



Alzheimer's
Australia SA
Living with dementia

ACTIVITY BOOKLET for CARERS

**Matching Activities with the
Abilities, Needs and Interests of the
Person who has Alzheimer's Disease**



ACTIVITY AND ALZHEIMER'S DISEASE



Alzheimer's disease is the most common form of dementia, and affects an estimated 140,000 people in Australia. The disease is progressive, degenerative and, as yet, irreversible. The disease damages the brain which results in impaired memory, thinking and behaviour.

Dementia is characterised by gradual memory loss, reduced ability to perform activities of daily living, difficulty in learning, and progressive loss of language and communication skills.

It is often difficult for people with Alzheimer's disease to initiate and plan activities for themselves which are satisfying and enjoyable. This inability to perform activities may further be hindered by ageing processes (such as visual and hearing impairments), acute illnesses (such as chest and urinary tract infections), and other chronic disabilities (such as arthritis and heart conditions). Carers have an increasingly important role because of their capacity to initiate, organise and plan activities for the care receiver, thus enabling them to make creative and satisfying use of their time, and enhancing their independence and quality of life. This activity booklet has been developed to assist carers to match activities with the needs, abilities and interests of the person who has Alzheimer's disease.

It presents some guidelines for helping individuals with Alzheimer's disease perform activities. It is important to remember there are no right or wrong answers, as every individual with Alzheimer's disease has different needs, interests and abilities. What may work for one individual will not necessarily work for another. Experimentation is often the best way to determine what works best for your relative.



So what are activities?

An activity can be viewed as a task in which a person actively participates. Basically, an activity is anything we do. Activities can be categorised into four different areas. These include:

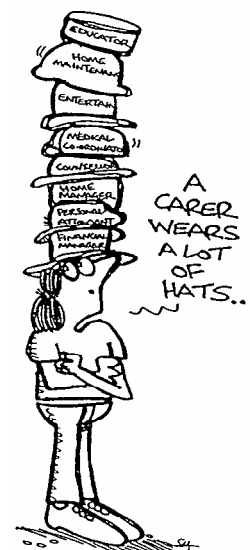
- leisure and recreation (eg. reading, board games, sport).
- self-care (eg. dressing, showering, shopping).
- rest and relaxation (eg. sleeping).
- work (eg. things that have to be done)

Activities are not just recreation or leisure but can also include self-care – these activities can be just as rewarding and satisfying.

Finding satisfying and satisfactory ways to occupy the individual with Alzheimer's disease during the day maybe a problem for most carers and often takes a great deal of effort and energy. Obtaining help from others can be a good way to reduce this burden.

Performing activities will not restore the lost capacities of the individual with Alzheimer's disease, but will enable the remaining abilities to be used in a manner that helps to maintain independence for as long as possible.

When the individual with Alzheimer's disease is no longer able to complete tasks independently, carers may feel that they must do everything for them. This can cause the person to become inactive, frustrated and bored. By helping the individual with Alzheimer's disease undertake activities for themselves, you are helping them to regain some control over their life and retain a sense of identity and dignity. Participating in activities can promote a broad spectrum of benefits in mental, physical and social functioning for the individual with Alzheimer's disease.



Stephen Stanley, Whyalla Norris, Copyright

Some of the benefits of participating in activities have been summarised below.

Physical Benefits of Activity	
Increases and maintains strength and mobility	Increases oxygen supply to the body
Prevents joint stiffness	Increases and maintains flexibility
Increases energy and vigour	Increases quality of sleep
Increases appetite	Help with weight control
Increases heart and lung function.	Reduces risk of certain diseases
Slows aging process	Decreases blood pressure
Helps the body to heal itself	Increases co-ordination, balance and reaction times
Increases bone mineral content	Improves sexual experiences
Exercises remaining abilities	Less medication needed

Mental Benefits of Activity	
Promotes feelings of fitness	Improves mood
Increases alertness and clear thinking	Increases attention span and judgement
Decreases disruptive behaviour	Reason for living
Gives opportunities to experience task mastery and success	Enhances self-esteem, self-image and self-identity
Decreases feelings of hope-lessness, helplessness and frustration	Increases control of life and actions (autonomy)
Builds competence	Alleviates depression
Improves pride and confidence	Improves motivation and interest
Relieves boredom	Increases ability to cope
Reduces anxiety, tension and stress	Improves orientation
Developes positive coping strategies	Decreases incidence of psychological disorders

Social Benefits of Activity	
Facilitates companionship	Increases life satisfaction
Increases productivity	Decreases boredom
Decreases social isolation	Restores roles and dignity
Promotes continued involvement in home life	Improves and maintains independence
Promotes sense of usefulness, belonging and pleasure	Reduces pre-occupation with problems
Maintains communication skills	Enables participation in hobbies and interests
Teaches new skills, renew old interests and expand horizons	Improves independence and ability to remain in community
Provides a change of pace and scenery	Reduces burden on carers

Getting Started

The ability to communicate is quite often affected in Alzheimer's disease. Being able to effectively communicate both verbally and non-verbally plays an important part in successfully providing and involving the individual in activities.



Below are some helpful hints in communicating with the person who has Alzheimer's disease:

- ◆ establish eye contact and address the person directly. This helps to gain their attention, and they are more likely to know someone is speaking to them
- ◆ when approaching the person, be calm and relaxed as their behaviour will often mirror yours
- ◆ speak calmly and clearly to increase the likelihood of being understood
- ◆ use short simple words and sentences as this reduces the amount of information the person has to deal with at any one time
- ◆ give only one piece of information at a time and wait for the person to absorb what you have said
- ◆ slow down your speech to give the person more time to understand what has been said
- ◆ speak in a calm, low pitched voice which is supportive and reassuring

- ◆ when asking questions, try to make them simple. Quite often, asking closed questions that only require a ‘yes’ or ‘no’ response are easier and more likely to get a reply. For example, asking “would you like to play cards?” rather than asking “what games would you like to play?” may be preferable
- ◆ keep directions and instructions simple and concrete. Expressions like “run along” can often be taken literally
- ◆ reduce environmental distractions like background noise, as these can confuse the individual and compete for their attention. The individual may have difficulty filtering out the extra noise and become distracted
- ◆ repeat what you have said if the individual is unable to follow
- ◆ be supportive and show affection. The use of touch can sometimes be effective and reassures the person that someone is there
- ◆ look for signs of restlessness or agitation and enjoyment or satisfaction. Experiment with different approaches as every individual is different
- ◆ use non-verbal cues like facial expressions, hand gestures, demonstration and touch, when appropriate
- ◆ give simple choices when possible
- ◆ praise success.

Helpful Hints and Guidelines on Activities

for Alzheimer’s disease

(Space has been provided for you to explore and fill in information about your relative.)

Keep the activity short and simple.

<p>What is your relative’s concentration span? _____ minutes</p>
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- ◆ Involve the individual in activities at the best time of day for them.

<p>Best time of day for your relative to participate: _____ (am/pm)</p>

Activities your relative values:

- ◆ Allow the development of self-identity, self-esteem and mastery.
- ◆ The activity should be individualised which involves taking into account the person's unique personality, needs and interests, stage of Alzheimer's disease, and other illnesses.

List your relatives past and present interests	
<u>Past</u>	<u>Present</u>

- ◆ The activity should not be childish or undignified.
- ◆ The activity should re-establish old roles and relate to the persons interests.

List your relatives past and present roles	
<u>Past</u>	<u>Present</u>

- ◆ Be pleasurable and enjoyable.

List the activities your relative enjoys:

- ◆ The activity should involve minimal instruction with repetition as necessary.
- ◆ Allow for regular rest periods.

How long can your relative participate
in activities before tiring: _____ (minutes/hours)

- ◆ Aim for a structured activity, but be flexible to allow for spontaneity.
- ◆ Aim for a consistent routine and environment. Plan so the same things occur regularly at the same time.
- ◆ Activity should aim to use cognitive, sensory and physical processes.
- ◆ The activity can be used to validate the person's feelings, emotions and thoughts, and orient them to person, place and time.
- ◆ The activity should utilise past skills, experiences and memories.

List your relatives past skills and experiences:

- ◆ There are many activities that people with Alzheimer's disease can enjoy. But it is often difficult to find enough activities for the person to participate in over a week. This is okay as repetition is desirable - if it works keep doing it.
- ◆ Avoid activities that require learning complex new skills.

- ◆ Activities that require using large muscle groups (gross motor movements) are usually more successful than those using smaller muscle groups (fine motor movements).
- ◆ Use activities that are rhythmical and repetitive eg. nailing and sanding wood, chopping and peeling vegetables etc.
- ◆ If one approach does not work, abandon it and try something else.
- ◆ The type and choice of activity is not limited to leisure and recreation, but can also include self-care activities and household tasks.
- ◆ Be creative.
- ◆ The activity needs to be able to be broken down into small steps.
- ◆ The activity should be able to be modified and adapted to suit the persons abilities and needs.

Ideas On Adapting Activities



Activities generally consist of a number of steps which are performed in a particular sequence, enabling successful completion of the task. In Alzheimer's disease, the ability to complete entire activities is diminished over time, which often means carers need to be able to simplify tasks and modify the environment. This allows the individual with Alzheimer's disease to continue participating in activities and assists them in maintaining their independence, a sense of control over their life and dignity.

Activity Analysis is the process of breaking activities into steps. In order to do this successfully, one must physically participate in that activity to understand the demands of each step required to complete the task. Following is an example of an activity broken into steps.

Making A Cup Of Coffee

1. Enter the kitchen.
2. Collect the necessary materials for the task.
 - Cup and saucer from the cupboard.
 - Spoon from the drawer.
 - Milk from the fridge.
 - Coffee from the cupboard.

- Sugar from the cupboard.
 - Kettle.
3. Fill the kettle which involves.
 - Unplugging the kettle.
 - Taking the kettle to the sink.
 - Turning the water on.
 - Filling the kettle with water.
 - Turning the water off.
 - Returning the kettle to the bench.
 - Plugging the kettle in.
 - Turning the power point on.
 - Turning the kettle on.
 4. Put the ingredients into the cup.
 - Milk, coffee, sugar.
 5. Wait for kettle to boil.
 - Unplugging kettle.
 - Picking up the kettle and pouring water into the cup.
 6. Stir the coffee with a teaspoon.
 7. Drink coffee.

As you can see, what appears to be a simple task, like making a cup of coffee, can become quite complex for the individual with Alzheimer's disease, with each step requiring varying degrees of physical (ability to move body parts eg. being able to move the kettle), cognitive (a mental process characterised by knowing, thinking, learning and judging eg. knowing that the water in the boiling kettle is dangerous), sensory (being able to use touch, vision, hearing, smell and taste eg. being able to hear when the kettle has boiled) and perceptual skills (recognising and interpreting the senses eg. realising that the kettle is empty and requires re-filling).

Once the activity has been broken into steps and the demands of the activity understood, it can then be adapted in varying ways to promote participation and independence. One way of grading activities for individuals with Alzheimer's disease is by the degree of individual involvement. This can range from simply attending to a task that is presented to the person, to planning, organising and initiating the activity independently. There are a number of levels of assistance the carer can provide to help the relative perform an activity as independently as possible. These include:

- i. independent – no assistance required.
- ii. supervision – for safety reasons eg. to prevent burns from the boiling water in the kettle.

- iii. verbal and visual prompts eg. saying “the milk is in the fridge” when the individual is not able to remember where it is kept.
- iv. demonstration eg. showing the person how to fill the kettle.
- v. physical guidance eg. taking hold of their hand with a teaspoon in it and placing the coffee and sugar in the cup.
- vi. dependent – activity is performed by someone else.

Environment

The environment can also be modified to improve activity participation. Aim for an environment which is familiar, predictable, consistent and free of ambiguities. For example, leaving the coffee, sugar, cups and saucers out on the bench in the same place all the time. Also keep rooms free of obstacles and reduce the background noise when appropriate.

The following tables look at some characteristics of Alzheimer’s disease with some helpful hints, suggestions and guidelines to compensate for these characteristics.

Suggestions for common characteristics that affect activity participation among individuals with Alzheimer’s disease:

Characteristic	Strategies/Guidelines
Easily distracted after short periods of time	<ul style="list-style-type: none"> ◇ Break the activity into small steps ◇ Provide activities which are short and simple ◇ Minimise distractions in the environment like background noise ◇ Ensure the activity has purpose and meaning to the individual ◇ The activity selected should aim to be voluntary and relevant

Characteristic	Strategies/Guidelines
Decreased ability to follow instructions	<ul style="list-style-type: none"> ◇ Provide short and simple instructions both verbal and non-verbal ◇ Use demonstration ◇ Use activities which have a learned sequence, ie. each step of the activity cues the person to the next stage
Reduced ability to communicate: speaking, reading and writing	<ul style="list-style-type: none"> ◇ See getting started section of this booklet
Difficulty performing the steps of an activity in correct sequence	<ul style="list-style-type: none"> ◇ Break activity into steps to allow participation one step at a time in the appropriate sequence ◇ Provide verbal and non-verbal clues and prompts ◇ Use activities that are rhythmical and repetitive ◇ Use activities where one step flows onto the next
Unable to recognise and use objects correctly	<ul style="list-style-type: none"> ◇ Label objects ◇ Demonstrate the use of objects ◇ Limit access to dangerous objects ◇ Simplify the task by providing the object required
Difficulty carrying out skilled movements	<ul style="list-style-type: none"> ◇ Practice and repetition of task ◇ Use activities that utilise past skills, experiences and interests ◇ Use activities that require simple movements ◇ Provide assistance
Difficulty making choices	<ul style="list-style-type: none"> ◇ Use activities which require simple choices and no complex decision making <p>Use structured activities</p>
Demands made on person are greater than their abilities	<ul style="list-style-type: none"> ◇ Activities which use and focus on the persons abilities ◇ Compensate for deficits (parts of the activity the person can not do themselves) by providing assistance

Characteristic	Strategies/Guidelines
Difficulty contending with multiple distractions	<ul style="list-style-type: none"> ◇ Minimise environmental distractions like background noise ◇ Keep activities simple ◇ Break activity into small steps and carry out one at a time ◇ For group activities keep the group small ◇ Give the person time to process what is going on
Tiring easily (fatigue)	<ul style="list-style-type: none"> ◇ Provide regular rest breaks by breaking activity into steps or using activities that can be done in stages ◇ Use short activities ◇ Aim to use activities that are satisfying and enjoyable
Difficulty planning and organising activities	<ul style="list-style-type: none"> ◇ Break activity into steps ◇ Keep the activity simple ◇ Plan and organise the activity for the person
Poor motivation and difficulty starting: <ul style="list-style-type: none"> • reduced energy and drive • hesitancy • reduced spontaneity 	<ul style="list-style-type: none"> ◇ Provide activities that have purpose and meaning to the person ◇ Activities that build on past experiences and skills ◇ Provide failure-free activities that allow for success ◇ Provide a variety of props and materials that are in line with abilities and old interests eg. providing the pacing individual with a broom which transforms aimless wandering into a purposeful task
Loss of memory	<ul style="list-style-type: none"> ◇ Use activities which involve past skills and experiences ◇ Use verbal and visual prompts to trigger memory ◇ Activities which orient the individual to person, place and time eg. use of signs, large clocks and calendars, use of pin up and blackboards listing upcoming events, weather, day and date.
Reduced strength, endurance, flexibility and balance	<ul style="list-style-type: none"> ◇ Regular exercise

Characteristic	Strategies/Guidelines
Difficulty recognising errors and making appropriate correction: Less alert to possibility of accidents	<ul style="list-style-type: none"> ◇ Identify and remove hazards eg. sharp objects ◇ Supervise activities ◇ Use activities that have no element of danger involved
Difficulty learning new things	<ul style="list-style-type: none"> ◇ Use past skills and experiences to build new ones ◇ Repetition of tasks ◇ Try to maintain a consistent and structured routine ◇ Forecast changes from routine
Reduced ability to solve problems that occur	<ul style="list-style-type: none"> ◇ Eliminate need to make decisions and solve problems in activity ◇ Provide assistance with solving problems by simplifying the problem and giving a basic choice for the correct solution
Repetitive behaviour: <ul style="list-style-type: none"> • verbal • movement 	<ul style="list-style-type: none"> ◇ Intervene by providing distraction through activities Use activities that are rhythmical and repetitive eg. cleaning, sanding wood, peeling vegetables
Decreased tolerance for stress at the end of the day	<ul style="list-style-type: none"> ◇ Reduce the demands made on the person during this time ◇ Do activities during the day and leave the evening free for quiet time or occupy with very simple tasks ◇ Maintain a consistent routine and limit change ◇ Allow time for rest in the afternoon to minimise fatigue and agitation during the evening ◇ Give plenty of reassurance ◇ Decrease the amount of choice and decision making required during this period
Behavioural problems eg. wandering, restlessness, agitation, depression, apathy, withdrawal etc	<ul style="list-style-type: none"> • These behavioural issues can often affect the persons ability to participate in activity or directly related to the activity itself. The Alzheimer's Association has many books available on behavioural problems which may assist you.



Alzheimer's
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Living with dementia

Where to obtain advice and further information:

Alzheimer's Australia SA Inc

Telephone: 08 8372 2100

Dementia Helpline: 1800 100 500

Fax: 08 8338 3390

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