

**A SCOPING REVIEW: ENABLING OLDER ADULTS TO MEET
THEIR OCCUPATIONAL NEEDS
THROUGH ‘STAYING CONNECTED’**

by

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ABSTRACT

Despite growing awareness in aging research of the importance of supporting older adults to remain ‘active and connected,’ this concept has not been translated into current occupational therapy practice. A scoping review of the aging literature was conducted to examine the congruence between the concepts of ‘staying connected,’ and ‘engaging in occupations with and for others’ within published research on older adults; and to determine how engaging in occupations with/for others enables older adults to address their occupational needs for affirmation, companionship, and pleasure. A case study was used to provide a clinical interpretation of the findings. If occupational therapists routinely address the issue of staying connected in their work with older clients, occupational therapy practice will change and better reflect the profession’s full potential.

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CHAPTER 1: INTRODUCTION

There is considerable evidence to show that doing things with others is a critical component of aging successfully (e.g., Bowling & Dieppe, 2005; Chen, Hung, Lin, Haung, & Yang, 2011; Depp & Jeste, 2006). In fact, research findings suggest that those older adults who do not stay active and connected are at greater risk for infection, cognitive decline, depression, reduced health status, and even mortality (e.g., Cornwell & Waite, 2009). Conversely, those who stay active and connected are less likely to experience disability (Conroy, Golden, O'Neill, & McGee, 2010; Mendes de Leon, Glass, & Berkman, 2003; Rowe & Kahn, 1997). However, changes in roles (e.g., work role, spousal role), loss of social companions, restricted mobility, lack of transportation, and changes in their abilities to pursue former interests and/or engage in old or new social occupations (i.e., occupations done with and for others) particularly challenge older adults opportunities to stay active and connected (Avlund, Lund, Holstein, & Due, 2004; Cornwell & Waite, 2009; Glass, Mendes de Leon, Marottoli, & Berkman, 1999).

Despite growing awareness in aging research of the importance of supporting older adults to remain active and connected, this concept has not been translated into current occupational therapy practice. Instead, current practice with older adults continues to be focused primarily on enhancing older adults' independent and competent performance of self-care occupations (e.g., toileting, bathing, dressing), and secondarily of home maintenance occupations (e.g., preparing a meal, cleaning, doing laundry) (Clemson & Laver, 2014; Daley, Cristian, & Fitzpatrick, 2006; Gage, 2003; Jonsson, Josephsson, & Kielhofner, 2001; Trentam & Dunal, 2009). This approach is guided by

the idea that many older adults want to remain in their own homes (Benefield & Holtzclaw, 2014; Peace, Holland, & Kellaheer, 2011). To do so, they must be able to perform their self-care occupations safely and independently. If they are unable to do this, they will need the support and assistance of others.

While this is an important role, occupational therapists must also recognize that they can and should play a role in supporting their older adult clients to engage in social occupations (i.e., activities with and for others that are personally meaningful and relevant), or, put in other words, stay active and connected. However, given the traditional conceptualization of occupations as either being related to self-care, productivity or leisure (Hammell, 2009a, 2009b; Reed, Hocking, & Smythe, 2011; Townsend & Polatajko, 2007), occupational therapists have not fully recognized the value and potential of occupations outside of these traditional categories (Jonsson, 2008). In more recent years, occupational therapists have been challenged to consider whether their clients' occupations enable them to adequately address their full range of occupational needs (Doble & Caron Santha, 2008; Nilsson, Lundgren, & Liliequist, 2012). This means ensuring that older adults have sufficient opportunities to engage in occupations that address their needs for accomplishment, affirmation, agency, companionship, coherence, pleasure, and renewal (Doble & Caron Santha, 2008). Efforts to enhance older adults' abilities to perform self-care and home maintenance occupations help older adults to stay active and may address their needs for accomplishment, coherence, agency and renewal. However, such occupations do little to help them 'stay connected.' Consequently, their abilities to meet their needs for affirmation,

companionship, and pleasure by engaging in occupations with and for others may not be met.

There are several possible explanations for why occupational therapists may not have incorporated the concept of staying connected into their practices with older adults. First, occupational therapy language and concepts are not used in aging literature outside the profession. For example, in non-occupational therapy research literature reference is typically made to doing ‘activities’ rather than ‘occupations;’ thus, there is often little evidence that the meaning and relevance of activities has been taken into consideration. This makes it more challenging for occupational therapists to incorporate research that promotes the concept of older adults staying connected directly into current practice. Second, there is significant non-occupational therapy research literature related to older adults social ties, relationships and networks. However, this research often does not link activities to these connections. In fact, Litwin and Shiovitz-Ezra (2006) suggest that the quality of older adults social relationships is more important than the actual activities that they do. Finally, the idea of ‘doing for others’ is often presented as a means for older adults to stay active (Bacsu et al., 2014). The notion that doing for others may also enable them to stay connected has not been extensively explored.

As Falan (2010) noted, clinicians and researchers are more likely to share a common understanding of a concept when the attributes or characteristics of that concept have been described in terms they understand. Thus, the first step that must be taken to incorporate the concept of staying connected into occupational therapists’ practices with older adults is to translate existing literature into occupational therapy language. However, in order to develop theory and knowledge, it is essential that key concepts be defined

clearly (Cronin, Ryan & Coughlin, 2010). Failure to define and understand a concept before embarking on research can compromise the validity of the findings (Cronin et al., 2010). Concept clarity is also essential for the development of effective screening tools, interventions and tests to measure the outcomes of those interventions (Corcoran, 2007). We cannot expect to be able to evaluate and measure a concept without first having a clear understanding of it.

Therefore, this research project was designed to examine the congruence between the concepts of ‘staying connected,’ and ‘engaging in occupations with and for others’ within published research on older adults; and to determine, from the published literature, how engaging in occupations with and for others enables older adults to address their occupational needs of affirmation, companionship, and pleasure. One of the challenges in embarking on this study was that the concepts of staying connected, occupational needs, and more specifically, the occupational needs for affirmation, companionship and pleasure were inconsistently used in the research literature related to older adults. In fact, within the broader research literature, terms such as social engagement, social interaction, social networks and social participation are more likely to be found. Given the array of terms used across different disciplines within the aging literature, a scoping review methodology was selected as the most appropriate means to examine the primary research question: how does engaging in occupations with and for others (or staying connected) enable older adults to meet their occupational needs for affirmation, companionship and pleasure? Scoping reviews allow a flexible, but thorough approach to rigorously collect, evaluate, and disseminate findings from existing research (Arksey &

O'Malley, 2005; Levac, Coquhoun, & O'Brien, 2010; McKinstry, Brown, & Gustafsson, 2014).

This scoping review was conducted using the five-stage methodology outlined by Arksey and O'Malley (2005). These stages include: (1) identifying the research question; (2) identifying relevant studies; (3) selecting relevant studies; (4) charting the data; and (5) collating, summarizing and reporting the results. Once the literature search was completed, the first step to addressing the primary research question involved carefully reviewing how the constructs of social engagement, social interaction, social participation and social networks were examined/discussed within the context of the research literature related to aging. The second step involved determining if and how these constructs inform occupational therapists' understanding of older adults' occupational engagement with and for others. For the purpose of this study, occupational engagement was defined as an individual's involvement in a collection of activities and tasks that hold meaning, value and relevance to that individual (Polatajko et al., 2007b; Reid, 2008; Stevens-Ratchford, 2005) and provide him/her with opportunities to address his/her occupational needs including needs for accomplishment, affirmation, agency, coherence, companionship, pleasure and renewal (Doble & Caron Santha, 2008; Nilsson et al., 2012). The third step involved determining the potential that engaging in occupations with and for others has to enable older adults to meet their occupational needs for affirmation, companionship, and pleasure. This last step was explored by examining three secondary research questions: (1) how is meaning generated when older adults engage in occupations with and for others? (2) when engaged in occupations with and for others, does the nature of the relationship between the older adults and others (e.g., family, long-

standing friends, same aged peers) influence if and how older adults' occupational needs are met? and (3) how do older adults respond when they do not have opportunities to engage in occupations with and for others?

CHAPTER 2: BACKGROUND LITERATURE

2.1 Looking Beyond Occupational Performance

Historically, occupational therapists working with older adults have focused their attention on occupational performance (Polatajko et al., 2007a). Within the framework of occupational performance, the goal of occupational therapy has been largely to help clients perform their former occupations, even if in some adapted form. Thus, occupational therapists seek to determine *if* their clients can perform their occupations, and, if so, how independently and how competently can they perform them. Intervention efforts are then directed towards supporting clients through remediation and/or compensation to perform their former occupations (Daley et al., 2006).

Even though occupational therapists should consider their clients' productive and leisure occupations (Hammell, 2009a, 2009b; Reed et al., 2011), there has been a disproportionate focus in practice on older adults' abilities to independently perform self-care occupations such as toileting, bathing, dressing, preparing meals, and cleaning the home (Gage, 2003; Trentham & Dunal, 2009). This focus has been driven by the mandate of the health care system to discharge people from expensive hospital settings back into community and home settings where they can continue their recovery and rehabilitation at a reduced cost to the public (Hay et al., 2002). While occupational therapists may ask questions about clients' social lives in the course of completing their assessments, the reason for asking these questions is usually not to determine if their clients engage in occupations that enable them to address all of their occupational needs. It is far more likely that these questions are asked in order to determine whether their clients have access to others who potentially can provide physical support when they need assistance or are unable to perform their self-care occupations independently (Daley et al., 2006).

Consequently, little, if any, consideration is given to whether they were or will be able to engage in other valued occupations that enable them to stay connected. Moreover, occupational therapists typically do not guide their clients to examine their occupational repertoires to determine if they enable them to address their full range of occupational needs (Doble & Caron Santha, 2008; Nilsson et al., 2012).

When occupational therapists focus on specific areas of occupational performance, such as whether clients can dress themselves or prepare a meal, without considering the full range of occupations that comprise their clients occupational repertoires, they are more likely focusing on only a few occupational needs, specifically, accomplishment, agency and coherence, to the exclusion of others (Polatajko et al., 2007c). For example, supporting clients to engage in former occupations competently and confidently through remediating skills, compensating for deficits and/or adapting the physical environment, may help enhance clients' occupational needs for accomplishment, agency and coherence. However, clients' other occupational needs may be overlooked, particularly needs for affirmation, companionship, and pleasure. In many cases, it is these specific occupational needs that are fulfilled when they engage in occupations with and/or for others (Doble & Caron Santha, 2008).

In an effort to ensure that occupational therapists consider more explicitly the meaning, importance and degree of satisfaction that occupations bring to their clients' lives (Polatajko et al., 2007a), occupational therapists have been challenged to look beyond occupational performance and focus on the broader concept of occupational engagement (Polatajko et al., 2007a). In more recent years, occupational therapists have been challenged to consider whether their clients' occupations enable them to adequately

address their full range of occupational needs, that is, their needs for accomplishment, affirmation, agency, coherence, companionship, pleasure and renewal (Doble & Caron Santha, 2008; Nilsson et al., 2012). These needs enable individuals to experience meaning and satisfaction (Doble & Caron Santha, 2008; Polatajko et al., 2007c). When individuals engage in occupations that enable them to achieve competence in skills and attain goals, their need for accomplishment is met (Doble & Caron Santha, 2008; Piskur, Kinebanian, & Josephsson, 2002). Their need for affirmation is fulfilled when individuals engage in occupations that contribute to their self-worth (Cipriani, Faig, Ayres, Brown & Johnson, 2006). While affirmation can and is self-generated, it often occurs when individuals do things with and for others (Doble & Caron Santha, 2008). Individuals' need for agency is addressed when they perceive that they have control or influence over when, how, or with whom they engage in their occupations (Doble & Caron Santha, 2008; Piskir et al., 2002). Coherence is experienced when individuals engage in occupations that connect them with their past, present and future (Doble & Caron Santha, 2008). The need for companionship is often met when individuals' engage in occupations with others who share similar interests, values and goals (Doble & Caron Santha, 2008). Pleasure is derived when individuals engage in occupations that generate feelings of happiness, joy and contentment (Doble & Caron Santha, 2008). Such feelings of pleasure may be experienced when persons engage in occupations on their own or with others. Finally, the need for renewal is fulfilled when individuals engage in occupations that enable them to feel physically and mentally rejuvenated (Doble & Caron Santha, 2008).

Doble and Caron Santha (2008) have further challenged occupational therapists to consider not just what their clients did or want to do, but why and how these occupations

support (or constrain) their development, health and well-being. This shift in focus will also help occupational therapists to consider more directly the relation between their clients' occupations and their development, health and well-being (Hammell, 2009b; Jonsson, 2008). More specifically, Doble and Caron Santha (2008) proposed that individuals experience higher levels of occupational well-being when they are able to address their full range of occupational needs within the context of their everyday occupations. Thus, individuals will choose, when they can, to engage in a variety of occupations that will address their unique occupational needs. This means that rather than focusing exclusively on what clients do and how competently they do these occupations, occupational therapists must also make an effort to determine whether clients' occupations enable them to adequately address all of their occupational needs.

When focusing on addressing occupational needs through engaging in occupations, occupational therapists must keep in mind that not all individuals will experience the same occupation in the same way (Polatajko et al., 2007c; Watters, Pearce, Backman, & Suto, 2013). Meaning is shaped not only by cultural and societal values, beliefs and attitudes, but also by personal values, beliefs and attitudes (Doble & Caron Santha, 2008; Hammell, 2004; Polatajko et al., 2007c). Occupations cannot be prescribed without thoughtful consideration of the meaning individuals ascribe to those occupations. For example, attending a yoga class may enable both Jane and John to be active. Jane socializes with classmates before and after class and thus, attending yoga class enables Jane, at least in part, to stay connected. In contrast, John focuses his attention on learning and practicing the various poses. Thus, John's ability to stay connected will need to be met by engaging in other occupations.

While current occupational therapy practice models such as the Canadian Model of Occupational Performance and Engagement (Townsend & Polatajko, 2007) guide occupational therapists to clarify why clients select occupations these practice models do not help therapists to determine if and how a client's engagement in occupations creates meaning and satisfaction (Doble & Caron Santha, 2008; Reed et al., 2011). Furthermore, in the Canadian Model of Occupational Performance and Engagement, individuals' social interactions and relationships are considered part of the social environment (Mason & Reed, 2009; O'Brien, Dyck, Caron, & Mortenson, 2002) and therefore, are often separated from occupation. However, there is an interdependence of the person and the environment that can enable or constrain engagement in occupations (Cutchin, 2004; O'Brien et al., 2002), particularly in the case of social occupations. A transactional relationship between the person and the environment occurs through occupation (Dickie, Cutchin, & Humphry, 2006) and therefore, environments (physical or social) and occupations cannot be separated from one another (Cutchin, 2004).

In order to more effectively incorporate these ideas into practice, occupational therapists need to evaluate and assess whether their clients' former or newly constructed occupational repertoires will enable them to adequately address their full range of occupational needs (Doble & Caron Santha, 2008; Polatajko et al., 2007a). More specifically, occupational therapists should guide their clients to explore three issues. First, why do they engage in the occupations that they do? Second, what do they hope to experience by engaging in these occupations, or in other words, what occupational needs do they hope to address? Finally, to what extent will the environments in which they engage in occupations support or hinder their abilities to address their occupational

needs? Using a client-centred approach to explore these issues will ensure clients have the opportunity to express their needs in relation to their chosen or desired occupations (Law, Baptiste, & Mills, 1995).

2.2 Occupational Therapy and Older Adults

Many older adults experience significant changes in their environments that may support or hinder their abilities to address their occupational needs. Thus, environmental factors are particularly relevant when working with this population. For example, as their partners/spouses and friends around them also age and become less mobile and able, succumb to illness, and/or die, older adults' social networks and the occupations that formerly enabled them to address their needs for companionship and pleasure will undergo significant change (Avlund et al., 2004). In addition, relocating from communities or homes where they have lived for many years in order to take up residence in smaller apartments or to live with family will often reduce the amount of contact they have with former friends. Furthermore, when older adults relocate to long-term care facilities their options to continue to engage in occupations with family, friends, and other healthy adults in the community can also be reduced (Buys, 2001; Dupuis-Blanchard, Neufield, & Strang, 2009). These changes can decrease many older adults' access to former occupations and they will likely have less contact with friends and colleagues with whom they did these occupations. Thus, their abilities to stay active and, in particular, to stay connected may be compromised.

The question is, how can occupational therapists more fully address the occupational concerns of older adults and support them to stay connected? Presently, there is no explicit obligation to address clients' full range of occupational needs within

occupational therapy models of practice and occupational therapy literature (Doble & Caron Santha, 2008; Hammell, 2009b). Moreover, many clients have a limited understanding of occupational therapy and therefore, older adults may not expect that occupational therapists can help them stay connected with others. In many settings, when working with older adults, occupational therapists focus their attentions on older adults' abilities to perform self-care occupations more competently in an effort to help clients resume their former occupations (Clemson & Laver, 2014; Gage, 2003; Jonsson et al., 2001; Trentham & Dunal, 2009). Therefore, asking clients what their occupational concerns are in a practice context where the focus is on competent and independent performance of self-care occupations is unlikely to encourage clients to share concerns they may have about their ability to address their needs for affirmation, companionship and pleasure. Unless directly asked, clients are unlikely to think of raising such issues with their occupational therapists. If, however, occupational therapists broaden their focus to helping older adults age more successfully, clinical practice could begin to look different. This would mean focusing more on enabling older adults to engage in occupations that help them to stay connected.

However, in order to initiate this change, we need to have a much clearer understanding of some key concepts. For example, is being involved in activities with others the same as engaging in occupations with others? Within the successful aging research, the idea of 'doing' is typically presented in an overly simplistic manner. Thus, the suggestion has been made that providing individuals with opportunities to be with others without considering what they are doing and why they are doing it is all that is required for successful aging (Litwin & Shiovitz-Ezra, 2006). The meaning persons

ascribe to what it is they are doing with others is given little or no attention. It is this imprecise language that hampers occupational therapists' abilities to integrate these findings into occupational therapy theory and models. However, rather than simply dismissing the successful aging literature because of differences in language, occupational therapists must determine if the research findings can clarify our understanding of older adults' occupational lives and provide insights into how engagement in social occupations affects older adults' occupational well-being.

Currently, the process of translating these findings of broader research related to aging into occupational therapy practice is further hindered by the references within the aging literature to a wide range of related but different concepts. This includes concepts such as social engagement, social interaction, social networks and social participation, as well as loneliness and isolation. While social engagement, interaction and participation may be different terms for much the same thing (i.e., doing things with others in a social setting), social networks refer to the social ties or relationships people have that provide them with opportunities to connect with network members (Ashida & Heaney, 2008; Berkman, Glass, Brissette, & Seeman, 2000).

Many older adults' social networks will diminish in size as a result of loss of social companions through illness and death, changes in social roles, lack of transportation, restricted mobility, and even hearing loss may compromise their abilities to engage in occupations with and for others (Blanchard, 2013). While the size of the network itself is less important, a significant reduction in size may place them at greater risk for experiencing social isolation and loneliness (Heylen, 2010; Victor, Scambler, Bowling, & Bond, 2005). Objectively, social isolation is experienced when individuals

have very limited interactions with others (Nicholson Jr., 2009). Social isolation has been correlated with higher levels of mortality and morbidity in both general population samples and samples with established morbidities (Brummett et al., 2001; House, 2001). However, simply observing or evaluating objective levels of social contact and/or interaction with others does not provide insights into whether individuals are experiencing loneliness. Instead, loneliness results when there is a discrepancy between an individual's desired and actual levels social relationships or contact (Peplau & Perlman, 1982; Perlman, 2004; Stanley et al., 2010). Loneliness may also be experienced when older adults have inadequate opportunities to engage in occupations with and for others. Thus, loneliness, rather than being synonymous with social isolation, is a subjective experience (Heylen, 2010; Peplau & Perlman, 1982). Even with low levels of involvement with others, some individuals may not experience loneliness (Perlman, 2004). However, older adults may feel less lonely when they are provided with opportunities to stay connected or engage in occupations with and for others.

For example, findings from a study by Kirkevold, Moyle, Wilkinson, Meyer, and Hauge (2013) emphasized the need for older adults to have opportunities to engage in activities with others beyond their family members. They found that those older adults who maintained connections with others outside their families were less likely to identify themselves as lonely; but some older adults may still feel lonely even when they frequently engage with others (Kirkevold et al., 2013). Thus, loneliness is more likely to be experienced when opportunities to stay connected fail to address individuals' own personal needs and expectations for companionship and belonging (Heylen, 2010;

Stanley et al., 2010). Both Kirkevold and colleagues (2013) and Smith (2012) found that older adults who stayed connected were less likely to experience loneliness.

The challenge facing occupational therapists is how to determine if these concepts are related, and, more importantly, if and how they might assist occupational therapists to change their current practices in order to more fully address their clients' occupational needs. Thus, the purpose of this study is to determine how engaging in occupations with and for others addresses older adults needs for affirmation, companionship and pleasure.

CHAPTER 3: METHODS

3.1 Research Design

This study was designed with the overall goal of helping occupational therapists incorporate the broader research on successful aging into their practices; or in other words, to provide insights into the occupational nature of staying active and connected. This was done by systematically examining the existing research literature to provide insights into the primary research question: how does engagement in occupations with and for others enable older adults to meet their occupational needs, specifically their needs for affirmation, companionship and pleasure?

Systematic and scoping reviews are designed to rigorously collect, evaluate, and disseminate findings from existing research to answer a defined research question (Arksey & O'Malley, 2005; Levac et al., 2010; McKinstry et al., 2014). In addition to the primary research question, three secondary research questions were examined: (1) how is meaning generated when older adults engage in occupations with and for others? (2) when engaged in occupations with and for others, does the nature of the relationship between the older adults and others (e.g., family, long-standing friends, same aged peers) influence if and how older adults' occupational needs are met? and (3) how do older adults respond when they do not have opportunities to engage in occupations with and for others?

Whereas a relatively narrow range of independent studies that have been assessed to be of high quality are included in a systematic review (Arksey & O'Malley, 2005), a wider range of material, that is, qualitative and quantitative research studies, as well as relevant non-research literature can be incorporated in a scoping review (McKinstry et al.,

2014; Rumrill, Fitzgerald, & Merchant, 2010). Thus, for this research a scoping review was used to not only clarify the occupational nature of staying connected but to also identify gaps in the existing research literature.

Since the majority of the literature reviewed was not published in occupational therapy specific journals, it was important to carefully consider the definitions of key concepts such as occupation, affirmation, companionship, and pleasure. Since the term activity is more likely to be used in non-occupational therapy literature, ‘activities’ were only considered to be ‘occupations’ if they could be judged to hold meaning, value and relevance to the participants or subjects (Townsend & Polatajko, 2007). This was determined through researcher and participant subjective comments where applicable and by identifying that the research participants were able to freely choose to engage in the activities. Affirmation was defined as the feelings individuals experience when they recognize that the things they do, that is, their occupational choices and performances, are worthwhile and valued by others (Doble & Caron Santha, 2008). Companionship was defined as feelings of sense of belonging and sometimes intimacy that occur through engagement in occupations with others who share similar interests, values and goals (Doble & Caron Santha, 2008). Finally, needs for pleasure were judged to be met when persons engaged in occupations that generated feelings of happiness, joy and contentment (Doble & Caron Santha, 2008).

Arksey and O’Malley’s (2005) five-stage methodological framework was used to guide the process of completing the scoping review. The stages include: (1) identifying the research question (described in above section); (2) identifying relevant studies; (3) selecting relevant studies; (4) charting the data; and (5) collating, summarizing and

reporting the results. Due to limitations and resources, an optional sixth stage, consultation exercise, which provides an opportunity for stakeholders to suggest additional references and insights beyond the literature generated by the search (Arksey & O'Malley, 2005; Levac et al., 2010; McKinstry et al., 2014), was not completed.

3.1.1 Identifying and Selecting Relevant Studies

Appropriate search terms were identified, first by completing a preliminary review of the aging literature, and then by consulting a university librarian. Key search terms related to the concept of engagement in occupations with and for others were identified including: social engagement, social interaction, and social participation. The term social networks was also included as a key search term as it was found to include the social ties and relationships that enable individuals to connect and engage with one another. Although initially considered, the terms loneliness and social isolation were excluded. In the aging literature, these terms often refer to level of contact or interactions with others. For example, social isolation has been found to occur when individuals lack or have limited interactions with others (Nicholson Jr., 2009). Conversely, loneliness has been found to be more prevalent when there is a discrepancy between an individual's desired and actual levels social relationships or contact (Peplau & Perlman, 1982; Perlman, 2004; Stanley et al., 2010). Therefore, while loneliness and social isolation reflect possible negative consequences of not having opportunities for occupational engagement with/for others, these terms do not necessarily directly relate to occupation and were not the primary focus of this review.

Since the focus of this study was older adults' engagement in occupations with and for others, only those articles that were focused on older adults (i.e., persons who

were 65 years and older) were considered for review. There was one exception: studies that included adults under the age of 65, but where the mean age of the sample population was 65 years or older, were also considered for review.

In summary, the search terms used to identify appropriate studies included *social engagement, social interaction, social participation, social networks, activities, aging, aged* and *aged 80, and older*. The term *occupation(s)* was not used, as it was unlikely to be prevalent in non-occupational therapy literature. Relevant literature was identified from studies listed in the following electronic databases: CINAHL, MEDLINE, PsycARTICLES, PsycINFO, Social Work Abstracts, SocINDEX and SPORTDiscus. Quantitative research studies, qualitative research studies, studies using mixed methods, theoretical papers, and position statements, were all considered appropriate for review. In order to obtain the most recent literature available, only articles and studies published in English since 2000 were reviewed.

The initial search, conducted on September 1st, 2013, yielded 643 articles. Specific inclusion/exclusion criteria (see Appendix A) were used to determine if the abstracts generated from the search should be reviewed further. When the relevance of an article to the overall research question and three secondary research questions was unclear, the researcher obtained and scanned the full article. Consequently, the initial pool of 643 articles was reduced to 43 articles. While eight of the 43 articles supported the idea that engagement in activities or occupations with and for others is beneficial for older adults (i.e., to improve quality of life), they provided no further evidence or insights into how engagement in occupations with and for others (or staying connected) enabled older adults to meet their occupational needs, specifically for affirmation, companionship

and pleasure. Thus, the scoping review was based on a total of 35 articles (see Appendix B). The flow chart in Appendix C provides an outline of the process used to include/exclude articles from the initial search. Of the 35 articles included in the scoping review, nine referred to the term social engagement, five referred to social interaction, fifteen referred to social networks and six referred to social participation. Twelve of the articles included adults under the age of 65, but in all of these studies, the mean age was 65 years or older.

3.1.2 Data Extraction

As suggested by Levac and colleagues (2010), to increase data extraction accuracy both the researcher and thesis supervisor independently reviewed five articles randomly selected from the 35 identified articles. The researcher and thesis supervisor then met to discuss and compare the data extracted from these papers. This step was completed to ensure that the researcher used a consistent approach to summarize the data from these initial studies and in a way that would enable the researcher to address the research questions. For each article, the following information was extracted: (a) author(s)/year; (b) study title; (c) full citation; (d) type of paper (e.g., research, theoretical, position statement); (e) aim(s) of the study; (f) key search term(s) (i.e., social engagement, social interaction, social participation, and/or social networks); (g) sample population; (h) summary of findings; (i) research design; and (j) potential limitations or biases. Data from all 35 selected articles were recorded using an Excel spreadsheet (see Appendix D). Definitions of search terms (i.e., social engagement, social interaction, social participation, and/or social networks) within the article were also extracted and recorded in Tables 1 to 4.

Scoping reviews are not designed to thoroughly evaluate study quality. However, in order to judge the appropriateness of the study designs to answer the question, identify potential study biases or conflicts of interest, and determine whether the data justified the conclusions made by the authors, guidelines for critically reviewing quantitative studies (Law et al., 1998a) and qualitative studies (Law et al., 1998b) were used. These guidelines for conducting critical reviews of the literature were developed by the McMaster University Occupational Therapy Evidence-Based Practice Research Group for use by occupational therapy researchers, students and clinicians (Law et al., 1998a; Law et al., 1998b).

3.1.3 Data Analysis

After the data were extracted, steps were taken to evaluate (a) how the four search terms were described/defined in the papers, (b) how consistently the search terms were defined across the studies reviewed, and (c) the extent to which the concept of engagement in occupations with and for others was made explicit within these definitions. These steps included (1) examining the extracted definitions of the search terms from each article, (2) comparing the definitions across the studies reviewed, and (3) examining the search term definitions from an occupational perspective. As noted earlier, extracted data from each study was also examined the primary research question, that is, how does engaging in occupations with and for others (or staying connected) enable older adults to meet their needs for affirmation, companionship and pleasure? And three secondary questions: (1) how is meaning generated when older adults engage in occupations with and for others? (2) does the nature of the relationship between the older adults and others (e.g., family, long-standing friends, same aged peers) influence if and how older adults'

occupational needs are met when they are engaged in occupations with and for others? and (3) how do older adults respond when opportunities to engage in occupations with and for others are not available? The information from the reviewed papers was compared and synthesized under themes to answer the primary and secondary research questions. This information was then recorded in chart format (see Appendix E).

Lastly, a case study, Case 8.3 – Mary - from the publication *Enabling Occupation II: Advancing an Occupational Therapy Vision for Health, Well-being, & Justice Through Occupation* (Polatajko et al., 2007a) provided a clinically relevant context in which to translate and present the scoping review findings. It was hoped that using a familiar case study from this seminal occupational therapy textbook would help to illustrate how the study findings can be applied to address older adults' occupational needs, particularly those derived from engaging in occupations with and for others, in occupational therapy clinical practice. The specific case was a 74 year old widow, Mary, who had bilateral lower extremity amputations and multiple co-morbidities, that have caused her to experience decreased independence with self-care occupations. This decline in occupational performance resulted in the need for Mary to move from living independently in a seniors' apartment complex to a nursing home. These changes in her social and physical environments reportedly contributed to feelings of discouragement and depression. To demonstrate how the findings of this scoping review can be applied to address older adults' occupational needs, particularly those derived from engaging in occupations with and for others, this case study was examined through three specific questions: (1) how did Mary's engagement in her past occupations enable her to address her occupational needs for affirmation, companionship and pleasure? (2) how has moving

into the nursing home disrupted Mary's ability to address her occupational needs, particularly for affirmation, companionship and pleasure? and (3) how might an occupational therapist help Mary address her occupational needs?

CHAPTER 4: RESULTS

One of the main challenges faced in answering the primary research question (how does engagement in occupations with and for others or staying connected enable older adults to meet their occupational needs for affirmation, companionship and pleasure?) was the varied terms used to describe key concepts. This was anticipated and it was the reason for using such diverse search terms as social engagement, social interaction, social networks and social participation. However, the greater challenge was that regardless of the terms used, clear definitions were rarely found in the papers reviewed. When terms were defined, there was considerable variation in these definitions. The variety of definitions used within the literature for each of the four key search terms and the frequency with which definitions were provided are outlined in Tables 1 through 4.

As can be seen in Table 1, nine articles made reference to social engagement. However, operational definitions of social engagement were only found in six of the articles. That said, three definitions made specific reference to involvement in activities with others or in the presence of others. MacKean and Abbott-Chapman (2012) took into consideration an individual's experience of interacting with others by suggesting that social engagement occurs when persons are engaged in activities that hold meaning to them. In contrast, Croezen, Haveman-Nies, Alvarado, Van't Veer, and De Groot, (2008) and Rozanova, Keating and Eales (2012) delineated specific types of activities done with others that would be counted (e.g., volunteering, participation in social clubs, elderly sports) The problem with delineating specific types of activities is that they may not be meaningful to all individuals.

Table 1. Definitions for Social Engagement

Year	Author	Presence of an Operational Definition	Definition
2013	Beech & Murray	Yes	Level of <i>contact with others</i> , attitudes towards involvement in <i>social activities</i> , the frequency of doing social activities, and level of involvement in social outings.
2007	Cipriani	No	Not defined.
2008	Croezen et al.	Yes	Engagement in six patterns of <i>activities</i> that included voluntary (i.e., participating in social clubs, volunteer work, work for church), fitness (i.e., cycling, elderly sports), visiting (i.e., receiving visitors), hobbies (i.e., visiting the library, Internet/E-mail, courses), work (i.e., paid work, doing jobs at others, baby-sit grandchildren) and care provision (i.e., care for sick partner or others).
2011	Fisher & Gosselink	No	Not defined.
2012	MacKean & Abbott-Chapman	Yes	Engagement in activities with others that hold meaning, provide enjoyment, and <i>involve social interaction</i> .
2011	Middling et al.	Yes	Engagement in activities with others.
2009	Park et al.	Yes	Engaging in social relationships through activities.
2010	Reichstadt et al.	No	Not defined.
2012	Rozanova et al.		Involvement in activities (i.e., volunteering, leisure with friends and family members, caregiving, and paid work) that are performed <i>in the presence of, or in relation to, other people</i> .

As can be seen in Table 2, social interaction was the focus of only five of the 35 articles that were reviewed. Although operational definitions of social interaction were provided in four of the articles, the definitions were consistently simplistic; that is, they defined social interaction as socializing with others. Dwyer and Hardill's (2011) definition was even more simplistic, that is, interacting socially. In other words, these definitions use the same terms to define the concept itself.

Table 2. Definitions for Social Interaction

Year	Author	Presence of an Operational Definition	Definition
2013	Creech et al.	Yes	<i>Socializing with others.</i>
2011	Dwyer & Hardill	Yes	<i>Interacting socially with others.</i>
2009	Schwingel et al.	No	Not defined.
2010	Skingley & Bungay	Yes	<i>Socializing with others</i> through group activities.
2010	Stathi et al.	Yes	<i>Socializing</i> and <i>connecting with others.</i>

Social networks was the most commonly used term; that is, 15 of the 35 articles made reference to social networks (see Table 3). While only 10 of these articles provided operational definitions, reference was consistently made to relationships or social ties with others (i.e., family, friends, neighbours, and service providers) in all of these definitions (see Table 3). Five definitions suggested that support occurs through these relationships or social ties and two included the reciprocal nature of some relationships. In these studies, reciprocity provided opportunities for older adults not only to be recipients of support, but to also provide instrumental support for others or, said in another way, engage in occupations for others.

Table 3. Definitions for Social Networks

Year	Author(s)	Presence of an Operational Definition	Definition
2006	Aday et al.	Yes	<i>Contact with friends and relatives</i> with a focus on <i>social support</i> from this network.
2005	Cant & Taket	Yes	<i>Relationships that connect individuals to one another</i> and enable them to interact with their environment.
2008	Eloranta et al.	Yes	<i>Contacts and relationships with close relatives, friends and home care professionals</i> through which <i>support</i> is provided.
2006	Greaves & Farbus	No	Not defined.
2011	Heenan	Yes	<i>Frequency of social contact</i> with others, particularly with family members.
2012	Learmonth et al.	Yes	<i>Relationships</i> with families, neighbours and service providers.
2011	Maidment & MacFarlane	No	Not defined.
2004	Milligan et al.	Yes	<i>Supportive structure of others</i> (i.e., friends) through which individuals can acquire skills and enhance their sense of self. <i>Relationships are often reciprocal</i> and have an inclusive, protective and preventative function.
2012	Moody & Phinney	No	Not defined.
2011	Piercy et al.	No	Not defined.
2008	Routasalo et al.	No	Not defined.
2001	Sherer	Yes	<i>Social connections with friends, family, and the community</i> that provide positive experiences, companionship, assistance, emotional support and a sense of role in the community.
2010	Sole et al.	Yes	<i>Connections with others.</i>
2010	Tse	Yes	<i>Relationships with family and friends</i> as well as <i>interdependent relationships.</i>
2006	Tse & Howie	Yes	<i>Social contact and interaction with others</i> outside the home.

Finally, social participation was referred to in six of the 35 articles, but operationally defined in only five of them (see Table 4). Definitions of social participation included doing social activities, particularly outside the home, that contribute to society and are enjoyable.

Table 4. Definitions for Social Participation

Year	Author	Presence of an Operational Definition	Definition
2011	Andonian & MacRae	Yes	<i>Organized patterns of behaviour</i> related to individual and group roles, routines and patterns of social engagement.
2012	Gilmour	Yes	<i>Family or friendship activities</i> outside the household, church or religious activities (i.e., services, committees or choirs), sports or physical activities with other people, other recreational activities involving other people (i.e., bingo, hobbies, and other games), educational and cultural activities involving other people (i.e., attending courses, concerts or visiting museums), service club or fraternal organization activities, neighbourhood, community or professional association activities, and volunteer or charity work.
2009	Levasseur et al.	Yes	Performance of daily activities necessary to the survival of personal or social roles that ensure individuals' development and <i>contribution to society</i> .
2008	Mars et al.	Yes	<i>Social interaction, contributions to society</i> and involvement in organizations and exercising influence.
2010	Savikko et al.	No	Not defined.
2004	Stevens-Ratchford & Cebulak	Yes	<i>Engagement in social occupations</i> that involve stimulating and enjoyable interchanges.

In light of the diverse definitions found within the 35 reviewed articles, inferences had to be made regarding the comparability of terms across the literature in order to

answer the research questions. The common denominator across all four of the search terms was the notion of connecting with others. The idea that staying connected occurs when persons engage in occupations with and for others was most evident in the articles in which the search terms social engagement and social participation were defined. In contrast, the concept of engaging in occupations with and for others was rarely included in the definitions of social interaction and social network(s).

4.1 Meeting Occupational Needs by Engaging in Occupations with and for Others

4.1.1 Affirmation

All 35 articles were examined to determine if references were made to the concept of affirmation whether that specific term was used or not. Although individuals can recognize their own worth and value in the things they do, recognition for individuals' occupational choices and performances is often more immediate and overt when individuals engage in occupations with and/or for others (Creech, Hallam, Varvarigou, McQueen, & Gaunt, 2013). The term affirmation was only specifically used in two articles (Creech et al., 2013; Fisher & Gosselink, 2008). Instead, reference was more often made to participants perceiving that their actions were worthwhile. The term self-worth was specifically used in two articles (Middling, Bailey, Maslin-Prothero, & Scharf, 2011; Moody & Phinney, 2012) and in both cases, the term was used to convey the idea of "feeling valued by others and valuable to others" (Hammell, 2009b, p. 111).

Despite the differences in terminology used, there was some evidence that older adults are more likely to receive acknowledgement and recognition for their actions and/or contributions when they have opportunities to make meaningful contributions to others and/or their communities (Fisher & Gosselink, 2008; Mars, Kempen, Mesters,

Proot, & van Eijk, 2008; Middling et al., 2011; Moody & Phinney, 2012). For example, members of an art guild for older adults cited that they felt a sense of pride and satisfaction when they received recognition and positive feedback from others in the community who viewed their creations (Fisher & Gosselink, 2008). Through their collective efforts, these older adults experienced a sense of pride and felt valued by their peers and members of the broader community. Moody and Phinney (2012) described the responses of older adults who were considered to be at risk for becoming socially isolated. These older adults participated in a community arts program and then showcased their work within the community. The recognition they received for their artistic efforts from family and friends, fellow artists, as well as strangers (e.g., attendees at art exhibits, other artists) provided them with opportunities to address their needs for affirmation. In another study, older adults who lived in disadvantaged communities engaged in a community garden initiative (Middling et al., 2011). Gardening occupations provided these older adults with opportunities to better the local environment not just for themselves, but also for other residents. As a result of their efforts, they recognized that the physical appearance of their neighbourhoods was improved, and, more importantly, neighbourhood residents had new spaces and opportunities to connect. Middling and colleagues (2011) suggested that the participants derived a sense of satisfaction when others in the community acknowledged the gardens and the participants' efforts. Although the researchers did not refer to it as an occupation, they did suggest that gardening provided these older adults with opportunities to address their needs for affirmation.

Seven studies provided support for the idea that older adults' needs for affirmation are met when they engage in activities done with the goal of benefiting others (Aday, Kehoe, & Farney, 2006; Cipriani, 2007; Levasseur, Tribble, & Derosiers, 2009; Maidment & MacFarlane, 2011; Routasalo, Tilvis, Kautiainen, & Pitkala, 2008; Sole, Mercandal-Brotons, Gallego, & Riera, 2010; Stevens-Ratchford & Cebulak, 2004). Within these studies, doing for others included formal volunteering (e.g., involvement in church activities), assisting friends who were less able and caring for family members. Doing things for others not only enabled older adults to derive positive responses from others, but also enabled them to recognize that through their efforts, they could enrich the lives of others. For example, Maidment and MacFarlane (2011) described the experiences of older adults who were members of an informal peer-run craft group. The members gave their time and used their skills to create items for others in need (e.g., quilts for hospitalized children) and, in turn, derived a sense of purpose and value. Whether they ever received indications of appreciation from those who received the items they made or not, their engagement in these occupations enabled them to recognize their own value and worth, all of which could be said to have enabled them to address their needs for affirmation.

Older adults' needs for affirmation were also met when they engaged in occupations where they had opportunities to share the knowledge, skills and the wisdom they acquired over their lifetime with others (Learmonth, Taket, & Hanna, 2012; MacKean & Abbott-Chapman, 2012; Maidment & MacFarlane, 2011; Milligan, Gattrell, & Bingley, 2004; Middling et al., 2011; Tse, 2010; Moody & Phinney, 2012). For example, in a qualitative study by Learmonth and colleagues (2012), older women were

asked to identify which aspects of their community participation contributed to their well-being. One older woman shared that her participation in an orchestra band comprised of older adults enabled her to provide troubled youth with opportunities to learn how to create music. Another older woman in the same study described teaching other older adults how to take public transport as an alternative to driving in order to maintain their independence. Likewise, in a study by Milligan and colleagues (2004), older adults who participated in communal gardening on allotments reported that they benefitted and learned from one another's expertise and past gardening experiences. These two studies provide evidence that older adults are able to recognize their own worth and value when they engage in occupations where they can share their knowledge, skills and wisdom with others. These occupational opportunities, in turn, help them address their needs for affirmation.

4.1.2 Companionship

Within the literature reviewed, the terms companionship and sense of belonging were frequently used and defined in a way that was similar to how companionship was defined in this study (feelings of sense of belonging and sometimes intimacy that occur through engagement in occupations with others who share similar interests, values and goals) (e.g., Andonian & MacRae, 2011; Creech et al., 2013; Learmonth et al., 2012; MacKean & Abbott-Chapman, 2012; Middling et al., 2011; Moody & Phinney, 2012; Savikko, Routasalo, Tilvis, & Pitkala, 2010; Skingley & Bungay, 2010; Sole et al., 2010; Tse & Howie, 2005; Tse, 2010). Studies by Andonian and MacRae (2011) and Creech and colleagues (2013) provided evidence that older adults' feelings of belonging are enhanced when they engage in a wide range of occupations from volunteering with a

community organization to having a meal with friends. Savikko and colleagues (2010) also found that older adults' feelings of companionship were fostered when they engaged in occupations with their peers, whether it was painting, swimming or therapeutic writing. In these studies, the importance of engaging in activities that were meaningful (i.e., occupations) was highlighted. Rather than simply providing a set program of activities that everyone was expected to do, older adults' preferences and interests were taken into consideration. Creech and colleagues (2013) also found that a sample of older adults with an interest in music experienced feelings of belonging and relatedness when they participated in music-making groups (i.e., when they played instruments and/or sang with others). Together, these studies provide some evidence that when older adults engage in occupations with others that reflect their interests and goals, their needs for companionship are addressed.

The importance of older adults having opportunities to meet and connect with peers who had shared interests, values and experiences was reinforced in several studies (i.e., Cant & Taket, 2005; Fisher & Gosselink, 2008; Middling et al., 2011; Milligan et al., 2004; Skingley & Bungay, 2010; Sole et al., 2010; Stathi, Mckenna, & Fox, 2010; Stevens-Ratchford & Cebulak, 2004). Even the routine nature of every day occupations such as making dinner and eating meals with others was identified as providing older adults with important opportunities to maintain connections with their spouses, family and friends (Stevens-Ratchford & Cebulak, 2004). These naturally occurring occupations provided older adults with a forum to share anecdotes, experiences and feelings with others for whom they care. Several other studies provided evidence that more structured occupational experiences (e.g., engaging in recreation activities with others) also

provided older adults with opportunities to feel connected (Cant & Taket, 2005; Maidment & MacFarlane, 2011; Piercy, Cheek, & Teemant, 2011; Reichstadt, Sengupta, Depp, Palinkas, & Jeste, 2010; Stevens-Ratchford & Cebulak, 2004). However, the key factor in each of these studies was that the older adults engaged in occupations with others who were similarly aged and who had shared backgrounds, that is, had similar interests, values, and goals.

4.1.3 Pleasure

Doble and Caron Santha (2008) proposed that the need for pleasure is met when individuals engage in occupations that generate feelings of happiness, joy and contentment. The literature reviewed provided support for the concept that individuals' needs for pleasure are met when they engage in occupations with and for peers or friends (i.e., Aday et al., 2006; Cant & Taket, 2005; Creech et al., 2013; Dwyer & Hardill, 2011; Levasseur et al., 2009; Mars et al., 2008; Middling et al., 2011; Milligan et al., 2004; Skingley & Bungay, 2010; Sole et al., 2010; Stathi et al. 2010).

For example, in a study where participants engaged in creative (e.g., painting), exercise (e.g., Tai Chi) and/or cultural (e.g., exploring sound and music) group activities with similarly aged peers, they reported experiencing pleasure (Greaves & Farbus, 2006). However, their experience of enjoyment was enhanced when the program occupations were tailored to their individual interests; that is, when they were experienced as occupations. Likewise, MacKean and Abbott-Chapman (2012) reported that the participants of peer-run community organizations and groups experienced enjoyment when they had the freedom to choose (a) if they would participate, and (b) which occupations they would do. Providing these options enhanced participants' abilities to

derive pleasure whether they were engaged in hobbies (e.g., making model trains, growing bonsai), physical recreation (e.g., bowling, dancing) or service-related occupations (e.g., Meals on Wheels). Similarly, Learmonth and colleagues (2012) and Skingley and Bungay (2010) reported that older adults looked forward to engaging in occupations with others when the occupations were of personal interest to them. Together these findings reinforced the idea that older adults are more likely to experience pleasure when they have the opportunity to freely choose to engage in occupations that reflect their personal interests.

Pleasure, however, is not only derived from recreational or social occupations. Three studies also suggested that service-based occupations, that is, occupations done for the benefit of others, might also provide older adults with opportunities to experience pleasure (Heenan, 2010; Piercey et al., 2011; Reichstadt et al., 2010). During qualitative interviews with older adults on their perspectives of successful aging, Reichstadt and colleagues (2010) found that many older adults reported they derived enjoyment, stimulation and fulfillment from occupations that enabled them to help others. Similarly, Heenan (2010) found that the older adults living in rural farming communities reported deriving enjoyment from caring for their grandchildren. In many cases, this also enabled their adult children to work without having to make alternate childcare arrangements. In both studies, more focus was placed on what occupations the participants did rather than clarifying the extent to which these participants were able to freely choose to engage in service-based occupations. Consequently, it cannot be determined if the enjoyment they derived was addressing their needs for pleasure or affirmation by feeling good about helping others.

4.2 How Meaning is Derived

The literature reviewed supported the premise that persons can and do derive meaning when they engage in occupations with and for others, but how this is realized is less clear. Some insights, however, were garnered from those studies in which older adults' were involved in occupations that they did not perceive to be meaningful (i.e., Cant & Taket, 2005; Dwyer & Hardill, 2011; Park, Knapp, Shin, & Kinslow, 2009). In each of these three studies, researchers found that men, in contrast to women, were less likely to attend formal group programs. Men explained that they were not interested in the specific occupational opportunities offered within the various programs (e.g., playing bingo, attending coffee clubs). However, some men did attend. Those who attended indicated that they attended largely from a desire to appease the expectations of others (e.g., family, staff). They had little or no expectations that attending the program would provide them with opportunities to address their needs for affirmation, companionship, or pleasure. Rozanova and colleagues (2012) also described the experiences of older adults in rural communities who continued their volunteer roles in the community (e.g., at the food bank and church) not from a personal desire, but out of a sense of obligation (i.e., they perceived no one else in the community would step up and take over their roles). Under these circumstances, it is possible that the individuals' occupational needs were compromised (e.g., they may have experienced a diminished sense of agency). However, knowing that their personal sacrifices and actions assisted the needs of others to be met may have been a source of affirmation.

Several studies (i.e., Aday et al, 2006; Cipriani, 2007; Fisher & Gosselink; 2008; Heenan, 2010; Maidment & Marfarlane, 2011; Middling et al., 2011; Milligan et al., 2004; Moody & Phinney, 2012; Piercey et al., 2011; Routasalo et al., 2008; Tse & Howie,

2006) supported the idea that older adults derive meaning when they engage in occupations that, in turn, will benefit others; that is, enable them to do for others, provide others with support, and give back to their communities. These occupations provide possibilities for older adults to recognize their own value and worth, as well as receive recognition and positive feedback from others. Therefore, when older adults engage in occupations for others they may meet their occupational needs for affirmation. In his review of the literature, Cipriani (2007) found that despite their deteriorating health and their own need to have assistance to perform basic self-care occupations, older adults residing in nursing homes were more likely to engage in occupations and report experiencing satisfaction if they perceived that the occupations would benefit others. For example, they were more likely to engage with others to bake cookies for hospitalized children than to bake cookies solely for themselves. Similarly, Maidment and MacFarlane (2011) found that among older women who participated in informal, peer-run craft groups, meaning was generated when they did things for others in the community (e.g., made crafts, which, in turn, would be sold to raise monies for local charities). These findings suggest that the participants derived a sense of purpose from their actions and the knowledge that their actions would ultimately help others. Likewise, older adults who participated in a community-engaged art program conveyed that one of the things they valued about the program was that by sharing their artwork through public exhibits, they were able to give back to their community (Moody & Phinney, 2012). This was in sharp contrast to their many other daily experiences in which they were often the recipients of others' efforts.

For some older adults, meaning was derived when they experienced pleasure from the occupations in which they engaged. For example, in studies by Middling and colleagues (2011) and Milligan and colleagues (2004), the occupation of gardening provided participants with opportunities to experience enjoyment and pleasure. Although these two studies supported the notion that meaning is generated through engaging in occupations that address older adults need for pleasure, the evidence was limited. However, this is most likely a reflection of the literature that was reviewed, as the value of pleasure in ones' daily life was not the focus of the studies.

In the articles reviewed, it was suggested that some older adults experienced meaning through engaging in occupations that enabled them to address their needs for companionship (Aday et al., 2006; MacKean & Abbott-Chapman, 2012). For example, MacKean and Abbott-Chapman (2012) suggested that older adults who engaged in occupations with others derived meaning when they felt a sense of belonging or connection with their peers. Therefore, the literature reviewed provides preliminary evidence that older adults might experience meaning through engaging occupations that enable them to address their needs for companionship.

Although the current study was designed to examine if and how engaging in occupations with and for others would enable older adults to address three specific occupational needs, that is, affirmation, companionship and pleasure, the studies reviewed also provided some evidence that meaning is experienced when older adults engage in occupations that enable them to address other occupational needs (e.g., accomplishment, agency, coherence, and rejuvenation). For example, meaning was experienced when older adults engaged in occupations that provided them with

opportunities to experience accomplishment (Andonian & MacRae, 2011; Fisher & Gosselink; 2008; Middling et al. 2011; Milligan et al., 2004) whether the accomplishments were a result of an individual's personal effort or a collaborative group effort. Among those older adults who participated in communal gardening on allotments (Milligan et al., 2004), several conveyed that witnessing the results of their shared work provided them with a sense of accomplishment. Older adults also experienced meaning when they engaged in previously enjoyed occupations (Tse & Howie, 2005) that provided them with opportunities to feel a continued sense of connection to their pasts (i.e., address their needs for coherence). Andonian and MacRae (2011) also suggested that older adults derived meaning when they engaged in occupations that promoted personal wellness; that is, when they engaged in healthy routines and habits. Although it was not made explicit in the study by Andonian and MacRae (2011), achieving personal wellness could contribute to addressing older adults' need for renewal; that is, feelings of rejuvenation (Doble & Caron Santha, 2008).

There was considerable evidence that older adults are more likely to experience occupations as meaningful when they have choice and control over the selection of occupations (Creech et al., 2013; Fisher & Gosselink, 2008; MacKean & Abbott-Chapman, 2012; Maidment & MacFarlane, 2011; Moody & Phinney, 2012; Routasalo et al., 2008; Rozanova, et al., 2012; Tse, 2010). Several studies were designed to determine the impact of older adults participation in occupation-based groups and programs and, in most cases, it was clear that the participants chose to participate because the occupations offered were of interest to them (Creech et al., 2013; Fisher & Gosselink, 2008; Maidment & MacFarlane, 2011; Moody & Phinney, 2012; Routasalo et al., 2008; Tse,

2010). In a study by Routasalo and colleagues (2008), formal psychosocial rehabilitation groups were formed in an effort to address feelings of loneliness among older adults. However, participants were recruited to specific groups based on their personal interests (e.g., exercises, therapeutic writing, painting). Although groups had designated leaders, the participants had control over the occupations and could modify the program activities as they wished. The strong influence that these factors contributed to participants' sense of agency was made evident first by the very low attrition rate and secondly by the finding that 40% of the group participants decided to continue to meet even after the study had concluded. Therefore, these findings suggest that experiencing a sense of agency is important for older adults.

4.3 The Influence of the Nature of the Relationship between Older Adults and Others

The literature reviewed for this scoping review provided preliminary evidence that the nature or type of relationship between older adults and those with whom they engage in occupations can influence the extent to which their occupational needs are met. However, most studies reviewed were not specifically designed to examine the type and nature of the relationship between older adults and others. Therefore, specific conclusions regarding how these relationships influence whether older adults occupational needs are met cannot be made.

The participants in many of the studies reviewed were of similar ages and backgrounds; that is, they could be considered to be peers (i.e., Aday et al., 2006; Fisher & Gosselink, 2008; Gilmour, 2012; Greaves & Farbus, 2006; MacKean & Abbott-Chapman, 2012; Middling et al., 2011; Milligan et al., 2004; Moody & Phinney, 2012; Piercey et al., 2011; Reichstadt et al., 2010; Sherer, 2001; Skingley & Bungay, 2010;

Sole et al., 2010; Stathi et al., 2010). A few of the studies also suggested that new relationships were more likely to form when older adults had the opportunity to engage in occupations with others who were in similar situations (i.e., Aday et al., 2006; Greaves & Farbus, 2006; Routasalo et al., 2008; Savikko et al., 2010). On the other hand, some studies made reference to the relationship between older adults and others such as volunteers and service providers (Dwyer & Hardill, 2011), relatives/family (Eloranta, Routasalo, & Arve, 2008; Gilmour, 2012; Heenan 2010), and those whom they helped through their volunteer efforts (Piercey et al., 2011). Gilmour (2012) suggested it is the quality versus the quantity of social relationships that has the greatest impact on older adults health and well-being rather than the actual type of relationship (i.e., family versus friends).

In the literature reviewed, it seemed the occupations in which older adults engaged had a more significant impact on whether their occupational needs were met. For example, older adults were more likely to have their occupational needs for pleasure met when they engaged in occupations that were of personal interest to them (Learmonth et al., 2012; Skingley & Bungay, 2010; Sole et al., 2010). Likewise, older adults' needs for affirmation were addressed through engaging in occupations that are primarily done with the goal of benefiting others (Aday et al., 2006; Cipriani, 2007; Levasseur, et al., 2009; Maidment & MacFarlane, 2011; Routasalo et al., 2008; Sole, et al., 2010; Stevens-Ratchford & Cebulak, 2004). Therefore, these findings suggest that the actual occupations in which older adults engage may not only have had a stronger influence on whether their occupational needs can be addressed, but also on the quality of their social relationships.

Reciprocal relationships, that is, relationships in which individuals have equal opportunities to both receive and provide support, are more likely to develop when older adults have common or shared goals (Heenan, 2010; Learmonth et al., 2012; Maidment & MacFarlane, 2011; Milligan et al., 2004; Routasalo et al., 2008). Additionally, older adults' needs for companionship are more likely to be addressed when opportunities to develop reciprocal relationships are greater (i.e., Aday et al., 2006; Fisher & Gosselink, 2008; MacKean & Abbott-Chapman, 2012; Maidment & MacFarlane, 2011; Piercey et al., 2011; Skingley & Bungay, 2010; Sole et al., 2010; Tse, 2010). For example, many of the participants in studies by Maidment and MacFarlane (2011) and Stathi and colleagues (2010) reported developing relationships with similarly aged peers that extended beyond the structure of the formal groups in which they first met. Similarly, Routasalo and colleagues (2008) found that 40% of older adults who participated in occupation-based groups (e.g., painting, swimming, therapeutic writing) with age-similar peers formed specifically for the purposes of the study, continued to meet as a group after the study had concluded. Together these findings suggest that their shared interests and values enabled these older adults to form relationships with one another that enabled them to explore the possibility of engaging in a wider array of occupations; that is, occupations that took place outside the structure of the group. Some older adults perceive themselves to be primarily recipients of service and therefore, reciprocity in relationships may hold more value than other relationship aspects because it provides these older adults with opportunities to give back to both their communities and others (i.e., family, friends).

4.4 Consequences of Limited Opportunities to Engage in Occupations with and for Others

Many significant and serious consequences of not engaging in occupations with or for others were identified within the reviewed literature (Aday et al., 2006; Beech & Murray, 2013; Croezen et al., 2009; Dwyer & Hardill, 2011; Eloranta et al., 2008; Gilmour, 2012; Greaves & Farbus, 2006; Levasseur et al., 2009; Maidment & MacFarlane, 2011; Middling et al., 2011; Routasalo et al., 2008; Savikko et al., 2010; Schwingel, Niti, Tang, & Ng, 2009; Sherer, 2001; Skingley & Bungay, 2010; Tse, 2010; Tse & Howie, 2005). The effects of social isolation were illustrated in the findings of a study of older men who lived in assisted-living facilities (Park et al., 2009). From an objective perspective, the men in this study were not socially isolated, as they lived in a setting where they had contacts with other older men and women as well as staff. However, in contrast to their female counterparts, the men reported feeling less satisfied, but they were not specifically asked about their feelings of loneliness. Although opportunities to participate in a variety of activity programs with others existed, they did not engage in activities due to a lack of interest. In a sample of older adults in the Netherlands, those who reported experiencing moderate to severe levels of loneliness also reported that they rarely engaged in social occupations (e.g., participating in a social club, volunteering) (Croezen et al., 2008). Likewise, in a sample of 16 369 adults aged 65 and older living in Canada, Gilmour (2012) found that those who reported no involvement in social occupations also reported feeling lonely. However, the more the older adults engaged in social occupations (e.g., attending church, engaging in hobbies with other people), the less likely they were to report feeling lonely. Several other studies (i.e., Cant & Taket, 2005; Greaves & Farbus, 2006; Maidment & MacFarlane, 2011; Middling et al.,

2011; Tse, 2010) also supported the idea that loneliness can be reduced when older adults are provided with opportunities to engage in meaningful social activities (i.e., occupations done with and/or for others) in which they can choose whether to engage. Similarly, Greaves and Farbus (2006) found that when older adults engaged in occupation-based group programs that were tailored to their unique interests and passions (e.g., creative writing, quilting), they reported feeling less lonely. Studies by Middling and colleagues (2011) and Savikko and colleagues (2010) also suggested that older adults are less likely to report feeling lonely when they have opportunities to engage in personally meaningful occupation-based group interventions such as communal gardening and baking. Collectively, these studies reinforce the idea that engaging in occupations with and for others not only helps older adults to stay connected, but to also feel less lonely.

Negative consequences, particularly social isolation and loneliness, but also life dissatisfaction, decreased mental health, feelings of worthlessness, and depression or depressive symptoms were rarely defined or discussed in detail in the reviewed literature. In many of the qualitative studies, these concepts resulted from semi-structured interviews in which older adults described feeling less lonely and isolated when they had opportunities to engage in occupations with and for others (Dwyer & Hardill, 2011; Eloranta et al., 2008; Learmonth et al., 2012; Levasseur et al., 2009; Maidment & MacFarlane, 2011; Middling et al., 2011; Skingley & Bungay, 2010; Tse & Howie, 2005). Other studies included measures of loneliness in their research design to assist with examining the participants' well-being (Beech & Murray, 2013; Croezen et al., 2009; Gilmour, 2012; Tse, 2010). However, since these concepts were not the main focus of the

studies, they were often not discussed in depth in the results. Therefore, while it was suggested that these negative consequences were more likely to occur when older adults lacked opportunities to engage in occupations with and for others, exploration of these issues within the studies that were reviewed was very limited.

In summary, the results of this scoping review provide evidence that staying connected through engaging in occupations with and for others can enable older adults to address their occupational needs for affirmation, companionship and pleasure. Engaging in social occupations, particularly those that are done for the benefit of others, provide older adults with recognition that their actions are valued and worthwhile, and that they are able to make meaningful contributions to others and their communities. Furthermore, older adults are also likely to recognize their own value and worth when they engage in occupations that enable them to share the knowledge, skills and wisdom they have acquired over their lifetime. Therefore, such occupations can assist older adults to address their needs for affirmation. Similarly, when older adults engage in occupations with others that reflect their own values and interests they are more likely to experience feelings of belonging and/or relatedness. In turn, engaging in these social occupations can assist older adults to address their needs for companionship. Based on the literature reviewed, this is particularly true when older adults engage in occupations with others who have similar backgrounds or come from similar situations. Older adults may also experience pleasure through engaging in occupations both with and for others. However, their needs for pleasure are more likely to be addressed when the occupations are of personal interest and if they have the freedom to choose whether to engage in them.

The literature reviewed provided some evidence that meaning can be generated when older adults engage in occupations with and for others that address their needs for affirmation, companionship and pleasure. However, there was also evidence that meaning could be derived when other occupational needs (e.g., accomplishment, agency, coherence, and rejuvenation) are addressed. Moreover, the results of this study demonstrated that the nature of the relationship between older adults and others could impact whether their occupational needs are addressed. However, it may be more the nature of the occupations that enables older adults to address their occupational needs rather than the type relationship between older adults and others. Furthermore, the occupations in which older adults engage may influence how they experience their social relationships. There was also some preliminary evidence to support that negative consequences (e.g., loneliness, social isolation, decreased mental health) can result when older adults lack opportunities to engage in occupations with and for others. However, the evidence in the studies reviewed was limited.

4.5 Case Study: Implications for Occupational Therapists and Occupational Therapy Practice

To demonstrate how the findings of this scoping review can be applied to address older adults' occupational needs, particularly those derived from engaging in occupations with and for others, Case 8.3 – Mary - written by Wendy Pentland from the publication *Enabling Occupation II: Advancing an Occupational Therapy Vision for Health, Well-being, & Justice Through Occupation* (Polatajko et al., 2007a, p. 223) was used with permission from CAOT Publications ACE (see Appendix F):

Mary is a 75-year-old widow, who, until four months ago, lived on her own on the main floor of a seniors' apartment complex in a small Canadian city. Before she

moved to the apartment, Mary and her husband ran a dairy farm. Mary had raised three children and had worked as a high school secretary from the time her children were grown till the age of 65.

Mary has glaucoma, insulin dependent diabetes mellitus, peripheral vascular disease, high blood pressure, and wears a below-knee prosthesis on her left leg.

Mary managed well for five years after being fitted with the prosthesis; she could move around safely with a walker, look after herself, and drive her car. She was active in her church, a seniors' association, book club, and bridge club. She visited her daughter and grandchildren for weekly Sunday dinners. After a second amputation four months ago, Mary reluctantly agreed to move into Maple Valley Nursing Home. At the home, she uses a rented manual wheelchair and gets help with bathing, some dressing, transfers, and with taking her multiple medications. Mary told Jane, the consulting occupational therapist working two days per week with the home, that "four months ago the sky kind of fell in on me" when she learned that she needed an amputation to her right leg below the knee. Her doctor did not recommend a second prosthesis, given Mary's age.

Mary's daughter and family, who had been Mary's main source of support, moved four hours away because of her husband's job promotion. Mary began to feel discouraged and depressed, that her life was empty, and the days started dragging terribly. She felt too unmotivated to stick with a physiotherapy exercise program. She missed her family, apartment, friends, and previous activities and felt trapped in the new facility. Jane was asked to assess Mary and to make recommendations to facilitate her integration into the nursing home. What Mary

wanted was to leave the home and recapture her former occupations. Jane undertook the negotiations and advocacy necessary to enable Mary to begin to meet her goal. (p. 223).

4.5.1 Question 1: How did Mary's engagement in her past occupations enable her to meet her occupational needs for affirmation, companionship and pleasure?

Mary's engagement in her church and senior's association provided her with opportunities to make meaningful contributions to individuals and the broader community, and to feel useful and valued through her efforts to enrich the lives of others. Given her previous work experience as a school secretary, she may have derived a great deal of enjoyment from doing related tasks within the church and the senior's association. These occupations also provided Mary with opportunities to connect with others and to do things she enjoyed. Thus, these occupations had the potential to address Mary's needs for affirmation, companionship, and pleasure. However, without asking Mary directly about why she engaged in the occupations she did, and what benefits she derived from them, we can only make assumptions about which of her occupational needs were being addressed.

Based on the case material, prior to her decline in health and function, Mary maintained connections with her family through weekly visits during which they shared a meal. These occupations provided Mary with additional opportunities to address her needs for companionship and pleasure. Engaging in these occupations may have also assisted Mary to meet her needs for coherence through connecting with her past. Additionally, Mary was described as having been "active in her church, a seniors association, a book club, and a bridge club" (Polatajko et al., 2007a, p. 223) prior to the changes in her health and living situation. These groups probably afforded Mary with

opportunities to engage in occupations both with and for others. Involvement in these occupations likely provided Mary with opportunities to stay connected with similarly aged peers with whom she shared common interests, values and goals and thus, addressed her needs for companionship. However, this would need to be verified through discussions with Mary about why she engaged in these occupations and what she felt she was missing now that she no longer had the opportunities to engage in these same occupations. As evidenced in the literature reviewed, feeling a sense of belonging, particularly with similarly aged peers who have common interests, values and goals, is critical if older adults are to adequately meet their needs for companionship. As noted above, however, the occupational needs she met through these visits must be confirmed directly with Mary.

Assuming it was her choice to be an active member of her church, a seniors association, a book club, and a bridge club, it is likely that Mary's needs for pleasure were also met when she engaged in occupations with and for others that held personal meaning and were of interest to her. Again, only through direct discussions with Mary can we fully appreciate why she chose to engage in these specific occupations and if they provided her with feelings of happiness, joy and contentment.

4.5.2 Question 2: How has moving into the nursing home likely disrupted Mary's ability to address her occupational needs, particularly for affirmation, companionship and pleasure?

Mary's move into a nursing home was precipitated by her diminished ability to manage her self-care occupations. Around the same time, her daughter and granddaughter moved four hours away due to her son-in-law's work. Changes in her environment and her abilities would have both had a significant effect on Mary's occupational repertoire.

More specifically, she no longer had opportunities to drive, attend church, participate in the senior's association and book club, play bridge, visit with friends, and visit her daughter and grandchildren in their home. Although Mary was surrounded by other older adults in the nursing home, she expressed that her "life was empty" and that she missed her family, friends and former occupations. As with most nursing homes, there were likely organized activities that would provide Mary with opportunities to be in the same space as others within her physical environment. However, she may not be aware of what activities are available to her, the activities available within the nursing home may have held little personal meaning to her, and/or she may not have shared the same values and goals as other residents. Consequently, her ability to address all of her occupational needs, including her needs for affirmation, companionship and pleasure, may have been threatened.

4.5.3 Question 3: How might an occupational therapist help Mary address her occupational needs?

This case study illustrates how older adults' occupational repertoires can suddenly change due to a decline in health and function. When this occurs, they may not have adequate opportunities to engage in occupations that hold personal meaning. Even if opportunities are available to be around others and engage in occupations with others, older adults' occupational needs for affirmation, companionship and pleasure may remain unmet if the occupations hold little or no personal meaning or fail to align with their interests, values and/or personal goals and expectations. This is also true if individuals cannot choose the occupations in which they will engage and if those occupations do not provide them with opportunities to interact with similarly aged others with whom they share common interests, values and/or goals. Even if opportunities to play bridge are

available within the nursing home, Mary may perceive that the need to accommodate other residents' motor, process, and/or social interaction skills may make the game slower, less challenging, and less enjoyable.

Based on the case material present, it is evident that Mary's struggle with the transition from her home to nursing home is not just related to changes in her health status. Her struggle is also a reflection of the disruption in her occupational repertoire and her subsequent inability to adequately meet her occupational needs. Efforts must be made to help Mary reconstruct her occupational repertoire in ways that will enable her to address her occupational needs. Not only can her occupational therapist, Jane, play an instrumental role in enabling Mary to transition to back to engaging in community-based occupations, but Jane can collaborate with Mary to ensure her occupational needs are adequately addressed while in the nursing home. Therefore, Jane must not only take the time to find out what occupations Mary did in the past, but to seek clarity from Mary regarding why she engaged in her former occupations and which occupational needs were met when she engaged in these occupations.

Changes in health status and environment also provide individuals with opportunities to reflect on their former occupational repertoires. In this setting, Jane may have a tendency to focus on assisting Mary to increase her independence with self-care occupations and to develop compensatory strategies for engaging in occupations from a wheelchair level. However, Jane needs to ensure she also broadens her focus to assess how Mary's ability to engage in social occupations has been affected by her recent changes in health status and relocation to a nursing home. This will require Jane and

Mary to analyze Mary's former occupational repertoire to determine which occupations enabled her to stay connected.

Rather than assuming Mary should resume her former occupations, it is important for Jane to also help Mary recognize that if Mary's former occupations did not adequately address her needs, now is a perfect time for Mary to make decisions to withdraw from and/or incorporate new or adapted occupations into her repertoire that might enable her to more effectively address all of her occupational needs. Next, it will be necessary for Jane to examine the personal factors (e.g., Mary's interests, values, goals and expectations) and environmental factors (e.g., physical location of the nursing home in relation to her former neighbourhood and community, other residents and people within and near the nursing home, nursing home policies) that will influence Mary's ability to meet her occupational needs. Jane will also need to work with Mary to identify factors that might interfere with Mary's ability to address her occupational needs (e.g., Mary's physical health status and mood). Finally, Mary and Jane will need to collaborate to develop solutions that will enable Mary to create a new occupational repertoire comprised of former and new occupations including occupations done with and/or for others that enable Mary to stay connected. This may include engaging in occupations both within and outside the nursing home environment. Following intervention, Jane will need to check with Mary to determine whether Mary perceives that her new occupational repertoire is enabling her to stay connected and is adequately meeting her occupational needs including her needs for affirmation, companionship and pleasure.

This case study demonstrates that changes in health status and/or living environment can have significant effects on older adults' occupational repertoires, which,

in turn, affect their ability to stay active and connected. The assumption could be made that Mary is staying active and connected through the activities offered within the nursing home environment. It could be argued that the activities available in this environment can assist older adults to stay active if they involve a physical component. However, the results of this study demonstrate that staying connected does not simply occur just by being in the same physical space with others even if opportunities to socialize with others exist. If occupational therapists focus solely on doing activities as opposed to enabling engagement in occupations, it is unlikely they will assist their older clients to stay connected. In order to stay connected, older adults occupational repertoires must enable them to meet their occupational needs, particularly their needs for affirmation, companionship and pleasure.

CHAPTER 5: DISCUSSION

5.1 Implications for Occupational Therapy Research and Practice

This scoping review was undertaken in an effort to bridge the gap between occupational therapy research and the broader research on successful aging, and thereby bring an occupational perspective to the concept of staying connected. This was done by examining existing literature focused on older adults (adults aged 65 years and older) that addressed social engagement, social interaction, social networks, and social participation. This review provided insights into how engaging in occupations with and for others, or staying connected, enables older adults to meet their occupational needs, specifically, their needs for affirmation, companionship and pleasure.

Currently, occupational therapy theoretical models such as the Canadian Model of Occupational Performance and Engagement (Townsend & Polatajko, 2007) continue to classify occupations into three areas of doing: self-care, productivity and leisure (Hammell, 2009a, 2009b; Reed et al., 2011; Townsend & Polatajko, 2007). As a result, the need for individuals to stay connected by engaging in occupations with and for others is not explicitly highlighted (Hammell, 2014). While the benefits of staying connected with others are gaining more attention within the successful aging literature (i.e., Bowling & Dieppe, 2005; Chen et al., 2011; Depp & Jeste, 2006; Glass et al., 1999; Mendes de Leon et al., 2003; Rowe & Kahn, 1997), occupational therapy services with older adults continue to be focused largely on aspects of occupational performance such as routine self-care tasks (Clemson & Laver, 2014; Jonsson et al., 2001). With occupation as the core domain of concern for occupational therapists and enabling as the profession's core competency (Townsend & Polatajko, 2007), occupational therapists should be assessing and providing intervention for all forms of occupational engagement within their

practices. This includes engaging in occupations with and for others. Individuals are more likely to experience occupational well-being when their unique occupational needs are met (Polatajko et al., 2007c). However, issues associated with staying connected through engagement in occupation may be overlooked or go undetected by occupational therapists. By expanding the concept of occupational engagement to more explicitly include social occupations, occupational therapists may feel more empowered and equipped to address these issues in clinical practice.

There is an established need to look beyond the traditional categories of occupation (self-care, productivity, leisure) in order to enable occupational therapy clients to stay connected or engage in social occupations (Jonsson, 2008; Hammell, 2009b). However, there is also a need to ensure that the social environment, which includes social relationships (Mason & Reed, 2009; O'Brien et al., 2002), is not considered separate from occupation in occupational therapy models of practice. The social environment is integral to how occupational engagement is experienced by individuals (Rebeiro, 2001) and therefore, it should be integrated with occupation rather than being considered separately. For example, in the case study, Mary's social environment underwent a significant change when she moved into a nursing home and, around the same time, her daughter and granddaughter moved four hours away. Combined with her diminished ability to manage her self-care occupations, this environmental change constrained her ability to engage in her former occupations. Therefore, Mary's occupational therapist, Jane, needs to examine the interdependence of Mary's abilities, occupations and environment when working with Mary. In particular, when working with Mary to create an occupational repertoire that will enable her to meet

all of her occupational needs, Jane must consider the transactional relationship between Mary's social environment and her desired occupations.

The findings of this scoping review provided evidence that older adults' occupational needs, particularly for affirmation, companionship and pleasure, are addressed when they engage in occupations with and for others. If occupational therapists work with clients to examine their occupational repertoires and determine if they enable them to adequately address their occupational needs, occupational therapists will be helping their older clients to stay both active and connected. However, the findings of this review can also be used to expand the concept of affirmation. Doble and Caron Santha (2008) had proposed that engaging in occupations with and for others enables individuals to experience feelings of self-worth or their own sense of value as a person. While these feelings were enhanced when older adults received recognition and acknowledgement from others for their actions, affirmation was also found to occur through making contributions to the broader community. By contributing to others or doing for others, feelings of usefulness are often derived and can increase feelings of belonging (Hammell, 2014). Similarly, opportunities for older adults to share knowledge, skills and wisdom they acquired over a lifetime through engaging in occupations with and for others can contribute to self-efficacy, which, in turn, can lead to recognition of self-worth. When these feelings of self-worth occur, it increases the likelihood that older adults' needs for affirmation will be addressed.

The aging literature speaks to the importance of older adults engaging in occupations with and for others and the potential consequences of not having adequate opportunities to engage in such occupations (i.e., Cornwell & Waite, 2009). This has

important implications for occupational therapy practice and research. In this study, social engagement, social interaction, social networks, and social participation, were selected as relevant search terms based on a preliminary search of the aging literature. Within the reviewed literature, the constructs social engagement and social participation often included involvement in activities with others or social activities whereas social interaction primarily involved socializing with others. Social networks tended to focus on the relationships or connections with others, but some definitions included the reciprocal nature of these relationships. All four of these definitions involve connecting or staying connected with others; however, they often referred to doing activities with others rather than engaging in meaningful activities or occupations with others and therefore, did not clearly depict the occupational nature of staying connected. The inconsistent and vague definitions of these terms challenged the ability to translate this research for use in occupational therapy research and practice.

Clarifying the attributes or characteristics of a concept assists to provide a common understanding amongst clinicians and researchers (Falan, 2010) and therefore, the lack of consistency and clarity in how these terms are defined and operationalized within non-occupational therapy research literature could also be considered a barrier to developing appropriate assessment tools and interventions. Without a clear understanding of how staying connected relates to the concept of occupational engagement, occupational therapists' ability to objectively identify and assist those older adults who are experiencing decreased engagement in social occupations will be limited. However, this study has brought an occupational perspective to these terms and the concept of staying connected and therefore, demonstrated that older adults' occupational needs can

be addressed by engaging in occupations with and for others. While research findings in non-occupational therapy literature focus on social connections, the findings from this scoping review suggest that many of these connections are created through engaging in occupations. Thus, if older adults have opportunities to engage in occupations based on personal choice and interests, then relationships may develop.

In order for occupational therapists to effectively translate research into their practices the occupational nature of staying connected must be expressed in a clear and consistent manner. Thus, occupational therapy researchers are encouraged to adopt a consistent language. Referring to engagement in social occupations, that is, occupational engagement with and for others, which encompasses the broader concept of staying connected with others would be an important first step. Engagement in social occupations includes engaging in occupations with and for others rather than as simply doing activities in the context of others. Using this language would also remind researchers to consider the meaning and relevance occupations hold for individuals. Moreover, it would enable researchers and clinicians to look beyond occupational performance to the broader concept of occupational engagement when assessing and addressing individuals' full range of occupational needs.

While further research from within the field of occupational therapy in relation to engaging in social occupations is warranted, there is also a need for both researchers and clinicians to direct their attention towards establishing why older adults engage in the occupations that they do. This will not only assist with determining how meaning and relevance are generated from older adults' occupations, but will also help verify if and how older adults are meeting their occupational needs through their existing occupational

repertoires. With this knowledge, effective screening tools to identify those older adults who are lacking opportunities to engage in social occupations, interventions to address this issue and questionnaires to measure the outcomes of those interventions can be developed and researched within this population.

5.2 Study Limitations

Scoping reviews are not designed to thoroughly evaluate study quality and therefore, despite using guidelines to determine the quality of the studies reviewed, definitive conclusions regarding the methodology or rigour of the studies reviewed could not be made. Also, in a scoping review, the process of analyzing the data is iterative and, therefore, others reviewing the same papers may have organized the data extracted from the reviewed articles differently. However, to limit this possibility the researcher and thesis supervisor independently reviewed five randomly selected articles from the identified papers and then met to discuss and compare the data extracted from these studies. Unfortunately, due to limitations and resources, the optional sixth step of Arksey and O'Malley's (2005) framework for scoping reviews, the consultation exercise, could not be completed. If completed, consulting with stakeholders may have enhanced this scoping review by sharing additional references, validating the findings and providing additional insights into the occupational nature of staying connected. The consultation exercise would also have provided an opportunity to share preliminary findings, which may have served as an educational opportunity for occupational therapy researchers and clinicians.

In relation to this specific scoping review, the majority of the literature reviewed was not from the field of occupational therapy. This created a challenge when attempting

to address the primary research question and the three secondary questions, as specific occupational therapy language (e.g., occupation) was not used. Thus, at times, it was difficult to determine if the authors were referring to the same or similar concepts found in occupational therapy theory and research. For example, most of the studies referred to activities rather than occupations. Consequently, it was often difficult to identify whether the activities in which the participants engaged were in fact occupations. Also, in some studies there was limited information regarding the activities in which the participants engaged. This made it even more challenging to determine if the activities mentioned met the criteria adopted within the design of this study to qualify as occupations. Conversely, using non-occupational therapy literature was also advantageous in that it provided further insights into older adults' engagement in social occupations, which can be used to inform our understanding of occupation and practice. Furthermore, the results of this scoping review are probably most relevant in westernized, developed countries (i.e., Australia, Canada, United States, United Kingdom) where the research was conducted.

Additionally, the findings from the reviewed literature suggest that meaning may be generated when older adults engage in occupations with and for others that enable them to experience a sense of affirmation, accomplishment, agency and companionship. Although many studies suggested that older adults experienced a sense of pleasure and enjoyment when they engaged in occupations with and for others, it was not clear whether these feelings were also responsible for generating meaning. This is likely due to the nature of the literature reviewed in that the studies were not designed to examine how older adults' needs for pleasure are met. Likewise, the reviewed literature suggests that social connections and companionship are more likely to occur when older adults engage

in occupations with others who are of a similar age (i.e., Cant & Taket, 2005; Fisher & Gosselink, 2008; Middling et al., 2011; Milligan et al., 2004). However, this is in contrast to recent research concerning intergenerational relationships, which highlights the benefits of engagement amongst individuals of all ages. This is most likely a reflection of the type of literature reviewed, which focused on older adults engagement in occupations with and for others. Since the search strategy limited the age of participants to those who were 65 years and older, articles that examined intergenerational relationships may have been excluded. Despite these challenges, the literature reviewed did provide valuable insight into the primary and secondary research questions addressed in this study.

CHAPTER 6: CONCLUSION

A scoping review methodology was used to examine the relationship between the concepts of staying connected, engaging in occupations with and for others and meeting one's occupational needs for affirmation, companionship, and pleasure within the literature on older adults. There is growing evidence within the aging literature across many disciplines to support the benefits of staying connected. However, there continues to be a lack of consistency regarding terms (i.e., social engagement, social interaction, social networks, social participation) used to describe this concept. Moreover, regardless of the terms used, most authors fail to provide clear definitions for those constructs. Despite this lack of consistency within the aging literature, there is growing evidence to support that staying connected through engaging in occupations with and for others provides older adults with the opportunity to address their unique occupational needs, particularly for affirmation, companionship and pleasure.

From this scoping review, it is clear that many older adults stay connected by engaging in social occupations, that is, occupations done with and for others. Thus, due to the occupational nature of this concept occupational therapists are well-suited to assess and address issues related to older adults' ability to stay connected. If and when occupational therapists routinely address the issue of staying connected in their work with older clients, occupational therapy practice will change and better reflect the profession's full potential. Education will be required if occupational therapists are to become more familiar with how enabling older adults to stay connected fits within our current theoretical models such as the Canadian Model of Occupational Performance and Engagement. Additionally, our models of practice will need to be examined to ensure occupational therapists can translate the ideals that serve as the foundation of the

profession into their everyday practices. This, in turn, will ensure all aspects of our clients' occupational engagement, including engaging in occupations with and for others, will be adequately assessed and addressed in clinical practice.

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APPENDIX A: Inclusion / Exclusion Criteria

Inclusion:

- Articles published in English and after the year 2000
- **Type of Articles:**
 - Research studies – qualitative, quantitative, mixed methods
 - Theoretical papers
 - Position statements/papers
 - Systematic reviews
- **Population:** Includes adults 65 years and older
- **Articles using one or more of the following terms:** social engagement, social participation, social network, social interaction
- Involve participants engaging in activities and tasks with and for others

Exclusion:

- Articles published before the year 2000
- Articles published in a language other than English
- **Population: Includes** Infants, children and/or adolescents; or limited to adults under the age of 65.

APPENDIX B: Scoping Review Articles

Social Engagement

- Beech, R., & Murray, M. (2013). Social engagement and healthy ageing in disadvantaged communities. *Quality in Ageing and Older Adults, 14*(1), 12-24.
- Cipriani, J. (2007). Altruistic activities of older adults living in long term care facilities: A literature review. *Physical & Occupational Therapy in Geriatrics, 26*(1), 19-28.
doi:10.1300/J148v26n01_02
- Croezen, S., Haveman-Nies, A., Alvarado, V. J., Van't Veer, P., & De Groot, C. P. G. M. (2009). Characterization of different groups of elderly according to social engagement patterns. *The Journal of Nutrition, Health & Aging, 13*(9), 776-781.
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doi:10.1080/01634370903285541

Reichstadt, J., Sengupta, G., Depp, C. A., Palinkas, L. A., & Jeste, D. V. (2010). Older adults' perspectives on successful aging: Qualitative interviews. *American Journal of Geriatric Psychiatry, 18*(7), 567-575.

Rozanova, J., Keating, N., & Eales, J. (2012). Unequal social engagement for older adults: Constraints on choice. *Canadian Journal on Aging, 31*(1), 25-36.

doi:10.1017/S0714980811000675

Social Interaction

Creech, A., Hallam, S., Varvarigou, M., McQueen, H., & Gaunt, H. (2013). Active music making: A route to enhance subjective well-being among older people.

Perspectives in Public Health, 133(1), 36-43. doi:10.1177/1757912466950.

Dwyer, P., & Hardill, I. (2011). Promoting social inclusion? The impact of village services on the lives of older people living in rural England. *Ageing and Society, 31*(2), 243-264. doi:10.1017/S014486X10000851

Schwingel, A., Niti, M. M., Tang, C., & Ng, T. P. (2009). Continued work employment and volunteerism and mental well-being of older adults: Singapore longitudinal ageing studies. *Age and Ageing, 38*, 531-537. doi:10.1093/ageing/afp089.

Skingley, A., & Bungay, H. (2010). The Silver Song Club Project: Singing to promote the health of older people. *British Journal of Nursing, 15*(3), 135-140.

Stathi, A., Mckenna, J., & Fox, K. R. (2010). Processes associated with participation and adherence to a 12-month exercise programme for adults aged 70 and older.

Journal of Health Psychology, 15(6), 838-847.

Social Networks

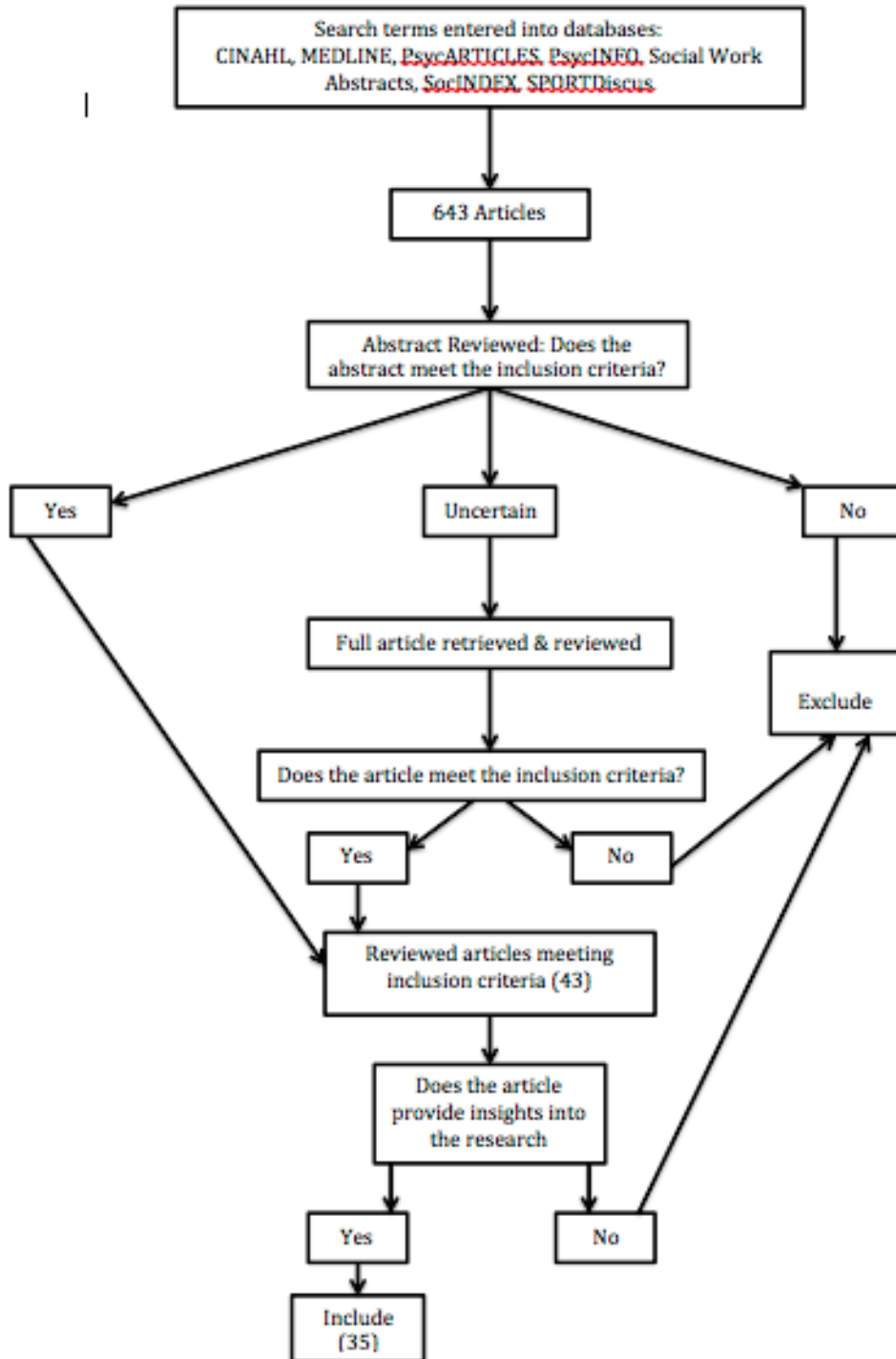
- Aday, R. H., Kehoe, G. C., Farney, L. A. (2006). Impact of senior center friendships on aging women who live alone. *Journal of Women & Aging, 18*(1), 57-73.
doi:10.1300/J074v18n01_05
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Social Participation

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APPENDIX C: Process of Including/Excluding Articles from the Initial Search



APPENDIX D: Data Extraction Chart

Year/ Author	Study Title	Type of Article	Key Search Term(s)	Study Purpose	Sample	Brief Summary of Findings	Research Design	Appropriateness of Study Design to Address Study Purpose	Potential Biases/ Limitations
2006 Aday et al.	Impact of senior center friendships on aging Women who live alone	Quantitative	Social Network(s)	To examine late-life friendships and senior center activities on the health and well- being of aging women living alone.	415 women: 274 lived alone; 141 lived with a spouse Age range: 51 to 96 years Mean age: 74.4 years 80.9% White, 10.7% African- American, 8.4% Hispanic, Asian, Native American	Older women benefit from friendships that form as a result of participating in senior center activities/programs. Women who lived alone had an increased frequency of participating in the programs and attending the center. Those who attended the center were found to have decreased loneliness, increased life satisfaction and improved mental health. Also, they were found to experience a sense of needing and being needed. Many of the participants, particularly those who lived alone developed close friendships and engaged in activities with each other outside the center. Additionally, they reported they had increased confidence to continue living independently.	Secondary data analysis from a survey. Participants participated at least one year at a multi-purposed senior center. Dependent variables: mental health, life satisfaction, depression and social support network; Qualitative comments were also used.	Objective measures used to address the question. This questionnaire allowed researchers to use a larger sample. The inclusion of qualitative comments assisted to support the quantitative survey results.	Non-random sample. Majority of participants were White. Initial survey was not designed for this particular study.
2011 Andonian & MacRae	Well older adults within an urban context: strategies to create and maintain social	Qualitative/ Action Research	Social Participation	To determine: a) strategies well older adults employ to create and maintain their social participation; b) aspects of the urban environment and	Seven (four women, three men) Age range: 55 and older (range 57 to	Social participation for older adults in an urban environment is promoted through sense of belonging, acceptance of differences and change, and health and active living. Sense of belonging drives ongoing engagement	Photovoice was used. Participants took photographs. They were selected three most favourite	Involving the participants in the data collection enabled their perspectives to be sought and recorded.	Very small sample size limited to a specific city in the USA. Also, participants were on the

	participation			context that foster or hinder social participation; and c) what older adults suggest to their peers and community social service agencies to promote, create and maintain social participation for older adults.	77 years) Mean age 65 years All participants lived in San Francisco	with others and commitment to various community roles (e.g., volunteering, peer mentoring). Participants in this study decided to be involved with others and active in their daily lives to promote their own wellness and sense of accomplishment. Sense of belonging conveys a sense of membership in the community for these participants.	or significant photos, and then generated a title for each. Next, face to face interviews were conducted for the participants to describe the photos. A closing focus group was also conducted for participants to explain their favourite images, share images and discuss categories in the photographs.	Methods of measuring social engagement may have been limited. Focused on the number and level of contacts as well as the attitudes and frequency of social activities. The researchers could have investigated more about participants' satisfaction with their involvement in social activities.	younger end of the spectrum.
2013 Beech & Murray	Social engagement and healthy ageing in disadvantaged communities	Quantitative/ Participatory Action Research	Social Engagement	To explore relationships between social engagement, wellbeing and attachment amongst older people who participated in the Call-Me project. The Call-Me project was designed to promote greater social engagement among older people living in disadvantaged urban communities.	65 (50 female; 15 male) Age range: 51 to 92 years Mean age: 71.6 years Marital status: 31 widowed, 15 married, 14 divorced; 3 single; 2 separated 64 gave ethnic status – majority	Results of this study highlighted the role local shops and amenities (i.e., post offices, banks) play in providing opportunities for social engagement. Researchers found that a high level of social contact does not necessarily relate to an individual being satisfied with the quality of their engagement. However, individuals with high levels of social contact had higher levels of perceived quality of life and lower feelings of loneliness. A positive correlation was found between a persons' sense of community attachment and feelings of wellbeing.	Questionnaire that participants completed themselves to look at the constructs social engagement, well-being and community attachment. For <i>social engagement</i> they used the Berkman-Syme Index, Keele Assessment of Participation and questions about involvement in everyday activities (i.e., going to the		Small, predominantly female population. Not all participants answered every question. Most of the participants were not married. No indication whether the people who were not married lived alone or with others. Did not fully investigate level of satisfaction

2005	Promoting social support and social networks among Irish pensioners in South London, UK	Qualitative	Social Networks	a) To explore the extent to which the Irish Pensioners' Project promoted social support and social networks. b) To identify good practice that could be applied to enhance the mental health and well-being of Irish pensioners in similar situations elsewhere in Britain.	19 (four female members, four male members, three staff members, two trustees, two volunteers, and four staff members from partner agencies)	Age range	white (37) or black (21)	Creating supportive environments enables participants to create social networks with others who have similar backgrounds. These networks can enable members to live independently and maintain good mental health.	supermarket). For <i>wellbeing</i> they looked at loneliness (Amsterdam Loneliness Scale), health-related QoL (EQ-5D) and generic QoL. <i>Community Attachment</i> asked questions about participants' feelings about the neighbourhood where they lived and the areas within 15-20min walking distance. Including feelings of belonging.	Interviews and observations were suitable ways to gain insights into participant perspectives, but they only interviewed a small number of the actual members.	with involvement in social activities. Did, however, consider places where people have social contacts. Those involved in study were part of the Call-Me project and therefore, had access to community schemes it was initiating. This may have influenced responses.
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2007	Altruistic activities of older adults living in long term care (LTC) facilities: a literature review	Literature Review	Social Engagement	To review literature on altruistic activities of older adults living in LTC facilities and to explore the implications of this research for occupational therapy (OT) practice.	Six studies conducted by occupational therapists or reported in OT literature regarding older adults and altruistic activities in LTC facilities.	The author found that older adults in LTC facilities were more likely to participate in activities and achieve satisfaction from them if they were doing them for others.	Review of six studies.	Research is limited within the OT profession. However, this is a good starting point for further research in this area.	Studies were limited to the OT literature. It would have been interesting to see what literature and findings were outside the field of OT. Number of studies to make conclusions was small, but this was due to limited OT literature published on this topic.
2013	Active music making: a route to enhance subjective well-being among older people.	Quantitative	Social Interaction	To explore whether and how active music making might support the well-being of older people in the UK through meeting basic psychological needs: autonomy, competence and relatedness. Specific questions: a) Are there differences in responses to quality	500 (81% female; 19% male) Age range: 43 to 93 Mean age: 65 398 (80%) were involved in musical	The researchers found that active music making within a social context has the potential to improve quality of life and subjective well-being in older adults. The participants who engaged in the active music making group had higher levels of subjective well-being in comparison to those in other group activities. Subjective well-being was found to be underpinned by a sense of	Questionnaires that included CASP-12 measure of quality of life and the Basic Psychological Needs Scale. Questionnaires were completed during the second week of the project.	This paper focused on the quantitative data. The measures used were appropriate ways to gather it. Also, a control group was used; however, it was much smaller than the target group.	Most participants were female. No data provided regarding marital status or whom they lived with. Only looked at individuals at one particular facility.

2009	Croezen et al.	Characterization of different groups of elderly according to social engagement patterns	Quantitative	Social Engagement	The objective of the study was to group older adults according to different social engagement activity patterns and to describe the derived subgroups further by self-perceived health, mental health, physical health and loneliness.	22026 older adults Age range: 65 years and older; 21789 were over the age of 74. Between the ages of 65 and 74: 59% men, 51.6% women; 75 years and older: 41% men, 48.4% women. Most were born in The Netherlands	of life (QoL) and well-being measures between older people participating in active music making as opposed to other group activities? and b) Are there changes in the short term in relation to such measures when individuals are engaged in group activities?	groups participated in other activities such as language groups, book groups, yoga and social clubs.	purpose, feeling in control, feeling autonomous, and receiving affirmation through positive social relationships.	QoL measure (CASP-12) was completed a second time, nine months later.	Design allowed for a large sample of older adults. Included variables in addition to social engagement activity patterns to assist with creating subgroups: A broad range of social activities were included in the questionnaires.	Large sample, but primarily representative of The Netherlands native population. May not be able to generalize the findings to other cultures/counties. List of social engagement activities may not have been inclusive.
2011	Dwyer & Hardill	Promoting social inclusion? The impact of	Qualitative	Social Interaction	To determine the extent to which village services or rural based services	69 /44 older rural residents - 32 women;	This study identified that older men are often reluctant to become involved in services offered within rural	Semi-structured interviews were conducted. The transcripts were	The interviews included perspectives from both service users	Limited to a specific area of England.		

2008 Eloranta et al.	Personal resources supporting living at home as described by older home care clients	Qualitative	Social Networks	To describe older home care clients' perceptions of their personal resources and of the factors that enhance and constrain their ability to live at home.	12 men - and 25 key informants involved in the management, day-to-day delivery or financing of services)	Age range: all except four of the service users were 70 or more years at the time of the interview (age range: 58 to 93) Sample included both those who lived with others and alone. All service users were white.	villages. Therefore, the authors conclude that service providers need to develop innovative ways of engaging men in rural areas; however, they suggest this is unlikely due to limited financial resources.	sent the participants for feedback.	and providers, which strengthen the data that was found. More service users were interviewed than providers, which provided a more accurate reflection of issues and needs.	Mainly female sample limited to a particular area of Finland. This may limit the generalizability of the findings
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2008 Fisher & Gosselin	Enhancing the efficacy and empowerment of older adults through group formation.	Qualitative	Social Engagement	To determine the impact on members' sense of individual and group efficacy and empowerment from the inception of the group in 1995 to a time six years later.	Data was taken from 36 participants of Studio 55 Fine Arts Guild (an organization created to bring older artists together) in a 1997 study Age range: 60 to 93 years with a mean age of 73.8 years. Data from the follow-up study was based on interviews from 12	all participants were over the age of 75 years Mean age: 83.5 years Three lived with their spouse while the rest lived alone	was not explored in-depth. Participants indicated they want to continue doing as much as they can for themselves and only want assistance when needed. They want to be involved in care decision-making.	Longitudinal with baseline and follow-up face to face open-ended interviews.	Design allowed members perceptions of the group to be captured over time. The baseline data was not reported in this study, but there was data from a 1997 study, which looked at efficacy and empowerment amongst members at that time. The baseline and follow-up only included the founding members.	Not many details provided on demographics of the sample; therefore, it would be difficult to generalize. Only looked at perceptions of the founding members at follow-up. This could have skewed the results.
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					<p>founding members ranging in age from 72 to 97 years with an average age of 79 years.</p> <p>No indication of male/female distribution or other demographics (e.g., living situation, marital status, income, ethnicity).</p>				
2012	Social participation and the health being of Canadian seniors	Quantitative	Social Participation	To examine the relationship between the number of social activities in which seniors frequently participate and three measures of health and well-being including loneliness, self-perceived health and life dissatisfaction.	<p>Age range: 65 years and older (55.1% between the ages of 65 to 74 years; 33.6% between the ages of 75 to 84 years and 11.2% aged 85 years and</p> <p>16 369 seniors (54.9% women, 45.1% men)</p>	<p>This study found that the majority of Canadian seniors frequently participated in at least one type of social activity. The results suggest that greater social participation was positively associated with self-perceived health and negatively associated with loneliness and life dissatisfaction. The results also supported previous research that suggests that the quality of social relationships is an important component of how social participation is associated with health.</p>	<p>Cross sectional survey using computer-assisted personal interviewing.</p>	<p>Design allowed for a large cross-sectional sample of Canadian older adults. Enabled a comparison between frequency of participating in social activities and the variables identified.</p>	<p>Did not identify how many of the participants lived alone. Excluded those living in the territories. Excluded older adults living in institutions, residents of the territories, Indian reserves, Crown lands, some remote areas and full-time members</p>

					older)				of the Canadian Forces.
2006 Greaves & Farbus	Effects of creative and social activity on the health and well-being of socially isolated older people: outcomes from a multi-method observational study	Mixed Methods	Social Networks / Social Interaction	To qualitatively identify the range of nature of impacts the Upstream interventions had on participants and to quantitatively assess the scale of likely impact in terms of participants' physical and mental health.	Qualitative interviews: 18 participants from the Upstream program (11 female, 7 male), five carers (three with participants present), four health professionals.	Engaging older adults in creative activities using an individualized, mentor based approach may improve social networks among this population. It may also re-connect them with their communities and improve their psychological and physical well-being, but further research is needed.	<i>Qualitative:</i> Semi-structured interviews and a focus group. <i>Quantitative:</i> Administration of the SF 12, GDS-15, and six items from the MOS social support survey at the baseline, 6 month and 12 month follow-up.	Design provided opportunity to gain insights directly from participants, carers and health professionals who were involved with program participants, but also looked at objective health outcomes.	Only looked at this particular program. Predominantly female sample. Lacked a control group.
				The age range was not provided, but the Upstream program is geared towards those 50 years and older. Quantitative questionnaire res: 172 participants (76%					

					<p>female; 24% male) with an age range of 52 to 96 years and a mean age of 77 years</p> <p>At the six-month follow-up 72 participants provided data and for the 12 month follow-up 51 participants provided data</p>	<p>The researcher found that engaging in local groups and organizations did not impact community sense of belonging, trust and social capital. Most social interaction for this community occurred informally (i.e., on roads, while shopping, in homes). Reciprocity was an important concept discussed by the participants and in this case was largely within families (i.e., caring for grandchildren). Although opportunities for social interaction and engagement in social activities were somewhat limited, participants still felt a sense of belonging in a close knit</p>	<p>Semi-structured interviews in a grounded theory approach. Identified themes were reviewed by the researchers to increase reliability and validity.</p>	<p>Appropriate design for gaining insights from the participants of the study.</p>	<p>Only looked at one particular community. The sample was predominantly female. Little details about demographics of the sample were provided.</p>
2010 Heenan	Social capital and older people in farming communities	Qualitative	Social Networks	To determine how social capital is generated and sustained in rural farming communities and the extent of older adults' involvement.	65 (42 female; 13 male) Age range: 65 and 86 years	<p>The researcher found that engaging in local groups and organizations did not impact community sense of belonging, trust and social capital. Most social interaction for this community occurred informally (i.e., on roads, while shopping, in homes). Reciprocity was an important concept discussed by the participants and in this case was largely within families (i.e., caring for grandchildren). Although opportunities for social interaction and engagement in social activities were somewhat limited, participants still felt a sense of belonging in a close knit</p>	<p>Semi-structured interviews in a grounded theory approach. Identified themes were reviewed by the researchers to increase reliability and validity.</p>	<p>Appropriate design for gaining insights from the participants of the study.</p>	<p>Only looked at one particular community. The sample was predominantly female. Little details about demographics of the sample were provided.</p>

2012	Learmont h et al.	Ways in which 'community' benefits frail older women's well-being: 'we are much happier when we feel we belong'	Qualitative	Social Networks	To explore frail older women's lived experiences of 'community' and specifically, which aspects of community they perceive as beneficial to their well-being.	10 "isolated, frail older women" from a variety of cultural backgrounds	All English speaking	The authors found that frail older women's sense of community is positively influenced by social contact and they have diverse needs/desires for social interaction.	Data was collected through in-depth, one to one semi-structured interviews in the participants' homes. The interviews were exploratory in nature.	The interviews and approach helped to gain the perspectives and perceptions of the participants and were an appropriate way to collect data.	'Community' and "isolated and frail" were not defined. Very few details regarding the sample population were provided
2009	Levassauer et al.	Meaning of quality of life (QoL) for older adults: importance of human functioning components	Qualitative	Social Participation	To explore older adults' perceptions and experiences based on the Disability/Creation Process model	18 community-dwelling participants (67% women; 33% men) Age range: 63 to 92 years Participants had various diagnoses Majority had less than 12 years of school and perceived their health to be good or excellent.	Authors found that personal factors are essential to QoL. Other important factors include being occupied, doing activities associated with good health, accomplishment of social roles, the ability of the social and physical environment to be adapted and sense of control.	Data was collected through semi-structured interviews within the participants' homes. Each participant participated in two interviews one week apart from each others. 13 experienced clinicians from the fields of OT, social work and nursing assisted with the construction of the interview guide. The first interviews were discussed amongst the first two authors and the interview questions were	Using this approach, the authors were able to gain perspectives of the participants and therefore, this was an appropriate way to gather data. One third of the data was blindly coded by an external judge, which improved the validity of the authors' analysis. Data was triangulated from the study, two conceptual models and literature. The second interviews allowed the authors to validate the interpretations.	No info about where the study took place. The results would only be generalizable among similar populations.	

							adjusted for the second interviews.			
2012	Older people's perceived health and wellbeing: The contribution of peer-run community-based organizations	Qualitative	Social Engagement	To investigate the significance and value of community groups for older adults who are members.	25 (14 women, 11 men) Age range: 65 years and older. Participants were physically and socially active, independent and living in their own homes.	Community-based organizations that are run by and are for older adults provided a sense of belonging, routine/structure, companionship and meaning to the lives of those who participated. The participants valued being a part of the organizations and had a strong sense of reciprocity. Older adults are more likely to participate in community organizations if they are able to self-select and freely choose the activities.	In-depth semi-structured interviews	Triangulation completed by observing organizations' activities and fieldwork notes. Allowed the researchers to gain insight from the perspectives of the participants.	Small sample size and only based on community organizations in one Australian state.	
2011	Maidment & MacFarlane	Crafting communities: promoting inclusion, empowerment and learning between older women	Qualitative	Social Networks	To document possibilities for using community development strategies in work with older adults through the lived experiences of older women involved in local craft groups.	Nine women from two different craft groups Age range: eight of the participants were between the ages of 75 and 85 years, with one participant who was 57 years All participants were from a regional city in	Authors found that involvement in informal, peer-run craft group activities provided opportunities for connectedness and support amongst members. It also provided these women with the opportunity to "give back" to their local community. Participants in the study described forming friendships, learning new skills and feeling a sense of purpose through involvement in the group.	Semi-structured interviews. Three individuals independently coded the transcripts.	This approach allowed the authors to explore the lived experiences of the participants making it an appropriate way to collect data. Having three individuals independently code the data helped to validate the results.	Small female sample. All the participants were from regional Australian cities. It would be difficult to generalize the data to other populations.

2008 Mars et al.	Characteristics of social participation as defined by older adults with a chronic physical illness	Qualitative	Social Participation	To develop a concept of social participation that agreed with the experiences of older adults with chronic physical illnesses. The authors aimed to find out what this group considered to be social participation.	Australia.	10 (eight men, two women) participated in qualitative face to face interviews (Five had diabetes and the other five had COPD); Age range 56-76 years	Older adults with a chronic illness perceived social participation to be a positive experience. If the experience was negative, it was not considered social participation. To be considered social participation, it needed to have one or more of the following characteristics: social contact, contributing resources to society or receiving resources from society. The authors found this to be consistent with other literature related to social participation.	Face to face interviews that included two open-ended questions related to social participation - what did they associate with social participation and examples of their own social participation. Two focus groups - one with participants who had COPD and the other with participants with diabetes. The focus group discussions included examples of social participation generated from the individual interviews. The examples did not cover all examples of social participation identified during the interviews, but covered all domains of social participation.	The approach was suitable as it allowed the participants to generate examples of what they considered to be social participation. These examples were then validated in the focus groups.	Relatively small and predominantly male sample. Since the participants had either COPD or diabetes, it might be difficult to generalize the results to all older adults.
2008 Mars et al.	Characteristics of social participation as defined by older adults with a chronic physical illness	Qualitative	Social Participation	To develop a concept of social participation that agreed with the experiences of older adults with chronic physical illnesses. The authors aimed to find out what this group considered to be social participation.	Australia.	12 participated in focus groups: Five in a COPD focus group (three men, two women aged 65 to 86 years); Six in a diabetes focus group (all men aged 63 to 78 years).	On average, participants assessed their health as fair to good.	COPD		

2011	Middling and the social engagement of older people	Qualitative	Social Engagement	Paper aims to address four specific questions: 1) Why do older people in disadvantaged communities become involved in gardening? 2) To what extent does participation in gardening projects facilitate older people's social engagement? 3) What do older people regard as the benefits and challenges of participation in a gardening initiative? and 4) What are the implications for policy and practice of older people's engagement in gardening initiatives?	Number or age range of participants not stated in this paper, but indicates it involved four gardening groups (communal) within a larger project (CALL-ME). Suggested that the participants were all older adults from disadvantaged communities in the UK.	Authors found that engaging in gardening initiatives (participant run groups) contributed to the greater good of the community as a whole, allowed older people to gain control over some aspects of their environment and achieve goals. It also provided opportunities for meeting and interacting with new people, and to learn new skills. Challenges included recruiting new members, maintaining the gardens (theft and vandalism) and maintaining interest.	The CALL-ME project was a participatory action research design. This paper used findings from interviews and focus groups to answer the research questions. No info is provided regarding the structure or types of questions asked.	The interviews and focus groups provided the authors with participants' insights and attitudes regarding their participation in the communal gardening groups.	No info regarding demographics available in the article. Also, although the study was looking at social engagement, this construct was not defined.
2004	Milligan et al.	Mixed Methods - Ethnography, qualitative	Social Networks	Cultivating health: therapeutic landscapes in northern	To examine how communal gardening activity on allotments contributes to the	In this study, communal gardening contributed to social inclusion and promotes the development of social networks in older adults by	Ethnography: over a nine month period –	Observation and interviews/focus groups were used to answer the research	Study only involved one specific city in England that has many

	England		Social Networks	To determine how involvement in the Arts, Health and Seniors (AHS) program contributes to the seniors participants' experiences of community.	Median age: 70 years	fostering friendships. It assisted to counteract social isolation and created feelings usefulness. The participants also started to help each other outside the garden activities. Some participants chose to garden on their own, but still wanted to be around other people.	Focus group and interviews: at the beginning and end Observations by the researcher and a gardener who was employed for the study	questions. This provided both objective information regarding participant behaviours and subjective experiences of the participants. Completed over a nine month period provided further insight into how gardening with others or alone impacted the participants health and well-being.	deprived neighbourhoods, therefore, results may not be representative of other populations. Small sample population.
2012 Moody & Phinney	A community-engaged art program for older people: fostering social inclusion	Qualitative	Social Networks	To determine how involvement in the Arts, Health and Seniors (AHS) program contributes to the seniors participants' experiences of community.	20 seniors (all, but one were women) Age range: 65 to 90 years Participants met on a regular basis at a neighbourhood seniors centre for social and recreational events. Mostly of European descent and English speaking.	The authors found that through engaging in the AHS program, the participants expanded their community connections, developed a meaningful role through art and worked together towards shared goals. These factors assist to support social inclusion in older adults.	Ethnographic methods were used including participant observation over a six week period, informal interviews with key informants and document review.	Three methods of data collection were used, which was beneficial for triangulation. This approach provided a more holistic examination of the program by taking into account the physical environment, interpersonal relationships and personal experiences.	Observation was only done for six weeks of the program, which ran from Sept. 2007 to June 2008. The interviews only included five AHS participants. Results may not be generalizable to other AHS participants or other populations.

2009 Park et al.	Mixed methods study of social engagement in assisted living communities: challenges and implications for serving older men	Mixed Methods	Social Engagement	To examine gender differences in social engagement and psychological well-being among residents in assisted living. Also, to explore the experiences and challenges concerning social relationships for men in these living situations.	82 residents (~74% female) from eight different assisted living facilities (three in rural communities, two had fewer than 17 beds and all but one were for-profit). All facilities were located in Tuscaloosa County, Alabama.	Results indicated that the social needs of older men living in assisted living facilities are limited and the current practices within the facilities do not favour men's preferences.	Closed ended questionnaires administered face to face. Questionnaires included: Life Satisfaction Index, Centre for Epidemiological Studies-Depression Scale (CES-D), Multi-dimensional Scale of Perceived Support, modified version of Lubben's Social Network Scale, demographic and health variables including age, gender, MMSE score, perceived health. Reciprocity was measured with two items "How often do your family or people at this facility talk over their problems with you?" and "How often do you feel your opinion is counted in making decisions in your facility".	Using the mixed methods allowed the authors to gain personal insights of the males: The design also enabled comparison between male and female perspectives.	Despite being a study focused on male perceptions, the sample was predominantly female. Also, it was limited to a specific county in Alabama.
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					38 (19 males and 19 females): recruited from The Church of Jesus Christ of Latter-day Saints, Mennonite Central Committee,	Participants of the study described benefits of expanded social ties/networks, increased connections with spouses, and increased compassion and empathy towards others through volunteering. They also became less materialistic through service.	Social activity participation was measured using 11 items selected from a 20-item activity questionnaire. Meal-time enjoyment was measured using an item from the Quality of Life instrument. Questions regarding perceived friendliness were also adopted from the QOL questionnaire. The qualitative interviews used a semi-structured interview guide and asked about daily routines and how general activities were socially embedded.	Design was appropriate to gain personal perspectives on the challenges and benefits of being an older adult who volunteers intensively in humanitarian service.	Limited sample size. Participants were highly educated and were involved in religious organizations; therefore, the results may not be applicable to other groups
2011 Piercey et al.	Challenges and psychosocial growth for older volunteers giving intensive humanitarian service	Qualitative	Social Networks	To examine the challenges, change and benefits of adults aged 50 years and older who gave intensive humanitarian service.					

2010	Older adults' perspectives on successful aging: qualitative interviews	Qualitative	Social Engagement	To examine the structure and attributes of successful aging, including the individual processes	22 independent living, community-dwelling older adults	Older adults viewed successful aging as a balance between self-acceptance and self-engagement with life and self-growth.	Individual interviews with broad, research-driven questions/probes.	This approach allowed the authors to gain personal insights from the participants	Mostly female, Caucasian sample. Those who participated
Reichstadt et al.					and Lutheran Disaster Response. Age range of 52 to 88 years Mean age: 65.24 years 86.8% were married, 2.5% widowed, 5.3% single and 5.3% divorced. Participants served an average of 81.95 weeks of volunteerin g. Most served outside their home country. The monthly household income range from \$455/month to \$12 000/month.		service.		of older volunteers. The participating agencies also referred those who handled challenges successfully.

2008 Routasalo et al.	Effects of psychosocial group rehabilitation on social functioning, loneliness and well-being of lonely, older people: randomized controlled trial	Quantitative	Social Networks	To examine the effects of psychosocial group nursing intervention on older people's feelings of loneliness, social activity, and psychological well-being.	(59% women; 41% men; 86% considered themselves to be Caucasian) Age range: 64-96 years Mean age of 80 years (SD = 9.1)	A large portion of the participants in the intervention group had found new friends during the follow-up year and 40% of the participants in the intervention group continued their group meetings for one year. No differences were found in loneliness or social networks between the intervention and control groups, but psychological well-being improved in the intervention group.	Randomized control trial. Intervention groups were carried out at seven centres and in six communities. Each group had seven to eight participants and met once per week for three months (12 times). Meetings were goal-oriented and closed. They included breakfast, lunch, coffee and group activities. Transport to/from the groups was provided. Participants were placed in one of three groups based on	Study included a control group and made an effort to objectively assess impacts of an intervention group on loneliness, psychological well-being and social networks. Each group had seven to eight participants and met once per week for three months (12 times). There was no opportunity for participants to provide their own insights into how participating in group rehabilitation impacted their lives.	There were no changes in loneliness or social networks, but this may have been due to the scales that were used to measure, as they may not have been sensitive to changes and/or they may not have adequately measured the construct. The study was also conducted under ideal circumstances and included transportation, which is often a limiting factor in older adults
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					<p>89 older adults recruited from three rural communities (one in Nova Scotia, one in Alberta and one in Ontario)</p> <p>Age range, median or mean age</p>	<p>The authors found constraints to choices in social engagement in three rural Canadian towns. First, they found that participating in compulsory altruistic activities such as caregiving and volunteering limited other opportunities for engagement in activities that were more meaningful to them. Other barriers to engaging in more meaningful activities included lack of personal resources, limited range of opportunities for</p>	<p>their interests. These included: art and inspiring activities, group exercise and discussions, and therapeutic writing and group therapy. Participants were assessed three times throughout the study - baseline, three months and six months using the UCLA Loneliness Scale and the Lubben's Social Network Scale. Participants were also sent a postal questionnaire at baseline and 12 months, which charted psychological well-being.</p>	<p>Limited to three specific Canadian communities, but did use findings from three different areas in Canada. Obtained perspectives from the community residents and of varied backgrounds, which strengthens these results.</p>	<p>attending community based programming.</p>
<p>2012 Rozanov a et al.</p>	<p>Unequal social engagement for older adults: constraints on choice</p>	<p>Qualitative</p>	<p>Social Engagement</p>	<p>To examine factors that constrain choices of social engagement in the context of rural aging in Canada.</p>					<p>Lack of info about the sample.</p>

					not identified.	social engagement and ageism as a barrier to paid work.			Relatively small sample. The study was also conducted under ideal circumstances for recruitment and carrying out the group processes (e.g. it included transportation, which is often a limiting factor in older adults attending community based programming).
2010 Savikko et al.	Psychosocial group rehabilitation for lonely older people: favourable processes and mediating factors of the intervention leading to alleviated loneliness	Mixed Methods	Social Participation	To examine the favourable processes in the psychosocial group intervention for older adults experiencing loneliness and to determine the mediating factors of the group in alleviating loneliness.	117 older adults who had a subjective feeling of loneliness and were willing to participate in group intervention (74% female; 26% male)	Participating in the psychosocial groups enabled the participants to share their experiences and feelings of loneliness. Through the groups they received support from their peers and felt a sense of togetherness. The participants developed friendships and experienced an increase in their social activities, which, in turn, assisted to alleviate their loneliness.	Group leader diaries, researcher observations and participant questionnaires (n = 103, 88% response rate). The questionnaires were sent to participants three months after the official group meeting and charted what the group meetings meant to the participants and how it impacted their feelings of loneliness.	The design used multiple methods to gather information and also included input from participants; however, this was in a questionnaire format, so participants true opinions and perceptions of the group may not have been captured.	Mean age: 80 years Age range: 75 to 92 years 80% lived alone, 14 leaders – two per group (one was a registered nurse and the other an occupational therapist or physiotherapist). All leaders had experience working with older people.

2009 Schwinge I et al.	Continued work employment and volunteerism and mental well-being of older adults. Singapore longitudinal ageing studies	Quantitative	Social Interaction	To understand the impact continued work involvement or post-retirement volunteerism in a Singapore context has on mental health of older adults.	Cohort of 2716 older adults at baseline and 1754 in the follow- up data Age range: 55 years or older living in Singapore 94% were of Chinese background Majority of sample lived with someone else	The results of this study suggest that continued involvement in work or volunteerism is associated with enhanced mental well- being, less depressive symptoms and higher cognition scores on the MMSE.	Two waves of data from the Singapore Longitudinal Ageing Study. Information was collected through extensive face- to-face interviews, assessments and tests performed by trained research nurses.	Design allowed a large amount of data to be collected and comparisons to be made between those older adults who continued their involvement in work or volunteering post- retirement to depression, cognition and mental health.	No information regarding the type of work or volunteering or frequency the participants in engaged in. A large proportion of the sample did not live alone. Results may not be generalizable to other populations outside Singapore.
2001 Sherer	Interactions with friends in a nursing home and residents' morale	Quantitative	Social Networks	To explore the social network interactions of the residents in the nursing homes, with emphasis on their meetings and visits with one another, disregarding all other social activities with family and friends.	43 older adults (72% female; 28% male)/from nine different nursing homes Mean age: 83.3 years (SD = 4.61) Average stay at the home for the participants was 4.86	The results of this study suggest that many residents in nursing homes have a large social network within the home and they associate with different friends who have various interests. Their morale was related to the visits, content of the visits and other aspects of their social network activities.	Administration of three questionnaires: demographic, visiting patterns of respondents and the Philadelphia Geriatric Center Moral Scale. Included open- ended questions.	Design included some open-ended questions, which helped to elicit some experiences and perceptions about the social networks of the participants; however, interviews may have produced more data regarding individuals' perceptions.	Limited to a small sample. Narrow view of social networks.

2010	Contributions of music to aging adults' quality of life	Quantitative	Social Networks	To evaluate and compare the impact of three types of music programs (choir, music appreciation and preventative music therapy) on four dimensions of quality of life (QoL) - physical health,	83 older adults (83.1% were women and 16.9% were men) who enrolled in one of three types of music	The results of this study suggest that participation in music programs can lead to perceived improvements in quality of life. Also, the primary reason older adults participated in the music programs was to broaden social networks and acquire new knowledge.	Pre/post-test quasi-experimental design. Questionnaires were delivered during the first month of the activity and two weeks before the end of the	Design included some open-ended questions to gather further information regarding perceptions. Included many questionnaires covering many areas of well-	Smaller sample; most participants were already attending senior centres, which may not generalize to those who are not.
2010 Skingley & Bungay	The Silver Song Club Project: singing to promote the health of older people.	Qualitative	Social Interaction	To gain participants perspectives on their personal experiences of attending a Silver Song Club with particular reference relating to perceived impacts on health and well-being.	17 older adults (12 female, 5 male) Mean age: 77 years Eight lived alone, seven were married and the remaining two were brother and sister 12 had past experience with music and/or singing A cross section of six Silver Song Clubs was used (12 in total exist)	The findings of this study suggest that participating in a monthly community singing group has beneficial effects on older adults health and well-being. It can provide then with enjoyment, opportunities for social interaction, improved wellbeing and mental health, and enhanced physical health. These groups can also provide opportunities for cognitive stimulation and learning, and improve memory and recall.	Individual semi-structured interviews with participants.	Design enabled the researchers to gain the perspectives of the participants on the benefits they experience from attendance in the Club.	Small sample size - may not be representative of the members of all clubs. Most of the participants (12) had past experience in music and singing, which may have influenced the findings.

2010	Processes associated with participation and adherence to	Qualitative	Social Interaction	To investigate the processes associated with older adults engagement in a 12-month structured exercise program	21 older adults (14 females, 7 males) Mean age	The findings of this study suggest that exercise programs that run locally, are individualized, deliver meaningful benefits, build efficacy, create a sense of	activity. The instruments used to collect data include: researcher-designed questionnaire to collect demographic information and motivation to participate in the program (23-items); Questionnaire on QoL - combination of standardized and researcher-design; researcher-design questionnaire to measure interpersonal relations factor; at post-test a questionnaire to evaluate the perception their lives had changed due to the program - researcher-design. 27 post-test questionnaires were not completed.	being and quality of life.	Predominantly female population.
Stathi et al.				subjective health, emotional well-being and interpersonal relations. Also, to identify the motivations for participating in the programs as well as identifying the barriers/difficulties that seniors encounter when participating in these types of activities.	activities in the Barcelona area Mean age 72.6 years All were recruited from senior centres.				

	a 12-month exercise programme for adults aged 70 and older			and continued physical activity following its termination.	75.8 (SD 3.9 years) Four exercise group leaders and two researchers All participants lived in the UK and participated in a 12 month exercise program as part of a falls prevention program	ownership can provide opportunities for social interaction can facilitate exercise engagement in adults over the age of 70.	following the end of the program or eight months after completing the intervention.	program and why they adhered (or did not adhere) to it.	community-dwelling older adults. All of them had transportation to/from the program. May not be reflective of the demographic.
2004 Stevens-Ratchford & Cebulak	Living well with arthritis: a study of engagement in social occupations and successful aging	Qualitative	Social Participation	To examine engagement in social occupations and successful aging in a sample of older adults with arthritis.	14 older adults (Two lived in retirement communities while the rest lived in the general community; Five male and 9 female) Age range: 61 to 87 years Mean age: 67 years All were Caucasian	Participants in the study were able to adapt and overcome challenges associated with arthritis through engagement in social occupations. They found enjoyment in social occupations that assisted with feeling content with life. The participants incorporated many social occupations into their daily routines to increase their quality of life. The results suggest that involvement in social occupations is important for health and successful aging.	Data collected in individual sessions (four) over a period of six weeks. The Occupation and Successful Aging (OSA) Interview Guide: Arthritis Version, Successful Aging Demographic Questionnaire (SADQ), Short-form McGill Pain Index, Global Life Satisfaction Scale (GLSS), the Life	Design allowed a large amount of data on multiple variables to be collected. Also, allowed the participants to provide personal opinions and experiences.	Small sample. Researcher developed the OSA Interview Guide, so personal values may have biased the results.

2010	Therapeutic effects of an indoor gardening programme for older people living in nursing homes.	Mixed Methods	Social Networks	To explore activities of daily living and psychological well-being of older people living in nursing homes and to examine the effectiveness of an indoor gardening programme in enhancing their socialization and life satisfaction, reducing their loneliness, and promoting activities of daily living.	53 adults from Hong Kong (26 in the experiment group at two different nursing homes; 27 in the control groups in two different nursing homes)	Age range: 65-95 years	45 females and 8 males	and at least high school graduates. Eight were also college graduates.	Nine were married living with their spouse, five were divorced or widowed and two of these were living alone.	The results of this study demonstrated that older adults residing in nursing homes had enhancements in life satisfaction and social networks; and decreased loneliness after participating in an eight-week indoor gardening program. There were no changes in their ability to complete activities of daily living. The participants of the program reported feelings of pleasure, happiness and increased responsibility. The gardening programme also provided increased engagement in social activities and increased physical activity.	Quasi-experimental pre and posttest control group design. Measures completed pre and post intervention with both groups: Life Satisfaction Index - A-Form, Revised UCLA Loneliness Scale, Lubben Social Network Scale, Modified Barthel Index. Interviews were completed with the participants of the gardening programmes post-intervention.	Satisfaction Index Z (LSI-Z) and the Quality of Life Scale (QOLS) were used to collect data.	Design looked at multiple areas including social networks. Provided opportunity to gain personal insights from the participants.	Small sample. Results may not be generalizable beyond Hong Kong.

				<p>To examine the experience and reasons why older adults attend adult day groups.</p>	<p>Median: 80-89 years Mean: 85 years for the experimental and 83 years for the control</p> <p>Prior gardening experience was found to be low - 40% of participants in the experimental group had no previous experience and 70% in the control group had no experience</p> <p>70% of both groups were widows.</p>	<p>Adult day programs provide opportunities for older adults to experience companionship and participate in activities with peers outside of the home, which assists to prevent loneliness. Attending adult day programs helps participants to be occupied, but the activities may not be meaningful to every</p>	<p>Ethnographic research. Two methods of data collection - interviews and observations.</p>	<p>Observations were not thoroughly discussed in this paper; however, interviews were an appropriate way to gain an understanding of why older adults attended the programs.</p>	<p>Very small sample - only two from each of the four programs.</p>
<p>2005 Tse & Howie</p>	<p>Adult Day Groups: Addressing older people's needs for activity and companionship</p>	<p>Qualitative</p>	<p>Social Networks</p>		<p>Eight (three men, five women) from four different day programs: Age range: 69 to 94 years</p>				

APPENDIX E: Relevance to Research Questions

Year/ Author(s)	How does engagement in occupations with and for others enable older adults to meet their occupational needs for affirmation, companionship and pleasure?	How is meaning generated when older adults engage in occupations with and for others?	When engaged in occupations with and for others, does the nature of the relationship between the older adults and others (e.g., family, long-standing friends, same aged peers) influence if and how older adults' occupational needs are met?	How do older adults respond when they do not have opportunities to engage in occupations with and for others?	Remarks
2006 Aday et al.	Supports that engaging in occupations enables older adults to meet their need for companionship, provides feelings of being needed (affirmation), and provides opportunities for pleasure. In this article, it is particularly true for peer relationships.	Meaning can be generated through providing support to others and perceiving support is available from others. Also, in this study meaning was derived through a sense of well-being, belonging, and maintaining independence.	This study highlighted the companionship that develops from engaging in activities with peers.	This study suggests that loneliness and social isolation can occur when older adults are unable to engage in social activities. Depression and decreased mental health can also result.	The participants in this study described the reciprocal nature of relationships, that is, they felt a sense of needing and being needed.
2011 Andonian & MacRae	Sense of belonging derived from interactions with others can assist to meet the need for companionship. Likewise, committing to social roles such as volunteering assists with meeting needs for affirmation through recognition from peers and those they help.	Meaning was derived for the participants in this study when they promoted their own wellness and when they experienced sense of accomplishment.	Not answered.	Not answered	
2013 Beech & Murray	Not answered.	Not answered.	Not answered.	Less engagement in activities with a social component correlated with increased feelings of loneliness for participants in this study. Those older adults who engaged more often in activities within a social context (i.e., going to the grocery store, post office) were found to be	

				less lonely than those who did not.	
2005 Cant & Taket	Participation in activities with others can lead to feelings of pleasure and connections with the past (coherence). It also provides opportunities for older adults to talk about their shared backgrounds, make new friends and renew old acquaintances (companionship). Being in the same space with peers (in this case all were Irish) contributed to feelings of sense of belonging.	Not specifically answered, however, men started participating in group activities more when card games were offered. This suggests meaning is derived from activities that are of interest.	Not answered.	Many of the participants described being alone and feeling isolated prior to participating in the project activities.	Supportive environments enable people to develop relationships and stay connected with others of similar backgrounds.
2007 Cipriani	Engaging in altruistic activities can provide feelings of being useful and needed (affirmation). This author suggests that when opportunities exist for older adults in long term care facilities to engage with the recipient of their altruistic activities and/or with others who are contributing to a common goal, companionship could be achieved. Being able to freely choose to be involved in altruistic was important to the participants in the studies reviewed in this article.	Meaning can be generated through doing things for the benefit of others and making others happy. This relates to the concept of feeling useful and being needed.	Not answered.	Not answered.	
2013 Creech et al.	Participating in music making activities (activities that hold meaning) with others provided opportunities for pleasure and created a sense of control for participants (agency). This article specifically looked at active group music making and compared it to those in other groups. Older adults were found to be more likely to experience feelings of relatedness when they engage music making activities. Individuals chose their own activities, which seemed to be based on interest. This study suggests the ability to meet occupational needs is influenced by contributing to a common goal with	Meaning was derived when participants felt a sense of purpose and through social affirmation.	Not answered.	Not answered.	

	others. Sense of purpose can be derived from participating in activities that are purposeful and hold meaning.				
2009 Croezen et al.	The results of this study indicate that true differences exist between older adults social activity patterns. This suggests that having choice in selecting activities could assist to meet individuals' occupational needs. For example, those who were engaged in caregiving activities experienced worse mental health. These older adults, particularly those looking after a sick partner, may not have had choice to participate in this activity.	Not answered.	Not answered.	The authors found that older adults who were least engaged in social activities rated their loneliness higher suggesting that less opportunities to engage in occupations with and for others may result in experiencing loneliness.	
2011 Dwyer & Hardill	Social activities with others (i.e., lunch groups, service provider visits) provided feelings of enjoyment (pleasure) and companionship for participants in this study.	In this study, men often did not attend specific groups/programs because the activities were not of interest to them. The men who did attend only did so to appease someone else. This suggests that meaning is derived when activities are of interest.	In this study, participants reported experiencing enjoyment in attending activities with their peers and through activities/visits with volunteer/service providers who were not peers.	Participants described feeling lonely and isolated when opportunities for social interaction were limited.	
2008 Eloranta et al.	Not answered.	Not clearly answered, but the interviewees responses suggest that close relatives were a "source of meaning in life" (p. 310).	In this study, relationships with close relatives were described as providing meaning to life.	One theme from the interviews was that loneliness results from lack of interaction with others, particularly close family members/relatives. The participants described a feeling of worthlessness and expressed a need to share one's thoughts with someone.	
2008 Fisher & Gosselink	Engaging in artistic activities (specifically creating art) assisted older adults in this study to meet their need for companionship by providing a	Meaning can be derived when feedback and recognition is received from those outside of the	In this study, all members were peers. Comments were made by participants that they were able to develop	Not answered.	Study highlights the benefits of a communal space and venue for coming together and

	venue to make new friends with peers who have similar interests. Making new friends and having opportunities for social interaction was frequently cited as one of the benefits of the group by participants in an earlier related study. Affirmation in this study was derived when members received recognition and positive feedback for their work from the community through exhibitions. The feeling or perception that those outside the group benefit from what they are doing. Sense of accomplishment was achieved through meeting common goals. The members also indicated their actions provided them with a sense of belonging within the community. This study looked at artistic activities within a specific group. All of the members joined because they held an interest in these types of activities.	group. Also, by engaging in activities with others who have a similar interest.	friendships because they had similar interests with others within the groups.		creating art with peers.
2012 Gilmour	Not answered.	Not answered.	The activities specified in this study included those that involved both friends and family. The study did not discriminate between the two types of social relationships, but supported that it is the quality versus the quantity of social relationships that is important.	The results of this study indicated that older adults experience increased loneliness and life dissatisfaction when they participate in social activities less frequently.	
2006 Greaves & Farbus	In this study, it was found that engaging in activities that are considered quality and appropriate lead to pleasure. This involved enjoyment from the social interaction that occurs through engaging in activities with others. Pleasure for the participants was enhanced when the activities were tailored to individual abilities, preferences, health status, social skills	Meaning can be enhanced when activities are tailored for the individual.	Older adults in this study reported experiencing enjoyment when they engaged with others from similar age groups	In this study, participants were considered socially isolated and/or lonely prior to participating in the project. Quantitative and qualitative data supported that having opportunities to engage in social activities with others helped to reduce isolation	The qualitative interviews in this study brought up the concept of feeling a sense of belonging not only within a group, but with the community as a whole.

	and confidence. Companionship developed by engaging in social activities as evidenced in that many participants interacted with each other outside of the more structured groups.			and loneliness. Mental health, overall, also improved through participation in the project.	
2010 Heenan	In this study, engaging in caregiving (i.e., for grandchildren) provided the participants with enjoyment. Participants described feeling valued and playing an important role in the lives of their children/grandchildren. These feelings could be related to meeting the need for affirmation.	Meaning could be derived when older adults feel needed and important by doing for others.	In this study, the participants placed emphasis on family relationships, particularly in relation to doing things for others.	Not answered.	The concept of reciprocity was discussed in depth in this study. Participants will do things for their children/grandchildren, but will receive assistance from them in return. Another issue that was discussed was centralization of shops and services, which provides less opportunity for social interaction/contact. The participants in this study indicated this was often how they would interact and spend time talking with others in the community. They did not feel a need to have organized groups, but still felt a sense of belonging within their community.
2012 Learnmonth et al.	The women in this study described hobbies and activities that interested them. They discussed how they looked forward to these activities indicating they may assist to meet their needs for pleasure. They also discussed the relationships they have with other members of community groups with whom they share similar interests (companionship). Some participants described doing things for others, teaching others skills, and sharing their expertise. This could lead to meeting	Doing activities with and for others that made participants feel valued assisted to generate meaning. Although this was not explicitly stated.	Not answered.	Participants who were housebound or had limited abilities/opportunities to leave the home described having a need for company and they valued having someone to talk to.	

	the need for affirmation by feeling worthwhile and valued. Concept of reciprocity was discussed through interdependency. Some participants described learning skills and then sharing them with peers.					
2009 Levasseur et al.	Some participants described having friends that they have "fun" with. Little other data was provided, but this could relate to experiencing pleasure. Participants also described how helping others is important for quality of life and how helping others helps oneself - possibility through meeting the need for affirmation. Doing things with others and forming friendship might meet the need for companionship.	Not answered	Not answered	In this study, lack of relationships lead to isolation and contributed to decreased quality of life for some participants.		
2012 MacKean & Abbott-Chapman	Engaging in freely chosen occupations created a sense of enjoyment for participants in this study. Being able to contribute, share wisdom (lifetime knowledge and skills) and mentor can therefore, assist with meeting the need for affirmation. Being around and doing with peers who have similar interests can help create a sense of belonging and companionship.	Engaging in self-selected occupations and feeling a sense of belonging and reciprocity contributed to the meaning the older adults in this study experienced when engaging in occupations with and for others.	In this study, the participants were involved in peer-run organizations and they formed friendships through their involvement in these organizations.	Not answered.		
2011 Maidment & MacFarlane	The results of this study support that involvement in groups that do craft activities (the members choose to participate) provides opportunities to share knowledge and skills. The participants described receiving recognition for sharing their knowledge, which would assist to meet	Meaning for the participants in this study came through doing things for others in their community. For example, making quilts for children in hospital and craft items for local charities. They	In this study, the groups were initiated and run by peers, which could be linked to their success and longevity.	In this study, participants described feeling lonely before they became involved in the group. This was mainly due to the death of a spouse and limited family contact.	Concept of reciprocity was discussed throughout this article through sharing knowledge and skills related to the crafts being done in the group, but also between	

	<p>their need for affirmation. These groups often made crafts/items for others, which was described to provide purpose in what they do. Participants also had the opportunity to learn from their peers (reciprocity), and to assist and provide support to one another within and outside the group.</p> <p>Involvement in the group provided companionship through development of friendships. Involvement in the groups was voluntary and members chose to participate. It could be assumed that those who chose to be involved in the groups have an interest in this occupation. Ability to meet occupational needs is enhanced when there is opportunity to meet a common goal, which in this study was predominantly producing items that benefit others in the community who are in need.</p>	<p>also involved members of the community, in particular people in nursing homes, who still wanted to be involved in knitting and sewing. Because of their involvement with the community, they saw what they were doing as having purpose.</p>			<p>members outside of the group (i.e., in transportation, financial tips).</p>
<p>2008 Mars et al.</p>	<p>In this study, the results suggested that having contact with relatives, friends and neighbours can contribute to companionship, particularly when sense of belonging is felt and when people show interest in each others lives. Doing things for others can assist with contributing to society – this could assist with meeting the need for affirmation. Doing things with others can be a "good time", which could assist to meet the need for pleasure. Some of the participants discussed how they felt disconnected in certain public places or organized social activities they previously enjoyed, this suggests that just being with others in a social forum may not meet occupational needs, particularly if the person feels disconnected or lacks a sense of belonging.</p>	<p>Not answered.</p>	<p>Not answered.</p>	<p>Not answered.</p>	<p>In this article the authors described how some activities with others can be a positive experience for one person, but a negative experience for another</p>

2011 Middling et al.	Participating in group gardening provides individuals with enjoyment. Can contribute to feeling worthwhile and valued (affirmation), particularly when others express their own pleasure from seeing the gardens or when they win awards/prizes. Also, affirmation could be achieved by sharing skills with others. Provides opportunities to meet people (peers) with similar interests and values (companionship) who live within the same community. The data in this study also supports that communal gardening with peers can also assist to meet needs for accomplishment (achievement, attaining goals), agency (perceiving control over the garden), coherence (opportunity to connect with past interests).	Meaning generated when others (non-group members) comment and express their own pleasure/enjoyment with the garden and acknowledge the work. Therefore, meaning can be derived through affirmation. Satisfaction generated when through accomplishing goals, running the group independently). In this study, the participants were able to connect with the larger community (e.g., people stopping by to look and comment on the garden, positive feedback from community members not involved in the project).	Not clearly answered, but all members of the group were older adults and the groups were self-run. There were comments by participants that participating in the gardening groups helped combat loneliness and isolation - would this be the case if it was not peers? Also, the participants mention the sense of control and responsibility of running the group without management (in the case of those in sheltered housing).	Some of the participant responses indicate they were lonely and isolated prior to participating in the gardening groups.	Supports environments that enable peers to work together and form relationships.
2004 Milligan et al.	The article supports the idea that engaging in communal gardening (participants chose to be a part of it) with peers enables older adults to meet new people in their age group, which might help to meet their need for companionship. It also provides opportunities to share advice and to do things for others (i.e., assist with maintaining the garden), which could assist with meeting the need for affirmation. Pleasure not specifically discussed, but there are suggestions that this occurs through engaging in this activity and from the results of the activity. Engaging in this activity provided opportunities to connect with things from the past.	Meaning was derived from feeling a sense of achievement from gardening and providing opportunities to help others who are less able or have less experience. Sharing skills and expertise. New gardeners felt safe and supported.	This study looked at the interactions with peers. Provided potential social network and to develop supportive & reciprocal relationships. Even though there were people of varying physical abilities, everyone still contributed in different ways.	Not answered.	Reciprocity mentioned in the article; as well as feeling useful and needed. (?affirmation). Communal space.

<p>2012</p> <p>Moody & Phinney</p>	<p>In this study, older adults sharing their works of art with others outside the group, which provided recognition and allowed the participants to feel they were contributing to the broader community (affirmation). The group provided the opportunity to collaborate with younger generations, which was enjoyable for some of the participants (pleasure). Without this program, the school children and the older adults would not have come together. Sharing experiences with students provided the older adults with links to their past (coherence). Through the artwork, relationships and connections between family members were strengthened, particularly with younger family members. Creating the art provided an identity. The participants needed to collaborate and interact to achieve goals and make decisions. Opportunities were provided to learn and develop new skills. Participants felt a sense of belonging and created connections with those who had similar interests (companionship). Reciprocity was also evident in the study. In this study, the participants had an interest in creating art; however, they did make it clear to the program facilitator when an activity (sewing) was suggested and they did not want it to be their project suggesting that the occupations must be of interest in order to meet their needs.</p>	<p>Meaning was generated through being recognized and feeling valued for contributions by those with whom they had existing relationships (e.g., family) and those who they have previously met/encountered (e.g., attendees at the public art shows). Feeling as though they are giving something back to the community rather than always receiving (reciprocity).</p>	<p>In this study, the group members were peers and they started to develop relationships and connected with each other outside of the group (i.e., travelling together).</p>	<p>Not answered. However, the authors noted that many of the participants had relocated from a home where they had lived for many years to a different community, which disrupted their social ties. Some of the participants had been referred to the group by health professionals due to their risk of experiencing social isolation.</p>	<p>Reciprocity was evident in this study. In particular, participants noted they were able to give back to society/others rather than always being the recipients of service.</p>
<p>2009</p> <p>Park et al.</p>	<p>In this study, some of the men indicated that having companionship can provide a means or forum to express feelings or emotions and provide opportunities to share experiences with others. In this study, the men described their reasons for not</p>	<p>Meaning and purpose can be generated by giving and reaching out to others who are isolated.</p>	<p>Not answered.</p>	<p>In this study, the men who did not have opportunities to engage with others avoided close relationships, lack of companionship. Feelings of boredom were felt due</p>	

	participating in social activities at the facilities due to lack of interest. Their activities preferences (i.e., outdoor activities) were not offered. The men preferred the activities outside the facilities such as restaurant outings. Would prefer to engage in activities they previously enjoyed.			to lack of activities that interested them.	
2011 Piercey et al.	Through volunteering the participants were able to draw upon strengths of one another, share stories and work together, which expanded their friendships and social contacts. This also created a connection between them. This was also true for those who volunteered with their spouses and relates to meeting their need for companionship. Helping others created feelings of joy, which suggests that participants need for pleasure was met through helping others. In this study, the participants all chose to volunteer with the religious organizations for extended periods of time to help others in need. Therefore, it could be assumed that when there is a level of commitment and assisting those in need, that the ability to meet occupational needs are enhanced.	The participants of the study found they became less materialistic and more compassionate through helping others. They described how helping others and contributing to the welfare of another person created new meaning in their lives. They experienced joy through volunteering and doing for others. Some felt a new sense of spirituality and appreciation for their own life through volunteering.	In this situation, the participants volunteered with peers and interacted with the people they were helping.	Not answered.	Participants described how they made new connections with others through volunteering.
2010 Reichstadt et al.	Participants described how volunteering or helping others has a positive impact on themselves, and provides enjoyment, stimulation, fulfillment, social interaction and ability to be engaged. This may meet their need for affirmation by contributing to self-worth. Doing for others also provided enjoyment for some participants, which would assist with meeting their need for pleasure. Interacting with others provides a sense of connection and feeling that	Not answered.	Participants in this study cited that relationships with friends were more important than family or spouse as they were a key form of support and also provided enjoyment and sense of well-being.	Not answered.	

	someone cares (?companionship). Social interaction with others can provide opportunities to learn and grow from others experiences.				
2008 Routasalo et al.	Participating in the structured groups created new opportunities for friendships to form through group activities. Also, the feeling of being needed increased amongst the group participants (affirmation). Through the group, mutual relationships developed – reciprocity. The participants were placed in groups based on their interests and they had control/influence over the group activities. There was a very small drop-out rate of the groups and many continued to meet beyond the study duration. Suggests choice and control are important.	Having feelings of being needed by others and create meaning in life.	Not answered.	The basis of this study is that older adults experience loneliness and social isolation when they do not have opportunities to interact with others, particularly their peers.	The participants made reference to mutual or reciprocal relationships.
2012 Rozanova et al.	In this study, many of the participants did not feel they had choice over activities, particularly those related to doing for others such as caregiving and volunteering. The responses of the participants indicated that by engaging in compulsory altruistic activities they did not have much time or opportunity to engage in more meaningful activities. Others found that activities that were offered were not of interest to them.	Meaning is generated from doing activities with and for others when the individual has choice and control.	Not answered. Although caregiving and volunteering was often with peers.	Not answered.	This study highlights the importance of having choice when selecting activities to engage in and how this impacts satisfaction. It also outlines constraints to engaging in meaningful activities with and for others in rural communities.
2010 Savikko et al.	Participating in structured groups run by experienced professionals created opportunities to develop friendships with others who have similar interests. Sharing mutual feelings of loneliness caused participants to feel a sense of togetherness and provided peer support. 40% of the groups continued beyond the scheduled time without formal leaders suggesting that	Not answered.	Not answered, but in this study, 40% group meetings continued with peers.	Not directly answered as the study looked at the benefits of structured psychosocial group intervention; however, those who were selected to participate were experiencing loneliness.	

	<p>companionship was achieved through the groups. Contributing to the group created a sense of belonging and the feeling that everyone was accepted by the members was the basis for developing friendships. Participants were able to do familiar things and learn new things. Then they were able to actively participate in their communities again.</p> <p>The participants were placed in groups based on their interests and they had control/influence over the group activities. There was a very small drop-out rate of the groups and many continued to meet beyond the study duration. Suggests choice and control are important.</p>				
2009	<p>Not explicitly answered; however, it was found that volunteering retirees have better mental well-being than those who did not volunteer and those who worked; this could indicate that having choice in selecting social occupations is important and can help meet occupational needs.</p>	Not answered.	Not answered.	In this study, it was found that when older adults are not involved in work activities or volunteering they have more depressive symptoms and lower mental well-being.	
2001	<p>Visiting and chatting with friends in the nursing homes was found to help the residents develop and maintain friendships (companionship) and to combat feelings of being alone. Although there was no indication that common interests facilitated the friendships, they did help to maintain the relationships. Visiting amongst friends provides a sense of identity. Participants in the study chose where and when to visit and chat with friends. Often developed routines of visiting.</p>	Not answered.	This study excluded family and friends from outside of the facilities, so the interactions were amongst peers.	In this article, one of the reasons the residents engaged in visiting and chatting with others was to reduce the feelings of being alone suggesting that when there are not opportunities to engage in social activities with others, loneliness can occur.	
Sherer					
2010	<p>Many of the participants in this study found enjoyment through participating</p>	In this study, the authors looked at the benefits of	Other than the facilitators and volunteers, the participants	Some of the participants in this group suggested that	

Skingley & Bungay	<p>in the singing group. They looked forward to attending the monthly session and therefore, likely experienced pleasure. The group provided the opportunity for individuals with similar interests to come together. Many viewed the social element of the group to be significant. Some people came to the sessions for company. Having the opportunity to meet others with common interests can facilitate friendships, which could lead to companionship.</p>	<p>singing in a group. Participation in the group was voluntary and many of these participants had past experience. The participants likely had an interest in singing and music, which provided an opportunity to be with others who have similar interests. Therefore, this indicates meaning may be generated from activities when they are of interest and provide links to an individuals' past.</p>	<p>were all older adults with an interest in music. Therefore, the group provided an opportunity to meet others with similar interests.</p>	<p>attending the group could assist to counteract loneliness.</p>	
2010 Sole et al.	<p>In this study, most participants participated in the programs for social reasons including "to have a good time with friends", "be amongst pleasant people", and "to make friends". Therefore, the participants potentially sought out these programs to meet their need for companionship. The post-test results indicated the participants felt the program contributed to meeting new friends. They also found it made them feel more useful, which could help to meet their needs for affirmation. The participants worked together to achieve common goals and felt a sense of camaraderie. Many in the choir group indicated they enjoyed singing and therefore, participation in this group likely contributed to meet their need for pleasure. Participation in the group was voluntary and the results of the questionnaire indicated they experienced enjoyment from their involvement.</p>	<p>Not answered.</p>	<p>The key motivator to participate in groups was to meet new friends and create new friendships. Given that these groups were designed for older adults, the participants were engaging with others in their own age group.</p>		
2010 Stathi et al.	<p>The participants in the exercise program started planning events outside of the program with each other suggesting that they had similar interests. This could lead to meeting</p>	<p>Not answered.</p>	<p>Other than the instructors, the participants were all older adults over the age of 70. The older adults created opportunities to meet up and</p>	<p>Not answered.</p>	<p>Adherence to the group exercise was higher than the individual exercise programs. This could have been due to the</p>

	<p>the need for companionship. Also, doing the exercise with others created enjoyment for some of the participants suggesting that doing the exercise with others contributed to meeting their need for pleasure. This study only looked at adherence to an exercise program, but participants had a choice to participate in the program and to stay in the program.</p>		engage in other activities outside of the exercise group.		social aspect of the program.
2004	<p>In this study, engaging in occupations with others provided opportunities to share stories, similar experiences and feelings (e.g., when partners prepare and eat meals together there are opportunities for discussion). This creates a social connection with one another and can contribute to companionship. The routine nature of some daily occupations assisted the participants to maintain connections with their partners, families and friends. By participating in community groups provided opportunities for membership roles and fulfilled the need to be productive through helping others (affirmation). The participants in the study indicated that travel, community and religious activities provided enjoyment, social connection, interaction, recognition and approval. Participating in social occupations provided enjoyment and encouraged new and innovative thinking. Engagement in social occupations strengthened bonds/relationships, which could enhance companionship. Participants may have had their need for coherence met through sharing knowledge, tradition and values with others.</p>	Not answered.	Not answered.	Not answered.	<p>The participant responses suggested that the quality versus quantity of social interactions/connections was important.</p>
2010	<p>Participating in a gardening programme with others in a shared</p>	Not answered.	<p>The participants in the study completed the gardening</p>	<p>This study demonstrated that those older adults not</p>	<p>Having a common space where the gardening</p>

Tse	<p>living environment can provide increased sense of responsibility and pleasure. It provides the opportunity to share skills and knowledge as well as to gain skills and knowledge from others. In this study, doing with others provided an opportunity for new friendships to develop, which could contribute to companionship. The participants chose to participate in the gardening program and they were able to make some choices in what they gardened and how they gardened.</p>		<p>activities with peers in their nursing home.</p>	<p>involved in a gardening program maintain their current level of loneliness while those who were in the experimental group show a decrease in perceived loneliness. Similarly, the subjective comments from the participants indicated they were less lonely because they had become a team member. Those that did not have the opportunity to participate in the program also had lower levels of social network in comparison to those who participated.</p>	<p>could occur would have influenced the opportunity for it to be social occupation.</p>
<p>2005 Tse & Howie</p>	<p>The results of this study supports that engaging in activities with others enables older adults to meet their needs for companionship through being with and talking with others, particularly with those who have similar interests. Opportunity to engage in activities for others can assist with providing support, which could relate to affirmation. Engaging in activities can bring pleasure. In this study, some participants found that meeting people created meaning and pleasure. For some it was more about doing the activities with others rather than what they were doing. Others felt some of the activities were childish.</p>	<p>Supporting others and, conversely, being supported by others generates satisfaction. Meaning is derived from participating in previously enjoyed activities and interests with others.</p>	<p>In this study, it was not clear if it was the relationship with peers, staff or both that influenced whether occupational needs were met.</p>	<p>Feelings of loneliness occur when opportunities to be with others are absent or limited.</p>	

APPENDIX F: CAOT Publications ACE Copyright Permission Letter



Canadian Association of Occupational Therapists
Association canadienne des ergothérapeutes

CAOT Publications ACE Copyright Request

September 24 2014

Kristy Spear
231-75 Collins Grove
Dartmouth, NS
B2W 6B3

Dear Kristy,

According to your request, you would like permission to use the Case Study 8.3 in your thesis "Scoping Review: Enabling older adults to meet their Occupational needs through "Staying Connected" at the University of Dalhousie.

Study Case 8.3 Mary's move to a nursing home –by Wendy Pentland in Polatajko, H.J.(2007).E.A., Townsend ,H.J. Polatajko., *Enabling Occupation II: Advancing an Occupational Therapy Vision for Health, Well-Being, & Justice through Occupation*. p. 223-Ottawa, ON, CAOT Publications ACE.

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Yours sincerely,

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