

What A Summer Vacation Program Means To Nursing Home Residents*

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... For many residents of a long-term care facility, a vacation program seems most remote . . . Both residents and staff who attend such a trip seem to gain a new appreciation for life and respect and interest in one another.

Institutionalized residents in a Home for the Aged are likely to have multiple physical illnesses and disabilities and to remain in the facility for an indefinite period of time. A common disability is mental illness, sometimes afflicting the majority of nursing home residents, a result, in part, of social isolation. Such illness is counteracted when residents receive psychological and social supports which foster a positive self-image. Residents in a Home for the Aged tend to assume roles as patients, people who are sick. Relief from this situation can be achieved when relationships between staff and residents and among residents themselves are altered. "Instead of viewing the job of the nursing home as one of taking care of disabled people, the home's staff could see its job as providing the opportunities, expectations, and supports for residents to do things for themselves in accordance with their maximum potential and capacities . . . Despite the weakness of many residents in forming social relationships, with staff support residents could develop ties with one another. With new opportunities provided . . . many more residents could have meaningful lives. Such goals are in accordance with the mental health needs of the older people in long-term care facilities."¹ If staff

relates to residents and expects them to behave as though sick, they will. Programs that stimulate the mind and body need to be initiated by the entire staff in order to enrich residents' lives and decrease the dependency role.

I felt the need to create an opportunity to further the following aims: providing each resident "warm, personal relationships, a sense of belonging and of future, of feeling loved and cared for, and of being worthwhile and productive. . .² They need to experience a sense of importance, a feeling of creativity and usefulness, and to establish, re-establish, or extend sound social relationships, as well as to cope satisfactorily with the unique demands of congregate living."³

In October, 1976, I made several inquiries of summer vacation sites where the residents of Darlington House could spend a few days away from the routine of the nursing home. Several residents had visited Camp Ma-Hi-Ya, a Jewish Community Center Camp, during the summer of 1970, and in 1971 nine residents spent five days at the Chelsea, Michigan camp. Since that time, several residents have returned for day trips to the camp. Many felt uncomfortable with the rustic accommodations. The camp was sold by the Jewish Community Center of Toledo, which made it necessary to investigate other possible vacation sites.

After corresponding with the Director of the Butzel Conference Center in Ortonville, Michigan, a staff visit was made there to discuss the possibility of residents vacationing

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¹ Elaine Brody, *A Social Work Guide for Long-Term Care Facilities*. Washington, D.C.: U.S. Department of Health, Education and Welfare, 1974, pp. 43 and 44.

² *Ibid*, p. 98.

³ *Ibid*, p. 134.

there. Upon visiting, I raised several questions, prepared beforehand, concerning bathing and dining facilities, sleeping accommodations, the terrain, recreational facilities, cost involved, and dates available for reservations.

After making a thorough inspection of the facilities at Butzel, including taking slides to show the residents, I returned enthusiastically and very impressed with this resort site. With agreement of the then director of the social service department and the Executive Director and unanimous approval of the Residents' Council, actual planning and preparation were begun.

Initially, my plan was to invite residents and staff from the Detroit Jewish Home for the Aged to share this experience. However, after discussing this idea with their staff, we discovered that the combined group of participants would be too large to be accommodated. As a result, each Home reserved separate times. To serve the end of social interaction and integration we invited members of the Toledo Jewish Community Center's Friendship Club (a well-aged group) and its staff. Several members of this group are acquaintances of the residents and some residents continue their membership in this group. The vacation program included this group for two years. By the third summer, the increased number of enthusiastic members from the Friendship Club and our own residents made it possible for Butzel to accommodate all of us at the same time. Therefore, the campers from Darlington House shared this experience with residents of the Villa Maria Nursing Home and Extended Care Facility, (located in Green Springs, Ohio), who had never before been offered such an opportunity.

Each group who joined us was made up of new and different people to whom residents could relate. Ethnic and religious backgrounds were diverse. With different groups and staff together in a totally new environment, a milieu of emotional well-being was created and uniforms were shed for jeans, swimsuits, and shorts. Residents were very aware of this

change, as was evident from their comments. For example, a resident told a nurse: "I thought you were such a demure person; you appeared on a pedestal, but you've really let your hair down!" Residents observed staff functioning in different roles and the residents' perception of staff changed. Staff too, noted residents performing in other than their expected roles. Examples of this included resident participation in boating, fishing, dancing, solo performance in singing, frisbee throwing, and more.

The "vacation program," as it was termed to counter any misconception that it was a rustic camp, was explained and talked up among the entire resident body regardless of residents' handicaps. Those residents who immediately signed up for the trip met as a committee to plan the activities in which they were most interested. Plans and preparation have always been started a year in advance. Several meetings were held with the residents as the date for departure grew closer. The residents were told the cost of the vacation and what clothing they would need to pack. The director of social services and of nursing participated in plans for staffing the program. The purposes of the program are formulated as: an opportunity for a vacation, that most of them have not known since their admission to the Home; increased socialization and provision of a happy and healthy experience; encouragement of physical activity, a change in environment, and enhancement of their self-esteem.

These three years' experience provided opportunities for residents to relate to staff and to each other, outside the sick milieu. This break from the model "patient" role has proven to be a healthful asset to residents.

The staff chosen to assist the residents comprised one or two social workers, as many as three registered nurses, two aides, two licensed practical nurses, the volunteer coordinator, as many as four volunteers, and the activity coordinator. The residents have also enjoyed surprise visits from former social work students. The rationale (formula) for

staffing depended on the group size and needs of those attending. Logistics to be considered included the number of residents confined to wheelchairs, the number needing some assistance ambulating, the amount of medication to be distributed, the number of residents needing assistance in dressing, bathing, and eating. Each summer, different staff people have been asked to go in order that we may provide this experience to all who care for our aged.

Each resident saved \$25, \$30, and \$45, respectively from their savings for each of the three years toward the total cost, the remainder (two-thirds) being subsidized by the Home. The residents with limited resources were proud and excited when they had saved up this money. For many, this was accomplished by putting a few dollars away each week beginning in the previous November.

Letters were sent to each resident's physician explaining the vacation trip and advising the physician of the resident's intention to go. Once the physician's signature of approval was received, a letter went out to the families to give them this information and to insure that they understood the plans.

Arrangements for transportation were made through the generosity of various automobile dealerships, the Home's vehicles and staff vehicles. One year we were loaned a 20-passenger bus complete with a wheelchair lift, a van to transport all medical supplies, crafts equipment and luggage, and the Jewish Community Center bus to transport the Friendship Club and the remainder of the residents. For two years, through the generosity of the Winebrenner Village in Findlay, Ohio, we have received a 10-passenger lift van for our use.

The number of residents who state interest in attending the vacation program has always been high, initially. The cycle of response that is experienced over time and that now can be anticipated, is that approximately 40 of 111 residents are initially interested, down to 31 the week prior to departure, and to the final number of 20-25 on day of departure. There

have been residents who are hesitant and not confident that he or she will be able to manage physically or to cope with spending four days away from the familiar setting. We, therefore, encourage such individuals to participate in the "Day Trip" that is provided. The Day Trip is organized by the vacation coordinator and the Home's transportation and Day Trip coordinator. Volunteers are also invited to join them for the day. There have also been incidents when a resident has just taken the pleasant scenic round trip drive.

Other logistics to be attended included: roommate arrangements, a roster assigning residents to vehicles, a list of special diets, preparation of the menu, making name tags and securing all craft, recreational, and medical supplies, and also last minute shopping for residents. Residents were given a list (in large print) suggesting what to pack in their suitcases.

The activities and programs were jointly planned by the Darlington House residents, activity and social service staff, and the staff and members of the groups who joined us. These suggestions and ideas were approved by those people planning to attend. "In fact," exclaimed one woman, "If we do all those things, we'll be there a month!" A large print calendar was put together so that each resident would know what was planned and at what time. Some of the activities offered were: nature crafts, boating, swimming, fishing, cocktail parties, staff skit, badminton, volleyball, croquet, roulette, Black Jack, bonfire, movies, quiz bowl, singing, folk dancing. Several residents even made their own kites from scratch. Relaxation in the sun and being together held special appeal for all. Upon arrival, residents were each given a diary in which to record their experiences. Some recited portions of their inscriptions while others shared their diary's contents using non-verbal body language.

For most, this was their first vacation in many years. In their own way, they all expressed their appreciation for such a program opportunity. Those who attended the

vacation seemed to gain a whole new appreciation for life and care by staff and a deeper understanding that there was meaning and reason for them to look forward to the next day. Some showed a new caring and interest in others. Their infirmities didn't seem to bother them as much; those who usually retired after the evening meal at the Home were the ones who remained awake and alert until after midnight. No one went to sleep before 9 p.m. Those who never enjoyed nor cared to join in the activities at the Home found excitement in what was offered at Butzel. The delight in their faces told the whole story.

The second summer's vacation trip was video-taped. This provided the residents, staff, and families later opportunity to reminisce and added extra entertainment to the annual vacation reunion, held in July. It also provided the staff with an evaluation tool, allowing for closer examination of the total vacation program. It is highly recommended to video-tape all trips but it is also necessary to have a staff person for this purpose alone.

The vacation program has enabled new relationships to be made, enhanced self-pride, camaraderie, and sharing of ideas and suggestions by all involved. It has helped members of the community better to understand and improve upon how a nursing home is perceived by others outside. New and different approaches to resident care and "development of group feeling"⁴ have also resulted. "The status which an individual achieves because of his ability . . . is often the first step toward winning the acceptance from others that makes him feel at one with the group."⁵ There was evidence of many such first steps. Residents learned about one another. Many were given a "second chance" by those usually more critical of behavior. Comments were heard, such as: "I never knew she could do that," and "She's really intelligent, despite her

being bound to a wheelchair." For the majority, self-confidence increased and one's "sense of mastery . . . led him to try other things, even though they were new and different."⁶ There has been much value placed on such a trip "for the growth and development of individual members and of the group-as-a-whole."⁷ Attitudes have changed between staff members, residents and staff, and residents and residents.

This vacation experience has also created total role diffusions. The social workers toilet, dress and assist with bathing and feeding, while nurses have planned games and volunteers remark that they, too, feel like staff and are regarded as such. There are implications for new types of programming. The question remaining to be answered concerns what concepts can be extracted from such a program to help achieve similar results in other activities. Staff must remember that it is not only the setting at Butzel that helps to bring this about. "Too often nature and camp craft are limited to a camp setting, and opportunities to use these media in the city are overlooked."⁷ It is importantly the change in staff attitudes and the commitment to an idea, which is reinforced by the administration. One can, and must, involve all staff in all areas of programming. The result of this process can be measured in the way staff relates to residents after returning to the nursing home, as people rather than "the lady in room 4." Thus, it is vital to change staffing patterns and utilize staff differently. There is a great need for, and emphasis on, teamwork. "Trips provide new and enriching experiences . . . Trips can arouse . . . new ideas . . . also help members to articulate interests previously unexpressed."⁸ Residents "who live surrounded by a building seldom notice the sunset or the first evening stars, but often appreciate their beauty when returning from a . . . trip."⁹

⁴ Gertrude Wilson and Gladys Ryland, *Social Group Work Practice*. New York: Houghton Mifflin Company, 1949, p. 303.

⁵ *Ibid*, p. 303.

⁶ *Ibid*, p. 304.

⁷ *Ibid*, p. 337.

⁸ *Ibid*, p. 340-341.

⁹ *Ibid*, p. 337.

“The thrust for life and growth is innate, and is a ground plan which must be followed if an organism is to develop with positive health. Positive health is much more than the absence of disease; it is the maximization of well-being and the efficient use of all energy and resources to be and to become all that is

possible.”¹⁰ The environment and its ingredients either provide or deny these opportunities. Our three summer vacation programs have indeed increased the positive health of participating Darlington House residents.

¹⁰ Alan F. Klein, *Effective Groupwork*. New York: Association Press, 1972, p. 191.

Spain's Jewish Community

The number of Jews known to be in Spain today is about 12,000. Approximate breakdown of organized communities is as follows:

City	Members	Percentage	
		Sephardim	Ashkenazim
Madrid	3000/3500	80	20
Barcelona	2500/3000	80	20
Malaga	1200/1500	100	—
Melilla	900	100	—
Ceuta	700	100	—
Palma		20	80
Valencia		100	—
Sevilla	small numbers	100	—
Alicante		100	—
Canarias		100	—

Madrid and Barcelona have an almost full range of community institutions, mainly centered around religious life: synagogues, *mikwe*, *hevra kadisha*, *sheonita*, kosher restaurant and caterer, full-time school, Sunday school, fundraising groups, local and

internationally related youth and adult groups (*halutzic* movements, WZO, WIZO, B'nai B'rith, WJC, Sephardi Federation, Keren Hayesod, etc.). The two communities have started a common youth program.

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