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An Intergenerational Leisure Activity Program to Promote Successful Aging

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AN INTERGENERATIONAL LEISURE ACTIVITY PROGRAM TO PROMOTE

SUCCESSFUL AGING

By

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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

Master's of Occupational Therapy

Grand Forks, North Dakota

May 2013

This Scholarly Project, submitted by Rachel Becker and Jason Zacharias in partial fulfillment of the requirement for the Degree of Master's of Occupational Therapy from the University of North Dakota, has been read by the Faculty Advisor under whom the work has been completed and is hereby approved.

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Faculty Advisor

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Title: An Intergenerational Leisure Activity Program to Promote Successful Aging

Department: Occupational Therapy

Degree: Master's of Occupational Therapy

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TABLE OF CONTENTS

LIST OF FIGURES

LIST OF TABLES

ACKNOWLEDGEMENT

ABSTRACT

PROBLEM: By the year 2030, older adults who are 65 years of age or older will account

for 20% of the US population (Center for Disease Control, 2008); however, the rate of

successful aging has decreased 25% from 1998 to 2004 (McLaughlin, Connell, Heeringa,

Li, &Roberts, 2009).

PURPOSE: The purpose of this scholarly project is to develop an intergenerational

program that will promote successful aging of older adults.

METHOD: A literature review was conducted on older adults and successful aging using

PubMed, OT search, CINAHL, AJOT, Google scholar, and textbooks.

RESULTS: Researchers indicated that intergenerational programs promote successful

aging and positive outcomes in children. An intergenerational program was designed

based on the model of human occupation (MOHO). The program also uses Erikson's

theory of development and learning theories including pedagogy and gerogogy. The

program is made up of three phases: preparing older adults for intergenerational

programming, program implementation, and capstone of intergenerational program.

CONCLUSION: Occupational therapists can use this program in order to develop an

intergenerational after school program in which the older adults volunteer and educate the

youth on different leisure activities of interest. Implementation of this program will

increase successful aging in older adults and also have a positive impact on the children

who participate. It is recommended that an occupational therapist implement this grant-

funded intergenerational program in a rural community and conduct research on wellness

outcomes for both older adults and children.

CHAPTER I

INTRODUCTION

By the year 2030, older adults who are 65 years of age or older will account for 20% of the US population (Center for Disease Control, 2008); however, the rate of successful aging has decreased 25% from 1998 to 2004 (McLaughlin, Connell, Heeringa, Li, & Roberts, 2009). This reduction is related to a decline of participation in meaningful activities (Peralta-Catipon & Hwang, 2011). Conversely, continued participation in meaningful occupations promotes successful aging (Jackson et al., 1998; Stav, Hallenen, Lane, & Arbesman, 2012). In addition, older adults have a desire to contribute to society in order to develop a sense of productivity and integrity (Russell, 2008; Schoklitsch & Baumann, 2012). Older adults can fulfill this desire and experience successful aging through engaging in mentoring relationships that are promoted through intergenerational programs.

Researchers have indicated that as adults grow older, the risk of developing health issues begins to increase while independence begins to decrease (Clark et al., 2011). Furthermore, older adults begin to have a decrease in participation of meaningful occupations as they age (Peralta-Catipon & Hwang, 2011). This decrease leads to poor physical and psychological well-being and a decrease in life satisfaction (Jackson, Carlson, Mandel, Zemke, & Clark, 1998).

In contrast, older adults who do participate in meaningful activities improve health and wellness along with an increase in life satisfaction (Stav, et al., 2012; Jackson

et al., 1998). A good way to stay engaged in meaningful activities is for older adults to volunteer their time. Jung, Grueneward, Seeman, and Sartkisian (2009), concluded in their study that volunteerism is the most significant activity in lowering frailty over time and has an even greater impact on older adult's health than paid working. Volunteering with children is a fitting occupation for the life-stage of older adults because by giving back to society in a meaningful way, the older adults feel a sense of generativity (Barron et al., 2009).

Using the evidence gathered from a literature review completed for this scholarly project, an intergeneration leisure activity program was developed. The intergenerational leisure activity program is intended to promote successful aging for the older adults by generating a feeling of integrity and sense of being associated with sharing of their expertise with youth. The program was also designed to increase quality of life in the older adults and decrease ageist attitudes of the youth who participate. This intergenerational leisure activity program is unique as its main focus is the engagement in occupation-based activities, which is lacking in current intergenerational programs. The intergenerational leisure activity program is broken into three phases including a preparation phase, an implementation phase, and a capstone phase.

In the preparation phase, the occupational therapist (OT) program coordinator will lead three sessions. In the first session the OT will explain the importance of successful aging. During the second session the OT will explain what techniques can be used to successfully teach the youth about the occupations being presented. In the final session, the OT coordinator will conduct a home visit at the older adult's houses. In the implementation phase, the youth will go to the older adult's homes and actually engage in

the chosen leisure occupation with the older adults facilitating the sessions. In the capstone phase, the older adults and children will reflect on the program and give suggestions on how the program can change and grow. Finally there will be an end of the year party where the youth, older adults, and parents of youth will come together to celebrate the achievements made through program involvement.

This scholarly project was developed using multiple theories. The theories helped drive the development of not only the product, but of the entire process of this scholarly project. The theories that were utilized in this scholarly project include the model of human occupation (MOHO), Erikson's stages of development, and the learning styles of pedagogy and gerogogy.

Theory

The Model of Human Occupation

The MOHO provides a framework for conceptualizing the role occupational engagement has in promoting successful aging of older adults for this scholarly project (Kielhofner, 2009). MOHO was developed with participation in occupation at the core. Kielhofner (2009) postulated that occupational engagement affects and reveals inter-related internal (personal) and external (environmental) characteristics. There are four core constructs of this model: volition, habituation, performance capacity and environment (Kielhofner, 2009).

The three attributes of the person, volition, habituation, and performance, have a dynamic and interactive relationship (Kielhofner, 2009). *Volition*, the thoughts and feelings that motivate an individual to participate in an occupation, is influenced by a personal desire to activate as well as by past occupational experiences. For example, if

3

an individual receives a sense of mastery and enjoyment when performing an occupation, that individual is more likely to re-engage in that occupation in the future. The aforementioned sense of mastery/enjoyment is also known as *personal causation*. Volition is also influenced by the individual's *values*, or belief about what is virtuous, and *interests*, which are occupations that person finds pleasurable (Kielhofner, 2009).

Habituation is the way occupations are organized into patterns of doing (Kielhofner, 2009). Through habituation, occupations are organized into habits, roles, and routines. A *habit* is a learned method of completing a task in the same manner each time in order to reduce the amount of physical and mental effort required. After a habit is formed, it becomes automatic in the learned context, and is difficult to change. Therefore, when maladaptive habits are formed, the instinctive nature can be detrimental to an individual's health and well-being and require intervention by skilled occupational therapists to establish or restore healthy occupational patterns. *Roles* are another form of habituation, which provide a sense of identity, responsibility, and socially defined occupational expectations (Kielhofner, 2009). For example, in most cultures the mother role includes daily tasks of cooking, cleaning, teaching, etc.

Performance capacity, or the individual's underlying ability, impacts the experience a person has when performing occupations (Kielhofner, 2009). Abilities include physical, cognitive, social, emotional, and psychological skills. In contrast to other occupation-based models, MOHO does not directly address these individual subsystems. MOHO however, emphasizes the subjective occupational experience of the individual, which is impacted by these subsystems. Ability impairments can decrease the person's sense of personal causation, volition, and ability to form habits. Therefore, an

4

occupational therapist's role is to support occupational participation and performance of the client by facilitating underlying abilities, aiding to forming adaptive habits and roles, and helping the person find a sense of personal causation (Kielhofner, 2009).

Environment, or the physical, cultural, social, economic, and political contexts, influence the personal characteristics formerly described. Since all occupations occur in a specific context, factors within that environment such as objects, spaces, people, and expectations may alter one's occupational performance (Kielhofner, 2009). For example, brushing one's teeth is often a habitual activity in which an individual has the underlying ability and self-efficacy to complete. If an injury occurs and the individual's dominant hand is incapacitated, however, the individual may not feel confident in their ability to complete the task because the routine method of doing has been destroyed. The person may not be as motivated to complete the occupation of teeth brushing secondary to the change and the extra effort that activity subsequently requires. Occupational therapists aid clients in successfully matching personal and environmental characteristics to allow for optimal occupational performance (Kielhofner, 2009).

Erikson's Stages of Development

Erikson (1997) was a lifespan theorist who studied social interactions and developed eight psychosocial life stages. Each of these eight stages represents a *sensitive period*, which refers to the crisis an individual must overcome at that point in their life (Erikson, 1997). Each stage of the lifecycle will briefly be examined below.

The first stage occurs during infancy and is titled *trust versus mistrust* (Erikson, 1997). In this stage, the child must rely on external factors to meet his/her needs. If needs are not met, mistrust prevails. Around the time of toddlerhood, the development of free

5

will leads the child to the period of *autonomy versus shame and doubt*. In early childhood the child explores independence and the stage is called *initiative versus guilt*. During middle childhood, a child focuses on learning and skill mastery. This period, which is termed *industry versus inferiority*, refers to whether or not the child is successful in their attempt to accomplish a task. As the child transitions to an adolescent, *identity versus role confusion* results from striving to develop a sense of self, fit into a social group, and examine one's skills and abilities for future role possibilities (Erikson, 1997).

Adult stages include *intimacy versus isolation* of young adulthood, *generativity versus stagnation* of middle adulthood, and *ego integrity versus despair* of older adulthood (Erikson, 1997). During the *intimacy versus isolation* stage, young adults form life-long relationships. The *generativity versus stagnation* stage is the period of time in which adults strive to find meaning in their lives by being productive members of society. Adults take part in teaching the next generation, community volunteering, paid work, and through mentoring. As the life expectancy rises, the number of years in this stage is extends to older ages (Erikson, 1997).

The final stage, *ego integrity versus despair*, occurs in older adulthood. In this phase, older adults attempt to look back on their life with a sense of accomplishment (Erikson, 1997). Older adults strive to appreciate the life they have lived and the relationships they have formed, however, if older adults do not feel they have made a difference in the world or feel that it is too late to correct mistakes, despair ensues (Erikson, 1997).

Due to an increase in longevity, it is common for older adults to live well into their late eighties or nineties (Erikson, 1997). This trend has caused a ninth stage to be

postulated. Because adults in the latest stages of life have varying abilities, the ninth stage is not a stand-alone stage, but is instead an integration of all the previous stages. For example, weakened bodies force older adults to mistrust their own abilities and rely on caregivers for their basic needs. This situation results in older adults regressing to the trust versus mistrust stage. Successfully mastery the ninth stage includes avoiding despair through the acceptance declining ability, developing trust in caretakers, and growing in humility. The triumph of mastering the ninth stage is termed *gerotranscendence*. Erikson states that the best way for an older adult to achieve gerotranscendence is through activity activation. Reflecting on life experiences, sharing wisdom with younger generations, and allowing others to meet the basic daily needs are the productive activities of the ninth stage (Erikson, 1997).

Learning Theories

Since Apsler (2009) indicated the use of educational techniques is an important aspect of after-school programming, learning styles of children and older adults should be examined when considering intergenerational programming. After a comprehensive literature review, Janssen (2011) concluded that although overlap exists, preferred learning styles fluctuate throughout the lifespan. The learning style of children, often termed *pedagogy*, highlights the importance of external motivation and dependence: children rely on their teacher to provide a subject-centered learning context with external rewards or punishments for motivation (Merriam, Caffarella, & Baumgartner, 2007). In contrast, *androgogy*, which is the term used to describe the learning style of adults, focuses on self-directed learning that is internally motivated and centered on problem

solving of pertinent difficulties. In androgogy, adult learners use past experiences to influence the way they make decisions and solve problems (Knowles, 1984).

Gerogogy, a term that has emerged in literature yet not officially recognized as a theory, was coined by gerontologist Hans Mieskes in 1956 to describe the unique learning style of older adults (Battersby, 1982; Gibbs & Boughton, 1998; Hogstel, 2001; Knowles, 1984; Lebel, 1978; Merriam et al., 2007). Although gerogogy reflects principles of androgogy, aspects of pedagogy are also noted. Principles of gerogogy include both self-directedness like androgogy and dependency like pedagogy, depending on the learning situation. For example, older adults are motivated to find a sense of integrity, and therefore are likely to be self-directed in this area (Russell, 2008). Older adults, however, may become more dependent upon the instructor when they are challenged to learn a new task such as computer programming (Sterns, Lax, & Chang, 2009). Older adults also prefer observation and reflective learning styles rather than the hands-on methods that are typically preferred by younger adults (Truluck & Courtenay, 1999). Other unique aspects of gerogogy include its center around knowledge, experience, and a quest for integrity (Russell, 2008).

It is important to examine how learning styles vary throughout the lifespan as learning will occur for individuals of all ages in an intergenerational program. Older adult volunteers need to recognize that the preferred learning style of other generations may be different than their own. This understanding will help the older adults facilitate their own learning and the learning of younger generations by utilizing preferred environments and learning styles. When teaching older adult volunteers, it is important to consider the learning style of older adults is especially complex due to its fluctuation

between pedagogy and andragogy learning methods depending on the novelty of the skill being learned. Therefore, a unique mixture of learning styles is likely the best method to use when teaching older adult. MOHO, Erickson's stages of development, and learning theories played a strong role in the development of the intergenerational leisure activity program presented in this scholarly project.

The authors of this scholarly project used the theories in multiple ways. First, MOHO was used to guide their analytical reasoning while conducting the literature review and creating the Intergenerational Leisure Program. Next, they used MOHO, Erickson's stages of development, and learning theories in a concerted manner to form actual components of the Intergenerational Leisure Program. Chapter two reveals the findings of the literature review and describes the positive impact that an intergenerational leisure activity program could have on both the older adults and the youth populations. Chapter three describes the methodology of how the literature and the theories were used to develop this scholarly project. Chapter four is an in-depth description of the product, including instructions and session handouts that can be used when implementation of this product. Chapter five summarizes the main concepts of this scholarly project and provides recommendations for implementation.

CHAPTER II

LITERATURE REVIEW

By the year 2030, the US population of older adults who are 65 years of age or older will increase by 20% (Center for Disease Control, 2008). Even though the population of older adults is growing, the rate of successful aging has decreased 25% from 1998 to 2004 (McLaughlin, Connell, Heeringa, Li, & Roberts, 2009). This decline is leading to a decrease in engagement in meaningful activities (Peralta-Catipon & Hwang, 2011). Because of this growing problem an in-depth literature review was conducted to explore options on how to resolve this growing issue. The purpose of this literature review is to examine how participation in intergenerational programming can support successful aging.

Participation

According to Stav et al. (2012) there is strong evidence that participating in activity and occupations can increase older adults' health and well-being. As adults grow older it is important that they are introduced to the concept that participation in meaningful occupations can positively impact their health and well-being (Jackson et al., 1998). In order for older adults to participate in occupations, it is first necessary to understand what causes older adults to decrease participation in meaningful occupations.

Illness or disability and decreasing occupational participation seem to have a reciprocal relationship. As people age, they begin to change their leisure activities due to

an increase in illnesses and disabilities (Adams, Roberts, & Cole, 2011). Multiple researchers who have studied activity participation among older adults concluded that wellness declines when participation in activity declines (Adams et al., 2011; Clark et al., 2011; Requena Hernandez & Zubiaur Gonzalez, 2008; Jackson et al., 1998; Jung et al., 2009; Peralta-Catipon & Hwang, 2011; Stav et al., 2012); Yamada, Kawamata, Kobayashi, Kielhofner, & Taylor, 2010). This decrease in occupational performance has a negative impact on older adults' ability to age successfully.

Adams et al., (2011) found that the older people become, the less they engage in active occupations and active socialization. As older adults decrease their involvement in those occupations, they begin to have a decline in health and function along with an increase in depression (Adams et al., 2011). For example, if an elderly lady falls and breaks her hip while ambulating in the community, she is less likely to desire community mobility in the future. This decline in physical activity can cause physical and psychosocial declines in all areas of the older adult's life and put him/her at higher risk of disability and therefore impair his/her ability to age successfully.

Multiple factors impact activity participation. Through their study of activity participation, Peralta-Catipon and Hwang (2011) found that age, race, employment, illnesses, and self-perceived health affects personal engagement in leisure activities. For example, cultures such as Asian/Pacific Islander and African-Americans have a much larger decrease in leisure participation than other cultures (Peralta-Catipon & Hwang, 2011). This suggests that psychosocial, environmental, and sociocultural elements impact activity participation. In conclusion, as adults age, occupational participation typically decreases as a result of a unique combination of personal, environmental, and

occupational changes. When older adults are unable to replace or modify occupations

which were enjoyable in the past, occupational engagement becomes less possible,

satisfying, and meaningful, thereby jeopardizing the ability to age successfully.

Successful Aging

Successful aging is a current conceptual framework used in gerontology (Liang &

Luo, 2012; Rowe & Kahn, 1997). Successful aging is a continuum of functional

achievement that is comprised of multiple dimensions, such as mobility, disease, and

socialization (Lowry, Vallejo, & Studenski, 2012). According to Rowe & Kahn (1997)

the three elements that make up successful aging include: a "low probability of disease

and disease-related disability, high cognitive and physical functional capacity, and active

engagement with life" (p. 433). Other theorists also indicate that productivity is a key

factor in establishing or maintaining health and wellness. In the life stages theory,

Erikson highlighted the importance of generativity as humans develop and age (Erikson,

1997).

Although no causal relationship was proved, Schoklitsch and Baumann's (2012)

meta-analysis results indicated that generatively had a consistently affirmative correlation

with higher levels of well-being and life satisfaction. Current researchers concur,

indicating that older adults who engage in productive activities have better functional

levels and higher subjective levels of quality of life (Barron et al., 2009; Bowling &

Iliffe, 2011; Lowry et al., 2012; Jung et al., 2010; Schoklitsch & Baumann, 2012; Weir,

Meisner, & Baker, 2010). Fisher and Specht (1999) found the majority of participants

noted that caring for others was an important aspect in aging successfully. Older adults

can fill this desire for generativity by passing on wisdom and experience through

generative activities such as writing a book or teaching skills to younger generations (Fisher & Specht, 1999).

Generativity is a subjective feeling of being productive; therefore, it is difficult for authors to agree on one definition. After reviewing a plethora of research studies concerning generativity in older adulthood, Schoklitsch and Baumann (2012) concluded that in order for generativity to occur, the older adult must *give back* in some way. Older adults can accomplish this by doing positive activities for society, passing on cultural beliefs and practices, teaching learned skills, and caring for loved ones (Schoklitsch & Baumann, 2012). Oftentimes, this giving back is referred to as volunteering, which will be discussed in a later section. Older adults tend to have a desire to remain generative into late adulthood, which supports overall successful aging.

Benefits of Successful Aging

As older adults age they will see multiple benefits from engaging in productive activities. Jung et al. (2010) conducted a longitudinal study that examined the protective effects productive activities have on geriatric frailty. Three productive activities were assessed: engagement in paid work, childcare, and volunteer work. The researchers measured number of activities, hours spent on productive activities, and whether or not engagement in productive activities occurred, as well as psychosocial issues including religious participation, social participation, emotional support, and personal beliefs about abilities. Frailty was assessed by assessing grip strength, weight, fatigue, gait, and activity level. Results indicated that the chance of frailty decreased in all of the older adults who participated in productive activities, but only participation in volunteer activities (not paid work or childcare) was associated with lower risk of frailty.

Characteristics of those who engaged in productive activities included being younger, having higher levels of education, having good cognitive functioning, attending religious services and social clubs, and reporting higher self-mastery and emotional support beliefs (Jung et al., 2010).

Another benefit of successful aging includes an improved sense of life satisfaction, often referred to as *quality of life* (QoL). There are certain factors that can influence the future QoL that an adult may have. Bowling and Iliffe (2011) studied the effects of biological, social, and psychological baseline measures on future QoL ratings for older adults. Results indicated that the psychological approach was the only significant indicator of future QoL. Other factors, such as prevention techniques and healthy lifestyle, may elongate life span, but were not significant predictors of good quality of life. In addition, results indicated that being in good health at follow-up, having a supportive social network, and staying active also predicted high QoL. Therefore, to age successfully, older adults should participate in both physical and psychological approaches to health (Bowling & Iliffe, 2011).

Even if older adults are in poor health, they are still able to participate in different activities that can increase their QoL. Barron et al. (2009) explored whether older adults who are in poor health benefit from volunteering in high intensity activities. Results indicated that participants decreased the amount of time per day that was spent watching television and experienced an increase in meaningful activities and roles. Volunteering with children is a fitting occupation for the life-stage of older adults because through giving back to society in a meaningful way, the older adults feel a sense of generativity (Barron et al., 2009). Schoklitsch and Baumann (2012) agreed, but found that this was

only true when the productive activity is voluntary. When the generative activities were performed out of strict obligation, the generativity did not always lead to improved QoL (Schoklitsch & Baumann, 2012). Although successful aging has been a prominent aging framework for several years, contemporary approaches to aging have recently criticized the successful aging theorists for taking on a win/lose attitude.

Harmonious Aging

Harmonious aging is another term that is preferred over successful aging by some authors. Liang and Luo (2012) found the successful aging frame of reference problematic, stating that it is ageist, focuses on being busy without examining the quality of the activity experience, and has capitalistic and consumeristic components. Furthermore, successful ageing is not applicable to other cultures since it was built on the values of the American society. Liang and Luo (2012) stated that the term successful aging implies that older adults either win or lose in their pursuit of happiness. In lieu of successful aging, Liang & Luo (2012) proposed that harmonious aging be implemented in gerontology to promote cross-cultural communication and more positive attitudes.

Harmonious aging is a philosophy focused on maintaining balance between body, mind, environment, and coping, it is a compromise between activity and disengagement, body and mind, differences and uniformity, individuality and interdependence, and challenges and opportunities (Liang & Luo, 2012). In addition, harmonious aging allows individuals to develop their own recipe for positive aging. While successful aging focuses on individual maintenance and business, harmonious aging takes a dialectic and holistic approach to establish complementary coexistence of multiple aspects of each individual and their context. Harmonious aging is a novel concept that acts as an overarching

umbrella to include a variety of different, and even conflicting, gerontology theories and models. The originators of the harmonious aging concept stated, "Harmonious aging provides a more comprehensive yet less normative framework. In this respect, inclusion of concepts such as body and mind, activity and contemplation, interdependence, intergenerational harmony, and cultural diversity can be the essences of this paradigm shift" (Liang & Luo, 2012, p. 333). Despite the differences between successful aging and harmonious aging, authors agree that while both represent positive aging, they can both be interrupted by negative aspects associated with aging.

Unsuccessful Aging

The aforementioned negative interruptions can result in a condition of unsuccessful aging. Unsuccessful aging occurs when the criteria for successful aging, which include the absence of disease/disability, engagement in life, and superior cognitive/physical functioning, are not met (McLaughlin et al., 2009; Rowe & Kahn, 1997). According to McLaughlin, Connell, Heeringa, Li, and Roberts (2009) the prevalence of successful aging has decreased 25% from the year 1998 to the year 2004. These statistics are concerning, especially considering that only about 12% of the population met the criteria for successful aging in 1998 (McLaughlin et al., 2009). Populations that have the highest risk of unsuccessful aging include oldest adults, males, and people from low socioeconomic backgrounds (McLaughlin et al., 2009). Furthermore, Weir, Meisner, and Baker (2010) found that unsuccessful aging occurs most frequently when cognitive and physical impairments are present. Interventions that prevent physical declines and promote recovery in functional areas should be developed and further researched (Lowry, Vallejo, & Studenski, 2012).

Although the biomedical health approaches are the most widely used indicators for successful aging, few older adults meet the criteria of aging successfully (Bowling & Iliffe, 2011). This indicates a need for more or different public health services, especially for those groups of people who are at high risk of not meeting the successful aging criteria (McLaughlin et al., 2009). High-intensity productive activity through physical exercise and recreational activities are beneficial ways for older adults, even those in poor health, to get involved in the community and improve their health (Barron et al., 2009; Lowry et al., 2012). Little variation exists in the engagement in occupations of people between the ages of 65 and 80, possibly because older adults compensate for their loss of function by adapting the activity. Programs that encourage a healthy, active lifestyle and mental stimulation should be promoted to increase the probability of positive aging for all older adults, despite their age or level of frailty (Weir et al., 2010). Because psychological aspects of health predict QoL, it is important for self-efficacy, confidence, life purpose, coping strategies, optimism, and resilience to be addressed while providing services to older adults. Therefore, volunteer programs for older adults, which use a meaningful biopsychosocial approach, should be developed and promoted to increase successful aging and decrease the prevalence of ageism (Barron et al., 2009).

Ageism

Ageism is a common component of unsuccessful aging and an important consideration when developing intergenerational programs. The term 'ageism' was coined in 1968 by Butler, who identified discrimination against older adults in his community (Butler, 2005). The discrimination Butler witnessed reminded him of the breech against the equal rights of women and people with varying shades of skin that is

known today as sexism and racism. Although Butler intended for ageism to be a term that could describe either the negative attitude of elderly toward youth or vice versa, it soon became apparent that discrimination against the elderly was more common (Butler, 2005). Prior to the coining of the term ageism, most people were not aware that this problem even existed, and therefore, little was done to stop it. Since its coining, however, ageism has evolved into a commonly known term and steps have been taken to protect the rights of older adults (Butler, 2005; Palmore, 2005).

Ageism is conceptualized in different ways. Calasanti (2005) described ageism as a culturally constructed phenomenon that causes self-oppression in the form of either attempting to evade the aging process or the condemning of self when the realization of aging sets in. According to Calasanti, "Ageism includes categorization, stereotyping, and prejudice, but the most crucial aspect is exclusionary behavior" (Calasanti, 2005, p 8). Palmore (2005) also had a grim outlook on ageism. He described ageism as a social disease that creates unnecessary anxiety, illness, and desolation in our society. Through his study of jokes about age, Palmore (2005) concluded that ageist attitudes were rooted in the decline in function that older adults experience. While these jokes often targeted physical and mental declines, older adults were also presented in a negative light for declining in physical attractiveness and sexual ability (Palmore, 2005). Ageism differs from other forms of discrimination in that everybody is vulnerable to it. Although the anti-aging industry can assist in hiding signs of aging, nothing can stop the aging process (Calasanti, 2005). Because aging is unavoidable and negative stereotypes about aging only serve to increase the hopelessness, steps should be taken to portray aging in a more positive light. An intergenerational program could potentially help older adults feel more

productive and satisfied as they age, as well as dispel the younger generation's negative myths about aging.

Because ageism is culturally constructed, members of society have the potential to reverse this phenomenon. While the aging *Baby Boomer* population, which includes persons born between 1946 and 1964, poses a challenge to society, they also provide an opportunity to respond to those complications with creative solutions (Longino, 2005). Baby Boomers are expected to reshape society's views of elderly by demonstrating to younger generations that older adults can be active, retain young looks, and challenge stereotypes (Calasanti, 2005). The good health, volunteerism, active lifestyle, and work productivity of the Baby Boomers will support the concept of successful aging and are expected to decrease explicit ageism (Longino, 2005). Therefore, intergenerational programs have an important role in both promoting successful aging and decreasing ageism.

Decreasing Ageism

There are different ways that society can decrease ageism and the effects ageism can have on older adults. Gonzales and Morrow-Howell (2009) studied aging-friendly communities and concluded that although employment, infrastructure, healthcare, civic engagement, transportation, and supportive services are important aspects of aging-friendly communities, these aspects are not sufficient. Older adults participating in productive activities support communities that are aging friendly; therefore, these programs should be developed and supported (Gonzales & Morrow-Howell, 2009).

By developing aging-friendly communities and raising awareness of ageism in society, such stigma can be decreased. Butler (2005) hypothesized that as people become

19

more sensitive to sexism and racism, it is likely that attitudes of ageism will decrease as well. There is, however, action that should be taken to catalyze the elimination of ageism. Legislative initiatives should be continued, resources should be allocated, and youth should be educated to help them better understand ageism (Butler, 2005; Palmore, 2005). In addition, personal example, protest, persuasion, and increased awareness efforts can assist in decreasing ageism (Palmore, 2005).

Longino (2005) predicted that by increasing aging awareness, wrinkles will become normal and marketers, who want to flatter older adult consumers, will shed a positive light on the elderly population. This change in the cultural attitude will also affect structural ageism, or the restriction of opportunities for elderly, evolve as institutions make room for the aging population (Longino, 2005). Programs that promote volunteering and employment enhance the likelihood that a community will be aging-friendly (Gonzales & Morrow-Howell, 2005). As society, structural institutions, legislation, and the consumer market evolve, it is important that older adults are provided with opportunities to engage in meaningful, productive activities. Researchers suggest that intergenerational programming is effective in decreasing ageism among youth and lead to higher life satisfaction for the adult volunteers (Kamei et al., 2011; Schwanbach & Kiernan, 2002; Tang, Choi, & Morrow-Howell, 2010).

Benefits of Activity

The decrease in occupational engagement as older adults age is concerning because activity participation has been linked with multiple health/wellness benefits. Jackson et al. (1998) examined the impact regular physical leisure participation had on older adults. The study found that people who participated in a wellness program

experienced a decrease in disability effects. Furthermore, the longer people participated in the program, the greater the mortality rate reduction (Jackson et al., 1998). Jung et al. (2009) found similar results with a study on how productive activities protect against frailty in older adults. Jung et al., (2009) discovered that by keeping older adults involved in various activities, their rate of frailty was reduced. Furthermore, the results of reduced frailty were evident for as much as three years later.

There have been milestone studies conducted that present evidence that shows that wellness programs can have a positive effect on older adults overall wellness. Jackson et al., (1998) developed and implemented a wellness program entitled *Lifestyle Redesign,* based on the premise that participation in meaningful activities, or occupations, leads to healthier aging among older adults. The researchers found that people who participated in the wellness program had a decrease in the effects that their disabilities had on them. This is important for older adults to understand because by lowering the symptoms of disability, they are more inclined to have a high life satisfaction. When dealing with leisure activity, it is important to understand that not all older adults have the same physical or cognitive level. Activities may need modification in order to individualize the activity for each client. Getting all older adults involved at any level is going to be beneficial for their well-being (Jackson et al., 1998).

A follow up Well Elderly study done by Clark et al. (2011) reinforced the information by showing statistical difference in the physical and psychological well-being of people who participated in the wellness program for six months compared to people who did not participate. The follow-up study was slightly shorter in duration (six months versus nine months) and participants split into an occupational therapy

intervention group and an untreated group (the social group from the first study was not used). The results of the study suggested that engagement in activities not only increase physical and psychological well-being, but also gave people an increased life satisfaction. The physical areas most affected by activity included a decrease in body pain and an increase on physical function scales. The psychological areas that are positively affected by activity participation include mental health, an increase in social function, and a decrease in depressive symptoms (Clark et al., 2011).

Not only can activity participation have a positive effect on older adults' physical wellness, but it can also have a positive effect on older adults' psychological wellness too. Yamada et al. (2010) found a statistically significant change in people's psychological well-being from the beginning of the participation in a leisure activity group to the end. The results of this study indicated that if older adults are engaged in leisure activities on a daily basis, they will have higher psychological well-being and a lower risk of depression (Yamada et al., 2010). Hernandez and Gonzalez (2008) conducted a study that involved an intergenerational program for older adults who were slightly depressed. The results of the study were similar to the previous studies in that the older adults had a decrease in depression after participating in the intergenerational program (Requena Hernandez & Zubiaur Gonzalez, 2008). Therefore, involvement in occupations can increase psychological well-being in addition to increasing physical well-being.

An increase in motivation to continue with meaningful occupations is yet other benefit older adults can gain from occupational participation. Motivation is one of the main factors that contribute to older adults' participation in health activities. Pereira and

Stagnitti (2008) found that if an older adult finds an activity to be internally rewarding, they are more likely to repeat the activity. Continual engagement will multiply the benefits of activity participation and increase the amount of satisfaction experienced. It does not matter if they engage in activities by themselves or with others as long as they are doing activities that they find meaningful (Pereira & Stagnitti, 2008). As long as older adults stay active, they are likely to have better mental and physical health (Jackson et al., 1998).

As people grow older, they begin to change their roles and activity interests (Adams et al., 2011). There are a variety of occupations that older adults can engage in that can help their overall well-being, but there is no particular activity that impacts the health and quality of life of all older adults (Stav et al., 2012). In a meta-analysis study, Stav et al. (2012) discovered that areas such as work, involvement in the community, leisure, and social activities all supported health in older adults. Older adults will find the experience more satisfying and will see better health outcomes if they choose activities that they enjoy (Yamada et al., 2010).

If older adults are motivated by the activities available to them, they are more likely to engage in the activity. As older adults age, they need to continue to be involved in activities to avoid health declines (Jackson et al., 1998). Engagement in activities is one of the best ways that older adults can increase their physical and mental health (Stav et al., 2012). Older adults, therefore, need to be educated on the importance of staying involved in activities and the positive benefits occupational participation can provide (Jackson et al., 1998). There are many different activities that older adults can participate in, but volunteering was found to be the most beneficial (Barron et al., 2009).

Volunteering

Older adults benefit from engagement in meaningful occupations; volunteering is a great way for older adults to participate in meaningful, productive, integrity-building occupations. The gift of time without financial compensation, also known as volunteering, is a common ethical practice in the US (Grimm, Spring, & Dietz, 2007). Non-profit organizations across the US coordinate volunteer activities in order to channel volunteers' donated and unpaid time, energy, and talent into multibillion dollar service projects that positively influence society. According to the Corporation for National and Community Service [CNCS] (2011), 26.5% of the US population participates in formal volunteer services each year. This adds up to 8.1 billion hours and a value of $173 billion per year (CNCS, 2011). In addition, informal volunteer activities, which are difficult to quantify, further escalate the dramatic impact volunteering has on the nation. With an increasingly large amount of older adults in the US, the older adult population can make a dramatic difference though their volunteer participation.

According to the CNCS (2011) the Midwest states have the highest volunteer rates. Factors that promote volunteerism in the Midwest include: a high number of nonprofit organizations per capita, high attachment to the community, a low rate of foreclosures, low rates of poverty and unemployment, and high levels of education. The volunteer rate in North Dakota (ND) is higher than the national average, with almost 162,000 ND citizens (31.8%) who volunteered 15.8 million hours of formal volunteer service in 2010. Another 13.9% of the ND population volunteered informally. This adds up to $354.9 million worth of service. The volunteer rates in Minnesota (MN) are even higher than in ND ranking 3rd in the nation, with 39% of MN citizens volunteering a total

higher than in ND ranking 3rd in the nation

of 18.8 million hours per year (CNCS, 2011). These statistics are important are important considerations because volunteering contributes positively to the successful aging of older adults. Since people in the Midwest have already established beliefs and values that hold volunteering in high esteem, older adults from this area would receive the most optimum benefits from volunteer participation.

Although the rate of volunteerism varies throughout the country, the characteristics of volunteering remain similar around the nation. The majority of volunteers are affiliated with religious organizations (36.5%) with educational organizations coming in second (20.8%) and social service organizations in third (12.4%) (CNCS, 2011). Volunteer activities can be carried out in numerous ways. The top four volunteer activities are fundraising, collecting and distributing food, physical labor, and management activities (CNCS, 2011). These additional statistics about volunteerism can provide further insight into the values and beliefs of people who participate in volunteer activities in order to enable volunteer program coordinators to target the correct population. The older adult population is of particular interest as they have a high level of talent/experience, are motivation to share their wisdom with younger generations, make up a large portion of the US's total population, and can benefit by aging more successfully when they are meaningfully engaged.

Volunteering Baby Boomers

While the total number of volunteers on the national level has decreased from 28.8% in 2003 to 26.3% in 2010, older adults from the *Baby Boomer* generations have higher rates of volunteerism than past generations (CNCS, 2011; Foster-Bey, Grimm, & Dietz, 2007; Hank & Erlinghangen, 2009). The Baby Boomer generation makes up a

large part of the growing older adult population, accounting for 77 million Americans (Foster-Bey et al., 2007). This group has high education levels, can contribute a variety of skills, and is wealthy enough to make a significant impact on the volunteer world (Foster-Bey et al., 2007; Uhlenberg, 2009).   As the Baby Boomers retire, their skills and abilities will be more available to solve social dilemmas. In addition to talent, the Baby Boomers play a key role in financially supporting non-profit organizations, to which they are more likely to donate to if they have an affiliation with the organization (Foster-Bey et al., 2007).

The Baby Boomers are a distinct group in the current society and have unique volunteer interests. Although religious organizations are the most common volunteer organizations nationwide, this trend is amplified for older adult volunteers (CNCS, 2011). Almost half of the volunteer hours of older adults are spent with religious organizations (Foster-Bey et al., 2007). One form of volunteering that has a positive impact on older adults is participating in intergenerational programs (Souza, 2011). Not only can participating in intergenerational programs improve health status, but it can also increase socialization for older adults (Souza, 2011). The Baby Boomers are setting a new volunteer trend by increasing the amount of service hours dedicated to educational organizations. With three times as many older adults obtaining secondary education degrees than 15 years ago, the value of mental stimulation has increased. Education is now the second most common organization with which older adults volunteer (Foster-Bey et al., 2007). The large amount of Baby Boomers, in addition to qualities of high education levels, financial stability, and plethora of time and talent/experience puts the Baby Boomers in a unique position to benefit society through their participation in

volunteer activities. The beneficence of volunteer activities is further intensified by the positive effects engagement in volunteer activities has on the health and wellness of the older adult volunteers.

Benefits of Volunteering

Older adults can receive multiple health/wellness benefits from volunteering. Through volunteering, older adults can make the world a better place while simultaneously receiving a feel-good sensation sometimes referred to as *helpers high* which contributes to an overall sense wellness (Grimm et al., 2007). In addition to social benefits, such as helping those less fortunate, researchers have recently focused on the individual health benefits of volunteering. Health benefits include: lower rates of depression, frailty, and mortality, as well as better physical and functional abilities (Grimm et al., 2007; Jung et al., 2009; Kamei et al., 2011; Konrath, Fuhrel-Forbis, Lou, & Brown, 2012; Piliavin and Siegl, 2007; Stav et al., 2012). Furthermore, researchers have indicated that the health benefits increase as the amount of time spent volunteering increases (Grimm et al., 2007; Konrath et al., 2012; Piliavin & Siegl, 2007). Older adults, who are most prone to disease and illness, receive the most positive health benefits from volunteering (Grimm et al., 2007). These benefits are particularly helpful for older adults who have a low socioeconomic status and generally feel less capable of contributing to society (Tang, Choi, & Morrow-Howell, 2010).

Older adults, regardless of health status, can benefit from volunteering (Barron, Tan, Yu, Song, McGill, & Fried, 2009). As adults' transitions to the older adult stage of life, volunteering provides opportunities to engage in social interaction and physical activity, explore new hobbies, grow personally, and find a sense of purpose and meaning

(Grimm et al., 2007). Hank and Erlinghangen (2009) examined the volunteering

dynamics of older adults through a longitudinal study of volunteer participation in

individuals 75 years of age or older. The authors found that social environments (family

culture and welfare state regime), individual characteristics, and time constraints were the

main determinants of volunteer participation. Those in poor health were least likely to

engage in new activities, whereas highly educated and people who were not employed for

financial gain were the most likely to begin and continue new volunteer activities.

Gender and marital status had no significant influence on beginning new volunteer

occupations (Hank & Erlinghangen, 2009).

In order to improve retention rates for volunteers, nonprofit organizations should

create opportunities to make use of the talents the Baby Boomers have to offer. To

accomplish this goal, incentives for the volunteers, increased awareness and opportunities

to engage, and financial support of the programs should be made available (Uhlenberg,

2009). Best practice techniques include matching the volunteer to their interests,

providing an appropriate level of challenge, demonstrating the value of the volunteers,

providing opportunities for positive volunteer experiences (Foster-Bey et al., 2007;

Horowitz & Chang, 2004; Tang et al., 2010). Because older adult volunteer retention

rates are the highest for management, performance, and mentoring volunteer roles, these

roles should be further explored in order to appeal to the volunteer's interests (Foster-

Bey, Grimm, & Dietz, 2007).

Volunteering can have the same effect on older adults' health and wellness as

activity participation can. Volunteering has a positive effect on physical and mental

health (Stav et al., 2012).   The studies described above summarize the current literature

that supports the relationship between volunteering and good health. Volunteering is beneficial on all levels: Socially on global, national, and community levels, as well as on the individual level. Volunteering is the most significant activity in lowering frailty over time and has an even greater impact on older adult's health than paid working (Jung et al., 2009). Because volunteering is most beneficial to the older adult population, which is increasing at a rapid rate, the significance of the volunteer studies is especially pertinent to society at the current time.

After School Programming:

While volunteerism among older adults is increasing, the number of after-school programs that are being offered to adolescents is also on the rise (Apsler, 2009). The reason for this increase is because of all the benefits that are being found in children participating in after-school programs (Pierce, Bolt, & Vandell, 2010). With the interest of after-school programs for adolescents at an all-time high, it is important to understand what makes an after-school program effective (Pierce et al., 2010). Children who do not participate in an after-school program are at risk of inactivity, participation in unhealthy activities, and decrease in a child's resources for healthy activities (Moore et al., 2010). In contrast, children who do participate in after-school programs have increased opportunities to benefit from the programs in which they partake.

Benefits of After School Programs

After school programming can have multiple benefits to children who participate in them. Positive benefits include: increasing positive social behaviors, increasing children's self-perceptions, better school grades, and better scores on achievement exams (Durlak, Weissberg, & Pachan, 2010; Pierce et al., 2010).   Furthermore, Souza (2011)

found that intergenerational programs facilitated better relationships with parents and grandparents, better stress management, a better understanding of what is important in life, and improved the children's social skills with adults. Another positive benefit of participating in an after-school program includes the development of healthy leisure activities (Moore et al., 2010). In a study by Pierce et al. (2010) children who participated in an after school program experienced an improvement in both work habits and social skills. Participation in the right after-school program increases a child's academic achievements, social skills, and work habits in the classroom (Peirce et al, 2010). In order for these positive benefits to occur, the after-school program must have specific aspects.

Swanson (2004) developed an after school Leadership Development Program for her scholarly project at the University of North Dakota (UND). The program was designed to prevent the development of psychological and behavioral issues for early adolescents (12-14 year olds) through after-school programming focused on positive lifestyle habits. An occupational therapist would oversee the program, but adult volunteers that were not parents of the students participating would implement the sessions. Although never implemented, this program has the potential to be adopted by the North Dakota Department of Public Instruction and executed in North Dakota schools to promote healthy adolescent development through occupational engagement in age-appropriate activities such as social and leisure participation (Swanson, 2004).

Aspects of Successful After School Programs

There are key components that contribute to success in an after school program. According to Pierce et al. (2010) an effective after-school program needs to have three

important factors: a positive relationship between the staff and children, a variety of activities that the children can partake in, and flexibility to allow children to select a desired activity. Apsler (2009) found that setting specific goals, using educational techniques to structure the program and frequent attendance call all lead to noticeable gains in adolescents that participate. In addition, Edwards, Miller, and Blackburn (2011), found that in order for an after-school program to increase the quality of life and well-being of children, it needs to address academic achievements, social and emotional development, and promote the child's health. Durlak et al., (2010) stressed the importance of a community setting for the after-school program because it will increase adolescent's personal and social well-being. Using the key components listed above to develop a program will help the program to be successful.

In addition to key components of program development, the child's role in the program can also affect the success of the program. After-school programming needs to give children the opportunity to actively work on personal and social skills in order for the program to be affective for the child (Durlak et al., 2010). According to Souza (2011), a successful programming facilitates the child's ability to engage in the development and maintenance of intergenerational relationships, practice positive coping strategies, and generate values and beliefs (Souza, 2011). Training of the staff is also important to the outcome of the program.

Staff training can make the difference between an effective program and a non-effective program. Durlak et al., (2010) conducted a meta-analysis and found that specific skill training is what will make an after-school program effective or not. Using step-by-step training of staff, giving children active ways to learn, focus time on training of staff,

31

and setting clear goals are the specific skills that should be used when training staff and developing an after-school program (Durlak et al., 2010). All of these specific skills need to be used together or they will not have a positive impact on the training (Durlak et al., 2010). Leaders of after-school programs need to follow the latest research so they can design the program that has the best benefits possible for the children (Edward et al., 2011). It is very important that staff keeps a positive and supportive manner during the program because it is related to how the children performed in the program (Pierce et al., 2010). The staff that runs the program is just as important as how the program is organized.

Through using evidence-based research during program development, as well as having properly trained staff, the likelihood that the children will benefit from an after-school program is enhanced. After-school programs can help children become healthier in their mental, physical, and social well-being (Souza, 2011). With all these benefits of an after-school program, there has been an interest and a need for the development of more quality programs (Pierce et al., 2010). How a staff is trained and how they act during the program can largely influence the program's outcomes (Durlak et al., 2010; Pierce et al., 2010). Program developers can use this research to create the most beneficial after school program possible.

Intergenerational Programs

Afterschool programs may be beneficial when presented in an intergenerational format. This would allow the children to benefit from the after-school program, the older adults to benefit from the increased health/wellness that volunteering brings, and facilitate understanding and positive relations between generations. Intergenerational

programming has reciprocal benefits directed towards both children and older

adults through the interactions they have with each other. Current literature

indicates that programs that unite older adults with younger generations have positive

impacts on both generations (Hall & Batey, 2008; Kamei et al., 2011; Requena

Hernandez & Zubiaur Gonzalez, 2008; Schwalbach & Kiernan, 2002; Uhlenberg, 2009).

Intergenerational programs open up the opportunity for older adults to feel productive by

passing on knowledge to the next generation and decreases children's negative

perceptions of elderly (Dunham, 2009; Hall & Batey, 2008; Kamei et al., 2011;

Schwalbach & Kiernan 2002).

Demographic Shift

The U.S. currently has a large proportion of older adults and small proportion of

children due to lower mortality and fertility rates than in the past (Uhlenberg, 2009). This

means that older adults are living longer, and a fewer amount of children are being born.

The decline in fertility of the 1960s decreased the amount of children, but increased the

proportion of children born to unmarried mothers and children whose parents got

divorced. These family structure changes resulted in higher rates of economic deprivation

for the children (Uhlenberg, 2009). With the increase in single parent families, children

have a higher need for positive adult role models in their lives.

While the younger generation has a need for positive role models in their life, the

older generation has time and talents to offer (Foster-Bey et al., 2007; Uhlenberg, 2009).

Although grandchild-grandparent relationships are primary, non-related intergenerational

relationships through volunteer programs can also be beneficial for the older adults and

for the children, and especially for disadvantaged children who may not have access to

positive role models (Souza, 2011; Uhlenberg, 2009). Uhlenberg (2009), therefore,

encouraged elderly people to mentor and care for disadvantaged children through

volunteering in intergenerational programs because supporting the disadvantaged

children in the current generation will have lasting social benefits in the generations to

come.

Benefits of Intergenerational Programs

Intergenerational programs have a unique way of meeting the needs of both

populations while allowing both older adults and children to reap the benefits. Souza's

(2011) school-based intergenerational program resulted in positive outcomes for both the

older adults and children. Mutual learning, respect for elders, and self-expression were

benefits of the program. Elders liked that the program bridged the generation gap, made

them feel valued, and allowed them to see young people in a positive light. Students and

elders alike mentioned that they felt more self-worth and less stressed after the program

due to being heard, understood, and busy with a meaningful activity. Results indicated

that the program positively impacted participant's perception of their family

relationships, understanding of the other generation, solidarity, and health status. The

participants recommended that this program be implemented to improve quality of life

and help form a cohesive unit of intergenerational support. The program was specifically

recommended to orphans and people who are at risk for violence and drug and alcohol

abuse. The intergenerational program had benefits for all participants, and helped create

a happier, more cohesive, and healthier society (Souza, 2011).

Further, researchers presented health benefits for older adult volunteers who

participate in intergenerational programs (Kamei et al., 2011; Requena Hernandez &

Zubiaur Gonzalez, 2008). The longitudinal intergenerational program Kamei et al. (2011) implemented benefitted the older adult participants both physically and mentally. The program provided opportunities for meaningful, intergenerational social relationships that facilitated communication and the exchange of culture and wisdom. While volunteering with children, older adults' mental health improved and depression rates decreased significantly. Both generations benefitted from feelings of self-worth, a sense of belonging, and mutual respect (Kamei et al., 2011).

A study by Requena Hernandez and Zubiaur Gonzalez (2008), examined how an intergenerational service-learning program affected the 101 slightly depressed older adult volunteers and the 179 college students. The study results indicated that older adults who participated in the intergenerational program had significantly improved their state of mind and perception of self than those who did not participate. Those who interacted with the students experienced a decrease in depression symptoms, while the older adults who did not, experienced a worsening of symptoms. The student's stereotypes about elderly adults were not significantly different, although a decrease in stereotypical attitudes was indicated (Requena Hernandez & Zubiaur Gonzalez, 2008). The psychosocial benefits the older adults received in this study indicate the positive contribution intergenerational program participation can have on the holistic health and well-being on older adults.

Elements of Successful Intergenerational Programs

In order for an intergenerational program to be successful, it needs to follow specific criteria. Hall and Batey (2008) found that certain aspects of intergenerational programs enhanced the success of the program. Proper training of the senior volunteers facilitated a deeper understanding of concepts for the students. In programs where the

senior volunteers had been properly trained, children were more likely to see positive

examples of elderly people and better analyze the material presented (Hall & Batey,

2008). Furthermore, Jarrott and Smith (2010) found that the use of evidence-based

contact theory practices, such as status equality, working together to achieve a goal, and

friendly relationships, also improved the outcomes of intergenerational programs. For

example, when older adults sat at the same level as the children, asked the children for

input, and took on a more collaborative role, the program had better results than when the

older adult took on the role of a dictator who had a higher power level than the children.

In conclusion, intergenerational programming is most beneficial when a strategic,

informed approach is implemented.

If the appropriate approach is implemented in an intergenerational program both

older adults and children can benefit from the program. Despite the individual and social

benefits of intergenerational interactions and the increasing amount of elderly people, few

children are exposed to the elderly population due to age segregation (Uhlenberg, 2009).

According to Uhlenberg and Gierveld (2004) only 85% of adults over the age of 80 years

had no contact with a non-related person younger than 65 years of age on a weekly basis.

Therefore, a need exists for intergenerational programs that unite youth with older adults,

have a strategic, informed approach, and appeal to both generations' interests.

Existing Intergenerational Programs

Intergenerational programs can have benefits for both children and older adults.

These benefits for children include: increased social skills, increase in academic success,

decrease in drug use, and better stability in their lives (US Environmental Protection

Agency, 2011). For older adults benefits include: increased socialization, improved

health, increased learning, and increased emotional support (U.S. Environmental Protection Agency, 2011, October 13). With all these benefits for both children and older adults comes the development of multiple intergenerational programs. All intergenerational programs take a different approach as to how children and older adults will interact. The chart below gives a list of multiple different intergenerational programs located in the US and Canada. The chart also identifies what the main purpose of the program is and what ages of people are involved in the program. This list does not highlight all programs in the US and Canada, but it gives a good picture of what kinds of programs are available and where they are located.

Table 2.1 below shows multiple intergenerational programs that are available in the US and Canada. Most of these programs are located far from North Dakota and are only available to limited amounts of children and older adults. This chart shows a need for not only an intergenerational program in North Dakota, but also an intergenerational program that is occupation-based. None of the programs listed below involve older adult volunteers teaching children about their favorite hobbies. Only about half of the programs above have research to back up the program and show its validity and effectiveness. All the programs listed are only available in large cities, indicating a need for more intergenerational programs in rural communities. There is a definite need for more intergenerational programs in North Dakota and the Midwest as a whole, especially a program that involves older adults teaching youth occupation based activities.

Table 2.1

Current Intergenerational Programs Available in the US and Canada

Program Name	Program Purpose	Participants	Location and Research	Source
Intergenerational Outdoor School Program	Older adults teach students about caring for nature and the environment over the course of four days.	4th grade students and older adults	-Pennsylvania State University -Pilot study only	(U.S. Environme ntal Protection Agency. 2011, November 15)
Family Friends Environmental Health Project	Older adults educate children about environmental health issues (i.e.- lead poisoning, second-hand smoke, and house-based health risks).	Children and older adults	-Developed by Temple University -Three programs in the US -Research results have not yet been released	(U.S. Environme ntal Protection Agency. 2011, November 15)
Intergenerational Citizens Action Forum	Older adults teach students about public policy issues and work to effect public policy change.	High school students and older adults	-Miami-Dade County Public Schools -No research collected	US Environme ntal Protection Agency, 2011 1b
Habitat Intergenerational Program	Program promotes intergenerational relationships, environmental learning, and a sense of environment management.	All ages	-Held at habitat education center and wildlife sanctuary in Belmont, MA -No research exists	US Environme ntal Protection Agency, 2011 1b
Garden Mosaics	Older adults educate youth on plants and planting practices.	Youth ages 10-18 years and older adults	-Developed by Cornell University -11 locations with St. Paul, MN as the closest -Based off research	US Environme ntal Protection Agency, 2011 1b

Note. Table developed by authors to give readers a good idea of all the different intergenerational programs available.

Table 2.1

Current Intergenerational Programs Available in the US and Canada

Program Name	Program Purpose	Participants	Location and Research	Source
Intergenerational Landed Learning	Retired farmers teach students to farm care for the land.	7th grade students and retired farmers	-University of British Colombia, Vancouver, B.C., Canada. -Pilot study only	US Environmental Protection Agency, 2011 1b
Adopt a Grandparent	Isolated older adults are paired with young adults to increase companionship and support through phone calls, visits, and community outings.	Adults 21 years and older and isolated older adults	-Program held in Atlanta, GA. -No research exists.	Adopt a Grandparent Program, 2012
Little Brothers: Friends of the Elderly	Older adults take students on field trips and service projects to learn about aging, the value of volunteering, and the older adults experiences.	Students in grades K-12 and older adults	-Program held in Chicago, IL. -No research exists.	Little Brothers, 2012
Foster Grandparents Program	Older adult volunteers provide support and attention to disadvantaged youth through spending one-on-one time with them to help with homework, etc.	School-aged children and older adults over 60 years old.	-Program held in Chicago, IL. -No research exists.	Illinois Department of Aging, 2012
Generations United: Intergenerational Shared Solites	Older adults in a long term care facility (Villa Maria) and daycare children share facilities in the community to allow socialization and daily interaction.	Preschool children and older adults	-Available throughout the US with Fargo, ND as the closest -Research indicates effectiveness and validity.	Generations United, 2009

Note. Table developed by authors to give readers a good idea of all the different intergenerational programs available.

Table 2.1

Current Intergenerational Programs Available in the US and Canada

Program Name	Program Purpose	Participants	Location and Research	Source
St. Benedict's Health Center Intergenerational Program	Once a week St. Benedict's Health Center brings children from a nearby daycare center to the nursing facility, to play with toys and do art projects together.	Children between the age of 1-5 and older adults	-St. Benedict's Health Care Center in Dickinson, ND. -No research exists	Dolechek, 2012
American Association of Retired Persons (AARP) Experience Corps	Older adults mentor students, help them with school work, and set a good example for the children.	K-3rd grade students and older adults over the age of 55 years	19 sites with the closest to ND located in Minneapolis and St. Paul, MN. Developed by credible researchers.	(AARP, 2011)

Note. Table developed by authors to give readers a good idea of all the different intergenerational programs available.

Learning Styles of Older Adults

Since Apsler (2009) indicated the use of educational techniques is an important aspect of after-school programming, learning styles of children and older adults should be examined when considering intergenerational programming. After a comprehensive literature review, Janssen (2011) compiled a chart summarizing the different learning styles of children, adults, and senior citizens. Janssen concluded that although overlap exists, preferred learning styles fluctuate throughout the lifespan.

The learning style of children, often termed pedagogy, highlights the importance of external motivation and dependence: children rely on their teacher to provide a subject-centered learning context with external rewards or punishments for motivation (Merriam, Caffarella, & Baumgartner, 2007). In contrast, androgogy, which is the term

used to describe the learning style of adults, focuses on self-directed learning that is internally motivated and centered on problem solving of pertinent difficulties. In androgogy, adult learners use their past experiences to influence the way they make decisions and solve problems (Knowles, 1984).

Gerogogy, a term that has emerged in literature but is not officially recognized as a theory, was coined by gerontologist Hans Mieskes in 1956 to describe the unique learning style of older adults (Battersby, 1982; Gibbs & Boughton, 1998; Hogstel, 2001; Knowles, 1984; Lebel, 1978; Merriam et al., 2007). Although gerogogy reflects principles of androgogy, aspects of pedagogy are also noted. Principles of gerogogy include both self-directedness like androgogy and dependency like pedagogy, depending on the learning situation. For example, older adults are motivated to find a sense of integrity, and therefore are likely to be self-directed in this area (Russell, 2008). Older adults, however, may become more dependent upon the instructor when they are challenged to learn a new task such as computer programming (Sterns, Lax, & Chang, 2009). Older adults also prefer observation and reflective learning styles rather than the hands-on methods that are typically preferred by younger adults (Truluck & Courtenay, 1999). Other unique aspects of gerogogy include its center around knowledge, experience, and a quest for integrity (Russell, 2008). Figure 2.1 displays the different aspects of each learning style in an easy to understand and read format.
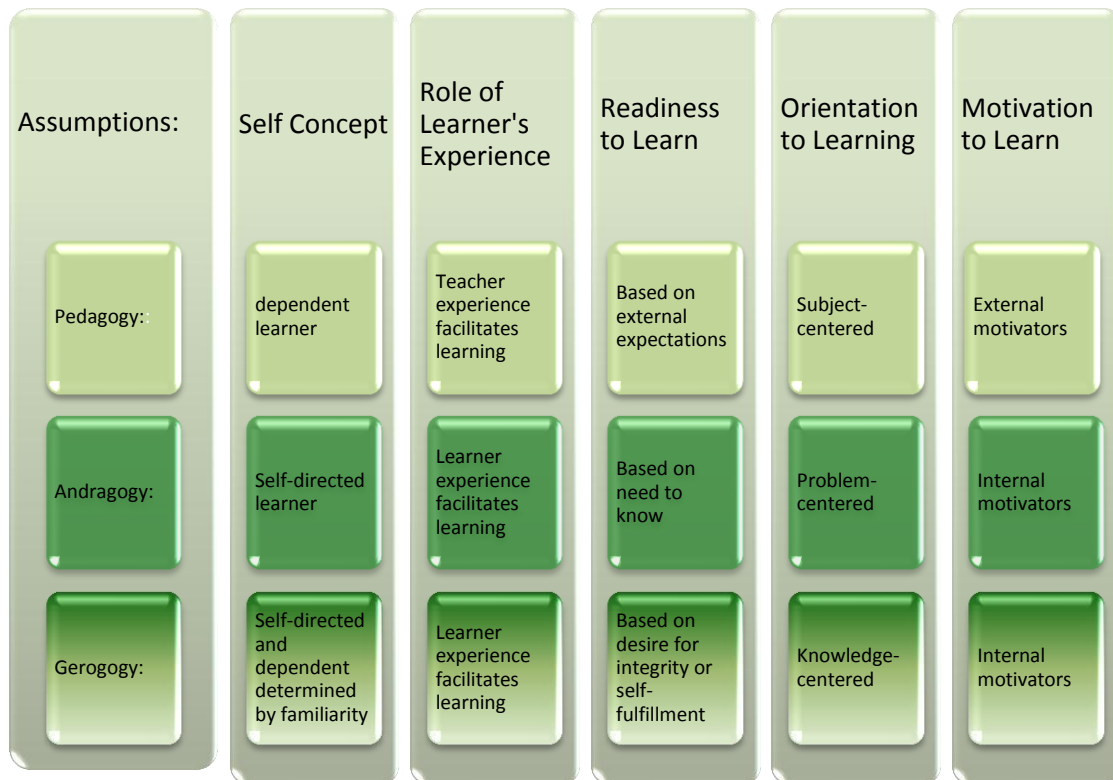
Figure 2.1. Details of Learning Styles

Assumptions:	Self Concept	Role of Learner's Experience	Readiness to Learn	Orientation to Learning	Motivation to Learn
Pedagogy:	dependent learner	Teacher experience facilitates learning	Based on external expectations	Subject-centered	External motivators
Andragogy:	Self-directed learner	Learner experience facilitates learning	Based on need to know	Problem-centered	Internal motivators
Gerogogy:	Self-directed and dependent determined by familiarity	Learner experience facilitates learning	Based on desire for integrity or self-fulfillment	Knowledge-centered	Internal motivators

Figure 2.1. details the different kinds of learning styles and how they differ from one another. Adopted from "Janssen, S. L. (2011). *Older adult perceptions of physical activity.* [Unpublished doctoral dissertation]. University of North Dakota. Grand Forks, North Dakota."

It is important to examine how learning styles vary throughout the lifespan as learning will occur for individuals of all ages in an intergenerational program. Older adult volunteers need to recognize that the preferred learning style of other generations may be different than their own. This understanding will help the older adults facilitate their own learning and the learning of younger generations by utilizing preferred environments and learning styles. When teaching older adult volunteers, it is important to consider the learning style of older adults is especially complex due to its fluctuation

between pedagogy and andragogy learning methods depending on the novelty of the skill being learned. Therefore, a unique mixture of learning styles is likely the best method to use when teaching older adults. In conclusion, throughout the lifespan, the most effective teaching/learning styles and techniques evolve and overlap for different age groups. An intergenerational program would require people of all ages to work together suggesting there would be an assortment of learning styles. Occupational therapists, who are skilled in creating evidence-based, just-right challenges for each individual and using occupations to facilitate health/wellness, would play a key role in pulling all aspects of an intergenerational program together in order to maximize the benefits for the populations involved.

Occupational Therapy

"In its simplest terms, occupational therapists and occupational therapy assistants help people across the lifespan participate in the things they want and need to do through the therapeutic use of everyday activities (occupations)" (American Occupational Therapy Association [AOTA], n.d. 1b). AOTA's broad definition of the profession of occupational therapy was intentional in order to fully encompass the possible roles of occupational therapists. To fully understand occupational therapy services in intergenerational programming, one must first comprehend the meaning of the word occupation as well as the relationship between occupational engagement and health/wellness.

Meaning of Occupation

Occupations are pivotal aspects of each client's life because occupations provide a structure to the day, address emotional, psychological, and physical performance,

43

provide a source of meaning and identity, are culturally relevant, and have the ability to improve or impair health (AOTA, 2008). The motivation, interest, priority, location, and phenomenological experience each individual has with a particular occupation varies due unique combinations of domains and the meaning, values, and beliefs attached. Therefore, it is occupational therapists' duty to utilize client-centered and contextual approaches when assisting clients in establishing and maintaining participation in occupations that are either necessary or desired. In summary, "Occupational therapy practitioners apply theory, evidence, knowledge, and skills regarding the therapeutic use of occupations to positively affect the client's health, well-being, and life satisfaction (AOTA, 2008, p. 642)."

Law (2002) makes a bold statement when she asserts that occupational engagement is *vital* for human life, however, she is not alone in this view. Hasselkus concurs, stating that, "Everyday occupations are essential for life" (2002, p. *xi*). Wilcock (1999) also supported the view that occupation is a necessary part of being human, and pointed out that people are engaged in occupation constantly. Whether it is self-maintenance tasks in order to survive, leisure activities, or anything in between, human life is a string of purposeful doing (Wilcock, 1999).

"Occupational therapy is founded on an understanding that engaging in occupations structures everyday life and contributes to health and well-being" (AOTA, 2008, p. 628). Occupations, or everyday activities, are complex and multifactorial (AOTA, 2008). Too often, however, the definition of occupation ceases after being described as an activity or task in which an individual partakes. Christiansen (1999) explained that occupation is not only an innate part of being human; it is also a key aspect

of being a particular person. Identities are reinforced by consistently engaging in occupations, and can be created by engaging in new occupations (Huot & Rudman, 2010). Wilcock (1999) believed that while occupations encompass the 'doing' part, the definition needed to be broadened to include 'being' and 'becoming' as well since who an individual is (being), and who that person aspires to become are created through the occupations in which he/she engages. Therefore, occupational therapy addresses all aspects of human occupation, and uses occupation as the tool to facilitate health/wellness for individuals across the lifespan.

Relationship Between Occupation and Health and Wellness

Activation into meaningful activities is the natural method of developing health (Wilcock, 1999). Wilcock (1999) further asserts that the relationship between health and occupation is multifaceted. Occupational therapy philosophy also states that occupations impact health and well-being either negatively or positively. Moreover, occupational therapy, with its broad scope, has a unique opportunity to positively impact the health and well-being of individuals with or without disease and disability (Law, 2002).

The centennial vision of occupational therapy, which defines the goals for advancing the profession, indicates that occupational therapists should expand their scope of practice to benefit populations who have occupational needs that may not be traditional occupational therapy practice settings. One such area includes intergenerational programming. Occupational therapists have multiple skills that they can use to help benefit not only older adults, but also children when developing and implementing an intergenerational program. According to the American Occupational Therapy Association (AOTA), occupational therapists promote participation in

meaningful everyday activities, known as occupations, by applying scientific evidence, holistic values, and specialty skills with the goal of increasing clients' health, well-being, and quality of life. This is eloquently stated in the domain statement: "Supporting health and participation in life through engagement in occupation (American Occupational Therapy Association, 2008, p. 626)."

AOTA also highlights six areas that play an equal and transactional role in a client's occupational participation. These six domains, which indicate the multidimensionality of occupation, include: areas of occupation, client factors, performance skills, performance patterns, context/environment, and activity demands. Occupational therapists are trained to assess these domains through the use of an activity analysis approach in order to promote occupational participation (AOTA, 2008). All of these aforementioned skills would increase an occupational therapist's qualifications to create and implement and intergenerational program.

Occupational Therapy and Aging

As the older adult population rapidly expands, productive aging is quickly becoming an emerging practice area for occupational therapists (AOTA, n.d. c1). The term productive aging was developed by Robert Butler to describe engagement in a variety of self-care, work, family, and volunteer activities (Murphy, 2011). This term parallels occupational therapy well, since roles and participation in activity are important aspects of occupational therapy philosophy.

In order for occupational therapists to solidify their role in the productive aging process, the efficacy of occupational therapy interventions in the area of productive aging must be validated (Leland & Elliott, 2012). In AOTA's most recent centennial vision,

Murphy (2011) found that occupational therapy literature is lacking in the area of productive aging. To build the occupational therapy literature pool, the unique contribution of occupational therapy must be highlighted in multicomponent interventions (Murphy, 2011).

Leland and Elliott (2012) examined systematic reviews and found that occupational therapy interventions supported occupational participation and productive aging of older adults. Occupational therapy enables successful aging through facilitating engagement in meaningful activities of daily life, health management and maintenance, client-centered and occupation-based interventions, falls prevention, and aging in place (Arbesman & Mosley, 2012; Chase, Mann, Wasek, & Arbesman, 2012; Orellano et al., 2012). Furthermore, through community education programs for older adults, occupational therapists can assist in disease/disability prevention, management of chronic conditions, and total person wellness. Therefore, occupational therapists have an important role in improving the QoL and successful aging of the older adult population (Leland & Elliott, 2012).

Stav et al. (2012) conducted a systematic review that focused on the health benefits older adults receive from being engaged in occupations. Results from 98 studies indicated older adult's health and QoL was positively impacted by participation in physical, leisure, community, and social activities. Multiple disciplines acknowledge the positive correlation between well-being and occupational engagement. This evidence supports the OT philosophy that occupational engagement increases health and well-being. In addition, results indicate a need exists for more OT services directed toward

older adults, take place in community-based settings, promote health, and prevent disability (Stav et al., 2012).

Another systematic review, conducted by Arbesman and Lieberman (2012) found evidence to support the claim that occupational participation positively impacts the health of older adults. Results indicated that the more older adults participated in physical activity, the lower the mortality and dementia rate became and the higher their level of function and independence was. Client-centered OT services, environmental modification, and exercise/strength programs improved IADL performance. Social supports and religious involvement were other factors that indicated positive aging as these resulted in higher perceptions of QoL, better cognitive and physical abilities, and longer lifespans. The most successful programs included the OT philosophies of client-centeredness, cultural relevance, self-managed programs, and using a multifactorial approach (Arbesman & Lieberman, 2012).

Other current research concurs with the previous systematic reviews (Arbesman & Mosley, 2012; Orellano et al., 2012). Arbesman and Mosley (2012) concluded that occupation-based and client-centered OT promoted better physical and functional performance in older adults living in the community. Orellano et al. (2012), through a systematic review, found that multicomponent, client-centered, and occupation-based interventions were the most effective in improving IADL function of older adults. Furthermore, improvements in physical performance alone did not automatically indicate increased IADL performance (Orellano et al., 2012). The type of activity as well as the personal characteristics of the participant, affects the resultant activity benefits (Stav et al., 2012). These results support the OT philosophy that only meaningful occupations are

therapeutic (Black & Living, 2004). Therefore, client-centered OT services can and should assist older adults in developing healthy routines and removing barriers to occupational performance through occupation-based, client-centered, and community-based therapeutic interventions (Arbesman & Mosley, 2012; Stav et al., 2012).

Occupational therapists have the ability to evaluate and expedite performance in occupational activities through modifying performance factors of the task (AOTA, 2008). Despite the evidence that indicates OT has an important role in community-based interventions, in the current health care system, it is difficult for occupational therapists to get reimbursed for the preventative community services they provide (Stav et al., 2012). Because the older adult population is increasing at such a rapid rate, the current health care system is likely not going to be able to satisfactorily care for aging adults, making health and wellness promotion more important than ever (Stav et al., 2012. Occupational therapy principles must be implemented in novel ways to create occupational therapy interventions for older adults as they age (Murphy, 2011).

Summary of Literature Review

While the older adult population increases, there is a need for occupation-based intergenerational programming that offers older adults the opportunity to experience successful aging through sharing of meaningful activities with youth. This in turn benefits youth as well by helping them gain new knowledge, skills, and leisure interests. While intergenerational programs are found to support successful aging, the occupational component of the programs is not evident; therefore, occupational therapy has a significant role in creating occupation-based intergenerational programs for older adults and youth. This scholarly project embraces occupation within an intergenerational

49

program. Chapter three will describe how the theories and evidence found through the

literature review was used to create the product of this scholarly project.

CHAPTER III

METHODOLOGY

The *Intergenerational Leisure Activity Program to Promote Successful Aging*
began when the authors of this scholarly project identified a need for both an occupation-
based program to improve the health of older adults and an after-school program for
youth. The authors identified the needs of these populations through their Master of
Occupational Therapy studies in courses such as OT 454, Gerontic Occupational Therapy
and OT 456, Psychosocial Aspects of OT with the Maturing Adult at the University of
North Dakota (UND) in the fall of 2011. The following spring, the program developers
teamed up with two additional classmates, Joshua Gilbertson, OTS and Stephanie
Gubbels, OTS, to develop an Intergenerational Leisure Activity Program Plan for the OT
461, Management in the US Healthcare System course. A summary of this program plan
is found in Chapter four and the complete plan can be found in appendix A

Various resources were used to gather information about occupation-based
intergenerational programs. Sclinda Janssen, PhD, OTR/L, a professor in the OT
department at UND and advisor of the coauthors of this project, provided a plethora of
valuable resources that she has collected over the years through her roles of instructor,
therapist, and researcher. The holdings at the Chester Fritz Library, Harley E. French
Medical Library, and American Journal of Occupational Therapy (through the AOTA
website, were crucial sources for professional journal articles and books. Professional
journal articles were also located using search engines such as PubMed, CINAHL, OT

search, and Google scholar. Occupational therapy textbooks, websites of intergenerational programs found through Google searches, and Lynn Swanson's (2004) scholarly project were also important sources of information.

After an in-depth literature review, it was clear that an occupation-based intergenerational program would be beneficial for both populations, as well as for the profession of occupational therapy. Next, the authors of this scholarly searched the literature for theories, frames of reference, models, and other frameworks that would contribute to the development of a lens through which to look at the program and participants. The program developers found four elements to be of specific importance for the development of this program: Pedagogy, gerogogy, Erikson's developmental stages, and the model of human occupation (MOHO). The conceptual framework and its relation to this program are described in more detail in chapter two.

Chapter four is the product of the information gathered in the literature review, the conceptual framework, and the Intergenerational Leisure Program. When looking at the product, the use of the conceptual framework can be identified through the color coordination. While pedagogy (red), gerogogy (orange), and Erikson's developmental stages (green) inform pieces of the product, the MOHO (blue) is the underlying model that is evident throughout the entire scholarly project process. Figure 3.1 shows how the therapeutic reasoning process from MOHO was used to inform the program development process.

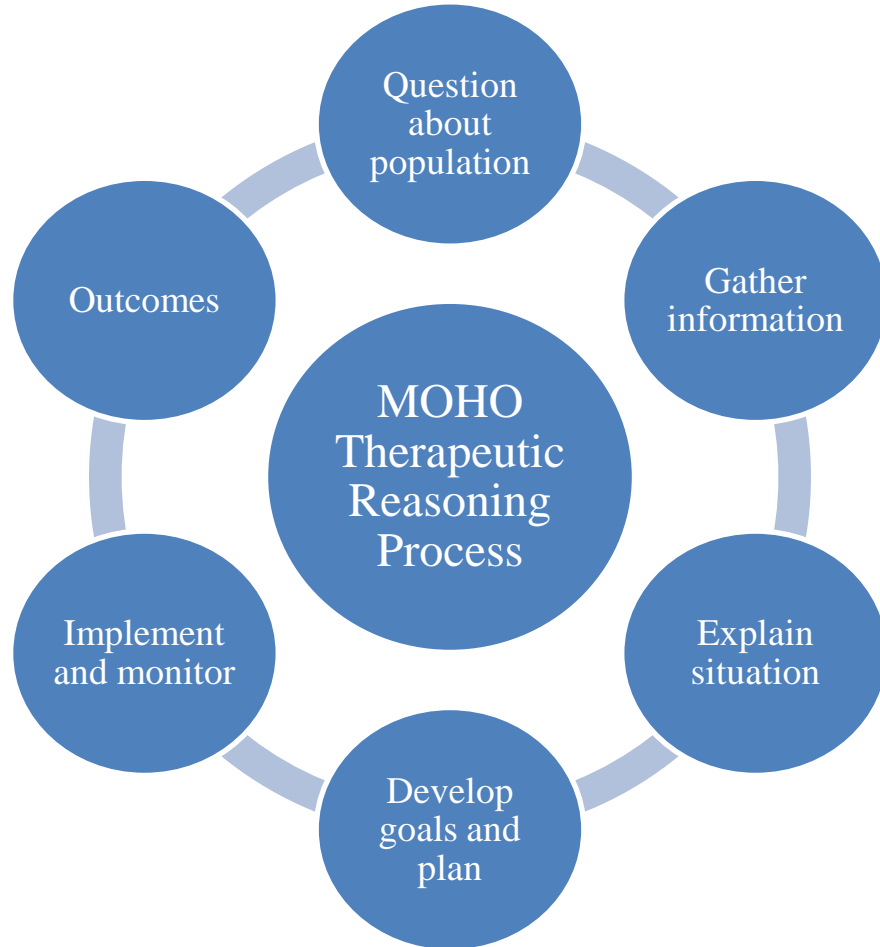Figure 3.1. Model of Human Occupation Therapeutic Reasoning Process

Figure 3.1. MOHO therapeutic reasoning process was used to develop this scholarly project because it is clear and simple to follow. Adapted from "The model of human occupation," by G. Kielhofner, 2009, *Conceptual Foundations of Occupational Therapy Practice (4th ed.)*, 147-173. Philadelphia, PA: F. A. Davis Company.

Information represented in figure 3.1 was used to develop this scholarly project because it is a clear and simple process to follow. The MOHO process also helped the authors to stay organized throughout the process of development. All the parts of the process were used to develop different chapters of this scholarly project. The question about the population is part of the abstract and chapter one. Gathering information and explaining situation is what helped make up chapter two. Developing goals and plan, implement and monitor, and outcome were used to develop chapter four. It is important to note that all parts of the process were used to develop this scholarly project. Without the MOHO therapeutic reasoning process, the authors would have had difficulty organizing their ideas and developing a clean and user-friendly product. Figure 3.2 organizes and connects each part of the MOHO therapeutic reasoning process with specific steps conducted during development of this scholarly project.

Figure 3.2. Therapeutic Reasoning Process and this Scholarly Project

Question about Population
- Identify Problem

Gather Information
- Assessments
- Literature Review

Explain Situation
- Conceptual Framework: MOHO, learning styles, and Erikson's Developmental Stages

Develop Plan/Goals
- Develop Program Sessions
- Train older adult volunteers

Implement and Moniter
- Intergenerational Programming
- Older adult discussion groups

Outcomes
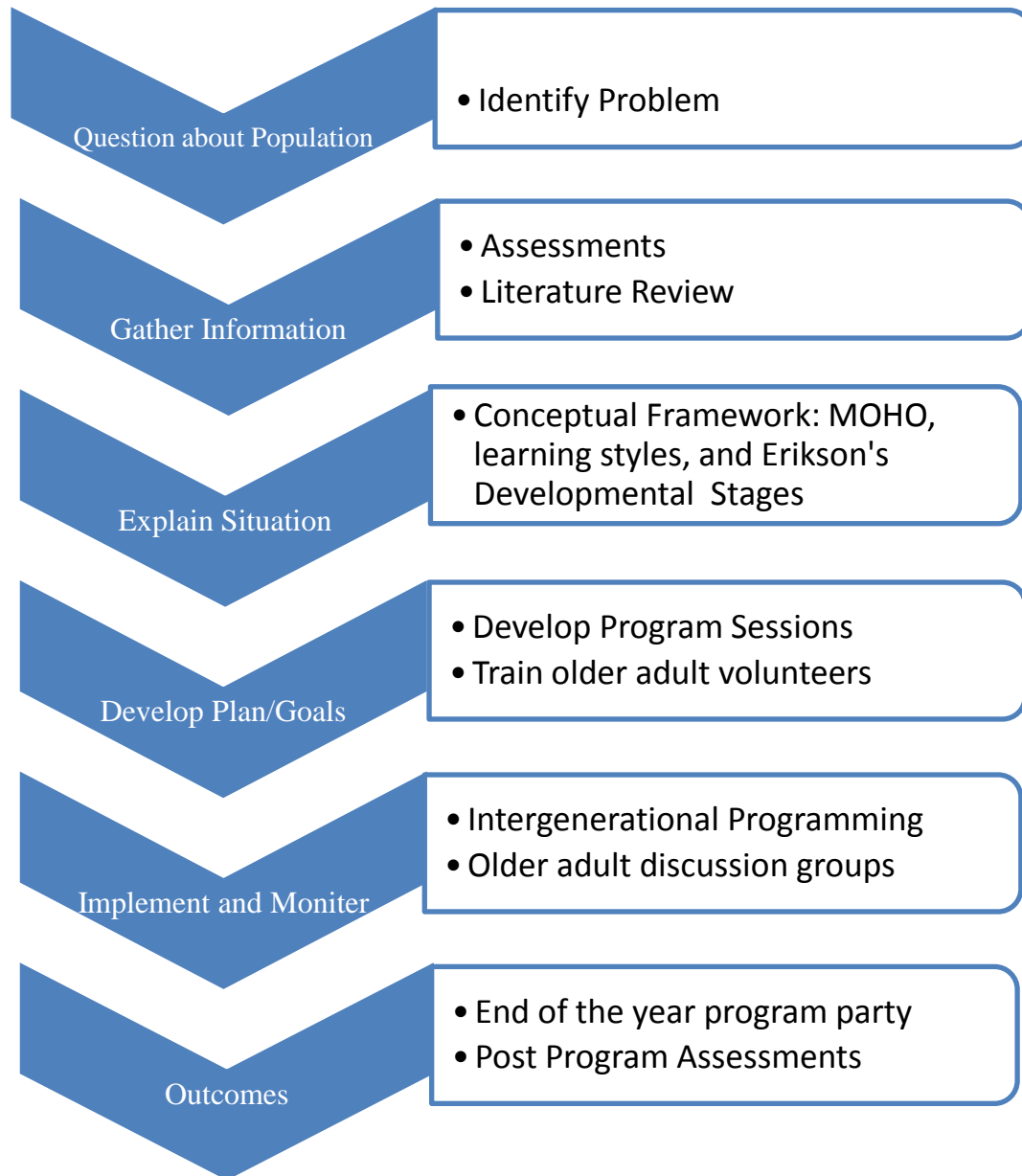- End of the year program party
- Post Program Assessments

Figure 3.2. Displays how MOHO therapeutic reasoning process was used to develop each specific section of this scholarly project. Adapted from "The model of human occupation," By G. Kielhofner, 2009, *Conceptual Foundations of Occupational Therapy Practice (4th ed.)*, 147-173. Philadelphia, PA: F. A. Davis Company.

MOHO was also used as part of the conceptual framework that helped develop this scholarly project. MOHO is used throughout the entire Intergenerational Leisure Program that was developed for this scholarly project. MOHO was chosen because it addresses the person, environment, and occupation (Kielhofner, 2009). All of these variables were addressed throughout the entire Intergenerational Leisure Program. If these variables had not been addressed, the product would lose its meaning and the level of success the participants would encounter from the program. The specific concepts from MOHO that were addressed in the product include: environment, performance capacity, occupational engagement, occupational narrative, volition, and habituation (Kielhofner, 2009).

The environment was applied in all the product outlines. The environment is important to address because it can be used to increase learning or to hinder learning. The environment in this product involves both classrooms and volunteers homes. It is important to address the environment so that the product can be set up to increase learning of not only the children, but also the older adults. Performance capacity was used in this product as a way to set goals for the sessions. Performance capacity addresses people's ability to learn and what they are going to learn (Kielhofner, 2009). This product sets goals for each session that will address the older adults and children's performance capacity. The goals give a list of what will be learned and addressed by the end of each session.

Occupational engagement is another specific aspect of MOHO that is used in developing the intergenerational product. Occupational engagement is the actual engagement in the activity (Kielhofner, 2009). Each session has the occupational

engagement portion where all activities for the session are outlined. This helps organize the sessions so that the occupational therapist leading the group knows what activities should be done in each session.

Volition is an important part of MOHO and it too is addressed in each session outline. Volition addresses people's motivation and willingness to participate (Kielhofner, 2009). Volition is a heading in each session and is an important part of this Intergenerational Leisure Program because it lists how each session is going to motivate the participants so that they continue to engage in the program. If the participants are not motivated to be part of the program the program will not have any participants and will not work. The last specific part of MOHO that is addressed is habituation. Habituation addresses habits and routines of the participants. This, like all the other specific ideas from MOHO, is addressed in each session outline. This focuses on the carryover of what the participants learned from the session. The focus is that the ideas learned will become a habit and part of the routine when the program is being carried out. All of these specific aspects of MOHO are crucial for the success of each individual session and the program as a whole. The use of MOHO insures the success of the sessions and the program by addressing the person, environment, and occupation. It also makes the outline clear and easy for the occupational therapist to follow when leading the group.

While MOHO guided the overall components and organization of the Intergenerational Leisure Program, pedagogy and gerogogy guided the teaching and learning aspects of the program. Pedagogy and gerogogy are learning styles that will be applied to both the children and the older adults during the three phases of the program. Pedagogy involves the learning style of children and uses the principles of external

motivation and dependence on the teacher for expectations and structure (Janssen, 2011; Merriam et al., 2007). In the product, phase one, session two is when the older adults are educated on pedagogy strategies for when the older adults begin leisure sessions with the children. Once older adults are educated in the pedagogy strategies they should continue to use them throughout the phase two leisure sessions. By using pedagogy strategies the children's learning capacity will be maximized and the older adults will have a much easier time teaching the children the materials that they need to know (Merriam et al., 2007).

Gerogogy is the learning style of older adults and includes principles of self-directedness when they are motivated or have past experience in the learning area, but dependence when learning new information (Russell, 2008). Gerogogy is applied in the sessions that occur during phase one in which the older adults are being educated. The OT leading the group will use the gerogogy strategies in order to maximize the older adults learning and help them to gain the skills needed to lead the leisure sessions successfully. If these learning strategies are not addressed, the children and older adults may have difficulty gaining the needed knowledge while taking part in this program.

The authors also utilized Erikson's stages of development, conceptualized by Erikson (1997), which described eight life cycle stages of human psychosocial development that extend across the lifespan. The purpose of each stage is to overcome the struggle associated with that particular stage in order to obtain the psychosocial strength and avoid the dystonic tendencies of that stage. Each stage of development can only be achieved by building upon the previous stages, which means each stage is symbiotic with both the previous and future stages. The psychosocial crises that are

germane to this Intergenerational Leisure Program include *industry versus inferiority* and *identity versus role confusion* for the youth and integrity versus despair for the older adults (Erikson, 1997). The occupation-based Intergenerational Leisure Program is designed to facilitate positive outcomes for these psychosocial crises. By having positive outcomes from these psychosocial crises, the participants in the Intergenerational Leisure Program will be able to move to the next stage in Erickson's stages of development and continue to have a successful life according to Erikson's theory (1997).

This scholarly project was developed following concepts and ideas found after conducting a literature review. Every phase and session of the product was not only developed following the conceptual framework, but it was also developed based on the results of the literature review. The literature review revealed the needs for this scholarly project and the implementation of the product that was developed.

There is strong evidence that participating in activity and occupations can increase older adults' health and well-being (Stav, et al., 2012). As adults grow older it is important that they are introduced to the concept that participation in meaningful occupations can positively impact their health and well-being (Jackson et al., 1998). Multiple researchers who have studied activity participation among older adults concluded that wellness declines when participation in activity declines (Adams et al., 2011; Clark et al., 2011; Requena Hernandez & Zubiaur Gonzalez, 2008; Jackson et al., 1998; Jung et al. (2009); Peralta-Catipon & Hwang (2011); Stav et al., (2012); Yamada et al., 2010). Therefore, this scholarly project was developed to increase older adult's activity in meaningful occupations to help promote health and well-being. The engagement in activities will increase the wellness of the older adults increasing their

overall health. This concept of older adults aging with increased overall health is called successful aging.

Successful aging is a continuum of functional achievement that is comprised of multiple dimensions, such as mobility, disease, and socialization (Lowry et al., 2012). According to Rowe and Kahn (1997) the three elements that make up successful aging include: a "low probability of disease and disease-related disability, high cognitive and physical functional capacity, and active engagement with life" (p. 433). Therefore, this scholarly project addresses all three of these concepts through the Intergenerational Leisure Program. Being active will assist with lowering disease and disability, being social and educating the youth will assist with keeping the older adults cognition high along with their physical function and promotes engagement in life through occupation based activities.

The literature review also revealed the term ageism. *Ageism* was coined in 1968 by Butler, who identified discrimination against older adults in his community (Butler, 2005). Ageism is described as a culturally constructed phenomenon that causes self-oppression in the form of either attempting to evade the aging process or the condemning of self when the realization of aging sets in (Calasanti, 2005). The good health, volunteerism, active lifestyle, and work productivity of the Baby Boomers will support the concept of successful aging and are expected to decrease explicit ageism (Longino, 2005). Therefore, intergenerational programs such as the program in this scholarly project have an important role in both promoting successful aging and decreasing ageism. By engaging the older adults in the community with the youth it will help decrease the ageism which will lower the negative outcomes that come from ageism.

As stated previously, engagement in activities can help increase health and wellness in older adults. Stav et al. (2012) discovered that areas such as work, involvement in the community, leisure, and social activities all supported health in older adults.   Older adults will find the experience more satisfying and will see better health outcomes if they choose activities that they enjoy (Yamada et al., 2010). This scholarly project addresses the areas of community involvement, leisure, and social activity which according to Stav et al. (2012), supports health in older adults. This scholarly project also gives the older adults the ability to choose the occupations that they will teach the children. The ability for the older adult to choose which meaningful occupation they will be teaching the children helps to keep the motivation of the older adults up and that keeps them engaging daily in activity (Stav et al., 2012). A great way to address involvement in the community, leisure, and social activity is to have the older adults volunteer.

One form of volunteering that has a positive impact on older adults is participating in intergenerational programs (Souza, 2011). Not only can participating in intergenerational programs improve health status, but it can also increase socialization for older adults (Souza, 2011). Older adults can also receive multiple health benefits from volunteering: lower rates of depression, frailty, and mortality, as well as better physical and functional abilities (Grimm et al., 2007; Jung et al., 2009; Kamei et al., 2011; Konrath et al., 2012; Piliavin and Siegl, 2007; Stav et al., 2012). Therefore, in this scholarly project, the leaders of the leisure program are older adult volunteers. The older adult volunteers in the program are able to give back to the community while gaining multiple personal and physical benefits. The overall concept of this scholarly project is to apply all the findings from the literature review so that the overall health and wellness of

the older adults will increase. All the concepts found in the literature review have been applied to this scholarly project, which in return will have a positive outcome for all older adults who participate.

Just as there are benefits for older adults who participate in this scholarly project, there are also benefits for the children who participate. After- school programming can have multiple benefits to children who participate in them. Positive benefits include: increasing positive social behaviors, increasing children's self-perceptions, better school grades, and better scores on achievement exams (Durlak et al., 2010; Pierce et al., 2010). Another positive benefit of participating in an after-school program includes the development of healthy leisure activities (Moore et al., 2010). Because children receive multiple benefits from engaging in an after-school program this scholarly project involves an intergenerational program that takes place after-school. The children engaged in the product of this scholarly project will receive the benefits that were listed above. There are specific factors that make up an effective after-school program.

According to Pierce et al. (2010) an effective after-school program needs to have three important factors: a positive relationship between the staff and children, a variety of activities that the children can partake in, and flexibility to allow children to select a desired activity. This scholarly project addresses all three factors by giving the older adults small groups of children to work with so that a relationship can be built, and the children get to choose from a list of a variety of activities that are offered by the older adults. Apsler (2009) found that setting specific goals, using educational techniques to structure the program and frequent attendance call all lead to noticeable gains in adolescents that participate. This scholarly project also addresses these findings by setting

specific goals for every session, using pedagogy and gerogogy learning strategies, and promotes high attendance from the children. The best way to bring all these positive results together for the older adults and the children is to engage both populations in an intergenerational program.

Current literature indicates that programs which unite older adults with younger generations have positive impacts on both generations (Hall & Batey, 2008; Kamei et al., 2011; Requena Hernandez & Zubiaur Gonzalez, 2008; Schwalbach & Kiernan, 2002; Uhlenberg, 2009). Intergenerational programs open up the opportunity for older adults to feel productive by passing on knowledge to the next generation and decreases children's negative perceptions of elderly (Dunham, 2009; Hall & Batey, 2008; Kamei et al., 2011; Schwalbach & Kiernan 2002). Intergenerational programs have been found to increase mutual learning, respect for elders, and self-expression (Souza, 2011). Elders liked that the program bridged the generation gap, made them feel valued, and allowed them to see young people in a positive light. Students and elders alike mentioned that they felt more self-worth and less stressed after the program due to being heard, understood, and busy with a meaningful activity (Souza, 2011). Because of all these benefits, this scholarly project developed an intergenerational program that will benefit both populations.

The literature supports this scholarly project and the product produced in a way that will produce multiple benefits for all people who participate. Every aspect of this scholarly project was based on findings in the literature to assure that it will have positive outcomes and be beneficial to all people who participate. The following chapter four utilizes the information extracted from the literature review to describe the product of this scholarly project and all phases of the product.

63

CHAPTER IV

PRODUCT

The product of this scholarly project is an *Intergenerational Leisure Activity Program to Promote Successful Aging*, which will be facilitated by an occupational therapist. The *Intergenerational Leisure Activity Program to Promote Successful Aging* is located in appendix B. The program is organized into three phases and then further subdivided into sessions. A literature review and several theoretical frameworks guided the development of this scholarly project. A program plan was also developed to guide actual implementation.

Intergenerational Leisure Activity Program

Problem Statement

By the year 2030, older adults who are 65 years of age or older will account for 20% of the US population (Center for Disease Control, 2008); however, the rate of successful aging has decreased 25% from 1998 to 2004 (McLaughlin et al., 2009). As the older population grows in numbers and life expectancy, their rates of successful aging is continuing to decrease, causing a major problem for this certain population. Other problems that have been identified through the literature review include:

- Decreased participation leads to poor physical and psychological well-being and a decrease in life satisfaction (Clark et al., 2011; Jackson et al., 1998)

- Health, independence, and occupational participation decrease as adults age (Clark et al., 2011; Peralta-Catipon & Hwang, 2011)

- Ageism limits successful aging (Butler, 2005; Palmore, 2005)

Purpose Statement

The purpose of this scholarly project is to develop an Intergenerational Leisure Program that will promote successful aging of older adults. The goal of the program is to increase older adults' feelings of integrity and sense of being, increase the older adults' quality of life, and decrease ageism. This program will have a positive impact on both the older adults and the children that are involved.

Method

In creation of this Intergenerational Leisure Program, a literature review was conducted to examine how participation in intergenerational programming can support successful aging (McLaughlin et al., 2009). The following resources were instrumental sources for gathering information utilized in the literature review: Chester Fritz Library, Harley E. French Medical Library, American Journal of Occupational Therapy, PubMed, CINAHL, OT search, Google scholar, and Occupational Therapy textbooks. Key search words included: ageism, successful aging, productive aging, intergenerational programs, after school programming, volunteering, and learning styles. Information regarding health/wellness and quality of life for older adults or school-aged children as well as data on intergenerational programs was included in the literature review.

Results indicated that the decline in successful aging is related to a decline of participation in meaningful activities (Peralta-Catipon & Hwang, 2011). Conversely, continued participation in meaningful occupations promotes successful aging (Jackson et al., 1998; Stav et al., 2012). In addition, older adults have a desire to contribute to society in order to develop a sense of productivity and integrity (Russell, 2008; Schoklitsch &

Baumann, 2012). Current literature indicates programs that unite older adults with younger generations have positive impacts on both generations (Hall & Batey, 2008; Kamei et al., 2011; Requena Hernandez & Zubiaur Gonzalez, 2008; Schwalbach & Kiernan, 2002; Uhlenberg, 2009). The follow findings support the assertion that engagement in meaningful activities promotes older adult's successful aging (Jackson et al., 1998; Stav et al., 2012):

- *Volunteering*: Give back, feel generative, and develop sense of occupational identity (Grimm et al., 2007; Souza, 2011)

- *Mentoring*: Share expertise and increase integrity (Barron et al., 2009)

- *Leisure Activity*: Staying active in meaningful pursuits increases mental, physical, and psychosocial health (Yamada et al., 2010)

- *Intergenerational Programs*: benefits for both the older adult and school age youth populations (Kamei et al., 2011; Requena Hernandez & Zubiaur Gonzalez, 2008)

Conceptual Framework

The conceptual framework for this program consists of four theories/concepts: pedagogy, gerogogy, Erikson's developmental stages, and the model of human occupation (MOHO) (Erikson, 1997; Kielhofner, 2009; Merriam, Caffarella, & Baumgartner, 2007; Russell, 2008). While pedagogy, gerogogy, and Erikson's developmental stages inform certain portions of the product, MOHO is the underlying model utilized throughout the entire scholarly project. Because literature positively correlated participation and wellness, the program is designed around the *doing* aspect of leisure activities: older adults and youth actually engage in identified leisure activities,

which correlates perfectly with MOHO's use of occupations as a vehicle for change (Jackson et al., 1998; Kielhofner, 2009; Stav et al., 2012).

Older adult volunteers will utilize pedagogy principles, or the learning style of children, when teaching youth participants leisure activities as youth are often depend on the teacher for setting clear expectations and structuring the task/environment (Janssen, 2011; Merriam et al., 2007). The learning style of older adults, called gerogogy, will be implemented by the OT coordinator when teaching older adults during the preparation phase. Older adults tend to enjoy being self-directed learners when they have past experience such as during the leisure activity portion, however need more structure when learning new information (Russell, 2008). The sessions for older adults provide opportunities for discussion, observation, and reflection as these are preferred methods of learning for the older population (Truluck & Courtenay, 1999).

Erikson (1997) described eight life cycle stages of human psychosocial development that extend across the lifespan. The psychosocial crises that are germane to this Intergenerational Leisure Program include *industry versus inferiority* and *identity versus role confusion* for the youth and *integrity versus despai*r for the older adults. The occupation-based Intergenerational Leisure Program is designed to facilitate positive outcomes for these psychosocial crises by providing opportunities for youth to develop an occupational identity and feel mastery/enjoyment through leisure activity participation. For older adults, program participation facilitates integrity development through allowing them to feel productive by sharing their knowledge and expertise with youth (Erikson, 1997).

MOHO asserts that personal, environmental, and occupational variables interact in a dynamic relationship that determines an individual's level of success in meaningful activities (Kielhofner, 2009). The authors used MOHO's therapeutic reasoning process to structure the development of this scholarly project as well as in the development of the session outlines. MOHO concepts evident in the session outlines include: environment, performance capacity, occupational engagement, occupational narrative, volition, and habituation (Kielhofner, 2009).

Results

The product of this scholarly project is a community-based *Intergenerational Leisure Activity Program to Promote Successful Aging* in which older adults teach youth to engage in valued leisure activities. The role of occupational therapy is evident as meaningful occupations are utilized to promote health and well-being. The product is presented as a series of sessions created to guide the OT coordinator in implementing the program. The program is made up of three phases that assist older adults in leading occupation-based leisure activities with school age children:

Phase I: Preparing Older Adults for Intergenerational Programming

- Preparation Session 1: Successful Aging

- Preparation Session 2: Youth and Successful Aging

- Preparation Session 3: Home Visit

Phase II: Implementing Intergenerational Programming

- Older Adults Implement Leisure Activity Sessions with Youth

Phase III: Capstone of Intergenerational Programming

- Capstone Session 1: Intergenerational Program Reflection and Modification

- Capstone Session 2: Intergenerational Program End of the Year Party

The preparation phase consists of three sessions in which the OT coordinator educates and collaborates with the older adult volunteers in order to develop the safe and effective leisure activity sessions for youth participants. During the first preparing session, the OT coordinator will educate older adult volunteers on the evidence-based knowledge that informs this program. The volunteers will discuss aspects of successful aging, wellness, and integrity development and gain understanding of how their participation in this program will result in the aforementioned benefits. The older adults will also identify their occupational interests as a precursor to choosing a single leisure activity they desire to teach to youth participants.

In the second preparation session, the OT coordinator will enlighten older adults on the positive ways intergenerational programming affects youth participants. The OT coordinator will instruct the older adult volunteers in the use of pedagogy teaching strategies and facilitate conversation regarding ways these techniques can be implemented when leading leisure activity sessions with youth. Older adults will finalize their choice of leisure activity and plan their leisure activity sessions.

In the third preparation session, the OT coordinator will ensure that the leisure activities and activity environments are safe and effective by conducting a home visit. During this home visit, older adults will facilitate a mock leisure activity session by teaching their chosen activity to the OT coordinator. The OT coordinator will provide feedback regarding the environment, activity, and teaching methods and assist older adults in making any recommended changes.

During the Phase Two, Implementation, older adults will teach youth participants to engage in leisure activities of interest. Leisure activity sessions will take place twice a week on Tuesdays and Thursdays from 3:30 PM to 5:30 PM from the months of September to May. Youth participants will take the school bus to the older adult's home and their parents will be responsible for picking the youth up after the program.

The third and final phase consists of two capstone sessions. The first capstone session is a monthly meeting in which the older adults gather to discuss/reflect on their leisure activity sessions. The OT coordinator will facilitate conversation in a positive manner and assist older adults in making modifications to their leisure activity sessions if necessary. The second capstone session is an end of the year meeting at which the older adult volunteers, school-aged youth, and parents of the youth gather to celebrate program participation and determine the level of the program's success. The OT coordinator will facilitate this laid-back and fun meeting. The OT will encourage the older adults and the youth participants to share their favorite part of the Intergenerational Leisure Program experience and complete the appropriate outcome measures.

Conclusion/Recommendations

The *Intergenerational Leisure Activity Program to Promote Successful Aging* provides an opportunity for older adults to engage in meaningful activities with youth. Intergenerational programming will benefit both the older adults and the youth participants. Intergenerational programs support successful aging and decrease ageist attitudes in youth, however, existing intergenerational programs lack an occupation-based component, which is proposed in this program. Therefore, occupational therapy has a

role in creating occupation-based intergenerational programming. When implementing the program, the authors recommend considering the following:

- *Grants*: Apply for grants to fund the program.

- *Rural areas:* Preferred use in rural areas where the amount of programming is limited.

- *Generating research:* Utilize the program plan, which includes an evaluation plan and outcome measures, to generate research in order to further the occupational therapy knowledge base.

Intergenerational Leisure Activity Program Plan Summary

The students of this scholarly project, in collaboration with two of their classmates, created a program plan entitled *An Intergenerational Leisure Activity Program.* The program plan includes:

- A needs assessment process and survey template

- Description of how to set up the program

- A sample budget

- A plan for marketing the program

- Outcome measures

The program plan is further described below and can be found in its entirety in appendix A.

The program plan commences with a literature review which highlights research findings that inform the proposed program. The literature review exposed the benefits of bringing older adults and youth together, a need for more after-school programs, and a demand for additional volunteer programs for older adults. The literature also revealed

71

evidence-based programming activities. By developing an after school-program that is led by older adult volunteers, the program will address the needs identified in the literature review. The program developers concluded that an occupation-based after-school program which is run by older adult volunteers has the potential to benefit both the youth and older adult populations by increasing the prevalence of successful aging, reducing ageism, develop skills among youth, and enhance life satisfaction.

After the literature review was complete, the authors developed a sample needs assessment. The occupational therapist (OT), will adapt the needs assessment as deemed appropriate and utilize it as a tool to collect specific information relevant to the proposed implementation setting. After gathering data, the occupational therapist would quantify the data to determine if the community has a need for the intergenerational program as well as identify available community resources.

The program goal is multifactorial and includes: increasing the QoL and activity level of older adults, promoting students' engagement in purposeful and meaningful activities, and encouraging intergenerational communication and interaction in order to decrease ageism. Additional goals include: to have at least 20 older adults and at least 100 youth participants involved in the program the first year, for at least 50% of youth to develop more positive perceptions of older adults, for youth to improve their academic performance, for older adults to experience an increase in their psychosocial well-being, and to achieve a program satisfaction rating of 75%.

A local OT will serve as the program coordinator. The OT will begin marketing the program approximately six months prior to program implementation. Marketing strategies may include promotion through newspaper articles, flyers, and brochures. The

occupational therapist will obtain funding for the program through fundraisers and grants. The amount of money attained will influence how much money each older adult volunteer will be given for supplies. The intergenerational program plan includes a sample budget to be used as a guide for the program budget. Because of the varying amount of money available to the program and broad range of possible activities for the program, the budget is subject to change.

The youth involved in the program must be between the ages of second grade to senior year of high school. The youth target population, who will learn the leisure activities, will consist of second through sixth graders; however, older youth are welcome to participate in the program as student mentors for the younger children. Youth who want to take part in the program must gain parental consent and sign a behavior contract prior to program engagement.

The inclusion criterion for the older adult volunteers includes: a clean background check, completion of a safety training course, interest in teaching a trade skill to youth, and access to a safe place to teach the students. The occupational therapist will conduct home evaluations to ensure the task and home environment are safe. After the older adult is approved, he/she will create a list of materials needed for their leisure activity (that matches the pre-determined budget) and give the list to the program coordinator.

Specific activities should be included during the implementation phase of the program. The program will consist of an after school snack and participation in an activity, which will be taught by the older adults. The older adult volunteers will choose an activity based on their skills, knowledge, and interest in the activity. The students will

then sign up for an activity that is of interest to him or her. A minimum of 2 students must sign up for each leisure activity in order to for it to be implemented. This is done to promote a secure social environment for the both the youth and older adults.

The program will take place from 3:30 PM-5:30 PM on Tuesdays and Thursdays during the months of September through May. Every two months, the youth will have the option of participating in a new leisure activity as this will allow the children to participate in a broader variety of activities. The activities will be completed either at the older adult's home or at the school cafeteria depending on which location is most appropriate for the activity. The students that go to the older adult's home will take the school bus to the older adult's home and the student's parents will pick them up after the program.

The occupational therapist will evaluate program successfulness through both direct and indirect methods. Both populations will complete a program satisfaction survey. The older adults will complete a life satisfaction survey to determine how the program affects physical, emotional, and spiritual health as well as the Geriatric Depression Scale to define their level of psychological well-being. The OT will review the children's grades to see if improvement is noted post program implementation. The authors hope that occupational therapists find the program plan to be a helpful resource that provides both general program guidelines and specific tools for program implementation. The *intergenerational leisure activity program to promote successful aging* is located in appendix B and includes session outlines and documents needed to complete each session successfully. Chapter five is a summary of and a conclusion to this scholarly project.

CHAPTER V

CONCLUSION

By the year 2030, older adults who are 65 years of age or older will account for 20% of the US population (Center for Disease Control, 2008); however, the rate of successful aging has decreased 25% from 1998 to 2004 (McLaughlin, Connell, Heeringa, Li, & Roberts, 2009). This issue will continue to be a problem, presenting a need for programs to promote successful aging. The purpose of this scholarly project was to develop an Intergenerational Leisure Program that will promote successful aging of older adults.

The findings of the literature review suggest that participation in meaningful activities increases successful aging (Jackson et al., 1998; Stav, et al., 2012). Researchers also concluded that older adults have a desire to contribute to society in order to develop a sense of productivity and integrity (Russell, 2008; Schoklitsch & Baumann, 2012). Older adults can fulfill this desire and experience successful aging through engagement in mentoring relationships that are promoted through intergenerational leisure activity programs. After school programming can have multiple benefits to children who participate in them. Positive benefits include: increasing positive social behaviors, increasing children's self-perceptions, better school grades, and better scores on achievement exams (Durlak, Weissberg, & Pachan, 2010; Pierce et al., 2010). An

intergenerational leisure activity program is beneficial for both the older adults and the children who participate in it.

The product of this scholarly project is an Intergenerational Leisure Program developed with three phases of application. In phase one, the preparation phase, the occupational therapist (OT) who is coordinating the program will lead three sessions to prepare the older adults to lead leisure activity sessions. In session one the OT will explain the importance of successful aging. Session two focuses on what techniques can be used to successfully teach the youth about the leisure occupations being presented. The final session is a home visit to assess activity and environmental safety and effectiveness. Phase two is the implementation phase in which the children go to the older adult's homes and engage in the chosen leisure occupation. During phase two the older adults will utilize the teaching techniques learned in phase one. Phase three is the capstone phase in which the older adults and children will reflect on the program and give suggestions on how the program can change and grow. In phase three, the OT coordinator will lead two capstone sessions. Session one consists of periodic gatherings of the adult volunteers and session two is an end of the year program party for the youth, youth's parents, and older adult volunteers.

The model of human occupation (MOHO) was used to guide the development of not only the product, but also the analytical reasoning behind the development of this entire scholarly project. In addition to MOHO, Erikson's theory of development and learning style theories, including pedagogy and gerogogy, were used to help the development process. These theoretical constructs were integrated to form a conceptual framework for this project. The conceptual framework was utilized to develop and

organize the product, as well as to make it user friendly to promote future implementation.

This Intergenerational Leisure Program, in conjunction with the program plan found in appendix A, will enable an occupational therapist to apply this program in a community setting. The authors recommend that this program be implemented in a rural community since the number of programs in such areas is limited for the older adult and youth populations. This program will benefit both populations, and the additional benefit of positive intergenerational relationship building will further maximize the program's beneficence.

This scholarly project has been grounded in evidence-based literature although some limitations do still exist with implementation of the program. First, this program requires funding. The authors recommend the use of grant monies to cover the program expenses. There are different foundations and organization that offers grants that will fund community programming for both older adults and children. Organizations such as AARP would be a good place to gain a grant to fund the Intergenerational Leisure Program.

Secondly, little research was found specifically on the role of OT in intergenerational programming. The authors of this scholarly project suggest that research be conducted on wellness outcomes for both older adults and children. A pilot study should also be conducted to prove the effectiveness of the program available in this scholarly project. Finally, this program has never been implemented before. This program, therefore, offers the OT profession an opportunity to expand the profession and

gather more data on OT's role in establishing preventative measures for the well-elderly and well-youth populations.

Evidence indicates that as adults grow older they experience a decrease in engagement in meaningful occupations, which can lead to a decrease in well-being and an increase in health concerns. This scholarly project presents a program that can support successful aging through the use of activities by facilitating sessions in which older adult volunteers teaching their valued leisure occupations to the community youth. This engagement in meaningful activities will help to increase health and well-being in the older adults while simultaneously reducing ageist attitudes of youth. This scholarly project is a win/win situation for everybody who participates in the program.

Appendices

Appendix A

Program Plan

Appendix B

Product: Intergenerational Leisure Program

Appendix C

Permission Forms

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