocery Delivery Options handout*
- *Cyber Safety handout*
- *Choosing an Online Leisure Activity worksheet*
- 2-3 iPads (participants can use their device if they have one)

Session Outline

Introduction

- Welcome participants to the group session.
- Go over group expectations/rules.
 - Stay for the entire session.
 - Participate in group discussions and activities.

- Be respectful of facilitator and participant comments.
- All group conversations must remain confidential and should not be discussed outside of the group.
- “Today, we will discuss how to participate in leisure activities using technology.”
- Review Objectives.
 - Participants will identify at least one leisure activity they can complete online.
 - Participants will identify at least one way to stay safe online.
- Warm-Up.
 - Name.
 - “Share something you have used technology for in the past.”

Activity

- “What do you currently use technology for?”
- “What would you like to use technology for?”
- “What can you do with technology related to leisure?”
 - Online shop
 - “What items would you look for?”
 - Groceries
 - Clothing
 - Toiletries
 - Electronics
 - “Where could you look for these items?”
 - Play games
 - “What games are you interested in?”
 - “Do you complete this games individually or with others?”
 - Browse the internet
 - Learn something new
- Cyber security education. Give participants a *Cyber Security handout*.
 - Go through the handout as a group.
 - “What is one thing that you can do to stay safe online?”
- Allow participants to choose a leisure activity they are interested in completing via technology.
 - Give participants a *Choosing an Online Leisure Activity worksheet* to complete.
 - Then allow participants to practice completing this leisure activity on an iPad or personal device.
 - Offer directions on the use of different grocery delivery options.
 - *Grocery Delivery Options handout*

Sharing

- “What online leisure activity did you choose?”
- “How did this activity go?”
- “How did it compare to your previous experience with technology?”
- “What was challenging about this activity?”

Processing

- “How did this group facilitate your interest?”
- “How did this group facilitate your learning?”
- “Tell me about your confidence in using technology for leisure participation?”

Generalizing

- “What did you learn from this activity?”
- “When can you use this information?”

Application

- “How can this information limit feelings of isolation?”
- “How can you use this information in your daily life?”
- “Could you add something you learned today to your *Healthy Coping Strategies Toolbox*?”
- “What was your biggest takeaway from the session?”

Summary

- Ask a participant to make a summary statement about the group session.
- Review Objectives.
 - Participants will identify at least one leisure activity they can complete online.
 - Participants will identify at least one way to stay safe online.
- Concluding Questions.
 - “Did you feel engaged?”
 - “Was today’s session helpful?”
 - “Were you interested in the concepts introduced?”
 - “Were you satisfied with the interactions in this group today?”
- Thank participants for attending.
- Introduce the next session’s topic (*if applicable*). Otherwise make a summary statement after the completion of the program. Give participants the post-program evaluation survey at this time.

References

- Cole, M. B. (2018). *Group leadership: Cole’s seven steps*. In M. B. Cole (Ed.) *Group Dynamics in Occupational Therapy*. SLACK
- Connect Safely. (2021). *The senior’s guide to online safety*.
<https://www.connectsafely.org/seniors-guide-to-onlinesafety/#:~:text=and%20make%20investments.-,Stay%20safe%20tips,trust%20to%20manage%20your%20accounts>
- Fields, J., Cembali, A. G., Michalec, C., Uchida, D., Griffiths, K., Cardes, H., Cuellar, J., Chodos, A. H., & Lyles, C. R. (2020). In-home technology training among socially isolated older adults: Findings from the tech allies program. *Journal of Applied Gerontology*, 40(5), 489-499.
<https://doi-org.ezproxylr.med.und.edu/10.1177/0733464820910028>
- Kotwal, A., Holt-Lunstad, J., Newmark, R., Cenzer, I., Smith, A., Covinsky, K., Escueta D., Lee, J., & Perissinotto, C. (2020). Social isolation and loneliness among the San Francisco bay area older adults during the COVID-19 shelter-in-place orders. *Journal of the American*

Geriatrics Society, 69(1), 20-29.
<https://doi-org.ezproxylr.med.und.edu/10.1111/jgs.16865>

Cyber Security

Passwords

- Creating accounts on various websites requires setting up user names and passwords. Creating accounts on multiple websites oftentimes means having multiple usernames and passwords to sign into various personal accounts.
- Passwords should be written down, kept in a safe location, and not shared with others (National Cybersecurity Alliance, n.d.).
- People will likely have to create a username and password to make an account.
- Password requirements vary by the website but commonly require these things: (Connect Safely, 2021)
 - At least eight characters (character = letter, number, or symbol)
 - At least one capital letter
 - At least one lowercase letter
 - At least one number
 - At least one symbol
- Adding more characters to a password makes it stronger and less likely to be guessed by someone else.
- Passwords are sensitive to capital and lowercase letters!
- Do not use the same password for all accounts; this makes the account more likely for strangers to get into (National Cybersecurity Alliance, n.d.).
- When using a shared device, make sure to log out of apps and websites using personal information (National Cybersecurity Alliance, n.d.).

Payments Online

- Technology allows people to access their bank accounts and pay bills without going directly to the bank.
- Accessing this online banking option can be done by logging in with the username and password.
- It is best not to save credit or debit card information when making purchases online. If someone else gets this device, they can access the card number and the money.

Giving out Personal Information

- Being online allows people to post whatever they want.
- It is best to limit the amount of personal information given to others to prevent someone from inappropriately using your personal information.

- Some people choose to share personal information with a friend or family member. It is best to make sure this person is trustworthy before giving them access to important information (Connect Safely, 2021).

Posting on Social Media Apps

- Using the internet means posting what you want.
- Posting also means everyone else on the internet can see what is posted.
- Think twice before posting!

Being Safe Online

- People online try to take people’s money or personal information.
- Creating a strong password will prevent someone from getting into the account and stealing personal information (National Cybersecurity Alliance, n.d.).
- Do not give out personal information over email to anyone claiming to be from the “IRS”, “Social Security Administration” or “Medicare” (Connect Safely, 2021). They will typically communicate by mail.
- If unsure where an email message came from, it is best to check the sender’s email address.
 - Call the provider to verify.
- There are many people trying to steal your personal information or harm your device. Do not click on an email link unless it is from a trusted individual (Connect Safely, 2021).
- People should never give their social security number over the phone or the computer unless: (Connect Safely, 2021)
 - Applying for a bank account
 - Applying for a credit card
 - Receiving a credit report
 - Giving to an employer

References

- Connect Safely. (2021). *The senior’s guide to online safety*.
<https://www.connectsafely.org/seniors-guide-to-onlinesafety/#:~:text=and%20make%20investments,-,Stay%20safe%20tips,trust%20to%20manage%20your%20accounts>
- National Cybersecurity Alliance. (n.d.). *Managing your privacy: Privacy tips for older adults*.
<https://staysafeonline.org/stay-safe-online/managing-your-privacy/privacy-tips-older-adults/>

Choosing an Online Leisure Activity

Choose a leisure activity.

What device will you use?

Where can you find this activity?

What should you think about when completing this activity?

Are there any safety or security risks with this activity?

Grocery Delivery Options

**Note that this information is accurate as of March 31, 2022*

Amazon Fresh (Aging in Place, 2021)

- This service delivers groceries from Amazon sellers.
- A Prime membership is needed to use this service.
 - Membership also includes regular Prime, free delivery & Amazon TV & movies.
- If someone has an EBT card/Medicaid, they can get a great discount (\$5.99/month) for Prime, and items are EBT acceptable online so that they can pay with EBT food funds. However, this service does not apply to cash funds.
- This service allows people to choose when their groceries are delivered within a 2-hour window (with Prime).
- Some prices may be higher on certain items than in the store.
- Free shipping is available through Prime on orders greater than \$35.
- An automatic tip is added to each order, but this amount can be changed. It is recommended that people tip in some amount for each delivery.
- Orders are made online.

Instacart (Aging in Place, 2021)

- This service delivers groceries from local stores like Cub, Aldi, Costco, etc.
- Prices are similar to in-store shopping.
- There is a fee for delivery within a 1-2 hour time frame.
- A minimum of \$10/order to get delivery, and fees will depend on the price of orders under \$35 (Instacart, n.d.).
- Membership is \$149/ year, which provides free delivery.
- There are fees attached to each order: 5% service fee, delivery fee (~\$5.99-7.99), and a tip (~\$5).
- If someone orders groceries often, this may not be the cheapest service for them.
- Orders are made online.

Help at Your Door (Help at Your Door, 2021)

- Orders can be made online or over the phone for grocery delivery.
- EBT & SNAP grocery eligible.
- This service also provides help putting groceries away in the home.

Walmart/Postmates (Aging in Place, 2021)

- This is a grocery delivery service from Walmart & delivered by Postmates.
- No yearly fee or membership, but an account is needed.
- Orders must be greater than \$30 to get delivery, which is the lowest minimum for an order compared to other online grocery order websites.
- Delivery costs range from \$7.95-to \$9.95 + \$10 for fast delivery (Walmart, 2021).
- Order online or on the app.

Mom's Meals (Mom's Meals, n.d.A; Mom's Meals, n.d.B)

- This is a meal delivery service where people can purchase a lot of nutritious foods at one time, that can be created based on specific diets.
 - General wellness
 - Diabetes-friendly
 - Vegetarian
 - Heart-healthy
 - Cancer support
 - Low sodium
 - Renal-friendly (+\$1/meal)
 - Gluten-free (+\$1/meal)
 - Pureed (+\$1/meal)
- Eligibility through Medicare Advantage plans, Medicaid plans, long-term care services and supports (LTSS), or self-pay options at \$6.99/ meal → contact the case manager for more information on qualifications.
- People get to choose specific meals that are fresh for 14 days from various options in increments of 10, 14, or 21 meals at a time.
- Call or order online.

Target (Valsamis, n.d.)

- A Target account is needed to use this service.
- Grocery and other product orders must be \$35+. Some restrictions apply.
- Same-day delivery on orders through Shipt (another account with a \$99/year membership) gives free shipping.
- Without this membership, shipping is \$9.99/ order.
- A 15-20% tip is recommended for each order.
- Target does not accept EBT or WIC payments on online orders, and no coupons are accepted for same-day delivery.
- Prices are comparable to shopping in the store.

References

- Aging in Place. (2021). *Best grocery delivery plans for seniors*. <https://aginginplace.org/meal-delivery/best-grocery-delivery-plans-for-seniors/>
- Help at Your Door. (2021). <https://helpatyourdoor.org/>
- Instacart. (n.d.). *Instacart fees and taxes*.
<https://www.instacart.com/help/section/360007902791/360039164252#:~:text=As%20always%2C%20Instacart%20Express%20members,before%20being%20eligible%20for%20delivery.>
- Mom's Meals. (n.d.A). *How it works*. <https://www.momsmeals.com/our-food/how-it-works/>
- Mom's Meals. (n.d.B). *Setup new order*.
https://my.momsmeals.com/members/order.aspx?_ga=2.254995656.158575926.1646147945-1619896076.1646147944
- Valsamis, A. (n.d.). *How to get Target same-day grocery delivery through Shipt*.
<https://www.shopfood.com/grocery-stores/target-grocery-delivery/>
- Walmart. (2021). *Walmart drops \$35 minimum for express delivery*.
<https://corporate.walmart.com/newsroom/2021/03/01/walmart-drops-35-minimum-for-express-delivery>

***Optional* Session 4: How to use your Amazon Alexa for Leisure**

Description

This session introduces an Amazon Alexa device to participants so that they can use it for leisure purposes. This device has many features that allow older adults to easily access the information they may need, like the news, weather, alarms, or music throughout the day. This session will allow participants to explore the different features of the device. This activity is followed by an active discussion for generalization to daily life so that older adults can properly use the device to meet their needs.

Session Objectives

- Participants will identify at least one thing they learned today that they did not know before attending.
- Participants will identify at least one way they can use their Amazon Alexa daily.

Time: 60 minutes

General Time Outline

- Introduction - 5 minutes
- Activity - 30 minutes
- Sharing - 5 minutes
- Processing - 5 minutes
- Generalizing - 3 minutes
- Application - 5 minutes
- Summary - 7 minutes

Supplies

- 1-2 Amazon Alexa devices
- Outlet to plug Amazon Alexa device into
- *Exploration Tasks worksheet*

Session Outline

Introduction

- Welcome participants to the group session.
- “Today, we will talk about the Amazon Alexa device and its features.”
- Go over group expectations/rules.
 - Stay for the entire session.
 - Participate in group discussions and activities.
 - Be respectful of facilitator and participant comments.
 - All group conversations must remain confidential and should not be discussed outside of the group.
- Introduce Objectives.
 - Participants will identify at least one thing they learned today that they did not know before attending.
 - Participants will identify at least one way they can use their Amazon Alexa daily.
- Warm-Up.
 - Name.
 - “Share something you want to learn in this session.”

Activity

- Active discussion about Amazon Alexa.
 - “What is an Amazon Alexa?”
 - Smart speaker
 - Voice-controlled
 - “What can an Amazon Alexa do?”
 - Set an alarm
 - Set a timer
 - Play music
 - Tell the news
 - Answer random questions
 - Tell the weather
 - Play white noise/nature sounds
 - 20 questions
 - “Does anyone have questions or concerns about using an Amazon Alexa device?”
 - Devices compatible with Alexa for ease at home.
 - Smart Plug → plugs into the wall, and you can plug other devices into it, allowing you to control that device with your voice (Kozuch, 2022).
 - ~\$30
 - Echo Show → This device acts like an Alexa and responds to commands, and allows you to watch videos and initiate video calls with friends and family, all with simple voice commands (Gil, 2017).
 - ~\$180
- Amazon Alexa exploration
 - Split participants into 1-2 groups (*depending on how many Amazon Alexa devices are available*). Allow participants to practice commands and play around with the features of the Amazon Alexa device. Give participants an *Exploration Tasks worksheet* to complete in their groups.

Sharing

- “How did this activity go for you?”
- “What voice commands did you use on Amazon Alexa?”
- “How did Alexa respond to these voice commands?”

Processing

- “How did this activity make you feel?”
- “What feature on the Amazon Alexa is your favorite?”

Generalizing

- “What features would you use in the future?”

Application

- “How can you apply what you learned today into your daily life?”
- “How could this device make your life easier?”
- “What is your biggest takeaway from this session?”

Summary

- Ask a participant to make a summary statement about the group session.
- Review Objectives.
 - Participants will identify at least one thing they learned today that they did not know before attending.
 - Participants will identify at least one way they can use their Amazon Alexa daily.
- Concluding Questions.
 - “Did you feel engaged?”
 - “Was today’s session helpful?”
 - “Were you interested in the concepts introduced?”
 - “Were you satisfied with the interactions in this group today?”
- Thank participants for attending.
- Make a summary statement after the completion of the program. Give participants the post-program evaluation survey at this time.

References

- Cole, M. B. (2018). *Group leadership: Cole’s seven steps*. In M. B. Cole (Ed.) *Group Dynamics in Occupational Therapy*. SLACK
- Gil, L. (2017). *Amazon echo show: Everything you need to know!*
<https://www.imore.com/amazon-echo-show-everything-you-need-know>
- Kozuch, K. (2021). *The best Alexa compatible devices in 2022*.
<https://www.tomsguide.com/best-picks/best-alexa-compatible-devices>

Exploration Tasks

Set an alarm.

Set a timer.

Find out what is happening in the news.

Find out what the weather is tomorrow.

Play a specific song.

THANK YOU!

You may contact the author with any questions at mariah.leroux8@gmail.com

APPENDIX B

Promoting Positive Mental Health through Social Participation and Leisure during a Pandemic

By: Mariah LeRoux, OTDS

Purpose Statement

The purpose of this education session is to enhance the facilitator's knowledge about occupational therapy's role in leisure and social participation to promote meaningful engagement during a pandemic. Isolation and occupational deprivation caused by the COVID-19 pandemic have significantly affected older adults' mental and physical well-being. The program outlined in this education session will help those older adults reduce the negative mental and physical health outcomes of the pandemic. In addition, this education session will properly educate facilitators on how to facilitate the program to reduce isolation and increase the performance range of older adults.

Acknowledgments

The author of this program would like to thank their advisor Janet Jedlicka, PhD, OTR/L, FAOTA, for her guidance and support throughout this project, and Doctoral Experiential Placement supervisor Christen Conrad, OTA, for her continued support, positivity and insight regarding the assisted living facility and its residents throughout the development of the product. The author would also like to take this time to thank their family and friends for their unconditional support throughout this experience.

Affiliation Statement

This product includes sessions involving the use of various company products and services and the author is in no way affiliated with the stated companies. Some of the company names or products used include but are not limited to Amazon, Facebook, Google, Apple, Zoom, Skype, Target, Walmart, Postmates, Mom's Meals, Instacart, Amazon Fresh, Metro Mobility, Metro Transit, Transit Link, Uber, Lyft, Help at Your Door, Blue & White taxi, Rainbow taxi, Yellow Cab, Transportation Plus, or any community organizations listed throughout this protocol.

Table of Contents

Education Session Detail & Theoretical Model.....	217
Recorded Education Session Description.....	225
Education Session Presentation	226

Model: Ecology of Human Performance (EHP)

The EHP model is appropriate for this education session because of how it guided the program that these facilitators will implement. The model entails the unique interactions of different contexts on the person, such as social, physical, temporal, and cultural (Dunn, 1994). The interaction of person factors and contexts influences the overall occupational participation of older adults. This model is key to analyzing participation in older adults. Understanding this model from the facilitator’s perspective will allow a greater understanding of the societal issue addressed and how to intervene appropriately.

EHP Terminology: This education session includes language consistent with this interdisciplinary theoretical model. Terminology utilized in this education session includes: person factors, contexts, tasks, performance range, establish, restore, adapt, modify, alter, create, and prevent (Dunn, 1994). This terminology is threaded throughout the program and guides the program to increase the performance range of older adults throughout a pandemic.

EHP Terminology and Analysis of Literature

- **Person:** This is the psychosocial, sensorimotor, and cognitive factors that influence the involvement in occupations (Dunn, 1994).

Psychosocial	<ul style="list-style-type: none">• Research has noted an increase in isolation as individuals age (Simard & Volicer, 2020).• All people have experienced limited social interactions due to pandemic-related protocols.• Older adults have experienced an increase in isolation for an extended time due to pandemic protocols (Banerjee & Rai, 2020).• Extended time in isolation and other pandemic-related stressors have caused older adults to develop increased mental health symptoms including anxiety, depression, and loneliness (Banerjee & Rai, 2020; Kotwal et al., 2020; Minahan et al., 2020; Stickley & Koyanagi, 2016; Torres, 2020).• Many individuals experienced a disruption in daily routines during the COVID-19 pandemic (Torres, 2020).• Older adults have experienced limitations in social support due to social distancing measures and a lack of understanding of technology and accessibility (Fidanza et al., 2020; Kotwal et al., 2020).• Many individuals have had to cope with the loss of a loved one, some whom they may not have been able to say goodbye (Torres, 2020).• Volition was shown to be directly tied to the effectiveness of leisure and social participation activities influencing older adults’ participation in occupations (Ibrahim et al., 2021).
Sensorimotor	<ul style="list-style-type: none">• Many older adults experienced limitations in participation and leisure which led to a decrease in physical function, requiring older adults to need more assistance with activities of daily living (ADLs) and instrumental activities of daily living (IADLs) (Kotwal et al., 2020).• The lack of social connection and leisure engagement caused consequences for physical and mental health.

Cognition	<ul style="list-style-type: none"> Older adults experienced an increase in isolation which can exacerbate cognitive decline (Montgomery et al., 2020).
-----------	---

- Context: The context is the environmental or outside factors surrounding the person (Dunn, 1994).

Social	<ul style="list-style-type: none"> Older adults experienced fewer social interactions with both staff working from home and friends and families not able to visit due to pandemic-related and facility protocols (Sepulveda-Loyola et al., 2020) Older adults experienced reduced contact and care from staff to maintain a safe distance minimizing the spread of COVID-19 (Torres, 2020). A reduction in social contact caused isolation and occupational deprivation in older adults minimizing connections with others (Banerjee & Rai, 2020; Simard & Volicer, 2020). Many facilities shut down opportunities for social gatherings to reduce virus transmission.
Physical	<ul style="list-style-type: none"> Older adults experienced limitations in physical context due to quarantine measures when leaving home. Some facilities required residents to isolate themselves in their rooms, limiting changes in their physical context. Older adults experienced mobility limitations associated with age and assisted living (Polgar, 2011).
Temporal	<ul style="list-style-type: none"> The time of day activities are held, or services are available dictate the participation of older adults. An older adult's participation in an activity may be related to how long an activity will last. COVID-19, in general, disrupted daily routines (Torres, 2020).
Cultural	<ul style="list-style-type: none"> Religious services shut down due to pandemic protocols, limiting religious participation. The culture within a facility changed during pandemic-related protocols with limited peer interactions and cohesiveness of group activities.

- Task: The task is the occupations completed (Dunn, 1994).

Coping Strategies	<ul style="list-style-type: none"> Learning how to cope with difficult situations like a pandemic is easier when individuals are equipped with the skills to do so (Finlay et al., 2021; Labadi et al., 2021). Older adults are at an increased risk of contracting the COVID-19 virus causing increased stress (CDC, 2021). These older adults would benefit from coping skills education (CDC, 2021).
-------------------	---

	<ul style="list-style-type: none"> • Problem and emotion-focused coping strategies can be helpful in different situations; so understanding both will help older adults cope with stressors better in the future (Aldwin & Yancura, 2004; Carr & Pudrovska, 2007).
Leisure	<ul style="list-style-type: none"> • Leisure activities are shown to have positive mental and physical health outcomes for older adults such as greater quality of life, greater life satisfaction, healthy aging, and a reduction in life stressors (Chen & Chippendale, 2018; Chilvers et al., 2010; Jackson et al., 1998; O’Sullivan, 2005; Paggi et al., 2016; Sala et al., 2019). • Leisure activities were identified to reduce mental health symptoms like anxiety and depression (Chen & Chippendale, 2018; Paggi et al., 2016). • Leisure occupations can reduce people’s feelings of isolation (Nyman & Szymczynska, 2016; Sala et al., 2019). • Leisure activities can minimize cognitive decline associated with age and dementia (Chen & Chippendale, 2018; Chiu et al., 2013; Fallahpour et al., 2016; Nyman & Szymczynska, 2016). • Leisure participation was also identified to help improve performance in activities of daily living (ADL), promoting greater independence in self-care (Chen & Chippendale, 2018).
Social Participation	<ul style="list-style-type: none"> • Social participation interventions have been shown to be most effective when they are coupled with individual volition (Ibrahim et al., 2021). • Social participation can reduce cognitive decline associated with age (Fallahpour et al., 2016). • Volunteer participation promoted happiness and relatedness among other individuals with similar interests (Chilvers et al., 2010; Paggi et al., 2016; Webber & Fendt-Newlin, 2017). • Group social participation interventions were shown to have greater carryover when implemented in group settings for greater generalization of content (Ibrahim et al., 2021; Webber & Fendt-Newlin, 2017). • Journaling or writing within a social setting allowed reflection and interactions with peers (Ibrahim et al., 2021).
Routine Modification	<ul style="list-style-type: none"> • Lifestyle Redesign® is an occupational therapy intervention that helps promote occupational engagement through modifying routines, which was proven to be effective (Jackson et al., 1998; University of Southern California, n.d.). • Lifestyle Redesign® helped increase interest in leisure activity and promote social participation for positive mental health outcomes (Levasseur et al., 2019).

	<ul style="list-style-type: none"> • Routines were identified to be important for people’s mental health by managing anxiety, allowing predictability and creating a structure for the day (Brenner, 2020; Ginsberg, 2020).
Community Mobility	<ul style="list-style-type: none"> • Older adults have experienced greater isolation due to limitations in physical abilities and community mobility (Polgar, 2011). • One research article demonstrated that when individuals learn about their community mobility options and better understand the resources available, they are more confident in using them and more likely to access the community in the future (Mulry et al., 2017).
Technology use	<ul style="list-style-type: none"> • Group interventions involving technology increased social contacts and provided social connections while maintaining a safe distance (Ibrahim et al., 2021). • Initiating video calls with family members was an effective method to promote social participation during the pandemic (Suttie, 2021). • The literature identified that training older adults on technology use can increase their confidence and decrease isolation by allowing them opportunities to connect with others and the world around them (Chen & Schultz, 2016; Fields et al., 2020).

- **Performance Range:** The performance range is the occupations or abilities that someone is able to do based on their person, context, and task factors (Dunn, 1994).

Setting: This education session is intended to be completed by an occupational therapist (OT) or certified occupational therapy assistant (COTA). It is intended that these occupational therapy professionals are working at an assisted living facility before facilitating the program *Increasing Occupational Engagement in Older Adults during a Pandemic*.

Group membership size: This education session can be reviewed individually, and the discussion afterward is to be done in groups of two or more.

Population Definition: The population intended for this education session is occupational therapists (OT) or certified occupational therapy assistants (COTA) hired by the desired facility. This population will be referred to as the facilitator for the remainder of the education session.

Client Characteristics: Any educated OT or COTA who has experience working with older adults.

OT’s Role: Education

Education Session Goals: By the end of the education session

- Facilitators will understand the mental and physical health consequences of occupational deprivation in older adults during the pandemic.
- Facilitators will increase their understanding of the impact of leisure and social participation on the healthy aging of older adults.
- Facilitators will understand how to conduct the program: *Increasing Occupational Engagement in Older Adults during a Pandemic*.

EHP Intervention Approach Used

Establish/Restore:	<ul style="list-style-type: none"> • This education session is intended to establish or restore knowledge about the mental and physical health consequences of isolation on older adults. • This education session is intended to establish or restore an understanding of the health benefits of leisure and social participation for older adults. • This education session is intended to establish an understanding of how the program, <i>Increasing Occupational Engagement in Older Adults during a Pandemic</i>, is meant to be facilitated and what adaptations may need to be made for different locations and populations.
---------------------------	--

Occupational Therapy Practice Framework Domain areas to be addressed:

- Occupations: This education session will help OTs and COTAs learn how to properly facilitate programming to promote leisure, social participation, and meaningful activity to reduce isolation during the pandemic (AOTA, 2020).
- Client Factors: This education session will help OTs and COTAs maximize their understanding of clients' mental, global mental, sensory, and neuromusculoskeletal functions related to participation and coping with the pandemic (AOTA, 2020).
- Performance Patterns: This education session will help OTs and COTAs understand how to adapt habits, routines and develop meaningful rituals to maximize personal roles (AOTA, 2020).
- Contexts & Environments: This education session will help OTs and COTAs optimize the facilitation of the program in physical, social, cultural, and temporal contexts (AOTA, 2020).

References

- Aldwin, C. M., & Yancura, L. A. (2004). Coping. In C. Spielberger (Ed.) *Encyclopedia of Applied Psychology*, (1st ed., pp. 507-510). Elsevier Academic Press.
- American Occupational Therapy Association. (2020). Occupational therapy practice framework: Domain and process (4th ed.). *American Journal of Occupational Therapy*, 74 (Suppl. 2), 7412410010. <https://doi.org/10.5014/ajot.2020.74S2001>
- Banerjee, D., & Rai, M. (2020). Social isolation in Covid-19: The impact of loneliness. *International Journal of Social Psychiatry*, 66(6), 525-527. <https://doi.org/10.1177/0020764020922269>
- Brenner, B. (2020). *The mental health benefits of having a daily routine*. Therapy Group of NYC. <https://nyctherapy.com/therapists-nyc-blog/the-mental-health-benefits-of-having-a-daily-routine/>
- Carr, D., & Pudrovska, T. (2007). Mid-life and later-life crises. In J. E. Birren (Ed.) *Encyclopedia of Gerontology*, (2nd ed., pp. 175-185). Academic Press.
- Centers for Disease Control and Prevention. (2021). *COVID-19 risks and vaccine information for older adults*. <https://www.cdc.gov/aging/covid19/covid19-older-adults.html>
- Chen, S. W., & Chippendale, T. (2018). The issue is- Leisure as an end, not just as a means, in occupational therapy intervention. *American Journal of Occupational Therapy*, 72, 7204347010. <https://doi.org/10.5014/ajot.2018.028316>
- Chen, Y. R., & Schultz, P. (2016). The effect of information communication technology interventions on reducing social isolation in the elderly: A systematic review. In G. Evenbach, N. Diviani, & J. Clemens. (Eds.) *Journal of Medical Internet Research*, 18(1), e18. <https://doi.org/10.2196/jmir.4596>
- Chilvers, R., Corr, S., & Singlehurst, H. (2010). Investigation into the occupational lives of healthy older people through their use of time. *Australian Occupational Therapy Journal*, 57, 24-33. <https://doi.org/10.1111/j.1440-1630.2009.00845.x>
- Chiu, Y. C., Huang, C. Y., Kolanowski, A. M., Huang, H. L., Shyu, Y., Lee, S. H., Lin, C. R., & Hsu, W. C. (2013). The effects of participation in leisure activities on neuropsychiatric symptoms of persons with cognitive impairment: A cross-sectional study. *International Journal of Nursing Studies*, 50(10), 1314-1325. <https://doi.org/10.1016/j.ijnurstu.2013.01.002>
- Cole, M. B. (2018). *Group leadership: Cole's seven steps*. In M. B. Cole (Ed.) *Group Dynamics in Occupational Therapy*. SLACK
- Dunn, W., Brown, C., & McGuigan, A. (1994). The ecology of human performance: A framework for considering the effect of context. *American Journal of Occupational Therapy*, 48, 595-607. <https://doi.org/10.5014/ajot.48.7.595>
- Fallahpour, M., Borell, L., Luborsky, M., & Nygard, L. (2016). Leisure activity participation in preventing later-life cognitive decline: A systematic review. *Scandinavian Journal of Occupational Therapy*, 23(3), 162-197. <http://doi.org/10.3109/11038128.2015.1102320>
- Fields, J., Cembali, A. G., Michalec, C., Uchida, D., Griffiths, K., Cardes, H., Cuellar, J., Chodos, A. H., & Lyles, C. R. (2020). In-home technology training among socially isolated older adults: Findings from the tech allies program. *Journal of Applied Gerontology*, 40(5), 489-499. <https://doi-org.ezproxylr.med.und.edu/10.1177/0733464820910028>
- Fidanza, N., Bondoc, S., & Kotwal, J. (2020). Short, spontaneous and superficial: An exploration

- of social participation among older adults in an assisted-living facility (ALF). *American Journal of Occupational Therapy*, 74(Suppl. 1). <https://doi.org/10.5014/ajot.2020.74S1-PO5606>
- Finlay, J. M., Kler, J. S., O'Shea, B. Q., Eastman, M. R., Vinson, Y. R., & Kobayashi, L. C. (2021). Coping during the COVID-19 pandemic: A qualitative study of older adults across the United States. *Frontiers in Public Health*, 9, 1-12. <https://doi.org/10.3389/fpubh.2021.643807>
- Ginsberg, L. (2020). *Why routines are important for mental health*. Hackensack Meridian Health. https://www.hackensackmeridianhealth.org/en/HealthU/2020/06/02/why-routines-are-important-for-mental-health#.YhZT_ZPMLeo
- Ibrahim, A. F., Tan, M. P., Teoh, G. K., Muda, S. M., & Chong, M. C. (2021). Health benefits of social participation interventions among community dwelling older persons: A review article. *Experimental Aging Research*, 1-27. <https://doi.org/10.1080/0361073X.2021.1939563>
- Jackson, J., Carlson, M., Mandel, D., Zemke, R., & Clark, F. (1998). Occupation in lifestyle redesign: The well elderly study occupational therapy program. *American Journal of Occupational Therapy*, 52(5), 326-336. <https://doi.org/10.5014/ajot.52.5.326>
- Kotwal, A., Holt-Lunstad, J., Newmark, R., Cenzer, I., Smith, A., Covinsky, K., Escueta D., Lee, J., & Perissinotto, C. (2020). Social isolation and loneliness among the San Francisco bay area older adults during the COVID-19 shelter-in-place orders. *Journal of the American Geriatrics Society*, 69(1), 20-29. <https://doi-org.ezproxylr.med.und.edu/10.1111/jgs.16865>
- Labadi, B., Arato, N., Budai, T., Inhof, O., Stecina, D. T., Sik, A., & Zsido, A. N. (2021). Psychological well-being and coping strategies of elderly people during the COVID-19 pandemic in Hungary. *Aging & Mental Health*, 1-18. <https://doi.org/10.1080/13607863.2021.1902469>
- Levasseur, M., Filiatrault, J., Lariviere, N., Trepanier, J., Levesque, M. H., Beaudry, M., Parisien, M., Provencher, V., Couturier, Y., Champoux, N., Corriveau, H., Carbonneau, H., & Sirois, F. (2019). Influence of Lifestyle Redesign® on health, social participation, leisure and mobility of older French-Canadians. *American Journal of Occupational Therapy*, 73, 7305205030. <https://doi.org/10.5014/ajot.2019.031732>
- Minahan, J., Falzarano, F., Yazdani, N., & Siedlecki, K. L. (2020). The COVID-19 pandemic and psychosocial outcomes across age through the stress and coping framework. *The Gerontologist*, 61(2), 228-239. <https://doi.org/10.1093/geront/gnaa205>
- Montgomery, A., Slocum, S., & Stanik, C. (2020). *Experiences of nursing home residents during the pandemic*. Altarum. https://altarum.org/sites/default/files/uploaded-publication-files/Nursing-Home-Resident-Survey_Altarum-Special-Report_FINAL.pdf
- Mulry, C. M., Papetti, C., De Martinis, J., & Ravinsky, M. (2017). Facilitating wellness in urban-dwelling, low-income older adults through community mobility: A mixed-methods study. *American Journal of Occupational Therapy*, 71(4), 1-7. <https://doi.org/10.5014/ajot.2017.025494>
- Nyman, S. R., & Szymczynska, P. (2016). Meaningful activities for improving the wellbeing of people with dementia: Beyond mere pleasure to meeting fundamental psychological needs. *Perspectives in Public Health*, 136(2), 99-107. <https://doi.org/10.1177/1757913915626193>
- O'Sullivan, G. (2005). Protocols for leisure activity programming. *New Zealand Journal of*

- Occupational Therapy*, 52(1), 17-25.
- Paggi, M. E., Jopp, D., & Hertzog, C. (2016). The importance of leisure activities in the relationship between physical health and well-being in a life span sample. *Gerontology*, 62(4), 450-458. <https://doi.org/10.1159/000444415>
- Polgar, J. (2011). Enabling community mobility is an opportunity to practice social occupational therapy. *Canadian Journal of Occupational Therapy*, 78, 67-71. <https://doi.org/10.2182/cjot.2011.78.2.1>
- Sala, G., Jopp, D., Gobet, F., Ogawa, M., Ishioka, Y., Masui, Y., Inagaki, H., Nakagawa, T., Yasumoto, S., Ishizaki, T., Arai, Y., Ikebe, K., Kamide, K., & Gondo, Y. (2019). The impact of leisure activities on older adults' cognitive function, physical function and mental health. *PLOS One*, 14(11), e0225006. <https://doi.org/10.1371/journal.pone.0225006>
- Sepulveda-Loyola, W., Rodriguez-Sanchez, I., Perez-Rodriguez, P., Ganz, F., Torralba, R., Oliveira, D. V., & Rodriguez-Manas, L. (2020). Impact of social isolation due to COVID-19 on health in older people: Mental and physical effects and recommendations. *Journal of Nutrition, Health & Aging*, 24(9), 938-947. <https://doi.org/10.1007/s12603-020-1469-2>
- Simard, J., & Volicer, L. (2020). Loneliness and isolation in long-term care and the COVID-19 pandemic. *Journal of American Medical Directors Association*, 21(7), 966-967. <https://doi.org/10.1016/j.jamda.2020.05.006>
- Stickley, A., & Koyanagi, A. (2016). Loneliness, common mental health disorders and suicidal behavior: Findings from a general population survey. *Journal of Affective Disorders*, 197, 81-87. <http://doi.org/10.1016/j.jad.2016.02.054>
- Suttie, J. (2021). *How older people can cope with isolation*. Greater Good Magazine. https://greatergood.berkeley.edu/article/item/how_older_people_can_cope_with_isolation
- Torres, E. A. (Presenter). (2020). *OT's mental health response to the COVID pandemic: Older adults*. [Video Presentation]. <https://www.occupationaltherapy.com/otceus/course/occupational-therapy-s-mental-health-4940>
- University of Southern California. (n.d.). *USC chan division of occupational science and occupational therapy practice: About Lifestyle Redesign®*. <https://chan.usc.edu/patient-care/faculty-practice/about>
- Webber, M., & Fendt-Newlin, M. (2017). A review of social participation interventions for people with mental health problems. *Social Psychiatry and Psychiatric Epidemiology*, 52, 369-380. <https://doi.org/10.1007/s00127-017-1372-2>

Education Session Description

This education session is intended to educate facilitators of the program: *Increasing Occupational Engagement in Older Adults during a Pandemic*.

This education session is a presentation about the components of the program and the physical and mental health benefits of leisure and social participation. In addition, it will also outline how to conduct the established interventions.

After this education session, there is an unfacilitated group discussion among facilitators which is included in the presentation. This discussion will allow facilitators to discuss what they learned and how they can apply this information when facilitating the program.

Next, facilitators are expected to review the protocol to familiarize themselves with the structure and interventions provided in each section.

This education session will use Cole's seven steps to both provide insight into the model used to structure the program but also to promote a cohesive group dynamic and apply information for proper programming facilitation (Cole, 2018).

At the conclusion of this education session, participants should complete the post-education session evaluation session survey. This survey will evaluate the effectiveness of this session on improving knowledge on the topic and understanding of how to conduct the program *Increasing Occupational Engagement in Older Adults during a Pandemic*. This evaluation measure is located in Appendix F.

Time: 30 minutes

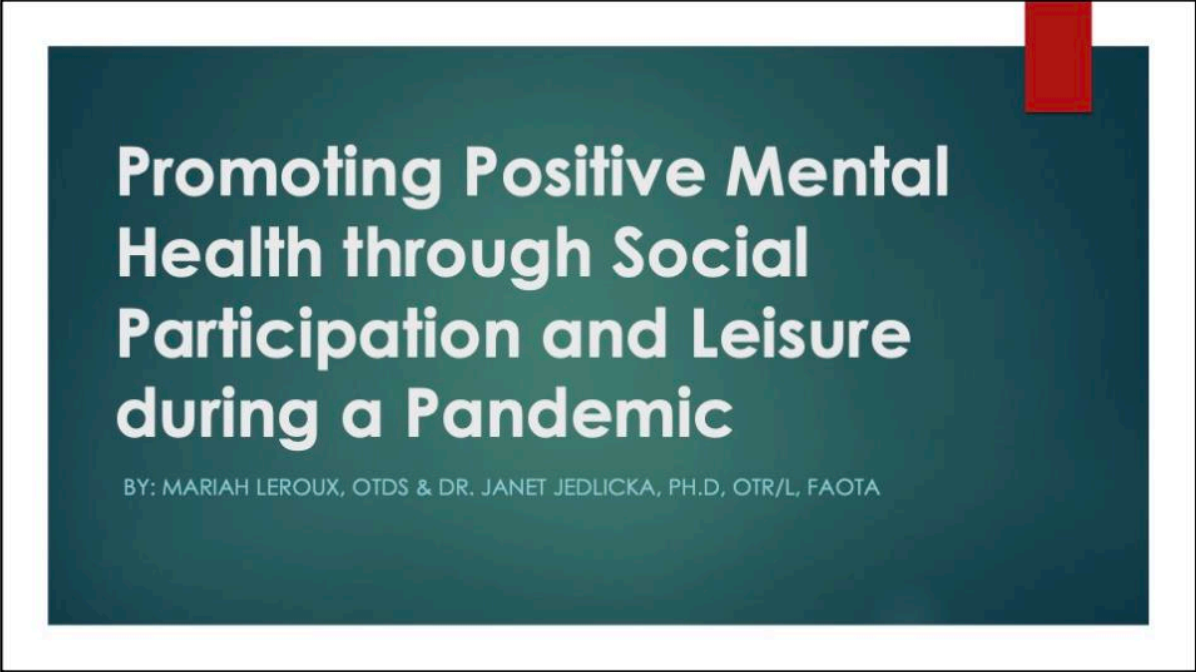
Supplies

- Printed copy of presentation and notes.
- Group protocol: *Increasing Occupational Engagement in Older Adults during a Pandemic*

Reference

Cole, M. B. (2018). *Group leadership: Cole's seven steps*. In M. B. Cole (Ed.) *Group Dynamics in Occupational Therapy*. SLACK

Education Session Presentation



Promoting Positive Mental Health through Social Participation and Leisure during a Pandemic

BY: MARIAH LEROUX, OTDS & DR. JANET JEDLICKA, PH.D., OTR/L, FAOTA

Welcome to the education session titled: *Promoting Positive Mental Health through Social Participation and Leisure during a Pandemic*. This education session is intended to give facilitators background information on the conceptualization of the programming, as well as the literature supporting it to increase the performance range of older adults experiencing isolation as a result of the pandemic.

This education session will follow Cole's seven steps similarly to the program: *Increasing Occupational Engagement in Older Adults during a Pandemic* to promote greater understanding and carryover for facilitation.

This section is part of the introduction step within Cole's seven steps (Cole, 2018). The introduction step entails introductions of group members, facilitators, and group content (Cole, 2018). This step also outlines the session so that participants receive an overview of the content in advance (Cole, 2018).

Process

- ▶ Overview of components of the program and the physical and mental health benefits of leisure and social participation.
- ▶ Facilitators should individually familiarize themselves with the group protocol and associated interventions.
- ▶ Facilitators gather for an unfacilitated group discussion to share ideas about what they learned and how they can apply this information when facilitating the program.

This education session is a presentation about the components of the program as well as the physical and mental health benefits of leisure and social participation.

This slide outlines how the education session is set up to facilitate understanding of the program: *Increasing Occupational Engagement in Older Adults during a Pandemic*. This slide is also a continuation of step 1 (introduction) within the outline of Cole's seven steps (Cole, 2018).

Education Session Goals: By the end of the education session

- ▶ Facilitators will understand the mental and physical health consequences of occupational deprivation present in older adults during the pandemic.
- ▶ Facilitators will increase their understanding of the impact of leisure and social participation on the healthy aging of older adults.
- ▶ Facilitators will understand how to conduct the program: *Increasing Occupational Engagement in Older Adults during a Pandemic*.

This slide is a continuation of step 1 (introduction) of Cole's seven steps to review the goals or objectives to be met in the education session (Cole, 2018).

These are the goals to be accomplished by facilitators (OT's/ COTA's) by the end of this education session, review the goals before moving on.

Increasing Occupational Engagement in Older Adults during a Pandemic.

- ▶ Increase performance range of older adults
- ▶ Reduce isolation in older adults
- ▶ Reduce occupational deprivation in older adults
- ▶ Promote meaningful engagement for older adults

This slide is also included in the first step (introduction) within Cole's seven steps (Cole, 2018). These are the principles that guided the creation of this education session and program.

Ecology of Human Performance (EHP)

- ▶ Person
- ▶ Context
- ▶ Task
- ▶ Performance Range

(Dunn, 1994)

This section begins step two (activity) in Cole's seven steps group format and takes the form of an education session (Cole, 2018). The activity step involves an activity addressing the topic of the group session considering the timing, therapeutic goals, physical and mental capacity of members, knowledge, and skills of the facilitator, and adaptation of the activity to the group of learners (Cole, 2018).

This project was guided by the Ecology of Human Performance (EHP) model (Dunn, 1994). EHP terminology was consistently used throughout the creation of this program and education session.

This model has different components to view each problem/client.

- Person
- Context
- Task

The outcome of these components is the performance range. The performance range is the outcome of the person, context and task abilities (Dunn, 1994).

Person

- ▶ **Psychosocial:** Increased stressors and adverse mental health symptoms.
- ▶ **Cognitive:** Extreme isolation negatively effects cognition and can lead to the progression of dementia.
- ▶ **Sensorimotor:** Social distancing and minimal involvement in activity reduces ADL performance.

(Dunn, 1994)

This program was guided by EHP and the literature is described in this fashion.

Person

The person is outlined by their psychosocial, sensorimotor, and cognitive factors that influence the involvement of occupations (Dunn, 1994).

Psychosocial: The COVID-19 pandemic caused an increase in stressors for all people, especially older adults, due to their greater risk of complications from the virus (CDC, 2021). Some of these pandemic-related stressors included: anxiety about the virus itself, the isolation associated with social distancing protocols, limited social interactions, and their future in isolation (Banerjee & Rai, 2020; Torres, 2020). These pandemic-related stressors exacerbated adverse mental health symptoms, causing an increase in anxiety, depression, and loneliness among older adults (Banerjee & Rai, 2020; Kotwal et al., 2020; Minahan et al., 2020; Stickley & Koyanagi, 2016; Torres, 2020). In addition, COVID-19 caused difficulties with social interactions due to social distancing measures, contributing to these negative psychosocial implications.

Cognitive: This increase in mental health symptomology and extreme isolation has a negative effect on cognition, exacerbating cognitive decline associated with age by up to 50% (Montgomery et al., 2020).

Sensorimotor: Due to COVID-19 social distancing and lockdown precautions, older adults were less socially and recreationally involved, thus limiting their movement. This limitation in context and activity contributed to a more sedentary lifestyle causing a reduction in their ability to complete activities of daily living (ADLs) (Kotwal et al., 2020; Sepulveda-Loyola et al., 2020). In addition, this reduction in ADL participation caused a decrease in overall abilities causing older adults to move to higher levels of care.

Context

- ▶ **Social:** Isolation from loved ones due to pandemic & facility social distancing protocols.
- ▶ **Physical:** Limitations in community mobility because of understanding and physical abilities.
- ▶ **Temporal:** Routine structure and the time of day activities were held influenced older adults' participation.
- ▶ **Cultural:** Religious services and facility culture.

(Dunn, 1994)

This program was guided by EHP and the literature is described in this fashion.

Context

The context is the outside, environmental factors present influencing the person (Dunn, 1994).

Social: Older adults have been more isolated than previously because many facilities put in place social distancing measures restricting visitors. This caused older adults to be even more isolated without regular visits from loved ones. Activity cancellations also impacted this social context within the facility. Some older adults transitioned to technology use to stay in touch with loved ones throughout the pandemic, but others struggled to make this transition (Kotwal et al., 2020).

Physical: Pandemic-related protocols relating to quarantine measures were in place to restrict the spread of the virus, limiting older adult's physical context. Some facilities had protocols stating that residents had to isolate if they left the building. Additionally, older adults, in general, experience greater isolation due to physical and community mobility limitations, restricting their access to different contexts and activities (Polgar, 2011).

Temporal: The temporal context is important to consider due to the nature of older

adults in a low-income assisted living facility. This relates to their typical routine involving wake times and activities scheduled throughout the day. Therefore, the time of day that activities are held can greatly impact how many people participate.

Cultural: Cultural context has been impacted by the COVID-19 pandemic because religious services were closed for a period of time, restricting religious participation. Another factor to consider is the facility's culture and interactions with peers. When residents are isolated in their rooms, the culture of living at the facility changes, minimizing participation and connection with others.

Task

- ▶ Coping Strategies
- ▶ Leisure Activity
- ▶ Social Participation
- ▶ Routine Modification
- ▶ Community Mobility
- ▶ Technology Use

(Dunn, 1994)

This program was guided by EHP and the literature is described in this fashion.

Task

The task is the occupations completed by an individual (Dunn, 1994).

Coping Strategies: One study noted that 20% of nursing home residents did not use coping strategies to cope with the pandemic and associated stressors (Finlay et al., 2021). On the other hand, this increase in adverse mental health symptomology caused an increase in avoidant coping strategies (Minahan et al., 2020; NIA, 2021). Therefore, learning about healthy coping strategies in problem and emotion-focused situations will help combat pandemic-related and other life stressors that older adults experience (Aldwin & Yancura, 2004; Carr & Pudrovskaya, 2007; Finlay et al., 2021; Labadi et al., 2021).

Leisure Activity: Leisure is an area of occupation identified by the Occupational Therapy Practice Framework that has been shown to reduce overall life stressors by allowing individuals to be engaged in meaningful tasks (AOTA, 2020; Chen & Chippendale, 2018). Leisure has even been shown to help overall healthy aging while increasing one's quality of life (Chilvers et al., 2010; Jackson et al., 1998; Paggi et al., 2016; Sala et al., 2019). While it has already been identified that there was an

increase in mental health symptomology resulting from the COVID-19 pandemic, leisure has been identified as an intervention to reduce feelings of anxiety and depression (Chen & Chippendale, 2018; Paggi et al., 2016). It was also identified that the COVID-19 pandemic left older adults isolated physically and socially. However, leisure was identified as an intervention to also reduce isolation (Nyman & Szymczynska, 2016; Sala et al., 2019). From a cognitive perspective, leisure participation can reduce cognitive decline associated with age, similarly to social participation, even reversing this symptomology (Chen & Chippendale, 2018; Chiu et al., 2013; Fallahpour et al., 2016; Nyman & Szymczynska, 2016).

Social Participation: Social participation is another area of occupation identified by the Occupational Therapy Practice Framework that has greatly been impacted by the COVID-19 pandemic (AOTA, 2020). Social participation can take place in person or via a virtual platform. Some older adults adapted to using virtual platforms to stay connected with loved ones, while others had greater difficulty with this adjustment due to various factors (Kotwal et al., 2020). Volunteering was identified as an effective social participation intervention by various sources due to interactions with others who share similar interests (Chilvers et al., 2010; Paggi et al., 2016; Webber & Fendt-Newlin, 2017). However, social participation interventions are most effective when the individual possesses the individual volition to interact with others (Ibrahim et al., 2021).

Routine Modification: Lifestyle Redesign® is an occupational therapy intervention that helps older adults' structure healthy lifestyles for health promotion (University of Southern California, n.d.). Healthy routines are important, especially for positive mental health, allowing predictability, consistency, and structure from day to day, eliminating anxiety (Brenner, 2020; Ginsberg, 2020). Lifestyle Redesign® was also identified as an effective intervention to increase interest and involvement in leisure and social participation activities (Levasseur et al., 2019). Therefore, routine is an important concept for older adults in an assisted living facility who don't have structured routines. These routines can help them establish consistent positive mental health, leisure and social participation practices.

Community Mobility: Older adults have experienced greater isolation than young adults due to their higher risk of complications from contracting the virus as well as physical mobility limitations (CDC, 2021; Polgar, 2011). One study identified that educating people on using community mobility options increased their confidence and use of community mobility (Mulry et al., 2017). In addition, this intervention increased engagement by altering the contexts (Mulry et al., 2017). Community mobility can be an obstacle for social participation and leisure engagement; however, educating older adults on proper use can increase their performance range and allow them to participate in meaningful occupations.

Technology Use: Technology was one way that some older adults stayed connected to loved ones amidst the COVID-19 pandemic; however, not everyone could make this adaptation (Kotwal et al., 2020). Technological literacy is a common barrier to older

adults using technology to bridge the gap in participation throughout the pandemic. Research has noted that educating older adults on using technological devices increased their confidence, use, and feelings of connection between loved ones and the world (Choi et al., 2022; Fields et al., 2020). Specifically, educating older adults on how to initiate and join FaceTime calls was beneficial to increase social connections (Suttie, 2021). Technology is a way to bridge the gap in social connection among older adults throughout the pandemic while maintaining distance. This is done through education and practice with technology use to interact with others.

Program Setup

- ▶ Group or 1-on-1 for sessions
- ▶ Greater carryover and generalization in group format (Ibrahim et al., 2021; Webber & Fendt-Newlin, 2017).
- ▶ Cole's 7 steps (Cole, 2018)
 - ▶ Introduction
 - ▶ Activity
 - ▶ Sharing
 - ▶ Processing
 - ▶ Generalizing
 - ▶ Application
 - ▶ Summary

This program is set up to conduct all sessions in a group format except session 5-3 (section 5, session 3). Group formats were identified to promote overall generalization and group comprehension for key interventions like social participation and leisure (Ibrahim et al., 2021; Webber & Fendt-Newlin, 2017). These groups can be anywhere from three to eight people for optimal size. Many sessions would benefit from large groups to optimize open discussion and relatedness among group members for social connection purposes. These sessions can be graded for different cognitive abilities and adapted to fit the one-on-one needs of participants if necessary. All group sessions follow Cole's seven steps to promote integration of concepts and promote generalization and carry over into daily life (Cole, 2018).

This is a review of the seven steps in Cole's guide to occupational therapy group interventions:

- **Introduction:** The introduction entails introductions of group members, facilitators, and group content (Cole, 2018). This step also outlines the session so that participants receive an overview of the content in advance (Cole, 2018).
- **Activity:** The activity step involves an activity addressing the topic of the group session, considering the timing, therapeutic goals, physical and mental capacity of members, knowledge, and skills of the facilitator, and adaptation of the activity to

the group of learners (Cole, 2018).

- Sharing: This step involves group members sharing their experiences throughout the activity with the group (Cole, 2018). This step is a time for the participants to reflect on their experience, and what it meant to them (Cole, 2018).
- Processing: This step is a time for participants to process the activity content and discuss unexpressed emotions and understand the significance of the content presented (Cole, 2018).
- Generalizing: This step is a time when the facilitator responds to group themes and generalizes them to daily life (Cole, 2018).
- Application: This step involves a discussion about the understanding and significance of the content relating to daily life (Cole, 2018).
- Summary: This section summarizes the most important points of the group session to emphasize understanding while reviewing group goals or objectives to conclude the session (Cole, 2018).

Program Outline- 22 Total Sessions

- ▶ **Introduction Session 1:** Introducing Topic and discussing the benefits of leisure and social participation.
- ▶ **Section 1:** Mental Health during a Pandemic
- ▶ **Section 2:** Leisure Exploration
- ▶ **Section 3:** Social Participation for Older Adults in an Assisted Living Facility
- ▶ **Section 4:** Routine Modification
- ▶ **Section 5:** Community Mobility for Leisure and Social Participation
- ▶ **Section 6:** Technology for Leisure and Social Participation

This program was created into six sections entailing different personal, contextual, and task factors associated with isolation during the pandemic. There are a different number of sessions within each section.

- The introduction session is a brief introduction to the importance of leisure and social participation for positive mental and physical health in older adults. This session stands alone and does not correspond to other program sections.
- Mental health was an integrated section due to the significant amount of literature describing the exacerbated mental health symptoms during the COVID-19 pandemic. It was especially important to focus on mental health because it is heavily related to leisure and social participation and can also be impacted by these tasks.
- Leisure exploration was an intervention to allow older adults to experience different leisure activities and find hobbies that they can do independently for leisure and stress relief.
- Social participation was important to include so that older adults can properly make social connections and voice their needs to staff and loved ones throughout the pandemic. This is also tied to the section on technology by integrating social participation within technology platforms to maintain social connections.
- Routine modification was an included section due to research on Lifestyle

Redesign® and the benefits of using a routine to structure one's day to promote positive mental health strategies and increased time spent in leisure and social participation occupations.

- Community mobility was a topic addressed due to the limited contexts older adults faced during the pandemic and limitations with community mobility impacting feelings of isolation.
- Technology was a key feature of this program to promote older adults' connectedness to the outside world while also allowing them to maintain hobbies and connections with loved ones during the pandemic.

Section 1: Mental Health during a Pandemic

- ▶ Session 1: Identifying Stressors
- ▶ Session 2: Healthy Coping Strategies
- ▶ Session 3: Exploration of Coping Strategies
- ▶ Session 4: Building a Healthy Coping Strategies Toolbox

This section outlines different skills to identify and manage stressors using healthy coping strategies.

The literature identified that older adults had experienced a significant increase in anxiety, depression, loneliness, and fearfulness due to the pandemic and related stressors (Kotwal et al., 2020; Minahan et al., 2020). This chronic stress can also contribute to these negative psychosocial implications.

Therefore, this section addresses and assists older adults in identifying healthy coping strategies to develop a *Healthy Coping Strategies Toolbox* to combat pandemic-related and other life stressors throughout the pandemic.

Section 2: Leisure Exploration

- ▶ Session 1: Creative Leisure
- ▶ Session 2: Social Leisure
- ▶ Session 3: Physical Leisure
- ▶ Session 4: Cognitive Leisure
- ▶ Session 5: Relaxation/ Spiritual Leisure

This section incorporates leisure exploration in five different realms of leisure, including: creative, social, physical, cognitive, and relaxation/spiritual. Leisure was incorporated into this program because of the significant amount of occupational deprivation present in older adults.

Leisure was identified as an evidence-based strategy to increase life satisfaction and mental health outcomes while reducing life stressors (Chen & Chippendale, 2018; Paggi et al., 2016). This leisure engagement helps older adults establish new or restore old leisure interests to meaningfully occupy their time and provide coping strategies to use in the future.

The *Healthy Coping Strategies Toolbox* from section one has a category dedicated to leisure, so participants can add leisure activities that resonate with them from section two into their Toolbox.

This section can be facilitated in any order, but this is the only section structured this way.

Section 3: Social Participation for Older Adults in an Assisted Living Facility

- ▶ Session 1: Effective Communication
- ▶ Session 2: Making Meaningful Connections

This section provides education and practice using social skills to establish and maintain meaningful connections. This is important for older adults amidst the COVID-19 pandemic to ensure that their needs are being met within the facility. These skills are also important so that older adults can utilize meaningful connections in their lives for social support through difficult times, such as the pandemic.

The literature noted that older adults who did not make meaningful connections upon moving into an assisted living facility felt more isolated (Fidanza et al., 2020). These social connections provide social and emotional support for older adults during difficult times such as the pandemic (Lloyd & Deane, 2019).

This section educates older adults on effective communication tactics as well as the different communication styles so that they can communicate effectively with staff members on-site. This section also allows older adults to identify and discuss meaningful connections in their lives, how to utilize them better and how to make new meaningful connections in life. This session contributes to positive social participation practices and allows older adults to maintain meaningful connections for emotional support.

Section 4: Routine Modification

- ▶ Session 1: Routine Analysis

- ▶ Session 2: Routine Modification

OR

- ▶ Session 3 (optional): Routine Modification for Depression

This section focuses on routine by analyzing and making modifications to create healthy lifestyles, promoting engagement and positive mental health.

It has been identified that routines were greatly impacted by the COVID-19 pandemic, leaving individuals without routine or consistency from day to day (Torres, 2020). Routines are important for positive mental and physical health because they promote a sense of consistency and predictability, thus, reducing anxiety throughout the day (Brenner, 2020; Ginsberg, 2020).

This program section intends to assist older adults in increasing positive mental health practices and time spent in leisure and social participation occupations during the day.

It is important to note that only one routine modification session is facilitated due to repetition. The facilitator will make this decision based on the population of participants at the facility. The third optional session (*Routine Modification for Depression*) places more emphasis on positive mental health practices related to depression than the previous session, along with increased time spent in leisure and social participation occupations.

Section 5: Community Mobility for Leisure and Social Participation

- ▶ Session 1: What is Community Mobility?
- ▶ Session 2: Leisure & Social Participation in the Community
- ▶ Session 3: Community Outing Utilizing Community Mobility

Older adults have been more isolated than young adults, and this issue has been compounded by the COVID-19 pandemic (Simard & Volicer, 2020). Older adults have felt isolated due to a decrease in social interactions, which are also limited by their physical and community mobility limitations, thus, impacting their performance range (Polgar, 2011). One research article noted that educating and training older adults to use community mobility options increased their confidence and use of community mobility in the future (Mulry et al., 2017). Therefore, the topic of community mobility is important to include in this program to promote participation in leisure and social participation occupations in different contexts.

The first two sessions are intended to be facilitated in group formats. However, session three (*Community Outing Utilizing Community Mobility*) is intended to be facilitated in a one-on-one session with participants due to the barriers of community mobility for a large group. This individual session also allows the session to be more individualized to the community mobility option and destination of their choice to promote individualized intervention.

This section was created based on the transportation, leisure, and social participation opportunities within the Minneapolis, Minnesota community and will need to be adapted or modified to fit different contexts.

Section 6: Technology for Leisure and Social Participation

- ▶ Session 1: Introduction to Technology
- ▶ Session 2: Technology for Social Participation
- ▶ Session 3: Technology for Leisure
- ▶ Session 4 (optional): Amazon Alexa for Leisure

Technology has become a more prominent feature in everyday life due to the COVID-19 pandemic. This section is intended to increase older adults' performance range in technology usage so that they can access loved ones and desired leisure activities via technology.

The literature noted that training and education on technology use for older adults increased their confidence and social connection with loved ones and the world, thus reducing feelings of isolation and loneliness (Choi et al., 2022; Chopik, 2016; Fields et al., 2021).

This section starts with a basic activity to understand the different features of different technological devices. It then moves into education and training related to initiating video calls on various platforms and using technology for leisure purposes like shopping. This education will also help older adults stay more connected to loved ones and the world around them by altering the context to reduce the isolation present in their current context.



Review Group Protocol at this time

Spend a few minutes reviewing the group protocol: *Increasing Occupational Engagement in Older Adults during a Pandemic* for further understanding and conceptualization prior to discussion with other facilitators.

Sharing

- ▶ “What was your previous experience or knowledge about the mental and physical health impact of COVID-19 lockdowns on older adults?”
 - ▶ “How did this education session expand your knowledge?”
- ▶ “What was your previous understanding of the importance of leisure and social participation?”
 - ▶ “How does this compare to the information presented in the education session?”

Sharing is the third step within Cole’s seven steps (Cole, 2018). This step involves group members sharing their experiences throughout the activity with the group (Cole, 2018). This is a time for the participants to reflect on the experience, and what it meant to them (Cole, 2018).

This is meant to be discussed among two or more facilitators who have completed the previous steps (introduction and activity) of this educational session. The remaining steps are intended for facilitators to practice how a discussion goes and to further enhance understanding of literature and program content.

Processing

- ▶ “How has this education session informed your facilitation of this program?”
- ▶ “How does this program compare to your experiences with implementing programming?”

Processing is the fourth step within Cole’s seven steps (Cole, 2018). Processing is the time for participants to process the activity content and relate it to unexpressed emotions to understand the significance of the content presented (Cole, 2018).

This is meant to be discussed among two or more facilitators who have completed the previous steps (introduction, activity, and sharing) of this educational session. The remaining steps are intended for facilitators to practice how a discussion goes and to further enhance their understanding of literature and program content.

Generalizing

- ▶ “How can you apply this information into your care of older adults?”
- ▶ “What other professions could benefit from this information?”

Generalizing is the fifth step within Cole’s seven steps (Cole, 2018). Generalizing is the time when the facilitator responds to group themes and generalizes them to daily life (Cole, 2018).

This is meant to be discussed among two or more facilitators who have completed the previous steps (introduction, activity, sharing, and processing) of this educational session. The remaining steps are intended for facilitators to practice how a discussion goes and to further enhance their understanding of literature and program content.

Application

- ▶ "What were the biggest takeaways from this education session?"
- ▶ Discuss any areas of discrepancy in understanding how to facilitate this program.

Application is the sixth step within Cole's seven steps (Cole, 2018). This step involves a discussion about understanding the significance of the content as it relates to daily life (Cole, 2018).

This is meant to be discussed among two or more facilitators who have completed the previous steps (introduction, activity, sharing, processing and generalizing) of this educational session. The remaining steps are intended for facilitators to practice how a discussion goes and to further enhance their understanding of literature and program content.

Summary

- ▶ Mental and physical health concerns present in older adults due to the COVID-19 pandemic.
- ▶ Health benefits associated with leisure and social participation.
- ▶ Altering contexts
- ▶ Review Education Session Goals

Summary is the seventh and final step within Cole's seven steps (Cole, 2018). This step summarizes the most important features of the group session to emphasize understanding while reviewing group goals or objectives to conclude the session (Cole, 2018).

This step is meant to be discussed among two or more facilitators who have completed the previous steps (introduction, activity, sharing, processing, generalizing and application) of this educational session.

In summary, older adults have experienced exacerbated symptoms of mental illness including depression, anxiety, loneliness, and fear as a result of the COVID-19 pandemic. Research even noted that many individuals do not use coping strategies to manage these unprecedented times. Therefore, interventions were established to promote healthy coping skills so that they can be utilized during difficult situations.

Leisure and social participation are occupational therapy interventions that are important for healthy aging. Leisure and social participation increase overall life satisfaction and provide meaningful activity that can double as a stress reliever. These skills were introduced in this program to promote meaningful activity, stress relief

and health promotion.

Interventions within this program are associated with altering contexts through community mobility and technology to promote older adults' participation in all aspects of society while maintaining connections with loved ones. One way occupations are altered is through education and training on using technology for video calling and leisure activities. Another way occupations are altered in this program is through community mobility and educating participants on the leisure and social participation opportunities present in their community.

Review Education Session Goals: By the end of the education session

- Facilitators will understand the mental and physical health consequences of occupational deprivation present in older adults during the pandemic.
- Facilitators will increase their understanding of the impact of leisure and social participation on the healthy aging of older adults.
- Facilitators will understand how to conduct the program: *Increasing Occupational Engagement in Older Adults during a Pandemic.*



Thank You!

- ▶ Contact the author at mariah.leroux8@gmail.com with any questions!

The author thanks you for taking the time to learn during this education session. The author hopes that this session was helpful in the administration of the program: *Increasing Occupational Engagement in Older Adults during a Pandemic*. Feel free to contact the author at mariah.leroux8@gmail.com with any questions.

References

References are provided in the notes section of the presentation.

References

- Aldwin, C. M., & Yancura, L. A. (2004). Coping. In C. Spielberger (Ed.) *Encyclopedia of Applied Psychology*, (1st ed., pp. 507-510). Elsevier Academic Press.
- American Occupational Therapy Association. (2020). Occupational therapy practice framework: Domain and process (4th ed.). *American Journal of Occupational Therapy*, 74 (Suppl. 2), 7412410010. <https://doi.org/10.5014/ajot.2020.74S2001>
- Banerjee, D., & Rai, M. (2020). Social isolation in Covid-19: The impact of loneliness. *International Journal of Social Psychiatry*, 66(6), 525-527. <https://doi.org/10.1177/0020764020922269>
- Brenner, B. (2020). *The mental health benefits of having a daily routine*. Therapy Group of NYC. <https://nyctherapy.com/therapists-nyc-blog/the-mental-health-benefits-of-having-a-daily-routine/>
- Carr, D., & Pudrovskaya, T. (2007). Mid-life and later-life crises. In J. E. Birren (Ed.) *Encyclopedia of Gerontology*, (2nd ed., pp. 175-185). Academic Press.
- Centers for Disease Control and Prevention. (2021). *COVID-19 risks and vaccine information for older adults*. <https://www.cdc.gov/aging/covid19/covid19-older-adults.html>
- Chen, S. W., & Chippendale, T. (2018). The issue is- Leisure as an end, not just as a means, in occupational therapy intervention. *American Journal of Occupational Therapy*, 72, 7204347010. <https://doi.org/10.5014/ajot.2018.028316>
- Chilvers, R., Corr, S., & Singlehurst, H. (2010). Investigation into the occupational lives of healthy older people through their use of time. *Australian Occupational Therapy Journal*, 57, 24-33. <https://doi.org/10.1111/j.1440-1630.2009.00845.x>
- Chiu, Y. C., Huang, C. Y., Kolanowski, A. M., Huang, H. L., Shyu, Y., Lee, S. H., Lin, C. R., & Hsu, W. C. (2013). The effects of participation in leisure activities on neuropsychiatric symptoms of persons with cognitive impairment: A cross-sectional study. *International Journal of Nursing Studies*, 50(10), 1314-1325. <https://doi.org/10.1016/j.ijnurstu.2013.01.002>
- Choi, N. G., DiNitto, D. M., Marti, C. N., & Choi, B. Y. (2022). Telehealth use among older adults during COVID-19: Associations with sociodemographic and health characteristics, technology device ownership, and technology learning. *Journal of Applied Gerontology*, 41(3), 600-609. <https://doi.org/10.1177/07334648211047347>
- Chopik, W. J. (2016). The benefits of social technology use among older adults are mediated by reduced loneliness. *Cyberpsychology Behavior & Social Network*, 19(9), 551-556. <https://doi.org/10.1089/cyber.2016.0151>
- Cole, M. B. (2018). *Group leadership: Cole's seven steps*. In M. B. Cole (Ed.) *Group Dynamics in Occupational Therapy*. SLACK
- Dunn, W., Brown, C., & McGuigan, A. (1994). The ecology of human performance: A framework for considering the effect of context. *American Journal of Occupational Therapy*, 48, 595-607. <https://doi.org/10.5014/ajot.48.7.595>
- Dunn, W. (2017). The ecological model of occupation. In J. Hinojosa, P. Kramer, & C. B. Royeen (Eds.) *Perspectives on Human Occupation: Theories Underlying Practice*, (2nd ed., pp. 207-235). F. A. Davis.
- Fallahpour, M., Borell, L., Luborsky, M., & Nygard, L. (2016). Leisure activity participation to prevent later-life cognitive decline: A systematic review. *Scandinavian Journal of Occupational Therapy*, 23(3), 162-197. <http://doi.org/10.3109/11038128.2015.1102320>
- Fields, J., Cembali, A. G., Michalec, C., Uchida, D., Griffiths, K., Cardes, H., Cuellar, J.,

- Chodos, A. H., & Lyles, C. R. (2020). In-home technology training among socially isolated older adults: Findings from the tech allies program. *Journal of Applied Gerontology, 40*(5), 489-499.
<https://doi-org.ezproxylr.med.und.edu/10.1177/0733464820910028>
- Fidanza, N., Bondoc, S., & Kotwal, J. (2020). Short, spontaneous and superficial: An exploration of social participation among older adults in an assisted-living facility (ALF). *American Journal of Occupational Therapy, 74*(Suppl. 1). <https://doi.org/10.5014/ajot.2020.74S1-PO5606>
- Finlay, J. M., Kler, J. S., O'Shea, B. Q., Eastman, M. R., Vinson, Y. R., & Kobayashi, L. C. (2021). Coping during the COVID-19 pandemic: A qualitative study of older adults across the United States. *Frontiers in Public Health, 9*, 1-12.
<https://doi.org/10.3389/fpubh.2021.643807>
- Ginsberg, L. (2020). *Why routines are important for mental health*. Hackensack Meridian Health. https://www.hackensackmeridianhealth.org/en/HealthU/2020/06/02/why-outines-are-important-for-mental-health#.YhZT_ZPMLeo
- Ibrahim, A. F., Tan, M. P., Teoh, G. K., Muda, S. M., & Chong, M. C. (2021). Health benefits of social participation interventions among community dwelling older persons: A review article. *Experimental Aging Research, 1-27*.
<https://doi.org/10.1080/0361073X.2021.1939563>
- Jackson, J., Carlson, M., Mandel, D., Zemke, R., & Clark, F. (1998). Occupation in lifestyle redesign: The well elderly study occupational therapy program. *American Journal of Occupational Therapy, 52*(5), 326-336. <https://doi.org/10.5014/ajot.52.5.326>
- Kotwal, A., Holt-Lunstad, J., Newmark, R., Cenzer, I., Smith, A., Covinsky, K., Escueta D., Lee, J., & Perissinotto, C. (2020). Social isolation and loneliness among the San Francisco bay area older adults during the COVID-19 shelter-in-place orders. *Journal of the American Geriatrics Society, 69*(1), 20-29.
<https://doi-org.ezproxylr.med.und.edu/10.1111/jgs.16865>
- Labadi, B., Arato, N., Budai, T., Inhof, O., Stecina, D. T., Sik, A., & Zsido, A. N. (2021). Psychological well-being and coping strategies of elderly people during the COVID-19 pandemic in Hungary. *Aging & Mental Health, 1-18*.
<https://doi.org/10.1080/13607863.2021.1902469>
- Levasseur, M., Filiatrault, J., Lariviere, N., Trepanier, J., Levesque, M. H., Beaudry, M., Parisien, M., Provencher, V., Couturier, Y., Champoux, N., Corriveau, H., Carbonneau, H., & Sirois, F. (2019). Influence of Lifestyle Redesign® on health, social participation, leisure and mobility of older French-Canadians. *American Journal of Occupational Therapy, 73*, 7305205030. <https://doi.org/10.5014/ajot.2019.031732>
- Lloyd, C., & Deane, F. P. (2019). Social Participation. In C. Brown, V. C. Stoffel & Munoz, J. P. (Eds.), *Occupational Therapy in Mental Health: A Vision for Participation*, (2nd ed., pp.881-895). F. A. Davis.
- Minahan, J., Falzarano, F., Yazdani, N., & Siedlecki, K. L. (2020). The COVID-19 pandemic and psychosocial outcomes across age through the stress and coping framework. *The Gerontologist, 61*(2), 228-239. <https://doi.org/10.1093/geront/gnaa205>
- Montgomery, A., Slocum, S., & Stanik, C. (2020). *Experiences of nursing home residents during the pandemic*. Altarum. https://altarum.org/sites/default/files/uploaded-publication-files/Nursing-Home-Resident-Survey_Altarum-Special-Report_FINAL.pdf
- Mulry, C. M., Papetti, C., De Martinis, J., & Ravinsky, M. (2017). Facilitating wellness in urban-

- dwelling, low-income older adults through community mobility: A mixed-methods study. *American Journal of Occupational Therapy*, 71(4), 1-7.
<https://doi.org/10.5014/ajot.2017.025494>
- National Institute on Aging. (2021). *Loneliness and social isolation- Tips for staying connected*.
<https://www.nia.nih.gov/health/loneliness-and-social-isolation-tips-staying-connected>
- Nyman, S. R., & Szymczynska, P. (2016). Meaningful activities for improving the wellbeing of people with dementia: Beyond mere pleasure to meeting fundamental psychological needs. *Perspectives in Public Health*, 136(2), 99-107.
<https://doi.org/10.1177/1757913915626193>
- Paggi, M. E., Jopp, D., & Hertzog, C. (2016). The importance of leisure activities in the relationship between physical health and well-being in a life span sample. *Gerontology*, 62(4), 450-458. <https://doi.org/10.1159/000444415>
- Polgar, J. (2011). Enabling community mobility is an opportunity to practice social occupational therapy. *Canadian Journal of Occupational Therapy*, 78, 67-71.
<https://doi.org/10.2182/cjot.2011.78.2.1>
- Sala, G., Jopp, D., Gobet, F., Ogawa, M., Ishioka, Y., Masui, Y., Inagaki, H., Nakagawa, T., Yasumoto, S., Ishizaki, T., Arai, Y., Ikebe, K., Kamide, K., & Gondo, Y. (2019). The impact of leisure activities on older adults' cognitive function, physical function and mental health. *PLOS One*, 14(11), e0225006.
<https://doi.org/10.1371/journal.pone.0225006>
- Sepulveda-Loyola, W., Rodriguez-Sanchez, I., Perez-Rodriguez, P., Ganz, F., Torralba, R., Oliveira, D. V., & Rodriguez-Manas, L. (2020). Impact of social isolation due to COVID-19 on health in older people: Mental and physical effects and recommendations. *Journal of Nutrition, Health & Aging*, 24(9), 938-947. <http://doi.org/10.1007/s12603-020-1469-2>
- Stickley, A., & Koyanagi, A. (2016). Loneliness, common mental health disorders and suicidal behavior: Findings from a general population survey. *Journal of Affective Disorders*, 197, 81-87. <http://doi.org/10.1016/j.jad.2016.02.054>
- Simard, J., & Volicer, L. (2020). Loneliness and isolation in long-term care and the COVID-19 pandemic. *Journal of American Medical Directors Association*, 21(7), 966-967.
<https://doi.org/10.1016/j.jamda.2020.05.006>
- Suttie, J. (2021). *How older people can cope with isolation*. Greater Good Magazine.
https://greatergood.berkeley.edu/article/item/how_older_people_can_cope_with_isolation
- Torres, E. A. (2020). *OT's mental health response to the COVID pandemic: Older adults*. [Video Presentation]. <https://www.occupationaltherapy.com/ot-ceus/course/occupational-therapy-s-mental-health-4940>
- University of Southern California. (n.d.). *USC chan division of occupational science and occupational therapy practice: About Lifestyle Redesign®*. <https://chan.usc.edu/patient-care/faculty-practice/about>
- Webber, M., & Fendt-Newlin, M. (2017). A review of social participation interventions for people with mental health problems. *Social Psychiatry and Psychiatric Epidemiology*, 52, 369-380. <https://doi.org/10.1007/s00127-017-1372-2>

THANK YOU!

You may contact the author with any questions at mariah.leroux8@gmail.com

APPENDIX C

Pre-Program Evaluation Survey (Resident)

This survey is meant to help staff further understand the needs of residents. The staff has an occupational therapy program titled *Increasing Occupational Engagement in Older Adults during a Pandemic*. This program addresses overall participation and engagement in leisure and social participation activities to promote positive mental health throughout the pandemic. Providing information in this survey will help staff understand how to cater sessions to the needs of individuals on-site. Another survey similar to this one will also be given at the end of the program to evaluate the effectiveness of the material.

Directions: Complete this survey by reading each question on the left and checking one box for each row with the response that best fits you. One box should be checked for each row except the shaded rows. For the free-response questions, write your response below the questions provided.

Thank you for participating in this survey.

Questions	Disagree	Somewhat Disagree	Neutral	Somewhat Agree	Agree
I am satisfied with my social interactions.					
I am satisfied with the leisure opportunities at this facility.					
I am satisfied with my access to the community.					
I am satisfied with the activities provided on-site.					
I have experienced mental health symptoms as a result of the pandemic.					

Describe your social interactions with others.

Describe the leisure activities that you frequently engage in.

Describe your experience with technology.

Describe how you have been feeling emotionally.

Pre-Program Evaluation Survey (Resident)

Questions	Disagree	Somewhat Disagree	Neutral	Somewhat Agree	Agree
Mental Health					
I use healthy coping strategies when I experience stress or anxiety.					
I use negative coping strategies when I experience stress or anxiety.					
I feel isolated often.					
I have a toolbox of coping strategies that I use often.					
Leisure Exploration					
I participate in leisure activities once a day.					
I participate in leisure activities more than once a day.					
I have found new leisure activities lately.					
Social Participation					
I can effectively communicate my needs to staff, peers and others.					
I feel like I have someone I can confide in when I go through difficult times.					
I interact with others 1-3 times each week.					
I interact with others 3 or more times each week.					
I stay in touch with family and friends.					
Routine					
I stick to a daily routine.					
I wake up and go to bed at the same time each day.					
I have enough hours in the day to do all the things that I need to do.					
Community Mobility					
I use community mobility for medical appointments.					
I use community mobility for leisure and social participation purposes.					
I am confident in using community mobility options.					
I go into the community more than once per week for non-medical-related purposes.					
Technology					
I use technology to stay in touch with family and friends.					
I use technology to get the items I need.					
I need staff assistance to use personal or facility technology devices.					

APPENDIX D

Post-Program Evaluation Survey (Resident)

This survey is meant to understand the effectiveness of the occupational therapy program titled *Increasing Occupational Engagement in Older Adults during a Pandemic*. Providing information in this survey will help staff use this program in the future to best assist other participants. This survey is similar to the initial survey that was taken before the program began and will include many of the same questions, along with new ones.

Directions: Complete this survey by reading each question on the left and checking one box for each row with the response that best fits you. One box should be checked for each row except the shaded rows. For the free-response questions, write your response below the questions provided.

Thank you for participating in this survey.

Questions	Disagree	Somewhat Disagree	Neutral	Somewhat Agree	Agree
I am satisfied with my social interactions.					
I am satisfied with the leisure opportunities at this facility.					
I am satisfied with my access to the community.					
I am satisfied with the activities provided on-site.					
I have experienced mental health symptoms as a result of the pandemic.					
This program has helped me feel more connected to others within an outside of this facility.					

Describe how your social interactions have changed because of this program.

Describe how your leisure activities have changed because of this program.

Describe your understanding and use of technology after going through this program.

Describe how you feel after going through this program.

Post-Program Evaluation Survey (Resident)

Questions	Disagree	Somewhat Disagree	Neutral	Somewhat Agree	Agree
Mental Health					
I use healthy coping strategies when I experience stress or anxiety.					
I use negative coping strategies when I experience stress or anxiety.					
I feel isolated often.					
I have a toolbox of coping strategies that I use often.					
Leisure Exploration					
I participate in leisure activities once a day.					
I participate in leisure activities more than once a day.					
I have found new leisure activities lately.					
Social Participation					
I can effectively communicate my needs to staff, peers and others.					
I feel like I have someone I can confide in when I go through difficult times.					
I interact with others 1-3 times each week.					
I interact with others 3 or more times each week.					
I stay in touch with family and friends.					
Routine					
I stick to a daily routine.					
I wake up and go to bed at the same time each day.					
I have enough hours in the day to do all the things that I need to do.					
Community Mobility					
I use community mobility for medical appointments.					
I use community mobility for leisure and social participation purposes.					
I am confident in using community mobility options.					
I go into the community more than once per week for non-medical-related purposes.					
Technology					
I use technology to stay in touch with family and friends.					
I use technology to get the items I need.					
I need staff assistance to use personal or facility technology devices.					

APPENDIX E

Program Evaluation Survey (Facilitator)

The program titled *Increasing Occupational Engagement in Older Adults during a Pandemic* is to be evaluated by residents and facilitators to understand the effectiveness of program concepts in enhancing social participation and leisure in older adults throughout a pandemic.

Non-standardized evaluation surveys have been created based on a Likert scale for both residents and facilitator(s). These are to be completed as follows.

Resident Survey Instructions: Give the pre-program evaluation survey to participants at the beginning of the first session of the occupational therapy program. This information will allow the facilitator to better understand where residents are currently at in their understanding of overall concepts. At the end of the last session of the occupational therapy program, give residents the post-program evaluation survey to complete. This is another survey with similar questions and a satisfaction measure. These surveys will be compared to show understanding and effectiveness of the overall concepts introduced.

Facilitator Survey Instructions: The facilitator of this program is either an occupational therapist (OT) or certified occupational therapy assistant (COTA). The facilitator will keep a daily evaluation measure for each session entailing the number of participants, engagement, interest, and overall participant understanding of concepts to provide continuous evaluation of program effectiveness. The evaluation survey that the facilitator will use after each program session is located on the proceeding pages. The facilitator will also be responsible for comparing the pre and post-program evaluation surveys from residents to gather data on the effectiveness from the resident's perspective. The facilitator is also responsible for gathering pertinent facility statistics to show program effectiveness for aging in place after the program.

Facilitator Post-Program Facility Evaluation Statistics

Number of participant hospitalizations since program initiation. _____

Number of resident move-out's since program initiation. _____

Introduction Session 1: Participation during a Pandemic

Date: _____

Number of Attendees: _____

Questions	Disagree	Somewhat Disagree	Neutral	Somewhat Agree	Agree
Participants understood the concepts introduced.					
Participants were actively engaged in the activity.					
Participants were actively engaged in discussion.					
Participants identified learning something new during the session.					
Participants noted that the session was helpful.					
Participants were interested in the concepts presented.					
Participants were satisfied with their social interactions during the group.					

Section 1: Mental Health during a Pandemic
Session 1: Identifying Stressors

Date: _____

Number of Attendees: _____

Questions	Disagree	Somewhat Disagree	Neutral	Somewhat Agree	Agree
Participants understood the concepts introduced.					
Participants were actively engaged in the activity.					
Participants were actively engaged in discussion.					
Participants identified learning something new during the session.					
Participants noted that the session was helpful.					
Participants were interested in the concepts presented.					
Participants were satisfied with their social interactions during the group.					

Section 1: Mental Health during a Pandemic
Session 2: Healthy Coping Strategies

Date: _____

Number of Attendees: _____

Questions	Disagree	Somewhat Disagree	Neutral	Somewhat Agree	Agree
Participants understood the concepts introduced.					
Participants were actively engaged in the activity.					
Participants were actively engaged in discussion.					
Participants identified learning something new during the session.					
Participants noted that the session was helpful.					
Participants were interested in the concepts presented.					
Participants were satisfied with their social interactions during the group.					

Section 1: Mental Health during a Pandemic
Session 3: Exploring Health Coping Strategies

Date: _____

Number of Attendees: _____

Questions	Disagree	Somewhat Disagree	Neutral	Somewhat Agree	Agree
Participants understood the concepts introduced.					
Participants were actively engaged in the activity.					
Participants were actively engaged in discussion.					
Participants identified learning something new during the session.					
Participants noted that the session was helpful.					
Participants were interested in the concepts presented.					
Participants were satisfied with their social interactions during the group.					

Section 1: Mental Health during a Pandemic
Session 4: Building a Healthy Coping Strategies Toolbox

Date: _____

Number of Attendees: _____

Questions	Disagree	Somewhat Disagree	Neutral	Somewhat Agree	Agree
Participants understood the concepts introduced.					
Participants were actively engaged in the activity.					
Participants were actively engaged in discussion.					
Participants identified learning something new during the session.					
Participants noted that the session was helpful.					
Participants were interested in the concepts presented.					
Participants were satisfied with their social interactions during the group.					

Section 2: Leisure Exploration
Session 1: Creative Leisure

Date: _____

Number of Attendees: _____

Questions	Disagree	Somewhat Disagree	Neutral	Somewhat Agree	Agree
Participants understood the concepts introduced.					
Participants were actively engaged in the activity.					
Participants were actively engaged in discussion.					
Participants identified learning something new during the session.					
Participants noted that the session was helpful.					
Participants were interested in the concepts presented.					
Participants were satisfied with their social interactions during the group.					

Section 2: Leisure Exploration
Session 2: Social Leisure

Date: _____

Number of Attendees: _____

Questions	Disagree	Somewhat Disagree	Neutral	Somewhat Agree	Agree
Participants understood the concepts introduced.					
Participants were actively engaged in the activity.					
Participants were actively engaged in discussion.					
Participants identified learning something new during the session.					
Participants noted that the session was helpful.					
Participants were interested in the concepts presented.					
Participants were satisfied with their social interactions during the group.					

Section 2: Leisure Exploration
Session 3: Physical Leisure

Date: _____

Number of Attendees: _____

Questions	Disagree	Somewhat Disagree	Neutral	Somewhat Agree	Agree
Participants understood the concepts introduced.					
Participants were actively engaged in the activity.					
Participants were actively engaged in discussion.					
Participants identified learning something new during the session.					
Participants noted that the session was helpful.					
Participants were interested in the concepts presented.					
Participants were satisfied with their social interactions during the group.					

Section 2: Leisure Exploration
Session 4: Cognitive Leisure

Date: _____

Number of Attendees: _____

Questions	Disagree	Somewhat Disagree	Neutral	Somewhat Agree	Agree
Participants understood the concepts introduced.					
Participants were actively engaged in the activity.					
Participants were actively engaged in discussion.					
Participants identified learning something new during the session.					
Participants noted that the session was helpful.					
Participants were interested in the concepts presented.					
Participants were satisfied with their social interactions during the group.					

Section 2: Leisure Exploration
Session 5: Relaxation/Spiritual Leisure

Date: _____

Number of Attendees: _____

Questions	Disagree	Somewhat Disagree	Neutral	Somewhat Agree	Agree
Participants understood the concepts introduced.					
Participants were actively engaged in the activity.					
Participants were actively engaged in discussion.					
Participants identified learning something new during the session.					
Participants noted that the session was helpful.					
Participants were interested in the concepts presented.					
Participants were satisfied with their social interactions during the group.					

Section 3: Social Participation for Older Adults in an Assisted Living Facility
Session 1: Effective Communication

Date: _____

Number of Attendees: _____

Questions	Disagree	Somewhat Disagree	Neutral	Somewhat Agree	Agree
Participants understood the concepts introduced.					
Participants were actively engaged in the activity.					
Participants were actively engaged in discussion.					
Participants identified learning something new during the session.					
Participants noted that the session was helpful.					
Participants were interested in the concepts presented.					
Participants were satisfied with their social interactions during the group.					

Section 3: Social Participation for Older Adults in an Assisted Living Facility
Session 2: Making Meaningful Connections

Date: _____

Number of Attendees: _____

Questions	Disagree	Somewhat Disagree	Neutral	Somewhat Agree	Agree
Participants understood the concepts introduced.					
Participants were actively engaged in the activity.					
Participants were actively engaged in discussion.					
Participants identified learning something new during the session.					
Participants noted that the session was helpful.					
Participants were interested in the concepts presented.					
Participants were satisfied with their social interactions during the group.					

Section 4: Routine Modification
Session 1: Routine Analysis

Date: _____

Number of Attendees: _____

Questions	Disagree	Somewhat Disagree	Neutral	Somewhat Agree	Agree
Participants understood the concepts introduced.					
Participants were actively engaged in the activity.					
Participants were actively engaged in discussion.					
Participants identified learning something new during the session.					
Participants noted that the session was helpful.					
Participants were interested in the concepts presented.					
Participants were satisfied with their social interactions during the group.					

Section 4: Routine Modification
Session 2: Routine Modification

Date: _____

Number of Attendees: _____

Questions	Disagree	Somewhat Disagree	Neutral	Somewhat Agree	Agree
Participants understood the concepts introduced.					
Participants were actively engaged in the activity.					
Participants were actively engaged in discussion.					
Participants identified learning something new during the session.					
Participants noted that the session was helpful.					
Participants were interested in the concepts presented.					
Participants were satisfied with their social interactions during the group.					

Section 4: Routine Modification

Session 3 (optional): Routine Modification for Depression

Date: _____

Number of Attendees: _____

Questions	Disagree	Somewhat Disagree	Neutral	Somewhat Agree	Agree
Participants understood the concepts introduced.					
Participants were actively engaged in the activity.					
Participants were actively engaged in discussion.					
Participants identified learning something new during the session.					
Participants noted that the session was helpful.					
Participants were interested in the concepts presented.					
Participants were satisfied with their social interactions during the group.					

Section 5: Community Mobility for Leisure and Social Participation

Session 1: What is Community Mobility?

Date: _____

Number of Attendees: _____

Questions	Disagree	Somewhat Disagree	Neutral	Somewhat Agree	Agree
Participants understood the concepts introduced.					
Participants were actively engaged in the activity.					
Participants were actively engaged in discussion.					
Participants identified learning something new during the session.					
Participants noted that the session was helpful.					
Participants were interested in the concepts presented.					
Participants were satisfied with their social interactions during the group.					

Section 5: Community Mobility for Leisure and Social Participation
Session 2: Leisure & Social Participation in the Community

Date: _____

Number of Attendees: _____

Questions	Disagree	Somewhat Disagree	Neutral	Somewhat Agree	Agree
Participants understood the concepts introduced.					
Participants were actively engaged in the activity.					
Participants were actively engaged in discussion.					
Participants identified learning something new during the session.					
Participants noted that the session was helpful.					
Participants were interested in the concepts presented.					
Participants were satisfied with their social interactions during the group.					

Section 5: Community Mobility for Leisure and Social Participation
Session 3: Community Outing Utilizing Community Mobility

Date: _____

Number of Attendees: _____

Questions	Disagree	Somewhat Disagree	Neutral	Somewhat Agree	Agree
Participants understood the concepts introduced.					
Participants were actively engaged in the activity.					
Participants were actively engaged in discussion.					
Participants identified learning something new during the session.					
Participants noted that the session was helpful.					
Participants were interested in the concepts presented.					
Participants were satisfied with their social interactions during the group.					

Section 6: Technology for Leisure & Social Participation
Session 1: Introduction to Technology

Date: _____

Number of Attendees: _____

Questions	Disagree	Somewhat Disagree	Neutral	Somewhat Agree	Agree
Participants understood the concepts introduced.					
Participants were actively engaged in the activity.					
Participants were actively engaged in discussion.					
Participants identified learning something new during the session.					
Participants noted that the session was helpful.					
Participants were interested in the concepts presented.					
Participants were satisfied with their social interactions during the group.					

Section 6: Technology for Leisure & Social Participation
Session 2: Technology for Social Participation

Date: _____

Number of Attendees: _____

Questions	Disagree	Somewhat Disagree	Neutral	Somewhat Agree	Agree
Participants understood the concepts introduced.					
Participants were actively engaged in the activity.					
Participants were actively engaged in discussion.					
Participants identified learning something new during the session.					
Participants noted that the session was helpful.					
Participants were interested in the concepts presented.					
Participants were satisfied with their social interactions during the group.					

Section 6: Technology for Leisure & Social Participation
Session 3: Technology for Leisure

Date: _____

Number of Attendees: _____

Questions	Disagree	Somewhat Disagree	Neutral	Somewhat Agree	Agree
Participants understood the concepts introduced.					
Participants were actively engaged in the activity.					
Participants were actively engaged in discussion.					
Participants identified learning something new during the session.					
Participants noted that the session was helpful.					
Participants were interested in the concepts presented.					
Participants were satisfied with their social interactions during the group.					

Section 6: Technology for Leisure & Social Participation
Session 4 (optional): Amazon Alexa for Leisure

Date: _____

Number of Attendees: _____

Questions	Disagree	Somewhat Disagree	Neutral	Somewhat Agree	Agree
Participants understood the concepts introduced.					
Participants were actively engaged in the activity.					
Participants were actively engaged in discussion.					
Participants identified learning something new during the session.					
Participants noted that the session was helpful.					
Participants were interested in the concepts presented.					
Participants were satisfied with their social interactions during the group.					

APPENDIX F

Occupational Therapy Education Session Survey

This survey is meant to help the facilitators understand the effectiveness of this education session titled: *Promoting Positive Mental Health through Social Participation and Leisure during a Pandemic*. This education session was intended to educate occupational therapy staff on the importance of positive mental health practices, and leisure and social participation for older adults in an assisted living facility.

Directions: Complete this survey by reading each question on the left and checking one box for each row with the response that best fits you. One box should be checked for each row except the shaded row. For the free-response questions, write your response below the questions provided.

Thank you for participating in this survey.

Questions	Disagree	Somewhat Disagree	Neutral	Somewhat Agree	Agree
My understanding of the health benefits of leisure and social participation has increased because of this education session.					
My understanding of concepts in the program: <i>Increasing Occupational Engagement in Older Adults during a Pandemic</i> has increased because of this education session.					
This education session was conducive to my learning needs.					
I enjoyed the content presented in this education session.					

How has your understanding of this topic changed after this session?

What did you enjoy about this education session?

What did you learn from this education session?