A Collaborative Exchange Session with the Elderly in the Community on Health and Longevity
- Understanding the needs of the elderly -

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Abstract
Purpose: To devise a program to promote the health and longevity of the elderly, and implement an exchange session based on collaboration between the university and the elderly in the community.
Methods: Faculty members devised a program aimed at understanding the health needs of the elderly in the community, including health promotion and longevity.
Results: After opening with a demonstration of calisthenics introduced in senior community clubs, faculty presented lectures in a relay system covering the following topics: 1. Social withdrawal and inactive lifestyle; 2. Current status of long-term care insurance recipients; 3. Meals for health promotion; and 4. Simple training methods to increase muscle strength.
Conclusion: This exchange session aimed to identify the needs of the elderly in the community. We believe the session successfully raised awareness about these issues. It will be necessary to build a foundation of collaboration with the community to further address the needs of the elderly.

Introduction
Our country is becoming a super-aged society like no other in the world. Nursing care insurance is expected to be necessary for the first post-war baby boomer generation by 2015, and for late-term elderly by 2025. In 2005, the Nursing Care Insurance Law was revised so that these future living and nursing requirements of the elderly population would be adequately met. One of its basic goals is to “build a cheerful and lively super-aged society.” The law included specific requirements including plans for transition to nursing care prevention systems and roles expected to revitalize local economies.

According to the 2003 World Health Organization (WHO) indices, Japan led the world in healthy life expectancy at 71.9 years for men and 77.2 years for women. (Igata, 2007) Currently, healthy longevity is popularly considered as “successful aging,” preventive measures which can delay conditions leading to nursing care are particularly emphasized. (Yamazaki, 2007) As more people desire to live an energetic life in the coming age of healthy longevity, the idea of protecting one’s health has been replaced by the notion that health is something to be gained from our own efforts. Therefore, “protective health” has undergone a great transformation into “creating health.” (Igata, 2007) Given the current societal conditions, local communities must become involved in developing practical measures which help the elderly to avoid

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nursing care, falls, and social withdrawal. In order to provide local activities and promote health among the elderly (≥65 years) in Kitaku, Niigata (20.53% are ≥65 years, according to statistics from September 30, 2007), we organized an exchange session in October 2007, in which university faculty designed a healthy longevity program to coordinate and collaborate with the elderly. In this report, we discuss the progress and significance of this program.

Methods
Understanding the Needs of the Elderly
We presented a program on healthy longevity to the business office of the senior citizens’ club association (hereafter, senior citizens’ club) of Kitaku, Niigata in Japan, where the university is located. At each senior citizens’ club, we conducted interviews on members’ approaches to health, interests in health, opinions regarding the program, and whether or not a resident participation-style exchange would be possible. A detailed, follow-up interview was conducted when the initial interview indicated that a participation-style exchange would be possible. Specifically, the following issues were discussed in preparation for program implementation: when to hold the program sessions, estimated number of participants, means of transportation, and expectations from the university.

Production of Programs Offered by the University
As determined by the interviews conducted to establish the needs of the elderly, university faculty in each area of specialization developed a program that focused on “healthy longevity.”

Preparing to Introduce Student Volunteers
We planned to involve student volunteers as a way to increase participants’ satisfaction with the program and to provide an opportunity for exchange between students and the elderly. Students would perform measurements of health indices, such as blood pressure and grip strength, thereby creating an opportunity for mutual interaction.

Preparing the Site
Site preparations involved confirming the approximate number of elderly participants, securing the site itself, preparing the site, and setting up guides according to plans.

Securing Transportation for Participants
Given that many elderly have no means of transportation to the university grounds, we arranged for shuttle services to and from the program site.

Ethical Considerations
In order to obtain consent from all participants, chairmen and officers of the senior citizens’ club explained the purpose, aims, content, methods, voluntary nature, and confidentiality of participating in this program to the elderly. The information was also provided in writing.

Results
Understanding the Needs of the Elderly
The senior citizens’ clubs of Kitaku had previously worked with the university through student practical training and were highly cooperative. We obtained informed consent from the elderly necessary to conduct the exchange sessions so that the specific contents of the potential program could be discussed.

Some members of the senior citizens’ clubs had continuously engaged in health promotion activities, including exercising to rhythmical tunes such as “Zundoko-bushi (Zundoko Tune)” and “Kitaguni no haru (Spring in the Northern Country).” Issues that were brought up regarding health promotion included reasons for living, healthy longevity, nursing care prevention, and meals. Interviews also revealed that the interest level of a particular theme was correlated with the
likelihood for elderly participation. With respect to the length of the sessions, members of the senior citizens’ clubs suggested that a 1-2 hour range would be the most appropriate for the elderly. The university was chosen as a location for sessions, in response to comments such as “I live close to the university but don’t know what kind of place it is, so I would very much like to make use of this kind of opportunity to visit it.” We decided to start the program in October, after coordinating with the yearly activity plans of the senior citizens’ clubs. In addition, we arranged for the senior citizens’ clubs to call each other to actively recruit and coordinate participants. Since activities are normally conducted separately by region, the exchange sessions were received very positively as an opportunity for interaction between senior citizens’ clubs. Over the course of many meetings, we received requests for exercise demonstrations by senior citizens’ clubs involved in health exercises.

**Program Details**

**Social withdrawal and inactive lifestyle diseases.**

The conditions of daily life were organized in a way that could be easily understood. With respect to preventing inactive lifestyle diseases, essential points such as sitting as much as possible, cleaning up one's vicinity to facilitate movement, putting safety first, never overworking oneself and not becoming frustrated or stressed were summarized and presented using figures.

**The current state of nursing care beneficiaries.**

The aim was to have the participants understand daily life circumstances of the elderly requiring nursing care, as well as the current state of nursing care beneficiaries. Contents of the program encouraged the participants to (1) not give up even if one requires nursing care, (2) maintain strength and prevent physical weakening, falling, and dementia, and (3) strive towards mutually supporting one another in the local community and take advantage of benefits early to prevent conditions from deteriorating. The sessions suggested that contacting and helping one another could be initiated immediately at the local level, and that such engagement could revitalize the entire region.

**Meals for nursing care prevention.**

Using food models, participants learned about their daily nutritional requirements by physically seeing and feeling the required food intake. We also included standards for eating between meals and produced colored pictures to facilitate their understanding. To promote self control and ensure a balanced food intake, we used colored pictures of daily meals and created tables for weekly recording food intake. Examples were made to facilitate participant use.

**Facts about simple strength-training methods.**

The aim of this theme was to perform simple
strength-training methods to be utilized by the elderly, and to have participants understand the importance of maintaining muscle strength. We prepared brochures with photographs of models in different poses, numbered in order so that participants could better remember the exercises at home. All lecture materials for the 4 themes were put together and made into a booklet.

Student Volunteers
We recruited 5 student volunteers who helped measure blood pressure levels and grip strengths of the elderly. Measurements were recorded on paper and were compared across age groups. The results were distributed to the participants as an exchange opportunity between students and the elderly.

Site Preparation
We secured an area to demonstrate exercises for the elderly and a space to display food models to be used for “meals for nursing care prevention.”

Means of Transportation
We obtained 2 minibuses to shuttle participants to and from the site in order to facilitate their participation in the senior citizens’ clubs. One faculty member was assigned to escort each bus to confirm the number of participants at the time of boarding and disboarding, and to ensure their safety (Figure 1).

Discussion
A total of 60 elderly members from 6 senior citizen clubs and 20 others participated in the exchange sessions. Student volunteers performed health index measurements, which was highly popular. The program introduction began with a demonstration of health exercises and the elderly appeared to enjoy moving to the music. This provided momentum for the subsequent series of lectures which proceeded smoothly. The lectures were a success because the style of presentation allowed for active participation by the elderly, which enhanced their satisfaction. Since all lectures related to some aspect of their lives, the elderly participants listened attentively and

Figure 1.
nooded in recognition of the topics. The “meals to prevent nursing care” lecture elicited the most questions. We believe that this response reflects the participants’ consciousness and high degree of interest in their nutrition.

It is highly important to improve the nutrition
of the elderly in order to prolong their life expectancy. The following target goals have been established for the year 2010 as part of “Health Japan 21”(Nakamura, 2008): an increased proportion of elderly eating meals of proper quantity and quality, an increased proportion of elderly who understand portion sizes, an increased number of elderly with the desire to improve their diet, an increased number of venues to learn about health and nutrition, and an increased number of participants attending such venues. We believe that our program’s focus on nutrition provided an opportunity for learning that will support individual behavior change.

With respect to “social withdrawal and inactive lifestyle diseases,” the latter is becoming an increasingly important component of nursing care insurance. In addition, the fact that it is listed in the “Nursing care prevention service/support planning table” indicates that inactive lifestyle diseases have become important targets of nursing care prevention. The 3 key phrases, “disuse syndrome (inactive lifestyle diseases),” “daily life functions,” and “shoreline operations,” suggest that inactive lifestyle diseases (Ohkawa, 2007) will become increasingly important with respect to insurance, medicine, nursing care, and welfare.

Blood pressure and grip strength measurements performed prior to the exchange sessions were very popular, indicating the elderly participants' high level of interest in their own health.

The effects of physical interventions, in which the elderly engage in muscle strengthening exercises, are not restricted to improvements in bodily function. It is becoming increasingly clear that these interventions also benefit mental function. Not surprisingly, improvements in mental health can engender positive attitudes and empower people. Therefore, physical interventions are highly significant from the perspective of nursing care. (Yoshida, Nakano, & Okita, 2008) As such, we hope that the elderly will incorporate these exercises into their daily lives. The fact that we invited the elderly to participate in the program and conducted exchange sessions in collaboration with senior citizens' clubs may have elicited increased participation. In fact, according to a study by Okamoto et al. (Okamoto, Okada, & Shirasawa, 2006), the daily social activities that the elderly engage in are strongly influenced by their interactions with others.

Health promotion activities for the elderly are likely to expand in the future, particularly within the context of local senior citizens' clubs. In order to support their activities for healthy longevity, a continuous exchange with the university must be maintained, based on the relationships established in the present program.

For the 2008 academic year, university faculty will hold monthly courses at off-campus sites to continue the exchange sessions. The themes have been designed to allow each course to be constructed in detail. As Okamoto et al. (Okamoto, Okada, & Shirasawa, 2006) concluded, regional representatives must be identified to engage with the elderly and their activities, and to simultaneously build a community in which they can participate in activities that enable connections among localities. We believe that senior citizens’ clubs are facing a transition. As their relationship with our community deepens and as their expectations from the university increase, we hope to contribute more actively to community-building through coordination and collaboration.

Conclusion

In this program, we sought to understand the health needs of the elderly by conducting exchange sessions focused on 4 themes related to “healthy longevity.” The result was a program designed with a focus on the needs of the elderly. Although time was limited, we were able to implement the program in a highly meaningful manner. The participants’ level of satisfaction was
high and we were able to continue the program through periodic courses at off-campus sites. We believe that it is necessary to further strengthen the coordination and cooperation between the university and the community, and to develop various programs geared towards healthy longevity.

References


