

INTERGENERATIONAL PROGRAMMING
INVOLVING ADULTS WITH DEMENTIA:
AN OBSERVATIONAL ASSESSMENT OF
SOCIAL BEHAVIORS AND AFFECT

by

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(Abstract)

The empirical knowledgebase of intergenerational programming (IGP) largely relies on anecdotal reports by staff and family members. The lack of concrete knowledge is particularly evident in the literature regarding IGP involving elders with dementia. In an effort to fill some of the voids in the current literature base, observations were conducted for seven weeks at a co-located child and adult day program to determine the effects of IGP on 10 older adult participants (M age =81 yrs., $S.D.$ = 5.21). All participants (5 male and 5 female) were diagnosed with dementia by a physician and attended the adult day program regularly. Intergroup contact theory, which emphasizes interdependence between groups, informed the development and facilitation of the IGP activities. A structured scale was utilized to assess the elders' social behavior and affect during IGP. Control observations were conducted during adult-only activities representative of traditional dementia-care programming, and qualitative data were collected through participant interviews and facilitator journaling to corroborate the quantitative findings.

T-test analyses revealed that the older adults exhibited significantly greater levels of group social behavior and significantly fewer instances of unoccupied behavior during IGP as compared to traditional adult-only activities. The adults also expressed significantly more positive affect during IGP than in the control activities. Findings from the qualitative inquiries supported the quantitative results by emphasizing the meaning and purpose of IGP for the elders. Results indicated that effectively planned and facilitated IGP is an appropriate and interesting activity for elders with dementia.

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Introduction

Joan M. Erikson's (1997) thoughts regarding the ninth stage of life and the social connections with community experienced during this time were best expressed by an intergenerational exchange between herself and her grandson:

One of the delightful experiences of elders is to have forthright conversations with grandchildren... I did need to sit down on a rock and rest a bit, but not he... he stood very straight in front of me to clarify essentials. "Nama, you are old and I am new" – an unchallengeable pronouncement. (p. 115)

Perhaps Erikson's inclusion of this conversation most directly related to her personal and internal thoughts about her own aging, or perhaps the quote more adequately reflected the stereotypes and distinctions about aging that are socially learned at a very young age. Both perspectives suggest the potential for older adults to be primarily judged on the basis of age. The likelihood of experiencing further discrimination and disregard is infinitely greater when the elder has been diagnosed with dementia. Society tends to view adults with dementia as burdens or hopeless cases and often completely disregard the unique and rich life history of these individuals. As the disease progresses, elders with dementia often become socially isolated and are forced to give up their roles within the family, community, and society (Kitwood & Bredin, 1992; Woods, 1999).

The National Institute on Aging (2000) reports that there are approximately eight million adults in the United States who have been diagnosed with dementia. Additionally, it is estimated that nearly 50% of individuals age 85 or older suffer from some form of dementia. This figure is particularly striking considering the Census Bureau estimates that there will be 6.7 million Americans age 85 or older by the year 2020. As the number of adults with dementia increases, so does the demand for quality long-term care facilities and respite programs. Elders with dementia experience a gradual deterioration in cognitive, physical, sensory, and social abilities as the disease progresses, and families

often turn to some source of formal support to obtain assistance with caregiving responsibilities. Some families opt for the around-the-clock care provided at long-term care residences, while others seek part-time assistance from respite facilities such as adult day programs.

Enrollment in adult day program care is an appropriate option for elders with mild to moderate levels of cognitive impairment. One of the most appealing aspects of this type of respite is that elders can live at home with their families, yet attend the formal care program during the day. This arrangement allows family members to maintain regular employment, run errands during the day, or simply take a break from their caregiving responsibilities. Older adults generally attend adult day programs because they cannot stay at home alone, but their range of functional abilities and limitations is usually quite varied. Some elders may exhibit very little impairment, but need a medical staff member to administer medicine to them several times a day. Conversely, other participants may require assistance with multiple Activities of Daily Living and maintain little to no short-term memory. However, medical care is not the solitary function of such respite programs; socialization and recreational activity are integral aspects of adult day program care. The activities director is responsible for coordinating and facilitating a variety of activities throughout the day. Such recreational activities might include arts and crafts, group games, cooking, or horticulture. Exercise programs designed for persons with dementia, cognitive stimulation activities, lunch, snack times, and rest periods are also built into the daily schedule.

Although conditions may greatly vary from one facility to another, dementia-care programs are often criticized for their lack of activity, or the inappropriate nature of the presented activities. In such situations, elders often remain unoccupied for large amounts of time because they are not presented with opportunities for meaningful and stimulating activity. Periods of inactivity regularly result in boredom, anxiety, repetitive behaviors, agitation, or wandering, which all significantly detract from elders' mental, social, and physical well-being (Buettner, 1999). When recreational opportunities are offered, the activities are often either too difficult or too childish, thus causing the participants to feel

frustrated and incapable or understimulated and demeaned. Activities for adults with dementia must strike a fine balance between being age appropriate and functionally appropriate. A crucial element of dementia programming that is often excluded is the need for *purpose* and *meaning* in recreational activities (Bowlby Sifton, 2000).

Effectively planned and executed *intergenerational programming* can provide elders with dementia opportunities to perform meaningful roles, increase self-efficacy, and take part in social interactions with younger generations (Newman & Ward, 1992; Salari, 2002; Short-DeGraff & Diamond, 1996). However, intergenerational exchange that is not properly planned and implemented can potentially result in negative social interactions or reinforce ageist stereotypes (Salari, 2002). Many scholars and practitioners acknowledge the potential benefits of intergenerational exchange, yet these opinions do not coincide with the traditional views of elders with dementia and their abilities. At the present time, the intergenerational knowledgebase is theoretically and methodologically deficient (Kuehne & Collins, 1997) and subsequently cannot provide the empirical evidence necessary to answer critics' concerns or provide an effective framework for developing and facilitating intergenerational activities.

Practitioners and scholars share the responsibility to actively pursue interventions that can positively influence elders' well-being. This study offers an initial step towards filling in the gaps of the IGP literature involving elders with dementia. I utilized intergroup contact theory to inform the development and implementation of intergenerational activities between elders and children at a co-located day program. The purpose of these activities was to encourage the elders and children to work together in order to accomplish common goals. By promoting interdependence, the activities encouraged social behaviors and allowed for the development of friendship. In an effort to systematically assess the older adults' behaviors and affect associated with intergenerational exchange, a structured observational scale was employed.

The following chapter will present the progression of the intergenerational programming field, offer an overview of the benefits and challenges associated with intergenerational exchange, propose a theoretically-driven perspective of activity development and facilitation, and introduce a structured intergenerational observation scale. Subsequent chapters will offer information on the methodologies employed by the study, results of the statistical analyses, a discussion of the findings, implications for future IGP research, and concluding remarks. The current state of the intergenerational knowledgebase offers unlimited avenues for quantitative and qualitative exploration and the present study attempted to contribute both theoretically and methodologically to influence the direction of future intergenerational research and program development.

Chapter 2

Review of Literature

Rationale for Intergenerational Programming

Modern American society is comprised of a dynamic system of values, norms, social relationships, and familial structures that simultaneously enhance and distort contemporary daily life. In an ideal situation, a family would consist of cohesive individuals of multiple generations who enjoy frequent interactions characterized by mutual respect, reciprocity, and nurturance. The reality of family life lies somewhere in between the extremes: the unobtainable idyllic standard and the group of individuals who are only linked by genetic characteristics. Familial cohesion has always been influenced by multiple factors, yet modern societal and demographic changes have imposed further challenges. Each generation experiences the benefits and pressures of modern life, but it is the eldest and youngest individuals who are most likely to feel the negative consequences associated with an emotionally, financially, and psychologically strained family and society.

Longer life expectancies, due to healthcare improvements, low infant mortality rates and technological advances, allow for the development and longer duration of relationships between older and younger generations (Hooyman & Kiyak, 1995). It is now possible for grandparents to see their grandchildren reach adulthood, or even experience the birth of their great-grandchildren. However, demographic trends towards geographic mobility limit the likelihood of multiple generations living in close proximity to one another. Current economic and occupational climates often result in adult children living far from their aging parents, subsequently limiting the frequency of contact between grandparents and grandchildren (Stephens & Franks, 1999).

Some scholars contend that the lack of geographic proximity between generations has not radically influenced the composition of the family or the significance of familial relationships (Brody, 1990; Stephens & Franks, 1999). These researchers assert that relationships among family members are the closest of interpersonal relationships, despite physical distance, and that it is unlikely that

demographic changes contribute to the social isolation of older adults (Stephens & Franks, 1999).

Other scholars make the argument that proximity to grandchildren plays a significant role in the grandparent/grandchild relationship. These researchers assert that the role of grandparents should include the opportunity for nurturance and the transfer of wisdom to younger generations. Geographic distance can potentially result in the segregation of generations, thus making it more difficult for grandparents to fulfill their role, and potentially diminishing the salience of the grandparent/grandchild relationship (Kimmel, 1990; Newman, Ward, Smith, Wilson, & McCrea, 1997).

Demographic and societal trends also influence non-familial generational segregation. The emigration of younger people from one geographic location to another, usually for economic purposes, has resulted in concentrations of older adults in certain areas. The postretirement migration of elders to warmer climates or specially designed retirement communities has resulted in “seniors only” communities that further exacerbate the issue of generational segregation (Hooyman et al., 1995; Kimmel, 1990; Kingson, & Williamson, 1993; Newman et al., 1997). Additionally, the dramatic cultural influences of marketing and media have perpetuated the notion of generational differences and age-based stereotypes, thus physically and psychologically promoting the segregation of age groups (Henkin & Kingson, 1998; Kingson et al., 1993; Newman et al., 1997). It is an unfortunate reality that, even if older and younger individuals are in physical proximity to one another, they will often feel significant differences in values, culture, and opinions due to psychological generational segregation.

Such perceptual dissimilarities between individuals of different age groups can be described as *social distance*. This concept was originally utilized by sociologists to characterize the degree of intimacy and accordance between members of disparate ethnic, racial, and religious groups (Kidwell & Booth, 1977). Perceptual differences between such groups often lead to negative and stereotypical associations, which ultimately hinder the frequency and quality of personal relations. Social distance research has influenced scholars’ understanding of prejudice and discrimination in intergroup relations

and has guided the study of attitudes between disparate groups of people towards each other (Kidwell & Booth, 1977).

Kidwell and Booth (1977) applied the concept of social distance to the study of intergenerational relationships; they associated older age groups with the status often designated to minority groups. Their research indicated that social distance existed between all age groups. Furthermore, the researchers concluded that the greater the age difference between individuals, the greater the perceived social distance. Perhaps most significantly, their findings suggested that people feel the most socially distant from older adults, regardless of their own age. Kidwell and Booth concluded that the source of estrangement between age groups was most likely due to a lack of contact with individuals of other generations.

Intergenerational programming (IGP) provides a potential solution to the lack of interaction between age groups, as well as the issue of generational segregation. IGP involves purposeful collaboration and interdependence between members of the oldest and youngest generations (Henkin & Kingson, 1998). Effective intergenerational exchange allows both age groups to experience social connections to other human beings and may alleviate some of the physical and psychological discord between generations. Although many years separate older adults and younger individuals, both groups need and desire the same basic elements: a role in society, to be valued as a person, to be accepted and respected, and to feel a sense of security (Crites, 1989; Newman et al., 1997). Effective IGP assists older and younger individuals in looking past superficial and stereotypical disparities to realize the larger commonalities and potential bonds between generations.

The pressures and stresses of our modern society threaten the cohesive social and familial connections between generations. Positive intergenerational relationships promote nurturance, as well as the transfer of history and wisdom. IGP provides older and younger people with the opportunity to take part in the larger *social compact* that binds individuals, families, communities, and societies together (Cornman, & Kingson, 1998). A social compact reflects the ideological responsibility of

family, community, and society to care for the needs of all its members. Such reciprocal ties between macro and micro levels can be revitalized through intergenerational understanding and support. Cohesion between generations can potentially strengthen the social compact and result in a society characterized by compassion, civility, and the exchange of care and resources (Cornman & Kingson, 1998; Kuehne, 1998).

Benefits of Intergenerational Programming

In recent years, the potential benefits of IGP have demanded the attention of practitioners and academics alike. Because the oldest and youngest generations tend to be the victims of social problems and community fragmentation, a wide variety of programs promoting intergenerational exchange have been developed (Kuehne, 1998). Over the past three decades, IGP has been utilized to combat a diverse range of issues, and extant literature has primarily shown positive results.

Perhaps the most recognized IGP, the Foster Grandparents Program (Freedman, 1994), has been in operation since the mid 1960's. This innovative program was designed to pair healthy older adults from lower income brackets with special-needs children. The Foster Grandparents Program adopted the philosophy that elderly individuals can be a resource, rather than an economic drain on society. At the time, this was a novel concept that received much skepticism from critics. Since its inception, the Foster Grandparents Program has become a nation-wide force in the campaign to combat social ills and has served as a template for new IGP facilities and policy reform (Freedman, 1994; Newman & Brummel, 1989).

Influential programs, such as the Foster Grandparents Program, have laid the foundation for current intergenerational initiatives, such as Across Ages. This intergenerational mentoring program was designed to alleviate drug abuse among adolescents, as well as encourage healthy older adults to participate in the larger community. Taylor, LoScuito, Fox, Hibert, and Sonkowsky (1999) evaluated Across Ages' effectiveness in the Philadelphia public school system. The researchers randomly assigned 562 students to one of three conditions: a program group, a mentoring group, or a control

group. Elder individuals who volunteered to serve as mentors were required to complete a training program and program administrators conducted a screening of all potential mentors. Results indicated that students who were mentored by older adults exhibited significantly more pro-social attitudes towards school, their own future, and older populations. The intervention also resulted in better reactions to situations involving drug use for the mentoring and program groups. However, study results also revealed that older adult mentors must contribute considerable time and attention to their mentees in order to promote behavioral and attitudinal change. The findings of this study highlight the influential role of elderly mentors, but also suggest the importance of training and supervision when selecting and supporting such mentors. The authors suggested that the older adults experienced considerable sense of purpose and increased well-being while participating in this mentoring program, but these findings were primarily anecdotal in nature.

Neighborhoods 2000 (Kaplan, 1997) is an example of IGP that utilizes the skills, energy, and time of healthy older adults and youth in an effort to improve the quality of their neighborhoods. In addition to civic beautification, the program sought to promote intergenerational cohesion, understanding, and cooperation. Program facilitators utilized a team approach in which the young and older participants must collaborate to bring about results. Planned activities, training, and an educational curriculum serve as the foundation of the program. Neighborhoods 2000 has expanded from one original location in New York to over ten program units across the country.

Neighborhoods 2000 (Kaplan, 1997) emphasizes evaluation by including thorough and frequent assessments of participant stereotyping, cooperation between generations, and sense of citizen responsibility. Kaplan incorporated cutting edge research methodologies such as computer mapping technologies and aerial photography to study the relationship between program participants and their environment. Outcomes associated with Neighborhoods 2000 included increased feelings of citizenship for both young and old, more positive attitudes between generations, and greater understanding of human relatedness to the participants' physical environment.

IGP has further responded to societal needs by providing a potential solution to the country's looming childcare crisis. Due to the increase in single parent families and the rise in employment of women, daycare and after-school childcare are in high demand. A shortage of childcare programs, coupled with high staff turnover rates and funding problems, has created a quandary for parents in search of quality childcare options (Crites, 1989; Larkin, 1998). The intergenerational response to this societal problem has been spearheaded by facilities such as Gramma's Day Care Center, in Memphis, Tennessee and Care Castle Intergenerational Child Care Center in Colorado Springs, Colorado (Crites, 1989; Larkin, 1998; Newman et al., 1997; Newman et al., 1989). These childcare centers utilized older adults as both volunteers and paid child care attendants. These facilities have lowered staff to child ratios by harnessing older adults' time, affection, knowledge, and skills. Such intergenerational childcare programs have yet to be rigorously evaluated or researched, but the success of the pioneering facilities serves as an inspirational model.

Although the older adult population is a strong force in the intergenerational response to societal issues, young adults have also dedicated their time and energy in an intergenerational context. The Befrienders program was established in 1993 in order to better assist homebound and isolated older adults. The specific goals of the Befrienders program included: (a) providing intergenerational companionship between aged individuals and young adults, (b) providing assistance to elderly residents in order for them to remain in their homes, (c) increase awareness of the needs of older citizens, and (d) allow college students an opportunity for intergenerational exchange (Osborne & Bullock, 2000).

The older adults involved in the Befrienders program evaluated by Osborne and Bullock (2000) were rendered homebound due to health or physical disabilities. Special care was taken by the founders of the Befrienders program to acclimate the college students to the physical limitations of the older adults such as hearing loss, vision difficulty, mobility issues, and other limitations. The authors were especially interested in the participants' motivation for interacting with individuals of another

generation. The older adults generally chose to participate because of their desire for companionship and assistance, and they often acknowledged feelings of disappointment when their younger visitors could not make their scheduled meetings. The college volunteers became involved in the program in order to interact with, help, and learn from older individuals. The volunteers credited the older adults with assisting them in their endeavor to become more compassionate and knowledgeable individuals. The positive outcomes associated with this program allude to the beneficial influence of young adults serving frail older adults, although there is no empirical evidence on this project to date.

Long-Term Goals of IGP

IGP can take on many forms and potentially serve as a catalyst for the resolution of many societal issues. A less often acknowledged benefit of effective IGP is its influence on the problem of generational conflict, or inequity. Generations United is an intergenerational advocacy group that addresses this issue by lobbying for programs that serve individuals across the life span (Newman et al., 1997). The decades of the 1980's and 1990's witnessed political debate over who should profit from government entitlement programs. Instead of approaching this controversy from a life course perspective, politicians and bureaucrats have created a *generational equity* dispute, pitting the needs of older adults against the needs of children (White House Conference on Aging, 1995). The vast majority of the American public does not hold such extremist views on the distribution of funding and resources for the oldest and youngest generations, yet certain political interest groups have continued to perpetuate this issue. Since the majority of publicly funded programs directly benefit specific groups of individuals, lobbyists argue for their causes from a biased perspective. This debate is founded on the premise that government funding given to older adults is obtained by cutting federal programs for children and vice versa; as if the enormous government budget only consists of these two items (Kingson & Williamson, 1993).

Groups such as Generations United have led the intergenerational response to the generational equity dispute. Instead of adhering to stereotypes based on political rhetoric, Generations United

advocates for government programs that promote well-being across the life span. The 1995 White House Conference on Aging was the first national forum for citizens who endorse intergenerational equity. President Clinton's administration, along with the advocacy of Generations United, unveiled a political approach characterized by generational inclusion. The current political climate is dominated by budget cuts and conservative agenda, and the future of basic programs such as Medicaid and Social Security are threatened. With public support, Generations United and other IGP facilities can potentially influence government officials to explore intergenerational solutions to larger societal issues. Although no individual community program or IGP could ever claim to resolve large-scale concerns such as ageism or national healthcare, the collective efforts and opinions of people who support generational cohesion can influence the larger society.

Intergenerational Programming Involving Adults with Dementia

As previously mentioned, the issues of generational segregation and older adult isolation are prevalent in today's society. This is a particularly salient problem for the approximately eight million Americans suffering from dementia (National Institute on Aging, 2000). As the disease develops, an older adult may begin to forget names, or may become confused when attempting to complete daily tasks, such as shopping or cooking. Family members, friends, and community members see the cognitive decline, and the older adult's position within society slowly begins to dismantle. As the elder's limitations and struggles become more evident, the desires, history, self-identity, and feelings of the older adult are often overlooked, and in essence, the individual becomes a *disease* rather than a *person*. Consequently, elders with dementia are seldom encouraged to take part in social activities or assert autonomy (Kitwood & Bredin, 1992; Voelkl, Fries, & Galecki, 1995). These older adults are often psychologically and physically, isolated from the rest of society (Downs, 1997; Kitwood & Bredin, 1992; Woods, 1999).

IGP can potentially ameliorate some of the negative repercussions associated with dementia. Research conducted by Short-DeGraff and Diamond (1996) evaluated the social responses of adult day

care participants during baseline conditions and again during intervention conditions that included intergenerational activities with children. The most common diagnosis among sample members was Alzheimer's disease. The adult day program participants were offered a variety of opportunities to interact in free-choice and planned activities with the children. The researchers utilized momentary time-sampling procedures to observe and record the social behaviors of the older adults during both baseline and intervention conditions.

The results of Short-DeGraff and Diamond's (1996) research suggest that involvement in intergenerational programming can influence adult day program participants' social behaviors. When not participating in IGP, the older adults exhibited low levels of social interaction, behavior typical of this population. However, the adult day program participants engaged in significantly higher levels of social interaction when taking part in the IGP. Older adults with dementia commonly disengage from social and meaningful activities as their abilities decline, thus isolating them from the rest of society. Short-DeGraff and Diamond's findings have important implications; elders with cognitive impairments can engage in enhanced social interactions when participating in IGP. Social engagement is generally linked to enhanced self-concept and well-being in old age (Kocarnik & Ponzetti, 1991; Teri & Logsdon, 1991; Zgola, 1999). Although the researchers did not investigate the affect exhibited by the adults during the sessions, their findings suggest that IGP is an effective way to involve elders with dementia in social interactions.

Camp and colleagues explored the ability of elders with dementia to engage in intergenerational social environments (Camp, Judge, Bye, Fox, Bowden, Bell, et al., 1997). The researchers' primary goals in this pilot study were to determine if participating in this IGP could reduce physical and social apathy, and to evaluate whether older adults with dementia could successfully teach Montessori-based lessons to preschool children. The older individuals completed Montessori-based activities without the children as a baseline measure. The cognitively impaired elders then participated in one-on-one intergenerational sessions once a week for 30-45 minutes each.

The researchers took special care to individually familiarize both generations to the Montessori methodology in order to facilitate success.

Camp and colleagues' findings suggest that elders with dementia can not only engage in intergenerational exchange, but that they can also serve as mentors to children in Montessori-based activities. The authors partially attribute the success of this IGP to the methodology employed. The Montessori-based activities provided compensatory mechanisms for the older adults, subsequently allowing them to successfully exercise their remaining cognitive abilities. The authors anecdotally reported that the elders exhibited patience and care when working with the children, and that the older adults expressed great pride in their accomplishments. Creating environments in which individuals with cognitive impairments can successfully perform meaningful roles is a crucial element in the promotion of well-being (Camp, 1997). However, the authors contend that effective intergenerational exchange can only be accomplished when the activities are meaningful for both generations and when the activities are structured to accommodate the participants' cognitive and physical limitations.

Using the innovative data collection technique, *Dementia Care Mapping*, Jarrott and Bruno (2003) evaluated the engagement and affect of adults with dementia while they were involved in IGP. The sample members attended a large co-located day program, and were presented with the opportunity to participate in up to six intergenerational activities a day. The researchers found that the elders who participated in the IGP experienced significantly higher positive affect during the intergenerational activities than during non-intergenerational activities. Another important finding that emerged from Jarrott and Bruno's research was that level of cognitive impairment, as measured by the Mini-Mental State Examination, was not associated with participation in intergenerational activities or affect expressed during IGP. These findings suggest that elders with dementia can not only successfully participate in IGP, but that they also derive considerable enjoyment from intergenerational activities. The dementia care scholars contend that involvement in appropriate and enjoyable activities

is a fundamental element in the well-being, self-esteem, and social cohesion of adults with cognitive impairments (Bowlby Sifton, 2000; Teri & Logsdon, 1991; Zgola, 1999).

Research regarding frail elders' perceptions of their own competencies suggests that involvement in IGP can result in a greater sense of usefulness during optimal exchanges (Strom, 1988). Such findings relate to the occupational therapy theoretical framework founded on the significance of *occupation* in activities. Humans are characterized by their need to be involved in purposeful activities, and lack of such involvement often leads to feelings of worthlessness and lowered self-esteem. Conversely, taking part in occupational activities that bolster self-concept is related to overall well-being and life satisfaction (American Alzheimer's Association, 1995; Bowlby Sifton, 2000; Logsdon & Teri, 1997; Zgola, 1999). Participating in effective IGP presents the opportunity to take on the occupational role of mentor, thus potentially influencing the self-efficacy and well-being of elders with dementia.

Child-care providers and adult day service administrators also cited the potential benefits of intergenerational exchange in a multi-step mail survey and qualitative analysis by Stremmel and colleagues (Stremmel, Travis, Kelly-Harrison, & Hensley, 1994). Childcare administrators acknowledged IGP as an opportunity for children and older individuals to learn from each other and gain respect for the other generation. The adult program administrators identified IGP as an avenue for the adult participants to pass on wisdom and skills to younger generations.

In the context of co-located day programs, IGP often allows for the creation of cohesion and friendship between generations. Additionally, it may potentially eliminate the duplication of resources, thus saving the facility money. Furthermore, co-located day programs can assist the "sandwich generation" of adults who are simultaneously caring for young children and cognitively impaired parents. In other words, IGP can facilitate the transfer of tangible resources and care, as well as foster understanding and connection between generations (Cornman & Kingson, 1998).

Challenges of IGP Involving Adults with Dementia

As an innovative intervention for adults with dementia, the goals of intergenerational programming include increasing self-efficacy, decreasing isolation, and offering opportunity for meaningful activity (Newman et al., 1997; Newman et al., 1992; Salari, 2002). However, the cognitive, physical, and social deficits associated with dementia illnesses often complicate the facilitation of effective activity programs. Reduced linguistic ability, slowed motor skills, inability to initiate activity, problems following multi-step directions, and limited problem-solving skills are characteristic of the progressive decline associated with Alzheimer's disease, which accounts for more than half of all cases of dementia (American Alzheimer's Association, 1995; Bonder & Wagner, 1994; Bowlby Sifton, 2000; Logsdon & Teri, 1997; Zgola, 1999). Intergenerational programmers are challenged by the task of designing and facilitating activities that are not only developmentally and generationally appropriate for adults, but that also address the developmental and social needs of children. This is a multifaceted balance to maintain, and although IGP research in this area is limited, scholars and practitioners have alluded to the challenges associated with bringing these two groups together.

A common problem associated with many community-based programs, including IGP between older adults with dementia and children, is the tendency to overlook long-term goals and become overly involved in the planning of activities. Well-meaning administrators and practitioners attempt to create intergenerational connections by engaging older adults and children in a wide variety of creative and wonderful activities. This "activities oriented" approach to intergenerational programming is often void of clearly defined goals or intended results. Results occur, but they are seldom measured or evaluated because the focus is on the activity itself. The staff become so involved in planning activities that the emphasis on program effectiveness is often lost (Bowen, Orthner, Martin, & Mancini, 2001). This overemphasis on activities may contribute to the lack of IGP sustainability.

Despite the popularity and potential benefits of IGP, it is an unfortunate reality that few programs last beyond the two-year mark (Hamilton, Brown, Alonzo, & Glover, 1999).

An example of the problematic association between lack of long-term goals and overemphasis on intergenerational activities is Seefeldt's (1987) attitudinal study of children involved in IGP with nursing home residents. The research sample included 30 four and five-year old children who visited elders in a nursing home setting once a week for one year. After the conclusion of one year, the researcher assessed the children's attitudes towards the nursing home residents as compared to those of a control group of children who did not participate in intergenerational visits. The results of this study suggested that the preschoolers who were involved in IGP held more negative attitudes toward elders, as well as their own aging, than did the control group.

Seefeldt (1987) concluded that the children's negative attitudes were due to the nursing home residents' degree of sickness and infirmity; contact with ill and passive elders reinforced the children's negative beliefs about aging. A primary limitation of Seefeldt's study was the type of intergenerational activity presented to the older and younger participants. The children were instructed to perform songs and take part in "show and tell" while the elderly residents sat on the outskirts of the room. The two age groups were not presented with any opportunities for meaningful or cohesive intergenerational contact. The activity was strictly "performance" in nature and did not incorporate the developmental needs or interests of both generations. The activity did not allow for social interactions between the elders and children, so no common bonds were established. Since the older adults were not encouraged to actively participate, the majority of elders sat quietly on the sidelines, thus maintaining physical and social distance between themselves and the children. Furthermore, the IGP described in Seefeldt's study makes no reference to long-range goals or anticipated outcomes. Lack of long-term objectives is often associated with decreased program effectiveness (Bowen et al., 2001).

As the numbers of older adults with dementia increase, so does the demand for quality institutional care facilities, such as adult day programs and long-term care residences. Many

professional care facilities for cognitively impaired elders have been criticized for not treating the adults in an age appropriate manner. A common fallacy associated with dementia is that older adults revert back to childhood and should subsequently be treated in a childlike way. Unfortunately, this misconception is not limited to the general public; it also exists within the population of medical staff, volunteers, and administrators who provide direct care to older adults with dementia (Ryan, Bourhis, & Knops, 1991; Salari, 2002; Zgola, 1999). Elders with dementia deserve to be treated with dignity and respect and, just as any other adult, should be offered age-appropriate activities and social interactions (Kitwood, 1997; Woods, 1999). Older adults subject to *infantilization*, or childlike treatment, are prone to poor self-image and decreased functional ability (Salari, 2002; Salari & Rich, 2001; Zgola, 1999).

Salari (2002) investigated the infantilization of elders with dementia in an intergenerational context. The researcher utilized a comparative ethnographic methodology to analyze observational and interview data from two adult day programs that offered intergenerational activities. Salari's theoretical framework included classic person-environment theory, which proposes the interdependence of social and physical environments and their centrality to high quality interactions. The results of Salari's research suggested that the adult day programs varied widely in terms of privacy regulation, choice, and age-appropriateness. However, the findings indicated that an increase in infantilization occurred during intergenerational activities. Examples of speech/behavior infantilization included a staff member addressing an older client as "Honey Bunny," and another adult day program employee referring to an elder as "a brat" (Salari, 2002, pp. 11). Salari related the majority of the infantilizing behaviors to the equal statuses granted to the adults and children, yet this problematic association with equal group status is not supported by all IGP scholars (Caspi, 1984; Fox & Giles, 1993).

Current Status of IGP Theory and Research

IGP has experienced a significant increase in popularity since its inception in the 1960's (Short-DeGraff et al., 1996), yet the empirical knowledgebase remains in its infancy. Kuehne and Collins (1997) contend that little concrete knowledge exists regarding the effectiveness of intergenerational exchange in meeting intended goals. While descriptions of successful intergenerational facilities are helpful and inspirational, such publications do not lend results, theories, or suggestions that are amendable to evaluation, critique, or replication. Much of the IGP literature also relies on subjective and anecdotal commentary by staff and family members (Seefeldt, 1987; Short-DeGraff & Diamond, 1996). Capturing the opinions and observations of individuals involved with IGP is valuable, but this type of research should be used in conjunction with systematic research methodologies.

Intergenerational scholars have recently recognized the importance of empirical research and have voiced the need for systematic qualitative and quantitative studies, yet this call remains largely unrealized at this time (Dellmann-Jenkins, 1997; Hamilton, Brown, Alonzo, & Glover, 1999; Kocarnik & Ponzetti, 1991; Kuehne, 1998; Newman & Ward, 1997; Short-DeGraff & Diamond, 1996).

A lack of appropriate and structured observational scales for persons with dementia is a contributing factor to the deficient nature of the IGP knowledgebase. Elders with cognitive impairments often have difficulty reporting their feelings due to aphasia. Observational instruments are one method of measuring their psychological, social, and physical well-being (Lawton, Van Haitsma, & Klapper, 1996, Lawton, Winter, Kleban, & Ruckdeschel, 1999; Volicer, Hurley, & Mahoney, 1998). Self-reports and proxy assessments can also be utilized in dementia research, but issues relating to their reliability and accuracy raise questions about these methodologies. The multifaceted nature of the dementia disease process makes it difficult to observationally assess older adults with dementia in IGP. For example, healthy individuals have the capacity to exhibit a wide variety of mood states, however, cognitively impaired individuals' range of expressed emotions

eventually becomes very restricted (Volicer, Hurley, & Camberg, 2000). These methodological issues present significant challenges for researchers assessing the effectiveness of interventions such as IGP.

Newman and Ward (1993) have developed one of the few existing IGP observational scales. The researchers created a protocol based on observed behaviors, such as smiling, clapping hands, singing, touching, and extending hands, in order to assess whether elders with dementia exhibit consistent positive behaviors while taking part in an intergenerational music therapy program. The behaviors included in the scale were operationalized and a scoring system was developed. The results of Newman and Ward's study suggested that the older adult participants demonstrated a significant increase in touching and extending hands in the presence of the children. The researchers considered these results to be a positive reflection of intergenerational interventions. Their conclusions may be true, but methodological flaws in their observational scale limited their ability to capture the overall outcomes of this IGP. For example, the behavior of extending hands does not always denote a positive interaction. Older adults with cognitive impairments might extend their hands out to others because they need help, feel pain or anxiety, or feel their needs are not being met. Newman and Ward's scale does not provide the context of the demonstrated behavior, and since many older adults with dementia are unable to adequately express themselves verbally, nonverbal gestures can take on a wide variety of meanings. Furthermore, this scale does not capture other crucial elements of intergenerational exchange, such as the older adults' affect and the children's responses to the interactions.

Creating observational instruments for IGP is a difficult undertaking, and although Newman and Ward's (1993) scale was not comprehensive, at least they attempted to utilize a structured methodology. Dementia Care Mapping is a promising means of assessing IGP involving elders with cognitive impairments. Jarrott and Bruno (2003) effectively utilized this method in a study of a co-located IGP in California. This innovative scale allows for data collection in both behavioral and affective domains (Bradford Dementia Group, 1997). However, Dementia Care Mapping is a time consuming and detailed procedure that requires extensive training and certification. Mapping includes

the coding of behavior and affect every five minutes over a 5 to 8 hour time period (Jarrott & Bruno, 2003). Dementia Care Mapping may be an effective observational technique for IGP, but it may prove to be too cumbersome and impractical for many intergenerational researchers because of the extended observation time required and the three-day certification course “mappers” must complete. Scholars must develop alternate means of assessing the effectiveness of IGP involving adults with dementia in order to extend the knowledgebase and determine the place for this intervention in dementia care facilities.

Besides lacking standardized assessment methodologies, most of the limited amount of IGP research available is atheoretical in nature. Even distinguished intergenerational scholars such as Sally Newman do not explicitly refer to a theoretical framework that guides their research (Newman et al., 1997; Newman & Ward, 1992). Lavee and Dollahite (1991) express the essential nature of the theory-practice feedback loop (see Figure 1). They describe this cycle as a continuous process of building and refining that has no set beginning or end. In other words, each component of the theory-research-evaluation-practice cycle is of equal importance, and the omission of any one of these elements will greatly limit the scope of the phenomenon in question. However, practitioners may still question the relevance of this cycle to their hands-on work in the IGP field. There is a response to this legitimate concern; utilization of the theory-research-evaluation-practice feedback loop, illustrated in Figure 1.0, increases the chance of quality outcomes.

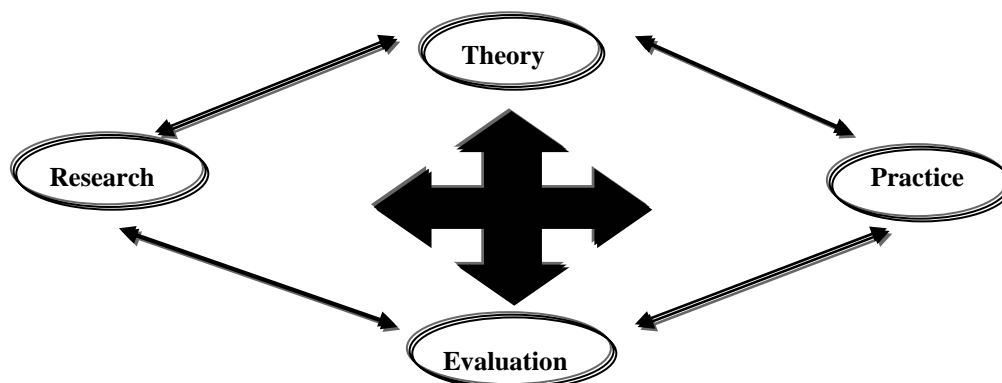


Figure 1.0. Model of the cyclical relationship between theory, research, evaluation and practice.

Implementation of the theory-practice cycle in IGP can potentially allow positive strategies to be replicated and expanded, while less effectual initiatives are more likely to be quickly identified and altered. Exclusion of the theory-research-evaluation-practice cycle often leads to ongoing problems, unstructured guidelines, limited understanding of intergenerational participants' physical and cognitive needs, and only vague knowledge of program effectiveness. IGP is thought to be beneficial for all of those involved, yet the short-lived presence of many intergenerational programs fails to support this belief (Hamilton et al., 1999). A collaborative effort between practitioners and scholars to utilize the theory-practice feedback loop in IGP can potentially increase sustainability, expand the empirical knowledgebase, and reach long-term goals.

Contact Theory

IGP entails innovative strategies for decreasing generational segregation and promoting meaningful activity for elders, yet such progressive and complex initiatives cannot always be explained by traditional theories of development. The fields of gerontology and child development are experiencing a transition from the utilization of strictly positivist ideologies to more inclusive and reflexive theoretical and research strategies (Allen, 2000). For example, scholars adhering to positivist philosophies might view elders with dementia from a strictly medical orientation; this population of adults has too many limitations to successfully engage in interactions with children. Scholars who adopt social constructionist ideologies would challenge such stereotypical notions of these adults' abilities. It is crucial for researchers and practitioners to look beyond the status quo and utilize reflexive inquiry to develop innovative means of solving modern issues. The intricacies of combining children and elders with dementia in meaningful activity demand such a postmodern theoretical lens. Contact theory is an example of a traditional framework that can be viewed from a social constructionist perspective to guide scholars' and practitioners' development of intergenerational activities.

Allport's contact theory was developed during the 1950's in response to the dynamic social climate of the time. For example, the desegregation of public schools influenced social scientists to research the pivotal conditions necessary to promote positive attitudes between perceptually dissimilar groups of individuals. Perceived differences between groups are based on salient behavioral, communicative, and physical characteristics that define a person's membership in a particular group. Social categorization on the basis of characteristics such as age, race, or sex can contribute to cognitive boundaries in social relationships (Fox & Giles, 1993).

Social scientists began to study what conditions challenged individuals to overlook perceptual dissimilarities and promote attitude change. Early field research indicated that White and Black Merchant Marines experienced more positive interracial attitudes and increased interdependency as they spent more time together at sea. In other words, as the amount of contact between groups increased, so did the positive attitudes and social relationships. Similar conclusions were reached in studies involving Black and White police officers and in desegregated public housing projects (Pettigrew, 1998).

Allport acknowledged the significant outcomes derived from increased contact between perceptually different groups, or *outgroups*. However, he emphasized that more frequent contact alone is not an antidote for perceptual problems between disparate groups. Increasing contact, without awareness of other crucial elements, could potentially backfire and simply antagonize negative attitudes and reinforce stereotypes. He proposed that positive intergroup contact could only occur when the following four conditions were met: *equal group status, common goals, support of authorities, and intergroup cooperation* (Allport, 1954). Thomas Pettigrew augmented Allport's work by developing a fifth element for optimal contact, the *opportunity for friendship* between outgroup members (Pettigrew, 1998). These five components have been utilized in a variety of social research studies between outgroups, including racial relations in the workplace, the integration of students with

disabilities in classrooms, and the easing of tensions between individuals of differing sexual orientation (Fox & Giles, 1993).

Allport's and Pettigrew's seminal work regarding contact theory is applicable to the field of IGP as well. Age and disease, such as dementia, are characteristics that define social groups, influence perceptual differences, and increase social distance. As aforementioned, older adults and children are generally psychologically and physically segregated from each other (Kidwell & Booth, 1977), and elders with cognitive impairments are even further isolated from the greater society (Kitwood, 1997). Social categorization, such as labeling an individual as "sick," "crazy," or "old," can perpetuate stereotypes and impede positive social relationships. Children and older adults with dementia may view each other as outgroups, so special considerations must be taken into account when integrating these groups in an intergenerational setting.

Contact theory postulates that simply increasing the frequency of contact between generations does not guarantee positive intergroup interactions. For example, younger and older members of a co-located intergenerational day care facility may not automatically form a synergistic relationship; on the contrary, intergenerational contact that lacks the five conditions for optimal exchange may result in confrontations, non-involvement, or the confirmation of negative stereotypes. However, basing IGP activity development and facilitation on the tenets set forth by contact theory is likely to promote optimal social exchange between outgroups.

The first component of Allport's theory relates to *common goals* between outgroup members. For example, the sociological literature cites the shared goals among members of athletic teams as an example of this tenet in practice (Chu & Griffey, 1985 as cited in Pettigrew, 1998). In an intergenerational context, this theoretical element involves creating an activity that is purposeful and has a meaningful outcome for both generations. The established IGP goal must be developmentally and age appropriate for both children and cognitively impaired older adults. Furthermore, the goal set forth must be interesting and engaging for both young and older participants.

Closely related to common goals is Allport's emphasis on *intergroup cooperation*. Research regarding this concept has involved the development of interdependence among employees in corporate settings and has emphasized the need to avoid antagonism and rivalry (Morrison & Herlihy, 1992 as cited in Pettigrew, 1998). This tenet focuses on interdependence as opposed to competition between outgroups. In intergenerational programming, cohesion and understanding between age groups is not feasible when the presented activity promotes generational rivalry. Facilitating intergenerational contact in a competitive manner only enhances the perceptual differences between groups, while interactions characterized by cooperation allow older and younger individuals the opportunity to focus on commonalities.

Support from authorities, another of Allport's tenets, refers to the importance of having key individuals or societal institutions acknowledge the benefits of contact between outgroups. The significance of this element of contact theory has been expressed in research involving the integration of African American individuals in the military and on police forces (Kephart, 1957 as cited in Pettigrew, 1998). In these instances, it was critical for the high-ranking military officers and police chiefs to support the new policies and make the changes a permanent aspect of their institutions. In an intergenerational context, support from authorities could come in the form of financial support from the government or private organization, or it could be a public endorsement of IGP by a community leader or government official. In an older adult care facility, an administrator can exhibit support by hiring an intergenerational coordinator or formalizing IGP by scheduling it regularly on the activity calendar. Authority support helps establish IGP as a permanent fixture, rather than a program that dissolves once a key individual moves on or initial grant funding ends. This element of Allport's contact theory also encourages public "buy in" to the intergenerational philosophy.

The theoretical condition of *equal group status* is potentially a controversial element within the IGP field. Allport stressed that both groups must expect equal status going *into* the situation, as well as perceive equal group status *during* the interaction (Pettigrew, 1998). This concept can be difficult to

define, especially within an intergenerational setting. Research conducted by Salari (2002) concludes “infantilization occurred in the intergenerational program when the adults and children were treated as status equals” (p. 321). Infantilization transpires when a person’s rights to autonomy, privacy, choice, and respect are negated or devalued in any way. This is obviously an unsuitable way to treat older adults, but it is also inappropriate to regard children in this manner. Social constructionist approaches to child development admonish the positivist tradition in which children are seen as empty vessels in need of strict adult indoctrination. Instead, this school of thought encourages children to voice their opinions, actively critique their environments, and learn through mutually beneficial social interactions (Gergen, 1999). In other words, the theoretical frameworks of modern scholars do not support the infantilization of older adults *or* children.

A “strengths” perspective can more explicitly articulate Allport’s condition of equal group status within an intergenerational context. By this, each potential member of the intergenerational community (child, older adult, staff member, teacher, administrator, volunteer, student, parent, or caregiver) is perceived as a partner in the creation of a capable and cohesive program (Bowen et al., 2001). Every IGP participant should be respected as an individual with a voice, and should be given the opportunity for personal choice and autonomy, regardless of age, status, physical ability, or cognitive impairment. Equal group status does not necessarily mean the older adults are being treated as children, as referenced in Salari’s research (2002). On the contrary, this theoretical element recognizes that IGP administrators and facilitators must value the individuality, autonomy, and personal history of every adult and child in order to promote optimal intergroup exchange.

The final condition for intergroup contact, *opportunity for friendship*, was incorporated into Allport’s theory by Thomas Pettigrew (1998). Previous research regarding contact theory was primarily concerned with short-term attitude change. However, Pettigrew acknowledged that optimal intergroup contact requires an adequate amount of time, as well as frequent interactions. Extended time and frequency of contact allow members of perceptually dissimilar groups to develop friendships,

as opposed to less meaningful acquaintanceships. Pettigrew also argued that self-disclosure is an integral component of the friendship development process. True long-term reformulation of negative attitudes between disparate groups cannot be obtained through trivial interactions; instead, contact between outgroups must include opportunities for self-disclosure, frequent interactions, and extended time for relationship development.

Humans are social beings by nature, and meaningful relationships are a key component of well-being and health across the life course (Antonucci, & Akiyama, 1995; Blieszner, 1989; Hansson & Carpenter, 1994). In effective IGP, activities include a social component that allows the older adults and children the opportunity for self-disclosure and mutual understanding, which are mechanisms of friendship. In this situation, elders with dementia are given the chance to reminisce about their life experiences and pass on history to younger individuals. The crucial nature of socialization in the lives of older adults with dementia has been eloquently expressed by Bruce Jennings (2000):

...the notion of quality of life is an ecological concept, referring not to the internal properties of things but to the nature and dynamics of their interaction. Quality of life, high or low, does not reside in people, but in the space of interactions between and among people. (p. 168)

In other words, Pettigrew's (1998) element of friendship is an essential addition to Allport's work regarding contact hypothesis, especially as this theoretical framework applies in an intergenerational context. Opportunities for the development of intergenerational friendships are a necessity for the reduction of negative stereotyping and attitudinal change, but can also contribute to higher levels of well-being in the lives of older adults. Tom Kitwood's (1997) perspective of personhood in dementia clearly relates to Pettigrew's augmentation of contact theory. Well-meaning caregivers and practitioners often solely concentrate on elders' medical conditions instead of approaching care from a holistic perspective. Social interaction is commonly disregarded in the medically oriented model of caregiving. Kitwood (1997) stated:

At the interpersonal or social-psychological level, much depends on how far a person with dementia is enabled to retain intact relationships, to use his or her abilities, to experience variety and enjoyment. (p. 38)

Kitwood proposed that meaningful social interaction should be emphasized as much as physical health in the care plan of cognitively impaired older adults (Woods, 1999). Effectively planned and facilitated IGP can provide the social stimulation and variety that is key to overall well-being in dementia care. Pettigrew's (1998) emphasis on friendship development is not only applicable to contact between generations, but directly coincides with a holistic care perspective for elders with dementia.

Observational Assessment

As previously discussed, there is a lack of appropriate observational scales that assess the effectiveness of IGP with cognitively impaired individuals. Although Dementia Care Mapping and newly developed observational scales provide avenues for IGP assessment, scholars must also be open to evaluating existing observational measures in a reflexive manner. Methodologies that capture the salient elements of IGP can be adapted to capture intergenerational exchange. The Play Observation Scale (Rubin, 1985) is an example of an established measure that can be modified to assess elders with dementia in an intergenerational context.

The Play Observation Scale, or POS, was originally developed to assess children's play participation in two behavioral domains: *cognitive* and *social*. Rubin's scale has become the foundation for many subsequent studies, including socioeconomic differences in play, effects of ecological environment on play, age and sex differences in children's play, and the social contexts of play (Rubin, 1985). Although this scale was specifically structured for children, the concepts it measures are indicative of behavior, interactions, and affect expressed throughout the life course. With minor adaptations, Rubin's POS provides a structured scale capable of assessing the crucial elements of IGP involving adults with dementia (Appendix A).

The POS captures three broad social categories of behavior: *solitary* behavior is characterized by working independently and paying no attention to others in the room, *parallel* behavior is defined by participating in the same activity as the group but working independently, and *group* behavior is distinguished by collaborative work among group members (Rubin, 1985). Rubin proposed that group behavior supercedes parallel and solitary behaviors as indicators of cognitive and social maturity. This aspect of Rubin's scale is not applicable to research involving older adults with dementia since the cognitive thought processes associated with disease are not related to ontogenetic process of child development, however, coding these behaviors provides valuable insight into the nature of the older adults' activities.

An *intergenerational observation scale* (IOS) can be developed for elders with dementia using the behavioral aspects of the POS. This scale also includes nested subcategories of three major behavioral classifications: *functional*, *exploratory*, *constructive*, and *dramatic*. These subcategories offer additional information on the nature of the behaviors exhibited by the older adults; however, analysis of these categories will not be incorporated in the present study. The social domains captured by the IOS can be evaluated without emphasis on age and development. The social participation categories are based on research conducted by Parten, and include the following social behaviors: *unoccupied*, *solitary*, *onlooker*, *parallel*, *group*, *aggression*, *conversation*, and *transition* (Rubin, 1985). In the IOS, these social categories are not utilized in regards to development but can be employed to describe the types of social engagement exhibited by elders with dementia during intergenerational sessions (Appendix A). For example, dementia programming scholars cite lack of activity and occupation as a major shortcoming of dementia care facilities (Buettner, 1999; Voelkl et al., 1995) and the *unoccupied* category included in the IOS captures the occurrence of this common problem.

In addition to capturing types of behaviors and social engagement, the IOS describes elders' affect using a structured scale. Affect is measured on a Likert scale, with 5 being the most positive and

1 being the most negative. Affect is an imperative concept to capture in an observational assessment of elders with dementia because this population will often express their preferences and dislikes through emotional expression, particularly once cognitive and verbal communicative capacity deteriorates (Lawton, Van Haitsma, Perkinson, & Ruckdeschel, 2000). The IOS also captures the expressed affect of the children interacting with the elders, thus describing the dyadic experience, which is salient information excluded by other scales.

Summary and Conclusions

IGP constitutes an innovative strategy in the care of older adults with dementia. The potential benefits of IGP include the reduction of social isolation, an increased opportunity for purposeful occupation and mentorship, and the reduction of negative stereotyping. The diagnosis of dementia is often associated with helplessness and the loss of productive societal roles. Effective IGP is an opportunity for individuals with dementia to work towards a common goal with another age group and engage in mutually beneficial social interactions with younger individuals. IGP also serves as a catalyst for greater societal cohesion and the amelioration of modern societal issues.

The field of IGP has received much attention from practitioners and scholars in recent years, yet the overall effectiveness of this intervention strategy has yet to be definitively established. Potential challenges to IGP involving elders with dementia and children include the infantilization of both age groups, lack of clear long-term goals, differences in energy levels, deficiencies in staff training programs, lack of evaluation methodologies, and the complexities of designing developmentally suitable and age appropriate intergenerational activities. Many of these challenges can potentially be overcome with the utilization of theory and the development of rigorous research strategies. At the present time, the IGP literature base is primarily comprised of atheoretical studies, anecdotal conclusions, and descriptions of programs. Innovative theoretical frameworks, standardized instrumentation, strong empirical research, and appropriate evaluation methodologies are needed to fill

this void. Once these elements are in place, more effective intergenerational intervention strategies can be developed and revised in order to promote optimal contact between generations.

Older adulthood and the diagnosis of dementia are salient characteristics that create social distance and perceptual boundaries between elders with dementia and younger individuals. These perceptually dissimilar groups are often psychologically and physically segregated from one another, subsequently limiting their opportunity for social interactions and generational cohesion. Contact theory is a framework traditionally utilized in the study of racial relations and outgroup attitudinal assessment yet, with the utilization of a constructionist perspective, its tenets are applicable to the development of effective intergenerational activities as well. Optimal intergenerational interactions can be obtained by designing and facilitating activities based on the elements of contact theory: common goals, intergroup cooperation, support from authorities, equal group status, and opportunity for friendship.

Utilizing a modern and reflexive lens, IGP scholars can modify existing structured observational scales to create an appropriate means of measuring older adults' responses to intergenerational contact. The IOS captures the behavioral and affective domains associated with intergenerational exchange involving older adults with dementia. This scale provides a structured measure that can potentially assist in filling the empirical void in the IGP knowledgebase.

Research Hypotheses

This study utilized intergroup contact theory to inform the development and facilitation of intergenerational activities between preschool children and adult day program participants. These two groups are traditionally socially distant from one another due to perceptual dissimilarities based on age differences and the presence of cognitive and physical limitations associated with dementia. The theoretically driven intergenerational activities allowed for more effective social exchange between generations and offered the necessary conditions for friendship development between outgroups.

Several hypotheses were presented regarding the adult day program participants' engagement in social behaviors and corresponding expressed affect. The older adults were evaluated during intergenerational activities, as well as during non-intergenerational activities of similar format. The present study attempted to fill a void in the IGP literature by employing contact theory in an innovative manner, conducting observations with a modified structured scale, utilizing control observations, and capturing the older adults' opinions and experiences through interviews.

The hypotheses that guided the study are as follows:

1. The adult day program participants will engage in higher levels of group behavior during contact theory driven intergenerational activities than during traditional non-intergenerational activities.
2. The adult day program participants will exhibit lower levels of unoccupied behavior during contact theory driven intergenerational activities than during traditional non-intergenerational activities.
3. The adult day program participants will exhibit higher levels of affect during contact theory driven intergenerational activities than during traditional non-intergenerational activities.

The literature regarding intergroup contact theory led me to believe that including Allport and Pettigrew's five essential tenets in the development and facilitation of intergenerational activities would promote increased levels of positive social interaction between outgroups. In the circumstance that the intergenerational activities were characterized by higher rates of group behavior than the traditional non-intergenerational activities, I would conclude that the adult day program participants were functionally and socially able to take part in intergenerational exchange and that the intergenerational activities were more interesting and appealing than the traditional recreational activities. In the instance that the adult day program clients engaged in lower levels of unoccupied behavior during the intergenerational activities compared to the traditional activities, I could deduce that the activities involving children, as influenced by contact theory, were more engaging than uni-generational activities. Finally, in a scenario in which the older adults exhibited higher levels of positive affect during the intergenerational sessions as compared to the affect expressed during the traditional activities, it could be suggested that IGP provided the elders with greater opportunity for

enjoyment than the uni-generational activities. Outcomes such as these would provide empirical evidence supporting the beneficial nature of intergenerational contact, as well as lend support to the utilization of contact theory as an effective theoretical framework to guide the development, facilitation, and evaluation of intergenerational activities involving elders with dementia.

Chapter 3

Methods

Participants

The sample of this study consists of ten older adults, five women and five men, diagnosed with Alzheimer's disease or related disorders by their physicians. All sample participants attend Virginia Tech Adult Day Services (ADS) two to five days a week and exhibit differing levels of cognitive and physical impairments related to dementia. The participants included in the study sample are primarily Caucasian, with the exception of one African American gentleman, and all live in a rural environment.

Inclusion in this study was contingent upon the completion of informed consent forms signed by the ADS clients' primary caregivers. Additionally, the ADS clients must have participated in at least two intergenerational activities to be included in the final data analyses. The sample is non-random in nature, but the backgrounds, physical conditions, and cognitive limitations of the eight ADS clients represent the range of characteristics common to most adult day programs. Furthermore, this study is the first to employ these methodologies in an intergenerational context, so a small sample is most appropriate for this initial analysis. The sample members served as their own control group, and the control observations were conducted during traditional non-intergenerational ADS activities that will be led by the program's certified recreational therapist.

Instrumentation

This study incorporated five methods of data collection: (a) an intergenerational observational scale, (b) interviews with the adult day program participants, (c) journal entries compiled by the intergenerational activity facilitators, (d) an interview with the activity director, and (e) demographic information, including cognitive functioning.

Intergenerational observation scale. The primary observational instrument utilized in the study is the IOS (Appendix A), which is based on elements of Rubin's Play Observation Scale (1985). This scale is designed to capture social behaviors associated with intergenerational contact. The social categories include *solitary*, *parallel*, and *group*. Table 1 summarizes these social categories, the behavioral categories nested within them, and examples of what the behaviors might look like in an intergenerational context. The nested behaviors provide useful insight into the nature of the intergenerational activity; however these behaviors, other than "unoccupied," are not the focus of this study and will not be included in the analyses.

In addition to behaviors, the IOS captures the level of affect expressed by the older adults during intergenerational activities. When an elder interacts with a child, the observer also codes the child's affective response to the exchange. Observers captured the participants' affect using a five-point Likert scale and Table 2 provides a description of each of these affective levels.

Table 1

Descriptions and Examples of the Social Behaviors and Nested Behaviors Included in the IOS

Social Behavior	Description and Example
Solitary	To engage in an activity entirely alone: Reading a book while others in the room engage in an intergenerational group game.
Parallel	To engage in an activity beside (but not with) others: Participants plant seeds side by side, but do not collaborate or engage in conversation.
Group	To engage in an activity with others in which there is a shared goal or purpose: Participants work together to fill a large planter with soil while discussing their favorite kinds of flowers.
Nested Behaviors	Description and Example
Functional	To experience sensory stimulation through simple, repetitive movements: Kneading a ball of clay repetitively because of its soft texture.
Constructive	To create or construct something: Stirring batter in order to make a cake.
Dramatic	To act out life situations or bring life to an inanimate object: A participant puts a paper cup on her head and pretends it is a beautiful hat.

Table 1 (Continued)

Nested Behavior	Description and Example
Exploratory	To seek sensory information about an object: Smelling a cooking ingredient to determine what kind of spice it is.
Unoccupied	A complete lack of goal or focus (including self-stimulating behaviors): A participant wanders around the room aimlessly.
Onlooker	To watch or listen to the activities of others: A participant watches others play a game but does not converse with them or take part in the activity.
Transition	Moving to, from, or between activities: A participant walks into another room to join the intergenerational activity.
Facilitator Conversation	Verbally conversing with, or listening to, the activity facilitator (without other behavior): A participant reminisces about her childhood with the facilitator.
Participant Conversation	An IGP participant verbally conversing with, or listening to, another participant (without other behavior): A participant reminisces with another participant.
Aggression	Verbal or physical expression of anger, displeasure, or disapproval: A participant throws craft materials on the floor because she can't understand the directions.

Table 2

Descriptions of Levels of Affect Included in the IOS

Level	Description
5	The participant exhibits extremely positive affect; the person could not be any happier.
4	The participant exhibits positive affect; the person could be happier.
3	The participant exhibits neutral affect; not particularly happy or unhappy.
2	The participant exhibits negative affect; the person could be unhappier.
1	The participant exhibits extremely negative affect; the person could not be unhappier.

Participant interviews. Older adults with dementia have traditionally been viewed as unreliable informants in regards to their opinions and preferences due to their cognitive limitations. However, recent research suggests that elders with dementia can be dependable informants in appropriately structured and conducted interview sessions (Edelstein & Semenchuk, 1996; Feinberg & Whitlatch, 2001). Furthermore, giving adults with dementia the opportunity to express their opinions and preferences supports the personhood of this population of elders (Woods, 1999). Giving a voice to adults with dementia also asserts a strengths perspective; the elders' opinions and suggestions are a valued part of the greater intergenerational program.

With this philosophy in mind, a modified version of the Quality of Life-AD (QOL-AD) (Logsdon, Gibbons, McCurry, & Teri, 2000) was administered to participants after the

intergenerational activities and control activities (Appendix B). The interview questions were designed to capture the participants' perspectives on their own mood, energy level, and self-efficacy, as well as their feelings about the intergenerational activity. The participants were asked to respond to each of the questions, which tap into different aspects of the QOL-AD, with an answer of *excellent*, *good*, *fair*, or *poor*. Content of the interviews was used anecdotally to illustrate the quantitative findings.

Facilitator journaling. The salient role of the intergenerational activity facilitator has been expressed by Kocarnik and Ponzetti (1991). The authors suggested that “as in any personal relationship, children and seniors benefit greatly from someone acting as the ‘host’” (p.104). An effective and inclusive IGP facilitator can assist older adults and children in establishing common bonds, relay information in circumstances of poor hearing or misunderstanding, and resolve negative interactions before they escalate (Gladwell, Jarrott, & Gigliotti, 2002). In order to capture the facilitators' perspectives on the progress of this study, they recorded their experiences in a semi-structured journal format. The facilitators were asked to journal about how they utilized the specific elements of contact theory, as well as record their personal reflections in an individualistic manner. The journal entries were utilized to anecdotally support the quantitative results.

Activity director interview. The adult day program activities director is a certified recreational therapist who develops and leads activities for the adult participants. In order to determine which theory or theories inform her activity development and objectives, a personal interview was conducted. The majority of the questions were open-ended, allowing her to discuss the types of theory she is familiar with, what theoretical perspectives guide her work, and how she operationalizes theoretical concepts.

Demographic information. The adult day program staff provided information on the participants' age, sex, ethnic background, and usual schedule of attendance. The adults' cognitive status was assessed with the Mini-Mental State Examination, or MMSE (Folstein, Folstein, &

McHugh, 1975). The MMSE is a structured interview comprised of questions that gauge elders' orientation to time and place, immediate recall, reading and writing ability, visuoperception, and spatial ability. The examination is a widely utilized tool of cognitive function and requires approximately 10 to 15 minutes to complete. A score of 23 or lower, out of 30 possible points, is considered indicative of cognitive impairment (Edelstein & Semenchuk, 1996).

Procedure

The present study took place over a ten-week period, and the sample members had the opportunity to participate in two intergenerational activities a week, each lasting approximately 30 minutes. Although the adults participated in two intergenerational sessions a week, observations were only conducted during the second IGP session. The ADS clients who took part in this study were divided into two groups: an AM group that met on Tuesday and Wednesday mornings and a PM group that met on Monday and Thursday afternoons. The intergenerational sessions were conducted in a small group setting, consisting of four ADS participants and four preschool age children from two classrooms in the Child Development School (CDS). Members of both age groups were invited to join the intergenerational sessions and participation was on a voluntary basis. The first intergenerational opportunity during the week for both the AM and PM groups was a story session led by a facilitator trained in contact theory and experienced with both populations. The facilitator read a children's story to the group and integrated guided questions designed to foster social interaction and personal disclosure between generations. The goal of the story sessions was to establish a comfortable environment for the older and younger participants to get to know each other; the stories also served as an introduction to the intergenerational activity that took place later in the week. Efforts were made to include the same groupings of children and adults in the AM and PM sessions to encourage familiarity and provide opportunities for frequent interaction and friendship. Observations were not conducted during the story sessions because the nature of this type of exchange is not conducive to the facilitation of group behavior.

The second intergenerational opportunity during the week included a contact theory-driven activity based on the story read earlier in the week. The IGP facilitator developed and implemented activities that promoted positive group behavior and socialization between generations. The facilitator also compiled semi-structured journal entries regarding her experiences during the sessions. A group of researchers familiar with contact theory and the IOS reviewed the intergenerational activity plans to ensure that all of Allport's and Pettigrew's conditions for optimal outgroup contact were included in each activity. Subsequently, this review helped ensure that the activities were developmentally and generationally appropriate for both age groups. The goal of the intergenerational activity sessions was to encourage *interdependence* and *cooperation* between the children and the ADS clients, as well as provide opportunities for meaningful intergenerational relationships. Appendix C offers an example of an intergenerational activity included in the study.

In order to promote maximum comfort and safety for all of the older adults and children involved in the study, specific protocol was established. All of the intergenerational sessions took place in the studio located between the ADS and CDL. This "neutral" location helped alleviate feelings of "invading" the other group's physical space during the intergenerational sessions. Teachers from each of the CDL classrooms accompanied the children to the sessions, while an ADS staff member was also required to be present at each interaction. The teachers and staff members encouraged the children and older adults to participate, provided encouragement and comfort, assisted the facilitator, and aided clients in need of help. Appendix D includes a diagram of the seating arrangement used to encourage interdependence and cooperation between generations.

Undergraduate and graduate research assistants (RAs) conducted the observational component of the study. These observers took part in an extensive training process regarding the IOS and were required to spend ample time observing the ADS participants and practicing with the scale. Each RA was assigned a "target" ADS client whom they observed during the weekly activities. Limiting observations to a target client allowed the RAs to become familiar with the unique characteristics and

abilities of their target older adults. During the training sessions, the RAs discussed how their target clients express different levels of affect to ensure consistency throughout the study. A reliability check was conducted among the RAs, and a 92% rate of agreement was established. The RAs also attended weekly project meetings to discuss questions or concerns that emerged over the course of the study and to take part in ongoing training.

Observations were conducted from the time the facilitator introduced the activity until the children left the intergenerational session. The RAs watched their target client for 30 seconds before beginning to record data in order to become familiar with contextual cues regarding the adult's behaviors. The target client was observed for a full time frame and the next 30 seconds were spent coding the predominant activity and affect. During each 30-second interval, only *one behavior* was coded, except in the occasion of aggression, which was simultaneously recorded with the predominant behavior. When more than one behavior occurred during a time interval, the *longest lasting* behavior was coded. When multiple behaviors in the same time frame were of the same length, the RA used a coding scheme to determine which behavior should be recorded (Appendix E). When ADS clients were involved in interactions with children, the RA recorded the children's names in the appropriate column and recorded the children's affect during the intergenerational exchange.

Affect was recorded for all behaviors using a five-point Likert scale, with five representing exceptionally positive affect and one characterizing extremely low affect. The RAs recorded the affect level associated with the predominant behavior for each 30-second time frame. If different levels of affect occurred for equal amounts of time and were characterized by the same behavior code, the RA recorded the most positive affect demonstrated.

The RAs also conducted personal interviews with their target client at the conclusion of the intergenerational activities. Observers interviewed their target clients in the intergenerational studio whenever possible to provide the older adults with contextual clues about the activity and trigger as much memory about the session as possible. The RAs introduced themselves and invited the older

adults to talk about the activity session. The interviews were strictly voluntary in nature and the RAs informed the participants that they should not feel pressured to answer the questions. The older adults were given the opportunity to spontaneously respond to the questions in their own words. Elders who were unable to respond in this manner were offered structured prompts to the questions. A drawing of faces that illustrate the response options of *poor*, *fair*, *good*, or *excellent* was also provided. With this tool, the adults could point to a face on the paper that corresponded to their affect when they were unable to verbalize their feelings.

The final responsibility of the RAs included the completion of control observations and interviews for their target clients. The control observations consisted of traditionally scheduled ADS activities led by the facility's activities director. The kinds of activities included in the regular ADS activity calendar were crafts, horticulture therapy, music therapy, cooking, and games. These traditional activities were similar to the format of the intergenerational activities, but did not incorporate children. The RAs coded their target clients' behavioral and affective responses with the IOS and conducted interviews after the control observations to assess the participants' mood, energy level, and feelings of self-efficacy in relation to the activity. Control observations and interviews took place once at the beginning of the study and again at the conclusion of the study.

Analysis

The purpose of the study was to assess the ADS clients' social behaviors and levels of affect during the contact theory-driven intergenerational activities in comparison to their behaviors and affect during traditional ADS activities. Before conducting statistical analyses, calculations were performed using the observational data. The average level of affect and the percentage of each type of behavior demonstrated during the treatment and control observations were computed. For example, if a participant exhibited group behavior in 10 of the 20 total time frames, 10 would be divided by 20 and the resulting figure would be reported as 50% of the total intergenerational time spent was

characterized as group behavior. Calculations were checked by another research team member for accuracy before the data was entered into SPSS.

This study included three dependent variables related to behavioral and affective outcomes: percent of time engaged in group behavior, percent of time engaged in unoccupied behavior, and mean affect. The independent variable represented the observational setting, either the treatment condition of IGP, or the control condition of traditional ADS programming. Descriptive statistics were performed to provide an overview of the sample characteristics, and frequencies of the dependent variables were reviewed to consider whether a normal distribution was present. Due to the slightly skewed and kurtotic nature of the distribution, log and square root transformations were conducted; however, neither of the transformations resulted in a more normal distribution of the data. Paired sample t-tests were conducted to test for significant differences in the means of the dependent variables during the intergenerational conditions as compared to the control conditions. A total of three t-test analyses were conducted to investigate the previously mentioned hypotheses. For analyses that revealed significance, the means were checked to determine the direction of the differences and the hypotheses were addressed accordingly. Effect size was calculated to determine the opportunity for statistical significance. Finally, additional analyses were conducted to investigate the relationships between MMSE score and number of IGP sessions attended and the dependent variables.

Chapter 4

Results

The current study addressed research hypotheses regarding IGP involving elders diagnosed with dementia. The findings will be presented in four sections; the first will provide a description of the characteristics of the sample, including demographic information and cognitive status, and the remaining sections will address each of the three research hypotheses.

Sample Characteristics

The sample was comprised of 10 older adults, all diagnosed with dementia by a physician, who regularly attended an adult day program. The older adults ranged in age from 74 to 92 with a mean age of 81 ($SD = 5.21$). The sample included one African American individual and nine Caucasian individuals. Males and females were equally represented with each comprising 50% of the total sample.

The Mini-Mental State Examination, or MMSE, (Folstein et al., 1975) was administered to each of the sample members in order to determine their level of cognitive functioning. The sample members' scores ranged from 6, indicating severe cognitive impairment, to 20, indicating mild cognitive impairment. The mean MMSE score of the sample was 15.10 ($SD = 4.63$), which suggests a moderate level of dementia.

Participation in at least two intergenerational activities was necessary to be included in the final sample. The mean number of IGP sessions attended by the sample was 3.6 ($SD = 1.43$) with a range of 2 to 7 sessions. Each of the 10 sample members was observed during two control activities. The program's activities director, who is a certified recreational therapist, facilitated all control activities. These control activities are representative of traditional dementia-care programming and included activities such as crafts, cooking, music therapy, and horticulture. Control observations were not

conducted during non-recreational activities such as meals and scheduled rest periods or during activities that do not encourage group behavior such as exercise.

Research Hypothesis 1

I hypothesized that the adult day program participants would engage in higher levels of group behavior during intergenerational activities than during traditional non-intergenerational activities. The results of the paired-sample t-test support this hypothesis; the mean percentage of time engaged in group behavior during IGP ($M = 34.36$, $SD = 11.78$) was significantly greater than the mean percentage of time engaged in group behavior during control activities ($M = 11.75$, $SD = 12.39$), $t(9) = 8.38$, $p < .01$ (two-tailed). Table 3 presents the minimum, maximum, and mean percentages of time the participants exhibited group social behaviors during the treatment and control conditions.

Table 3

Participants' Responses to Treatment and Control Conditions

	IGP			Control		
	Minimum	Maximum	Mean (SD)	Minimum	Maximum	Mean (SD)
% Group Behavior	16.00	54.00	34.36 (11.78)	.00	42.50	11.75 (12.39)
% Unoccupied Behavior	.00	7.75	2.49 (3.08)	.00	17.50	9.80 (6.39)
Affect	3.04	3.33	3.14 (0.09)	2.50	3.10	2.93 (0.18)

Research Hypothesis 2

My second hypothesis stated that the adult day program participants would exhibit lower levels of unoccupied behavior during IGP activities than during traditional non-intergenerational activities. Paired-sample t-test analysis supports this hypothesis; the mean percentage of time engaged in unoccupied behavior during IGP ($M = 2.49$, $SD = 3.09$) was significantly less than the mean percentage of time engaged in unoccupied behavior during control activities ($M = 9.75$, $SD = 6.39$), $t(9) = 3.20$, $p < .01$ (two-tailed). Refer to Table 3 for the minimum, maximum, and mean percentages of time the older adults demonstrated unoccupied behaviors during IGP and traditional adult day program activities.

Research Hypothesis 3

Finally, I hypothesized that the adult day program participants would exhibit higher levels of affect during intergenerational activities than during traditional control activities. This hypothesis was confirmed through a paired-sample t-test; the mean level of affect during IGP ($M = 3.14$, $SD = 0.09$) was significantly more positive than the mean level of affect during traditional adult day program activities ($M = 2.93$, $SD = 0.18$), $t(9) = 3.30$, $p = .009$ (two-tailed). Table 3 presents the minimum, maximum, and mean levels of affect displayed by the sample members during the treatment and control activities.

Additional Analyses

A limited number of analyses were conducted to test the hypotheses. Because of the small sample size, more analyses could have reduced the degrees of freedom. T-tests were appropriate means of analysis in the study, yet I could not control for confounding variables such as level of cognitive functioning or frequency of participation in the intergenerational activities. Pearson's correlations were conducted to determine the relationship between cognitive status and the dependent variables. No correlation was found between MMSE score and the participants' affect or social

behavior. Correlations were also conducted to see if there was a connection between number of IGP sessions attended and the dependent variables. Again, no correlation emerged between frequency of treatment sessions and social behavior or affect.

Chapter 5

Discussion

The current state of IGP literature regarding adults with dementia is limited; studies are not grounded in theory, findings are often based on anecdotal information, and observational assessments do not capture the elders' full intergenerational experience. Due to these theoretical and methodological deficiencies, scholars and practitioners do not have a comprehensive view of how IGP affects adults with dementia nor do they know if such activities are even appropriate for this population of elders. The present study contributes to the IGP knowledgebase by offering theoretically grounded IGP activities and structured observational assessments of the adults' social behaviors and affect during the targeted conditions.

The study design directly relates to the theory-research-evaluation-practice feedback loop articulated by Lavee and Dollahite (1991). The intergenerational activities are developed and facilitated based on the tenets of intergroup contact theory (Pettigrew, 1998). The observational scale utilized in the study assesses the social behaviors and affect exhibited during the intergenerational exchanges. The findings of the current study can influence IGP in dementia-care settings by offering practitioners a theoretically driven strategy for promoting group behaviors, limiting unoccupied behaviors, and facilitating positive affect during intergenerational activities. The study also utilizes the theoretical perspective of personhood in dementia (Kitwood, 1997) and the occupational therapy framework of meaningful occupation (Bowlby Sifton, 2000) to convey the value of IGP to administrators and staff of respite and long-term care programs. By this, dementia-care providers who acknowledge the importance of personhood and meaning in the lives of their clients will view IGP as a means of reaching such crucial objectives. Dementia-care facilities can implement their own methods of evaluation to assess the practical applications of IGP activity development and facilitation; such evaluation outcomes assist scholars in determining what IGP methods need to be refined and what

avenues of research should be pursued. Although the relationship between scholarly research and practical application is sometimes obscured, their connection is the foundation of Lavee and Dollahite's feedback loop.

The results of the present study indicate that group behavior is significantly greater in effectively planned and facilitated intergenerational activities than in traditional dementia-care programming. Group behavior entails actions or conversation between individuals who share a common purpose or goal (Rubin, 1985). Older adults with dementia commonly disengage from social and meaningful interactions as their cognitive and physical abilities become more limited, yet social engagement is generally linked to positive self-concept and well-being in older adulthood (Kocarnik & Ponzetti, 1991; Teri & Logsdon, 1991; Zgola, 1999). Subsequently, it is crucial for dementia-care providers offer their clients opportunities to engage in social interactions. The findings of the current study suggest that the presence of children can potentially encourage adults with dementia to engage in more group behavior than traditional non-intergenerational activities. Interviews with the older adults also capture the significance of the social interactions associated with IGP. As one participant stated, "I like talking with children because you never know what they might say; it keeps me on my toes."

Participation in purposeful and meaningful activities, or occupations, is also a necessary aspect of well-being in older adulthood (Bowlby Sifton, 2000). Meaning continues to be important for elders with dementia who have lost most of their social and familial roles due to cognitive decline. Adults with dementia who are not presented with appropriate and meaningful activities spend a great deal of time unoccupied (Teri & Logsdon, 1991; Zgola, 1999). Study results indicate that the adult day program participants spent a significantly lower percentage of time unoccupied in the IGP activities than during traditional dementia-care programming. This finding suggests that the adults found the IGP activities meaningful, thus decreasing instances of unoccupied behavior. Scholars have found a correlation between unoccupied time and depression and problematic behaviors in adults with dementia (Buettner et al., 1996; Logsdon & Teri, 1997), so the identification of activities that reduce

unoccupied behavior is critical. Qualitative data collected through personal interviews with the older adults supports the meaningful nature of IGP. One older gentleman stated, “It is our job as adults to nurture youngsters,” while another adult day program participant concluded that, “Being with the children makes me feel alive.” Effectively planned and facilitated IGP also provides an opportunity for reminiscence. As one participant stated, “Being with the children reminds me of raising my own little ones...” This aspect of IGP directly relates to Erikson’s (1997) concept of generativity by offering the adults an opportunity to connect their past experiences of childrearing to their current social interactions with another generation of children.

Study results also indicate that the adult day program participants exhibit more positive affect during IGP than during traditional recreational activities. This finding is particularly important because adults with dementia will often express their preferences and dislikes through emotional expression as their verbal communicative skills decrease (Lawton et al., 2000). The positive affect displayed during the IGP sessions indicates that the adults enjoy their time with the children. One of the facilitator’s journal entries reads, “I knew the activity was going well by the smiles on the participants’ faces.”

Furthermore, additional analyses determined that there is no correlation between MMSE score and social behavior or affect. This finding suggests that adults with dementia are able to engage in social intergenerational exchanges and exhibit positive affect during IGP regardless of level of cognitive impairment. This is salient information for dementia-care practitioners who are concerned about implementing IGP because of their clients’ level of cognitive functioning.

Strengths and Limitations of the Study

A primary limitation to the current study is that the significant differences found between IGP and control conditions regarding group behavior, unoccupied behavior, and affect cannot be solely attributed to the presence of children. The intergenerational activities were developed and facilitated based on the tenets of intergroup contact theory, while the control activities were not specifically

guided by this theoretical perspective. In other words, the IGP and control activities may not have been comparable in objectives or the approach used to achieve them.

In an effort to acknowledge the differences in theory and objectives between the treatment and control conditions, the adult day program's activities director was interviewed to determine what theoretical perspectives guided the development and facilitation of the control activities. The activities director stated that, as a certified recreational therapist, her activities are based on a holistic perspective that encourages physical activity, socialization, and cognitive stimulation. She also stated that her activities are constructed with specific goals in mind and that she "tries to include reminiscence and conversation as much as possible." Furthermore, the mission statement of the adult day program states that socialization is a primary goal of the facility. This interview revealed parallels in the theoretical foundations of the treatment and control activities. Although the traditional recreational programming was not specifically guided by intergroup contact theory, the activities were developed with reminiscence and socialization in mind. The theory and objectives utilized in the traditional recreational activities would encourage group behaviors, but a primary aspect of the contact theory-driven IGP activities was the emphasis on interdependence between generations. For example, the IGP sessions included projects in which intergenerational pairs of individuals had to rely on cooperation and reciprocity to complete the tasks. Conversely, the control sessions generally involved activities in which each of the adults had their own project that was completed on an individual basis. The traditional activities offered opportunity for group behavior, including socialization, but the variations in activity set up and design may have contributed to the observed differences in social participation.

The methodological issue of differing objectives between control and treatment conditions could have been avoided if the traditional recreational activities had been constructed and facilitated based on the tenets of intergroup contact theory. However, scheduling and resource constraints made this impossible in the current study. Similarly, the small sample size, another shortcoming of the study, was the result of resource limitations. In order to allow for Pettigrew's (1998) additional

element of contact theory, opportunity for friendship, it was important for the adults to participate in multiple IGP sessions to build relationships with the children. The present study included all program participants with a dementia diagnosis who attended the facility on the days the IGP activities were conducted. Limited funding and geographical proximity to other adult day programs excluded the possibility of increasing the sample size by including participants from other facilities or using another program as a control site. Future research should build upon the present study by including a larger sample of older adults, thus enhancing the generalizability of future findings.

A third limitation to the study was the inability to control for the differences among the activity facilitators. The three facilitators included in the project, the two for the IGP sessions and the activities director who led the control activities, each have their own individual styles, mannerisms, intonation, facial expressions, and personality characteristics. The current study did not collect data that would allow for a statistical analysis of the facilitators' unique characteristics on the participants' social behaviors and affect. The prominent role of the IGP facilitator has been emphasized in the intergenerational literature (Kocarnik & Ponzetti, 1991), and in order to promote positive IGP in practice settings, staff members must be trained how to develop and implement effective intergenerational activities, as well as learn how to overcome challenging situations. Future studies should systematically investigate the various aspects of the role of facilitator in order to establish effective guidelines for IGP facilitation. However, individual differences in facilitation style will continue to persist and may influence the participants' experiences in IGP.

The present study attempted to fill some of the current gaps in the IGP literature involving elders with dementia, subsequently eliciting elements upon which to base future research. The intergenerational activities were developed and facilitated according to the five tenets of intergroup contact theory: authority support, intergroup cooperation, common goals, equal group status, and opportunity for friendship (Pettigrew, 1998). Intergenerational activities are often based on a "cute" or "fun" idea instead of a theoretical perspective. The utilization of an observational scale that assessed

both social behavior and affect is another positive aspect of this study. Although the validity of the scale has not been assessed with this population, steps were implemented to improve the internal validity of the study. An inter-rater reliability rate of 92% was established among the eight observers, which is higher than the usual acceptability rate of 85% (Fleiss, 1981). The study design also incorporated qualitative means of data collection to support the quantitative findings established by the IOS. Attempting to validate this structured scale would be the next appropriate step in the development of IGP research involving elders with dementia.

As part of the scale's protocol, each older adult participant was individually observed for the entire length of the intergenerational session. Other IGP studies using observational assessments have utilized a sequential methodology, called momentary time-sampling, in which each sample member was observed individually for a three or five minute period, then the researcher moved on to observe the next sample member in the rotation (Newman & Ward, 1992; Short-DeGraff & Diamond, 1996). These studies only captured brief segments of the older adults' IGP experiences, while the present study utilized a continuous time-sampling procedure that provided a comprehensive assessment of the participants' social behaviors and affect. The RAs would observe their adult day program participants for the entire length of the IGP activity, which usually lasted for 30 to 40 minutes. Furthermore, RAs were not required to watch multiple participants at a time, which allowed the observers to devote their full attention to their "target" adults. Although identified limitations existed in the current study, it subsequently contributed to the ongoing theoretical and methodological development of IGP research involving elders with dementia.

Implications for Future Research

As the older adult population increases in size, so will the need for quality respite programs and long-term care facilities. Recreational activities that promote the well-being and competence of elders will be a primary asset to such dementia-care programs. Therapeutic and recreational activities such as music therapy, horticulture therapy, pet visits, and reminiscence have become increasingly prevalent in

dementia-care programming. The findings of the present study indicate that effectively planned and facilitated IGP potentially benefit adults with dementia by encouraging group behavior, decreasing instances of unoccupied behavior, and promoting positive affect. Dementia-care practitioners and administrators are responsible for providing their clients with meaningful opportunities for social interaction and IGP is an appropriate tool in reaching this goal.

Scholars have emphasized the association between meaningful occupation and decreased problem behaviors in adults with dementia (Buettner et al., 1999). Future research should determine the relationship between IGP and common challenging behaviors associated with dementia such as self-stimulation, repetitive questions or actions, and anxiety. Throughout the course of the current study, adult day program staff members anecdotally commented on how certain older adults exhibited anxiety and restlessness less frequently in the presence of the children as compared to when the children were absent. The reduction of such behaviors would enhance the well-being of elders with dementia, as well as relieve some of the stresses associated with caregiving for this population of adults.

There are many potential avenues for research regarding IGP in dementia-care settings. With interdisciplinary collaboration, physiological measurements, such as blood pressure readings, could be collected to determine how IGP influences elders' physical well-being. Intergenerational researchers could also investigate family members' and staff members' perceptions of contact between generations and assess the process of cross-training the staff of child and adult day programs. In the near future, gerontologists and child development scholars should collaborate to institute a longitudinal assessment of children and elders involved in IGP. This undertaking would require a significant commitment of resources and expertise, but long-term assessments of IGP outcomes are needed to influence larger-scale implementation of effective programs. Finally, intergenerational scholars must keep the reciprocal nature of Lavee and Dollahite's (1998) feedback loop in mind and form partnerships with practitioners to encourage participatory research. Scholars must continually strive to translate the

findings of empirical research into practical strategies for success in order to influence the development of IGP in “real world” facilities.

Conclusion

The purpose of this study was to assist in filling the voids in the current IGP knowledgebase. The theoretically driven IGP activities and the use of a structured observational scale are a start to the theory-research-evaluation-practice feedback loop presented by Lavee and Dollahite (1991). The findings of this study may be used to influence IGP practice, which will result in evaluation, which will affect future IGP theory, which will inform future IGP research, and so the cyclical process continues. However, the feedback loop is contingent upon the cohesion of scholars and practitioners. The relationship between scholarly research and practical application can sometimes be obscured, but it is the interplay of these elements that can ultimately assist in alleviating greater societal issues such as ageism and generational segregation.

The results of the current study indicate that appropriately planned and facilitated intergenerational activities can potentially encourage group behavior, reduce unoccupied behavior, and promote positive affect in adult day program participants. These findings are particularly important considering the salient role of meaningful occupation in the lives of elders with dementia. Participating in purposeful and meaningful activities, such as IGP, can potentially enhance elders' well-being and self-efficacy, as well as reduce challenging behaviors

associated with dementia. The beneficial nature of IGP has been anecdotally proclaimed by dementia-care staff and family members in the intergenerational literature, and the results of the present study support the positive implications of effectively planned and facilitated contact between generations.

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APPENDIX A: INTERGENERATIONAL OBSERVATION SCALE

APPENDIX B: OLDER ADULT INTERVIEW

Good morning, Mr./Mrs. _____. My name is _____. I would like to ask you a few questions about the activity with the children so we can make it better for next time. Do you have a moment to talk with me? You do not have to answer any questions that you do not feel like answering. I am going to ask you some questions about how you feel. I would like for you to tell me how you feel by using one of these words: *poor*, *fair*, *good*, or *excellent*. (Show the adult the paper with the four words written in large print.)

1. Which word best describes your mood right now? (Prompt: Are you in good spirits today or do you feel down?)
2. How would you describe your energy level right now? (Prompt: Are you full of energy or are you feeling run down?)
3. How would you describe the time you spent with the children today? (Prompt: Did you enjoy the children or would you rather do something else?)
4. How would you describe today's activity? (Prompt: Did you find it today's activity fun or was it not fun?)
5. How would you describe your ability to help the children with today's activity? (Prompt: Were you able to help them or did you find it difficult to help them?)
6. How would you describe the children's behavior during today's activity? (Prompt: Were the children well behaved or were they poorly behaved?)

Thank you for answering my questions. Do you have anything else you want to tell me about today's activity with the children?

APPENDIX C: EXAMPLE OF AN IGP ACTIVITY

Title:
Terrarium

Date:

Previous Literature Selection:

Rainbow Fish by Marcus Pfister

Goal:

For the participants in Adult Day Services and the preschool children to work collaboratively and interdependently with one another toward a similar goal

Objectives:

- To build relationships between all participants involved, including older adults and young children
- To enhance or maintain motor skills of all participants
- To encourage conversation and socialization among participants
- To give adults opportunities for reminiscence
- To provide opportunities for problem solving and learning among two different age groups

Materials Needed (per pair):

Sand
Soil
Aquarium
spoons for scooping
plastic tubs for sand and soil
plant cuttings
glitter

Method:

Have children and adults mix the materials in the aquarium (sand in first, soil in next, then place cuttings in the soil). Encourage the participants to help each other (example: an adult holds the bag of soil while the child scoops it into the aquarium).

Special Considerations:

- Remind participants that the materials are not for eating

Key Questions:

What does this remind you of?

Have you ever seen a really beautiful place?

Who has ever worked in a garden?

What do plants need to grow? (water & sun)

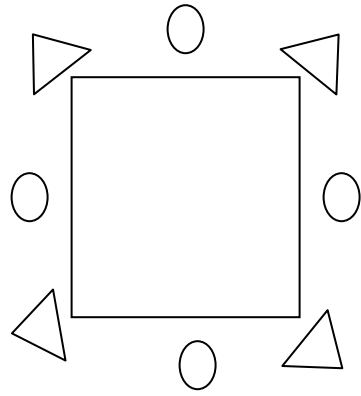
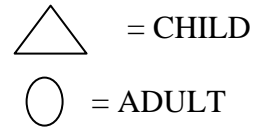
What should we do with our plants once they get bigger? (transplant them to pots)

Has anyone ever lived on a farm?

What kinds of chores might need to be done on a farm?

What kinds of crops might grow on a farm?

APPENDIX D: DIAGRAM OF IGP SEATING ARRANGEMENT



APPENDIX E: SOCIAL BEHAVIOR CODING PROTOCOL

1. Group behavior supercedes all other behaviors.

group drama, group construction, group exploration, & group functional codes all supercede parallel, solitary, onlooker, unoccupied, and transitional behaviors

If you observe more than one group behavior that are equal in duration during a 30 second period, code the behavior that occurred last in the 30-second period.

2. Conversation

3. Parallel

parallel drama, parallel construction, parallel exploration, & parallel functional supercede all solitary, onlooker, unoccupied, and transitional behaviors

4. Solitary

solitary drama, solitary construction, solitary exploration, solitary functional supercede

5. Onlooker

6. Unoccupied

7. Transitional

Aggression is not included in the hierarchy because it is coded every time the behavior occurs. If aggression lasts *longer* than any other behavior in a 30-second interval, then *only* aggression is coded. However, if it lasts *less* than another behavior, *both* aggression and the other behavior are coded.

CURRICULUM VITAE

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Education

- 2001- Present:** Virginia Polytechnic Institute and State University
 Completed 32 credit hours towards M.S. in Human Development
 Specializing in Adult Development and Aging
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- 2002- Present:** University of Pittsburgh School of Social Work- Generations Together
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- 1995- 1998:** James Madison University
 B.S. in Speech Communications and Psychology
 Minor in Family Studies
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Professional Experience

- 2000-Present:** Retail Manager and Human Resources Trainer for Victoria's Secret Inc.
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- 2001- Present:** Graduate Research Assistant and Teaching Assistant
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- 1998-2001:** Patient Advocate- Assisted clients in applying for Medicaid,
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- 1996-1998:** Mediation Coordinator
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Gerontology Society of America, Southern Gerontological Society, Generations United,