

Chapter 3: Understanding the Needs of Adult Day Care Participants



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UNDERSTANDING THE NEEDS OF ADULT DAY CARE PARTICIPANTS

Adult day care centers are designed to serve:

- Persons 60 years of age or older
- Functionally impaired adults 18 years of age or older

The National Adult Day Services Association (2005) reports that the average age of the adult day care participant is 72. Approximately two-thirds of the participants are women. Seventy-five percent of the participants live with a spouse, adult children, or other family and friends.

Adult day care participants need one or more of the following:

- **Supervision**
- **Increased social interaction**
- **Assistance with personal care**
- **Assistance with daily living activities**
- **Assistance with dispensing medications**
- **Monitoring of medical conditions**

The most common needs identified by caregivers are assistance in moving from one position to another (for example, sitting in a chair to standing) and, because of a decline in thinking or reasoning ability, assistance in making decisions or remembering (for example, when to take medications). Most participants served by adult day care require assistance in more than one area. **This chapter will focus on understanding the changing needs of older adults and adults with disabilities.**

Older Adults

The United States Administration on Aging reports that the older population (persons 65 years or older) numbered almost 36 million in 2003. It is estimated that by 2030, the older population will more than double to 71.5 million or 20% of the population in the United States (United States Department of Health and Human Services Administration on Aging [HHS AoA], 2005).

Most older adults have at least one chronic condition, and many have multiple conditions. Among the most frequent to occur in older adults in 2000–2001 were hypertension, arthritic symptoms, all types of heart disease, cancer, sinusitis, and diabetes. Reports indicated that half of the older population has at least one disability of some type (physical or mental). While some disabilities may cause minimal disruption to independent living, others result in the need for assistance with performing activities of daily living (HHS AoA, 2005).

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“Activities of daily living” (ADL) are activities done in a normal day that are related to self-care such as walking, eating, dressing, bathing, grooming, and using the toilet. “Instrumental activities of daily living” (IADL) are activities related to independent living and include meal preparation, shopping, light housework, managing money, using a telephone, and taking medicine. Limitations in either category may be temporary or chronic. **Persons are considered to have ADL or IADL limitation if they are unable to perform tasks without the assistance or substantial supervision of another person.**

While many older adults are healthy and live independently, they may require some assistance due to the physical changes of aging. Adult day care is one way to provide support services and to enhance the quality of life in a community setting.

Physical Changes With Aging

Everyone experiences the aging process, but it occurs at different rates. Many people lead a full, active lifestyle throughout the aging process, while others may begin experiencing limitations at a relatively young age.

The signs of aging can include changes in:

- Muscle mass and strength
- How the body uses energy
- Percentage of body fat
- Bone density
- Cholesterol/HDL levels
- Blood sugar tolerance
- Body temperature
- Aerobic capacity (Duyff, 2002)

Effect of Aging on Eating Habits

For older adults, eating is often a challenging and frustrating task. Medications, smoking, poor oral hygiene, poor-fitting dentures, and medical conditions may change the way food tastes. Moreover, physical changes due to aging can alter the way food tastes as well as how the body uses food.

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Changes in the senses (smell, taste, touch, hearing, and sight) may make eating more difficult.

- A decline in the sense of smell may contribute to poor appetite because pleasant food aromas increase appetite.
- Loss of hearing and poor eyesight may contribute to a lack of interest in eating or the ability to follow verbal instructions.
- Loss of the sense of touch impacts the ability to pick up food or eating utensils. The individual is unable to feel or hold the utensil, making eating very difficult. Also, serving very hot foods and beverages to a person unable to feel hot temperatures can result in burns.

Chapter 5 provides information on feeding techniques for individuals with sensory losses.

The ability to chew, swallow, and digest foods changes with age.

Chewing

Chewing problems usually occur over time. Older adults may believe that the food is tough or of poor quality rather than recognize the problem is their teeth or dentures. Foods that are easily cut with a fork are usually easiest to chew.

Signs of a chewing problem include:

- Loss of appetite and/or weight loss
- Refusal of solid food but not liquids
- Complaints that food is tough
- Complaints of pain while chewing
- Poor-fitting dentures or loss of dentures
- Refusal to wear dentures
- Taking a long time to eat

Swallowing

Difficulty in swallowing (dysphagia) affects people of all ages, but particularly the older adult. It can vary from mild discomfort to an inability to swallow. The most common causes of swallowing problems are stroke, Parkinson's disease, and dementia.

Signs of difficulty in swallowing include:

- Loss of appetite and/or weight loss
- Choking on food, beverages, or medications
- Clearing the throat frequently after eating
- Complaints that food sticks in the throat
- Complaints of pain with swallowing
- Drooling
- Holding food in the mouth
- Changes in voice quality during and after eating (Derring, Russell, & Womack, 2002)

Participants observed with signs of difficulty in swallowing are at increased risk of choking and getting food or fluids in the lungs.

Individuals having difficulty in swallowing may be helped by a swallowing therapist. This professional is trained to identify swallowing problems and to recommend changes in diets.

Digesting

Difficulties with digesting foods are common problems reported by older adults.

The most common digestion complaints include:

- Heartburn
- Indigestion
- Constipation

Heartburn occurs when food sloshes from the stomach back into the esophagus causing a burning feeling in the chest. Indigestion may be caused by changes in the stomach, making protein and fat more difficult to digest. Slow movement of food and waste products through the intestines can result in constipation. Indigestion and constipation contribute to poor appetite.

Adults With Cognitive Losses

Adults who have cognitive losses (general loss of mental ability) may not recognize hunger or may be distracted or confused at mealtimes, resulting in poor intake.

Reduced ability to think and reason clearly can occur:

- After an acute illness or traumatic head injury
- With depression
- As a side effect of certain medications
- From effects of metabolic and neurological disorders
- With the aging process in general

Such changes sometimes can be managed with medication or by adapting/modifying the diet, such as serving finger foods to allow the person to eat independently.

Ways to meet the nutrition needs of individuals with cognitive losses are discussed in chapter 5.

Adults With Disabilities

Adults with disabilities include a wide range of individuals with many special needs such as dementia and developmental disabilities.

Dementia

**Dementia is a progressive disease that attacks the brain.
Alzheimer's disease is the most common form of dementia.**

Dementia results in a gradual and irreversible decline in:

- Memory
- Language skills
- Thinking
- Behavior

Understanding the Needs of Adult Day Care Participants

The onset of dementia is usually gradual. Over time, people with dementia withdraw from lifelong hobbies and activities because they have forgotten how to perform them. Changes in routine are very upsetting because of increased confusion and decreased ability to perform daily tasks.

Eating can become difficult because the individual cannot focus his/her attention long enough to eat a meal or is confused over what to do when a meal is served. Loss of self-feeding skills may contribute to the confusion resulting in poor food intake.

Developmental Disabilities

Developmental disabilities include physical or mental limitations that are present at birth or caused by an injury.

Adults with developmental disabilities have difficulties with three or more of the following:

- Self-care
- Language
- Learning
- Physical movement
- Self-direction
- Capacity for independent living
- Economic sufficiency (U.S. Public Health Service, 2001)

Eating may be frustrating because of difficulties due to confusion, memory loss, loss of physical strength, loss of the sense of touch, and loss of coordination (Centers for Disease Control and Prevention [CDC], 2002).

Adults with developmental disabilities tend to be younger than 60 and have food preferences that are different from older adults.

Their experiences with food preparation and food service may be different from older adults as well. Fast food and foods eaten without utensils tend to be more popular with younger adults than older adults due to lifelong food habits.

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Understanding the nutrition needs of all the adults participating in the CACFP and serving nutritious foods are vital to the health and well-being of the participants.

The adult day care center should tailor services to help each participant achieve and maintain the highest level of functioning possible.