

DOI: 10.5020/18061230.2019.7436

# EXPERIENCE OF SOCIAL GROUPS FOR OLDER PEOPLE: INTERFACING WITH OCCUPATIONAL THERAPY

Experiência em grupos de convivência de idosos: interfaces com a terapia ocupacional Experiencia de grupos de convivencia con mayores: interfaces de la terapia ocupacional

Marciane Montagner Missio 📵

Franciscan University (Universidade Franciscana - UFN) - Santa Maria (RS) - Brazil

Silvani Vargas Vieira 🛈

Federal University of Santa Maria (Universidade Federal de Santa Maria - UFSM) - Santa Maria (RS) - Brazil

#### **ABSTRACT**

**Objective:** To describe Occupational Therapy students' experience of their participation in a social group for older people in a community located in the central region of Rio Grande do Sul, Brazil. **Data synthesis:** The activity was developed during the Supervised Internship in Community Health from March to July 2015 in the sixth term of the Occupational Therapy course. Students' work with the participants of the social group included activities aimed at integrating university teaching, research and extension activities focused on improving the quality of life and the health status of the participants through the prevention of injuries and complications taking into consideration the chronic non - communicable diseases (CNCDs) presented by most of the participants in the group. **Conclusion**: The experience showed that Occupational Therapy groups enabled the identification of potential and skills in a population that is undervalued by society in terms of productivity and that the group constituted a space for redefining life, overcoming daily obstacles, developing new healthy life habits and engaging in active aging.

Descriptors: Occupational Therapy; Aged; Group Practice; Health education.

## **RESUMO**

Objetivo: Descrever a experiência de acadêmicas de Terapia Ocupacional na inserção de um grupo de convivência de idosos em uma comunidade localizada na região central do Rio Grande do Sul, Brasil. Síntese dos dados: A ação foi desenvolvida no Estágio Supervisionado em Saúde da Comunidade, no período de março a julho do ano de 2015, realizado no sexto semestre do curso de Terapia Ocupacional. Na atuação dos acadêmicos com os participantes do grupo de convivência, foram realizadas atividades visando à integração de ações de ensino, pesquisa e extensão universitária, com foco na melhoria da qualidade de vida e condição de saúde das participantes através da prevenção de agravos e complicações, considerando as doenças crônicas não transmissíveis (DCNT) apresentadas pela maioria dos participantes do grupo de idosos. Conclusão: As experiências evidenciaram que os grupos de Terapia Ocupacional permitiram a identificação de potencialidades e habilidades de uma população pouco valorizada produtivamente na sociedade, de forma que o grupo se constituiu como um espaço de ressignificação de vidas, superação de dificuldades cotidianas, aquisição de hábitos de vida saudáveis e ajuda para um envelhecimento ativo.

Descritores: Terapia Ocupacional; Idoso; Prática de Grupo; Educação em Saúde.

#### RESUMEN

Objetivo: Describir la experiencia de estudiantes de Terapia Ocupacional en la inserción de un grupo de convivencia de mayores de una comunidad localizada en la región central de Rio Grande do Sul, Brasil. Síntesis de los datos: La acción ha sido desarrollada en la Práctica Supervisada de Salud de la Comunidad en el período entre marzo y julio de 2015 realizado en el sexto período del curso de Terapia Ocupacional. Durante la interacción de los estudiantes con los participantes del grupo de convivencia se han realizado actividades para integrar las acciones de enseñanza, investigación y extensión universitaria dirigida para la mejoría de la calidad de vida y la condición de salud de las participantes a través de la prevención de agravios y complicaciones teniendo en cuenta las enfermedades crónicas no trasmisibles (ECNT) presentadas por la mayoría de los participantes del grupo de



This Open Access article is published under the a Creative Commons license which permits use, distribution and reproduction in any medium without restrictions, provided the work is correctly cited

Received on: 01/23/2018

Accepted on: 01/28/2019

mayores. **Conclusión:** Las experiencias han evidenciado que los grupos de Terapia Ocupacional permitieron la identificación de las potencialidades y habilidades de una población poco valorada por su producción en la sociedad de manera que el grupo se ha constituido como un espacio para un nuevo sentido de las vidas, superación de dificultades del cotidiano, adquisición de hábitos de vida saludables y ayuda para el envejecimiento activo.

Descriptores: Terapia Ocupacional; Anciano; Práctica de Grupo; Educación en Salud.

#### INTRODUCTION

Brazil is undergoing changes in its population configuration due to the aging of its inhabitants. The lack of preparation for this population change increases the need for specialized social and health care services in order to provide the older adults of the country with a dignified aging and better quality of life<sup>(1)</sup>.

With the aging of the adult population, chronic non- communicable diseases (CNCDs) also begin to manifest and may be associated with insufficient performance of most activities of daily living (ADL), including personal hygiene and self-care, eating, bathing and dressing<sup>(2)</sup>. Aging, when associated with arterial hypertension and other chronic diseases, is a major risk factor for decline in cognitive function and cardiovascular risks, which directly affect the daily life and quality of life of the older population<sup>(3)</sup>.

Chronic diseases can be understood as a set of clinical conditions of multiple causes and with manifestations that occur gradually according to the individual. They present a generally uncertain prognosis that is hard to postpone and that oscillates between phases of acute and severe complications that can lead to functional and physical disabilities. These diseases require the need for some changes in life habits so that the individual can live with the disease as its cure cannot always be achieved<sup>(4)</sup>.

The World Health Organization (WHO) states in its 2018 report that chronic non - communicable diseases include cardiovascular diseases, chronic respiratory diseases, diabetes mellitus (DM), cancer, respiratory diseases and mental disorders of continuous duration and motivated by the excessive use of tobacco and alcohol, physical inactivity, daily malnutrition and other causes<sup>(5)</sup>.

Some of the pathologies that most compromise and cause significant limitations in the daily lives of older individuals are systemic arterial hypertension (SAH) and DM, given their complications, such as visual impairment, heart failure and other physical impairments<sup>(2)</sup>.

SAH and DM are highly prevalent chronic diseases in Brazil. Therefore, their early detection, control and treatment for the stabilization of their levels is indispensable to reduce the severity of their complications. In addition, the adoption of healthy eating habits, lifestyle changes, regular physical activity combined, in most cases, with drug therapy has been very effective in studies of these two conditions<sup>(6)</sup>.

SAH is considered a syndrome that is associated with other metabolic alterations, such as obesity, increased insulin resistance, diabetes and dyslipidemia. Hypertension is also considered a major risk fator for coronary artery disease, peripheral vascular disease, kidney disease, heart failure and cerebrovascular diseases such as stroke. People with two or more episodes of systolic blood pressure greater than or equal to 140 mmHg and diastolic blood pressure greater than or equal to 90 mmHg are considered hypertensive<sup>(7)</sup>.

DM is a metabolic disorder characterized by persistent hyperglycemia resulting from inefficiency in insulin secretion or resistance. Both DM and SAH, when associated, increase the risk for cardiovascular disease, which is one of the major public health problems in Brazil, as they lead to several hospitalizations due to their complications and damage to target organs. In addition to these damages, they can also lead to significant loss in the quality of life of the individuals due to the series of difficulties that the individual may face<sup>(8)</sup>.

Depending on the area of study and interest, quality of life may be synonymous with health, happiness and personal satisfaction and income may be used as a concept of satisfaction to achieve quality of life. However, there is no consensus in the literature on a single meaning for the concept of quality of life as it is linked to an individual's perception of their expectations and goals in relation to the values according to which they live<sup>(9)</sup>.

Because they are chronic diseases, DM and SAH can accompany the individuals through the course of their lives. However, their impact can be minimized through health education, which seeks to raise awareness about risk factors. In addition, adequate treatment and physical activity can help older people maintain their level of independence and, consequently, avoid sedentary lifestyle, thus reducing public health spending due to complications and improving quality of life<sup>(10)</sup>.

The treatments for SAH and DM are usually a combination of drug treatment and non-drug treatment. It should be noted that, as reported in research, adherence to non-drug treatment measures is low. In addition, other studies point out that only drugs are not effective for the treatment of these chronic diseases and that it is necessary to combine two measures, namely physical activity and food control<sup>(11,12)</sup>. They are non-drug measures that can help control these diseases and the lack of these two measures may be associated with 75% of new cases of chronic diseases<sup>(10)</sup>.

Physical activity is any movement that is performed voluntarily by the skeletal muscle causing a metabolic energy expenditure. This energy expenditure is related to high levels of well-being and satisfaction, leading to an increase in functional capacity standards to perform daily tasks<sup>(10)</sup>.

In addition to the measures outlined above, the lack of health education, especially in populations with a less than 12 years of study, has been a barrier to understanding the importance of healthy habits, such as varied diet, non-harmful use of alcohol and tobacco and physical activity. These findings have sought to draw attention to the promotion of health education, especially among older adults and people with low levels of education<sup>(13)</sup>.

The most indicated forms of non-drug control of DM are body weight control, regular physical exercise, and acquisition of healthy habits<sup>(14)</sup>.

Special attention for the control of DM is also drawn through the organization of food consumption. High glycemic index foods should be substituted for low glycemic index foods, and industrialized foods should also be avoided as they contain a number of hidden sugars. The Brazilian Diabetes Society recommends the preference for natural foods with the least possible processing and the intake of carbohydrates from vegetables, fruits, whole grains and legumes<sup>(8)</sup>.

Several professionals, mainly those in primary health care, work with groups. Groups can be therapeutic as they are settings where emotions can arise, communicative contact is enhanced and older adults are resocialized through the construction of new bonds and friendships<sup>(15)</sup>. In this context, many professions use the process of evaluation, intervention and analysis of results, but only Occupational Therapy (OT) aims to use occupations to promote health, well-being and life participation, thus facilitating social interaction of individuals with the environment and the context in which they live and the occupations they have<sup>(16)</sup>.

Occupational Therapy works with groups through activities in which the participants engage simultaneously to perform one or more tasks or some productive, creative or social activity. Such activities have a specific therapeutic purpose established by the occupational therapist<sup>(17)</sup>.

Based on the focus on health promotion and disease prevention in the field of Occupational Therapy, university students work on an extension project to develop health promotion and education activities in a social group for women with CNCDs. Thus, research aimed to describe Occupational Therapy students' experience of their participation in a social group for older people in a community located in the central region of Rio Grande do Sul, Brazil.

#### **DATA SYNTHESIS**

This is an experience report produced in the Supervised Internship in Community Health offered to students enrolled in the sixth semester of the Occupational Therapy undergraduate program of a university in Santa Maria, Rio Grande do Sul, Brazil.

The group was held for five months during the morning. Group sessions took place three times a week and lasted two hours each. The please where the group was held was in the community, near the participants' homes. The activities carried out in the place did not generate costs; therefore, the participants did not have any expenses during the group work.

The internship was linked to an extension project developed for women from a neighborhood in the central region of Rio Grande do Sul and its surroundings who were interested in joining the group. The majority of the participants were diabetic and/or hypertensive.

The project that originated this academic experience was conducted by OT professors and students who carried out activities with the purpose of providing greater attention to the group through dance resources and playful and expressive activities. In addition, during the work with the group of women, the team held study groups and debates on subjects related to people's aging, health and quality of life. Group dynamics activities, art workshops and health promotion activities were carried out based on the participants' demands.

#### Contributions of the university student to the group and activities developed

This experience enabled the Occupational Therapy students to understand their contribution as health professionals from a group perspective. The students work in the group as facilitators of the performance of activities and in the

process of social interaction among the participants of the social group by helping the participants with their doubts and difficulties in carrying out the activities.

The activities developed during the students' internship included fruit salad production and group dynamics activities addressing sexuality, relaxation, cognitive stimulation, dance and expressivity techniques as well as an income generation workshop.

The production of the fruit salad, as outlined above, focused on the recommended use of several fruits and their sugar levels in order to promote health education among diabetic people, thus seeking to inform about the need to follow a healthy diet.

The activity developed to address sexuality consisted of a talking circle using student-formulated questions on issues related to the subject. This activity was intended to clarify myths and doubts on the subject. During the activity, there were some discussions and questions about the use of contraceptive methods and the necessary care to avoid contamination with and transmission of sexually transmitted diseases (STDs) in the older population.

STDs have increased significantly in the older population and this is mostly due to the lack of prevention awareness campaigns targeted at this population group, which may be related to the fact that older people's sexuality is surrounded by taboos and prejudices originated in the population or even in health professionals or because of the belief that that there is no active sex life in this age group<sup>(18)</sup>.

The balloon dace activity sought to offer the participants a moment of interaction, mutual cooperation and relaxation. The dance instigates new skills as it requires coordinated movements to hold the balloon while dancing and listening to the music, thus contributing to the dynamic balance and gross motor coordination of the participants.

Another activity carried out with the group consisted of a relaxation technique aimed at raising awareness and perception of the body to reduce stress and enhance patients' self-perception. The relaxation technique was based on Schultz's autogenic training, which helps people achieve a better level of relaxation through the reduction of depressive thoughts and visualization of mental images of the body, thus favoring engagement in positive behavior and increased physical performance<sup>(19)</sup>.

In addition to the activities mentioned above, there were also activities aimed at building handmade objects using recycled materials. These activities allowed participants to learn how to build utensils that could be used as a means of generating income or decorating the environment, such as flowers, bottles, magnets and beanbags.

All the activities carried out with the group were previously evaluated through activity analysis based on the studies conducted by important authors in the field of Occupational Therapy<sup>(20,21)</sup>. The activity analysis seeks to identify the objectives, the potentialities, the form of execution, the necessary skills and the importance of each activity. This analysis also consists in exposing each participant's opinion about the workshops and their meanings<sup>(21)</sup>.

Thus, activity analysis is understood as the process of studying and identifying the elements of each activity<sup>(21,22)</sup>. This evaluation allows the therapist to adapt the activity and to use it as a therapeutic tool based on the physical, psychological, social, cultural and motivational aspects of the participants.

Occupational Therapy uses activities as therapeutic resources and therefore needs this activity analysis, which is based on a script that will assist therapists in guiding their work and predicting the biomechanical and psychodynamic aspects involved with the activity that will be carried out<sup>(20)</sup>.

The experience offered to the Occupational Therapy students corroborates the improvement of the knowledge about activity analysis, the understanding of the necessary care for the older people and the development of groups as an occupational therapy training. When the occupational therapist conducts a group, s/he takes on the responsibility for a duty that is considered therapeutic as it enables group members to experience new ways of relating and doing something authentically, thus favoring the creation of a meaning for the activity that is being produced within the group<sup>(23)</sup>.

# CONCLUSION

During the training of OT professionals, the experiences need to be developed and enhanced so that the students can improve their quality and interaction with their future working environment.

Experiences such as the one presented in this study favor maturity, clinical reasoning and students' commitment to the health care of other people. In addition to favoring professional interaction and the discussion of cases, students' practical work during undergraduate studies also fosters health professionals' shared accountability for educating and promoting the health of the population.

With regard to the specific work described in this study, it is concluded that the Occupational Therapy intervention in a group for older people goes beyond the prevention of diseases and injuries. The experiences showed that the Occupational Therapy groups allowed the identification of the potentialities and skills of a population that was not valued productively in society and that the group constituted a space for redefining lives and overcoming everyday difficulties.

#### **CONFLICTS OF INTEREST**

This experience report received no funding or institutional support and there are no relationships that can result in conflicts of interest.

## **CONTRIBUTIONS**

**Marciane Montagner Missio** contributed to the writing and revision of the manuscript; **Silvani Vargas Vieira** contributed to the coordination of the study and the revision of the text and references.

#### **REFERENCES**

- 1. Miranda GMD, Mendes ACG, Silva ALA. O envelhecimento populacional brasileiro: desafios e consequências sociais atuais e futuras. Rev Bras Geriatr Gerontol. 2016;19(3):507-19.
- 2. Duarte GP, Uchôa-Figueiredo LR. A vida cotidiana e a qualidade de vida de pacientes atendidos na atenção primária de saúde. Cad Ter Ocup UFSCar. 2010;18(1):19-33.
- 3. Bezerra ALA, Bezerra DS, Pinto DS, Bonzi ARB, Pontes RMN, Veloso JAP. Perfil epidemiológico de idosos hipertensos no Brasil: uma revisão integrativa. Rev Med (São Paulo). 2018;97(1):103-7.
- 4. Brasil. Ministério da Saúde. Diretrizes para o cuidado das pessoas com doenças crônicas nas redes de atenção à saúde e nas linhas de cuidado prioritárias. Brasília: Ministério da Saúde; 2013.
- 5. Organização Mundial da Saúde. Saving lives, spending less: a strategic response to noncommunicable diseases. Geneva: WHO; 2018.
- 6. Stopa SR, Cesar CLG, Segri NJ, Alves MCGP, Barros MBA, Goldbaum M. Prevalência da hipertensão arterial, do diabetes mellitus e da adesão às medidas comportamentais no Município de São Paulo, Brasil, 2003-2015. Cad Saúde Pública. 2018;34(10):1-11.
- 7. Hernandez FH. Controle da hipertensão arterial com o tratamento não medicamentoso no posto de saúde da família. [Monograph]. Conselheiro Lafaiete (MG): Universidade Federal de Minas Gerais; 2016.
- 8. Sociedade Brasileira de Diabetes. Diretrizes da Sociedade Brasileira de Diabetes 2017-2018. São Paulo: Clannad; 2017.
- 9. Pereira EF, Teixeira CS, Santos A. Qualidade de vida: abordagens, conceitos e avaliação. Rev Bras Educ Fís Esp. 2012;26(2):241-50.
- Agostini CM, Rodrigues VS, Guimarães AC, Damázio LCM, Vasconcelos NN. Análise do desempenho motor e do equilíbrio corporal de idosos ativos com hipertensão arterial e diabetes tipo 2. Rev Atenção Saúde. 2018;16(55):29-35.
- 11. Solbiati VP, Oliveira NRC, Teixeira CVS, Gomes RJ. Adesão ao tratamento para prevenir agravos relacionados à hipertensão arterial e ao diabetes. Rev Bras Obes Nutrição e Emagrec. 2018;12(73):629-33.
- 12. Brasil. Ministério da Saúde. Hipertensão arterial e diabetes mellitus: morbidade auto referida segundo VIGTEL, 2009. Cadastro de portadores do SIS-HIPERDIA, 2010. Brasilia: Ministério da Saúde; 2011.
- 13. Ribeiro KG, Andrade LOM, Aguiar JB, Moreira AEMM, Frota AC. Educação e saúde em uma região em situação de vulnerabilidade social: avanços e desafios para as políticas públicas. Interface Comun Saúde Educ. 2018;22(Suppl 1):1387-98.
- 14. Brasil. Ministério da Saúde. Estratégia para o cuidado da pessoa com doença crônica: hipertensão arterial sistêmica. Brasília: Ministério da Saúde; 2013.

- 15. Soares DS, Braga JS, Alves SCA. Representação social de profissionais da área da saúde sobre grupos de convivência de idosos. Kaleidoscópio. 2012; 3:76-94.
- 16. Associação Americana de Terapia Ocupacional. Estrutura da prática da Terapia Ocupacional: domínio & processo. 3a ed. Rev Ter Ocup Univ São Paulo. 2015;26(ed esp):1-49.
- 17. Hagedorn R. Ferramentas para prática em terapia ocupacional: uma abordagem estruturada aos conhecimentos e processos centrais. São Paulo: Roca; 2007.
- 18. Maschio MBM, Balbino AP, Souza PFR, Kalinke LP. Sexualidade na terceira idade: medidas de prevenção para doenças sexualmente transmissíveis e AIDS. Rev Gaúch Enferm. 2011;32(3):583-89.
- 19. Elias MTMNC. As Técnicas de relaxamento como instrumento terapêutico de enfermagem em pessoas com sofrimento mental [dissertation]. Lisboa: Escola Superior de Enfermagem de Lisboa; 2014.
- 20. Barbosa AA. Análise da atividade: adaptação de um roteiro para a implementação de tecnologia assistiva [final paper]. Brasília: Universidade de Brasília; 2013.
- 21. Trombly CA. Terapia Ocupacional para a disfunção física. 2a ed. São Paulo: Santos; 1989.
- 22. Brown A. Groupwork. Londres: Heinemann; 1979.
- 23. Araújo AS, Kebbe LM. Estudo sobre grupos de terapia ocupacional para cuidadores de familiares de pacientes com esquizofrenia. Cad Ter Ocup UFSCar. 2014;22(1):97-108.

#### Mailing address:

Marciane Montagner Missio Universidade Franciscana - UFN Rua dos Andradas Bairro: Centro

CEP: 97010-030 - Santa Maria - RS - Brasil E-mail: marcianemissio@hotmail.com

**How to cite:** Missio MM, Vieira SP. Experience of social groups for older people: interfacing with occupational therapy. Rev Bras Promoç Saúde. 2019;32:7436.