

Aging in Place for Families: A Website Designed to Encourage Adult Children to Help Their
Parents Age in Place

May, 2012

This project, submitted by Leacadia Flores, has been approved and accepted
in partial fulfillment of the requirements for the degree of
Master of Occupational Therapy from the University of Puget Sound.

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Abstract

Aging in place focuses on remaining safely and independently in the home and community and has emerged as a goal for many older adults. With the population of baby boomers entering old age, it is important for communities to take into account the overall needs of older adults seeking to age in place. Family members, as part of this community, have an important role as well. This project created a website to educate adult children of independently living older adults, who live at a distance, on the importance of aging in place and how to help their parents remain within their preferred community. The website included background information about aging in place, occupational therapy, and long distance family caregivers. Other specific sections emphasized simple home modifications, health management, work and leisure, age-related changes, and livable communities. The online resource was made freely available, and after browsing through the resource, visitors could begin applying the information and supporting their parents in maintaining a productive and meaningful life. In the future, community-based and non-profit organizations that support aging in place can refer people to the website, thus increasing the sustainability of the project.

Purpose Statement

The purpose of this project was to provide an online resource to educate adult children of older adults who live at a distance on the importance of aging in place (AIP) and strategies that can be implemented to help their parents continue to live independently as they age within their preferred community to ensure a productive and meaningful life.

Background/Literature Review

Aging in place (AIP) is a growing concept that focuses on helping older adults remain safely and independently in their homes as they age. According to the United States Census Bureau, there will be a projected 63,907,000 adults over the age of 65 in the United States by 2025, which will represent a 59 percent increase in the number of older adults from 2010 (U.S. Census Bureau, 2008). As the baby boomers continue to age, the population of older adults will steadily rise, and the U.S. will be faced with a change in population demographics and community profiles.

Support for Aging in Place- Government

Years before considering this sharp increase in older adults, the United States government had enacted laws to support the older population. Major legislation focused on aging such as the Older American Act, or OAA, was passed in 1965 to address concerns that there were not enough programs, funding, or social services targeted specifically for the older population (Administration on Aging, 2010a). The Older Americans Act was reauthorized and amended in 2006 to include promotion of home and community based long term care services, more funding for competitive grants focused on comprehensive elder justice programs, and requirements for the Administration on Aging to start developing demonstrations to help with aging in place, such as through naturally occurring retirement communities (O'Shaughnessy,

2009). The reauthorization included the Community Innovations for Aging in Place initiative (CIAP), which allowed communities to apply for grant funding to be used specifically for planning and implementation of AIP strategies (Administration on Aging, 2010b). The expansion of the original Act may be in response to the impending increase in older adults as well as the growing popularity of AIP.

Support for Aging in Place- Health and Well-Being

Policies that emerged in response to the OAA revision have led to the expansion of home and community-based services (HCBS) that promote aging in place. For example, when there was a history of use of HCBS such as housekeeping and personal assistance, these services were later perceived as necessary components for aging in place. Similarly, participation in adult day centers can delay institutionalization by providing activities and assistance to older adults who need more care and family caregivers who could benefit from respite services (Tang & Lee, 2010). For example, in a study by Molzahn, Gallagher, and McNulty (2009) participants in adult day centers and their family members associated aging in place with quality of life, which shows support for remaining in the home versus living in a long term care setting.

In addition to an increase in the population of older adults, longevity has also come into play as the average life span is increasing. This can lead to more Americans experiencing concurrent health issues such as heart disease, depression, and arthritis, which suggest the need for older adults to engage in health promoting practices. This is especially true for older adults who may be experiencing a decline in the ability to care for themselves independently. There is research that indicates that many community-dwelling older adults are taking steps to maintain independence and it was found that health promotion and healthy behaviors are necessary for an independent lifestyle (Yuen, Gibson, Yau, & Mitcham, 2007). Beneficial health behaviors

include contact with friends and family, regular social activities, physical activities, and light drinking for individuals who consume alcohol (Wu, McCrone, & Lai, 2008). The Yuen, Gibson, Yau, and Mitcham, (2007) study also indicated that a number of considerations such as personal attributes, health, social support networks and resources, and finances were identified as having a marked impact on an adult's independence. When taken into account, such considerations can potentially assist in an individual's effort to age in place.

In a study comparing the clinical outcomes of adults working to age in place with adults residing in nursing homes, the AIP adults had significantly greater outcomes in activities of daily living (ADL), cognition, depression and incontinence (Marek, Popejoy, Petroski, Mehr, Rantz, & Lin, 2005). Although the study did not suggest that aging in place caused the more favorable outcomes, the findings make way for addressing the need for more age-related support and services being steered toward AIP issues.

Support for the growing trend of aging in place is documented in a number of AARP surveys including a 2010 survey entitled *Home and Community Preferences of the 45+ Population*, which found that 78% of respondents 65 years old and over were strongly in favor of remaining in their homes as long as possible. This two-week national telephone survey collected responses from 1,616 midlife and older adults to uncover influential home and community issues (Keenan, 2010). In the same survey, 92% of older adults strongly agreed to the statement that they would like to remain in their local community as long as possible (Keenan, 2010). In a 2011 AARP survey, 88% of respondents age 50 and older reported that it is extremely or very important to have long-term-care services that allow aging in place (AARP Research & Strategic Analysis, 2011). This suggests that it is not just remaining in the home that appeals to older

adults, it is the features of and services provided by the community that also influence the desire to age in place.

Livable Communities

In 2005, AARP released *A Report to the Nation on Livable Communities*, which introduced the concept of livable communities to facilitate aging in place. AARP defined this hybrid community model using the following criteria, “A livable community is one that has affordable and appropriate housing, supportive community features and services, and adequate mobility options, which together facilitate personal independence and engagement of the residents in civic and social life” (AARP, 2005, p. 16). More specifically, this criteria can be met by including features such as community and recreation centers to promote socialization, volunteer opportunities for community engagement, safe and well-designed roads and sidewalks to encourage driving and mobile access to the community, and home design and modification resources that allow individuals full use of their home (AARP, 2005, p.52, 94). Older adults, with the help of family such as adult children, can determine the livable community criteria that best suit their aging in place needs.

Long Distance Adult Child Caregivers

As the population of older adults increases, the number of adult child caregivers, including distance caregivers, will likely increase as well. Informal caregivers such as adult children are one of the most important community resources for older adults and also prefer and are committed to helping family members stay at home (Gitlin, 2003). Adult children have the potential to become more involved in helping their parents age in place by facilitating preventive care and working with their parents to ensure that their homes support them as they age. There are an estimated 44.4 million family caregivers in the United States (Link, Dize, Folkemer, &

Curran, 2006). These caregivers fill a vital role. Yuen, Gibson, Yau, and Mitcham (2007) discovered that emotional support from family members was a contributing factor to the well-being and physical and social health of the older adult.

To be considered a caregiver, it is not a requirement for the adult child to live in the same residence as the care recipient. In addition, caregiving is not limited to support that requires direct contact, as adult children can assist their parents from other geographic locations. Moreover, seven million caregivers in the U.S. are located far from the care recipient (Harvard Medical School Health, 2004) but still help to provide care. In fact, in one study, adult child caregivers who did not live with their parents felt more competent in their ability to provide adequate help than caregivers who resided with the care recipient (Berg-Weger, Rubio, & Tebb, 2000). Adult child caregivers were also found to have significantly higher well-being and lower depression compared with spousal caregivers (Berg-Weger, Rubio, & Tebb, 2000). This suggests that the potential exists for adult children to be instrumental in helping their parents age successfully without being in the same residence. There are negative consequences for distant caregivers, however. The Metlife Market Institute, in association with the National Alliance of Caregiving (2004), conducted a study on long distance caregiving, which concluded that distance caregivers experience more financial burden the farther away they live from the older adult parent. This suggests the need for services and support options that can potentially ease the financial strain placed on distance caregivers.

There are other issues for caregivers besides financial burden. As a family caregiver, adult children must balance their own well-being with that of the older adult parent. By acting as an informal caregiver, whether it be in home or from afar, adult children experience significantly higher well-being in comparison to spouse caregivers (Berg-Weger, Rubio, & Tebb, 2000). But

these adult child caregivers still experience some of the negative consequences of caregiving, even if the impact is less than for the spouse of the care recipient. For example, family caregivers were more likely to feel socially isolated when living with a care recipient with whom they felt were receiving inadequate services and/or were not having their needs addressed. (Robison, Fortinsky, Kleppinger, Shugrue, & Porter, 2009). This shows that aspects of caregiving can affect the well-being of the family caregiver.

Other negative effects of caregiving exist, even for caregivers who do not reside with the care recipients. In a study by Rubin and White-Means (2009), adult child caregivers who were concurrently responsible for the care of older parents and their own children under 18, also known as sandwich caregivers, were more likely to be dissatisfied with their quality of work and also worked fewer hours when compared with other caregivers. This may in turn lead to a financial burden associated with caregiving. This same study found that sandwiched caregivers were more likely to report feelings of being overwhelmed and experiences of increased stress and burden (Rubin & White-Means, 2009). This study supports the need to mediate the impacts that caregiving has on the family caregiver, including those caring for both children and aging parents.

Because family caregivers are at risk of becoming overburdened when caring for loved ones, relief for and prevention of caregiver burnout is important. Caregiver support programs that include components such as education, skill building on topics like stress relief, and support groups for mutual exchange were shown to be affective in reducing family caregiver burden (Andren & Elmstahl, 2008; Farran et al., 2004; Moghimi, 2007). This means there are a number of viable options for caregivers to consider. At the same time, it is important for healthcare professionals to spend more time adequately educating and training caregivers so that they feel

confident and empowered in their role; ultimately providing better care for the care receiver and themselves (Moghimi, 2007). It has also been proposed that family caregivers feel most satisfied in their role when they are able to set aside time for independent leisure options (Moghimi, 2007). Acting as an adult child caregiver to an older adult requires a balancing act, especially when layering on the variables associated with aging.

Age Related Changes and AIP

The aging process does not follow a sequence nor does it run the same course for every older adult. A number of changes are associated with aging and affect sensory, cognitive, and musculoskeletal systems as well as psychosocial health (Lewis, 2002).

Senses such as vision allow adults to interact with the environment, and serious impairment in these areas threaten the ability to participate in instrumental activities of daily living, communicate, and socialize, thus leading to decreased quality of life and increased depression (Lewis, 2002). Presbyopia, also known as old sight, is part of the normal aging process and encompasses decreases in visual acuity and accommodation. The older adult also experiences decreases in pupil size and agility and increase in sensitivity of the retina, which means older adults need more illumination than their youthful counterparts (Lewis, 2002). Over time, changes in vision can impact activities such as independence in driving. Presbycusis is age-related hearing loss involving decrease in auditory acuity. Although changes in hearing are also determined by genetics, their potential impact on the lives of older adults cannot be ignored especially when combined with other sensory changes and health diagnoses (Lewis, 2002). An older adult experiencing hearing loss may feel embarrassed, depressed, and/or frustrated, which can lead to social isolation (Lewis, 2002). For the adult trying to age in place, this may limit opportunities to engage in health promoting activities that take place in a social setting.

In terms of cognition, older adults maintain intellectual functioning, but experience decreased short-term memory capacity, slower reaction times, decreased sustained attention, and learning new skills and concepts takes longer and more practice (Lewis, 2002). With age, the older adult may be less effective at organizing new information (Lewis, 2002). These changes may cause the older adult to request supplemental assistance in implementing aging in place strategies. Adult children should consider cognitive changes when interacting with their parents. For example, dementia is not an age-related change, so caregivers should not automatically attribute absentmindedness as an indication of the onset of this progressive disease.

The musculoskeletal system is also vulnerable to age-related changes. Older adults experience decreased flexibility and strength, which also leads to poorer posture and ultimately impacts functional capacity (Lewis, 2002). Changes in these three factors interact to produce changes in gait such as less efficient movement patterns, decreased ability to use gravity as an aid, and other compensatory movements aimed at increasing safety (Lewis, 2002). Independence in mobility is important for older adults trying age in place as it allows for freedom to participate in desired occupations without direct assistance from others.

All of these changes (sensory, cognitive, musculoskeletal) whether in isolation or in combination, can impact aging in place. These changes, when coupled with diagnoses such as diabetes, arthritis, heart disease, and stroke, make aging an individual process; therefore, age-related changes can occur at varying rates. Adult child caregivers can play a positive role in mediating some of these changes and services such as occupational therapy can provide a professional perspective that can guide family members and their older adult parents in the right direction for successfully aging in place.

Occupational Therapy and Aging

In a study by Clark et al. (1997), it was hypothesized that older adults who participate in a nine month preventive occupational therapy treatment program would present with better physical health, daily functioning, and psychosocial well-being in comparison to both a non-treatment group and an isolated social program group. This hypothesis was supported with significant benefits being found in the occupational therapy intervention group in areas of health, function, and quality of life (Clark et al., 1997). The results of this study were sustained following six months without receiving any occupational therapy intervention (Clark et al., 2001). This indicates that occupational therapy can be a tool to address the increase of health risks typical of old age. In other words, research provides a direct link between occupational therapy and preventive care for aging adults. The study intervention was designed to slow age-related changes and utilized common occupational therapy principles to help derive meaning from everyday lives by helping participants construct health promoting daily routines (Clark et al., 1997). A continued emphasis on meaningful occupation was stressed as a key contributor to successful aging. This study did more than help participants identify meaning in their occupations. The program also sought to help participants develop a lifestyle redesign plan by becoming agents of positive change whereby their plan would sustain throughout old age. Part of the program involved training the elders to conduct a personal home evaluation, which included body mechanics training and safety techniques for adaptive equipment (Jackson, Carlson, Mandel, Zemke, & Clark, 1998). In regards to the adult children of older adults, participation in similar home evaluations provides an example of how exposure to occupational therapy principles can help family members better assist their parents.

Preventive occupational therapy intervention utilizing a lifestyle redesign approach was found to be cost-effective when applied in a community-based setting (Clark et al, 2011; Hay et

al, 2002). This information is relevant when considering systemic changes in the United States' healthcare system applicable to older adults such as Medicare reimbursement.

Caregiver Resources

Because adult children and older adult parents may not directly receive occupational therapy services, another type of information delivery option needs to be available. Web-based or online modalities provide a viable learning alternative to on-site instruction. One study found that a web-based resource allowed individuals to access the learning materials freely anytime during the day and from any desired location (Lehning, Scharlach, & Dal Santo, 2010). The same study also discovered that this medium also presented a potential downfall of difficulty in motivating individuals to designate extra time to access the online tool. Despite this limitation, a web-based learning tool is a suitable option for information dissemination to the adult children of older adults. Organizations that work to support older adults can benefit from outside websites targeted at adult child caregivers. For example, villages, one model that is being utilized in numerous communities throughout the United States, already have an operating website, which means village organizers can potentially supplement the site with a link or separate section dedicated to educating adult children on facilitating aging in place.

Procedures for Project

A number of steps needed to be carried out in order to launch an online resource targeted toward long distance adult child caregivers. The following is an outline of the steps taken to implement the current project from the ground up:

- Assessed the current trends, service gaps, and needs related to the topic of older adults and aging in place

- Collaborated with an occupational therapy faculty member with expertise in gerontology about ideas for project content
- Researched and developed content regarding aging in place
- Researched and developed content regarding adult child long distance caregivers
- Researched and developed content about age-related changes and how they may impact older adults
- Researched and developed content related to the health and well being of older adults including health management, work and leisure, personal meaning, and safety in the home including fall prevention.
- Researched and developed content regarding livable communities, including the Village model
- Collaborated with contact person for project to determine proper course of action for developing an online resource independent of an agency
- Interviewed older adult couple who are aging in place and their daughter who does not live with them
- Researched and collaborated with graphic designer about using Tumblr for simple and free website hosting, and procedures to make the site live. Learned about basic HTML codes to use on the website
- Researched and purchased copyright compliant photos from royalty-free image websites such as gettyimages, istock, and shutterstock.
- Took and edited pictures for home modification section
- Purchased domain name from godaddy.com and design template from Tumblr.com
- Submitted website to project chair for editing

- Piloted website to target population including knowledge quiz and survey
- Made appropriate changes for final submission

Description of Final Project (Website)

The online resource provides information to assist the adult children of older adults to become more involved in helping their parents remain independent in the community as they age (see Appendix for selected pages from the website). Overall, the website answers many of the likely questions that adult children ask regarding the changes that take place with an older parent and how best to prepare. Long distance family caregivers are encouraged to act as facilitator alongside their parents as they work together to plan for the future. The website contains tips, strategies, and resources that can be utilized to ensure that the adult children can feel confident about their parent's decision to remain in the home. The user-friendly website features a variety of sections designed to quickly and efficiently inform the adult child.

A unique feature of the website is the added benefit of allowing visitors to comment and share personal stories, tips, and strategies about long distance caregiving and aging in place. This feature can potentially add an insider's perspective to complement the informative components presented by the website author.

Below is an overview of the different sections of the website, Aging in Place for Families, which can be accessed by going to <http://aginginplacefamily.com/>. .

Home/Welcome- The main page of the website provides background information to help set the stage for the strategies and recommendations found in other sections.

- *Aging in Place*: Includes information about aging in place, to better inform adult children about the AIP trend and the benefits it can provide to the aging parent

- *Long Distance Family Caregivers:* Provides a brief profile of informal caregivers and introduces the role they can play to the parent aging in place
- *Occupational Therapy:* Provides a definition of occupational therapy and how the profession plays a role in helping older adults
- *Age-Related Changes:* Provides an overview of age-related changes and how they impact function in older adults

The Meaning of Life- This section emphasizes the importance that meaning plays in the lives of older adults and helps caregivers learn how to discuss this topic as well as goal setting with their parents.

Safety Through Home Modification- This section addresses simple ways to modify the home environment to decrease fall risk and to accommodate certain disabilities and age-related changes. Ultimately, this section seeks to help the home support older adults as they age.

Health Management- This section educates on the importance of health management and provides strategies that can be used to keep the older adult healthy and active in the community, which can also offset age-related changes. This section includes ideas for activities that can be done with family to encourage co-occupation. It also encourages the adult child to stay apprised of the service providers involved with the parent's care and how they manage medication.

Work and Leisure- This section encourages adult children to begin conversations with the parent about work satisfaction and plans for retirement. It also introduces the importance of leisure and provides ideas to promote parents' participation in leisure

Livable Communities (Villages)- This section overviews livable communities and how they support aging in place, specifically, the village model

Profile of Aging in Place- This section introduces an actual couple dedicated to aging in place in the Seattle area and the steps they have taken to remain independent in the home thus far

Resources- The website provides a list of resources related to each section that the adult child can refer to if they need more specialized assistance.

Project Goals, Objectives, and Outcomes

With the completion of this project, adult children who live at a distance from their aging parents had access to an online resource that contains tips, strategies, and activities that can be implemented to foster plans to age in place. The information learned allowed the adult children to be better informed and ultimately be more proactive in the planning process alongside the older adult.

The website was made freely available to adult children who have parents who wish to age in place. After browsing through the resource, the adult children could begin applying the information that is relevant to their family situation.

The website was piloted by two people drawn from the target population. An online survey was formulated for the pilot group to complete. The survey included a few questions to evaluate the effectiveness of the online resource including ease of navigation, application value of the material, and its relevance to the older adult and his or her goals for aging in place. The survey included general knowledge base questions, to determine if the project goals were met. Some of the feedback obtained in the survey was used to make appropriate changes to the website to increase its navigability and value to future visitors, and in turn made the project more sustainable. Feedback that went beyond the scope of the current project can potentially be included in subsequent updates and revisions to the website in the future.

The following is an overview of the desired project goals and objectives, and whether each one was met upon completion of the website:

Goal 1- After browsing through the website, adult children of older adults were educated about the concept of aging in place. *This goal was met*

Objective 1- After reading through relevant sections of the website, adult children were able to identify 2 ways that aging in place is beneficial for older adults. *This objective was met*

Objective 2- After browsing through the website, adult children were able to name 2 organizations that actively support aging in place. *This objective was met*

Goal 2- After reading through the website, the adult children had the necessary knowledge to implement simple home modifications with their parents. *This goal was met*

Objective 1- Adult children were able to identify one home modification that supports physical changes associated with aging. *This objective was met*

Objective 2- Adult children were able to identify one home modification that supports sensory changes associated with aging. *This objective was met*

Objective 3- Adult children were able to identify one home modification that supports cognitive changes associated with aging. *This objective was met*

Goal 3- After reading various sections of the online resource manual, adult children of older adults were educated on the benefits of a healthy lifestyle and ideas for health promoting activities. *This goal was met*

Objective 1- After accessing and reading relevant sections of the online resource manual, adult children were able to name 3 benefits to maintaining a healthy lifestyle throughout the aging process. *This objective was met*

Objective 2- After accessing and browsing through relevant sections of the manual, the adult children were able to identify 2 health-promoting activities that they can engage in with their parent. *This objective was met*

Objective 3- Upon accessing the website, the adult children identified 2 strategies they can use to be better informed about their parent's health status and health management routine. *This objective was met*

Goal 4- After browsing through the website, adult children will be able to have an understanding of age-related changes and their impact on aging in place. *This goal was met*

Objective 1- After accessing relevant sections of the website, adult children will be able to identify 2 sensory, 2 cognitive, and 2 physical changes associated with aging. *This objective was met*

Objective 2- Upon reviewing the website, adult children will be able to identify 3 ways that age-related changes can impact function in older adults. *This objective was met*

Objective 3- After reading relevant sections of the website, adult children will be able to identify 2 strategies that can help older adults who are experiencing specific age-related changes. *This objective was met*

Implications for Occupational Therapy

Occupational therapy intervention has been suggested to help reduce the impact that the risks related to aging pose to the older adult (Clark et al., 1997). This is relevant to the current project because the goals focused on educating the adult child and providing strategies that can be integrated into everyday occupations of the parent which, in essence, facilitate aging in place. These goals also related to inherent beliefs of occupational therapy in that all people need to experience independence, health, well-being, and the freedom to grow through engagement in

occupations (Wilcox & Townsend, 2008). Occupational therapists play a dynamic role in promoting engagement due to the therapist's ability to assess the client's abilities and environment to in turn make modifications that improve the fit between environmental demands and the client's abilities and enable an increase in participation in meaningful activity.

The online resource provided adult child caregivers with information to enable them to assist their parents in engaging in healthy lifestyle choices and implementing preventive strategies to allay many of the issues that come with age. The website educated the adult children on how to identify changes that can be made to the environment to align more closely with their parent's personal strengths and goals.

Application of the OT Practice Framework

The Occupational Therapy Practice Framework: Domain and Process (OTPF), guides OT practice by highlighting the profession's role in encouraging clients to engage in chosen everyday activities as a means to support health and participation (American Occupational Therapy Association [AOTA], 2008). The range of activities is extensive and can include daily tasks such as taking care of one self in the morning, managing the care of others, working an eight hour day, and maintaining social connections. Participation in such activities can be aided and/or restricted by specific attributes and demonstrated abilities of the person as well as specific features of the activity itself including the environment in which the occupation is experienced. Client factors and performance skills impact an individual's ability to engage in areas of occupation. Client factors include the characteristics of the person including body structures, body functions, values, beliefs and spirituality. Performance skills refer to the individual's abilities and how those abilities are used to perform various activities. (AOTA, 2008). Deficits and strengths in client factors and/or performance skills does not guarantee difficulty or success

in participation, but are still essential to consider. Occupational therapy utilizes evaluation and intervention to foster a positive relationship between occupation and health, a process that adheres to the scope of the profession's domain (AOTA, 2008).

This project specifically focused on client factors and performance skills and how the older adults' abilities change with age and affect how they participate in their areas of occupation such as instrumental activities of daily living (IADL), work, leisure, and social participation. Aging in place considers client factors and performance skills and how they facilitate or prevent people engaging in relevant areas of occupation. In addition, the Framework draws attention to aspects of the tasks themselves and the environmental context that surrounds the person. It is by considering all of these factors that an occupational therapist is able to identify areas in which intervention may be necessary. By acting as long distance caregiver and becoming educated on aging in place, the adult child can support his/her parent's engagement in activity, thus becoming the parent's occupational enabler. The online resource provided caregivers with the tools necessary to help support the older parent by considering the aging process and how the context and environment in which aging in place will take place can support or hinder function. The adult child can now influence the parents' habits, routines, and roles to ensure the parent can continue to engage in meaningful occupations throughout the aging process.

Application of Theoretical Model

The Ecology of Human Performance (EHP) Model is an ecological model within occupational therapy that focuses on the confluence of person, environment, and task factors with the outcome being occupational performance. In EHP the person includes variables such as values, interests, skills, abilities, and experience. The environment consists of physical, cultural, social, and temporal components. The task is an objective term used to encompass all possible

activities available to the person (Brown, 2009). Central to EHP is the concept of goodness of fit. For instance, this model not only assumes that contextual factors play a role in a person's performance, it also calls for changes in the environment that match the person and his or her identified performance needs to effectively enhance performance range (Dunn, Brown, & McCuigan, 1994, as cited in Brown, 2009). Environments can either support or present barriers to occupational performance. By using a modify/adapt strategy within the EHP model, the task or environment can be changed so that the individual can experience improved performance (Dunn et al., 2003 as cited in Brown, 2009). This differs from the establish/restore approach, also considered remediation, which works toward increasing a person's abilities so that they can better perform the tasks in any given environment. This strategy focuses on changing the person such as increasing balance to reduce fall risk in order to walk on unpaved nature trails, which have been identified as an important area of occupational performance for the person. The modify/adapt and establish/restore strategies both take a top-down approach and may be called for at the same time.

Adult child caregivers must operate within the context of the web resource in order to successfully support their parents with aging in place. Essentially, the website supported adult children as they became educated on how to make decisions with their parents. Given that individuals have varying ability levels, the adult child caregiver's experience will be unique and change continuously with skill development and new experiences.

In order to carry out the strategies presented in the web resource, the adult child needed to consider the physical, cultural, social, and temporal features and demands of the older adult's environment that can benefit from changes that will contribute to aging in place. This must be done in conjunction with the identification of the older adult's strengths and capabilities to

ensure the best possible match is found. For example, adult children will be educated on how to modify the home environment by decreasing clutter in order to help decrease the risk of falling, which allows more freedom to engage in activities without fearing an accident. By doing so, this reduces the demands of the environment that may have posed a barrier to participation for the older adult who is experiencing age-related changes. Such age-related changes should always be taken into account, because they will direct how and when variables surrounding the older adult need to undergo a change to further support and expand performance range. The EHP model will drive the content of the website by keeping everything focused on information that will increase the occupations that will be available to the parent by encouraging and educating the adult child on ways to change the environmental supports, and maximize the parents' abilities and skills to best fit within the context and demands of the home.

Project Sustainability and Future Steps

The use of a website as the chosen format for the project allows for open and easy access to the material at all times. A web resource also means the information is not restricted to use by the target audience. All users of the internet can potentially take advantage of the information, which can lead to an increase of visitors to the website via word of mouth.

The website was created independent of a home agency; therefore, sustainability of the project is unknown at this time. The use of Tumblr as the website host guarantees the site will remain accessible until either Tumblr is no longer operational or the website creator chooses to deactivate the domain name. Ideally, existing villages or other livable communities with operational websites can provide a link to ensure continued traffic to the project website by the target audience. Should the website find an agency to link to, it is advised that recommendations

from the piloting process be considered, as the current project creator was unable to make all of them due to lack of web design skills and time limitations.

Project Limitations

This project was limited by the lack of agency with which the website could be catered toward. The added direction that a home agency could have provided may have led to a more focused and guided framework. Having a home agency to deliver the project to may also have made it easier to develop a useful resource list. In the future, a more in depth needs assessment should take place to help direct a similar project to an appropriate agency.

There were other limiting factors associated with choosing a website for the project medium. For example, without a base level of relevant skills, the project creator had to rely on a graphic designer for the initial design, setup, and formatting of the website. Difficulty with scheduling work sessions caused the website creation process to take longer than anticipated. Additionally, the project chair had difficulty editing the website content after it was transferred from Microsoft Word to the online template. In the future, obtaining final approval of the content by the project chair before transferring the information to the website may be helpful, although some online editing will still be needed.

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doi: 10.1080/J148v25n03_03

Human Resources

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Appendix