THE MEANING OF COMMUNITY ON A COGNITIVE SUPPORT UNIT  
Anne-Marie Cantwell, University ofGuelph  
Alison Pedlar, University of Waterloo

Background

There is a long and rich tradition in community research that has informed our knowledge of the importance of human association. As Brueggemann (2001) has noted "community is the act by which we engage one another, experience relationships, and become a people. Whenever humans exist, we spontaneously seek and form community" (p. 114). Community theory posits that psychological connection between people is a critical aspect of the human experience. Moving into a residential facility as an older person often signifies the disruption of life and removal from the community as we have known it. Institutionalization might suggest the end of any kind of community life. In fact, critics of institutional practices would further suggest that to talk of community in the context of life in a total care facility or institution is anachronistic. In general, when an individual moves from home to institution, the move is precipitated by a trauma in the person's life (Pastalan, 1983). Of particular interest is what sort of life people face after institutionalization. This is an area of significance for the field of therapeutic recreation since it is within the practice of therapeutic recreation that praxis may have much to offer in relation to enhancing the quality of life for individuals whose future is the residential facility. Does community have any role in people's lives after removal from home to institution? Does our understanding of community, where people "spontaneously seek and form community" have relevance for those who move from home to institution, particular following a diagnosis of cognitive impairment, such as dementia? What is the meaning of community in this context? This paper will consider this question. It will focus on the meaning of community as suggested by secondary analysis of data gathered to understand the experiences of older adults with dementia living on a cognitive support unit of a long term care facility in a large teaching hospital.

Research Design

The primary purpose of this paper is to report on the meaning of community on a cognitive support unit. The purpose of the original study, from which this secondary analysis is conducted, was to gain information regarding the meaning of patient focused care, as it related to leisure opportunities, from the perspectives of residents participating in these opportunities and the practitioners providing leisure on a cognitive support unit. Qualitative data consisted of observations, in-depth interviews with practitioners and family members, conversational interviews with residents, and the maintenance of a reflective journal over a five-month period. The data from the original study was revisited to consider what the residents' reality could tell us about the nature of life on a cognitive support unit and whether the experience of community was present.

Data from field records, journal entries, and interview transcripts were analysed using Kirby and McKenna's (1989) approach to organising and understanding the data. The data were organised into bibtets and then coded into categories. Hurricane thinking was then employed to begin to make sense of the interactions between the categories and develop the associated themes which will be presented below.

Theory of Human Becoming

Parse's theory of human becoming (1992, 1994, 1996, 1998) is offered as an alternative framework to the traditional medical model. This theory shapes the underlying foundation of a patient focused approach to care. Caregivers working within the tenets of this theory are challenged to view the patient as a person rather than a diagnosis and to seek out and include the patient's and family's perspectives in the plan of care. Parse's theory is structured around three guiding themes: meaning, rhythmicity, and transcendence. The first, meaning, points to the ways in which people create their own realities based on their own values and beliefs. The second theme, rhythmicity, acknowledges the apparent opposites in rhythmic patterns of relating. By making a decision we are separating ourselves from alternatives to that choice. Transcendence in this context refers to the way in which people create their own unique path in life and it is this movement towards our unique realities that shape our becoming. The practitioners moved with the residents' rhythms during leisure opportunities and practicing within the patient focused framework participants co-created a shared reality.

Findings

Findings from this secondary analysis suggested three themes that speak to the development of community on the unit. These were capacity building, contribution to the well-being of others, and social gatherings "in the neighbourhood." All three themes spoke to the nature of the various relationships that existed on the unit amongst practitioners, volunteers, and residents. The first theme, capacity building, related to group processes, specifically
pertaining to the relationships and associations between the practitioners and the residents. Residents were encouraged to participate in leisure opportunities where their personhood was strengthened. Secondly, the theme contribution to the well-being of others focused on the helping nature of the relationships evident on the unit, both among practitioners and residents and between residents themselves. Thirdly, social gatherings "in the neighbourhood" refers to both the formal and informal interactions on the unit.

Capacity building was evident in a variety of ways. Much socialization occurred in the reminiscence group where residents were invited for coffee and they were encouraged to share stories from the past. Photographs and memorabilia were used to encourage discussion in these groups. However, it was evident that participants were entirely engaged in the social interaction of the present. Furthermore, people's personhood (Kitwood, 1997) was affirmed by the opportunity to demonstrate their expertise. For instance, beyond the social aspect evident in this game of billiards, Tim was also able to demonstrate his capacity and contribute to the performance of another player:

Tim is standing next to Beth and he is helping her out by suggesting shots she might take. He is indicating which ball he thinks that she should shoot for. He has just stood back a little and is watching her as she takes the shot (field record, December 16, 1999).

As a result of enjoying this activity and the social atmosphere, Tim and many other residents viewed their involvement in leisure opportunities as an important part of their daily lives. Prior to admission, one of Tim's favourite activities was going for coffee to a nearby coffee shop in his community. This activity had not changed; it was now happening in his newly formed community.

Based on the encouragement received from practitioners, residents were able to develop competencies that transferred to other aspects of their lives. Residents looked for opportunities to offer assistance to the practitioners in leisure activities. They also offered help to one another in many instances. As participants in the leisure activities in and around the unit, the residents regularly contributed to others in the group:

Sam has been asked to cut up bread for lunch. He appears to be happy when he is asked to help out. Beth has mentioned that she often gives him such tasks because he frequently asks if he can help out (field record, February 4, 2000).

In addition, it was evident that the unit was viewed as a community where many social gatherings occurred both formally and informally. The recreation therapy practitioners and residents interacted in many situations, formally in that those that are organised by the practitioners-on and off the unit, and more informally, by socialising in common areas on the unit and in the recreation therapy office. The unit and the surrounding halls and corridors were analogous to neighbourhood streets. It was customary for residents to drop by the recreation therapy office for a visit, simply to chat. Furthermore, residents, staff members, volunteers, and visiting family and friends frequently occupied the common areas on the unit. The unit was generally lively with much going on at any given time during the day. Residents enjoyed both organized activities, as well as informal chances to visit with other people around the unit.

Discussion

Recently institutions that provide residential or long-term care, have made a conscious effort to create a homelike atmosphere on units to foster a more enjoyable living experience for residents. Training for staff and volunteers includes information regarding respecting "the unit" as the residents' "home". However, the findings from the present study suggest that residents do not necessarily view the unit as their home but as their community, and their rooms become their homes. When entering a resident's room, you are entering his/her home; if you are a "regular" on the unit, you are included as a part of that community.

As a result of working within the assumptions of Parse's theory of human becoming (Parse, 1992, 1994, 1996, 1998), the therapeutic recreation practitioners became a part of the residents' community. To be truly present with the residents, practitioners had to move with the resident's rhythms, i.e. to become part of the reality as the resident created it. This was evident in the nature of the human association that was actively sought by residents and practitioners. Each resident was respected as a unique and contributing member of the community and the practitioners were viewed as equally important members by the residents. These findings suggest that therapeutic recreation praxis, which is uninhibited by traditional medical protocols, but which allows the practitioner to move with the residents' reality, enables residents and practitioners to seek and to form community.

References


Anne-Marie Cantwell, Department of Family Relations & Human Development, University of Guelph, Guelph, ON, N1G 2W1, Canada; Phone: (519) 824-4120, ext 8908; Email: acantwel@uoguelph.ca
The Canadian Congress on Leisure Research
is held under the auspices of the Canadian Association
for Leisure Studies

Le congrès canadien de la recherche en loisir
Se tient sous les auspices de L'association canadienne
d'études en loisir

BOARD OF DIRECTORS / CONSEIL D'ADMINISTRATION
1999 - 2002

President / President
Susan Markham-Starr
Acadia University

Past President / President-sortant
Edgar L. Jackson
University of Alberta

Treasurer / Tresorier
Robert Soubrier
Universite du Quebec a Trois-Rivieres

Secretary / Secrétaire
Linda Caldwell
Pennsylvania State University

Directors / Directeurs
Wendy Frisby, University of British Columbia
Tom Hinch, University of Alberta
Peggy Hutchison, Brock University
Jennifer Mactavish, University of Manitoba
Lisa Ostiguy, Concordia University
Stephane Perrault, Universite du Quebec d Trois-Rivieres
Jerry Singleton, Dalhousie University
Bryan Smale, University of Waterloo
Paul Wilkinson, York University