The Life of a Female Nursing Home Resident:
The Role of Recreation and Leisure Activities

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A Day in the Life of a Female Nursing Home Resident:
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Abstract

A participatory, exploratory case study of four women living in a long-term care facility was conducted to gain a better understanding of the role of leisure and recreation in the lives of female residents residing in a long-term care facility. The variables of participation were: time of day, leadership of the activity, number of people participating with the subject, location of the activity, week day versus weekend day activity, and self-rated satisfaction with the activity. In addition, subjects were asked to rank the importance of each activity in their daily lives. Findings were that residents were more active in the mornings when they were able to create their own activities and do those activities by themselves. This study also found that if the activities were performed inside the facility, and done on weekdays the residents were more likely to rate their satisfaction level as extremely or somewhat satisfied.
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Appendix
CHAPTER 1

Introduction

According to the U.S. Census Bureau (Ortman, Velkoff & Hogan, 2014), beginning in 2012 and continuing until 2050 there will be a significant increase in the number of people ages 65 and older, from 43.1 million in 2012 to 83.7 million in 2050. In 2012, 56.4% of the 65 and older population were women. In contrast, in 2050, 55.1% of the elderly population will be women. This decline has been attributed to the variance in cohort numbers following the Baby Boomers (Ortman et al., 2014). Women outlive men by approximately five years and represent 70% of the long-term care population (Bittinger, 2011). Learning about the role of recreation and leisure activities for institutionalized elderly women to offer therapeutic recreation professionals the opportunity to evaluate their current activity offerings, to make adjustments to better meet the female residents’ needs and ultimately improve the quality of life for those they serve.

Statement of the Problem

The main research question posed was, “What does a day look like for an elderly woman living in a long-term care facility.” The underlying questions included:

1) Is there a difference in leisure and recreation activity participation on a weekday versus a weekend day?

2) Which settings are favored for leisure and recreation participation?

3) What time of day is favored for leisure and recreation participation?

4) What is the social structure favored for leisure and recreation participation?
5) Which leisure and recreation activities were rated as the most satisfying?
6) Is there a difference in satisfaction between leisure and recreation activities that were led by activity professionals versus those that were not?
7) Is there a difference between leisure and recreation activity satisfaction on a weekday versus a weekend day?
8) Which activities were ranked highest in importance on weekdays?
9) Which activities were ranked highest in importance on weekend days?
10) What are the implications of these findings for professionals working in leisure and recreation areas in long-term care settings?

The Purpose of the Study

The purpose of this exploratory, participatory case study was to investigate the role of leisure and recreation activities in the daily lives of elderly women living in a long-term care facility. Understanding residents’ views of the various activities and their satisfaction levels offers therapeutic recreation professionals opportunities to evaluate the leisure and recreation programs they offer, make adjustments where warranted and improve the services provided to meet the quality of life needs of their residents.

Need for the Study

The Family Caregiver Alliance (2005) reported that the risk of nursing home placement increases with age: 31% for those between age 65-70 with a rise to 61% for those ages 85 and older. The fastest growing segment of the aging population in the United States has been the oldest-old population or those persons age 85 and older (Ortman et al., 2014). Often with advanced age comes a greater possibility of developing
chronic illnesses or experiencing traumas that limit a person’s ability to address their daily needs. This increases the likelihood that they will require skilled care in institutions like long-term care facilities. With the aging of the 77 million Baby Boomers born between 1946 and 1964, the demand for skilled care services is going to increase. The Center for Disease Control and Prevention (2013) reported a projected increase in the use of long-term care facilities from 15 million in 2000 to 27 million in 2050. The current number of long-term care facilities in the country (15,700) is not going to meet the demands of this large aging population. This suggests that the severity of the diagnoses of residents admitted to long-term care facilities will increase. Therapeutic Recreation professionals will need to adjust the model of service currently being provided to meet the changing needs of the residents.

Limitations

This was a small, exploratory study of four residents that sought to gather information that would stimulate questions for further investigation and provide a basic overview of the role of leisure and recreation activities in a long-term care facility. Therefore, the size of the sample is a limitation.

The sample consisted of Caucasian females living in a long-term care facility in the Midwestern United States. The geographic area could influence the activities that were provided and shown to the researcher by the residents. The limitations of diversity and gender in this study could also be factors.

The study was conducted in May when the weather can influence potential outdoor activities. Though the study was implemented on two days when the weather
was favorable, the time of year could have influenced the residents’ activities and photographs.

Therapeutic Recreation staffing on weekdays and weekends can vary. This could have influenced the participation of the residents in programmed activities based on personalities and leadership styles.

The residents for this study were selected by the Therapeutic Recreation staff. This could have influenced the study because of the prior knowledge that the staff had of the resident’s participation in activities. The researcher took precautions not to tell the staff that the study was focused on leisure and recreation participation.

Assumptions

Some assumptions made by the researcher were that the recreational therapy staff did the following: used the criteria for resident participant selection; distributed the supplies to the participants; and gathered the supplies at the conclusion of each day. In addition, it was assumed that the therapeutic recreation staff would not influence the photographs or logbook entries made by the residents.

Another belief was that the residents would complete both days of the study, take at least five photographs each day, answer each of the questions written in the logbook for each photo they took and sit with the researcher for no more than 15 minutes to rank the satisfaction of each activity. It was assumed that residents would document nearly the same number of photographs on the weekend day as they did on the weekday.

Residents were assumed to be able to independently move throughout the facility grounds and building. It was also assumed that residents would be active throughout the day.
Definitions

**Activity Director**- someone who aids in moving, material and helped to create interactions, within community and entertaining chances (Young, 1998).

**Leisure**- an amount of time after jobs and other commitments have been taken care of. (Dhurup, 2012).

**Long-term care (LTC)** - Aid given in the public or in a home with relaxed or official helpers when care is necessary for everyday actions (Temple, 2012).

**Quality of Life**- personal knowledge instead of impartial knowledge of a person’s life (Russell, 1990).

**Recreation**- skills/events humans take part in through relaxation on behalf of the resolve of happiness, approval and teaching (Zeigler, 1965)

**Therapeutic Recreation Specialist** – provides purposeful interventions for habilitation/rehabilitation using recreation and leisure activities.
CHAPTER 2

Literature Review

According to the National Center for Health Statistics (2013) about 8 million Americans currently utilize long-term care services of some kind (Harris-Kojetin, Sengupta, Park-Lee, and Valverde, 2013). Millions more may soon find themselves in need of similar services as the large number of baby boomers age into later life. Understanding the recreation and leisure needs of elders living in long-term care facilities will be essential in order to ensure that quality of life needs are met.

Leisure & Recreation Activities in LTC

Russell (1990) conducted an experimental study with 137 people age 60 and older. Subjects were randomly selected from the population of the residents who lived in six retirement homes located in Indiana. The final study sample consisted of 26 men and 104 women. The researcher administered a survey instrument looking at the subjects’ leisure activities, level of happiness in leisure, the number of times the subject took part in recreation, his/her well-being and quality of life. The research showed that gender (females) and the amount of schooling had a large and affirmative impact on the amount of recreation a given subject might experience. Female participants were also more likely to be content with their recreation (Russell, 1990). It should be noted that women outlive men and are significantly more likely to utilize long-term care services. There were nearly five times as many women in this study as there were men. These factors could influence the results of this study.

In an earlier experimental study also conducted by Russell (1987), 210 participants were randomly selected out of six different long-term care facilities in
Indiana. There were 78 men and 132 women that participated in the study. Surveys were
given to the residents as a means of determining the satisfaction upon retirement, the
number of times they currently participated in recreation, how happy they were with their
recreation; how they assessed their health and the number of times they attended spiritual
events. Data was collected using a subject-written diary method that asked how
unrestricted residents thought they were their core inspiration and how happy they were
in their day-to-day lives. The results showed that residents were more likely to take part
in some sort of event if there was television, or some other form of broadcasting, like
radio or newspaper, involved. In other event formats, the residents stated that they rarely
took part in those that were outside, competitive, large groups, ethnic and not of their
interest. The second part of the study focused on happiness related to recreation. When
the researcher analyzed the frequency of happiness, most residents said they were
moderately happy with their recreation experiences with the overall average score being a
3.5, on a one to five Likert Scale. The largest amount of happiness was seen in activities
involving resting, small group interactions and artistic expression. Based on the analysis
that the researcher did, happiness in activities was important for satisfaction with
recreation when a person retired from their job and as they aged.

Valentine-Garzon, Maynard and Selznick (1992) conducted an experimental
study using a dance activity intervention. Variables studied included personal
confidence, ability to move and to perform the tasks required for everyday life. Seventeen
female residents of a senior day-care center were selected based on recommendations of
the occupational therapist. All participants were women between the ages of 64 and 96,
who possessed average or higher range of motion in their arms, had no memories of using
the dance workout in the previous 12 months and scored a minimum of a four on Allen’s cognitive scale. All study participants attended a preview meeting and were assigned to either the control or study group. The assessments used for the study were functional range of motion tests and self-report gauges. The results showed only one significant change between the control and experimental groups and that was how many times each week participants exercised. The experimental group exercised an average of 5.2 times per week and the control group an average of 3.4 times per week. Results indicated that a dance program could increase the frequency of exercise for elders attending a senior day-care center.

This past research still holds true today. According to Li, Chang, Yeh, Hou, Tsai and Tsai (2010) found that residents still enjoy having access to broadcasting media, like newspapers and magazines, as well as spiritual activities, like church, talking, strolling, perusing narratives and viewing TV programs. Another study that shows the past research is still true is a study by Nimrod, Kleiber and Berdychevsky, (2012), which showed leisure continues to be an important part of helping to fight off severe sadness. This study focused on women in their 20s to 40s, but still holds true for frail elderly women because they can become severely sad as well, and lose interest in the activities that they once took part in, but might not be able to do anymore. The study concluded that while having an online support community can be very helpful, users still may need to be reminded to do

Weekday vs Weekend Day Activities

According to Theriault, Shores, West and Naar (2010), a person’s geographic location, community setting and movement pleasure were all linked to participation in
physical activities in later life. Thirty-nine older women living in rural areas in North Carolina participated in the study. Data was collected through use of a personal diary method that asked each woman to keep a record of the physical activities that they completed throughout the day. Surveys were also used in the research. The study lasted for seven days and focused on the length of time, place, strength, milieu, kind of motion being done and how much the participant enjoyed the activity. The results showed that 40% of the activities that the subjects completed were on the weekends.

According to Uffelen, Watson, Dobson and Brown’s (2011) experimental study conducted in Australia, women were less likely to sit for long periods of time on Saturdays and Sundays. This study surveyed 20,281 female residents in two age groups, 25-30 and 50-55 about their activities on weekdays versus weekends. The older women in the study spent approximately 5.63 hours a day sitting Monday through Friday and 5.16 hours a day sitting Saturdays and Sundays. The results showed more physical activity on weekends than on weekdays.

Location of Activity

Pruchno and Rose (2002) studied how elders spent their time. The experimental study was initially conducted with 179 subjects, but the researchers chose 123 of those study participants to give them additional information. Of the 123 residents, 45 lived in long-term care, 51 were in assisted living and 27 lived independently in their homes in the community. The technique used to gather information from the residents was called “past discussion”. The study participants were asked to recall what they had done from the time that they woke up until they went to bed the previous day. Each activity that a resident identified was coded, as well as the number and roles of the people involved and
the location of the activity. Over half of the sample (58.5%) took part in some form of entertainment throughout the day, but that entertainment only lasted less than 8% of the day. Slightly less than half (48%) of the participants spent just over 2 hours of the day in bed and when the whole sample was looked at, a very small percentage, less than 8%, of the day was spent in bed. The participants spent about slightly less than a quarter (23%) of their day in their personal room and restroom and 59% of the day in the rest of their home. Around 9.3% of the residents’ time was spent away from their home.

According to Theriault et al. (2010), the women that participated in their study did 219 sessions of exercise in their home and 81 in the subdivision near their house. The cities near where the women lived accounted for 73 sessions, where they were employed had 38 sessions and gyms accounted for 36 sessions. There were few examples where the women did their fitness sessions in green areas, like near play grounds, or in nature.

Social Structure of Activity

According to Pruchno and Rose (2002), whose study is discussed in the previous section, of the 123 elders in their study, most residents, 73.2%, saw family and 59.3% saw friends, but those visits only lasted a small portion of the day, 7.2% for family and 5.9% for friends.

According to Cumming, Dean, Newell & McCaffrey, (1960), who did an experimental study on the number of times residents visited with others. The researchers talked with 211 people, 104 of them were female. The residents were asked questions about the sum of time that they used relating with people, with emphasis on what drives social conduct. Women in this study who were 50-75 and over, related with people, on average 51% of the time.
Time of Day of Activity

Cohen-Mansfield, Thein, Dakheel-Ali and Marx’s (2010) found, time of day was shown to be very important to residents living in long-term care. The study included 193 residents who lived in seven long-term care facilities in Maryland. All of the residents in the study were diagnosed with Dementia, 151 of the residents were female and 42 were male. The mean age was 86. The study consisted of different forms of toys and household tools being shown to the residents. The residents are shown the objects at two different times during the study, once with a description of what the object was and what to do with it when the participant was given it again. The other time no description and the participant had to remember what specific action they had to do with the toy or object. When looking at the results, residents were more active and better able to pay attention in the afternoon.

Burgio, Scilley, Hardin and Hsu (2001) looked at time of day and how troublesome verbal outbursts occur at specific times of the day. This experimental study was done with 68 residents living in four long term care facilities around Pittsburgh, Pennsylvania. In the study, 52 residents were female and 16 were male, with a mean age of 86. There were 3 tests that the study used, looking at the state of their mind, their day-to-day ability to meet their needs and a survey for nurses about verbal outbursts, which were given to helpers in order to get information on experiences that the information received through the researcher’s data accumulation could not obtain. The study results showed that the outbursts increase in the PM hours of the day, sometimes decreasing in the later hours of the evening.
Leadership of Activity

In Sopkin’s (1973) experimental study of sixteen elders, all in a hospital, there were eight female residents and eight male residents. The residents were then divided into two groups, four males and four females in each group. One group would have organized guidance, while the other group would have unorganized guidance. The study took place over eight weeks, each group met separately twice a week, on Mondays and Wednesdays for sixty minutes in the afternoon and then met as a big group on Friday mornings. The organized group of residents were given specific activities to do, each participant was given a specific activity that they must do, the unorganized group residents were allowed to participate in specific activities, but they could choose to do something else if they wanted to. The results showed that the structured group members tested better in willingness of the group and span of contribution, while the unstructured group tested better in community collaboration.

According to Schreiner, Yamamoto and Shiotani’s (2005) experimental study done with Alzheimer’s patients, leisure and activity time can be the only time that they are happy or express that happiness. 35 Alzheimer’s patients participated from two different long-term care facilities that had specific units for aiding those residents. A couple of testing tools were used for the observations. Both of the tests were changed to fit the experiment. In the results section the comparison between “Regular” and “Recreation” time, the change in resident expressions was very large, sometimes as many as 10 times more often, or twice as often. Residents appeared to be happy much more often when they were participating in activity time compared to when they were just
sitting there. Residents also appeared more “interested” during activities as opposed to when the residents were not engaged in activities.

Satisfaction Level

Pruchno and Rose (2002) used a Likert-scale to ask study participants of a care facility how happy they were with their day. They were asked to score their day on how stimulating, fun and content their day was. The results showed that there was no major difference amongst the three living situations that the participants were in, long-term care, assisted-living or at home. Several other tests were done to look at how daily needs, community setting, and circumstantial setting changed happiness levels. Daily events, like taking care of themselves and spending less time relaxing meant being happier during the day. Community setting had no specific adaptation that caused a major change in happiness level. Circumstantial setting showed that there could be a change in happiness if the participant spent a lot of time away from their residence.

As Theriault et al. (2010) stated, for the women that completed their study, doing fitness sessions in their residence, or in the city were not satisfying, even though they were some of the most common locations for fitness sessions. Doing the sessions at their religious locations, in nature or at fitness business were rated as very pleasurable.

Ranking of Importance

Fethney, Jeon, Ludford & Stewart (2013) stated there was strength and dependability in customer insight of tests on worth. Patients and their family were selected from 21 long-term care facilities. The study had 391 residents and 671 family members participate. Of the residents, 290 were female and 100 were males, the other
participant was listed as “missing”. The researchers created two tests, one for patients in long-term care and the other for their family. The lowest rated portion for all residents was events and patients rated housework as the highest area and family members rated total happiness as the highest area. Both patients and their families rated leisure and recreation as the least important.

McQuillen, Licht, & Licht, (2001) conducted their study to talk about happiness in being alive. There were 45 elderly people chosen to take part in this study, 71% of the participants were women and all were Caucasian. The participants took many surveys during the first meeting of the group. The tests were a look at the statistics of the population that would be participating, what the participants thought of their own health and money, how they behave in mingling situations, how they feel about their lives, who they are and physical characteristics. The second time that the research participants met was for a one on one meeting with the researcher. During the meeting, the participants completed a ranking activity about their characteristics and who they are, as well as another sorting activity about who they are. According to the results that the researchers found, happiness in living can be foreseen with ranked individuality arrangements.

Summary

There were many studies regarding the elderly population and their activity level that were reviewed for this research. According to the research, older adults in care facilities are more involved in activities in the afternoon than in the morning. The research on weekday versus weekend day showed that more activities are taking place during the week, as opposed to the weekend and that facility programming is relying on weekend visitors to meet the activity needs of most residents. Satisfaction levels and
ranking of importance should be high if the resident was doing activities that they enjoyed and the leadership of the activity could make a difference in the variety of activities made available to residents, as well as how the residents react to those activities.

As the segment of the population known as the baby boomers continues to age, the numbers of elders in long-term care will increase. Looking at the roles that activities, location, time of day and satisfaction level have with quality of life allows for changes to be made. Therapeutic recreation staff would be able to mold their schedules to better meet their resident’s needs. Understanding the roles would also allow caregivers of all types to see how best to meet the aging populations’ needs.
CHAPTER 3
Methodology

Approval for Conducting the Study

Approval for this study was secured from the Institutional Review Board at Northwest Missouri State University using an expedited application. Permission was secured from the long-term care administration to conduct the study at their facility. Two therapeutic recreation staff at the facility agreed to assist in locating subjects for the study.

Design of Study

This participatory research project explored the role of leisure and recreation activities in the daily lives of four women living in a long-term care facility in the Midwest United States. Subjects who met the criteria for participation in the study were selected by a therapeutic recreation staff member at the facility and asked if they would voluntarily participate in the study. The criterion for selection was: cognitively sound, able to write, are mobile, able to take photographs, able to verbally communicate and able to follow basic instructions. This study was completed over two days, a Friday and a Saturday in May, 2014. The four residents all completed the study over the same two days. Of the four residents, one declined to participate on the second day, and was not replaced.

Participants were provided with a disposable camera and photo log book on a week day and again on a weekend day. Each day they were requested to take photographs of their daily life and record where they took the photo, what time they took the photo, how many people were with them, why they took the photograph and how satisfied they
were with the activity. Cameras and photo log books were collected at the end of the weekend by the researcher. Film was developed and 2 copies of the images and a digital copy on a CD were made at the researcher’s expense. One set of images was used for data analysis and one set was given to the participant.

One week after the photographs were taken, a 1 to 1 interview between the researcher and each participant lasting 15-20 minutes was conducted. During the interview, the participant was asked to rank the photographs on a Cantril’s ladder (vertical Likert Scale) of how important the activity was to them. As each photograph was placed, the researcher wrote down what number rung the resident placed the photo on and then asked the participant why they took that photograph. As the participant answered, the researcher had a laptop open, with the spreadsheet containing the data collected, so that the researcher could write down the responses that the participant gave. The researcher let the participants know that the researcher was only writing down what they were saying, not anything about the participant or writing anything derogatory. The ranking of the photos was done first for the Friday pictures and then for the Saturday pictures. When the participant completed the interview, they were thanked for their participation and then were given a copy of their photographs from each day.

Photographs and ranking data were used to evaluate the role of leisure and recreation in the lives of female residents on a Friday and Saturday.

Selection of Residents/Sample

The researcher had no influence in the selection of the subjects for this study. Two Therapeutic Recreation staff members of the long-term care facility were each asked to choose two women from their case loads to participate in the study. The criterion for
selection was: (a) must be cognitively alert, (b) able to write clearly, (c) were independently mobile, (d) able to take photographs, (e) able to verbally communicate and (f) able to follow basic instructions. Study participants were selected from both of the second floor skilled care wings of the long-term care facility. One day before the beginning of the study, the researcher went to the facility and talked with each of the study subjects that were chosen to secure consent and answer any questions they may have had. At that time, two residents said that they did not want to participate. The Therapeutic Recreation Staff were then asked to select two more residents from the same skilled care units for participation. The second two residents agreed to participate and consent was secured by the researcher.

Instruments

A participatory method was used that asked subjects to take photographs and enter descriptive information for each picture taken. A photo log-book was created by the researcher (See Appendix B) and distributed to each subject along with a disposable 27 exposure flash camera. Each page of the log-book asked for the number of the picture, where the photo was taken, what time of day the picture was taken, how many people were with the resident, how satisfied the resident was with what they were doing in the photo and why they took the photo. At the bottom of the page, the residents were given a blank box, where they could share whatever they wanted in it.

During the interview between the researcher and participant, photographs were ranked using a horizontal version of Cantril’s ladder was used that simulates a Likert Scale (See Appendix A). Cantril’s ladder is generally set up in a vertical format with the lowest value being at the bottom and the highest at the top. The version that the
researcher made was 36 inches in length, with ribbon connecting the ladder sides together. The researcher placed ribbon at 3 inch increments across the ladder, so that the residents know that the ladder has a beginning and ending point. An adaptation was made to address the potential of limited range of motion of the subjects. The ladder was laid horizontally on a table with the lowest values on the right and highest on the left. The researcher placed two signs above each end of the ladder, one saying low and the other saying high, so that the subjects did not become confused as to which end was which.

Data Collection Methods

This study was implemented in a long-term care facility. Four residents were chosen via two Therapeutic Recreation staff, who became the therapeutic recreation staff, one for each wing on the second floor of the facility. On the Thursday before the study would begin, the residents were asked by the researcher if they wanted to participate in a research study and four residents said yes.

The researcher then provided the Therapeutic Recreation staff with eight cameras, two for each resident, one for Friday and one for Saturday. The researcher also provided eight logbooks, two for each resident, one labeled “Show me what your Friday looks like” and the other labeled “Show me what your Saturday looks like.” Included with each camera and logbook set was a black pen for the residents to use, since the researcher wanted to be sure that the residents would have something to write with.

The researcher then explained the process of the study to the therapeutic recreation staffs and wrote the same information down on notes in case there was confusion and to ensure that everyone would be doing the same thing. First, the researcher explained that on Friday morning, each of the four residents would need to be
given a Friday log book, a camera and a pen. If the resident asked what it was for, the therapeutic recreation staff was told to tell them that they needed to take pictures and write down why they took the pictures in the log book.

The next step was for the therapeutic recreation staff to collect the Friday log book and camera on Saturday morning, placing both in a gift bag labeled with a sticky note with the resident’s initials on it. Then the therapeutic recreation staff would need to take the Saturday log books and cameras and hand them out to the residents. If residents asked what the camera and log book were for, the therapeutic recreation staff was instructed to tell them the same thing that they said before, that they need to take pictures and write down why they took the pictures in the log books. On Sunday morning, the final step for the therapeutic recreation staff was to go and collect the cameras and log books and place them in the person’s bag in the therapeutic recreation room, with the Friday log book and camera. The researcher also made sure to emphasize that each resident needed to be told by the therapeutic recreation staff the same thing each time they asked, to ensure continuity throughout the study.

Sunday afternoon, the researcher would arrive and retrieve the bags containing each resident’s cameras and logbooks, and label them according to the special code, so that only the researcher would know what camera and log book belonged to each resident. Once the cameras and log books were labeled, the researcher took the cameras to Walgreens and had the pictures developed. Each camera was placed in an envelope and the code that identified the camera was written on the front of the envelope, to ensure that each camera and log book could be matched up again later with the correct log book.
and later the researcher would be able to give the duplicates to the residents that took the pictures.

Later that week, the researcher coded the photographs and log book entries. This allowed the researcher to be able to separate out the duplicates, and set up the data sheet to ensure ease of coding and analysis later. The duplicates were sorted out so that when the residents met with the researcher, they would be able to receive their own copy of the photos that they took during the study.

After the photographs were coded, the researcher returned to the long-term care facility and had one-on-one interviews with each resident. During the interview, the resident was asked to rank the photograph on how much the photograph meant to them and after the resident ranks the photo, the researcher asked why the resident took the photograph. During this interview, the researcher had their laptop open, so that when the resident was asked why they took the photograph, the researcher typed as much of their response as possible. The resident was asked to rank each picture they took on both Friday and Saturday. Some interviews took longer than others, depending on how many pictures each resident took.

Reliability/Validity

The researcher modeled the design of the photo log-book from a similar study conducted by Mylykangas, (2005). The log-book showed content validity and was successfully utilized as a data collection instrument in this study. Expert and face validity for the redesigned log-book was secured before data collection began. Content validity for Cantril’s scale is decided whenever the ladder is used, because different
questions are asked each time (“Cantril’s self-anchoring ladder,” 1999). The instrument has been shown to be culturally sensitive and valid for use across different populations.

Data Analysis

Photographs were coded by day and subject identification number. The information in the log-book was entered into a spreadsheet and matched with the photo image taken by the study participant. Nominal data for questions in the log-book was coded and entered into the spreadsheet. Qualitative statements made by the study participants were also entered in to the spreadsheet alongside the corresponding photo images. The researcher analyzed the data by looking at the frequency of numbers as they appeared in the spreadsheet columns and looking at how they compare across the four female residents and across each of the variables.

Summary

An exploratory, participatory study was designed that asked four-female residents to share their insights on what life was like in a long-term care facility over two days. The subjects were given a new disposable camera and log-book each day and asked to take photographs and record their thoughts about the images they were sharing. Items in the log-book were coded and matched up with the photograph images and qualitative comments for each image were recorded on a spreadsheet. The researcher then met with each subject and requested that she sort the photo images, by how important the activity was to them that day, by placing them onto a replica of Cantril’s Ladder. These ranking data were entered into the spreadsheet for analysis.
Frequencies were determined for each of the independent variables in the study. Ranking data were analyzed to determine the most important and least important activities for each resident. Qualitative data was used to further explain the results of the quantitative findings.
The Traditional Model of Service Provision

A typical day in a long-term care facility begins around 5:00 a.m. when residents start to be awakened. Breakfast starts being served at 7:00 a.m. in the dining hall. Residents eat between 7:00 a.m. and 9:00 a.m. depending on staffing availability and individual choice. The first programmed leisure and recreation activities generally start at 10:00 a.m. and can vary based on the month, theme and budgetary restrictions. Afternoon group activities are offered following lunch and some evening activities are programmed as staffing allows. Residents requiring individualized attention due to medical restrictions receive one-on-one attention for a minimum of 30 minutes each week. Weekend activity group programming is generally limited to one or two small programs per day. Residents may miss these activities due to physical, occupational, or speech therapies, personal care and shower time, medical needs, or visitors.

Residents have activities available throughout the day that they can participate in on their own as well. Examples of independent activities available to residents include: (a) an ice cream machine filled with soft serve ice cream or yogurt that residents can enjoy, (b) a popcorn popper with popcorn already made available on Wednesdays, (c) two aviaries with multiple breeds of birds in each for residents to sit and watch, (d) a fish tank with several varieties of fish for residents to sit and watch, (e) a rabbit that residents can pet and (f) several visiting dogs, owned by therapeutic recreation staff members that residents can pet as well. Some other items available for residents to use on their own include a computer with Skype so residents can communicate with family. The residents also have access to a number of games that they can play by themselves or with other
people on the computer. Also available are jigsaw puzzles in the “kiddie cove” area of the facility. Residents can pick a puzzle out, put it together, and return it. The residents also have access to a library where they can check out books, take them back to their rooms and read and then return later after they have finished reading it.

A Typical Weekday in a Long-Term Care Facility

Activities of Daily Living

Meals are served from 7:00-9:00 a.m.; 11:00-1:00 p.m. and 4:00-6:00 p.m. in the dining hall. Showers, physical therapy, occupational therapy and speech therapy usually occur in the time around meals. Recreation and leisure activities fill in the spaces throughout the day. Activities offered each day vary with some being repeated several times each week; such as coffee cart, cards and dominoes.

Typical Weekday Leisure and Recreation Activities

On a typical weekday, there are multiple choices for activities that residents can participate in. Activities that occur in the morning include a women’s coffee group, men’s coffee group, painting and ceramics. If a guest entertainer comes, which might happen one or two times per month, it is usually in the morning as well. Activities that occur in the weekday afternoons might include trivia games, storytelling and BINGO. If there is going to be a cart, such as an ice cream sundae cart, or French fry cart, it will occur in the afternoon, the frequency of this activity changes monthly, from one to ten different times per month, depending on supplies. On two to three weekdays per week, a therapeutic recreation staff member works in the evenings to provide residents with evening activities. On these nights, some or all of the wings will be able to participate in an activity, like a guest performer, or a cart activity, or movie. The number of
participating wings depends on the number of therapeutic recreation staff members working.

*Friday of the Study*

The following activities took place on the Friday that the study was implemented. A staff Tug of War competition was conducted in the front parking lot of the facility following breakfast. Residents were now allowed to participate themselves but were encouraged to watch from inside of the facility.

The typical midday meal was replaced by an Italian lunch. There were empty sparkling grape juice bottles at the tables and checkered table clothes for decoration. Fresh bread sticks were made and walked around for the residents to pick up and eat and sparkling cider was the beverage of choice. The main course was spaghetti and meatballs and tiramisu was served for dessert.

Catholic Mass was held after lunch for residents who wished to participate. A priest from a local church came and performed the service. Residents can be pulled early from other activities so that they can participate in mass if the therapeutic recreation staff knows that they enjoy it. This duplication of activity scheduling can create conflict for residents who enjoy both activities offered.

Tasting group occurs every few months and allows residents to be a part of creating the menus for future weeks in this long-term care facility. The head chef creates samples of some new food ideas for the residents and then talks to the tasting group to see how they react to the new food ideas. If the tasting group likes them, then the chef will add the new dishes to upcoming menus.
Sinatra fun was an activity implemented for reminiscence. The residents who took part listened to music and talked about their lives. Residents could talk about what their lives were like during the 50s and 60s. They could discuss what it had been like having children in this time period, where they lived, what their jobs were like, where their spouses worked, what their favorite activities were at that time and what kind of car they drove.

Liar’s club occurs each week on Friday afternoons. A man who does volunteering work comes to the facility to meet with several residents and talk about what has been going on in the world, tell stories and usually bring some fun food for the members of the club to enjoy, like malts, runzas or French fries. There are approximately six people that take part in this club, it fluctuates each week, and enjoy getting to talk with each other.

A Typical Weekend Day in a Long-Term Care Facility

Activities of Daily Living

Meal times on the weekends are the same as during the week, so meals were served from 7:00 to 9:00 a.m., 11:00-1:00 p.m. and 4:00-6:00 p.m. in the dining area. On the weekends, some residents might have their weekly showers, but no physical therapy, occupational therapy, or speech therapy occurs. There is typically one therapeutic recreation staff member working during the weekend. This staff member will usually have one or two activities to do with residents in the morning and/or early afternoon.

Typical Weekend Day Leisure and Recreation Activities

On a typical weekend day, there may be one or two activities a day. The type of activity offered depends on the therapeutic recreation staff member working that weekend. Some weekends a dog might come and visit with one of the therapeutic
recreation staff members, or a cart is taken around to the neighborhoods. Some other activities that might occur include picture BINGO, peanut auctions or entertainment.

*Saturday of the Study*

The residents painted in the morning. A local hairstylist, who is also an artist, came to the facility on Saturday morning and showed 12 residents how to create clouds, birds and trees using oil paint on a canvas. The therapeutic recreation staff member helped with the activity. The residents also got to have their nails done today.

**Case Studies**

**Resident 1**

*Friday*

The resident did not comment or show any images of meals or activities of daily living that occurred during the day. In the morning, she participated in the painting class in the dining area that was offered by the therapeutic recreation staff. There were 12 residents in this activity. She took two photos of this activity and shared in the logbook that she wanted the researcher to see what “we would be doing.”

After the painting class was finished, she went outside and took the next nine pictures of the courtyard in the middle of the facility. These pictures featured the fountain, the flag pole, the sculpture of a turtle, which the resident said “looked like a dog, but it is not.”
Three photos were taken showing the flagpole in the courtyard. The subject said that she wanted the researcher to see the flagpole but did not expand on why. No mention of the pergola was made in the log-book, but a reference to the seating in the courtyard was made in other photos.

The outside photos also included pictures of the outdoor lights and a Hosta plant. After her visit to the courtyard no other photos were taken and no additional data were collected.

*Saturday*

There were no pictures taken of meals, or activities of daily living by this resident. On the weekend day of the study the resident took two pictures and wrote about a third picture that was not taken. Both of the pictures were taken outside in the courtyard and the written picture took place outdoors as well. There were no pictures taken inside. Both
pictures were of the courtyard and the resident wanted the researcher to see what the 
courtyard at the facility looked like.

The untaken picture was also supposed to be taken of the courtyard, but was focused on 
the door of the building, because the resident wanted the researcher to see “outside the 
door of my building where I live.”

This resident said in all of her photographs that she was somewhat satisfied while 
she was participating in activities. She also rated all of her pictures highly, unless she was unsure what she had been trying to take a picture of, then she rated those photos on the 
lower end, which were only two photos. Both of the lower ranked photos were taken 
outside, and while the photos were focused, and had plenty of light, the resident was 
unhappy that she had not been able to include what she wanted in the photo, like the flag 
pole. She rated her time outside very highly, as well as her time in the painting class.

Resident 2

Friday

Resident 2 did not show any activities of daily living, but she did show eating 
meals. The pictures taken by this resident on Friday were all taken inside of the facility. 
The pictures included various residents, employees and possibly family who live in, work
at or visit throughout the facility. This resident seemed to enjoy taking pictures of people engaged in an activity, but the resident was not necessarily involved in the activity. One example of this was a picture taken in the afternoon; one of the therapeutic recreational specialists on staff was reading a book and discussing it with some of the residents. The photographer took a picture of this happening, but she was not involved in the activity. There was a group of approximately six residents circled around the therapeutic recreation specialist as she read to the residents. In between the paragraphs, the leader asked questions about the book and asks residents if they ever had similar experiences, to aid in reminiscing.

Other pictures taken include a picture of one member of staff holding two bottles of sparkling grape juice and pretending to drink them. The caption that was provided by the resident was “I wanted her to look like she was a Boozer.”

The picture right after that one was of another member of staff holding a single bottle of sparkling grape juice. The man in the picture was African American and included the caption: “I thought we should have a picture of someone that’s Black American.”
The resident also included pictures of her featuring the flowers that have been set up on the cabinets in front of the large picture windows in the dining area of the facility.

*Saturday*

On the second day of the study, resident 2 did not show any activities of daily living, or meal times. The resident attended the painting class in the morning and took six pictures during this time. The pictures included the other people taking part in the class, but not the research resident. During the class, the residents learned how to create clouds, birds and trees using paint.

The next picture shows the butterflies that the resident created to place on the windows of the dining area in the facility. The picture shows the young man that she asked to help her accurately place them and, in the logbook, the resident said “He did such a good job moving the butterflies without tearing them. He seems to be a good worker.” In another section of the same page, the resident said “I worked on the plants the night before putting flowers in them and ribbon on them to make them look pretty. I
put up the butterflies crooked. So today I had the young man get up on the cupboard and put them straight.”

The next picture with a page in the logbook is also in front of the same picture window and shows the resident, in front of the butterflies and flowers that she made.

The next few pictures that the resident took were pictures of the kitchen staff and people eating lunch. One caption that the resident put with the pictures was “Because we visit together and talk about the old days.
The resident also included several pictures that she took with one of the therapeutic recreation staff members. In the logbook, she wrote that she liked the lady that she took the picture with and they had someone take a picture of them together.

The resident also took three pictures of her bedroom. She took more pictures of staff at various locations throughout the building. The final two pictures were taken outside of a member of the nursing home staff and her family working in the central courtyard of the facility. During the final interview with the researcher, the resident stated that she had not known that the family was outside working. She went outside and then saw them, so she took a picture of the husband and daughter and then a picture of the staff member. According to the resident, they were planting flowers.
This resident had a wide variety of pictures and because of that she also had different satisfaction levels. She had 22 photos that were not rated for satisfaction and of the photos that were rated, 12 were rated as somewhat satisfied and the remaining seven were rated as extremely satisfied.

During the interview after the research was completed, the resident rated the photos and there was a wide array of ratings. She rated her photos much higher on Saturday, because she remembered to turn the flash on, she had forgotten to do that on Friday and because of that, the majority of her photos were dark and difficult to interpret. Eleven of the pictures received a “ten” and those pictures were taken either of other people or were of the resident and another person, or they were pictures of her bedroom. The remaining pictures were rated, it appears to the researcher, based on the appearance of the picture, not based off of what was going on during the time that the photo was taken. If the photos were indecipherable, too dark, or she did not remember who was in the picture, she rated the photos lower, but if the photos were clear, she remembered to use the flash, then she rated them much higher.
Resident 3

*Friday*

The third resident that took part in the study did not show any activities of daily living. She took a photograph of the dining hall. In a comment to the researcher during the post-interview, she said that she did not remember taking the picture, but she thought that it was probably the dining room.

In another picture, she showed herself getting her hair done in the beauty shop located within the facility. The resident said that she enjoys getting her hair done.

The resident chose to take only three photographs for the day. Her third picture was of the mass service that took place in the morning. In her interview with the researcher, she stated that she did not remember taking the photo of the mass service.
either. She was not sure where the photo was even taken. A therapeutic recreation staff
member came over, and told the researcher that the photo was taken in the chapel during
mass.

*Saturday*

The resident chose not to participate on the second day. When asked by the
researcher during the interview, she stated that she had not been feeling well and that she
did not want to do the project. She also stated that she felt nauseated.

The resident did not write anything in the logbook while she was taking the
pictures, so there was no satisfaction level given for these pictures. When she met with
the researcher, she gave her hairdressing appointment a “six” because she likes getting
her hair done, her picture of the dining room received a “three” rating, because she did
not remember taking the picture and her last picture of mass received a “five”, she also
did not remember taking this photo, but one of the therapeutic recreation staff members
came and reminded her that it was a picture of the mass service.

Resident 4

*Friday*

The fourth resident to take part in the study did not provide any pictures of
activities of daily living, but did show pictures of meals. Of the total pictures, eight are of
the Liar’s club. The Liar’s club is a group of residents who meet together in the “Kiddie
Cove” section of the facility several times each week. There is a volunteer that comes in
and meets with all of the Liar’s club members and brings food for them to enjoy together.
The group also has discussions based on what is going on in the world.
Other pictures that were included in the Friday roll of film were: mass, a picture of some of the staff members in the kitchen, the resident’s tablemates for lunch and a picture of the resident reading a book in the dining area. The pictures of lunch discuss the Italian lunch, with the sparkling grape juice bottles. One activity that the resident watched was the tug of war, but she did not take a picture of the activity, because she did not have her camera yet.

The resident’s picture of herself was taken by one of the therapeutic recreation staff members. She later told the researcher that she tries to read every day, in the afternoon for about an hour and again in the evening for about an hour.
Saturday

The second day, this resident took pictures of meals, but no pictures of activities of daily living. The resident took pictures of the book that she is currently reading, the puzzle books that she works on and the people she eats meals with.

She also showed pictures of a job that she was given by the therapeutic recreation staff, which was folding papers to stuff in envelopes for a mass mailing.

As the resident was leaving the interview with the researcher, she stated that she “would have taken more pictures on Saturday, but they would have been duplicates,” since there are not that many activities offered on the weekends.

This resident took many photos and filled in the logbook for most of them as well, only four of the photos were not given a satisfaction rating, four photos were given a rating of somewhat and eleven were given an extremely satisfied rating. This resident
rated her photos very high, the lowest rating she gave was a “seven” and the rest received eights, nines, or tens.

Summary

Resident one showed that she really enjoyed being outside and those photos, on both days, rated the highest for her satisfaction level. She showed that she participated in one planned activity total during the study, the rest of the pictures taken showed her doing self-motivated activities.

Resident two showed that she was a social butterfly. She participated in the painting class and the Italian lunch, according to her photos. Any time that the pictures were of good quality and she was either with other people or in her room, she rated those pictures higher than if the photo was not clear or easy to understand. She was also on the go a lot, according to her photos, because there was so much variety in terms of where she took the pictures and who would be in the pictures.

Resident three chose to only participate on one day, because she was sick on the second day of the study. She took three pictures and those pictures were all of self-motivated activities, except for mass. She did not rate any of her pictures high on the scale and did not write anything in the logbook.

Resident four also showed that she is a social butterfly. She showed that she participated in the Italian lunch and the Liars club and the rest of the photos that she took were of self-motivated activities. She ranked her photos high in her logbook and ranked those pictures high when she was interview by the researcher as well. She ranked her photos with the Liar’s club the highest and also ranked photos of her book and puzzle books higher.
CHAPTER 5
Results

Sample

The researcher used two Therapeutic Recreation Staff to select four female residents. The four ladies were all residents at a long-term care facility in Nebraska. The ages of the residents are unknown, since that information was not necessary for the purposes on this study. The four residents were chosen by the Therapeutic Recreation Staff because they were mobile, able to communicate, cognitively sound, able to write and able to take a picture. During the study, one subject dropped out on the second day, because she was not feeling well and so decided not to participate. A replacement was not chosen.

Response to Survey/Instruments Results

Seventy-five pictures were taken in all for this study. The pictures were taken both inside of the facility and outside the facility, in the inner courtyard. The logbooks that residents were asked to write in asked for location of photograph, time of day that the picture was taken, number of people in the photograph with the subject, how satisfied the resident was and why they took the picture. Under each of these questions, the researcher assigned a number to each of the possible responses that the subject could give. These numbers were then placed in the spreadsheet to allow for coding and comparisons to take place.

The total number of entries made on Friday was forty-seven, which includes 1 photograph that was not taken, but logged in the log book. The total number of pictures
taken on Saturday was thirty-one, which also includes one log book entry without a photo.

During Friday, thirty-four of the pictures taken, or 72%, were taken somewhere in the facility, 1 photo, 2%, were taken in the residents’ room, 10 pictures, or 21%, were taken outside, in the courtyard and no pictures were taken away from the facility.

On Saturday, 71%, or 22 pictures, were taken somewhere inside the facility, 3 photos, or 10% were taken in the residents’ rooms, 5 photographs were taken in the courtyard, or 16% and no pictures were taken outside of the facility.

The next set of answers that were examined was time of day that the photographs were taken. On Friday, eight, or 17% were taken in the morning, 29, or 62% in the afternoon, one, or 2% in the evening and nine, or 19% that contained no answer.

For Saturday, nine, or 29%, of the pictures were taken in the morning, seven, or 23% took pictures in the afternoon, none of the residents took pictures in the evening and 15, or 48% did not specify the time that the picture was taken.

<table>
<thead>
<tr>
<th>Friday Times of Activities</th>
<th>Saturday Times of Activities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Morning</td>
<td>Morning</td>
</tr>
<tr>
<td>Afternoon</td>
<td>Afternoon</td>
</tr>
<tr>
<td>Evening</td>
<td>Evening</td>
</tr>
<tr>
<td>Not given</td>
<td>Not Given</td>
</tr>
</tbody>
</table>

![Pie charts showing times of activities on Friday and Saturday](chart.png)
The third question asked of the residents was the number of people that were present when the photograph was taken. On Friday, 14, or 30% had no one else in the picture, two, 4% had one other person with them, five, or 11% had two extra people, one, or 2% had 3-5 other people in the picture, 11, or 23% had between 6 and 10 other people in the photograph, five, or 11% had over 11 other people in the photograph and nine, or 19% had no entry in the log book.

For Saturday, four photographs, or 13% had no one else, three, or 10% had one other person, no pictures had two other people in it, three pictures, or 10% had between three and five people in it, no pictures had between six and ten extra people, three pictures, or 10% had over eleven people and 18, or 58% had no entry.

The next question that was asked of the residents was how satisfied they were when they took the photograph. On Friday, ten residents, or 21% were extremely satisfied, 23, or 49% were somewhat satisfied, no resident wrote that they were dissatisfied and 14 or 30% gave no answer.

On Saturday, eight, or 26%, said that they were extremely satisfied, seven, or 23% were somewhat satisfied, none of the entries listed the resident as being dissatisfied and 16, or 52% had no entry for satisfaction level.

The next question that the residents were asked was why they took the photograph. 14, or 30%, of the photographs did not have a reason for why. 9 pictures, or 19%, said that the reason why the picture was taken was so that the researcher could see something that was at the home. One of the pictures, or 2%, was taken, according to the log book, “for your records”. Twelve of the photographs, 26%, were taken because of the residents that were in the picture, five pictures, 11%, were taken because of staff, two
photos, 4%, were taken because of recreation therapy staff and two other pictures, 4%, were taken because of guest helpers. Zero pictures were taken in residents’ rooms; one photo, 2% was taken in the church, one picture, 2%, was taken because of games and there were no pictures showing books or activities.

On Saturday, there were thirteen pictures, 42% that did not have any explanation. Two photographs, or 6.5% were listed as “So you can see” for the reason of taking the photograph. There were no pictures taken “for your records” or of church or games. Four photos, 13%, were taken of residents, two pictures, 6.5% were taken of staff, 4 photos, 13%, were taken of the recreational therapy staff and one picture, 3%, was taken of a guest helper. Two photos, 6.5% were taken of residents’ rooms and one picture, 3% was taken of activities.

The final question that was asked of the residents in this study was where they would rank the pictures in importance to themselves. This portion of the study was done in a one on one interview session approximately one week after the photographs were initially taken. The residents were brought in front of a table that had a Cantril’s ladder, a vertical Likert scale, on it. Residents were asked to place each photograph one at a time on the rung that shows how important that picture was to them. The residents ranked the pictures with one being low and ten being high.

The first set of pictures ranked were the pictures taken on Friday. All of the pictures were ranked, so there were no photographs without an answer. Four pictures, 9% were rated a “one”. Two photos, 4%, were rated a “two”. Seven photographs, 15%, were rated a “three”. One picture, 2% was rated a “four”. One photo, 2% was rated a “five”. Two photographs, 4% were rated a “six”. Five pictures, 11% were rated a “seven”. Six
photos, 13%, were rated an “eight”. Eleven photographs, 23%, were rated a “nine”. Eight pictures, 17%, were rated a “ten”.

The second set of pictures, from Saturday, was rated next. There were two pictures, 6.5%, that did not get ranked. One photo, 3%, was rated a “one”. No photos received a “two”. Two photographs, 6.5% received a “three”. No pictures received a “four”, “five” or “six”. Three photos, 10%, received a “seven”. One photograph, 3%, received an “eight”. Ten pictures, 32%, received a “nine”. Twelve photos, 39%, received a “ten”.

<table>
<thead>
<tr>
<th>Ranking of activities on Friday</th>
<th>Rankings of activities on Saturday</th>
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<tbody>
<tr>
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<td>No ranking</td>
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<td>High 10</td>
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</tr>
</tbody>
</table>

Summary

The four residents that participated in this study provided many photos and logbook entries to use in this research. For location of pictures, on Friday and Saturday,
the majority of the pictures were taken inside, and a small number were taken outside or in a resident’s room. When time or day is looked at, on Friday, most pictures were taken in the afternoon and on Saturday the majority of the pictures were taken in the morning.

Next, the numbers of people in the photos were studied. On Friday the majority of pictures had no one else in the photos, followed by one other person, or two extra people. On Saturday, the majority of photos had no information on how many people were in the photo, but the next largest group was the photos with no one else in the photos with them. The next question was satisfaction level. On Friday, the majority of photos received a somewhat satisfied rating, and on Saturday, most did not respond to the question, but another large group was the response of being extremely satisfied.

The next question was why the photo was taken. On Friday most residents gave no response, or because of the residents that were captured in the photo. On Saturday, most residents did not say why they took the photo, but two other large groups stated that the reason was for recreation therapy staff or residents that were captured in the photo. The last question asked was the rank that the resident gave to the photo. On Friday, the most common rank was a “nine”, followed by “ten” and “three”. On Saturday, the most common rank was “ten”, followed by “nine”, and “seven”.
Table 1

*Resident Activities and Average Rankings*

<table>
<thead>
<tr>
<th>Friday</th>
<th>Saturday</th>
<th>Combined</th>
</tr>
</thead>
<tbody>
<tr>
<td>Painting- 9</td>
<td>Room-10</td>
<td>Painting- 9</td>
</tr>
<tr>
<td>Reading- 9</td>
<td>Painting- 9</td>
<td>Reading-9</td>
</tr>
<tr>
<td>Tug of War-9</td>
<td>Working-9</td>
<td>Tug of War-9</td>
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<tr>
<td>Liars Club-8.9</td>
<td>Reading- 8.6</td>
<td>Working-9</td>
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<tr>
<td>Lunch-8.6</td>
<td>Crafts-8.5</td>
<td>Liar’s Club- 8.9</td>
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<td>Outside-8.5</td>
<td>People Watch-8.2</td>
<td>Lunch- 8.6</td>
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<td>Mass- 8</td>
<td>Outside-3.7</td>
<td>Reading- 8.6</td>
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<td>Crafts-7.5</td>
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<td>Hair- 6</td>
<td></td>
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<td>Hair- 6</td>
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<td>People Watch- 3</td>
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<tr>
<td></td>
<td>People Watch- 5</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Refused- 0</td>
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</tbody>
</table>

The table above shows the activities that residents did throughout both days of the study, along with the ranking that the resident gave for the activity during the interview with the researcher. The scores were averaged across all occurrences of the activity for each person, and listed in the corresponding column, for either Friday or Saturday, and
then placed in the combined column, and averaged with any other occurrence of the same activity across the study.
CHAPTER 6
Discussion

Findings

Weekday versus Weekend Day Leisure and Recreation Activities

In this study, it was found that there were more planned activities on the weekdays than on the weekends. These results were similar to those of Theriault et al. (2010). The fact that more activities were planned on weekdays versus weekend days in contradictory to results from research such as that conducted by Uffelen et al., (2011) that found that women were more likely to be active during the weekend.

Settings of Leisure and Recreation Activity Participation

This study found that the majority of the time residents were either out and about in the facility, or they were outside, in the courtyard. This finding was corroborated by Pruchno and Rose (2002) because the majority of photos taken on both days were out and about in the facility, and not in the residents’ rooms, or of them in bed. Theriault et al.’s study also agreed with the findings of this study since their subjects enjoyed being outside, and even though not all of the residents in this study went outside, those that did took multiple pictures in the courtyard (2010).

Time of Day of Leisure and Recreation Activity Participation

This study found that the majority of activities run by the therapeutic recreation staff during the week and weekend occurred in the afternoon and that the residents were more active in the morning, especially on the weekend. This is not the same as what Cohen-Mansfield et al. (2010) found, who found that the participants in their study were
more active in the afternoon. The findings in this research also disagreed with what Burgio et al. (2001) said, because the participants in their study were more vocal in the afternoon, which is not the same as the findings in this study.

Social Structure of Leisure and Recreation Activity Participation

This study found that residents enjoyed many social structures for their activities. Some residents enjoyed being by themselves, others preferred being in groups. This is similar to what Pruchno and Rose (2002) said, because they said that over half of the participants in their study saw friends and family, and the participants in this study saw friends throughout the day. This study’s findings are also similar to those of Cumming et al. (1960), because two of the participants were talking and interacting with people throughout the day.

Satisfaction of Leisure and Recreation Activity Participation

This study found that the residents are satisfied with the activities that they do, but sometimes they prefer activities that they chose as opposed to big group activities. Pruchno and Rose (2002) had similar findings to this study because their study showed that there was no difference in community setting, but with several residents in this study their satisfaction levels were higher if they were with other people. Theriault et al. (2010) had similar findings to this study as well because they showed that participants were happier in outdoor or religious settings, and for several residents they showed that they were more satisfied when they were outside, or when they were at mass.

Leadership and Satisfaction of Leisure and Recreation Activity Participation
This study found that while residents enjoy doing activities that they can do on their own, they also enjoy doing leisure with others, not necessarily with therapeutic recreation staff, but other residents within the facility. Sopkins (1973) had findings that were found in this study which was that unstructured activities can lead to more group communication. Schreiner et al. (2005) had similar findings than this study, they found that residents show happier reactions when they are in a group setting, but the residents in this study also had high satisfaction when they did activities of their own choosing.

Weekday versus Weekend Day Satisfaction of Leisure and Recreation Activity

This study found that some residents were more satisfied with their activities than others, but there was also missing data, which could skew the results. No residents said that they were dissatisfied with the activities. There were more pictures taken on Friday, but given how few of those pictures were taken of actual organized group activities, it is hard to know whether the residents lost interest with the study, or if they had nothing extra or fun to photograph.

Leisure and Recreation Activities of Highest Importance on Weekdays

The activities of highest importance on weekdays were getting to go outside, the crafts that one resident made, getting their hair done and the Liar’s club. One resident enjoyed the Italian Lunch a lot, as well as the staff tug-of-war. Another resident enjoyed getting to watch people and talk to them as well.

Leisure and Recreation Activities of Highest Importance on Weekend Days
The residents enjoyed painting, people watching, going outside and reading or doing puzzle books during the weekend. One resident did not participate, so that could have changed the information that was obtained through the study. One resident really enjoyed people watching, because over half of her pictures are of other people.

Importance of Findings for Therapeutic Recreation Specialists

Some important findings for therapeutic recreation specialists are that the activities need to become person-based again. Residents have activities that they enjoy, but sometimes those activities are not available to them, so they have to make their own. If the therapeutic recreation staff starts trying to make the activities about the person they are working with and not about themselves, maybe the research would have yielded different results.

There were many interesting aspects to this study. Based on the research that was compiled, correlations exist. Activities, living in a long-term care facility and the other independent and dependent variables showed many potential new areas to consider.

The ladies in this study were, for the majority of the responses, happy with the leisure/recreation activities that they took pictures of. The women that participated in this study did many activities either by themselves, or with small groups of people. A large majority of the actual activities were not planned or set up by recreation, the resident made their own recreation or leisure activity. There was one event documented that was planned by recreation, a painting class. There was one activity that many residents attend but is not led by recreation staff and the one subject who went and documented that
activity really enjoyed it. The literature that helped to set up the dependent variables were by Russell in 1990, another by Russell in 1987 and a study by Valentine-Garzon et al. in 1992. Russell’s study in 1990 showed that women were more likely to be content with their leisure, which is similar to what was found in this study, the residents were all pretty positive about their recreation experiences. Russell in 1987 found that residents are more likely to enjoy activities that involve resting, artistic elements or group work, which is also similar to what was found in this study, residents like relaxed activities, or getting to make things, or being in groups to play games or watch performances. Valentine-Garzon et al.’s study in 1992 found that women enjoy getting do things as groups, which is not in line with what was found in this study. Residents in this study preferred doing activities by themselves, or in small groups.

Conclusion

One major theme that was found was that the residents enjoyed solo activities more than group ones. This was a surprising development, but there were not enough residents to draw a definitive conclusion. One of the residents said “I would have taken more pictures on Saturday, but they would end up being repeats.” This was to be expected, because on Saturdays, there were usually fewer activity options for residents. Other major themes were: 1) Residents were in the facility more than they were outside the facility, or in the courtyard; 2) they did more activities during the weekdays, as opposed to the weekends; 3) that the residents were more active in the morning, especially on Saturday, when they could lead their own activities, and; 4) being able to lead their own activities/ These themes showed that the resident to felt extremely or somewhat satisfied. The research matched a lot of the article information found, but
there were some pieces of information that were very different from what was found in the research for this article. It appears that the residents do not really need more variety, or that they are bored, or need greater frequency with the activities offered, instead, they need their own types of activities, modeled specifically for them, and not necessarily in the group settings.

Recommendations

If this study is done again, some recommendations would be to remind the residents to take multiple pictures throughout the day, so that the researcher can do more analysis and make sure that they remember to record the pictures that they took in their log books. The researcher would also recommend reminding the recreation staff about how they need to help the researcher with ensuring that they collect the data at the beginning of both days and also hand out the new log books, pens and cameras to the residents, so that the information is helpful and accurate.

Some ideas for how the research could have been done differently include: getting more residents to be involved would mean creating a bigger and more accurate picture of what a day really looks like for a female nursing home resident. Another portion that the researcher would do differently would be to make sure that there are similar ability levels represented in each wing.

Further research could look at larger samples to see if patterns could be identified. Another idea would be to look at men and women, to see if there are differences in what they photograph. This could also lead to looking to see if there is a difference at how the men rank their pictures compared to women. Other ideas for further research would be to
look at several nursing homes and compare what was photographed and how those pictures were ranked across facilities.

Some recommendations for recreational therapy practitioners would be to make sure that different activities are constantly being provided, because the people in the long-term care facilities do not all have the same interests. If big group activities cannot be done for an activity that one or only a few residents enjoy, then at least providing the tools for those residents to be able to create their own recreation should be done. Giving a resident an easel and paints and setting them up by a window in the winter and allowing them to paint the outside could be all the recreation that they need, while another resident might like having their hair done, so having a spa day for that resident could be enough for that resident. Every person is different and sometimes it seems that people forget that all people are not cut from the same mold.
References


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### Appendix A

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Appendix B

**Friday Photo Log Book**

Show me what you do on Fridays

**Saturday Photo Log Book**

Show me what you do on Saturdays
Photo number on camera:

Where was this photo taken?

What time of day was this photo taken? (circle)
  Morning       Afternoon       Evening

How many people were with you?

How satisfied were you with the activity? (Circle)
  Extremely       Somewhat       Dissatisfied

Why did you take this photo?

You can share whatever you want in this box.
Appendix C

Consent to Participate in a Research Project
The Life of a Female Resident of a Care Facility

You have been asked to participate in a graduate research project that is studying the life of a female resident of a care facility. It is important to note that you can choose to not participate at any time without penalty. For the research, you are requested to take photographs and write down the reasons for taking those pictures in a log book on two separate days. All equipment, 2-disposable cameras, 2-log books and a pen, will be provided to you at no charge. You are asked to take no less than 5 photos for each day. Photos and responses will be collected and processed by the researcher.

Approximately, one week after you have taken the photographs, you are asked to participate in a 15-20 minute interview with the researcher to discuss the photographs you took. You will receive a copy of all of the photographs you have taken as a thank you for your participation.

The photographs and written information in the log books will be used for research, training and teaching. Confidentiality is a priority. All log books will be destroyed at the conclusion of the research project and no names or identifying information about you will be used in any presentations.

Some benefits of participating in this study include getting to keep the pictures that you took, as well as getting to write down your ideas. Some benefits for society include being able to understand what you like to participate in, and how much you enjoy those activities.

Thank you

Tatiana Tsen

If you have any questions regarding this study you can contact my thesis supervisor or myself.
Dr. Sue Mylykongas
Associate Professor
Tatiana Tsen
Graduate Student

Dates of Participation: __________, __________, and __________

Consent to Participate Initials __________ Date __________

If you have questions about your rights as a research participant that have not been answered by the investigator, you may contact the NWMSU Institutional Review Board Chair, Mary Shepherd, via phone: 660-562-1205 or via email at IRB@nwmissouri.edu.