

Do It Now

**Promoting participation in engaging
occupations during retirement**

**A report on 'Do It Now', a project supported by
the Australian Government's
Regional Partnership Programme,**

Shoalhaven, NSW, Australia

July 2005 - December 2006

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Table of Contents

Executive Summary	1
Background Information.....	2
About the Do It Now Project.....	4
Outcomes	8
Reflections	10
What worked?	10
What didn't work?.....	11
What Next?.....	13
References	14
Relevant Websites.....	14
Appendices	15

Executive Summary

Do It Now was a project based upon evidence that there is a relationship between seniors' health and life satisfaction during retirement and their participation in engaging occupations. The purpose of the project was to educate up to 200 Shoalhaven residents aged 55 years and over about the importance of planning what they are going to do in retirement and then staying involved in community activities during their retirement. In addition, the project gathered information on what Shoalhaven seniors are doing in their retirement, want to do in retirement and what they see as barriers to the things they want to do.

The Do It Now Project was conducted by the Australasian Occupational Science Centre from July 2005 to June 2006. It was supported by funding from the Australian Government through its Regional Partnership Programme, the Shoalhaven City Council and AOSC Pty Ltd.

171 Shoalhaven residents aged 55 and over participated in Do It Now Education programmes between October 2005 and June 2006. 20 programmes were conducted. There were 7 programmes for residents aged 55-64 years and 13 programmes for residents aged 65 years and over. Programmes were conducted in each of the 5 Local Planning Areas in Shoalhaven.

Responses to the initial questionnaire showed that of the 171 participants in the Do It Now project, the most common community activity was participation in community clubs (50%). The second most common activity was volunteering (44%). Other activities included performing in theatre, breeding show birds, choir singing and folk dancing. Personal barriers to participation which were identified included: don't have time; don't have enough money; housebound due to ill health. Participants' recommendations for overcoming community-based barriers and improving occupational opportunities and choices for Shoalhaven seniors included: development of senior friendly walking tracks; modifications to community centres and halls to improve acoustics for the hearing impaired; and reduction in 'red tape' associated with volunteering.

Analysis of the follow-up telephone interview data gathered from 121 participants reveals that: 99% enjoyed the Do It Now Project; 99% agree that participation in community activity positively influences health, and 50% of those already participating in community activities intend to take up new activities. The follow-up data also shows that of the 11 respondents who were not participating in community activities at the time of interview, 8 (73%) intend to take up community activities in the future.

Do It Now has achieved outcomes at all levels. Some participants have reported making lifestyle changes to increase their engaging occupations during retirement. Conference presentations have raised awareness of an occupational perspective of health and its relevance to the ageing population for local planning officers and agencies, as well as national policy makers. Additionally, the dissemination of information about the project processes and outcomes through publication and overseas conferences has potential to influence attitudes and the formulation of policy relating to seniors' participation in community activities during retirement at an international level.

Background Information

City of Shoalhaven

Do It Now was set in the City of Shoalhaven on the south coast of NSW, Australia. Shoalhaven covers 4,558 square kilometres and consists of many diverse and isolated settlements including 49 towns and villages. Previously, Shoalhaven was primarily an agricultural region, but now tourism is Shoalhaven's main source of income. Its 741,000 acres of National Park, mountains, coastal plains, rivers, lakes and 109 beaches make it a popular destination, especially for 'sea changers' and retirees¹. Shoalhaven has a significantly higher than average proportion of residents aged 55 years and older when compared to regional and state averages.

Health

This project adopted the United Nations' World Health Organisation definition of health as 'a state of complete physical, mental and social wellbeing, and not merely the absence of disease or infirmity'².

Occupational Science

Occupational science is the study of occupation to generate knowledge and understanding of occupation and the political, social, cultural and environmental influences that govern occupation. Within occupational science, the term 'occupation' refers to all the everyday things that people do to occupy their time. Occupational science is a relatively new academic discipline which was founded by occupational therapists in the late 1980s.

An occupational perspective of health

An occupational perspective of health is fundamental to occupational science and occupational therapy. This unique perspective views humans as occupational beings who need to use time in a purposeful and meaningful way for their health and well being³.

AOSC

The Australasian Occupational Science Centre is an occupation-focused, community supported education and research centre. It is located at Shoalhaven Campus in Nowra, NSW, Australia. Occupational science provides the theoretical framework for the AOSC.

AOSC was established as a programme within the University of Wollongong's Centre for Health Service Development in December 2004, following successful lobbying by AOSC Pty Ltd. Some Shoalhaven business persons formed AOSC Pty Ltd in November 2004 for the sole purpose of establishing AOSC. Seed funding from the Shoalhaven City Council, together with sponsorship and in kind support from Shoalhaven businesses and Shoalhaven Campus enabled the centre to be established. With additional funding obtained through the Australian Government's Regional Partnership Programme, the Do It Now project was able to commence in July 2005.

¹ <http://www.shoalhaven.nsw.gov.au/>

² http://www.opbw.org/int_inst/health_docs/WHO-CONSTITUTION.pdf

³ Wilcock 2006

AOSC endeavours to promote an occupational perspective of health and well being through occupation-based research and community education about the relationship between health and purposeful occupation. As the AOSC adopts the principles of the Ottawa Charter for Health Promotion⁴, the AOSC projects are designed to: develop personal skills; create supportive environments; strengthen community action; and build healthy public policy.

The evidence base

Two key occupational science studies provided the evidence based for the Do It Now project. The first study was the Well Elderly Study⁵, a randomised controlled trial with independent-living older adults. The study found that significant and long-term health, function and quality of life benefits were attributable to a programme conducted by occupational therapists that focused on participation in purposeful and meaningful activities (ie. occupations). Not only was the programme cost effective to run, a follow-up study⁶ found that the occupation-focused programme contributed to a decrease in medical expenditure.

The second major study that guided the Do It Now project was a longitudinal study of retirees in Sweden⁷. The study found there was a close relationship between the presence of engaging occupations and a satisfying life in retirement and that many retirees preferred to have some kind of regular commitment during their retirement. According to Jonsson's study, an engaging occupation is something we do that:

- is infused with meaning and involves intense participation;
- is performed regularly and over time;
- consists of a set of activities connected to each other;
- is performed beyond personal pleasure; and
- involves a community of people who share a common commitment.

In the Do It Now project, the term 'communities activities' referred to things people do regularly that have personal meaning, involve other people and are performed outside of home. This definition of community activities incorporates the main characteristics of Jonsson's engaging occupations, and could be readily understood by the participants.

⁴ http://www.who.int/hpr/NPH/docs/ottawa_charter_hp.pdf

⁵ Clark *et al* 1997

⁶ Hay *et al* 2002

⁷ Jonsson 2000

About the Do It Now Project

Aims

The primary aim of the project was to inform Shoalhaven seniors about the importance of continuing to participate in engaging occupations, such as community activities, for a healthy and satisfying retirement. The strategy to achieve this aim was conducting 20 educational programmes for up to 200 people aged 55 years and over and living in Shoalhaven. Programmes were offered in each of the five Local Planning Areas in Shoalhaven.

A secondary aim was to collect demographic data from the participants in the project, as well as data on their current level of participation in community activities and what they regarded as barriers to their participation. The data was mainly gathered by means of a questionnaire completed by participants. It was anticipated that such data would be relevant to stakeholders and policy makers in the Shoalhaven community as well as to the broader community.

Funding of the project

Funding from the Australian Government's Regional Partnership Programme covered the salary of the project co-ordinator who developed and conducted the education programmes. The Shoalhaven City Council's seed funding and funding from AOSC Pty Ltd covered the remaining costs. The total cost of the 12 month project was \$97,225.41. See Appendix A for a copy of the Budget.

Ethics approval

The University of Wollongong's Human Research Ethics Committee granted approval of the project's ethics application. Approval was granted on the basis that the project be conducted within ethical guidelines and that all data gathered would be anonymous and confidential. All participants were issued with a Personal Identification Number (PIN) to ensure anonymity and for correlating the questionnaire and the follow-up data.

Recruitment

All Shoalhaven residents aged 55 years and over were eligible to participate in the project. A small proportion of participants were recruited by means of advertisements in the local press, and on the local radio, as well as brochures displayed in local clubs and community centres. By far the most effective means of recruitment was presentations by the project co-ordinator at meetings of local clubs, such as the Lions, Probus, Rotary and VIEW clubs. The co-ordinator gave presentations on the project at clubs in towns and villages across the Shoalhaven, from Kangaroo Valley in the north west to Ulladulla in the south, in order to recruit participants from all Local Planning Areas. Between August 05 and June 06, the project co-ordinator gave 17 presentations, with a total attendance of 636 people.

As result of the various recruitment strategies implemented, 245 people expressed their interest in participating. 235 people were booked into a programme, with a total of 171 individuals participating in the Do It Now project between October 2005 and June 2006.

Cost for participants

The programmes were available at no fee to all Shoalhaven residents aged 55 years and over. Travel costs for participants were kept to a minimum by holding the programmes locally, however, participants could claim reimbursement for car travel cost.

Facilities

Various venues in the Shoalhaven were used for the project. For example, the programmes for Nowra residents were conducted at the Shoalhaven Campus. In Kangaroo Valley, Culburra and Ulladulla, community centres were hired. The University of the Third Age (U3A) generously provided its rooms in Milton for no charge. The Illawarra Retirement Trust also gave permission for its meeting rooms in Nowra and Milton to be used for no charge.

Equipment and resources

The project co-ordinator used a laptop computer, data projector and screen for powerpoint presentations in each programme. This equipment was purchased by AOSC Pty Ltd for use in this and subsequent projects. Light refreshments, writing implements and information on local resources were provided for all participants.

All retirees in the project were given the option of completing the Self Discovery Tapestry. The Self Discovery Tapestry is a unique instrument designed to provide an opportunity for people to acknowledge and review their life nonverbally, using coloured pens and paper. It can help people understand the many patterns in their lives and how they cope with life's changes. The Self-Discovery Tapestry incorporates gerontology-based life span theories and the principles of occupational science. It encourages people to identify meaningful segments of their lives as well as critical events which have shaped their life course⁸.

Data Gathering and Analysis

A questionnaire was designed to gather information from the participants. Participants completed the questionnaire during the programme. A second questionnaire was designed to gather follow-up data by telephone, approximately 3 months after programme delivery.

An experienced, independent telephone interviewer conducted the follow-up interviews. An undergraduate student from Shoalhaven Campus entered the questionnaire and follow-up data into a database. Quantitative data was then analysed by an experienced research consultant, forming the basis of a descriptive profile of participants which is presented in Appendix B. In addition, qualitative responses to the initial questionnaire and the follow-up interview were compiled, and samples are presented in Appendices C and D.

⁸ Meltzer 2001

Time frame

The total length of the project was 18 months, from July 2005 to December 2006.

The project co-ordinator was employed for 12 months, July 05 - June 06. After designing the programmes and questionnaire, getting approval from the HREC, advertising and recruiting, the project co-ordinator ran the first programme in October 2005. By the end of December 2005, 5 programmes had been conducted. The other 15 programmes took place between January and June 2006. In October and December 2005 and in April 2006 the project co-ordinator submitted progress reports to the Wollongong branch of the Department of Transport and Regional Services (DOTARS), which administered the Regional Partnership Programme. A final report and Acquittal of Funds were submitted to DOTARS by 30 June 06.

The follow-up telephone interviews began in April 2006 and were completed by the end of October 2006. The research assistants were contracted to collect, enter and analyse the data for varying periods between January and November 2006.

The AOSC Director supervised the project for the 18 months, organizing payments and disseminating information about the project at various national and international conferences and via journal publications. In addition, the AOSC Director prepared this report.

Table 1 provides a summary of the project activities over the 18 month period.

Table 1: Project activities and time frame

Task	2005						2006											
	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	April	May	June	July	Aug	Sept	Oct	Nov	Dec
Employment of Project Officer	[Bar from July 2005 to June 2006]																	
Program design & development	[Bar from July 2005 to Oct 2005]																	
Ethics applications submitted	[1st, 10th, 17th]																	
Ethics approvals granted	[5th, 18th, 7th]																	
Recruitment	[Bar from July 2005 to June 2006]																	
Programs 1-5	[Bar from Oct 2005 to Dec 2005]																	
Programs 6 – 20	[Bar from Jan 2006 to June 2006]																	
Data entry contract	[Bar from April 2006 to June 2006]																	
Follow up interview contract	[Bar from April 2006 to Oct 2006]																	
Data analysis contract	[Bar from Dec 2005 to Jan 2006]																	
Progress reports submitted	[30th, 30th, 13th]																	
Acquittal of funds	[30th]																	
Conference presentations	[18th, 3rd, 6th, 12th, 23rd]																	
Preparation of report	[Bar from Oct 2005 to Dec 2006]																	
Supervision by AOSC Director	[Bar from July 2005 to Dec 2006]																	

Programmes for pre retirees

Seven programmes, each consisting of one 3 hour session, were conducted for people aged 55-64 years, the majority of whom were still employed. The primary purpose of the programmes for pre-retirees was to facilitate consideration of the following questions related to the participants' future retirement: What do you want to do? Where do you want to do it? With whom do you want to do it? Though there were no individual prescriptions, general guidelines about the benefits of participation in community activities during retirement were provided. Participants shared their plans, ideas and experiences in a focus group.

The programmes for the pre retirees were conducted in the evening, usually 6.30-9.30pm, at the Shoalhaven Campus. Light refreshments were available at the session. 53 people (60% male, 40% female) attended the programmes for pre retirees.

Programmes for retirees

Thirteen programmes were conducted for people aged 65 years and over, the majority of whom were retirees. The programmes consisted of two 3 hour daytime sessions which were conducted a week apart at various locations throughout Shoalhaven. As for the pre retirees, these programmes were conducted as focus groups.

In session one, the project co-ordinator introduced basic concepts about the relationship between engaging occupations, health and life satisfaction in retirement. During session two, participants were informed of some of the local community resources available for Shoalhaven seniors and also given the opportunity to complete the Self Discovery Tapestry. 118 people (27% male, 73% female) attended the programme for retirees.

Outcomes

As per the funding agreement with DOTARS, four major outcomes of the Do It Now were projected:

1. Participants will better understand the relationship between participation in engaging occupation and health, and identify their personal barriers to occupational participation.
2. Participants will identify the community-based barriers to their participation in engaging occupation.
3. Within the Shoalhaven, there will be a more cohesive approach to community policy in relation to older residents' opportunities for participation in engaging occupation.
4. AOSC will have the credibility to continue its research program.

The actual outcomes identified by analysis of the questionnaire and follow-up data are presented below.

Outcome 1

Questions 3 and 3a of the follow-up interview were used to evaluate the influence of Do It Now on the participants' level of understanding about the relationship between health and occupation. To the question 'Do you agree that participation in community activities influences your health and sense of well being?', 99% responded Yes. To the question 'Did your participation in the Do It Now project change your understanding of the relationship between community activities and health?', 19% responded Yes.

Participants' comments during the follow-up interview in relation to these questions also showed that for many, the project reinforced their existing understandings of the relationship between occupation and health. Examples of these comments can be found in Table 12 at Appendix D.

Question 23 of the initial questionnaire gave participants the opportunity to identify personal barriers to participation. Some of the reasons identified included: don't have time; don't have enough money; housebound due to ill health.

Outcome 2

The following community-based barriers to participation in engaging occupation were identified by participants during the focus group sessions and recorded by the project co ordinator.

- 'red tape' associated with volunteering
- lack of accessible and acoustic friendly facilities for seniors
- lack of availability of transport
- insufficient infrastructure within the community to enable seniors to develop competence and confidence related to use of changing technology
- lack of provision for engaging in preferred occupations in retirement villages, and in the broader community

Recommendations made by the participants to enable participation in engaging occupation are listed in Appendix E.

Outcome 3

Through local presentations and involvement in local community working parties, AOSC has disseminated the project's recommendations for increasing older residents' opportunities and choices for participating in engaging occupations. Evidence suggests Shoalhaven agencies responsible for developing programmes and facilities for seniors are moving towards a more cohesive approach to community policy. Recent developments include:

- the 'Active Healthy Communities' Action Plan developed by the Blueprint Shoalhaven's Health / Ageing/ Public Service Mini Summit⁹;
- draft proposal for a community based wellness centre to provide increased opportunities and choices for older people living in the Shoalhaven to participate in a range of engaging occupations;
- involvement of the Berry Mens' Shed in a new retirement village in Berry.

Outcome 4

A peer reviewed publication and presentations at local, national and international conferences on the Do it Now project have raised awareness of the AOSC and enhanced its credibility in relation to research. As a consequence, at the time of writing this report, AOSC had been successful in securing the following research grants from the University of Wollongong, enabling it to continue its community-based, occupation-focused education and research:

\$6,500 Faculty of Commerce grant for the Health-e-Ageing Project

\$9,750 Community Engagement Grant for Learning and Teaching Creatively Project

The details of the publication and conference papers on the Do it Now project are found in Appendix F.

⁹ www.blueprintshoalhaven.com.au

Reflections

At the completion of any project, it is always worthwhile reflecting on the processes that took place and thinking about what impacted upon the outcomes. Sharing these reflections can assist others in planning similar projects. Reflection on the Do It Now project has helped illuminate what was effective and why, as well as identify aspects of the project which were not successful

What worked?

- **Limited numbers of participants per session**

Limiting each session to an average of 10 participants facilitated the networking and ensured that each member had an opportunity to contribute. Encouraging participants to share their experiences and ideas within the focus group setting enabled everyone to benefit, as the seniors were then exposed to a greater range of occupational possibilities and options in retirement.

- **Recruitment through clubs**

The most successful recruitment strategy was a presentation by the project co-ordinator. Presentations at Lions, Probus, Rotary and VIEW clubs, as well as at retirement villages, church groups and business meetings afforded people the opportunity to ask questions and to gain a greater understanding of the purpose and structure of the project. Those people who were interested gave their name and telephone number to the project co-ordinator. They were subsequently contacted when a programme was planned for their local area. 88% of the 167 participants who completed the initial project questionnaire, stated they heard about the project from word of mouth or from the presentations.

- **Appropriate venues**

The Shoalhaven City Council's community centres were ideal venues for the daytime programmes as they were easily accessible, comfortable and provided suitable facilities for seniors. Also, the cost of hiring the Council venues was low, and most participants were familiar with their location. The project co-ordinator ran sessions within each of 5 Shoalhaven Local Planning Areas. By taking the project to the people, travel time and costs for the participants was minimised. The Shoalhaven Campus was a very suitable venue for the evening sessions for the pre retirees. The Campus has adequate lighting, easy parking and security services.

- **Refreshments**

The provision of refreshments was well received at each session of the Do It Now programme. As most of the pre retirees came directly from work, the availability of food and drink when they arrived was always appreciated and helped to alleviate inattention due to fatigue and hunger. The time partaking of the refreshments also provided an opportunity for participants to talk with each other and to 'break the ice'.

During the sessions with the retirees, the inclusion of a 15 minute break for refreshments after 1 ½ hours, provided respite for the project co-ordinator and also time for participants to stretch and use bathroom facilities. Once again, the break

provided an opportunity for participants to talk amongst themselves and get to know each other.

- **Providing a free programme**

The participants certainly appreciated that there was no charge for attending the programme. Although sometimes free programmes can result in a large attrition, as people have made no investment, this was not the case. A high percentage of people who booked did participate.

Interestingly, although all participants were advised that they could be reimbursed for travel costs related to their attendance, only two retired participants made a claim. However, all members of a mature aged unemployed group did attend on the condition that they receive a fuel voucher to cover travel costs.

- **Follow-up via telephone**

The decision to follow-up the participants by telephone rather than by mail was an important one. There were additional costs related to the telephone interviewing, such as cost of the calls and the payments to the independent interviewer. However, the number of follow-up respondents was relatively high. Of the 171 participants, 136 (80%) were eligible for follow-up, that is, they completed the education programme and gave permission to be contacted by the interviewer. 121 (89%) of those eligible were contacted within three attempts by the interviewer. In addition, the interviewer was able to record some rich qualitative data.

- **Having a project co-ordinator who was an experienced educator**

The comments made by the participants in the follow-up reveal that the participants enjoyed and appreciated having a project co-ordinator who was passionate about this work, experienced as a community educator and knowledgeable on the theoretical basis of the programme. An occupation-focused project such as Do It Now needs an occupational therapist or an occupational scientist who fully understands the relationship between health and occupation.

What didn't work?

- **Recruitment through media**

Of the 171 participants, six had read about the project in the local newspaper, whilst only three had heard about it on the radio.

- **Recruitment through health professionals**

The number of referrals to the project from local health professionals was very low. Advertisements were placed in the newsletter of the Shoalhaven Division of General Practice as a way of getting referrals to the project from the local general practitioners. In addition, other professionals working in community health teams, at the hospital and in other community support agencies were also informed of the project. It is difficult to understand the reason for lack of referrals to a health promoting programme, despite the professionals stating that they supported it. Perhaps it is the pressure of having large case loads of people with acute and chronic illness that distracts health professionals' attention from people in the community who are well. Also, unlike many health projects, the occupational perspective of health adopted by the Do It Now project focuses on what makes people well, rather than what causes people to be ill.

- **Recruiting people who were not participating**

Recruiting people who are not involved in community activities was one of the difficulties faced by the project co-ordinator. As per the ethical guidelines, participants had to be volunteers, so people who are not engaged in the community could not be forced to participate. However, it is hoped that educating people who are currently volunteers and members of community organizations will have a positive ripple effect, and that over time, they will help in spreading the underlying message of Do it Now.

What Next?

- **AOSC could continue to conduct the Do It Now project in the Shoalhaven.**

Given the increasing proportion of older people living in Shoalhaven, the message 'Do It Now' has particular relevance to this community in promoting participation in engaging occupations during retirement. With funding support, additional Do It Now programmes could be conducted. As the audiovisual equipment has already been purchased, subsequent programmes would be cost effective.

- **Do It Now could be replicated in other communities**

The AOSC is willing to offer support and guidelines to communities which are demographically similar to Shoalhaven. To date, researchers at University College Cork in Ireland, and Dalhousie University and the University of Western Ontario, both in Canada, are considering working collaboratively with AOSC to develop Do It Now projects in their respective communities.

- **Invited Presentation on Do It Now at a USA symposium**

The AOSC Director has been invited to participate in a research panel and discuss 'Do It Now' at the University of Southern California's Annual Occupational Science Symposium to be held in Los Angeles 29-30 March 2007.

- **AOSC will continue to develop projects that encourage people of all ages to participate in engaging occupations**

Children and adolescents, as well as adults and seniors, need opportunities and choices to participate in engaging occupations. Since the completion of Do It Now, AOSC has developed a proposal for a project that will focus on creative play as the primary occupation of children and a critical part of their healthy development.

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Relevant Websites

AOSC

<http://shoalhaven.uow.edu.au/aosc/>

Blueprint Shoalhaven

<http://blueprintshoalahven.com.au>

Centre for Health Service Development

<http://www.uow.edu.au/commerce/chsd/>

Ottawa Charter for Health Promotion

<http://www.who.int/healthpromotion/conferences/previous/ottawa/en/>

Shoalhaven Campus

<http://shoalhaven.uow.edu.au/>

Self Discovery Tapestry

<http://www.lifecoursepublishing.com/>

Shoalhaven City Council

<http://www.shoalhaven.nsw.gov.au/>

World Health Organisation Constitution

http://www.opbw.org/int_inst/health_docs/WHO-CONSTITUTION.pdf

Appendices

Appendix A - Budget

Income (excl. GST)

DOTARS	55,000
SCC	25,000
AOSC P/L	20,000

Total

100,000

Expenses (incl GST)

Accounting	3,300.00
Advertising	393.34
Catering	2,022.90
Equipment	5,113.30
Materials	3,237.44
Rent	5,200.00
Research assistance	3,172.37
Statistical analysis	862.50
Telephone	697.27
Travel	5,561.21
Venue hire	430.30
Wages + oncosts	67,234.78

Total

97,225.41

Appendix B - Descriptive Profile of Do It Now Participants

Table 1 - Age

	Total	Female	Male
59 years and under	46	17	29
60-64 years	29	23	6
65-69 years	30	21	9
70-74 years	26	21	5
75years and over	38	24	14
Total responses	169	106	63

Table 2 - Highest level of educational attainment

	Total	Female	Male
Primary school	12	9	3
High school	56	36	20
TAFE qualification	51	29	22
University graduate	14	8	6
Post-graduate	14	7	7
Other*	21	16	5
Total responses	168	105	63

*Includes industry-related qualifications, teaching certificates, in-house Defence Forces training etc

Table 3 - Employment status

	Total	Female	Male
Employed	39	17	22
Unemployed	13	4	9
Retired	116	85	31
Total responses	168	106	62

Table 4 - Primary employment by Australian Standard Classification of Occupations

	Total	Female	Male
Managers and Administrators	11	2	9
Professionals	48	32	16
Associate Professionals	10	5	5
Tradespersons and related	22	7	15
Advanced Clerical and Service	25	22	3
Intermed. Clerical and Service	21	16	5
Intermed. Production and Transport	11	3	8
Elementary Clerical, Sales and Service	8	7	1
Labourers and Related	2	1	1
Home Duties	7	7	0
Total responses	165	102	63

Table 5 - Participant distribution by LPA

Local Planning Area	Number of Participants in DIN	% of total DIN participants	Shoalhaven* Population Distribution
LPA 1	89	52%	47%
LPA 2	22	13%	8%
LPA 3	30	17%	19%
LPA 4	6	4%	5%
LPA 5	16	9%	21%
Out of Area or did not respond	8	5%	

* ABS Census 2001 Data

Table 6 - Years of residence in Shoalhaven

	Total	Female	Male
Less than 5 years	33	23	10
5 – 14 years	40	28	12
15years or more	96	55	41
Total responses	169	106	63

Table 7 - Type of residence

	Total	Female	Male
Home owned or being purchased	136	84	52
Retirement Village	17	12	5
Rented or other	13	9	4
Total responses	166	105	61

Table 8 - Number of persons in home

	Total	Female	Male
Alone	43	35	8
One other person	104	62	42
Two or more people	20	9	11
Total responses	167	106	61

Table 9 - Retirees years since retirement

	Total	Female	Male
Less than 5 years	34	24	10
More than 5 years	73	52	21
Total responses	107	76	31

Table 10 - How did you learn about the ‘Do It Now’ project?

Radio	3
Newspaper	6
Word of Mouth	35
Employer	21
Internet	0
Other (including Presentations)	112

Appendix C – Sample Data from Do It Now Project

Table 11 – Sample responses to initial questionnaire

<p>In which community activities do you participate?</p>	<p>Political lobbying Volunteer native animal carer Chamber of Commerce Rotary Book Club Craft Sewing Group Hospital Committee Markets U3A Fishing Bushwalking Older Women’s Network Milton Show Breeding show birds Concert Band Clean up Australia Day Gardening Fine arts at TAFE Play music at clubs, pubs and weddings Meals on wheels Folk dancing View Club.</p>
<p>Are there other community activities in which you would like to participate?</p>	<p>Teach Spanish to adults Scottish dancing As I so very involved in my loved area, I have recently had to change my number to silent. Start a seniors community band Start a babysitting business Playing music for financial gain and pleasure Coastal Patrol I would love to help people in their gardens, or work for a nursery Volunteering Something educational Teach reading Sport Want to write life story Computer skill educator Thinking of joining Landcare</p>

Appendix D – Data from Telephone Interview

Table 12 - Sample responses to follow-up telephone interview

<p>What made the experience enjoyable?</p>	<p>Very worthwhile. As the population is getting more and more top-heavy, how we deal with old age is going to be a big problem in Australia. While we knew we were getting older, we hadn't particularly thought about it and it gave us the opportunity to reflect on whether we were handling it ok (1.2.2).</p> <p>Meeting other people; hearing about other people's lives; friendship – never know when meeting new people might lead to other things (1.1.3).</p> <p>It was something different. Interesting to hear different people expressing what they've done in their lives – all very interesting. Alison was <u>so</u> interesting and for a girl from the bush without high school education it was fascinating (1.3.1).</p> <p>Felt it was worthwhile – an awareness program. In hindsight the program was a turning point for me and a wake-up call. I realised I had no hobbies that weren't work related, no forward plan and all I lived for was work and work-related matters. Now I only work two days a week, and guess what, the business still operates. It took until January to realise that I had been in a big hold of depression and a downward spiral over the last five years. I'm now coming out of it, have stopped working so hard and have taken up new interests (E.1.12).</p> <p>Met ladies who I saw regularly at Bingo but didn't know, and now I do. Met up with some since for coffee and everything was much more personal. It was lovely having my opinion listened to (1.3.2).</p> <p>I've been to several seminars which looked at financial matters, but this session came from a different tack and got us thinking about how we were going to spend our time, the activities we might do and even the kind of housing we might have. Plus the health aspects. It was run very efficiently in a very relaxed atmosphere (E.6.1).</p> <p>Perhaps more interesting than enjoyable; it made me see another phase of my life expanding in front of me and made me realise it's not far away and helped me put it in the right perspective (E.1.6).</p>
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<p>How do you think participation in community activities influences people's health and sense of wellbeing?</p>	<p>Being more directly involved and giving of our time makes you feel good in yourself. If you feel good then it's good for your overall health(4.1.5).</p> <p>What Alison had to say opened my eyes a little bit; now I know why those that hibernate are like they are – sad, and bored, and lonely. If you get involved it keeps you more alert and active and therefore healthier (1.3.5).</p> <p>Most human beings need social interaction with other people; we need to laugh and commiserate with others. Can become introverted if you stay at home. Social interaction is as essential as sleeping and eating. It's become more important to us, since coming to the Shoalhaven to interact and this have been one of the happiest times of my life and one of the best decisions we've made (1.2.8).</p> <p>I learnt a lot from attending and primarily that DIN is what I have to do. Dealing first with personal issues but fully intend to get involved with the community later. Dealing with personal issues has been really good but have begun one community activity. I'm living by DIN now! (1.1.10).</p> <p>Keeps your mind occupied and stops you sitting around all day getting bored. Gives you something to look forward to and something to get up for each day (3.2.3).</p> <p>Would not have said yes at the time, but now I feel DIN did change my understanding of the relationship between community activities and health. Helps to create a balance between all the groups with which people interact. Groups cannot all be work-related (eg. Chamber of Commerce and Council). The skill is to learn how to balance all the groups and to know which make a difference to health and well-being – eg. if you over-indulge in work-related ones you can become a workaholic! (E.1.12).</p> <p>Occupation is the big thing – a lot of my friends are just sitting in their armchairs eating chips! I'm very motivated and doing things in community groups keeps me going (1.4.11).</p> <p>Always felt that if you're actively involved then it's much better for you all round. It makes you feel useful when you're doing something to help others and this, in turn has a great influence on your wellbeing. There is a satisfaction to be gained by helping and being available for others. It makes a difference to that person's life (3.2.14).</p>
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Table 13 - Intention to participate in new community activities (currently participating)

Response		%
Yes	46	50%
No	45	50%

Table 14 - Intention to participate in new community activities (currently not participating)

Response		%
Yes	12	86%
No	2	14%

Table 15 - Did you enjoy your participation in the 'Do It Now' programme?

Response		%
Yes	117	99%
No	1	1%

Appendix E – Recommendations by participants

- Reduction of ‘red tape’ which can be a barrier to older people becoming volunteers
- Development of ‘senior friendly’ walking tracks
- Purchase of a mini bus for self care residents at a retirement village to use for group outings
- Establishment of a Time Bank system, whereby people accrue ‘credit’ when they do volunteer work early in life, which can then be ‘withdrawn’ when they require assistance in the later stages of their life.
- Establishment of ‘acoustic friendly’ community halls and venues for the convenience of people with a hearing impairment
- Holding an Open Day for Seniors at Shoalhaven Campus
- Use of a student support network by seniors who are learning to use the Internet
- Continuation of the Do It Now project
- Establishment of a ‘men’s shed’ programme in retirement villages
- Development of a life story writing programme for Shoalhaven seniors
- Establishment of a concert band for Shoalhaven seniors
- Development of non examinable courses for seniors at Shoalhaven Campus

Appendix F – Publication and presentations related to Do It Now

Publication of peer reviewed article

Wicks, A (2006). Do it now: A project promoting participation in engaging occupations. Papers submitted for peer review and presented to 39th National Conference of the Australian Association of Gerontology. Australian Association of Gerontology. Sydney. 23 November.

Presentations at local conferences

Wicks A (2005). Do It Now: A program promoting seniors' participation. Invited presentation at the National Speakers Series: Building a community for all ages. Department of Health & Ageing. Batemans Bay, NSW, Australia. 18 November.

Wicks A (2006). An occupational perspective of health. Blueprint Shoalhaven. Nowra, NSW, Australia. 3 April.

Presentations at national conferences

Wicks, A (2006). Do it now: A project promoting participation in engaging occupations. 39th National Conference of the Australian Association of Gerontology. Australian Association of Gerontology. Sydney. 23 November.

Wicks A. (2006). Introducing an occupational perspective of health. HSA Group Professional Conference. Coojee Beach, Australia. 11 August.

Presentations at international conferences

Wicks A. (2006). Seniors' strategies for meaningful occupation. Canadian Society of Occupational Scientists Conference. Vancouver, Canada 5-6 May.

Wicks A. (2006). Promoting an occupational perspective of health. In International Expert Panel: Promoting our profession. World Federation of Occupational Therapists Congress. Sydney, Australia. 25 July.