

Making Connections in the New Normal: Implementing Virtual Programming during a Pandemic for Low-income Community-dwelling Older Adults



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INTRODUCTION

BACKGROUND

- Moorhead Tower is a Beacon Community in Pittsburgh that provides affordable housing to low-income older adults and adults with disabilities. Most residents do not have access to internet and have little knowledge about the benefits and uses of technology.
- Needs assessment:** Stakeholders from Moorhead Tower reported higher incidences of social isolation and increased feelings of depression and loneliness among residents.

SIGNIFICANCE

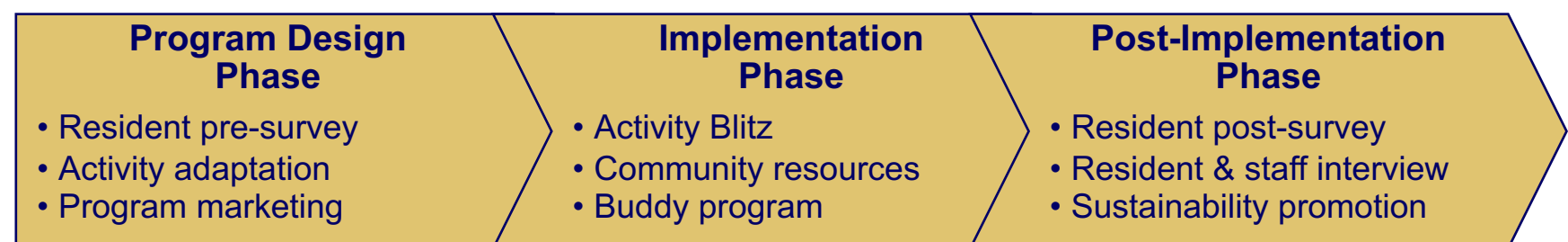
- Social isolation has been associated with an approximately 50% increased risk of developing dementia, a 29% increased risk of heart disease, and a 32% increased risk of stroke.¹
- Engaging in a mix of physical, social, educational, cognitive, and volunteering activities have been identified as being beneficial in decreasing social isolation among older adults.²

PROGRAM OBJECTIVES

- Objective 1:** Create and implement an 8-week "activity blitz" at Moorhead Tower to decrease social isolation among residents.
- Objective 2:** Create an activity binder and establish an activity planning committee composed of Moorhead Tower residents and staff to ensure the sustainability of the program.

METHODS

PROCESS



KEY PROGRAM COMPONENTS

Resident Participation <ul style="list-style-type: none"> 8-week intensive activity programming Incentivization Communication & marketing 	Community Resources <ul style="list-style-type: none"> TechOWL Starszy Education Virtual Senior Academy 	Sustainability Promotion <ul style="list-style-type: none"> Activity Committee Activity & Resource Binder Funding options
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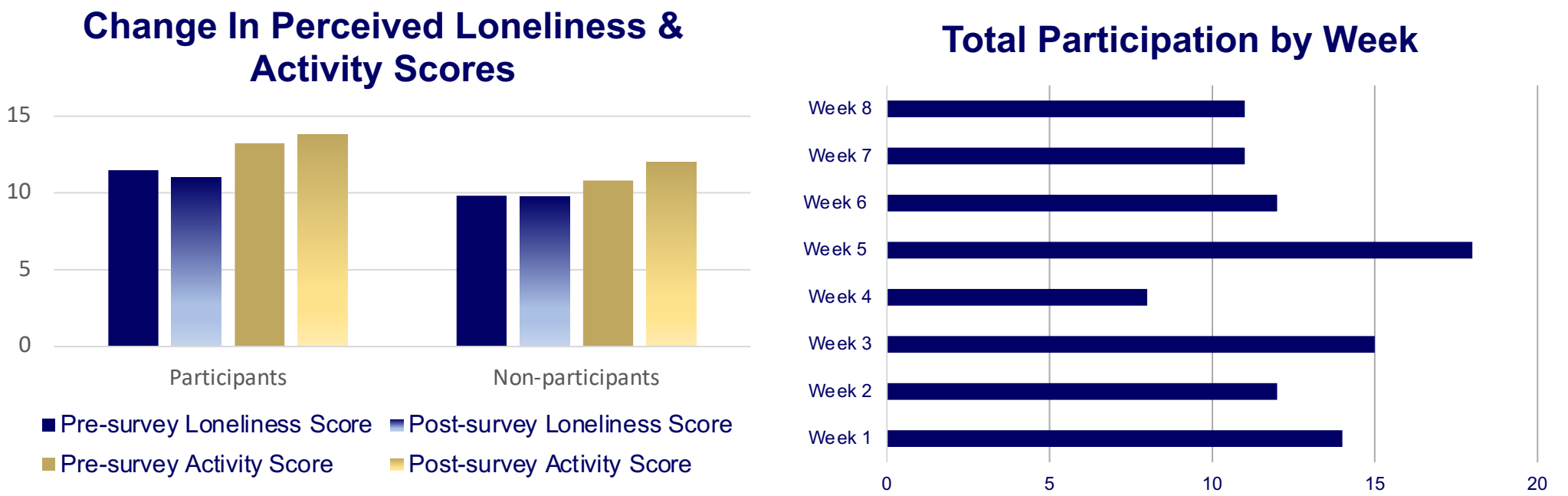
ACTIVITY BLITZ ADAPTATION

- All phases were informed by The Consolidated Framework for Implementation Research.
- Activities were adapted to be held virtually via a phone conferencing system to comply with COVID-19 guidelines and accommodate resident needs
 - Craft activities included a tactile component for residents with visual impairment
 - Physical & education activities included high-contrast educational materials and audible descriptions so all individuals could participate



RESULTS

ACTIVITY BINDER EXEMPLAR:



Consolidated Framework for Research Implementation (CFIR)

Intervention Characteristics <ul style="list-style-type: none"> Intervention Source Evidence Strength & Quality Relative Advantage Adaptability Trialability Complexity Design Quality & Packaging Cost 	Outer Setting <ul style="list-style-type: none"> Patient Needs & Resources Cosmopolitanism Peer Pressure External Policy & Incentives 	Inner Setting <ul style="list-style-type: none"> Structural Characteristics Networks & Communications Culture Implementation Climate Readiness for Implementation 	Characteristics of Individuals <ul style="list-style-type: none"> Knowledge & Beliefs about the Intervention Self-efficacy Individual Stage of Change Individual Identification with Organization Other Personal Attributes 	Process <ul style="list-style-type: none"> Planning Engaging Executing & Evaluating
Common Theme #1 <ul style="list-style-type: none"> "It's just that we don't get to see one another or be together. You know, human beings need to socialize." 	Common Theme #2 <ul style="list-style-type: none"> "It was not that I didn't choose to [participate]...my whole world... turned upside down...because the pandemic." 	Common Theme #3 <ul style="list-style-type: none"> "When you have a face-to-face opportunity, because you get a greater sense of the whole person" 	Common Theme #4 <ul style="list-style-type: none"> "I think it's...people self-selecting to engage in or use the services that are available." 	Common Theme #5 <ul style="list-style-type: none"> "Those residents...that [participated]...continue to be holistically well"

DISCUSSION

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- 8 of the 14 residents that completed pre-surveys participated in activities.
 - Limited change seen in quantitative measurements of loneliness and participation.
 - Qualitative data indicates overall positive regard for programming and confirms presence of key barriers to implementation
- The activity committee required more involvement from the students to plan and implement activities due to passive resident involvement.
- Students had the most control over intervention characteristics and the process domains of CFIR and less control over components of the intervention directly affected by the organization's inner/outer setting and individual characteristics of staff and participants.

FACILITATORS	BARRIERS
Resident & staff champions	Resident stage of change & self-efficacy
Collaborations with community organizations	Technology access & resident digital literacy
Organizational tension for long-term change	Organizational Readiness
Flexibility in design of program	COVID-19 precautions & access to space

CONCLUSION

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- Participants benefited from a program designed to reduce social isolation under the constraints of the COVID-19 pandemic.

FUTURE DIRECTIONS

- This type of program can be adapted for use as regular programming at Moorhead Tower and other community-based settings to improve health outcomes with the use of the Activity & Resource Binder as a guide for design and implementation.
- Pursuing additional funding for more opportunities to increase resident digital literacy and access to technology will only serve to further enhance quality of life and independence.

IMPLICATIONS FOR OT PRACTICE

- Current evidence shows the need for occupational therapy to better integrate promising interventions geared towards social participation into practice.³ Occupational therapists should include more social isolation interventions into their daily practice.

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