

Workshop on Interventions for Older People

Auspiced by the Healthy Ageing Theme of the ARC/NHMRC Research Network in Ageing Well

La Trobe University
July 14 and 15 2005
Meeting Notes

Background

The ARC/NHMRC Research Network on Ageing Well (www.ageingwell.edu.au) has been funded by the ARC and NHMRC to ‘... generate innovative, multi-disciplinary approaches necessary to understand ageing people, relations between age groups, and economic, social, and policy contexts that shape ageing experiences’ and to ‘... bring together established and early career researchers and end-point users, forming a unique network that generates and implements research agendas and translates and applies findings to national goals.’

As part of the Healthy Ageing theme of the Network a Workshop on Interventions for Older People was convened by the theme convenor Professor Colette Browning. The timing of the Workshop was to take advantage of a visit to Australia by Professor Marcia Ory, an international expert on interventions for older people. Thirteen researchers, one government representative and six doctoral students participated in the workshop.

Workshop Goals

1. To identify current knowledge and activities in the area of interventions to promote healthy ageing in older people
2. To identify key knowledge gaps in the area
3. To outline studies and frameworks designed to address these identified gaps
4. To test end-users reactions to the studies and frameworks
5. To discuss and explore collaborative publication activities within existing resources
6. To involve postgraduate students and emerging researchers in the activities to enhance Australasian healthy ageing research capacity

Workshop Activities

Day 1

Two formal presentations were included in Day 1 of the Workshop program. Professor Maria Ory, from the Texas A & M University System and a La Trobe University Institute for Advanced Study Distinguished Visiting Fellow spoke on new themes in intervention

research. Professor Shane Thomas¹ from the School of Public Health La Trobe University) discussed methodological and analytical considerations in intervention studies. The PowerPoint slides for these presentations are attached to this document.

Participants presented their own intervention research activities across the domains of physical activity, social connectedness, cognitive and mental health and quality of life and discussed the way forward in advancing intervention research. Based on their expertise the participants broke into two groups, Physical Activity and Cognitive and Mental Health/Quality of life, to develop intervention strategies around these themes. Participants were asked to consider the broad aim of the study, the target population and the intervention design.

Themes in intervention research

Professor Marcia Ory focussed on new approaches to behaviour change interventions as illustrated by the Active for Life Program (www.activeforlife.org), the Health Maintenance Consortium (<http://hmrc.srph.tamhsc.edu>) and the RE-AIM framework (www.re-aim.org). She highlighted the importance of translational research which involves translating intervention research to real world settings by building on evidence-based research, expanding the research application into new populations, working with existing community settings and structures and understanding real life facilitators and barriers to behaviour change.

Professor Ory discussed a number of inviolate behavioural principles that should be applied in interventions aimed at behaviour change including goal setting, identification of barriers, tracking of behaviours, active problem solving and supportive feedback. She discussed the tension between maintaining intervention fidelity and adapting programs to different settings and populations. Professor Ory compared traditional approaches to interventions with the new approaches. The new approach to interventions examines how theories translate to common mediators and specific strategies. The focus is on reaching thousands of traditionally hard-to-reach program participants such as those with low income, chronically ill or frail. Recruitment and retention in programs are seen as researchable issues and strategies for maximising recruitment and retention are paramount. Professor Ory suggested a number of elements that need to be included in designing interventions for older people:

- “Identify the essential elements of any research intervention and assess which elements are linked to what outcomes and for whom
- Examine what types of adaptations are needed to make efficacious interventions more widely acceptable in different populations and settings
- Expand from a solo focus on one lifestyle to examine interacting behaviours (e.g., how to simultaneously affect physical activity and nutrition
- Design interventions at multiple levels (e.g., target individual behaviours as well as the built or social environment)

¹ Professor Thomas is now Director of the Centre for Primary Care Research at Monash University

- Focus on factors predicting long term adherence at both the individual and organisational levels, mapping trajectories of adherence over time
- Develop practical assessments that can be adopted in community settings”

Participants’ current research activities and the way forward

A number of participants are conducting research on physical activity including General Practice interventions (Active Script), and interventions in culturally and linguistically diverse and socially disadvantaged communities. Falls and balance research was also represented where the emphasis was on translating evidenced-based programs to diverse settings. Health and community service and social interventions including the role of social networks in wellbeing was a focus for some participants. The application of self-management approaches, developed as a response to improving chronic illness management, to managing the “problems” of ageing was a research focus as was the impact of limiting or ceasing driving on quality of life.

Most participants were interested in translating their research into diverse settings and populations taking into account the elements highlighted in Professor Ory’s presentation.

Methodological and analytic consideration in intervention studies

Professor Thomas compared RCT approaches to intervention design with a program logic model and presented an alternative data model for intervention studies. He noted that in RCTs, analysis is centred on the impact of the intervention on the group and that participant characteristics are typically not included in the analysis. However people are different and respond differently to interventions. Further, the effect of the intervention may change over time and contextual factors are likely to be important. The program logic view of interventions analyses inputs, studies the intervention process, longitudinally maps outputs and outcomes and studies efficiency and cost effectiveness. He argued for the analysis of individual differences, adopting a longitudinal data collection strategy and including contextual factors in the analysis. He suggested that we should follow program logic principles and collect a minimum data set that includes participant characteristics, intervention characteristics, program staff characteristics and service system characteristics.

The next generation of intervention studies

The participants broke into two groups according to broad interests: Group 1 Physical Activity and Group 2 Cognitive and Mental Health/Quality of Life. Participants were asked to consider the following criteria when developing the intervention:

- Impact
- Prior experience of the researchers
- Evidence bas
- Feasibility
- Innovation potential
- Fundability
- Fit with goals of the Network

Group 1 Physical activity:

The focus for this group was extending the Active Script program to include an “enabler” to assist the GP referral process. It was reported that Active Script, a brief physical activity intervention conducted in GP settings changed the habits of 10% of clients over a 12 month period, The Western Victorian Division of General Practice have trialed the enabler approach with community health and private providers as referral points. There is a need now to extend the intervention.

Action:

1. Nancy Huang and Steve Bird agreed to draft a proposal to extend and evaluate Active script incorporating referral approaches.

Group 2 Cognitive and Mental Health/Quality of Life

It was suggested that one area that impacts on the health and well being of older people is the transition to ceasing driving. This impact occurs not only for the older driver but also impacts on the caregiver or partner. There has been increasing attention paid to this issue by various governments. For example New Zealand has announced a review of older driver licensing. In the U.S. the AARP has been active in promoting safe driving and the importance of accessible transport for older people. In Victoria, the Parliamentary Enquiry into Improving Safety for Older Road Users delivered their report in April, 2004.

It was decided that there is a need to gather more evidence about the scope of driving cessation and its impacts on older people and their families. There is an emerging literature in this area. In Australia we have at least two longitudinal studies that have collected data on driving cessation in older people and there is opportunity for further analysis of these data.

It was noted that decisions around changing driving habits are associated with increased frailty and sensory and cognitive impairment. For the older person changing driving habits may be perceived as a marker of dependence. It was concluded that this transition is not handled well by either families or health professionals and as such provides an opportunity for an intervention that would aim to assist the older person and their caregiver or partner adapt to their changing circumstances.

There is an emerging interest across most States in older drivers so such an intervention would have national appeal. The inclusion of a consumer group such as COTA or National Seniors on the Steering Committee for such a study was recommended.

Actions:

2. Colette Browning to meet with representatives from the Victorian Department of Infrastructure who are responding to the Victorian Parliamentary Enquiry into Older Drivers.
3. It was agreed that review of the literature related to developing interventions for older drivers in the transition to limiting or ceasing driving should be conducted.
4. Researchers in this area not represented at the workshop to be identified for collaboration.

Workshop Activities

Day 2

The two intervention areas were presented to an end-user, Gianfranco Spinosa from Seniors Victoria, Victorian Department of Communities who responded to the proposals.

Physical activity intervention in GP settings

Physical activity has a central policy focus in Victoria with the launch of “Go for your life” health promotion program and fits with the “Fairer Victoria” policy agenda.

Governments are interested in dissemination of efficient and cost effective strategies on a broader scale. The Active Script program has Commonwealth and State funding. In order for the proposed intervention to attract State funding an argument would need to be made that the enabler model would add value to the existing approach. Mr Spinosa suggested that we look at the existing infrastructure in Victoria (e.g., Regional Sports Assemblies) to facilitate the referral process. A focus on at risk groups such as obese older adults, older people with chronic illness or frail older adults should be considered.

Facilitating adaptation to driving cessation

At present the Department of Infrastructure has a steering committee that is responding to the Parliamentary Inquiry into Older Drivers and Mr Spinosa suggested we follow up with that group. Most of the government response has been around community transport options. Our intervention focuses on facilitating adaptation to modifying driving habits and driving cessation.

Where to from here?

It was agreed that there was potential for collaborative research activities within the group around interventions. A number of broad conclusions about current models of intervention research were drawn and responses were formulated. The suggestions made by Professors Ory and Thomas were endorsed.

Most intervention studies are short term, are poorly evaluated and are not designed for sustainability within existing service settings. For example, programs funded by government do not routinely collect data that allow the evaluation of efficiency and cost effectiveness. Funded research usually provides rigorous participant outcome data on small, highly selected samples but does not address issues of uptake, sustainability nor translation into diverse settings and populations. The influence of the characteristics of intervention staff and service system characteristics are rarely analysed. Dissemination of effective interventions to health professionals is also poor.

- Researchers need to link with existing service providers and systems to facilitate access and sustainability
- The design of the intervention should address:
 - access by diverse populations
 - sustainability
 - factors that affect uptake

- Analysis of outcomes should include the influence of participant, intervention, program staff and service system characteristics
- Measures of intervention efficiency and cost effectiveness should be routinely incorporated in intervention research
- Dissemination strategies should be routinely incorporated in intervention research

There are some existing examples that incorporate elements of the above approach, for example, chronic illness management programs that could be applied to interventions for older people.

Post Workshop Follow-Up

Dr Nancy Huang and Dr. Steve Bird have drafted a proposal around the enabler model for physical activity and are considering funding options before further dissemination.

Colette Browning attended a meeting with Emma Fell from the Victorian Department of Infrastructure and presented our ideas. They are focussed more on transport options but indicated a willingness to collaborate with our group on future intervention initiatives around older drivers.

Colette Browning has commenced gathering articles on interventions related to the transition to ceasing driving. A few articles recognise the need for such an approach but there are few examples of such interventions in the literature. For example, the American Medical Association in collaboration with the US National Highway Traffic Safety Administration through the Older Drivers project has developed a "Physicians Guide to Assessing and Counselling Older Drivers."

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Workshop on Interventions for Older People

**Auspiced by the
ARC/NHMRC Research Network in Ageing Well
Healthy Ageing Theme**

**John Scott House
La Trobe University
14th – 15th July, 2005**

Goals for the Workshop

Day 1

Drawing upon expertise of the participants we propose to:

1. Identify current knowledge and activities in the area of interventions to promote healthy ageing in older people
2. Identify key knowledge gaps in this area
3. Outline studies and frameworks designed to address these identified gaps

Day 2

1. To test end-users reactions to studies and frameworks
2. To develop a strategic plan for developing proposals for funding
3. To discuss and explore collaborative publication activities within existing resources

It is also a goal of the workshop to involve post-graduate students and emerging researchers in these activities to enhance Australasian healthy ageing research capacity.

Agenda

Day 1 Thursday 14th July

9.30-10.00	Arrivals and coffee
10.00-10.15	Introduction and Welcome
10.15-10.45	Marcia Ory <ul style="list-style-type: none">• Themes and opportunities in intervention research
10.45-11.00	Coffee break
11.00-12.00	Your current research activities: <ul style="list-style-type: none">• Physical activity• Social connectedness• Cognitive and mental health
12.00- 1.00	Facilitator: Gary Andrews Your ideas about advancing intervention research
1.00-2.00	Lunch
2.00-2.45	Shane Thomas <ul style="list-style-type: none">• Intervention study framework Colette Browning <ul style="list-style-type: none">• Criteria for choosing an intervention
2.45-3.45	Identifying the next generation of intervention studies: <ul style="list-style-type: none">• Stream A: Physical Activity (Steve Bird, Lindy Clemson)• Stream B: Cognitive/Mental Health (Mary Luszcz, Julie Byles)
3.45-4.00	Coffee break
4.00-5.00	Facilitator: Marcia Ory Synthesizing key intervention approaches

Agenda (cont.)

Day 2 Friday 15th July

9.00	Arrivals and coffee
9.30-10.30	Facilitator: Colette Browning Strategic plan for next steps: <ul style="list-style-type: none">• What is it?• Who will do it?• How we will we do it?• When will we do it?
10.30-10.45	Coffee break
10.45-11.45	Strategic plan for next steps (cont.): <ul style="list-style-type: none">• What is it?• Who will do it?• How we will we do it?• When will we do it?
11.45-12.30	Facilitator: Hal Kendig Reality check: Will our key intervention approaches work? End user's reaction: Gianfranco Spinosa, Department of Victorian Communities Nancy Huang, Kinect Australia
12.30-1.30	Lunch
1.30–2.30	Post workshop actions: <ul style="list-style-type: none">• Grant proposals• Collaborative publication activities
2.30-3.00	Coffee and departures