

A psychomotor rehabilitation intervention to improve health and well-being indicators of institutionalized older adults.

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INTRODUCTION

Institutionalization tends to exacerbate the usual fragility and disability associated with the ageing process (Heppenstall, Wilkinson, Hanger, Keeling, & Pearson, 2011). In turn, poor health and well-being compromise older adults' quality of life.

OBJECTIVE

The aim of this study was to analyze the impact of a psychomotor rehabilitation program on health and well-being indicators of institutionalized older adults.

METHODOLOGY

A total of 42 nursing home residents (84 ± 6.2 years) participated in the study: 21 were allocated to the experimental group (EG: engaged the rehabilitation program twice a week for 75 min), and 21 were allocated to the control group (CG: maintained daily institution activities). The Mini Mental State Examination was used to screen severe cognitive impairment as an exclusion criteria. Mood states, pain, disability and self-rated health were assessed through the Profile of Mood States, the P4 Pain Scale, the Barthel Index, and the EuroQol visual analogue scale, respectively. After finishing the study, the CG attended the rehabilitation program.

RESULTS

Comparisons showed that: in terms of mood states, both groups showed improvements in tension, whereas only the EG demonstrated improvements in depression, anger, vigor, fatigue, and confusion (treatment effect: -0.23 to -2.60); the EG experienced a decrease in pain (treatment effect: 0.21 to 0.50), while the CG showed an increase; finally, in terms of the disability level and the self-rated health the EG experienced no changes, whereas these indicators worsened in the CG ($p < 0.05$).

CONCLUSION

The psychomotor program was able to revert the expected loss of health and well-being characteristic of older people, particularly the institutionalized ones. Specifically, the program was effective in improving the mood states and in decreasing pain of the nursing home residents, as well as in maintaining their disability level and health status. These findings suggest that the general adherence of nursing home residents to psychomotor rehabilitation programs may improve the quality of life of our oldest adults.

REFERENCES

- Heppenstall, C. P., Wilkinson, T. J., Hanger, H. C., Keeling, S., & Pearson, J. (2011). Factors related to care home admission in the year following hospitalisation in frail older adults. *Age Ageing*, 40 (4), 513-516. doi: afr045 [pii] 10.1093/ageing/afr045