

### **Aging in Place**

Vol. 24 •Issue 7 • Page 68 Aging in Place It's for therapists too!

By Rhoda P. Erhardt

Productive aging is one of the focus areas in AOTA's Centennial Vision. While many occupational therapy practitioners work with aging patients, don't forget that therapists are aging too!

Aging can be a graceful process if we create a therapeutic environment for ourselves. This is particularly true for those of us with private practices where workplace and home are combined. At the age of 60, I examined my priorities and adjusted my personal and professional goals in order to continue working and living in my own home as long as possible. Therefore, my office/home needed to be accessible, not only for patients and friends, but also for myself on the path to becoming a "well elderly person."

My experiences in assisting families of children with disabilities to adapt their home and community environments for accessibility gave me the confidence to design my dream house. I was fortunate to find a builder who listened to my ideas, was open to my suggestions and had good problem-solving skills.

*ADVANCE* published a description of my home in 1993.<sup>2</sup> This article is a follow up, giving personal examples of how this environment has helped me over the last 16 years to adapt to the physical changes that my own aging process brings, with the hope that these ideas may be helpful for practitioners to apply to their own clients and themselves. My original design decisions were influenced by:

Frank Lloyd Wright's concept of form following function, comparing architecture and occupational therapy, because skillful blending of art and science are the essence of both professions;<sup>3-5</sup>

The Chinese philosophy of feng shui, to maintain wellness through harmony and balance between nature and the universe; <sup>6</sup> and Codes and standards of universal design. <sup>7</sup>

## **Occupational Profile**

The design elements of the completed house related (unintentionally at that time) to many components of occupational performance now defined in our current Practice Framework. The initial step in the process is the occupational profile, which describes the client's occupational history, patterns of living, interests, values and needs; identifies the client's priorities concerning engagement in occupations; and frames client issues within the domain of occupational therapy.

Today, in order to achieve balance in my personal as well as my professional life, I continue to identify functional needs within my daily schedule (occupational profile), and then examine those activities in terms of ADL, IADL, education, work, play, leisure and social participation.<sup>8</sup>

## Professional activities.

At age 60 I was still practicing as a pediatric therapist in direct service, supervision and family consultations. At age 76 I can get down on the floor, but getting up again — it's not pretty.

Other roles have continued with some modifications:

- Consultant: Agency consultations involve less air and auto travel and more e-mail interactions and telephone conferences.
- Author: Writing books, chapters and articles at age 76 is more efficient than ever because of computer editing through e-mail.
- Teacher: Presenting workshops at age 60 meant a great deal of travel, sometimes very tiring; that has now decreased because of increased online courses.
- Business Owner: Managing a small products company in your home office is always a challenge as you blend professional and personal schedules. Fewer deadlines mean more flexible time available for rest, an important need to conserve energy as we get older.

### Personal activities.

My social and leisure activities have not changed a great deal in the past 16 years. Social participation with family and friends continues to be important, but I also value and have an increasing need for alone time.

I have altered my hobbies and volunteer projects as my interests change (or remain). For example, after all eight grandchildren received crocheted afghans for Christmas, I found a new recipient: Project Linus, <sup>9</sup> which collects donations of handmade blankets and distributes them to children in hospitals.

Volunteering can also utilize professional knowledge; for example, as I serve on my church accessibility committee.

## **Occupational Performance**

The next step in using the Framework involves analysis of occupational performance, more specifically, identifying underlying factors that support or hinder performance. Significant changes in my sensory and motor skills and roles have affected my ongoing occupational performance, attitudes and routines.<sup>8</sup>

#### Sensory issues.

During aging, our visual, auditory and tactile systems may become hyper- or hypo-sensitive to stimulation. Consideration of light, color, line, shape and movement flow can result in a beautiful, peaceful and nurturing home/office environment.

Although my house is not large (less than 1800 square feet on the one floor), vaulted ceilings, large windows, skylights and the great room combination (living, dining and kitchen area) extend the illusion of space. The front door opens into a wide hall, allowing maximum ch'i to flow into the home, giving feelings of well being and happiness.

Interior and exterior are integrated by colors and textures, such as neutral off-white tones of walls and carpet (sand or snow), different shades of brown furniture (trees and soil), metallic accents and blue-green art work, fabric and plants (grass, leaves and sky). These representations of wood, water, fire, metal and earth elements are thought to influence the spiritual life force (ch'i).

For example, my personal feng shui trigram is K'an, representing work and career, so my career goals will be met since my office faces southeast toward the sun. Metal wind chimes above the desk are said to promote business success in the adult years.

Because almost everybody's vision changes as they get older, lighting throughout the house was planned to be extensive and flexible, with push-button dimmer light switches, also easier on hands that are definitely weaker now. Unfortunately, energy-efficient fluorescent bulbs do not provide enough light for reading, so I still need to use 250 watt 3-way incandescent table lighting.

In the home office, corner placement of the computer monitor avoids reflection from large southwest windows, which provide ample light and restful views of a bird feeder, trees and sunny Minnesota skies, ideal for visual breaks during long hours on the computer.

### Motor performance.

In my own experience, physical strength, endurance and balance seemed to decline more rapidly after age 60, and even more so after 70. Adaptive solutions in a home can make a huge difference in quality of life as we move through the stages described in Maslow's hierarchy of self actualization.<sup>10</sup>

At age 74, my ongoing effort to maintain a balance of physical as well as spiritual wellness through the normal aging process motivated me to begin working with a personal trainer who designed an individualized Pilates home exercise program. Therapy bands

and balls and duct-taped telephone books—equipment once used for my patients—have a new life. A bedroom has become my exercise room, with my energy enhanced by the sound of classical music playing during each 45-minute session, three times weekly. 11

We kept all living space on one floor (and a basement tornado shelter) with flat thresholds to plan for possible wheelchair use in the future. Lever handles on doors are much better than round doorknobs for hands that have a touch of arthritis and are losing strength. Kitchen cabinets with lazy susans and large slide-out drawers make utensils easy to reach as bending becomes more difficult. Grab bars (installed into 3/4" plywood-backing reinforced walls throughout) in the tub, shower and toilet areas of both bathrooms meet safety needs.

A deacon's bench at the entrance is a welcome seat for removing shoes, convenient for anyone who cannot balance on one foot very easily anymore. Corner placement of computer monitor, keyboard and mouse on built-in counters in the office provides support for both arms and wrists, helping to prevent repetitive stress injuries.

# **Design Elements That Worked**

The 7' x 40' entrance hall served at least five functions when I first moved in. Sixteen years later, adaptations reflected changing needs, interests, and patterns of daily living:

- Space for family gatherings and large parties, in combination with the "great room" is still relevant, with the
  addition of special events, such as an assembly line of tote bag stuffing for a national conference.
- Walls serving as an art gallery for prints collected from lecture tours overseas now also feature antique Chinese tables (hooray for eBay) to hold collections of valued interests such as chess sets, hand sculptures, jewelry and artifacts from different countries.
- The therapy area, with a large closet for storing toys and equipment, is no longer needed, so the closet now holds lecture notes, workshop materials and instructional videos/DVDs. I moved these from the office to make space for more books, journals and filing cabinets.
- The play area for my grandchildren is no longer appropriate, since they are now all pre-teens or teens, instead
  of toddlers and preschoolers.
- Videotaping of evaluations and consultations was ideal because of the natural light from the door sidelights and two skylights, but is also no longer required as my professional roles have changed.

Grab bars were installed as vertical bars in the shower in the guest bath, and as single diagonal bars on the walls next to the toilets and bathtub in the master bath. As I struggled through two knee surgeries and adapted to general weakening in both upper and lower extremities, I discovered that the diagonal placement was absolutely perfect for the biomechanics of those specific uses—much better than many public rest rooms with two bars, one horizontal and one vertical.

The house without steps was a blessing during periods of post-surgical crutch use.

The small laundry/sewing/crafts room, designed for convenience, proved to be a compact and efficient room for all three functional routines:

- I don't need to haul laundry up and down basement stairs, and I keep my laundry supplies directly above the washer and dryer for easy access.
- The sewing machine is always set up and ready, as I am the family's designated mender of torn garments. I
  keep supplies in an adjacent drawer and portable sewing basket.
- A wall of built-in shelves contains boxes labeled with all the craft and sewing materials I will ever need: felt, sequins, beads, floss, yarn, knitting needles, crochet hooks, leather, fur, ribbons, eyelets, stuffing, decoupage designs, patterns, flower press, paint, brushes, and the biggest box of all, miscellaneous, for a true OT who never throws anything out!

The experience of living over time in this accessible and adaptable home has enabled me to maintain occupational performance, role competence and quality of life while aging in place. OT practitioners who work with seniors or are baby boomers themselves have the knowledge, skills and understanding to plan for safe and independent futures. <sup>12</sup>

References available at www.advanceweb.com\OT or upon request.

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