

Submission for the Caring for Older Australians Productivity Commission Inquiry

By Jacqueline Quirke

(MCommHlth, GradDipHlthSc; DipAppSc (DT))

Redleaf Training and Consultancy

The aim of this submission is to highlight the importance of the provision of leisure services to older people. Limited leisure services are currently offered to older people (both within the community and residential care), by qualified professionals, even though the benefits of leisure participation is mounting through research being undertaken globally.

I would like to urge government and service providers to increase the amount and type of leisure services available to older people both through community programs and within residential aged care facilities. These services must be provided by qualified professionals such as diversional therapists.

Successful ageing is a central issue that needs to be addressed by service providers, planners and policy analysts particularly as the population ages. Successful ageing, according to Earle (1996) is a process whereby individuals have the security to maintain productive involvement in activities and interactions which in turn enhance personal satisfaction, autonomy, integration and creativity. Participation in leisure programs and activities contributes to this process of successful ageing and therefore requires formal recognition as an essential service within the various sectors of the aged care industry.

There is growing recognition that older people's quality of life is not solely dependent upon providing quality medical and physical care (Ejaz, Schur and Noelker, 1997, p. 54) but that involvement in appropriate leisure programs which contribute to older peoples social, creative, emotional, psychological, spiritual and cognitive well being is just as important. The Universal Declaration of Human Rights (Article 27) encourages all cultures and societies to recognize the right to rest and have leisure. The Charter for Leisure (<http://www.worldleisure.org/pdfs/charter.pdf>) takes this even further stating

that “all people have a basic human right to leisure activities” and the “provision of leisure for quality of life are as important as those for health and education”. In many societies leisure is no longer seen as a privilege or a right earned after hard work, it is now being recognized as a fundamental need to achieving a healthy lifestyle.

Even with this growing recognition that leisure is an essential aspect of successful ageing leisure still receives the **least amount of attention** for the following reasons:

1. Leisure is not seen as important – health care professionals focus predominantly on medical and physical care; and
2. There is also a perception that leisure will take care of itself. How hard can it be to find something to do (McGuire, Boyd and Tedrick, 1996, p. 3).

Leisure because of its many benefits should not be given the lowest priority and there needs to be a health professional specifically allocated to provide leisure services otherwise there is a risk it will be neglected.

Leisure, within our society, should **no longer be seen as a privilege or reward**; it is a condition of well being and is an essential element of life, a right which should not cease simply because of one’s age and especially because the person is unable to independently access leisure pursuits for themselves. Leisure and successful ageing are interrelated and the provision of leisure services has the potential to significantly contribute to the quality of life of older adults living within the community and within supported accommodation. Older people also have a right to access services provided by trained professionals which is what others in society expect from the services they access. As such, leisure is relevant in any setting where people retain the right to live like human beings (Sylvester, 1992, p. 18-19).

In a recent study undertaken by Professor Hal Kendig, from the University of Sydney, lifestyle, social and health factors, such as being underweight, having inadequate nutrition or **having low social activity**, have been shown to be **significant contributing factors to the entry of older people into residential aged care**. "Changeable and improvable lifestyle factors such as physical activity, nutrition and social engagement are important because they influence overall health and whether you are able to function in daily living," said Professor Kendig. Understanding all the contributing factors as to why some people move into residential care was essential to developing intervention strategies to help older people stay in their own homes as well as in improving their quality of life, he said. The study found that out of the 1,000 participants only 19% ended up in residential care during the 12 years, underscoring

the importance of community care relative to residential care. "This study shows there are good reasons we should invest in better health promotion throughout life because it improves health and wellbeing and can reduce demand for expensive residential care." (<http://www.agedcareguide.com.au/news.asp?newsid=4604>)

Research tells us that older people live longer, remain in their own homes longer and participate more fully in community life when they have satisfying hobbies, various recreation pursuits and a positive leisure ethic. The economic benefits of these outcomes are obvious; they reduce health costs as they increase the vitality and the independence of the individual (<http://www.geog.ualberta.ca/als/alswp4.html>).

A study by Geiger and Miko in 1995 found that older people assigned four main benefits to involvement in leisure activities:

1. *Sense of continuity and security*

Leisure activities offer a legitimate source of identity after retirement (Bevil, O'Connor and Mattoon, 1993, p. 7) and leisure is a powerful force in helping make later years positive and exhilarating (McGuire, Boyd and Tedrick, 1996, p. 3).

Planned leisure services can make a significant contribution to individual's perception of enjoyment and well being (Teaque and MacNeil, 1992) and enable participants to be in control of something which provides them with meaning and satisfaction. They also enhance self-esteem and reinforce self confidence (<http://www.geog.ualberta.ca/als/alswp4.html>).

According to Teaque and MacNeil, individualised leisure services may be used as an intervention strategy to not only maintain health but also to help restore an individual's ability to lead an independent, satisfying life"(1992, p. 225). Exposure to an environment with increased opportunities results in increased activity among elderly persons as well as improved satisfaction with their living situation, better self evaluation of health, and increased longevity (Carp, 1978). Appropriate leisure programmes which are stimulating and meaningful enhance an individual's motivation as well as promoting a positive outlook, encouraging social interaction and stimulation in pride and achievement (Pittman, 1990).

2. *Desire to learn and to be mentally challenged*

Appropriate leisure programs participated in and suited to the individual are often crucial factors in preventing and delaying mental deterioration (Alzheimers Australia, 2009). Maintaining intellectual skills and the opportunity to be challenged is viewed as

an important aspect of leisure programs for people of all ages. Continuing education “is an essential factor in enabling people to rationalise existing beliefs and conditions and also in providing new information in a changing society” (Earle, 1996, p. 155). Education can provide people with opportunities to become more involved, more autonomous, more creative and gain increased integration and satisfaction in the process (Earle, 1996, p. 156). The desire to learn and be mentally challenged does not diminish with age and it is often a time for older people to pursue these benefits in a supported environment.

3. *Desire to interact with others*

Human beings are social animals, regardless of age, social and family interactions are significantly related to life satisfaction. This desire to interact with others remains even greater in later life, and social contact and friendship have been found to be an important aspect of well being (Sabin, 1993). Friendships can help validate feelings of self worth and social integration, and can provide an identity and give meaning to life (Patterson and Pegg, 1998, p. 26). Leisure is an area where social relationships can be made with participants on an equal footing, and each person can negotiate giving and receiving support (Patterson and Pegg, 1998, p. 26). The availability of and participation in activities provides opportunities for social interaction, the development of friendships and reduced social isolation. This, in turn, is associated with improved mental and physical status (Ejaz, Schur and Noelker, 1997, p. 54).

Group participation is empowering for people of all ages; groups become a vehicle for exerting control and for developing competence and mastery, while developing new friendships and assuming new roles (Solomon and Peterson, 1994).

Research findings related to involvement in leisure activities and/or inclusion in social networks include:

- Studies carried out with 37,000 people in the United States, Sweden and Finland indicated that people who are isolated and healthy are twice as likely to die over a ten year period than healthy people who are not isolated.
- A study reported in the *Cornell University Science News* (17 September 1993) concluded that social isolation of the elderly is linked to higher rates of depression and other illnesses and that many studies in the past two decades have shown that two factors – social support and multiple roles – have been found to improve both the physical and mental well-being of the older people.
- Studies at Cornell University (*Karl Pillemer*) show that elderly people who are socially isolated have higher rates of physical and mental illness.

- A Swedish study (Fratiglioni,2000), followed approximately 1,200 elderly people without dementia for an average of three years, and found that those with a limited or poor social network had a 60% increased risk of developing dementia.

(Koop and Quirke, 2004)

4. Sense of helping others

This can be reflected in the desire to volunteer for a variety of purposes. Older people volunteer in a variety of programs and service areas. Volunteering both formal and informal can be facilitated through leisure programs both within residential care and community services. Diversional therapists utilise a number of volunteers within their programs and services.

The benefits of leisure are many – improved social skills, maintaining and improving physical fitness, maintaining intellectual skills, promoting stimulation and interest in life and the provision of opportunities for pleasure and fun (Brown, 1994, p. 251). Leisure can also bring direct benefits which may include, building a sense of belonging and security, mental stimulation, happiness, increasing decision making, independence, relaxation, socialisation, escapism, and opportunity to express ideas and be creative, increased self esteem decreased boredom and frustration and personal growth (Department of the Arts, Sport, the Environment, Tourism and Territories, 1990).

Indirect benefits can also be gained, including maintaining fitness levels, improved sleep patterns which reduce the need of sedatives and other medications, reduction in digestive complaints and maintaining physical and mental health.

These benefits will be maximized if the appropriate professional is employed to oversee and or implement the leisure and recreational programs as every individual has a collection of life experiences which shape their leisure preferences. Diversional therapists are the health professionals qualified to identify and assess these leisure preferences and to design, implement and evaluate appropriate leisure programs. But as Bauze observed “in some areas of the healthcare system, there appears to be a negative attitude towards diversional therapy. These attitudes could result from a lack of knowledge and recognition of the services diversional therapists can provide for clients, and misconceptions of the role of diversional therapists as an integral and valuable member of the interdisciplinary team”(1993, p.8).

Diversional Therapists are often under-utilised and employers do not always take advantage of the knowledge and skills diversional therapists possess. This lack of

recognition and under-utilisation of diversional therapists can be contributed to the low status leisure is afforded by other health care professionals and the lack of understanding of the knowledge and skills required to develop appropriate leisure programmes that will allow people to gain the benefits of leisure. Without a health professional specifically allocated who has the appropriate education we run the risk that older people will not have the opportunity to experience the benefits of leisure and therefore enable successful ageing.

Diversional therapists recognise the significant contributions that leisure makes to an individual's lifestyle. Diversional therapy is a client centred practice and recognises that leisure and recreational experiences are the right of all individuals. Diversional therapy practitioners work with people of all ages and abilities to design and facilitate leisure and recreation programmes. These activities are designed to support, challenge and enhance the psychological, spiritual, social, emotional and physical well being of individuals. The diversional therapist provides opportunities whereby each individual may choose to participate in leisure and recreation activities which promote self esteem and personal fulfilment. The diversional therapist facilitates individual client choice, decision making and participation when developing and managing leisure and recreational programmes.

Currently, services are provided to meet the physical and medical care needs of older people but there are limited opportunities for older people to access appropriate leisure and recreational services provided by a diversional therapist that contribute to their social, creative, emotional, psychological, spiritual and cognitive well being. The above findings add to the growing literature on the importance of focusing not merely on the physical needs of older people but also on their socio-emotional and mental health needs (Ejaz, Schur and Noelker, 1997, p. 63). Diversional therapists are the most appropriate healthcare professionals to facilitate and plan leisure programmes for older people so that they may reap the many benefits of leisure and achieve successful ageing and the quality as well as quantity in life.

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