

### **Reviewers' Note: A Bookshelf for the Therapeutic Recreation Specialist in Long Term Care.**

Therapeutic recreation in long term care facilities is an area that has received notable attention in the past few years. Current trends indicate that many of today's students and practitioners will be working with older individuals in a variety of settings, including psychiatric and rehabilitation units. It is imperative then that therapeutic recreation specialists begin to explore the issues that are important to this population, as well as various treatment modalities that may be useful in working with older people.

These three book reviews are an attempt to give the reader an idea of the various resources that are available to a therapeutic recreation professional working in long term care. The review is not meant to compare and contrast the books, but rather provide a review of three very different types of resources, and to enable others to begin thinking about other possible resources they may use. The three books reviewed are: *Therapeutic Activity Intervention with the Elderly: Foundations and Practices*, *Manual for Recreation Therapy in Long Term Care Facilities*, and *The Lifestory Re-Play Circle: A Manual of Activities and Techniques*.

**Therapeutic Activity Intervention with the Elderly: Foundations and Practices.** Barbara A. Hawkins, Re.D., Marti E. May, M.S. and Nancy Brattain Rogers, Ph.D. (1996). State College, PA: Venture Publishing. ([www.venturepublish.com](http://www.venturepublish.com))

The benefit of a particular book may be determined by who the audience is for the manuscript. *Therapeutic Activity Intervention with the Elderly: Foundations and Practices*, by Barbara A. Hawkins, Re.D., Marti E. May, M.S., and Nancy Brattain Rogers, Ph.D., may have two distinct readers, and therefore the benefits and drawbacks of the book may be different for each one. The first group that may be compelled to read this book is students enrolled in leisure and aging, therapeutic recreation, occupational therapy, or other courses in the allied health sciences. The other group is professionals employed within one of these areas. Both groups can benefit from this book in slightly different ways.

The book is organized into five distinct units. The first unit is the introduction, where the authors take time to introduce two essential aspects that are vital to understanding this population—the changing demographics of aging and an understanding of how healthcare operates in the life of the elderly.

The second unit addresses the aging process. These four chapters outline the normal aging process, the psychosocial aspects of aging, and physical and psychological disorders common to the aging population. The chapters will provide the reader with a brief holistic understanding of the aging process. The text condenses social theories of aging, personality theories, adaptation styles, self-concept, and social networks into one brief chapter, but does not provide depth into the various theories of aging. A more in-depth presentation of these concepts, so important in developing therapeutic interventions, could be useful to the student and instructor.

The third unit provides a theoretical understanding of and a rationale for the development and implementation of good activity intervention programming. The various chapters address aspects critical to the TR process and make application to the elderly population. These chapters allow the reader to reflect on the importance of adaptation within this population and to gain a more global perspective on this adaptation.

The fourth unit presents several interventions that are grouped into the following areas: leisure education, physical activity intervention and health promotion, cognitive activities, and psychosocial activities. These chapters make specific applications to practice and are very beneficial to the professional reader.

The final unit provides future directions and applications in its explanation of professional practice considerations. The chapters give a therapeutic recreation specialist an understanding of administrative considerations when working with older adults. The authors also address ethical considerations, as well as provide an interesting perspective of where the field of therapeutic recreation is headed in terms of this population. The last chapter provides the reader with a “full circle” understanding of the entire text, ending with our professional responsibility to the trends and issues provided in the first unit.

Regardless of the audience, one of the strengths throughout this entire book is its ability to link theoretical and practical information. Conditions addressed in the second unit are also in the application unit of the book. Additionally, the structure of the book follows an understandable progression of concepts, from perspective, to theory, to application, and finally to trends. Yet the use of various writing styles does not allow the book to flow smoothly, even within chapters. Additionally, the text does not offer charts or graphs that provide concise visual interpretations of the material presented in various chapters. This aspect is particularly absent in the demographics chapter and the chapters that present theories for which visual models are present, such as Lawton's ecological model of the interaction between the person and the environment.

For the student audience, the book gives a broad background in various dimensions of aging. There are student aids, such as learning objectives and key terms to guide reading at the beginning of the chapter, and comprehensive questions at the end of the chapter. These aids may assist students in their reading comprehension.

The practitioner audience may find that the theoretically-focused chapters in the second and third units provide a foundation for program development. The fourth unit provides programming interventions that are useful in everyday practice.

Overall, this book provides solid information and is a good resource for both students and professionals working with older adults. A second edition, reflecting the changing issues in the fast-growing field of gerontology, will be most welcome.

**Manual for Recreation Therapy in Long Term Care Facilities.** National Therapeutic Recreation Society. (1998). Ashburn, VA: National Recreation and Parks Association. (www.nrpa.org)

The *Manual for Recreation Therapy in Long Term Care Facilities* has one mission: to provide a workable model for implementation of the Minimum Data Set 2.0, Section N (Activity Pursuit Patterns) and Section T (Recreation Therapy). What a joy to review a book so clearly conceptualized and delivered. Its provision of the rationale for therapeutic recreation services in long term care is both clear and astute. The introduction states that therapists who effectively implement specific targeted interventions to improve functional ability in either the physical, cognitive, social, or emotional domain will demonstrate the need for prescribed and reimbursed recreation therapy to residents, staff, colleagues, and regulatory agencies.

The manual begins by describing the role of therapeutic recreation in long term care. The next section, "Scope of Care," reviews the continuum model of therapeutic recreation service. The "Therapeutic Recreation Assessment/Treatment Plan" is outlined, followed by guidelines for recreation therapy for residents at each of the levels of the continuum. Included are guidelines for offering spiritual services, an important element of well-being in later life.

The "Program Design" section of the manual encourages therapists to see beyond the rigid schedule of activities. The reader is asked to focus on the milieu within which residents do things, as the delivery of therapeutic recreation services is not achieved through a schedule of activities, but is based upon individual assessment, development of goals and processes, and implementation of a full complement of program-oriented therapeutic interventions designed to bring about desired behaviors or outcomes. While the monthly "Schedule of Activities" is as inevitable in long term care as bedpans, the authors push the envelope in envisioning what therapeutic recreation is, and where it occurs. For example, in considering naturally forming cluster groups of residents, the manual suggests that the therapist, in "floating" through these groups, provides sensory stimulation with a handshake, enhances social awareness through verbal greeting, and so on.

There is merit to the recognition of the therapeutic importance of naturally formed cluster groups relative to therapist-organized programs. A short cautionary note should have been included here: "Interventions should be planned, not recognized post hoc." Therapists should not be reviewing Mrs. A's chart, noting her plan of care requiring sensory stimulation, then remembering giving her shoulders a squeeze in passing in the hall, and mark off the intervention as having occurred. Recording the most casual of encounters as recreation therapy will not do much to impress staff, colleagues, or regulatory agencies of the reimbursable need for recreation therapy.

The manual does outline the "Seven Steps to Success for Developing a Specialized Recreation Therapy Program." This chapter delineates how therapists can impress all levels of staff with documented outcomes from recreation therapy. Almost sadly, these reviewers noted that not only do therapists have the responsibility to clients to provide effective interventions, they must spend almost half their time proving their worth to fellow staff. However, for recreation therapy to be a reimbursable service available to the onslaught of aging boomers, each therapist must take responsibility for evolving the field.

The manual concludes with sample pages, policies, procedures, notes, and summaries. These "user friendly" resources can be pulled from the book and used in the professional reader's agency. There are also definitions, frequently asked questions (and their answers), case examples, a glossary, references, and recommended readings.

Now that HCFA has permanently included "Recreation Therapy" as a section of the MDS, every therapist working in long term care has the responsibility to obtain and review this manual. If you don't read it now, in 5 years you won't need to. You'll be out of a job!

**The Lifestory Re-Play Circle.** Rosilyn Wilder. (1997). State College, PA: Venture Publishing. (www.venturepublish.com)

*The Lifestory Re-Play Circle* showcases the talent, imagination, and compassion of the author, Rosilyn Wilder, RDT/BC. Wilder led an interactive drama troupe, "Autumn Stages, Older Adults Lifestory Theater," for 11 years. Based on her experiences, she offers ideas to recreation therapists for adding drama to reminiscence therapy and reminiscence groups.

Chapter 1 establishes an overview of "Lifestory Re-Play," and how it is different from traditional reminiscence therapy. "Lifestory Re-Play" is an interactive group process. Everyone participates in a variety of creative ways which affirm each person. Participants move, pantomime, develop group poems, share life stories, and step into roles in each other's life stories to re-play them. According to the author, "Life Drama," the primary tool, draws on the natural ability of all of us to express and recreate our lives through narration, dialogue, action, and interaction.

Chapter 2 includes not only a short discussion of who possible clients might be, but also an interesting examination of a leader's style and what could affect it. The author asks the readers to search their own "lifestory" to find examples within their own lives that they may draw upon while leading this process. The reader is challenged to draw upon feelings that may be associated with the aging process (e.g., helplessness, decreased health, and confusion). There are activities that encourage values clarification, ideas on leadership and teaching, and simulations of the aging experience. Finally, in this chapter, the author offers some broad suggestions for leading this type of group. These activities and suggestions would be good for any leader working with older adults, not just those employing this method.

The next chapter gives specific model workshops. Some therapists may appreciate having a step-by-step guideline for facilitating drama in reminiscence. Others may be frustrated by trying to make a certain outcome happen in a very process-oriented activity. The author does recognize that group activities, like "Lifestory Re-play," tend to go in unanticipated directions, and the successful leader goes in the direction of the group. Having a "Model Workshop" outline may give unrealistic expectations to the therapist trying this activity for the first time.

The final chapter is written by Ann Grunberg, M.A., RDT. She describes her successful implementation of "Lifestory Re-Play" in the large long term care facility in which she works.

While the enthusiasm and humanistic philosophy of the author is encouraging, "Lifestory Re-play" isn't for everyone. Reading this small book and leading a group would be like talking to Greg Louganis for 30 minutes, then attempting a front three and a half dive off the 10 meter tower. Some of us will flop. Some of us will be surprised at our success. However, for those with a flair or interest in drama, *The Lifestory Re-play Circle* could indeed be the springboard from which a recreation therapist develops a successful and rewarding intervention.

In sum, the reviewers recommend all three of these books for the bookshelf of the therapeutic recreation specialist working with older adults and/or in long term care. Each of the books offers something different, but valuable, for the therapeutic recreation specialist.

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