

Do Intergenerational Activities do any Good for Older Adults' Well-Being? A Brief Review

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Abstract

Introduction: With the rapid growth in the oldest old segment of the population across the world, public policy interests tend to be more directed to quality of life than quantity of life for those of advanced age. Although there is a growing body of literature on the effects of psychosocial interventions for older adults, interventions from a cross-generational viewpoint are under-researched. This article briefly reviews the impacts on the well-being of community dwelling older people of participation in non-kin related intergenerational activities.

Method: A literature review was conducted to assess current research regarding intergenerational activities and outcomes among older adults. The search included English-language publications that reported original data from January 1986 to mid-2014. Studies were published in a peer-reviewed journal and without country restriction. Supplementary searches were performed and a narrative synthesis was conducted. Intergenerational interventions involving older people with dementia were excluded.

Results: Overall positive benefits from the intergenerational programmes can be seen in terms of improved cognitive functioning, as well as in the emotional and social dimensions of well-being for older adults living in the community.

Conclusion: More studies with larger sample sizes and longer-time horizons are needed to confirm the optimal levels of intensity and duration that would maximize the synergistic effects for all participating generations.

Keyword

Well-being; Mental health; Older people; Social activity; Intergenerational programmes; Volunteers; Community

Introduction

According to the World Health Organization, "health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity" [1]. With the rapid growth in the oldest old segment of the population across the world, public policy interests tend to be more directed to quality of life than quantity of life for those of advanced age. There is a growing body of studies looking at effects of psychosocial interventions for older adults [2,3]. However, relatively few studies have focused on interventions from a cross-generational viewpoint. The aim of this present study is to briefly review the impacts on the cognitive, emotional and social well-being of community-dwelling older adults' of participating in activities with other generations, excluding family contacts.

Methods

The search was restricted to the PubMed database. Studies had to be published in a peer-reviewed journal between 1986 and mid-2014 and written in English. There were no country restrictions but Intergenerational interventions involving older adults with dementia were excluded. Citations of relevant papers were also assessed and a

narrative synthesis was conducted. Medical Subject Headings terms were combined with free text words as indicated:

("Intergenerational program*") OR (("Intergenerational Relations/epidemiology"[Mesh] OR "Intergenerational Relations/ethnology"[Mesh] OR "Intergenerational Relations/statistics and numerical data"[Mesh])) OR ("intergenerational intervention")

The searches initially retrieved two-hundred and fifty one studies. After titles and abstracts were screened two hundred and thirty-one papers were excluded and twenty papers were considered. After reading the full-texts nine papers were excluded. Five involved people with dementia and four had direct family involvement. This left eleven studies in the review.

Results

Is it effective?

Regarding cognitive well-being, there is strong positive evidence from randomized controlled trials of the effectiveness of intergenerational programmes. Some studies looked at volunteering by older adults. The effects of an "everyday" activity programme on executive function and memory in terms of brain activity in the prefrontal cortex were observed in older adults in a volunteering programme (Experience Corp) in the US compared to those in matched non-volunteer control group. The volunteers had non-significant improvements in executive function ($p < 0.10$), as well as

better recall and memory ($p=0.05$), compared to those in the control group [4].

Concerning emotional well-being, there was moderate evidence on positive outcomes from intergenerational interventions. In an observational study from Canada older people expressed their enjoyment of intergenerational contacts with school children who visited them in their apartments [5]. They stated that *"they were brightened up by their vibrant energy and smiles."*

In an American study exploring the effects of the Elderly-Youth Exchange (EYE) programme older volunteers working with teenagers found this to be an enjoyable and rewarding experience [6]. Another qualitative study from Brazil investigated the impact of a school based intergenerational reminiscence programme. It found that older people reported positive effects on their mental health in terms of being valued and respected, with a sense of self-worth and overcoming shyness [7]. In a controlled study in the US, older adults taking part in musical activities with children also perceived an increased sense of self-worth [8].

Regarding social well-being, there is strong evidence that intergenerational activities enhance social networks and relationships with neighbors, as well as family members [9,10], while there is mixed evidence on impacts on the frequency of communication with friends and local neighborhood children [11] and mixed effects on trust [12]. A Japanese trial looked at the effects of an intergenerational health promotion programme involving adults aged over 60 who volunteered to read picture books with young children in kindergartens. They began reading with children after completing a weekly training course that lasted 3 months. The study found a significant increase in the social networks of older people in terms of the frequency of their contacts with children in the programme, as well as in support from friends and neighbors [10]. Another randomised controlled trial in Brazil, assessing the effects of a reminiscence programme to encourage interactive activities between generations, showed that older adults in the programme were twice as likely to consider their neighbours to be helpful (OR=2.27, $P=0.07$), or honest (OR=2.5, $P=0.008$) compared to non-volunteer controls, as well as having better quality of family relationships [11]. There was also a significant improvement the levels of social support received from friends or neighbors ($p=0.028$) [11]. However, there were no significant differences in the frequency of communication with friends and neighborhood children.

In a Japanese observational study [13] which assessed an interactive programme between preschool children aged 5-6 and older adults in community, the intervention groups showed significantly greater improvement in conversation levels between generations, more constructive behaviors ($p<0.01$), as well as more smiles being observed using a weighted smile rate ($p<0.05$). However, there is mixed evidence on trust. In the Japanese study older people felt that it would take a long time to trust others [13], while improved mutual trust was seen in the Brazilian study [12].

What matters the most?

The importance of patience and sufficient time should be considered as two of the most important factors to achieve desired outcomes as it takes time to trust someone in non-family relationships. So there is a question raised on how much time is needed to entuse both generations to start having any benefits?

According to some observational studies [5,14], it seemed to take some time to build up a rapport. For example, although for the first

few weeks there had been frequent periods of silence and an awkward atmosphere, 8 weeks later bonding had developed and reciprocity was observed [5]. In another example, which involved working with young people with mental health problems, it took three months for the older people became more patient and tolerant towards the behaviors of some adolescent participants [14]. The young people also started to show more appropriate pro-social behaviors over time and a more collaborative atmosphere developed [14].

Next we are naturally interested in identifying what aspects of intergenerational interventions lead to change. Types of interventions varied. They included reminiscence programmes where older people read picture books to children [4,10], a variety of art interventions, including musical activities ,moving to music, playing music instruments [8], singing [13], creative arts and crafts, portrait sketching [5] and playing games such as Bingo [14]. However, regardless of the type of intergenerational activity, it was found that the interventions implemented in smaller groups were more effective than those in larger groups. For instance, in one of the Japanese studies [13], older adults, who participated in a social-oriented programme, including traditional games, showed more smiles and laughter than those in larger groups that watched a musical performance by children. The larger group has more limited opportunities to interact with one another individually during the performance. Importantly, when playing traditional games, inputs from both parties were equally valuable to continuing the game and this also allowed older adults to have more chances to realize their desire for "generativist" by passing on their knowledge on the rules of the games and stories related to the origins of traditional games.

One of the key factors for success is to elicit active involvements, not only from the participants but also from related multi-stakeholders before, during, and after the lifespan of the programmes. It is essential to foster an environment for encouraging collaboration among school teachers, headmasters, local government officers and allied health professionals, as well as lay volunteers who may be either older adults or young people. Training is critical prior to implementing programmes. For example in the Experience Corps programme, older Afro-American women were intensively trained by rehearsing with peers on how to read children's picture books before intensive volunteering activities [4]. They also had contingency plans for back-up in case of the unexpected absence of some volunteers due to sickness and other commitments. In addition, on-going monitoring during and post- intervention is also important to identify potential barriers and facilitators. These will feed into finding better ways of evolving programme designs in future projects. Transportation services funded through programme grants to youth volunteers were viewed as a facilitator to intergenerational activities in the US. However, in a Brazilian RCT, it was found that a lack of transport in socially disadvantaged areas was perceived as a potential barrier to older adults attending sessions [11]. In this case having sufficient funding allocated to transportation needs would be helpful to increase uptake rates, particularly older adults with poor socio-economic backgrounds in low income countries.

Conclusions

Overall there were positive benefits from intergenerational interventions in terms of improved cognitive functioning, as well as in emotional and social dimensions of well-being for older adults living in the community. However, caution must be exercised as most studies were small in size and conducted in one location only. Generalizability

of the findings can be limited. There is a need for more development of culturally sensitive instruments to reflect local capacities and local country contexts, especially in developing countries. More studies with large sample sizes and longer-term horizons are needed to confirm the optimal levels of intensity and duration, which would maximize the synergistic effects for both generations.

References

1. World Health Organisation (1948) WHO Definition of Health.
2. Park AL, McDaid D, Forsman AK, Wahlbeck K (2014) Promoting the health and wellbeing of older people: making the economic case in the economics of wellbeing, Wellbeing: a complete reference guide. Wiley-Blackwell Oxford UK.
3. McDaid D, Park AL (2011) Investing in mental health and well-being: findings from the DataPrev project. *Health Promot Int* 1: 108-139.
4. Carlson MC, Saczynski JS, Rebok GW, Seeman T, Glass TA, et al (2008) Exploring the effects of an "everyday" activity program on executive function and memory in older adults: Experience Corps. *Gerontologist* 48: 793-801.
5. Poole GG, Gooding BA (1993) Developing and implementing a community intergenerational program. *Journal of community health nursing* 10: 77-85.
6. Chapman NJ, Neal MB (1990) The effects of intergenerational experiences on adolescents and older adults. *The Gerontologist* 30: 825-832.
7. de Souza EM (2011) Intergenerational integration, social capital and health: a theoretical framework and results from a qualitative study. *Ciencia & Saude Coletiva* 16: 1733-1744.
8. Belgrave M (2011) The effect of a music therapy intergenerational program on children and older adults' intergenerational interactions, cross-age attitudes, and older adults' psychological well-being. *Journal of Music Therapy* 48: 486-508.
9. Aday H, Rice C, Evans E (1991) Intergenerational partners project: a model linking elementary students with senior center volunteers. *The Gerontologist* 31: 263-266.
10. Fujiwara Y, Sakuma N, Ohba H, Nishi M, Lee S, et al (2009) REPRINTS: effects of an intergenerational health promotion program for older adults in Japan. *Journal of Intergenerational Relationships* 7: 17-39.
11. De Souza EM, Grundy E (2007) Intergenerational interaction, social capital and health; results from a randomised controlled trial in Brazil. *Social Science & Medicine* 65: 1397-1409.
12. de Souza EM (2003) Intergenerational interaction in health promotion: a qualitative study in Brazil. *Rev Saude Publica* 37: 463-469.
13. Morita K, Kobayashi M (2013) Interactive programs with preschool children bring smiles and conversation to older adults: time-sampling study. *BMC Geriatr* 13: 111.
14. Jones ED, Herrick C, York RF (2004) An intergenerational group benefits both emotionally disturbed youth and older adults. *Issues in Mental Health nursing*. 25: 753-767.