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Intergenerational Experiences of the Elderly Service Home Residents

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Promoting the wellbeing of the individual will result in high quality of life and health over the life course. The aim of this thesis was to describe the intergenerational experiences of the elderly service home residents in Kannelmäki, Helsinki, Finland and thus promote intervention in the elderly institutions.

Qualitative research method was used in the study. The intergenerational experiences generated from the union of the elderly service home residents and the kindergarten children. Interviews were conducted among the voluntary elderly home residents in Kannelmäki. The nine residents (n=9) were interviewed individually to obtain their perspective related to the intergenerational experiences in the institution. The intergenerational activities were walking, feeding the ducks, baking, drawing, painting, handcrafts, the olympics games and the olympic gala.

The findings demonstrated that the intergenerational experiences of the elderly service home residents produced self-directing benefits, which consisted of mental stimulation, physical activity, social interaction, relationship with the children, educational benefit, satisfaction in the activity and promote entertainment. The intergenerational experiences provided a positive factor to the elderly's experiences in the service home. Positive evidences were found from the interviews, which were beneficial to the elderly participants.

Based on the findings the implementation of intergenerational programs can be recommended to other elderly care institutions in Finland. The similarity of the activities, care providers goals and elderly residents' motivation will result in similar findings. Another topic for the future studies could be the perspective of the medical health care professionals about the intergenerational activities in elderly care institutions.

Keywords: Intergenerational experiences, the elderly, elderly service home

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1 INTRODUCTION

The structure of the family has been disturbed with the shifts in the economy, the nature of the work force and job availability (Newman & Hatton-Yeo 2008, 31). Many families moved to communities 100 or more miles from the elder family members (Federal Interagency Forum 2007, cited in Newman & Hatton-Yeo 2008, 31). Consequently, elderly adults perceived low level of interaction with younger family members who render contemporary social insights, vitality, unqualified love, support and new technological skills (Newman & Hatton-Yeo 2008, 31). In addition, the great distance between the parents and the older children prevent constant care and support (Center for Policy on Aging 2014, 11).

Loneliness has become the increasing problem in the old age (Nygqvist, Cattan, Andersson, Forsman, & Gustafson 2013, 1014). It can aggregate to impaired quality of life, high need of institutional care and increased mortality (Routasalo & Pitkala 2003). In older age there are many reasons for loneliness such as: death of the life partner, poor health which cause decrease social activities and weak mobility (Qualter, Vanhalst, Harris, Roedel, Lodder, Bangee, Maes and Verha-gen 2015, 251).

This study focused on the intergenerational experiences of the elderly service home residents in Kannelmäki, Helsinki, Finland where participants are capable of verbal communication. The concept intergenerational characterizes the social experiences which connect the different generations (Newman & Smith 1997, 3). The study was instigated due to the personal experiences in the elderly home practices, wherein the elderly experienced a low level of activities. Casey, Low, Goodenough, Fletcher, & Brodaty, 2014; Harper and Ice 2002 in Low, Russel, McDonald and Kauffman (2015) states that studies constantly report a low level of meaningful or engaging activity in nursing homes.

This study emerges to promote the wellbeing of individual that will result in a high quality of life and health over the life course. This thesis focus on the elderly service home due to the differences of care practices and social support in the developing and developed countries. In addition, there is a continuous growth of elderly population not only in the Western countries but around the world (World Health Organization 2015). Interventions should be provided to eliminate the problem in the society related to elderly people. Moreover, it is important to value the concept of universal rights of gerontologists wherein the old are not to be treated as lower form of life.

2 INTERGENERATIONAL PROGRAM EXPERIENCES

The intergenerational program in this study is defined as the union of the elderly residents and kindergarten children in the Finnish elderly service home environment. According to Newman and Hatton-Yeo (2008, 32); National council on aging (NCOA) defines Intergenerational programs (IPs) "as planned ongoing activities that purposely bring together different generations to share experiences that are mutually beneficial. Typically, the programs involve interactions that promote social growth and learning between the young and the old."

According to Low et al. (2015) intergenerational programs unite older adults and children or adolescents to participate in a shared activity. These result to lower level of depression and improved quality of life in the elderly participants. A study of 50 years intergenerational practice has been reviewed in the United States. Creating a harmonious relationship with the generations is the goal of the practices. Also it acknowledged severe imbalances of societal needs and building cross-age relationships. (Kaplan, Henkin & Kusano 2002 in Henkin & Butts 2012, 250.) According to Henkin and Butts (2012) intergenerational work can influence ages, races, and cultures which can lead to the productivity of the individuals who can either be old or young.

In Australia, an intergenerational program for nursing-home residents and preschoolers increases positive outcomes for the elderly with dementia, and likewise promoted positive attitudes toward elderly among the participating children (Low et al. 2015). A study of Murayama, Ohba, Yasunaga, Nonaka, Takeuchi, Nishi, Sakuma, Uchida, Shinkai and Fujiwara (2015) about the effect of intergenerational programs on the mental health of elderly adults reveals that the sense of meaningfulness of the elderly who participated in the study increased significantly.

3 ELDERLY SERVICE HOME

The Finnish local municipality commonly provides and regulates the institutional care for older people who are incompetent to live at home (Official Statistics of Finland 2007, cited in Einiö no date, 30). According to Einiö (no date, 30), the Ministry of Social Affairs and Health (2008a) states that it is feasible for a qualified elderly to avail the principal institutional care and housing services. The municipalities and the state have no legal obligation to care for the elderly people except when life or health is at high risk. The institutional care admission is lawfully grounded on the older people's approval. Occasionally, old people are forcibly admit into a care institution when mental health problems, intellectual abilities and severe health threatening drug abuse exist. (Meriläinen, Perälä & Virta 1994, cited in Einiö no date, 30.)

The policies for care services in developed countries aim to empower older people to achieve maximum self-sufficiency; to assist the older people to live in as normal a setting as possible and to facilitate the elderly to participate in society (Wilson 2000, 138). Home care is culturally and emotionally loaded. Accepting home care obliges the elderly to readjust self-image and identity (Baldock and Ely 1996, cited in Wilson 2000, 138).

In Finland the development of health and social services for older people has been affected by the severe economic recession at the beginning of 1990. Over the years, institutional care has been dismantled and the supply of the home care has been increased slowly. (Lehto & Blomster 2000 in Von Bonsdorff 2009, 22). An approximate of one in six aged 65 years and older, one in three aged 75 years and older, and a half of aged 85 years and older need health and social services on a daily basis (Vaarama 2004 in Von Bonsdorff 2009, 23). For the past two decades, an estimation of 102 000 aged persons who are over 65- year olds used regular services (Voutilainen in Von Bonsdorff 2009, 23).

Kannelmäki service home is located in Greater Helsinki area. The service home offers safety, communal living and day-time activity. Multi-professional employees provide the patients individual care and attention. The objective of this service home is to maintain the functional ability and wellbeing of the client. The institution has pleasant studio or one-bedroom apartment and a spacious common room for the residence. The institution has big living rooms and comfortable sauna departments in the housing services. The service home has a gym which can be jointly used by the patients, personal assistant, older people in the neighborhood, volunteers of the service home and the health care professionals. (Helsingin kaupunki, no date.)

Kannelmäki service home includes three different kinds of housing services for the elderly. The blocks are divided into two parts; A-block has the group housing unit (kanerva) and the group homes (karpalo, katrilli). B-block consists of the housing services (kukkopilli, mustikka). Beside the housing service B-block also includes the day activity (urkuri) and the gym. In the group housing unit kanerva there are 27 resident places. All the elderly residents can decorate their apartment accordingly to their wishes and they are able to move freely in the apartment with their assistive devices. The kanerva has spacious and comfortable common spaces where the time can be spent. In the karpalo group home, there are elderly who have dementia. Elderly with the mental health problem live in the katrilli group home. Both karpalo and katrilli have 13 places with 24 hours care and the residents can furnish their room with their familiar belongings. (Helsingin kaupunki, no date.)

The housing services kukkopilli and mustikka also provides round-the-clock care. Kukkopilli has 18 apartments and karpalo has 26 apartments. The residents are provided with a safe and

homely environment. The most important is to maintain and promote the functional capacity of the residents. The residents' functional capacity support is composed of the patient's active daily life, diverse movement, participating in the social groups and to provide good nutritional food. This can be made possible by the residents, their family or close relatives and the multi-professional team work, which includes the nurse, practical nurse, physiotherapist, occupational therapist, social worker and home care doctor. (Helsingin kaupunki, no date.)

The day activity is meant for the elderly who is over 65-year-old, with memory disorder, live alone and in the care of the close relative. The day activity *urkuri* comprehends rehabilitative activities. It is based on the physical, psychological and social rehabilitation, where the memory disorders are taken into consideration. The aim of this day activity is to maintain an independent or support coping at home. The patients that come to the day activity are divided into groups accordingly to their rehabilitation needs which are: physical, social rehabilitation as well as dementia. (Helsingin kaupunki, no date.)

4 WELLBEING OF THE ELDERLY

Aging starts from the birth of an individual. However, the difference is that the younger population growing old is not seen as aging but aging occurs throughout our lifetime. According to Hooyman and Kiyak (2005, 4) old age is viewed in four different parts, which are chronological aging, biological aging, psychological aging and social aging. Chronological aging is measured according to a person's date of birth. For example, a person born in 1941 is chronologically older than a person born in 1971. Biological aging occurs when the physical and organ system changes happen and the tissues of the body are rejected by increasing age. An older person's daily activity is reduced and the noticeable biological changes are wrinkles, gray hair, slouched posture and slow to respond. Psychological aging is when an individual faces decline in the sensory systems for example hearing, memory loss and blindness. This affects the wellbeing in the daily activities of an older person (Hooyman and Kiyak 2005, 65). In the phase of social aging, older individuals have differences in the bonding with the family, friends and social environment. For instance, some elderly can cope with multiple departures of their family members and move on but some think it is the end of their life. (Hooyman and Kiyak 2005, 4, 282.)

4.1 Mental Health

WHO (2014) defines "health is a state of complete physical, mental and social wellbeing and not merely the absence of disease or infirmity." According to WHO (2014) mental health is described as a condition of wellbeing of a person. An individual has the ability to survive with

the stress of life, is conscious about his/her own possibilities, also is creative and successful while working and lastly is beneficial to the group.

The number of the elderly aged 60 years and above escalated from 9.2 percent to 11.7 percent in 2013. It is estimated to increase by 21.1 percent by the year 2050 (United Nations 2013, 14). WHO (2015) states that the elder population aged 60 or above is at risk of mental problem by 15 percent. At some point of a human life, he/she has a mental problem which can be caused of the social, psychological and biological reason.

4.2 Physical Health

The life expectancy of the elderly is rising all over the world (United Nations 2013, 27). Berkman (2006, 79, 82) explains the reason of the older population growth that the people are living healthier life; for example, proper diet, regular exercise, quitting harmful substances (cigarette, alcohol), living condition (Hooyman and Kiyak 2005, 102) and conscious about their own health and wellbeing. In normal ageing the functional capacity of the internal organs decline by age. However, elderly with the heart diseases, problems in physical and mental function can be improved by physical activities and also the overall health and possibility to recover faster from injuries. (Eckert & Lange 2015.)

According to Sloniger (2013, 291); Guralnik, Ferrucci, Simonsick, Salive, & Wallace state that the quality of life of an elderly has a distress potential when the functional status leads to physical disability due to increasing age which is accompanied with decrements in aerobic endurance, muscular strength, flexibility, agility and balance. An article of Sloniger (2013) about functional fitness testing of older adults who reside in a local assisted-living facility was assimilated in intergenerational service learning experience. The aim of the study was to provide the residents the information which can be employed to interrupt or prevent disability. Service learning was defined as a strategy of teaching and learning which incorporates community service including instruction and reflection, which improve the learning experience when executed, impart community responsibility and support the societies (National Service-Learning Clearing House 2008, cited in Sloniger 2013, 292). The undergraduate students administered the battery test to the 20 older adults. The students provided a thorough explanation and demonstration of the test item and recorded the score performance. The feedback related to the performance of the participants was immediately provided. The utilization of information to set goals, provide feedback to physicians and/or develop an appropriate exercise prescription was discussed to the older adult. The study claimed that the elderly were more interested in the intergenerational interaction than the feedback related to the functional fitness.

4.3 Emotional Health

A study of Li, Ji and Chen (2014) was to “compare the relative importance of spouse, children and friend support on positive and negative affect of the emotional wellbeing (EWB)”. EWB means the emotional aspect of a person’s experiences in daily basis, for example anxiety, sadness, anger and desirable and undesirable moments in life. 700 Chinese elderly participated in this research, however, 49 older adults were cancelled due to the incomplete survey and five participants were removed because they have always been unmarried. The findings were conducted by interviewing the elderly and the questionnaires were answered. According to the findings most of the respondents lived with the spouse and/or children and 19.19 per cent were widowed and 2.0 per cent were divorced. (Li et al. 2014.)

Among Chinese elderly social support is an important aspect for the EWB. Family members on EWB are the core supporters for an elderly. They arrange the material aid and instrumental support and also shorten the negative affect of the old age. However, a study from USA found that regularly being in touch with the family members had a positive but weak impact on morale, even though it was relatively less compared to the effect of interacting with friends. In particular, the other members of a family, spouse is the core supporter and plays the most important role for providing a buffer for the elderly to reduce the negative affect. The positive effect of the friend support on EWB showed that contacting with friends was more strongly associated with life satisfaction, happiness, and self-esteem of the elderly. However, compared with children support and served as a primary predictor for morale than family support. In terms friends may be more open to leisure activities and conversations of mutual interests. The negative affect showed that support from friends prevents or reduces the feeling of loneliness (Li et al. 2014).

4.4 Social Health

“Social health has been defined as the quantity and quality of an individual’s interpersonal ties and extent of involvement with the community” (Fillenbaum 1984, 42; Donald 1978). Social capital includes structural quantity which means the connection, relationship and togetherness in the institutions. On the other hand, quality represents the cognitive aspects of the resources such as the emotional side of the social capital which contains values and awareness (Nygqvist et al. 2013, 1015). A study by Nyqvist et al. (2013) was to “investigate the association between aspects of social capital and loneliness among the very old living at home and in institutional settings.” The very old in this investigation referred from 85 years to 95 years old and above. In the study 483 older elderly participated in 2005-2006. The study was cross-sectional population-based and located in the northern Sweden and Western Finland (Nygqvist et al. 2013, 1013). The results from Nyqvist et al. (2013, 1030) mentioned that the

older people who lived in the care facilities were not alone because the social contacts were still present. Nevertheless, they still felt lonely and Nyqvist et al. (2013) suggested that the attention should be made in social inclusion and social relationship inside the institutional settings. Although social relationships are significantly associated with health maintenance, it is a key to human wellbeing (Steptoe, Shankar, Demakakos, & Wardle 2012).

5 THE RESEARCH QUESTION AND THE PURPOSE OF THE STUDY

The purpose of this thesis is to describe the intergenerational experiences of the elderly service home residents in Kannelmäki, Helsinki, Finland. This study emerges to promote the wellbeing of the elderly in the elderly care institutions. Promoting intervention in the numerous studies which state that loneliness affect the old age. Loneliness can aggregate to impaired quality of life, high need of institutional care and increased mortality (Rautasalo & Pitkala 2003).

The research question is:

What are the experiences of the elderly with the kindergarten children?

6 METHODOLOGY

Qualitative research was applied in this study. Creswell (2014, 4) states that the qualitative research explores and understands the meaning of individuals or groups, who have a social problem. It involves questions and procedures, collection of data from the elderly service home environment, inductive data analysis from basic to major themes, and the researchers' interpretations of the data. This approach emphasizes the individual's perception, and the significance of complex interpretation to an event. In addition, this approach supports inductive style. Qualitative methods depend on text and image data (Creswell 2014, 17).

The qualitative research was chosen because the description deals with meanings or with patterns of behavior. Furthermore, the product of qualitative provides detailed and complex description of events or people. A solid description is significant in presenting the intricate condition among the reader. The researcher's interpretation of the phenomenon and the sufficient detailed information will be the readers' basis of judgement whether it is acceptable and applicable with other circumstances. (Denscombe 2003, 233.)

6.1 Data Collection

The data for this study was collected through interviews. An interview conveys the art of inquiry and listening in a manner of conversation (Denzin & Lincoln 2003, 48). Denzin &

Lincoln (2003) states that interviewing is one of the most typical methods, yet it possesses powerful ways in understanding human beings. The “hows of people’s lives including the traditional whats (the activities of everyday life) is the focus of the interviews. The interviews provide active interactions between two or more people towards negotiated contextually based result. Nowadays, interview is practiced widely to acquire information. According to Atkinson & Silverman, in Denzin and Lincoln (2003) the current generation lives in the “interview society”. Denscombe (2003) states that interviews offer an in-depth insight into the topic based on the fewer respondents’ information. It is suitable for the data based on emotions, experiences and feelings.

A semi-structured interview was used in the study. This type of interview allows the respondents to develop ideas and express more widely on the issues raised by the researcher. The answers are open ended and there is a high emphasis on the points of interest of the interviewee. (Denscombe 2003, 167.)

In addition, the one-to-one interview was employed to acquire the data. One to one interview is a normal form of interview in which the researcher and an informant meet. (Denscombe 2003, 167 - 168). Even though, it is a conventional interview, it empowers the silenced voices of the participants. According to an American expert, Finns are stereotypically quiet (Yle Uutiset, 2013). This study prevented the group interview problem. According to Denscombe (2003, 169) the group interview has a disadvantage wherein certain clients dominate the discussion while others struggle to be heard. Moreover, contrasting ideas of the respondents affect the expression of the individual towards what is acceptable and opposing to the group. The privacy of one-to-one interview eliminates these problems. A study of Sopanen (2015, 22) entitled “elderly clients’ experiences of playing a video game” describes the weakness of unstructured and group interview in one of the Finnish elderly institutions. The study specifies that the majority of the participants did not participate due to the domination of the talkative participants. (Sopanen 2015, 22)

The Helsinki City received the permission request and granted the permission to commence the data collection in this study. The head of Kannelmäki elderly service home held a meeting and provided the information which this study needed. A rapport was built with the clients prior to the interview. Several meetings occurred to initiate connection between the elderly residents and interviewers. Finally, the 2 intergenerational programs in Kannelmäki service home were attended to identify the consistency of the residents’ behavior with the children. Afterwards, interviews were implemented to the elderly service home residents in Kannelmäki.

The 11 elderly service home residents were interviewed on the day which was convenient for the residents and time in accordance with the schedule of the service home. The interviews were implemented the days after the olympic games. The criteria for the inclusion in the study were the capability of the participant to communicate, residential in Kannelmäki service home, confirmation and experienced the intergenerational activities. The nine (n=9) elderly service home residents were included in the study. The 2 elderly service home residents disclaimed verbally that the intergenerational experiences happened. The inconsistency could either be the perspective of the elderly in relation to interaction with the children exclusively or the past memories has been forgotten. The audio recorder was employed, to record the verbal communications of the elderly residents during the interviews. Finnish language was the medium of communication in the interviews. Field notes were also written to compare the consistency of the interview with the reactions of the elderly service home residents. Maximum of 30-minutes interview was allocated to each participant. The collected data was kept strictly confidential. The elderly service home residents were kept anonymously. The raw data and the recordings from the interview will be destroyed after the standard time of data retention.

Coordination with the health care provider related to the schedule of the institution and the routine of the elderly were established. Introduction was made for the familiarity of the elderly, at the same time the elderly was asked for the permission to be interviewed related to the intergenerational experiences. Several meetings occurred in Kannelmäki service home before the elderly's intergenerational activity. A good rapport was created with the elderly before the activities and the interviews. All the participants were capable of verbal communication and signed the approval consent.

The intergenerational activities according to the interviews and Kannelmäki's general event lists are in Table 1. Assistance, participation and field notes were accomplished in the elderly olympic games and olympic gala.

General events	Description of the events
Walking, feeding the ducks	Departure in front of the service home. According to the weather condition. Something small (example rice, cracked corn) was taken to feed the duck.
Baking	The children went to the service home.
Drawing, painting, handcrafts	The children went to make a surprise visit.
The Olympic games (Brazilian badminton, bowling, Brazilian football, quoits, balance track, javelin throw, brain quiz)	Traditional Olympic games in Kannelmäki. It was held in the service home yard where the traditional Olympic games were performed.
Olympic gala	This was held a week after the Olympic games. The children went to the service home and distributed the medals, flowers and the trophy to the winners, which were provided by the institution. This activity was held outdoor, according to the weather condition.

Table 1: Intergenerational activities in Kannelmäki service home

The kindergarten children and the elderly participants gathered at the front of the service home facility for the walking and feeding the ducks activity. The children walked with the teachers and the participants of elderly service home residents including some of the health care providers.

In the baking activity, the elderly participants baked small buns with the children in the elderly service home facility. One elderly and one child sat together to assist one another in shaping the dough. The elderly participants taught the children in doing the process of small buns. All the participants ate together when the small buns were baked.

The kindergarten children gave a surprised visit to the elderly service home. The elderly participant painted, drew and colored the pictures together with the kindergarten children. The kindergarten child sat together with the corresponding elderly resident. The health care professionals of the service home and the teachers of the kindergarten assisted all the participants. The activities of the surprised visitation of the kindergarten children could be drawing, painting, handcrafts, playing games, storytelling, puppet theater, or making a show.

The elderly participants together with the kindergarten children created the scoring cards a week before the activity, which all the participants employed in the olympic games. Participation was initiated in the olympic games and assistance were provided to the elderly who needed support in the mobility inside the institution. The weather condition was not good therefore, the activities were held inside the elderly service home. The elderly and the kindergarten children needed to take turns because the receiving area was crowded. The games were Brazilian badminton, bowling, Brazilian football, quoits, balance tract, javelin throw and brain quiz.

The awarding of the winners was held a week after the olympic games. The activity was olympic gala. The elderly participants and the kindergarten children gathered in the elderly service home backyard. One of the health care professionals welcomed all the participants, health care providers, teachers and the guests. All the attendees lightly exercised after the opening ceremony. The elderly winners received flowers, certificate, and medal which were delivered by the kindergarten children with the assistance of the elderly health care provider. The kindergarten children participated one by one. Afterwards, the kindergarten children sang a song for the elderly. Then, the elderly offered a song for the kindergarten children. The children sang and danced around the elderly. Non-alcohol drinks were served on the finality of the program. Everyone had the time to enjoy the sunny weather while drinking and celebrating the victory.

6.2 Data Analysis and Interpretation

An inductive approach was used in this study. According to Thomas (2006, 238) the inductive approach is a “systematic procedure for analyzing qualitative data in which the analysis is guided by specific evaluation objectives”. Inductive analysis is an approach that mainly used comprehensive readings of raw data to develop concepts, themes or a model based on the researchers’ collected data (Thomas 2006, 238).

An inductive process builds data into broad themes to a generalized model or theory. (Punch, 2005 in Creswell, 2014). The Figure 1 presents the process of inductive qualitative research.

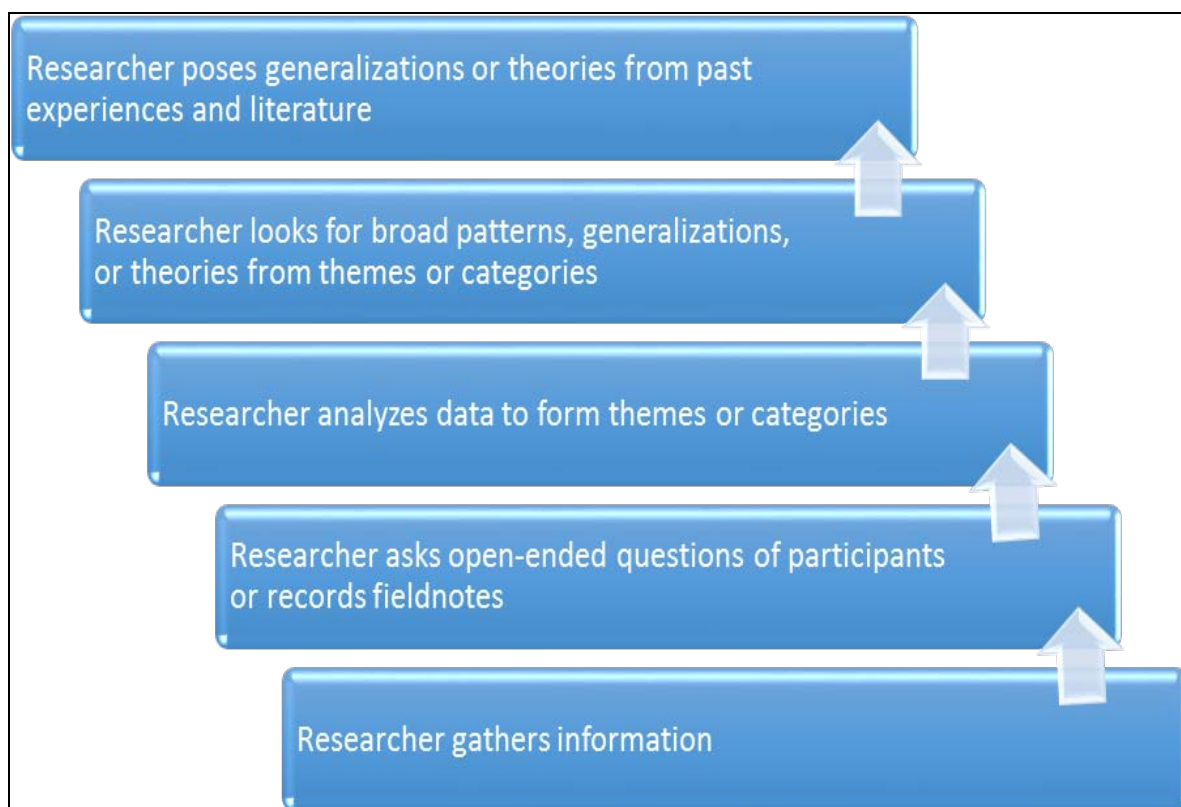


Figure 1: The Inductive Logic of Research in a Qualitative Study (Creswell 2014, 65)

According to Creswell (2014, 65) gathering the in-depth information from the respondents is the initial step in inductive theoretical process. Then categories or themes form the information. These themes grow into broad patterns, theories, or generalizations that are then correlated with personal experience or existing literature of the topic. End points for qualitative studies were produced from the themes and categories into patterns, theories or generalizations. Lastly, some of the qualitative studies unemployed explicit theory. On the other hand, Schwandt in Creswell (2014, 66) states that no qualitative study commences from plain observation. The initial conceptual structure composed of theory and methods are the basis for all the observations' starting point.

Creswell (2014, 196-197) suggests interactive steps in qualitative data analysis which are the following. The first step is to consolidate the collected raw data. The composition of this phase is transcribing interviews, optically scanning materials, writing field notes, cataloguing all the visual material, and sorting and organizing the data into different categories.

The second step is to read the data completely. It produces a wide sense of the information and the meaning related to the general information. General concepts and tone of the ideas arise from the participants including the impression of the overall depth, credibility and use

of the information. In some instances, researchers mark notes in the transcripts' margins or field notes or record general thoughts about the raw data. A sketchbook of ideas starts to form in the visual data.

The third step is coding the data. "Coding is the process of organizing the data and writing a word representing a category in the margins" (Rossman & Rallis, 20012 in Creswell, 2014 198). According to Miles and Huberman (1994, 56) coding is analysis. The course of analysis includes reviews of set of field notes and transcribed meaningful information which relations between the parts are intact. Analysis encompasses differentiation and combination of the data from the reflections of the researchers. Codes are labels which are used to assign units of meaning to the descriptive information gathered during the study. Codes are often connected to words, phrases, sentences or whole paragraphs which can be associated or unassociated to a definite setting. The form can be candid category label or more intricate one. Creswell (2014, 198) states that the terms from those categories are usually grounded in the actual language of the participants.

The coding process produces description of the setting or people including the categories or themes for analysis. This is the fourth step of qualitative data analysis research. Description includes comprehensive information about people, places or events in a certain environment. Description is created from generated codes of researchers. In addition, coding builds small number of themes or categories. The major finding in qualitative study originates from the themes or categories. The themes are frequently used as headings in the findings sections of the studies. Moreover, they should manifest numerous perspectives from individuals, diverse quotations and specific evidence. Additional layers of multifaceted analysis can be created with the themes. Refined qualitative studies go beyond description and theme identification and create complex theme connections.

The fifth step is about the description and themes signifying the qualitative narrative. The most common approach is narrative passage to support the analysis findings. The chronology of events, detailed discussion of several themes or analysis with interconnecting themes can be discussed. Subthemes, specific illustrations, multiple perspectives from individuals and quotations are presented in this stage. Several qualitative researchers employ visuals, figures or tables to support the discussions. Such researchers acquaint a process model, advance a drawing of the research site, and deliver descriptive information about participant respectively.

Finally, the formation of interpretation in qualitative research related to results. Lincoln and Guba; 1985 in Creswell (2014) provided a question to depict the core of the study which is "What were the lessons learned?" The lessons are centered on the researchers' personal

interpretation, understanding from a personal culture, history and experiences. It can also be associated from the findings in the literature research. The findings affirm previous information or deviate from it. It can propose unique inquiry for the future based on the questions which emerge from the data and analysis that the inquirer had not foreseen earlier in the study.

In other qualitative approaches, researchers apply a theoretical lens to form interpretations that need action agendas for improvement and modification. Researchers can also describe the comparison of narrative outcome with the theories including the general literature on the topic. Frequent articles related to qualitative research address the literature at the finale of the study. Hence, the qualitative research may provide diverse forms of interpretation.

This thesis employed the inductive analysis. The information was collected through participation, field notes and semi-structured interview with audio recorder. The audio recordings from the interviews were transcribed and carefully translated from Finnish to English language. The thesis supervisors and the English teacher examined and corrected the mistakes from the translation available in the findings of this study. The transcription of the data in English was read many times and compared with the field notes carefully.

The collected data were read completely for several times. The data were identified in connection with the question-answer relationship. The fragments of raw data were divided according to the similarities of concept which answered the question of this study. A sketchbook was created to form the concept in this study. Sub categories emerged from the raw data which was grouped according to the association. Afterwards, a word was created to represent the sub category which defined the group of raw data. Then, main categories were formed to describe the concepts that linked the different categories. Finally, the main theme was developed to describe the intergenerational experiences of the elderly in the elderly service home. The sub categories and main categories including the theme was derived from the elderly home residents' interviews.

7 FINDINGS

The findings from the data are presented in this chapter. The intergenerational experiences of the elderly service home residents generated self-directing benefits which covered the mental stimulation, physical activity, social interaction, relationship with the children, educational benefit, satisfaction in the activity and promote entertainment.

A theme was created based on the interpretation of the raw data. The flow of the information is presented in the figure 2.

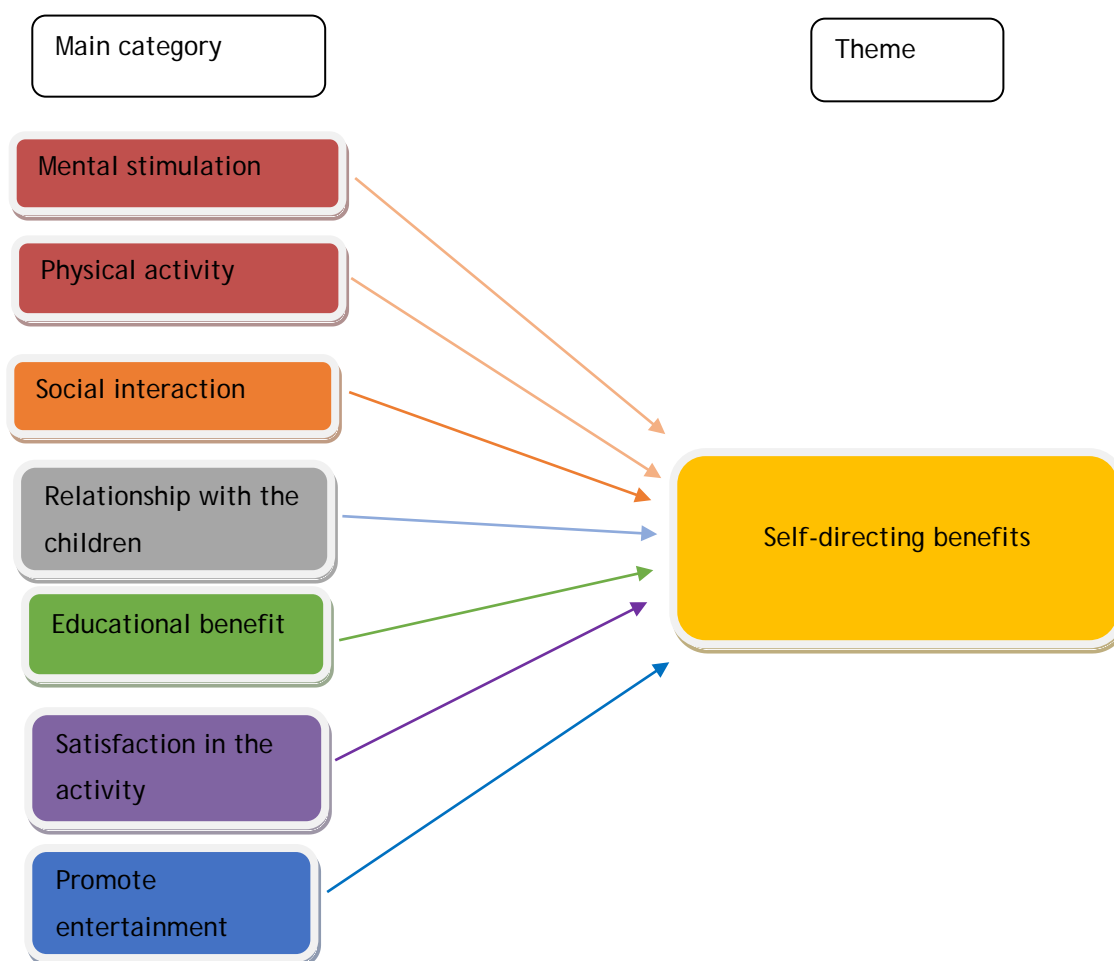


Figure 2: Self-directing benefits

The inductive analysis formed one theme in this study which is the self-directing benefits. The description of the elderly depicted the main category which are mental stimulation, physical activity, social interaction, relationship with the children, educational benefit, satisfaction in the activity and promote entertainment in respect to intergenerational experiences in the Kannelmäki elderly service home. Mental stimulation indicated the personal thinking ability of the elderly to create or recreate something new. The association of mental process and decision making which linked the ideas into motor actions. The physical activity characterized the activities which the elderly residents experienced in the intergenerational programs. The social interactions described the common characteristics of the intergenerational experiences of the elderly in the institutions and the relationship with the children, which the elderly formed in the intergenerational program. The educational benefit represented the teaching, learning and relearning occurrence in the intergenerational program which the elderly home residents experienced. The satisfaction in the activity of the elderly service home residents in accordance to their intergenerational experiences. Finally, the promote entertainment category which described the emotions of the elderly service

home in participating and experiencing the intergenerational activities. The main categories are presented in the following figures.

7.1 Mental Stimulation

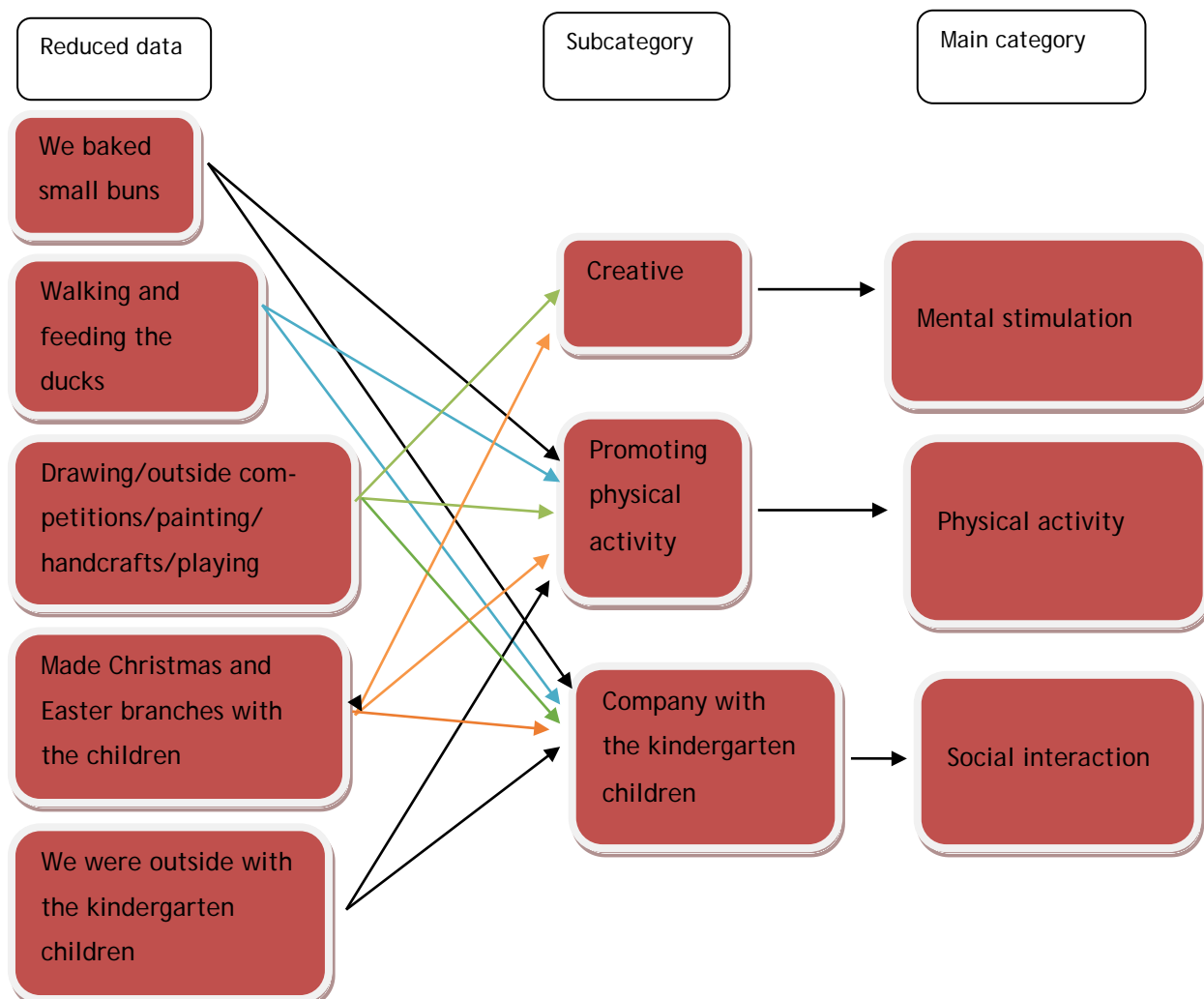


Figure 3: Mental stimulation, Physical activity, and Social interaction categories

The majority of the elderly service home residents possessed a good logical thinking which manifested in the elderly service home residents behavior. The decision and personality of the elderly individual reflected on the interviews.

“Piirtäminen, kyllä mä osallistuin kaikkiin. Mitäs mä tällä teen, sisällä istun. Päiväsali on alhaalla ja myös on sisällä, mutta siellä on seuraa. Tykkään seurasta...”

“Drawing, yes I participated in every activity. What do I do here, sit inside. Day room is downstairs also inside but there is company. I like the company...”

The intergenerational experiences with the children were good interventions for the elderly's mental health which was also associated with the emotions because the experience triggered the past memories. One of the elderly went to "the walking and feeding the ducks" activity and said that

"Suomalaiset lapset pelkäävät "namusetiä". Kun minä olin pieni minäkin pelkäsin niitä."

"The Finnish children are afraid of "child molesters". When I was small I was also afraid of them."

The memory was one of the crucial parts in gathering information in this study due to limitations of memory recall of the elderly service home residents including the decreasing ability to remember the words in their native language. One of the elderly service home participant was unable to remember the activity related to intergenerational experiences however, the elderly resident still claimed that the experiences were good.

"Leikkiminen—en muista..." "Mukava oli. Siinä aika kuluu."

"Playing—I do not remember" "It was fun. There the time passes"

7.2 Physical Activity

The intergenerational activities provided ways to mobilize the participants. The normal activities of the intergenerational portrayed movements such as baking, playing, reading, drawing and walking were the ones which the elderly experienced. During the activity: "walking and feeding the ducks", one of the residents went outside using the wheelchair. The respondent was capable of using the legs and the hands. One among the elderly service home stated that it was easy to be with the children. Also, there was something to do which prevented the individual to be inactive.

"Aika kuluu ja kaikille mukava että ei tarvi mökötä joissain ja katto seinää. On jotakin tekemistä. Nämä on tärkeä."

"Time passes by and it is fun for everyone that nobody needs to sulk somewhere and stare at the wall. There is something to do. These are important."

The elderly participants provided a positive description of the intergenerational experiences although one disadvantage was the physical demand of the other activities which made the dependent elderly participant tired.

"En halua tämmöistä ohjelmaa tehdä joka päivä mutta ehkä sitten taas viikon päästä se on mukava kyllä."

"I do not want to do this kind of program every day but perhaps again after a week, it is fun."

The activities supported the physical wellbeing of the elderly residents who participated. All the participants have experienced to participate in the intergenerational activity with usual motor skills movement however, no information of physical interest was gathered in the interviews.

7.3 Social Interaction

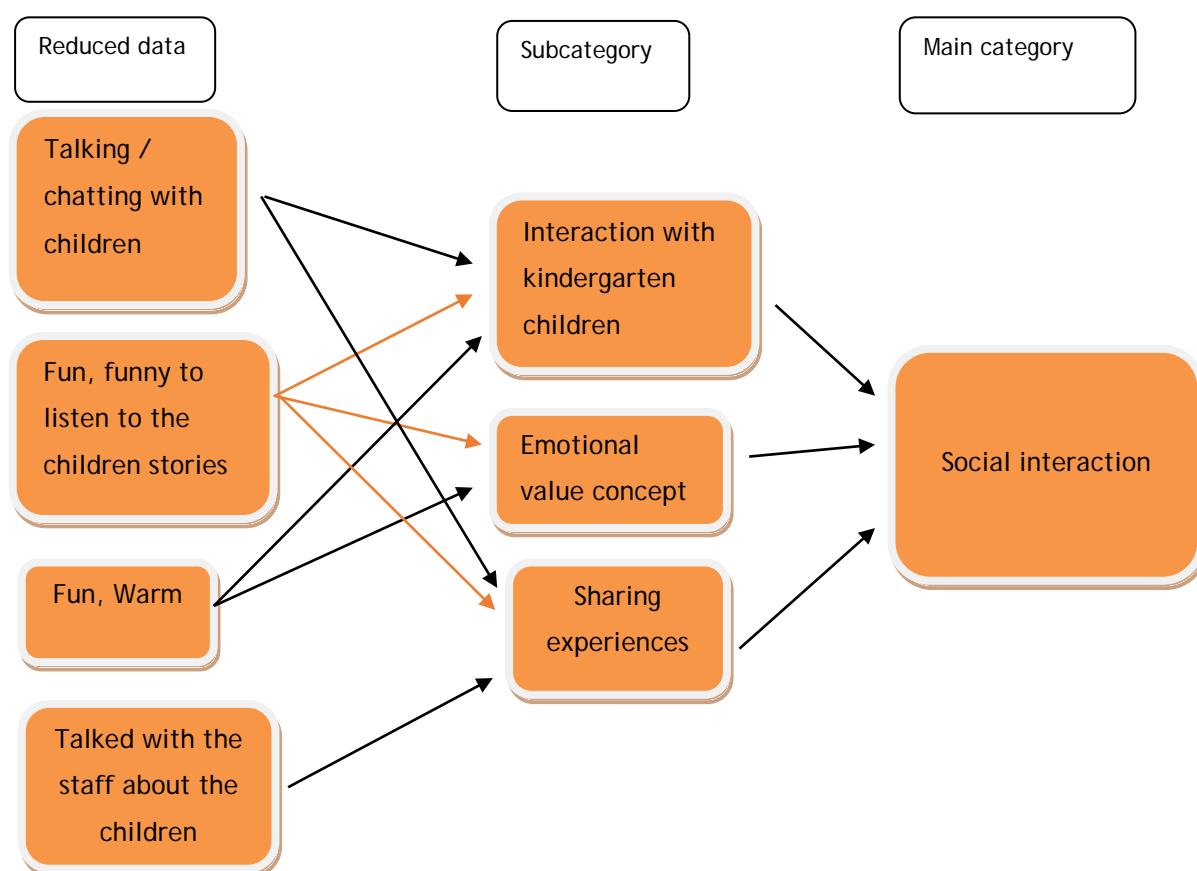


Figure 4: Social interaction category

Some intergenerational activities provided opportunities for both the elderly and kindergarten participants to experience physical touch, sharing of knowledge, involvement and enjoying the company of both. The elderly provided answers which were according to their priority in the elderly service home. The most common thinking of the participants was to fill the personal time in the service home with meaning.

“Kyllä, on mukava että on jotakin ohjelmia. Se on piristävä ja aika tulisi pitkäksi jos ei oo mitään niin kuin viikonloppuna.”

“Yes, it is fun that there are some programs. It is cheery and the time would become longer, if there would not be anything as during the weekend.”

7.4 Relationship with the Children

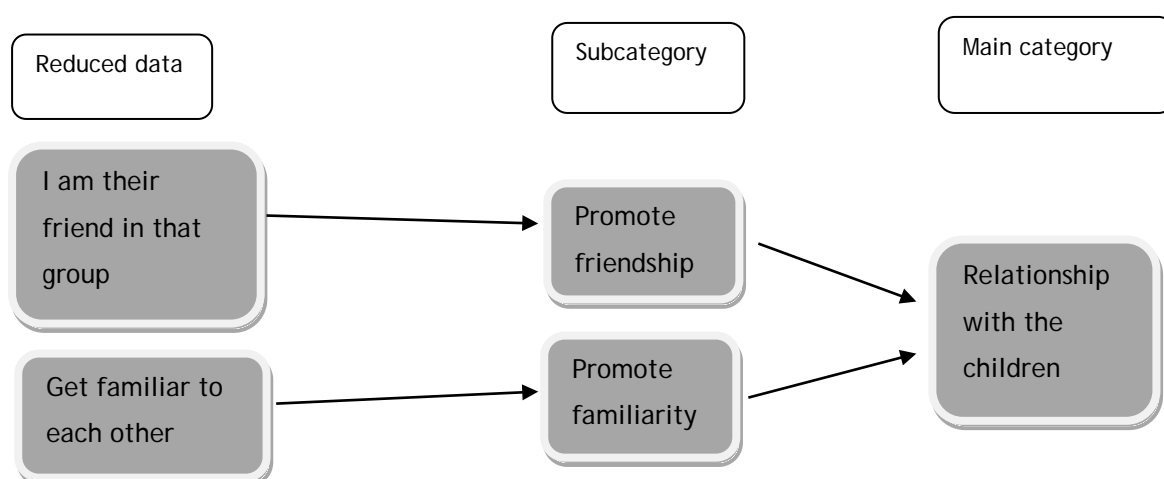


Figure 5: Relationship with the children category

The intergenerational experiences established the relationship of the participants with the young participants. Others have sympathy for the elderly who eventually become acquaintances or friends. The minority of the elderly service home residents do not have children. The intergenerational experiences created an opportunity of interaction which can lead to emotional involvement.

“Kyllä, niin että eri sukupolvet tuttuus toisiinsa. Että on asukkaat jolla ei ole omia lapsia.”

“Yes, so that the different generations would get familiar to each other. There are some residents who do not have their own children.”

On the other hand, the other elderly residents with children likewise wanted to include his/her children on the intergenerational activity. The prolonged absence of the family weakened the emotional aspect of the participant.

7.5 Educational Benefit

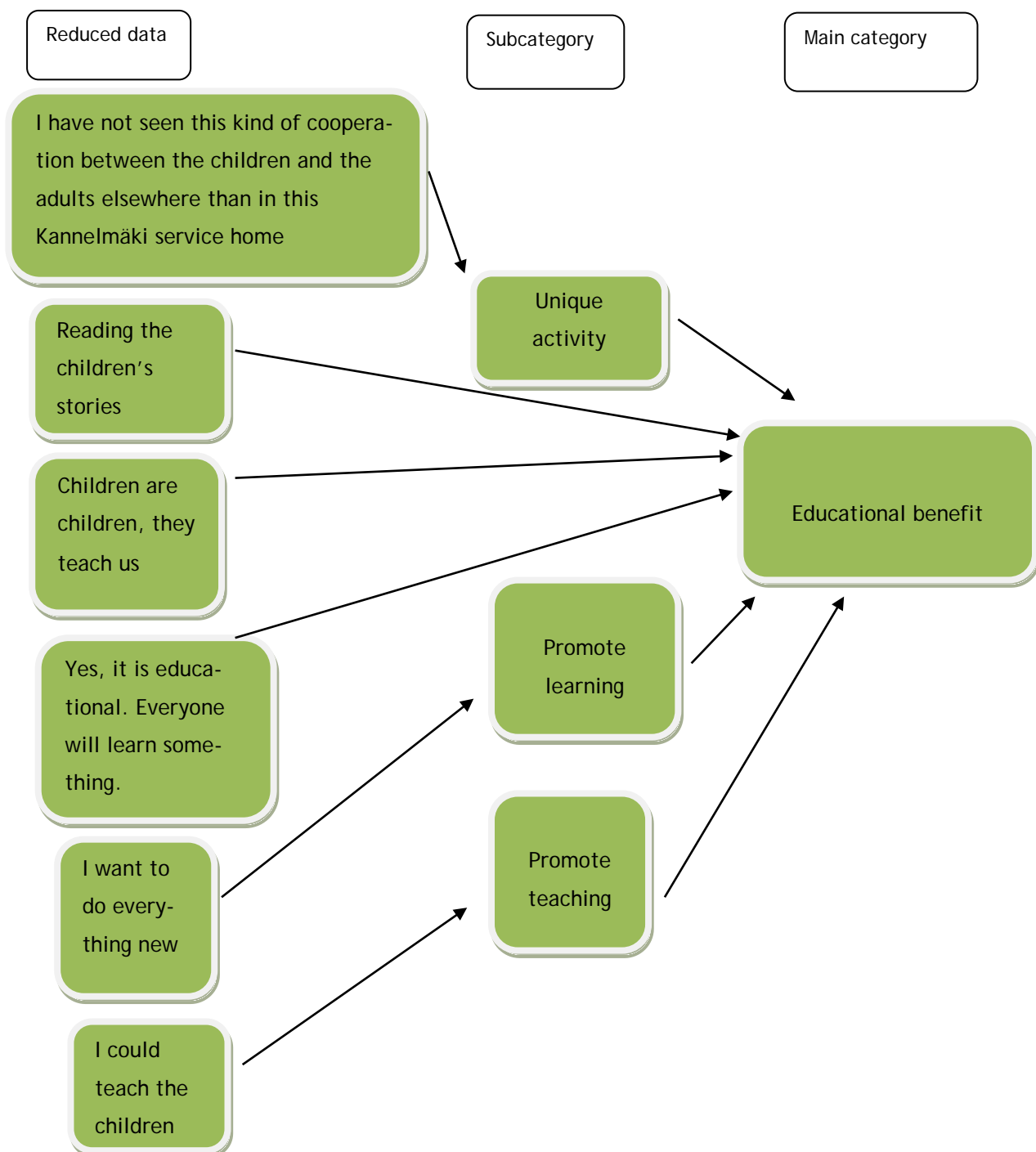


Figure 6: Educational benefit category

The intergenerational experiences were educational according to the elderly home service residents. The process of learning occurred between the elderly and kindergarten participants. The elderly participants possessed the positive attitude in the educational aspect of the intergenerational experiences. One elderly participant with a genuine smile on the face stated that

“Kyllä, se on hauskaa. Haluan kaikkia uutta tehdä. Voisin opettaa lapsille. Jokainen oppi jotakin.”

“Yes, it is fun. I want to do everything new. I could teach the children. Everyone will learn something.”

7.6 Satisfaction in the Activity

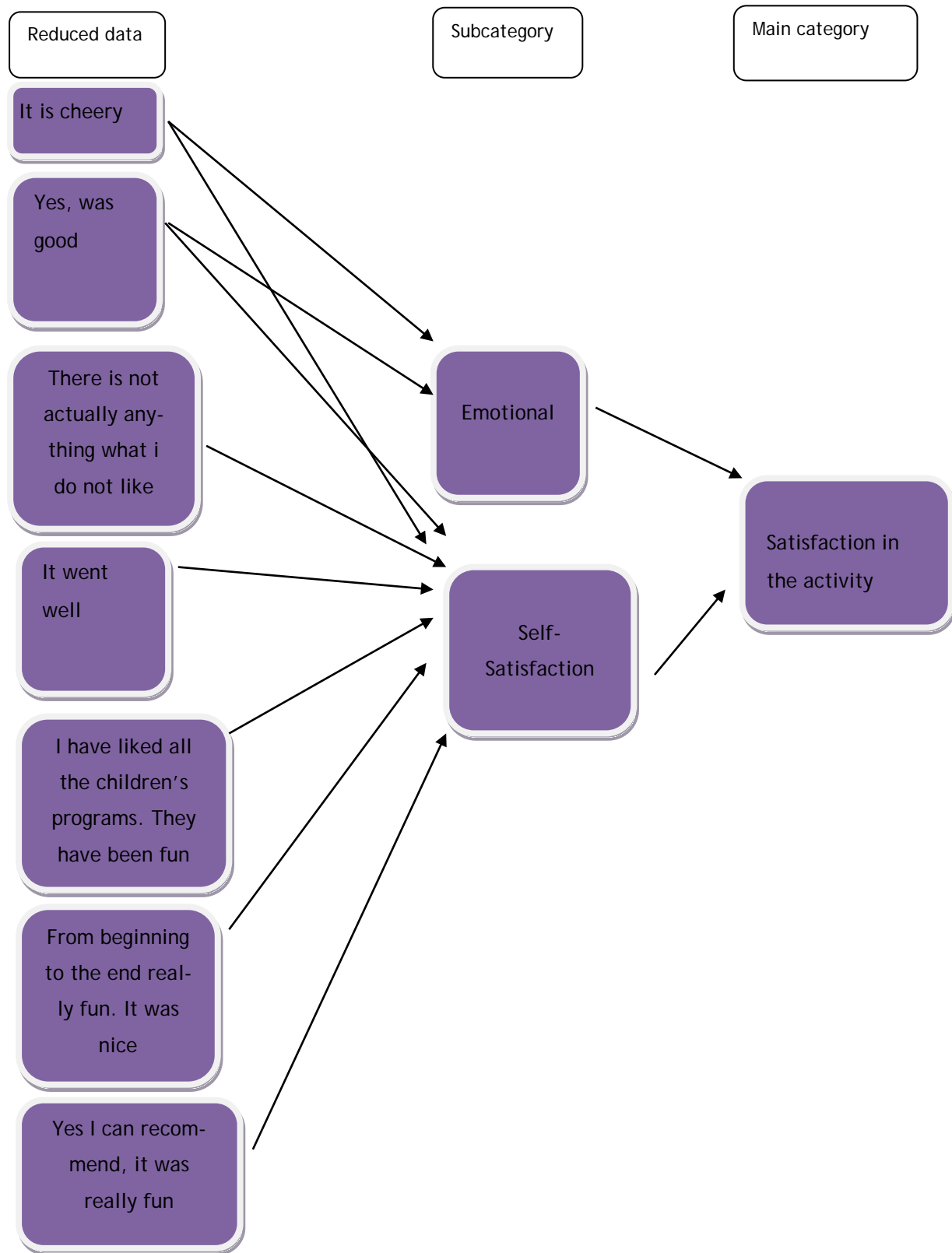


Figure 7: Satisfaction in the activity category

The intergenerational experiences provided positive feelings to the elderly service home participants. The elderly participants stated that the experiences were nice, fun, warm, funny, educational and interesting. In addition, the presence of the children brought happiness to the elderly participants. However, there was no verbal explanation provided for the reason behind the feelings of the elderly service home residents.

All the elderly service home participants recommended the intergenerational activity to the other elderly care institutions. The majority of the elderly service home participants responded positively in consistent with the verbal communication and behavior.

“Olen pitänyt kaikista lasten ohjelmista. Ne olleet mukavia. Alusta loppuun asti oikein mukava. Hauskaa se oli.”

“I have liked all the children’s programs. They have been fun. From beginning to the end really fun. It was nice.”

7.7 Promote Entertainment

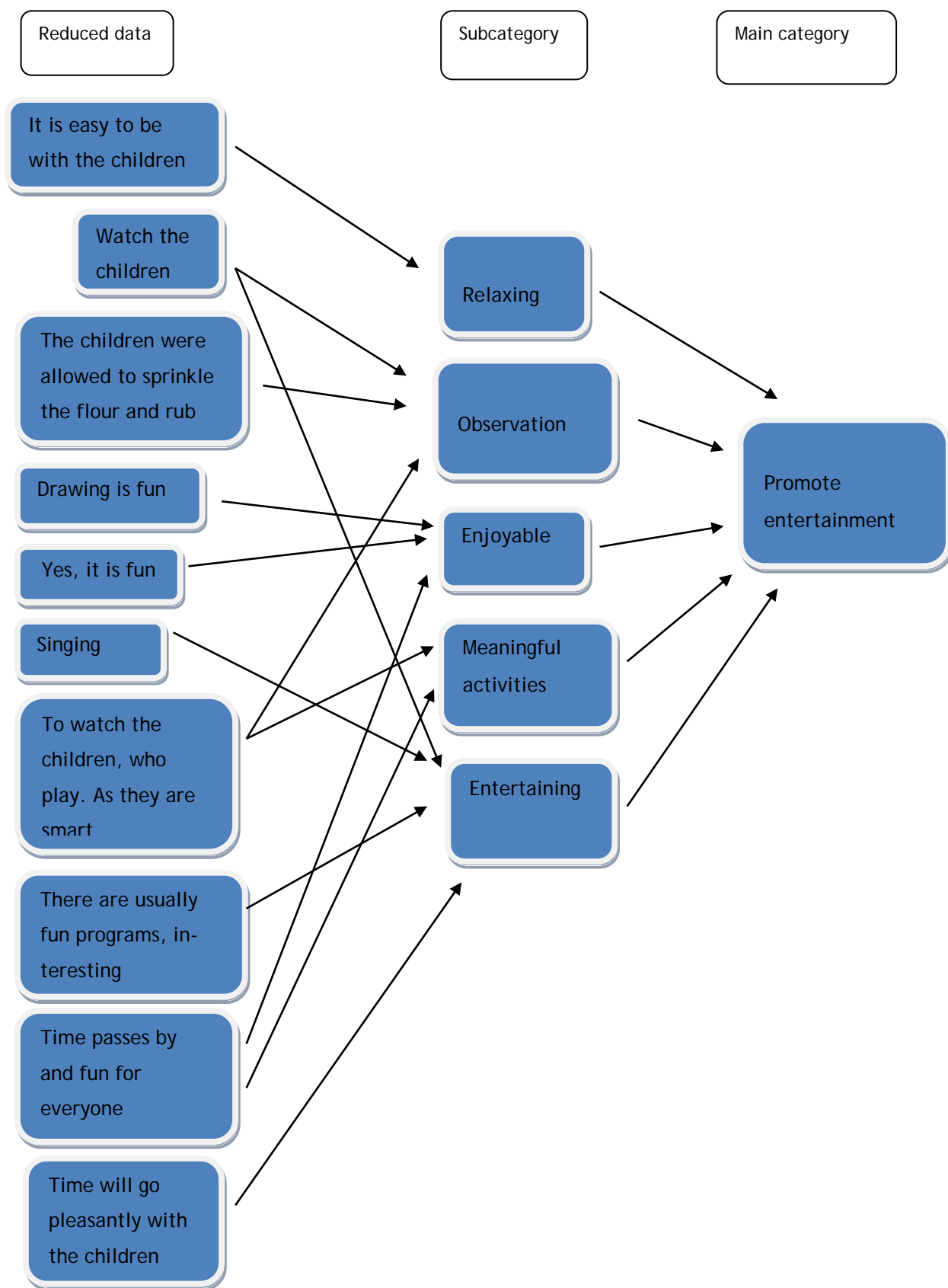


Figure 8: Promote entertainment category

The intergenerational experiences of the elderly service home residents were positive. The activities with the children created a significant outcome to all the elderly service home residents who participated. All the elderly participants responded positively about their feelings towards the experiences. In addition, the elderly participants appreciated the meaningful experiences. One resident stated that

“Kyllä, tämä on todella mukavia. Koska niissä on yleensä mukava ohjelmaa, mielenkiintoista ja tuo vähän vaihtelua arkeen.”

“Yes, this was really fun. Because there are usually fun programs, interesting and brings a little change in daily life.”

8 DISCUSSION

This thesis describes the intergenerational experiences of the elderly service home residents in Kannelmäki, Helsinki, Finland. This is a pioneering study in Finland which focused on the elderly's intergenerational experiences. The experiences of the elderly service home residents are positive although the responses in the interviews are short and less descriptive. The findings of this study arise from the intergenerational experiences and interpretation of the raw data. This study is a qualitative research. The data are collected through semi-structured interview, one-to-one interview, field notes and audio recorder. The inductive approach is employed in the data analysis of this thesis.

The main concept self-directing benefits is formed by inductive analysis. Self-directing benefits contains mental stimulation, physical activity, social interaction, relationship with the children, educational benefit, satisfaction in the activity and promote entertainment. The intergenerational experiences of the elderly service home residents strengthen the participants themselves in the aspects stated above. There is an absence of intergenerational theory against which the findings in this thesis could be compared and contrasted for the elderly participants in Finland. However, this study produced the same positive results as the outcomes in studies on intergenerational programs abroad. According to Newman & Hatton-Yeo (2008, 32) intergenerational programs involve interactions that promote social growth and learning between the young and the old. This feature consistently occurred in this study.

The intergenerational experiences related to the mental stimulation category of nine (n=9) Kannelmäki residents are attainable yet, somehow difficult to interpret due to the mental capabilities of the elderly service home residents. Speech is deteriorating and current memories are fading. WHO (2015) supports this concept. At some point in human life, the elderly

have mental problems which can be caused by social, psychological and biological reasons. According to Teeri, Leino-Kilpi and Välimäki (2006, 118) The National Research and Development Centre for Welfare and Health states that more than fifty percent of the long-term institutionalized elderly in Finland have dementia.

The study of Murayama, Ohba, Yasunaga, Nonaka, Takeuchi, Nishi, Sakuma, Uchida, Shinkai and Fujiwara (2015) presents the positive effects of an intergenerational program associated with mental health. In addition, the study of Low et al. (2015) about an intergenerational program for nursing-home residents discusses the increased positive outcomes for elderly with dementia. Similarly this study generates positive outcomes related to the mental aspects of the elderly who participated.

The majority of the elderly service home residents' possess good logical thinking abilities which manifested in the elderly's behavior. This study is consistent in the mental health definition of WHO (2014) which states that an individual has the ability to cope with the stress of life, is conscious of his/her own possibilities and also is creative. The Kannelmäki residents need a consistent orientation and explanation for the goals of the activity, which will direct the elderly residents in the future. After all, the institution needs the feedback from the elderly participants in every activity.

According to the interviews of the elderly residents, the highlight of the intergenerational experiences was the emotional fulfillment among the individuals. All the participants stated that they were satisfied with the intergenerational experiences and they recommended the activities to be used in other elderly care institutions. The emotional fulfillment of the intergenerational activities was the point of interest in the intergenerational experiences of the elderly. The intergenerational experiences provided emotional support to the elderly. A study of Pejner, Ziegert, and Kihlgren (2012) states that nurses fail to give emotional support in the home care setting. These intergenerational experiences could help the nursing professionals in providing quality care and attention to each client in the elderly service home institutions.

All the participants claimed that the physical experiences of the elderly in the intergenerational activities were positive. The intergenerational experiences produced physical activity which was associated with mental stimulation and social interaction of the participants. One elderly respondent stated that the activity was not suited for his/her daily activities but manageable once a week. The age of the respondent was in the old-old phase. The concept of aging associated with deteriorating mobility was consistent in the study of Guralnik, Ferrucci, Simonsick, Salive, & Wallace, stated in Sloninger (2013, 291). The increasing age is accompa-

nied with decline in aerobic, endurance, muscular strength, flexibility agility and balance (Guralnik, Ferrucci, Simonsick, Salive, & Wallace, cited in Sloninger 2013, 291).

The intergenerational activities which commonly promoted mobility were overlooked by the elderly service home residents in the interviews. The focus of the elderly was the experience of enjoyment during the activities. The study of Sloninger (2013) about functional fitness testing of older adults who reside in a local assisted-living facility produced the same outcome. The conversation with the elderly in this study has raised the elderly's concern related to physical strength function, expectation of others in an elderly behavior and function, and fear of failing other's expectation including oneself.

The social interaction was one among the most important category which the elderly residents value. There was an unspoken acceptance to continuous deterioration of health as one age however, acceptance related to absence of socialization was impossible among the elderly service home residents. This study depicted the reality of other studies. The size of the family decreases. The childlessness of a woman increases in the recent years (Center for Policy on Aging, 2014, 5). Minority of the elderly residents do not have immediate family. There were two types of social interaction needs which occurred in the interview. The first social interaction need was the demand for social interaction with the people who were present in the elderly care institution. The second was need for personal relationship which can include strong friendship.

The elderly service home participants provided answers which were according to their priority in the elderly service home. The most common thinking of the elderly participants was to fill the personal time in the service home with meaning. This was associated with health maintenance (Steptoe, Shankar, Demakakos, & Wardle 2012). This study also found that some elderly residents who have immediate family received seldom visitation from the family. The intergenerational program and experiences intervened from the absence of the immediate family however, the elderly resident still hoped for connection with the family.

The intergenerational experiences formed relationship in the elderly service home institution. However, the decision to value the degree of relationship which was present remained on the elderly resident alone. The majority of intergenerational programs were produced by the human services field professionals. Hence, the programs were created through need-identification and research-identification to suffice the demand (College of Agricultural Science, no date).

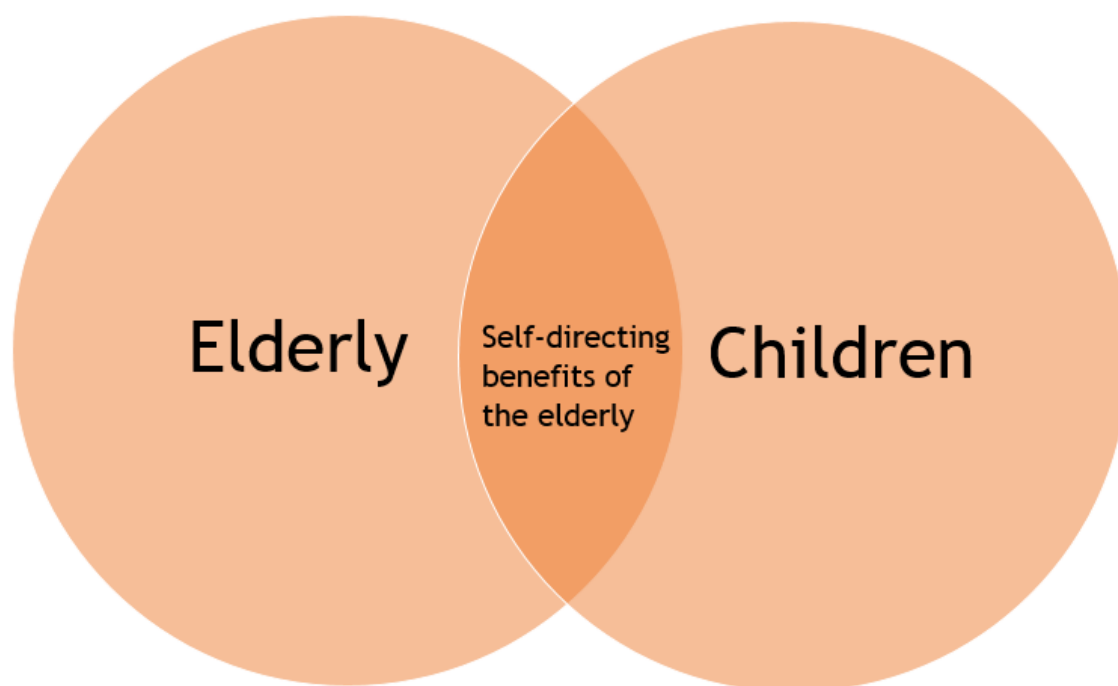
The intergenerational experiences of the elderly were positive in this study. The intergenerational activities were successful because first, the elderly institution provided a good extra

familial opportunity to the elderly. Second, the elderly participants actively participated in the activities. Some of the participants decided to join the activities because they believed that the time should be consumed with meaning and purpose. Third, the mental perspective, self-assessment, decision making and the personality of the major elderly service home residents influenced the elderly individual including the group they belong in the elderly service home.

The positive manifestation of the intergenerational activities might also affect the workers positively in the service home. The good feeling, satisfaction, and energized elderly participants can contribute to nursing care professionals' working experiences in the elderly service home.

The elderly service home was one among the many possible reasons why the elderly service home residents have positive description of intergenerational experiences. The elderly service home was strongly focused on the goodness of the elderly. The numerous activities of the service home were concentrated on the elderly residents. The elderly service home residents have freedom to choose the things which they believed were good to them.

Intergenerational experiences of Kannelmäki elderly service home residents



■ Positive intergenerational experiences

Figure 9: The intergenerational experiences of the elderly service home residents

Figure 9 demonstrates the Kannelmäki elderly participants' positive intergenerational experiences with the kindergarten children. The intergenerational activities with the kindergarten children created a distinct positive experience which provided a good life experience in the elderly service home. The elderly residents were satisfied with the experiences related to intergenerational activities. The educational development continues in according to the intergenerational experiences. Also it produces entertainment to all the elderly service home participants. The elderly participants exhibited a combination of consistent and inconsistent mental and behavioral manifestation. Some of the elderly participants who remembered the intergenerational activities had positive comments and positive expression during the activity and the interview.

8.1 Ethical Considerations

This study arise because of the importance of the family, relationship and care values in all aspect of life which can influence the basis of providing health care. There are numerous reports and studies which indicate the existing problem of loneliness and social isolation in the

elderly care institution. However, limited interventions are made to eliminate the problems. This study promotes additional interventions which can also work in the Finnish elderly care institutions. According to Miles and Huberman (1994, 290) a study without enormous meaning is likely to be explored in a superficial approach, with less care dedicated to design and data collection.

This study followed the expectation in ethical standards all throughout the research. The approval of this study in Kannelmäki elderly service home was granted by the City of Helsinki. This study respected the rights and dignity of the elderly service home residents who participated in this study. The consent form was given to the elderly residents prior to the intergenerational activity. The elderly home residents' identity was kept anonymous. In addition, the interviews were protected confidentially and the data were kept securely. Cooperation with honesty and integrity were made with the elderly home residents (Denscombe 2003, 134).

During the thesis process collaboration occurred with the head-nurse, nurses and health care professional in Kannelmäki service home for the most suitable time the client had to be interviewed. Also the elderly participant was interviewed in a private room where the elderly home resident expressed his/her thoughts, feelings, comments and perceptions related to the intergenerational program experiences. In this way, privacy among the participants was implemented in the interview process. The confidentiality of the elderly participant was protected in the analysis. The thesis supervisors of Laurea Otaniemi University of Applied Sciences guided and inspected this study. In addition, this study followed the guidelines of the thesis in Laurea University of Applied Sciences.

8.2 Validity and Reliability

Miles and Huberman (1994, 278) provided suitable information to determine the external validity of the qualitative study. The external validity described the general methods and procedures of the study in detail. Also, the reader can monitor the transformation of the raw data into concrete conclusion. The conclusions were connected with the information presented in the data. The researcher was open and mindful about personal subjective assumptions, values and biases, and affective states. In addition, the data were accessible for others to investigate. (Miles & Huberman 1994, 278)

The general methods and procedures of this study were specified in the methodology section. This study followed the procedures and guidelines of Laurea with the guidance and assistance of the thesis supervisors and the English teacher. The necessary flow of information and data were described and provided in this thesis. The original fragments of the data from the elderly service home residents were available for all the readers. In addition, the conclusions

were linked in the findings and theoretical background of intergenerational experiences and wellbeing of the elderly. This thesis formed the interpretations based from the raw data. Moreover, there was no conflict of interests. Objectivity was implemented to provide information which direct the elderly of this study.

Miles and Huberman (1994, 278) states the relevant queries to determine the reliability of the qualitative research. The research question was clear and the features of the study designs were consistent to the research question. The researcher's role and status were clearly described. The findings demonstrated significant coordination across data sources. The paradigms and analysis were evidently specified. The data were collected in appropriate environment, times and participants in respect to the research questions. Denscombe (2003, 274) states the ways to inspect the validity of the findings. Avoid over simplifications. The conclusions should provide justice to the complexity of the phenomenon being studied. The researcher prevents bias or one sided reporting.

The questionnaires were developed to obtain the intergenerational experiences of the elderly in the elderly service home in Kannelmäki, Finland. The semi-structured questionnaire of this study was inspected and approved by the Laurea thesis supervisors. The proposal of the thesis including the tools for interviews were assessed and approved by the City of Helsinki. The list of semi-structured questions was exhibited in Appendix 2. The complete questions were consistently asked to each elderly participant. The elderly participants were encouraged to express their thoughts and feelings during the interview.

Introduction occurred with the elderly service home participants. Before the scheduled interview, rapport was built with the elderly service home residents. Also familiarity was initiated with the elderly service home residents. Moreover, the elderly residents received assistance and companion in several daily activities such as eating, playing, and singing in the elderly service home institution.

During the interview, a brief orientation was provided to the elderly about the interview process, the recording of the interview, and the basic information of the study. Some of the participants signed during the scheduled interview however, the health care professionals requested for verbal permission to the elderly participants' days before the actual interview. The elderly participants were informed about the confidentiality and the anonymity which were strictly applied in this study. The Finnish language was the medium of the interview. One interviewer consistently interviewed all the voluntary elderly participants.

The interview was held in the elderly resident's room and at the occupational therapist's office. During the interview there were minor disturbances due to the medication interven-

tion of the elderly residents, health care providers' compulsory visits for the assurance of elderly's security and the unexpected entrance of care providers in the closed interview area. The interviewer paused until the intruder had left the room. The distraction might have possibly disconnected the momentum of the interview between the interviewers and the elderly participants. Some questions were left unanswered. Freedom was provided to the elderly participants in answering the questions which they were capable of answering. A hard copy of this thesis was provided to the Kannelmäki elderly service home institution.

The interview of the elderly service home residents occurred in the private area where the elderly residents were comfortable of expressing their perception in respect to intergenerational experiences. The authors of this thesis originated from the Asian countries where practices of elderly care were provided by the family members. The experiences were gained in the elderly service home as part of the first year requirements of nursing course. As the nursing students and the future nursing professionals, to provide the necessary interventions in the existing problem on the nursing field is one of the goals of the authors. In this thesis, questions were raised in accordance to the questions which believed to produce description of intergenerational experiences of the elderly. There was no conflict of interest in this study.

The secondary authors were visible in the in-text references of this study. It was difficult to eliminate the secondary references due to several reasons such as absence of English language translation, access which needs payment, and inaccessibility of the original book or articles. The concept of intergenerational program has been explored in the other countries however, Finland has limited information in this idea. This study accessed the information which were mostly available in the electronic data base. Books related to this topic were unavailable in the Laurea School and other libraries.

8.3 Recommendations and Suggestions

The intergenerational activities promoted physical activities. The elderly's activities can also serve as physical assessment in determining the present physical status of the elderly residents. The physical activities promote maintenance of mobility and strength. The mobility in the intergenerational activities supported the elderly to prevent rapid deterioration or weakness in the motor skills.

The intergenerational experiences were positive in this study although the answers were short and brief. This thesis found that the implementation of intergenerational activity in the Kannelmäki elderly service home produced positive outcome. Therefore, this study suggests the application of intergenerational activities in the other elder care institutions. The

similarities of the intervention system, health care providers' goal, and elderly residents' motivation can generate similar positive result.

The goal of the intergenerational activity should be explained to the participants to provide directions. The instruction and consistent orientation will guide the elderly service home in improving or maintaining the aspect they need to develop, improve or maintain.

This thesis suggests future studies in the health care providers' perspective on the intergenerational activities which they implement on the elderly service home. The children and elderly perspectives related to intergeneration program experiences were already available. The health care providers' point of view will complete the missing information in determining the outcome of intergenerational experiences in the elderly care institution.

References

Berkman, B. 2006. Handbook of Social Work in Health and Aging. New York: Oxford University Press.

Center for Policy on Aging- Review. 2014. Changing family structures and their impact on the care of older people. Accessed 20 September 2016.

[http://www.ageuk.org.uk/Documents/EN-GB/For-professionals/Research/CPA-
Changing_family_structures.pdf?dtrk=true](http://www.ageuk.org.uk/Documents/EN-GB/For-professionals/Research/CPA-Changing_family_structures.pdf?dtrk=true)

College of Agricultural Science. No Date. The role of theory in intergenerational programming and research. AYFCE (CI ED) 845: Intergenerational programs and practices. Accessed 29 September 2016. [http://agsci.psu.edu/elearning/course-
samples/ayfce_845_sample/Ln_5/L5_4.htm](http://agsci.psu.edu/elearning/course-samples/ayfce_845_sample/Ln_5/L5_4.htm)

Creswell, J. 2014. Research design: qualitative, quantitative, and mixed methods approaches. 4th edition Los Angeles: SAGE Publications.

Denscombe, M. 2003. The good research guide- for small-scale social research projects. 2nd edition. New York: Open University Press

Denzin, N. & Lincoln, Y. 2003. Collecting and Interpreting Qualitative Materials. 2nd edition. London: SAGE Publications.

Eckert, K. & Lange, M. 2015. Comparison of physical activity questionnaires for the elderly with the international Classification of Functioning, Disability and Health (ICF) - an analysis of content. BioMed Central. Accessed 9 February 2016.

<http://bmcpublichealth.biomedcentral.com/articles/10.1186/s12889-015-1562-3#CR3>

Einiö, E. (no date) Determinants of institutional care at older ages in Finland. The Population Research Institute. Accessed 20 September 2016.

<https://helda.helsinki.fi/bitstream/handle/10138/23376/determin.pdf?sequence=2>

Fillenbaum, G. 1984. The wellbeing of the elderly- Approaches to multidimensional assessment, 84, 42. Geneva: World Health Organization. Accessed 26 September 2016.

http://apps.who.int/iris/bitstream/10665/39694/1/WHO_OFFSET_84.pdf

Helsingin kaupunki. No date. Accessed 19 January 2016.

[http://www.hel.fi/www/Helsinki/fi/sosiaali-ja-terveyspalvelut/ikaantyneiden-
palvelut/monipuoliset-palvelukeskukset/lansi/kannelmaki/](http://www.hel.fi/www/Helsinki/fi/sosiaali-ja-terveyspalvelut/ikaantyneiden-palvelut/monipuoliset-palvelukeskukset/lansi/kannelmaki/)

Henkin, N. & Butts, D. 2012. Intergenerational practice in the United States: past, present and future. *Quality in Ageing and Older Adults*. Article from *Emerald Insight*, 13 (4), 249 - 256. Accessed 22 January 2016.

http://www.emeraldinsight.com/doi/full/10.1108/14717791211286913#_i6.

Hooyman, N. & Kiyak, H. 2005. *Social Gerontology. A Multidisciplinary Perspective*. 7th edition. New York: PEARSON.

Li, H., Ji, Y. & Chen, T. 2014. The Roles of Different Sources of Social Support on Emotional WellBeing among Chinese Elderly. Article from *Social Support and Emotional Wellbeing*, 9(3). Accessed 18 February 2016.

<http://journals.plos.org/plosone/article?id=10.1371/journal.pone.0090051>

Low, L., Russell, F., McDonald, T., & Kauffman, A. 2015. Grandfriends, an Intergenerational Program for Nursing-Home Residents and Preschoolers: A Randomized Trial, *Journal of Intergenerational Relationships*, 13(3) 227-240. Accessed 22 January 2016.

<http://www.tandfonline.com/doi/full/10.1080/15350770.2015.1067130>

Miles, M., & Huberman, M. 1994. *Qualitative Data Analysis. An Expanded Sourcebook*. 2nd edition. London: SAGE Publications

Murayama, Y., Ohba, H., Yasunaga, M., Nonaka, K., Takeuchi, R., Nishi, M., Sakuma, N., Uchida, H., Shinkai S., and Fujiwara Y. 2015. The effect of intergenerational programs on the mental health of elderly adults. *Aging & Mental Health*. Article from Routledge Taylor & Francis Group, 19 (4) 306-314. Accessed 22 January 2016.

<http://www.tandfonline.com/doi/pdf/10.1080/13607863.2014.933309>

Newman, S. & Hatton-Yeo, A. 2008. Intergenerational Learning and the contributions of older people. *The Oxford Institute of Aging*. (8), 31-39. Article from *Ageing Horizons*. Accessed 20 September 2016

http://dev.ageing.ox.ac.uk/system/files/ageing_horizons_8_newmanetal_II.pdf

Newman, S. & Smith, T. 1997. *Developmental theories as the basics for intergenerational program*. Taylor and Francis Publisher. Accessed 4 September 2016.

[https://books.google.fi/books?hl=fi&lr=&id=4oP-](https://books.google.fi/books?hl=fi&lr=&id=4oP-AuEWEgC&oi=fnd&pg=PR9&dq=intergenerational+programs&ots=V5nqHa7ESI&sig=u10Y3lbZTQBQLdbC4SkjVmB1WJs&redir_esc=y#v=onepage&q=intergenerational%20programs&f=false)

[AutEWEgC&oi=fnd&pg=PR9&dq=intergenerational+programs&ots=V5nqHa7ESI&sig=u10Y3lbZTQBQLdbC4SkjVmB1WJs&redir_esc=y#v=onepage&q=intergenerational%20programs&f=false](https://books.google.fi/books?hl=fi&lr=&id=4oP-AuEWEgC&oi=fnd&pg=PR9&dq=intergenerational+programs&ots=V5nqHa7ESI&sig=u10Y3lbZTQBQLdbC4SkjVmB1WJs&redir_esc=y#v=onepage&q=intergenerational%20programs&f=false)

Nyqvist, F., Cattan, M., Andersson, L., Forsman, A. & Gustafson, Y. 2013. Social Capital and Loneliness among the Very Old Living at Home and in Institutional Settings: A Comparative Study. *Journal of Aging Health*, 25(6), 1013-1035. Article from SAGE. Accessed 22 January 2016. <http://jah.sagepub.com/content/25/6/1013.full.pdf+html>

Pejner, M., Ziegert, K. & Kihlgren, A. 2012. Trying to cope with everyday life - Emotional support in municipal elderly care setting. *International Journal of Qualitative Studies on Health and Wellbeing*, 7. Accessed 18 February 2016. <http://www.ijqhw.net/index.php/qhw/article/view/19613>

Qualter, P., Vanhalst, J., Harris, R., Roedel, E. V., Lodder, G., Bangee, M., Maes, M. & Verhagen, M. 2015. Loneliness across the life span. *Perspectives on Psychological Science*, 10(2), 250-264. Article from SAGE. Accessed 22 January 2016. <http://pps.sagepub.com/content/10/2/250.full.pdf+html>

Routasalo, P. & Pitkala, K. 2003. Loneliness among older people. *Reviews in Clinical Gerontology*, 13 (4), 303-311. Article from Cambridge University Press. Accessed 27 September 2016. <https://www.cambridge.org/core/journals/reviews-in-clinical-gerontology/article/loneliness-among-older-people/1B26C83E2B8313FDA488104CA99B7D5C>

Sloniger, M. 2013. Functional fitness testing of older adults: An intergenerational service learning experience. *Journal of Activities, Adaptation & Aging*, 37 (4) 291-296. Accessed 19 September 2016. <http://dx.doi.org/10.1080/01924788.2013.845717>

Sopanen, J. 2015. Elderly clients' experiences of playing a video-game. Degree Programme in Nursing. Laurea University of Applied Sciences. Accessed 19 September 2016. <http://www.theseus.fi/bitstream/handle/10024/98962/FINAL%20THESIS%20JOUNI%20SOPANE%20N.pdf?sequence=1>

Stephoe, A., Shankar, A., Demakakos, P. & Wardle, J. 2012. Social isolation, loneliness, and all-cause mortality in older men and women. Article from *PNAS*, 110(15), 5797-5801. Accessed 21 September 2016. <http://www.pnas.org/content/110/15/5797.full>

Teeri, S., Leino-Kilpi, H., & Välimäki, M. 2006. Long-term Nursing Care of Elderly People: Identifying Ethically Problematic Experiences among Patients, Relatives and Nurses in Finland. *Nursing Ethics*, 13(2), 116-129. Accessed 16 September 2016 <http://nej.sagepub.com/content/13/2/116.full.pdf+html>

Thomas, D. 2006. A general inductive approach for analyzing qualitative evaluation data. American Journal of evaluation, 27 (2) 237 - 246. Accessed 9 February 2016.
<http://aje.sagepub.com/content/27/2/237>

United Nations. 2013. World Population Ageing. Accessed 7 December 2015.
<http://www.un.org/en/development/desa/population/publications/pdf/ageing/WorldPopulationAgeing2013.pdf>

Von Bonsdorff, M. 2009. Physical activity as a predictor of disability and social and health service use in older people. Jyväskylä: University of Jyväskylä

Wilson, G. 2000. Understanding old age. London: SAGE Publications.

World Health Organization. No date. Ageing and life-course. Accessed 3 February 2016.
<http://www.who.int/ageing/about/en/>

WHO. 2014. Mental health: a state of wellbeing. Accessed 3 February 2016.
http://www.who.int/features/factfiles/mental_health/en/

WHO. 2015. Media center: Mental health and older adults. Accessed 3 February 2016.
<http://www.who.int/mediacentre/factsheets/fs381/en/>

Yle uutiset. 2013. Finnish silence can be golden, says American expert. Yle Turku, 16 January. Accessed 8 December 2015.
http://yle.fi/uutiset/finnish_silence_can_be_golden_says_american_expert/6454371

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Tables

Table 1: Intergenerational activities in Kannelmäki service home

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Appendices

Appendix 1



Consent Form

We, Maricris L. Gabutero and Mamata Kharel are third year nursing student in Laurea University of Applied Sciences from Otaniemi are conducting a thesis entitled Intergenerational experiences of the elderly service home residents.

The aim of this study is to describe the intergenerational experiences of the elderly service home residents in Kannelmäki Helsinki. The result will be used for the future source of information related to implementation of related or similar activities to different institution for the elderly in Finland. Also, this study will evaluate the intergeneration program which will provide feedback to the nurses, institution and the society.

We will interview the participant for the maximum of 30 minutes on the scheduled time provided by the Kannelmäki institution. One to one interview will be conducted in the private room of the institution. The student nurses will record the interview using audio recorder on the basis of respondent's permission. All the gathered data will be destroyed after the thesis has been published. Also the interview will be kept confidential all throughout the study.

The relevant answers from the inquiry will be used in the study however the respondent's identity will be kept anonymously and strictly confidential. We will provide a copy of the thesis to present the result of the investigation to the institution. Our final thesis will also be published in www.theseus.fi, where it can be found online.

The participant is not obliged to continue if he/she no longer wish to do so. The participant can withdraw the consent at any time.

The student nurses will provide a coffee and a bread during the assigned interview.

I give my permission to record the interview and the publication of my answer granted that anonymity and confidentiality will be guaranteed.

Place, Date, Signature

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Appendix 2



Interview questions

1. What did you do in the activity?
2. Did you like the program?
What is the best part that you like?
What is the part that you least liked in the activity?
3. How did you feel about being involve in the program?
What did you feel and think after the activity?
4. In the future, would you recommend the program to other elderly? Why?