

# Promoting Wellness and Participation in Older Adults: A Community-Informed Occupational Therapy Workshop Series

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## Purpose

To develop and implement an evidence-informed occupational therapy workshop series promoting wellness, participation, and healthy aging priorities identified by older adults and staff at Northaven Senior Living.

## Background

- Northaven Senior Living is a non-profit affordable housing community in Seattle, WA, serving adults aged 62 and older.
- As adults age, they commonly experience physical, cognitive, sensory and psychosocial changes that may impact participation, independence and overall well-being.
- Wellness programming is increasingly a priority in senior living, but few programs are designed to reflect the individual needs and preferences of older adults.
- Occupational therapy is well positioned to address this need through client-centered education, adaptation strategies and wellness-focused interventions.

## Project Process

Phase 1: Needs Assessment    Phase 2: Program Development    Phase 3: Implementation and Evaluation

Site visits and observations  
Formation of advisory council  
Community-wide dot sticker survey

Literature review  
Topic selection  
Workshop content and activity design

Workshop delivery  
Surveys  
Feedback analysis

## Phase 1: Needs Assessment

A multi-method, community-engaged needs assessment was conducted, which included:

- Site visits and observations of existing programs.
- Formation of resident advisory council with 12 residents.
- Dot sticker survey to assess topics of interest for all residents (153 total votes).

### Resident priorities:

Technology use  
Memory and cognition  
Fall prevention  
Physiological effects of aging  
Sleep health

### Existing strengths:

Strong resident engagement  
Supportive staff  
Established community activity structure

### Learning considerations:

Interactive learning preferred  
Need for accessible materials  
Social connection increased engagement  
Limited familiarity with occupational therapy

## Phase 2: Program Development

- Four workshop sessions developed based on a literature review on community-informed wellness topics and evidence-based practices.
- **Session structure:** 1) Topic-specific education; 2) an interactive learning activity tailored to the topic; 3) opportunities for residents to share experiences and self-identify strategies; and 4) take-home handouts to reinforce key concepts.
- **Session content:**

Myths, Facts, and Life Hacks: The Surprising Truths of Getting Older

Fact-or-fiction game on aging topics, followed by education and practical strategies and tools to use in daily life.

Memory Health Matters: Practical Strategies for Everyday Life

Discussion-based exploration of residents' current cognitive strategies and self-management tactics.

Making Technology Work for You

Hands-on smart phone practice covering accessibility settings and scam recognition.

Move Well, Live Well: Mobility and Fall Prevention in Daily Activities

Home fall hazard analysis, exercises, fall recovery demo, and Jeopardy on adaptive equipment and home modifications.

## Phase 3: Program Implementation and Evaluation

### Workshop delivery:

- Four 45-minute sessions were delivered by one student leader twice a week over two weeks, in person on-site.
- On average, 20-30 residents attended each session.

### Evaluation survey:

- Paper survey distributed at the end of each session.
- Survey questions included retrospective pre and post confidence rating (10-point Likert Scale) and open-ended questions on what was learned, what worked and did not work well and future topics.
- On average, less than half of the participants completed the end survey for each session.

### Quantitative findings:

- All sessions except for technology showed a medium to large effect on participants' confidence.
- Overall average satisfaction rating of 9.36/10 for sessions.

Sessions	n	Confidence: Mean (SD)		Effect size (d)
		Pre-session	Post-session	
Session 1: Myths, facts, and life hacks	12	7.75 (0.87)	9.17 (0.58)	1.92*
Session 2: Memory and cognition	16	8.88 (1.20)	9.31 (0.87)	0.41*
Session 3: Technology	7	7.29 (1.80)	7.86 (1.57)	0.34
Session 4: Mobility and fall prevention	4	8.25 (1.5)	9.75 (0.5)	1.34*
Across sessions	39	8.18 (1.37)	9.00 (1.07)	0.67*

\*moderate to large effects

### Qualitative findings

- Qualitative responses showed that participants liked games included in the sessions and learning about specific strategies and tools that they could incorporate into their life.
- Suggestions for improvement: Technology training would work better split by operating system (Apple vs Android).
- Future topics suggested included: sexuality, eyesight and hearing loss strategies, kitchen strategies, nutrition for aging, psychological adjustment to aging and mobility aids.

### Quotes from Participants

- "That I'm not alone. There are ways to cope."
- "Your team of students appear to understand elders and respect us. We often don't experience that with younger generations and families."
- "Helped to reinforce strategies to use."

## Discussion and Recommendations

- Developing a program that reflected resident interests, preferred learning styles, and community culture resulted in high participation and satisfaction.
- Needs assessment activities provided insight into resident interests and also supported building relationships with the community.
- Recommendation: Encourage participants to complete exit survey before leaving session to increase response rate.
- Future direction of this projects could include more in-depth workshops in the topics of interest, individual support in areas, and making the sessions self sustainable within the community.



References:  
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