CHAPTER 7 – ACTIVITY PLANNING

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OBJECTIVES

1. Identify and explain the basic principles and purpose of activities for clients.

2. Describe the importance of client rights and cultural or religious issues in regard to activity planning.

3. Identify examples of activities suitable for clients with specific disabilities.

KEY TERMS

Aromatherapy lotions          Reminisce
Exercise                      Sensory stimulation
Functionally specific         Socialization
Chapter 7 – Activity Planning

A. PRINCIPLES OF ACTIVITY PLANNING

Activities should be functionally specific (designed for the abilities of each individual) to:

- Reduce depression, stress and anxiety.
- Help the individual recover basic body movements and reasoning abilities.
- Build self-confidence.
- Promote socialization and interaction.
- Relieve boredom.

Before beginning any exercise program the client should consult with a health care provider for an individualized plan.

Find activities that interest the client, not just those that interest you. Remember the importance of client rights. Clients have the right to refuse activities.

- Rather than thinking of activities as doing something with the client at a specific time the DCW should incorporating strengthening or sensory stimulation activities into regular personal care activities. For example, assisting with bathing is an activity. The DCW could play music and sing to/with the individual during bathing. Not only is it a great distracter but it is also an opportunity to connect with the client. Another example is foot massages with aromatherapy lotions. It accomplishes a sensory simulating activity, and allows the DCW to examine the client’s feet for any skin changes.

- Play music according to the client’s preferences (brush up on your “oldies but goodies” such as “Daisy” and “How Much is that Doggy in the Window?”). Some clients prefer some of the old gospel classics like “Rock of Ages” or “This Little Light of Mine.” The client will not mind if you do not have a perfect voice, and the two of you can laugh at forgotten words or have the client fill in some of the words for you.

- Consider activities such as walking, water workouts or wheelchair exercises. Exercising with even minimal weights can increase bone strength. Such activities reduce the risk of falls by improving muscle strength, balance, coordination and flexibility. Avoiding exercise because of fear of falling actually increases the risk of falls.
B. CULTURAL AND RELIGIOUS ISSUES

Look to the client’s cultural and ethnic background for possible activities. Ask the family what the client has enjoyed or been involved with in the past. Music is an important part of most cultures. Ask the client and family about what kinds of music the client prefers.

Religious and spirituality activities play a significant role in providing meaning and shaping the purpose in life for many people. The DCW must be very sensitive to the religious beliefs of the client and not try to convert the client to the DCWs viewpoints. Religious music may play an important part of the client’s life.
### C. ACTIVITIES SPECIFIC TO VARIOUS DISABILITIES AND FUNCTIONAL ABILITIES

<table>
<thead>
<tr>
<th>General Activities</th>
<th>Dementia, Stroke, Brain injury</th>
<th>Wheelchair Users with Arm Mobility</th>
<th>COPD, Breathing Problems</th>
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</thead>
<tbody>
<tr>
<td>Try to appeal to hobbies and interests</td>
<td>Appeal to senses—color, shape, texture, scents</td>
<td>Exercises aimed at increasing upper arm strength</td>
<td>Start slowly and gradually—take breaks as needed</td>
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<td>Playing checkers or other board games</td>
<td>Read a story or newspaper</td>
<td>Bicep curls</td>
<td>Short walks</td>
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<td>Play cards</td>
<td>Review family snapshots</td>
<td>Seated push-ups</td>
<td>Yoga</td>
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<td>Write a personal history</td>
<td>Go for a walk</td>
<td>Weight lifting</td>
<td>Dancing</td>
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<td>Go for a walk</td>
<td>Listen to music</td>
<td>Play a tape of yoga/ Tai Chi</td>
<td>Stationary bike</td>
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<tr>
<td>Write a letter</td>
<td>Sing Christmas or spiritual songs</td>
<td>Exercise lower extremities using stretchy bands</td>
<td>Exercise upper and lower extremities using stretchy bands</td>
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<td>Make a craft/ holiday decoration</td>
<td>Give a manicure/ pedicure</td>
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<td>Swim</td>
<td>Massage with aromatherapy lotion</td>
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<tr>
<td>Watch/discuss a movie</td>
<td>Reminisce (recall from past)</td>
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<td>Plan meal, make grocery list, clip coupons</td>
<td>Make a grocery list and discuss prices then and now</td>
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<tr>
<td>Cooking</td>
<td>Fold towels</td>
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</table>
D. ACTIVITY PLANNING EXERCISE

Implementing an exercise plan

Scenario: You are assigned to a female client who has a severe form of arthritis. The physical therapist has developed a service plan for the client. However, when you ask her about it, she tells you, “It hurts too much to exercise.” What three steps could you take to ensure that the client completes the exercise plan?

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Answers could include:

• Talk to the therapist to see if the exercises could be broken into more manageable parts. Start slow and take breaks.
• See if there are activities that the client enjoys doing that can be used as part of the plan. Check with the therapist to see if the activities can be used. Make it fun.
• See if the client has pain medication that she can take before the exercises. Non-narcotics such as ibuprofen or acetaminophen are preferred.

Activity planning for clients

• Divide participants in the class into groups.

• Each group decides on one or two clients with a certain disability or condition. Examples are listed below. The instructor may provide additional examples.

• Each group should decide on an appropriate activity and the supplies needed for each client based the client’s needs, functional status, and cultural/ethnic background.

• Each group can share the activities chosen with the whole class discussing what other activities might be good and what activities might not work as well.

Examples of possible clients:

• An individual with advanced Alzheimer’s disease who is Jewish.
• A young adult who is a wheelchair user who used to run marathons.
• A person who has had a recent stroke and is having difficulty talking.
• A child with cerebral palsy.
The Job I Almost Didn’t Take

My name is Anthony, and I have been a caregiver for five years. I want to share one rewarding experience I had with one consumer or almost did not have. At the time of the interview with my consumer and family, I almost decided not to take the position because when I walked into the home, the home was extremely cluttered; I could not even see the counter or the stovetop in the kitchen. I continued with the interview and tried to focus on the consumer and his needs. The more I talked with the consumer and his wife the more connected I started to feel. I got to the point where now the emphasis was on Travis, the consumer, and not on the house conditions. Travis’s wife stated he had an aneurysm and a stroke and was also dealing with the challenges of Parkinson’s disease. Later, I found out that Travis at one time was a well-known folk musician who played the guitar and sang, but now the loss of being able to express himself through the talent of his music was overwhelming. In the beginning when I started to provide care for Travis, he appeared to be in an extreme depressed state. Part of my responsibility from the service plan was to encourage Travis to do his breathing exercises. I have to say it was a boring exercise. Travis often struggled to do his repetitions on this breathing device. I remember reading an article about another consumer using a harmonica which aids to the strengthening of the lungs. Well, I talked to Travis about this idea of using the harmonica and he agreed. I was amazed on what doors opened from that suggestion. Travis’ breathing increased from where he could only use the harmonica in the beginning for a couple of seconds to now playing duets for minutes at a time. His passion for music had been aroused again. In fact, we even played at an awards banquet. I have been providing care for Travis for six months. I am glad that day when I interviewed Travis I saw past all the clutter. Has the clutter changed? No! I continue to have discussions regarding me being able to provide the appropriate efficient care for Travis in the time allocated and not have to always go on a hunting trip trying to locate the required supplies to meet his needs. At times I struggle with the life style, but I do some internal talking to myself. As caregivers, we are often faced with life styles different from our own, but we need to focus on the real task at hand, the consumer’s needs. Communication with the consumer and family is a win/win situation.

Anthony Lelli, caregiver

E. RESOURCES

Web sites
• The Therapeutic Recreation Directory, www.recreationtherapy.com/tractv.htm

Agencies
• Local parks and recreation sponsored senior centers and subsidized lunch sites.