

## From Surviving to Thriving: Younger Adults in Long Term Care

### Take Home Message

From a lack of alternative housing and health care supports for younger adults with disabilities, there is value in having a range of supportive housing and residential long-term care options that are tailored to the complex needs of this population. It is critical younger adult residents are engaged to make changes within the setting of LTC, allowing for meaningful supports based on individual desires and goals. Moving forward with a social model of care and gathering information on social determinants of health will allow LTC facilities to improve meaningful participation and independent living for younger adult residents.

Why was this research done?	How was the research done?
<p>Research on younger adults living in long-term care has previously focused on gathering qualitative data pertaining to the experiences and quality of life of younger adults living in facilities. Additionally, some research has begun to explore quantitative measures of younger adult characteristics through surveys. Research has not yet applied a systematic way of collecting information on younger adults to create a profile of individuals within facilities across large populations. Research has also focused on one long-term care facility, and has not yet compared experiences of younger adults from various institutional environments or different models of care.</p> <p>The objectives of this study were to contribute new knowledge by developing a summary profile of younger adult residents using a systematic database (interRAI) available at the time of admission across Nova Scotia. Additionally, this study compared three case studies of Canadian and U.S. examples for housing and supports that have successfully engaged younger adults in productive and meaningful activities (i.e., work, volunteer work, education, leisure).</p> <p>The purpose of conducting this study were to develop a summary profile of younger adult residents across the province by analyzing data about their age, gender, income, reasons for admission, geographic location, and other characteristics. Focusing on case studies of successful housing supports also allows us to determine the salient variables</p>	<p>This study first applied quantitative secondary data analysis of designated variables from the admissions assessment (SEAscape database, NS DHW) using variables within the interRAI tool. The sample population included N=1401 clients admitted to LTC, aged 19-64 at the time of assessment. Analysis of provincial data was conducted on participant age, gender, income, reasons for admission, geographic location, health status (i.e., diagnosis of disability, ADL, IADL).</p> <p>Secondly, this study applied qualitative research methods through interviews with younger adults living at two different facilities in Edmonton, CA, and one facility in Boston, MA. The research design and approach aligned with Social Determinants of Health. At each facility there were two staff interviewed and two resident younger adults interviewed. Data from interviews were coded through thematic analysis using interpretive contextualist methods to reflect and unpack realities of younger adults residing in LTC environments. Themes that emerged were then organized according to social determinants of health lens.</p>

<p>related to residents, housing and care that seem to be related to enabling resident participation in productive and meaningful activities. Results will contribute to future study designs of similar research projects that aim to gather systematic information on the profile of younger adults, and use this information to respond to the needs and diversity of younger adult residents.</p>	
<p><b>What were the findings?</b></p>	<p><b>What can be done next?</b></p>
<p>Results from quantitative secondary data analysis of younger adult information indicates comparisons between youngest cohort between ages of 19-34 years old (N=38) and oldest cohort between ages of 55-64 years old (N=956) at time of admission. Based on results within the youngest cohort, 33% of participants had attended highschool and 33% post-secondary education, 90% had never been married, 85% were living with family member caregivers, and 68% experienced chronic conditions or TBI. In comparison, results from the oldest cohort, 10% had attended highschool, 30% post-secondary education, 35% had never been married, 40% were living alone, and 97% experienced chronic conditions such as stroke, dementia. Overall, results indicate these two cohorts of younger adults experience vastly different health diagnosis at time of admission, previous living arrangements, and social experiences prior to moving into LTC (i.e., marital status, education etc.).</p> <p>Five themes emerged from the multi-perspective interviews regarding the characteristics of long-term care environments that promoted meaningful and productive participation. They were described as environments that provided supports and services that enhanced opportunities for: 1) physical and social mobility (being supported to leave and do activities outside of home, engagement of family/friends); 2) civic participation and inclusion (location of homes in urban environments with accessible public transit); 3) dismantling disabling barriers (within physical environments and care for diverse embodiments); 4) intimacy and imagination (opportunities for shared residence with intimate others); 5) dignified risk (creative approaches, intelligent planning, fiscal management).</p>	<p>Based on the summary of results, future research should focus on identifying processes at time of admission to gather more information on social determinants of health. Gathering detailed information on variables such as prior employment, culture, activities etc. could contribute to supports within LTC promoting meaningful participation, client-centered assessments and interventions after younger residents move into LTC. Evidence from qualitative case studies indicate there are measures that can be taken within facility environments to improve meaningful participation of younger adult residents while promoting health and long-term productive opportunities.</p>