

Introduction

- Senior centers serve as community focal points, providing opportunities for older adults to come together for services and programs which enhance their dignity, support independence, and encourage involvement within the community (Anetzberger, 2019).
- Lack of access to community services are described as the second most prevalent barrier to older adult health and wellbeing (Brim et al., 2023).
- Intervention programs that focus primarily on the meaningfulness of activities, either by adjusting the level of challenge according to the individual's abilities, or by prioritizing older people's decision making show a high strength of evidence (Portillo et al., 2022).

The current and rapid growth of the aging population requires analysis of community-based interventions, and further services needed to support this growth. **This study aims to analyze existing group-based programs at the Medford Senior Center, attendance within these groups, and discuss the groups that provide a means for occupational therapy intervention to benefit the member's quality of life.**

Purpose

To bridge the lack of evidence supporting occupational therapy's role in community-based older adult settings by assessing the impact of group-based interventions on older adults at the Medford Council on Aging (CoA).

Research Questions

1. How could occupation-based group interventions benefit older adults in the community?
2. Which group-based interventions are most successful in increasing self-perceived quality of life among seniors?

Research Design and Methodology

Method	Focus Groups	Attendance Records	Interview
	<ul style="list-style-type: none"> → Two one-hour in person group sessions → Questions compare existing groups to self perceived QoL → OPQOL-BRIEF to measure quality of life 	<ul style="list-style-type: none"> → Group attendance records of 134 groups from 1/1/2023 - 6/7/2024. → Records display amount of duplicated participants, unduplicated participants, and hours of participation. 	<ul style="list-style-type: none"> → Semi-structured interview with the most popular instructor identified by frequency of focus group mentions.
Participant	<ul style="list-style-type: none"> Total: 9 participants Inclusion criteria: <ul style="list-style-type: none"> → Active CoA Members → Member of 1 recurring group of at least 4 sessions. → Group participation within the last year 	Demographics: <ul style="list-style-type: none"> → 78% female → 63.5% white → 95% report not living alone. 	Instructor: Core and Balance (C&B) teacher of biweekly fall prevention class.
Analysis	Thematic analysis	Classification of records based on OTPF definitions. Descriptive Statistics	Highlight major points and compare to five derived focus group themes. Data Triangulation

Results

Theme 1: Procedures and Protocols
Roles, infrastructure, Environment, Funding, Staff

"I feel very rewarded. Sometimes guilty but I get so much out of [volunteering] I think I get more out of it than the people that I work with"

"They have a social worker. Sometimes I wonder what her role is"

Theme 4: Facilitators to Occupational Participation
Social Connection, Self-perception, Physical Health

"I love to talk to the people, and it's sort of a lifesaving thing. I know on Thursdays I am coming here; I am not going to be by myself, and that is really important."

Theme 2: Group Programming
Participant Experiences, Programmatic Elements

"I mean I don't know any other place that offers all of it. It is so diverse. And there are people really trying to get well being here in one of these groups"

Theme 5: Barriers to Occupational Participation
Physical, Emotional, Psychological, Stigma, Limited Diversity, Occupational Injustice

"I mean I know people that won't go to senior centers. They call them old people homes. You really have to stuff your ego to surrender to all the things. It is the process of getting old. I am glad I am able to be here."

"Line dancing, that was my very favorite but now I am compromised with my hip."

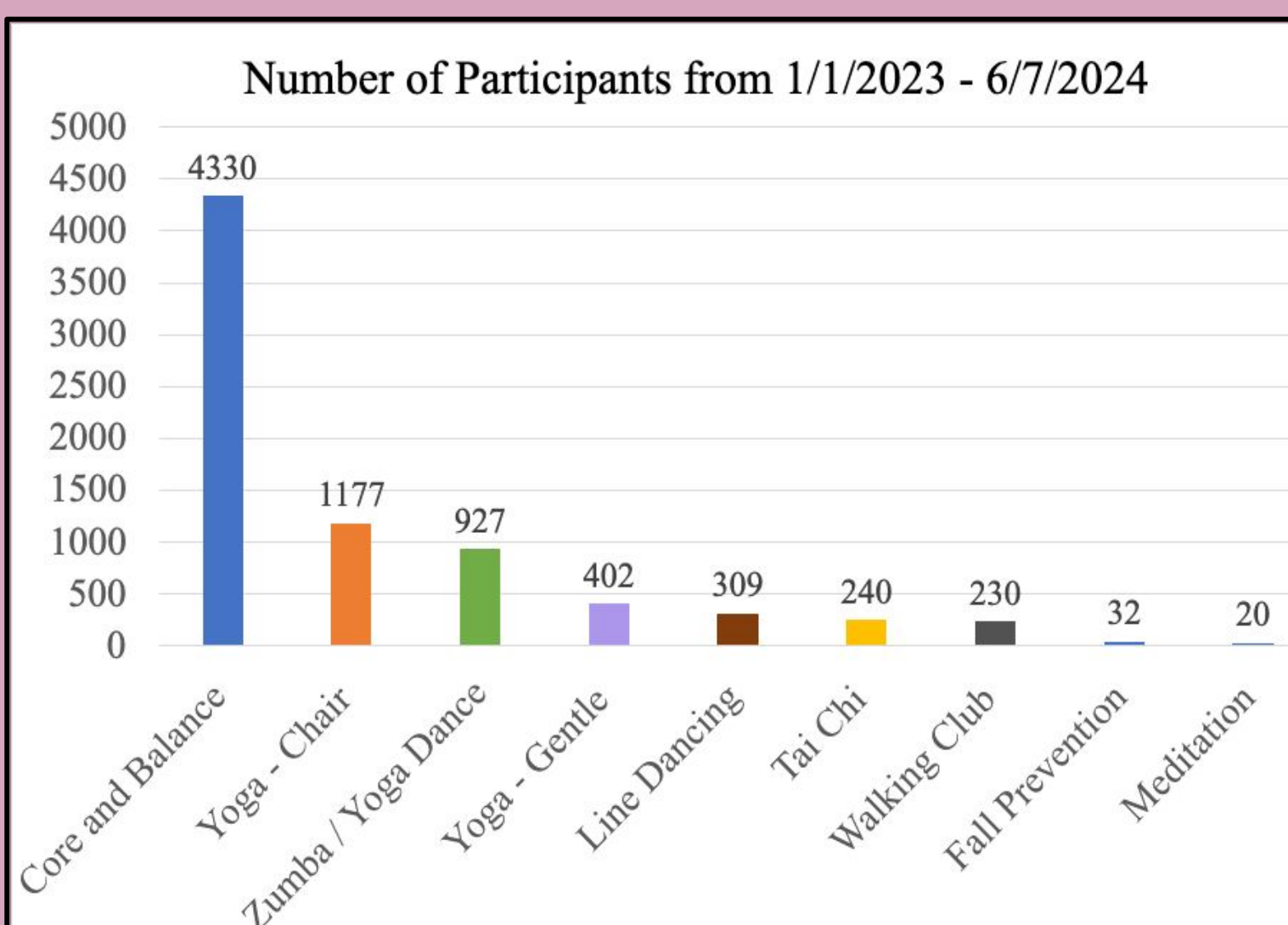
Theme 3: Finding Meaning
Personal Causation, "Why"

"For years I was more or less staying in the house. Not going anywhere -I came here. And so, it's the best thing I've ever done in my life because it has saved me. My sanity. And my emotions."

Senior Center Attendance

	Number of Check-ins	Individual Participants	Hours per Person
Health Management Health Clinics, Seminars, Support Groups, Physical Activity	313.42	34.67	11.37
Education / Vocation Seminars, Technology, Community Engagement, Administrative Meetings	93.98	22.73	2.51
Social Participation & Leisure Social events / Parties, Trips, Meals, Music / Performing Arts, Arts and Crafts	477.49	49.28	9.87

Physical Activity Groups



Most Attended Group: Core and Balance

Instructor Interview Topics "What makes a successful group?"

- Emotional Empowerment
- Safe Yet Effective
- Just Right Challenge
- Positive Reinforcement

Key Takeaways and Recommendations

Takeaway	Recommendation
Group Participation Influences QoL	Integrate Occupational Therapy Services Design and lead evidence-based programs that enhance physical health, mental well-being, social connections
Physical Activity Groups Reported Most Beneficial for QoL	Create Accessibility within Groups <ul style="list-style-type: none"> • Adaptable group programs for differing physical needs • Personalized programming
Barriers to Participation: 1. Physical Limitations 2. Mental Health 3. Stigma	Foster Community Partnerships <ul style="list-style-type: none"> • Collaborate with Educational Institutions (OT, PT, Nursing, Social Work students) • Increase community awareness through media and community events • Explore grant opportunities
Facilitators to Participation: 1. Social Connections 2. Physical Health	Develop a Peer Mentorship Program to Support New Members <ul style="list-style-type: none"> • One-to-one peer mentorship • Partner existing members with new members • Ease the transition and foster social connection
Difficulty with Social Worker Accessibility	Improve Social Worker Awareness and Accessibility <ul style="list-style-type: none"> • Clarify the social worker role • Incorporate social worker into group activities • Develop social worker resources
Volunteer roles improve mental health, personal causation, and social connections	Enhance Volunteer Programs <ul style="list-style-type: none"> • Expand volunteer opportunities and roles • Recognize volunteer contributions to reward efforts

Conclusion

This research displays the role of group interventions in enhancing quality of life in older adults by fostering social connections, promoting physical health, and avenues for meaningful engagement in occupations.

Future Implications for Research

1. **Enhancing Group Accessibility:** explore the development and effectiveness of adaptive group activities tailored for older adults with varying physical and cognitive abilities.
2. **Interdisciplinary Roles in Senior Centers:** research focusing on the collaboration of Social Work, OT, and other healthcare professions and their impact within the community setting.

References & Resources



Contact

tabitha.franceschini@tufts.edu
temor.amin_arsala@tufts.edu