

**Letterhead of HOSPITAL AUTHORITY**

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Grace Lee, Convenor,  
Working Group on Dementia,  
Occupational Therapy Coordinating Committee,  
Hospital Authority.  
14 Oct., 98

Welfare Committee of LegCo,  
HKSAR

Dear Sir/Madam,

Opinion on Study of Needs of Elderly on Residential Placement & Community Care

**1. Community Occupational Therapy Service to Support Elderly Living in the Community (See App. I Abstract on “Occupation in Life Redesign: The Well Elderly Study Occupational Therapy Program)**

- Strengthen the training of Home Helpers, other community workers, home carers on the mental health of the elderly so that there will be early detection of the depressed and the demented elderly with the support from professional staff.
- Enhance the back up support of professional service to promote the mental health, the daily activities functioning of the elderly through assessment and intervention (like cognitive and memory training, home environment adaptation & structuring of activity programme and supporting carers with appropriate handling techniques for problematic & challenging behaviour to relieve caring stress) e.g. Community Occupational Therapy Service. At present, there is a service gap for these depressed and demented elderly as they might not be known to community geriatric or psychogeriatric team or the elderly visiting teams. Besides, there is a high risk group of the mentally or physically ill who are living alone or supported by their frail elderly couples who are of high career stress.

**2. Rehabilitation Service in the Elderly Home**

- Strengthen the support of the professional staff in the elderly homes like Occupational Therapists and Physiotherapists. There is a significant portion of the elderly suffering from multiple physical & mental problems.

Occupational therapists emphasize on the holistic care on the cognitive, psychosocial, activities of daily living and the physical functioning of the elderly through assessment & training programme (e.g. on memory, reality orientation, reminiscence, self-care & home safety). Beside, based on the compensatory approach. Occupational Therapists would also recommend on environmental design for the disable for the disabled and proscribe suitable assistive device for the individual mentally (e.g. the demented & the depressed) or physically (e.g. stroke and arthritis) ill elderly residents to improve their quality of life. Therapists would also provide professional support and staff training to frontline staff to enhance the quality and standard of the care in elderly homes.

### 3. **Psychogeriatric Day Hospital**

- There is an increasing demand on psychogeriatric day hospital service but there is only very few hospitals provide such service. We totally support the creation of psychogeriatric day hospital on the ratio of one day hospital to 50,000 elderly. A multidisciplinary working team including a medical officer, nurses, an occupational therapist, etc should be build to ensure comprehensive assessment and rehabilitation service are provided to support the mentally ill elderly living in the community. The roles of Occupational Therapists in the day hospital include assessment and training on cognitive & self-care functioning, organizing therapeutic group activities, advice on home modification & safety and carer education on approach and handling of the clients.

### 4. **Redesigning the Elderly Home for the more Handicapped Elderly**

- As Occupational Therapist are trained on the design for the disabled, we hope we could offer our expertise and contribute on the redesign of the residential homes to enhance the functioning of the frail elderly residents.

For any queries, please feel free to contact me for further information.

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## Abstract

## Occupation in Lifestyle Redesign: The Well Elderly Study Occupational Therapy Program

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Key Words: occupational science • preventive health services (community)

*This article describes an innovative preventive occupational therapy intervention for well older adults, the Well Elderly Treatment Program. In a previously reported large-scale randomized effectiveness study, this intervention was found to be highly successful in enhancing the physical and mental health, occupational functioning, and life satisfaction of multicultural, community-dwelling elders. In this article, the philosophical background, manner of development, topical content, methods of program delivery, and mechanisms underlying the program's positive effects are discussed, along with implications for occupational therapy practice. The treatment was based on application of occupational science theory and research and emphasized the therapeutic process of lifestyle redesign in enabling the participants to actively and strategically select an individualized pattern of personally satisfying and health-promoting occupations. The wide-ranging effectiveness of the program supports the occupational therapy profession's emphasis on occupation in affecting health and positions practitioners to extend their services to the realm of preventive interventions.*

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*This article was accepted for publication January 3, 1998.*

Recent changes in health care are challenging occupational therapists to document the effectiveness of their treatments (Foren, 1996; Ostow, Lieberman, & Merrill, 1985). Responding to this challenge in the belief that principles of occupational science can be translated into innovative treatment advances, our investigative team at the University of Southern California (USC) conducted a rigorous experimental test of a preventive occupational therapy intervention designed to enhance the health and psychosocial well-being of community-dwelling older adults. The primary purpose of this article is to describe the development and content of the underlying treatment model, the Well Elderly Program.

An in-depth presentation of the experimental design and study results pertaining to our evaluation of the Well Elderly Treatment Program is contained in Clark et al. (1997). To provide the context for the ensuing discussion, the wider Well Elderly Research Study is briefly summarized below.

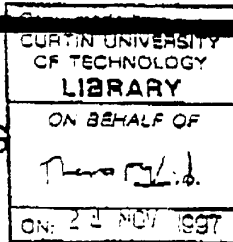
### The USC Well Elderly Research Study

The Well Elderly Research Study, supported by funding from the National Institutes of Health and the American Occupational Therapy Foundation, was conducted in the Los Angeles area between 1994 and 1997. The research

# Original Contributions

## Occupational Therapy for Independent-Living Older Adults

### A Randomized Controlled Trial



Florence Clark, PhD, OTR, Stanley P. Azari, PhD; Ruth Zemke, PhD, OTR, Jeanne Jackson, PhD, OTR; Mike Carlson, PhD, Deborah Mander, MS, OTR; Joel Hay, PhD, Karen Josephson, MD, Barbara Cherry, PhD; Colin Hessel, MS, Joycealynne Palmer, MS, Loren Lipson, MD

**Context.**—Preventive health programs may mitigate against the health risks of older adulthood.

**Objective.**—To evaluate the effectiveness of preventive occupational therapy (OT) services specifically tailored for multiethnic, independent-living older adults.

**Design.**—A randomized controlled trial.

**Setting.**—Two government subsidized apartment complexes for independent-living older adults.

**Subjects.**—A total of 381 culturally diverse volunteers aged 60 years or older.

**Intervention.**—An OT group, a social activity control group, and a nontreatment control group. The period of treatment was 9 months.

**Main Outcome Measures.**—A battery of self-administered questionnaires designed to measure physical and social function, self-rated health, life satisfaction, and depressive symptoms.

**Results.**—Benefit attributable to OT treatment was found for the quality of interaction scale on the Functional Status Questionnaire ( $P=.03$ ), Life Satisfaction Index-Z ( $P=.03$ ), Medical Outcomes Study Health Perception Survey ( $P=.05$ ), and for 7 of 8 scales on the RAND 36-item Health Status Survey, Short Form: bodily pain ( $P=.03$ ), physical functioning ( $P=.003$ ), role limitations attributable to health problems ( $P=.02$ ), vitality ( $P=.004$ ), social functioning ( $P=.05$ ), role limitations attributable to emotional problems ( $P=.05$ ), and general mental health ( $P=.02$ ).

**Conclusions.**—Significant benefits for the OT preventive treatment group were found across various health, function, and quality-of-life domains. Because the control groups tended to decline over the study interval, our results suggest that preventive health programs based on OT may mitigate against the health risks of older adulthood.

JAMA. 1997;278:1621-1629

THE NUMBER OF Americans aged 65 years or older has risen dramatically from 3.1 million persons (4% of the US population) in the early 1900s to over 35 million persons (nearly 13% of the population) in 1995.<sup>1</sup> It is projected that over 17% of the American population will be elderly by

the year 2020, that 42% of this group will be older than 75 years, and that the "oldest old" group (aged 85 years or older) will more than double in size by 2030 and will nearly double again by 2050.<sup>2</sup> If present trends persist, it can be expected that longer life spans will be marked by poorer health-related quality of life.<sup>3,4</sup>

Health-related quality of life is generally thought of as "those aspects of self-perceived well-being that are related to or affected by the presence of disease or treatment,"<sup>5,6,7,8</sup> encompassing such dimensions as physical and social functioning, bodily pain, and vitality.<sup>9</sup> While aging, *per se*, may account for certain losses, its role has generally been overstated.<sup>4,10</sup> For example, chronic disease has become the most severe health problem among older adults, and often leads to chronic dis-

ability.<sup>11</sup> Older adults are also presented with unique psychological stressors (eg, financial hardship, death of a spouse, retirement) that can contribute to psychiatric disorders such as depression, paranoia, or anxiety and lead to substance abuse.<sup>12,13</sup> In addition, older individuals are confronted with social stressors (eg, changes in roles, difficulty interacting with the surrounding environment, and logistical problems performing daily activities) that may lead them to discontinue lifelong pursuits and experience a decrease in life satisfaction.<sup>14,15</sup>

Studies of what is now referred to as "successful aging" reveal that considerations intrinsic to aging or disease such as diet, lifestyle and daily routine, degree of social support, amount of exercise, and sense of autonomy and control play a strong positive role in enabling older individuals to maintain their health and independence.<sup>16,17</sup> Research has shown that remaining active and productive is a key component of successful aging.<sup>18,19</sup> Such findings offer hope for the potential to design effective activity-based interventions capable of enhancing the lives of elderly individuals. However, given the diversity of challenges faced by older adults, the complexity of interlocking physical, psychological, economic, and social factors must be taken into account.

In response to this need, we conducted between 1994 and 1998 a randomized controlled trial, the Well Elderly Study, to evaluate the effectiveness of preventive OT specifically targeted for urban, multiethnic, independent-living older adults. Typically, OT is provided to older individuals to facilitate independence after catastrophic illness or accidents when significant functional impairment or disability is present.<sup>20,21</sup> However, we reasoned that many of the principles of OT intervention, given their focus on fostering productive and meaningful activity (occupation), maximizing independence, and enhancing function, constituted a potentially effective approach to preventing ill-

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