

Quality of Life and Well-being for Older Adults without Cognitive Impairment Living in Care Homes: A Systematic Literature Review

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Background

- Older adults living in care homes often report poor quality of life (QoL) and well-being [1-3]. As a result, there has been an influx of research conducted aiming to improve the lives of these residents.
- However, there are no QoL or well-being instruments designed specifically for care home residents without cognitive impairment, making it difficult for researchers to accurately capture change in these areas.
- Researchers have to rely on instruments designed either for older adults living in the community [4-10], or for those living in care with dementia [11-14]. Consequently, there is a need for a valid and reliable instrument designed specifically for this group of older adults.

Research Aim

To systematically review the literature to identify dimensions of well-being and QoL from the perspective of care home residents without cognitive impairment.

The dimensions identified will subsequently be used to aid the development of a new instrument to measure QoL and well-being in this population.

Method

Design

- Literature review to identify studies on QoL and well-being from the perspective of care home residents, published between January 1990 and December 2016.
- Key words: 'quality of life' OR 'QoL' and 'Well-being' OR 'well being' AND 'domain*' OR 'component*' OR 'factor*' AND 'residential' OR 'care home' OR 'nursing home'.

Database Search

6101 potentially relevant papers identified from the electronic database search:
 Pubmed *n*=1179
 PsycINFO *n*=1558
 ScienceDirect *n*=3364

Eligibility Assessment

n=124 full copies retrieved and assessed for eligibility against pre-defined inclusion/exclusion criteria (Table 1)

n=5977 papers excluded

n=109 papers excluded

Critical Appraisal

Critical analysis using appraisal tools [15] was conducted to ensure papers were of high enough methodological and analytic quality for inclusion

n=8 additional papers identified from reference lists and review papers

Included Studies

n=23 studies included in the systematic literature review

Analysis

Heterogeneity of the studies resulted in the need for a narrative approach. Thematic analysis [16] was adopted, with codes being assigned to each papers' results section. These codes were then compared across papers until themes emerged.

Table 1 Inclusion and exclusion criteria for article selection

Inclusion criteria:

Articles focusing on individual components of QoL or well-being.
 Publication in English and published in a peer-reviewed journal.

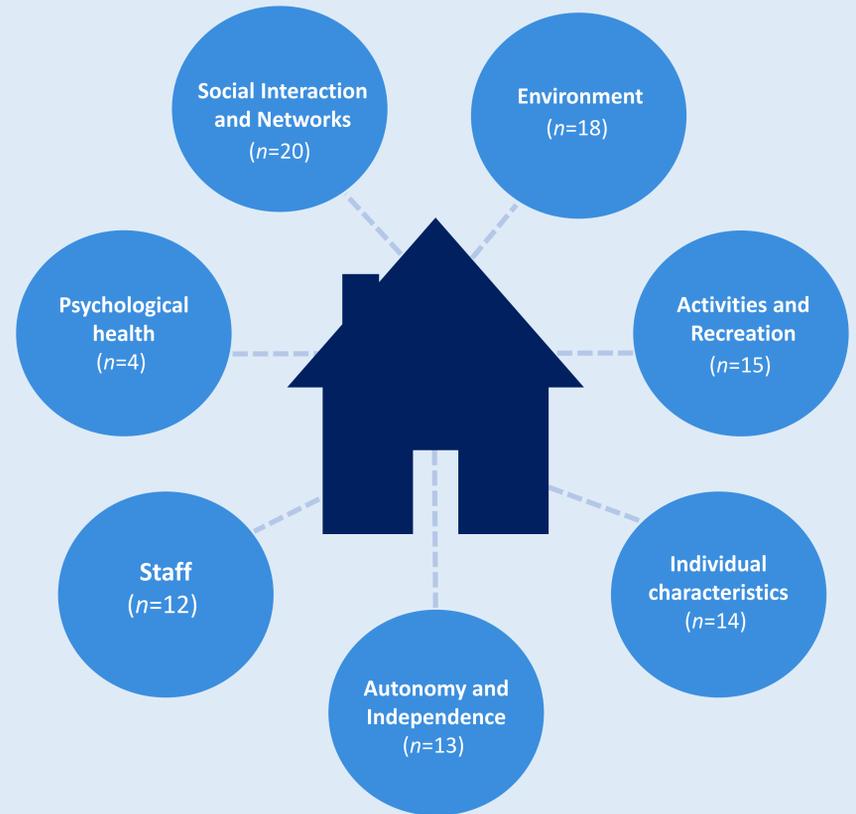
Exclusion criteria:

Review papers, commentaries, thesis papers, conference papers, discussion papers or books.
 Samples involving older adults living in the community or those in care homes with cognitive impairment.
 Intervention studies.
 Publications on HRQoL.

Results

- 23 papers [17-39] including qualitative (*n*=15), quantitative (*n*=6), and mixed methods (*n*=2) studies involving over 3000 individuals.
- Range of methodologies including exploratory interviews and focus groups, to cross-sectional surveys and secondary data analysis.
- Samples ranged from 8 to over 1000 residents, and included both residential and nursing homes.
- The studies were conducted in a variety of countries, with most samples from the USA (*n*=4) Australia (*n*=4), and Canada (*n*=3). Only one paper included a UK sample.

Thematic analysis revealed a range of QoL and well-being dimensions, with seven themes emerging:



Sub-themes and Key Findings

- Social Interaction and Networks:** Interactions with family, friends, staff and other residents; frequency of interaction; links to the wider community; social support from family, friends and staff.
- Environment:** Privacy and personal space; near nature; safe and secure environment; an environment that promotes social opportunities; an environment adapted to suit the needs of residents.
- Activities and Recreation:** Completing activities of daily living; religious or spiritual activities; frequency of participation alone is not sufficient, activities must be meaningful and have purpose.
- Individual characteristics:** Financial security; personal qualities, identity and sense of self; attitudes to moving and ability to adapt to living in a residential setting.
- Autonomy and Independence:** Completing self-care activities; opportunities to be independent; choice and control.
- Staff:** Staff attitudes, training and motivation; individualised care; number of staff.
- Psychological health:** Anxiety; depression; hope; positive outlook on life.

Discussion and Implications

- QoL and well-being were found to be multidimensional concepts, which is in agreement with previous research studying other populations [40-44].
- Overlaps between the domains exist with one domain being able to influence the outcome of another. Therefore, interventions aimed to improve one aspect of QoL and well-being may lead to broader benefits in additional areas.
- Findings demonstrate the importance of care home specific factors for residents' QoL and well-being. Such aspects are unlikely to be captured in measures designed for older adults living in the community, supporting the need for a measurement tool specifically designed for care home residents.

Conclusions

The findings provide those interested in improving the lives of older adults in care with specific areas to target, and also provide a useful synthesis regarding the domains of QoL and well-being. The identified domains can be used to assist in the development of a new instrument to measure QoL and well-being, and further work will now be undertaken towards developing a valid and reliable outcome measure.

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