

## Exploring the Views of Care Staff and of the Members of a Local Open Care Centre About Quality of Life (QoL) and Active Healthy Ageing

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### ABSTRACT

The promotion of healthy and active ageing is nowadays a global challenge. This project explored several QoL domains of men and women over 60 yrs old, residents of Southern Attica, users of the Local Open Care Centre (LOCC) for older adults. It examined as well, the views of care staff about what are the wider determinants that affect QoL of older adults. Main objective of the study was to investigate the impact of the LOCC activities to the users' well-being, as well as, to explore several life domains, such as, family and social relations, living conditions, finance, health status and leisure and their level of satisfaction from these domains. Results indicated that the views of the professionals and those of the LOCC users were compatible, in terms of life domains which have a positive impact to older people's well-being. This commentary is part of a bigger project which aims at examining the ways of responding to local citizens' complex needs, as they get older, so that they can enjoy a longer and healthier life.

**Keywords:** Active healthy ageing; Quality of life; Older adults; Community care

### INTRODUCTION

The fact that the population is ageing poses several demands in terms of health care services delivery. In Greece the proportion of older people is going to reach the 24% at 2030 and the 31% the 2060 [1]. Whilst, this demographic change is a success in terms of life expectancy it also poses high demands to health care services in terms of preventing this growing sector of the population becoming unwell and treating those living with chronic and age-related conditions [2]. Certain problems in the old age reflect also existed notions and myths surrounding the aging process. This short paper argues that the "voice" of older adults should be heard and taken into account by policy makers and providers.

The philosophy of community care policies in European countries and lately in Greece has been based upon some key principles such as, providing alternative structures for health and social care, and preventing long term health problems and social isolation. The new concept gave emphasis on developing services that might improve the quality of people's life and the notion of

Quality of Life (QoL) has been used to justify a number of health and social care practices worldwide and lately in Greece. The social/objective QoL indicators include a vast array of activities, life events and characteristics pertaining to individuals and do not 'reflect an individuals' description of his own life'. Among these domains are demographic variables, such as income, education level, employment, living conditions, community participation, etc. Subjective quality of life indicators (SubQoL) refer to the psychological approach and to the level of satisfaction from several life domains [3].

### AIMS AND OBJECTIVES OF THE STUDY

The specific objectives of the study were:

- i) To examine objective and subjective QoL indices; as well as how these interrelate with general well-being.
- ii) Participants (care staff and LOCC members) were also encouraged to express their views about:  
what active healthy ageing means for them

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which life domains are improved by being a LOCC member

iii) Capacities that care staff who work with older adults should have to encourage interaction with LOCC members

## METHODS

The study employed a mixed method, a structured interview based on two international QoL instruments [4,5] in order to examine objective and subjective QoL indices, as well as open questions which allowed participants to express their views on healthy and active ageing issues. Moreover, views of older adults about their QoL were explored *via* open-ended questions. The sample of the study consisted of 100 adults residents in the community. According to the main sampling criteria, participants should be, a) over 60 years old, b) men and women, c) members of LOCC at least the past 12 months, e) with no serious mental or physical handicap.

In order to examine care staff views, 6 semi-structured interviews were conducted with permanent staff members.

All quantitative data was analyzed *via* SPSS version 20. Descriptive statistics were used to examine objective and subjective QoL outcomes. The participants' Subjective QoL was rated on a 5-point Likert scale (from 1-mostly dissatisfied to 5-mostly satisfied) [6]. Qualitative material was thematically categorized, and key thematic categories were derived [7].

The study was designed and carried out that fulfilled the usual ethical issues, that is to say, informed consent, anonymity, confidentiality and avoiding harm. The purpose and the utility of the study were made clear in an informed consent letter which all potential participants were invited to read and sign [8].

## RESULTS

Quantitative outcomes showed that the vast majority of LOCC members lived in their owned house, and with members of family. Living alone was more common amongst female participants. In particular, half of women between 71 and 80 yrs were widowed and lived alone. With regard to length of residence, 78% lived in the same house for more than 10 yrs and 62% reported satisfied or quite satisfied from their living conditions. Level of satisfaction from finance was the lowest among other life domains.

More than half of the sample, both men and women had outdoor activities, while several said that their main daily activity was to go to the (LOCC) every day. They were asked about their participation in groups of activities over the previous 12 months, such as, chorus, sports, religious groups, etc. Most of respondents were members in local groups organized by the LOCC (sewing/ drawing, chorus, dancing lesson, excursions). With regard to indoor activities, mainly women, were occupied with their grandchildren, with gardening, reading, watching TV or listening to radio and household keeping. In order to look at how they get along with neighbours they were asked whether they exchange greetings with other residents in their neighbourhood. The vast majority reported that they had daily contact with their neighbours. As a result, there are stable relationships in the community of residence, and this can be

linked with the fact that most of the participants lived in the same area for over 10 years.

Older adults/participants in the study were also asked how they felt in general about their lives and what a "good life" means for them. Half of the sample reported that they were moderately satisfied or satisfied while 1/3 reported mixed feelings.

*Via* open ended questions they were also encouraged to mention the important domains that they would like to improve in order to feel better. They referred to the improvement of their financial situation and to the well-being of their children and grand children. Good physical and mental health and access to public health care was another important issue linked with respondents' general well-being. Both male and female participants referred also to good relations with family and partners. Participants' responses elicited that as members of the LOCC, they had the opportunity to create and maintain social relations and prevent social exclusion.

Finally, members' comments about what are the characteristics that care staff should have, in order to respond effectively to their needs, indicated that among others, empathy and active listening hold a prominent role, and the capacity to provide psychological support, is more important than scientific qualifications.

With regard to care staff views, about what constitutes a good quality of life for older adults, main issues that occurred were: a) mental and physical health, b) social and intimate relationships, c) social participation, d) good living conditions, and e) adequate financial situation. The impact of LOCC to the well-being of older people is important in terms of retaining functionality and helping them to manage their free time. Moreover, they stated the importance of utilizing a combination of communication skills and techniques, such as active listening, empathy in order to encourage interaction with LOCC members, and they commented that professional expertise should coexist with the capacity to provide emotional support.

## DISCUSSION

Participants' representations of the LOCC were quite positive. In particular, results drawn from the individuals' responses indicated that the relationships domain was a key domain in their lives and this is compatible with findings drawn from international studies according to which, QoL increases with social integration [9]. Results of the study also indicated that older family members are a source of support for adult children, and they also provide care for grandchildren. In Greece family plays an important role for its' vulnerable members, however, patterns of care provision for other family members are shown in similar international studies [10]. Studies across Europe have shown the extent and variety of care from such caregivers but also their need for support for them to continue in this essential task without harming their own lives and health [11].

Both staff and LOCC members, noted the importance of a safe environment for active ageing, and explained how a cleaner environment, better transportation, road safety, which are social determinants of health linked to urban and city setting can be an important factor for well-being [12].

Staff comments, with regard to important domains for a good QoL of the elderly, were compatible with those of the LOCC members. According to both groups health (mental and physical), as well as, access to the health care system play the most important role in well-being of the elderly.

Both groups recognized the importance of social contacts and sense of belonging *via* participation in the LOCC daily activities, as a main element for active ageing and QoL improvement. The need for local community centres, either for older people or in conjunction with similar programmes for other ages, to provide a suitable environment for a wide variety of social activities has been emphasized in the recent literature [13].

## CONCLUSION

Perceptions about what it means to grow older must change. The promotion of active healthy ageing is a global challenge, services targeted to older adults is one of the key debates in the so called Western societies. The fact that life expectancy is increasing globally and in Greece, means that we need to find ways to improve the quality of older people's lives, and how they can maintain their social, cultural and economic contribution without age-discriminating restrictions. Politicians at a central and a local level should focus beyond health and social care to other social determinants that can affect the well-being of older adults.

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