Intergenerational visitation programs have demonstrated advantages for the young and old, but few programs last more than a year or two. Weaving long-term intergenerational programs into the fabric of both school curricula and community cultural life was the goal of a project launched in 1988 in Phoenix, Arizona. Classrooms of children visit weekly or biweekly with nearby nursing home residents, developing friendships while pursuing educational activities. Carefully planned and widespread community support through board participation, donations, and publicity has allowed the program to continue to expand, while the budget has decreased. Materials are available which facilitate program replication.

Key Words: Children, Nursing homes, Aging, Training

Building Community for the Long Term: An Intergenerational Commitment

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It is an unfortunate reality that entering a long-term care facility usually means leaving behind the larger community. For the 5% of this nation’s older adults who reside in nursing homes, contact with the community may be reduced to major holidays, when visitors and community groups come to visit the nursing homes. In particular, contact with young people is limited for nursing home residents, who are thus deprived of an important sense of personal continuity in the growth of a new generation. At the same time, young people in states such as Arizona, which has a highly transient population, tend to live far from their aging relatives. They, too, miss out on the benefits of intergenerational relationships and may develop distorted attitudes toward older adults and aging (Aday, Aday, Arnold, & Bendix, 1996; McCollum & Shreeve, 1994).

It has been demonstrated that well-designed contact between people from the broader community and nursing home residents contributes to the psychological well-being and physical health of the residents (Chamberlain, Fetterman, & Maher, 1994; Lambert, Dellmann-Jenkins, & Fruit, 1990; Newman, Lyons, & Onawola, 1985; Ward, Kamp, & Newman, 1996). There are also potential educational and attitudinal benefits for those who visit, particularly young people. As early as 1975, the U.S. government sponsored programs that involved transporting senior citizens to schools in order that they might participate in classroom activities. Research has attempted to describe guidelines for successful intergenerational programs. These guidelines include intimate rather than casual contact (Amir, 1969); predictable, scheduled visits (Schultz, 1976); mutually rewarding, cooperative activities rather than “performances” by the children (Seefeldt, 1987); integration into the school curriculum (McCollum & Shreeve, 1994); and careful preparation of all participants (Griff, Lambert, Dellman-Jenkins, & Fruit, 1996).

Yet despite evidence of the success of well-designed intergenerational programs over the past three decades, the published research has minimally addressed maintaining programs beyond the demonstration stage. This is of particular concern because one study indicated that although nursing home residents experienced increased health and “zest for life” when visited by young people, these factors declined below baseline when the visits stopped (Schulz & Hanusa, 1978). We found that many excellent intergenerational programs survive for only one or two years, until sponsoring agencies disband, a key individual leaves the program, or the initial grant expires.

After reviewing this literature and attempting to contact a number of programs that were found to have been disbanded, a group of community leaders in the Phoenix area sought a means to perpetuate intergenerational connections. Our goal was to establish a program that would foster long-term commitments and ongoing contact between schools and nearby nursing home residents. From the beginning, a major emphasis of the program was to design an administrative structure that would facilitate program replication while also providing continued commitment to each program that was initiated. Piloted 10 years ago with 5 programs, all of which are still in operation, the pro-
Transportation will be arranged.

The Friendship Model

The Community Program began in 1988 with funding from the local Area Agency on Aging and matching grants from local businesses and community groups. A half-time Program Coordinator was hired to implement a pilot program of regular (weekly or biweekly) one-hour visits of five classrooms of children to five neighboring nursing homes. The five programs reflected a diversity of youth age groups and locations, ranging from Head Start 4-year-olds transported by van to a nearby nursing home, to sixth graders in a public school integrating their nursing home visits into a Social Studies and Life Sciences curriculum. An introductory videotape developed during the first year was funded by a local charitable agency with videotaping facilities donated by a local utility company. This 20-minute videotape shows relationships developing during the year as the visits continue, skepticism and eventual enthusiasm of a local schoolboard, and comments of teachers, nursing home administrators and residents, parents, and children. It is now distributed nationally and has become pivotal to the development of new programs.

Initiating a Program

The initial step in developing a program is to approach a nursing home and a nearby school. The nursing home administrator and school principal must be “sold” on the benefits of the program, and using the videotape provides an easy introduction. When they have given their consent, the nursing home activity director and an interested classroom teacher are identified to do the core planning. One key to a successful program is an initial meeting between the school principal and teacher and the nursing home administrator and activity director. At this meeting, expectations and responsibilities of school and nursing home staff are clarified and often put in writing. Issues to be resolved include who will provide the necessary tuberculosis (TB) testing for “volunteer” visitors, how flexible the visitation schedule is, whether the facility will commit to a specific number of residents for each visit, how joint planning will take place, who will provide project materials and refreshments, and how transportation will be arranged.

Transportation is often the biggest challenge: the program coordinator, school principal, or nursing home administrator may approach a local service group to request the funding for the school bus rental. Showing the introductory videotape at a service group meeting frequently results in pledges of support.

Planning Activities

Once the project responsibilities are set, the activity director and teacher carry out the program. They have regular meetings to plan the visits, which occur on a weekly, biweekly, or monthly basis. Whenever possible, planning should include nursing home residents and children. Activities can be recreational (balloon volleyball, cookie making, song fests) or educational (science projects, writing journals, writing biographies). An excellent manual, A Guide to Community: An Intergenerational Friendship Program Between Young People and Nursing Home Residents (Mersereau & Glover, 1992) written by teacher-authors who participated in the pilot projects, describes numerous activities for various age groups, lesson plans, and other information needed to create a program.

School boards and parents sometimes are concerned about what children will miss in the classroom if they are spending time in a nursing home. This concern is generally assuaged within the first few months as the benefits of the program become evident. From inception the Community Program has strongly encouraged the educational possibilities of the visits. From first graders who write about their visits in journals to sixth graders who work with residents to produce a newsletter, educational goals and materials can be integral to the shared activities. Many activities not only enhance the development of learning skills for the children but also serve as valuable therapy for the residents—therapy that might be labeled “childish” were there not youngsters present.

Orientation and Training

An initial objective of the Community Program was to develop a training methodology for young people and staff to be used in future projects. One factor critical to the success of the program is that no young person—whether 4 or 14 years of age—has gone on a first-time visit without knowing something about what to expect. During the program’s first two years, grants from local business and charitable organizations funded a professionally developed 40-minute, four-module training videotape, Orientation for Youth, which allows teachers with no experience in nursing homes to orient students in the classroom. The tape includes an overview of aging and nursing homes, presenting information about odors, yelling, and other potentially disturbing experiences in a skillful and sometimes humorous manner. During the orientation, younger children enjoy learning about older adults’ abilities by looking through lenses coated with rubber cement and listening to tapes of muted voices, but they seem to understand that older people are “just people.” Because older children become more frightened of visible differences, their orientation is more extensive, and includes classroom discussions (e.g., “If I were old I would . . .,” “List all the words that describe old people”), interviewing family members about attitudes on aging, and reading books dealing with aging, illnesses, and life stages. One fourth grader wrote after his first visit:

Dear Myself, Why were you shy and nervous? Next time that will all change. One lady hugged me and another liked the story I brought. . . . Being with the

236 The Gerontologist
thing emotionally meaningful. Activity directors talk comfortably with, ability to communicate with, and empathy for older adults. Children talk about feeling valued by doing something important for the well-being of others, and about learning that old people are "just people." Residents describe feeling involved in something emotionally meaningful. Activity directors talk about how wonderful it is to have a meaningful activity through which staff and residents (who now have so little opportunity to contribute) can "give back" to the community. The following are samples of feedback provided by parents, children, and residents:

Parents
Bevin is comfortable with elderly and disabled residents. She feels she knows them as individuals—she sees a person, not just a chair or a bed. She loves the opportunity to be with older people and she is more sensitive to her grandparents' problems when she is with them.

I enjoyed seeing my child begin to comprehend and appreciate the cyclical nature of life. "Dying is just a part of living" is how she explained it. I can do no better.

She developed such comfort, ability to communicate and empathy with older adults, including her ability and desire to spend time with her great-grandmother up until the day before she died.

Children
I have started to notice and treat the elderly better than I used to. Now I understand that the elderly enjoy company just as much as we do.

They have been a great responsibility in my life. All of this made me feel like someone worthwhile, especially when they say they miss you.

The visits have been fun and a new experience. Now we know that old people do things too. Sometimes they can be sad, but they are mostly fun.

Residents
The most important part of the program was getting to see young children and being a grandpa again.

All visits are special. One of the children gave me a small gift which was important to me.

The children bring joy into my heart.

Program Commitment
Interest may serve to launch an intergenerational program for the first year, but only a real commitment will see it renewed for a second, third, fourth, and fifth year. This commitment, which includes the administration and staff of both the school and the nursing home, must be discussed at the initial meeting, and reemphasized over and over again throughout the life of the program. Without solid institutional support, the most dedicated teacher and activity director will be challenged to keep the program alive.

In addition, turnover of teachers and activity directors will lead to program closure if institutional commitment has not been cultivated.

Program Continuity
The Community Program's uniqueness has been in its initial and ongoing commitment to program continuity. Each individual program, as described earlier, stresses continuity as one of its goals. In addition, from the outset, the coordinator's responsibilities included pursuing continuation funding and building broader community support for the program. A Program Advi-
sory Board has included teachers, principals, nursing home personnel, representatives from nursing home associations, and community representatives. The board members have been instrumental in obtaining broad-based financial and in-kind support (e.g., videotaping facilities, office space and supplies, volunteer drivers, and visit facilitators) from more than 50 entities, including banks; foundations; service clubs; small and large businesses; religious, health care and educational institutions; and individuals. Frequent media exposure has contributed to community awareness. The program and its participants win numerous local awards each year. This emphasis on becoming part of the community culture laid the foundation for the program’s endurance and growth.

One key to the program’s success has been the role of the program coordinator. Unlike other programs which hope to grow in staff and budget with time, the Community Program’s goal has always been to make the coordinator’s role smaller and smaller. The program coordinator now works only a few hours a month, guiding new projects and troubleshooting older programs. She also serves as a “help-line” for programs developing in other states. Experienced project facilitators (teachers and activity directors) perform most of the problem solving and networking for newer local programs. In addition, the materials produced by the program and published nationally now allow replication of the program throughout the country. These materials are also essential for continuity of existing programs, which are subject to the many changes in personnel prevalent in nursing homes, school boards, and funding agencies.

Program Replication

Resources to guide the process of replicating the Community program are available (contact Bifolkal Productions, 809 Williamson St., Madison, WI 53703; phone 608-251-2818; fax 608-251-2874). The four products, each carefully designed by program administrators and participants and funded by generous grants from local agencies, are described in this section.

A Guide to Community is a 118-page curriculum and planning manual that describes how to sell the idea, how to prepare children and residents, what to do on the first visit, ongoing activities, curriculum plans, and evaluation. The appendix includes letters to parents, permission forms, lesson plans, contractual agreements, and evaluation forms. The guide is a wonderful resource that allows teachers and activity directors with no experience with intergenerational programs to plan and implement a successful program.

Videotape 1: Community: An Intergenerational Friendship Program is a 20-minute introduction to the project, which includes heartwarming scenes of visits between children and residents, as well as comments from school boards, parents, teachers, nursing home administrators, residents, and children. It is ideal for selling the program to potential participants and funding agencies.

Videotape 2: Orientation for Youth: Aging and Nursing Homes is a 40-minute videotape which begins, “When people go somewhere they’ve never been before, they like to know what to expect.” It is designed for preschool-age children through grade 6 or somewhat older, and describes nursing homes, illnesses, smells, yells, and how to get ready for a visit. It is ideal for activity directors and teachers to use to orient children to the nursing home experience.

Videotape 3: Tips for Activity Directors and Teachers is a 30-minute videotape of detailed and practical advice for professionals who have made a commitment to implement an intergenerational friendship program. Teachers and administrators with years of experience in the program describe common fears and worries, developing staff support, planning as a team, and nurturing relationships. The videotaped information facilitates designing or improving a program and overcoming common obstacles.

Conclusion

The Community Program has now been replicated in a number of sites locally and across the country. Each new project is a small contribution toward the fulfillment of the program’s long-range goals: facilitating long-term friendships between young people and nursing home residents, facilitating positive attitudes of young people toward elderly people, improving the quality of life of nursing home residents, and fostering community interaction with nursing homes to increase understanding of issues of aging.

References


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238 The Gerontologist