Activity #1

For the instructor:

At the beginning of this module, have a large flip chart or large piece of paper (so that you can keep the answers and reference them later in the module). Write on it the following:

- Infancy Birth to 1 year
- Toddler 1 to 3 years
- Preschool 3 to 6 years
- Middle Childhood 6 to 8 years
- Late Childhood 9 to 12 years
- Adolescence 12 to 18 years
- Young Adulthood 18 to 40 years
- Middle Adulthood 40 to 65 years
- Late Adulthood 65 and older

Ask each student to select 3 age groups. Write 1 thing on the chart/paper under each of the 3 selected age groups that the home care aide would need to consider when providing care for each age group.

Give the students an example, such as, "adolescents may have a great need for privacy and may need to have periods of time alone."

As you work your way through this module, reflect on what the students listed under the age groups. After you have completed an age group in the module, discuss what the students produced on their own and compare/discuss.

Handout #1 - Myths

Although there are significant changes related to the aging process, there are many myths as well.

Remembering these myths will help when working with older adults:

Myth: Most older people are senile or demented.

Truth: Fewer than 20% have measurable memory impairment.

Myth: Most older people feel miserable most of the time.

Truth: Studies have found that most older people are just as happy as they were when they were younger.

Myth: Most older people cannot work as efficiently as younger people.

Truth: Studies show that older workers are more consistent in their work, have fewer accidents, less absenteeism, and less job turnover than younger workers do.

Myth: Most older adults are unhealthy and need help with activities of daily life.

Truth: Eighty percent of older adults are healthy enough to maintain a normal lifestyle.

Myth: Older people are set in their ways.

Truth: People do tend to become more stable as they grow older; however, they remain able to adapt to changes. An older person may have to adjust to more major lifestyle changes than a younger person.

Myth: Most older people are socially isolated and lonely.

Truth: About 60% of older adults claim that they do not suffer from loneliness. Most older adults maintain many significant relationships in their lives. Still, researchers list loneliness as the major mental health problem among the elderly.

Activity #2 - Case Scenarios

Scenario #1

Jane is the home care aide assigned to care for Todd, an 18-year-old who recently was in a car accident and now is quadriplegic. Todd is mostly angry but has other times when he is quiet and withdrawn. Todd says to the home care aide, "I feel like maybe my life is already over. Maybe it should be."

What developmental tasks should the home care aide be aware of in caring for Todd?

How can the home care aide ensure that the care delivered is age-appropriate?

Scenario #2

Samantha is a newborn and Tara is the home care aide assigned to care for her. Her mother is 17 years old and has another child who is 1½ years old. Child Protective Services (CPS) has a current case open with this family and they are making frequent home visits as reports of suspected neglect have been made. Samantha's mother seems stressed and Tara finds that Samantha is always dirty when she arrives, her diaper is always full of urine and stool, and the rash on her bottom is getting worse. Today, Tara finds that Samantha is lying on the floor on a blanket crying. The family dog is in the house and Tara knows from experience that he can be aggressive. The dog is barking and growling. The mother is in the back room yelling at the other child. The home care aide is fearful for her patient and the other child and feels overwhelmed by the entire situation.

What should the home care aide do?

Scenario #3

Kevin is a home care aide caring for Mr. Blankenship. Mr. Blankenship is 72 years old. Over the past two years, Mr. Blankenship has lost his spouse and two of his closest friends. He expresses fears that his death is close.

What developmental tasks should the home care aide be aware of for Mr. Blankenship?

How can the home care aide ensure that the care delivered is age-appropriate?

Activity #2 – Case Scenarios: Faculty Guide

Read each scenario aloud. Divide the class into 3 groups. Allow each group 15 minutes to first work through the scenario and follow by presenting the scenarios aloud. Prompt discussion about the answers.

Scenario #1

Jane is the home care aide assigned to care for Todd, an 18-year-old who recently was in a car accident and now is quadriplegic. Todd is mostly angry but has other times when he is quiet and

withdrawn. Todd says to the home care aide, "I feel like maybe my life is already over. Maybe it should be."

What developmental tasks should the home care aide be aware of in caring for Todd?

Refer to Script:

- Young adulthood is from the ages of 18 40.
- While physical growth slows down, psychological, and social growth continues.
- Developmental tasks include:
 - o Deciding on educational goals and an occupation
 - Changing jobs and learning about oneself
 - Dating seriously and marrying
 - Learning to live with roommates or a spouse
 - Having children and raising the children
 - o Developing and maintaining a fulfilling intimate relationship

How can the home care aide ensure that the care delivered is age-appropriate?

Understand that needs change as one ages. At a time when an individual should begin preparation to become an independent adult, this person is having to cope with this accident, loss of independence and having to adapt to becoming dependent for some areas of care. Allow time for silence, time to voice frustration and ensure that the home care aide is in contact with his or her supervisor if the patient begins to have suicidal thoughts or talks of ending his own life. In this case, Todd has made a statement that sounds as if he is thinking about suicide. It is important not to dismiss these comments but to ask him if he is thinking about hurting himself and then notify your supervisor.

Scenario #2

Samantha is a newborn. Tara is the home care aide assigned to care for her. Her mother is 17 years old and has another child who is 1½ years old. Child Protective Services (CPS) has a current case open with this family and they are making frequent home visits as reports of suspected neglect have been made. Samantha's mother seems overly stressed and Tara finds that Samantha is always dirty when she arrives, her diaper is always full of urine and stool and the rash on her bottom is getting worse and worse. Today, Tara finds that Samantha is lying on the floor on a blanket crying. The family dog is in the house and Tara knows from experience that he can be aggressive. The dog is barking and growling. The mother is in the back room yelling at the other child. The home care aide is fearful for her patient and the other child and feels overwhelmed by the entire situation.

What should the home care aide do?

Consider the following: Is the baby in imminent danger? Is the home care aide in imminent danger? Has there been a pattern emerging? The baby is constantly dirty. Is the baby being fed? The home care aide should immediately pick the baby up from the floor, ensure the baby is safe and secure then phone the office and speak to a supervisor.

Scenario #3

Kevin is a home care aide and is caring for Mr. Blankenship. Mr. Blankenship is 72 years old. Over the past two years, Mr. Blankenship has lost his spouse and two of his closest friends. He expresses fears that his death is close.

What developmental tasks should the home care aide be aware of for Mr. Blankenship?

- Late adulthood is 65 years and older, people in this stage are also referred to as elderly.
- Developmental tasks include:
 - o Losing strength and adjusting to physical and health issues
 - o Retiring and learning to live on a reduced income
 - Adjusting to the death of loved ones
 - o Possibly moving to an elderly community or facility and making new friends
 - Thinking about one's own life and death

How can the home care aide ensure that the care delivered is age-appropriate?

Understand the developmental tasks as one enters late adulthood. Mr. Blankenship has suffered great loss. The home care aide should be sensitive to the fact that he fears his own death due to his recent losses. He is trying to adjust to many losses. Be aware of the need for additional services. Is the patient talking about spiritual needs? Could he benefit from pastoral services or referrals? Your supervisor could help to arrange this. Could he benefit from a support group or some way to become active again? Discuss the needs of the patient with your supervisor and be sensitive to his experience. Understand this loss is real to him as are his fears.

Activity #3 - Age-appropriate Quiz

INFANT (BIRTH TO 1 YEAR)

DEVELOPMENT

During the first year of life, behavior goes from reflexive to purposeful. By the end of the first year a
child starts to become independent from the mother figure; but always remember that the infant's
world is his parents. He enjoys being the center of attention.

An infant's world revolves around
 He enjoys being This age group's developmental task is to develop a sense of trust with this primary caregiver. The primary caregiver is a sense of trust with this primary caregiver.
major developmental task for an infant is
3
SAFETY
During the first year of life, safety issues relate to the activities that the infant is learning and respiratory issues. An infant should be protected from rolling off a bed or table. They can move quickly and should not be left outside a crib unattended at any time. Remember at this age nothir is real unless it can go into the infant's mouth. Nothing that can fit through a toilet tissue roll shou be within the infant's reach. It could be swallowed and lead to respiratory difficulty. As the infant becomes more mobile, care should to be taken to provide a safe environment, for example, watching corners that a child can hit his head on.
List 3 interventions to protect an infant:
4
5 6
COPING
Coping will revolve around an infant's primary caregiver. When stressed, this age infant may go backward in his development. For example, an infant who has been weaned, may refuse to drink from a cup.
7. Coping for the infant revolves around
TEACHING/COOPERATION
Teaching needs to be for parents of the infant. Remember that the infant's world revolves around his parents. Keeping a parent around and involved in care, as appropriate, may be the best way taccomplish tasks.
8. Infant teaching should be done

TODDLER/PRESCHOOLER (1 TO 4 YEARS OLD)

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During this time, the child is learning to assert himself. The normal response to anything is "NO." The major developmental crises are potty training and responding to the restraints placed on them by the parent. A child this age will play side by side with someone, but not necessarily play together. The major developmental crises are:
9
Physically, this child becomes increasingly active. He learns to run and play. By this age, the child begins to dream and may have nightmares. He may not remember what has scared him. By 42 months (3.5) years he can balance, recognize colors, follow simple instructions, and fasten buttons. By this age, the child begins to dream and may have:
10
SAFETY
The toddler needs to be watched closely. As they continue to develop, they become very mobile. They continue to explore their world by putting things into their mouth. Small objects need to be kept away from the toddler. In addition, a safe environment is needed because the toddler will fall. As the toddler becomes more mobile, the toddler should be protected from getting lost.
List 3 safety issues for the toddler:
11
12. 13.
COPING
The toddler will cope with stressful situations by crying, having temper tantrums, holding their breath, and regression. They can be diverted by play, activity, and affection. Play may involve a fantasy that helps him to 'escape' from or deal with unpleasant situations. Trust is especially important, and everything should be done to protect this trust.
List 3 ways toddlers cope with stressful situations:
14
15
16
17 is especially important and all should be done to protect it.

TEACHING/COOPERATION

Play and simple instructions can be used to teach and gain the trust of these children. It is important to repeat things often. Most important is to NEVER lie to a toddler. If it is going to hurt,

	emain a safe haven; it is best to use the treatment room for ddler reaches preschool years, fantasy can be a useful tool to
18	and
	can be used to teach and gain the trust of the toddler.
20. It is important to	
21. Most important is to	
	for anything uncomfortable for the child.
KINDERGARTEN/SCHOOL-AGE	: (4-12 YEARS OLD)
DEVELOPMENT	
strengthening of muscles. By the run and play games simultaneous	elopment is concentrated in the central nervous system and the age of 6, with the strengthening of these two systems, a child carely, ride a bicycle, draw a person with a body, arms, and legs, and losely resemble those of an adult by the age of 10 to 12.
explanations because they are de	sense of right and wrong. They need a lot of encouragement and veloping a sense of adequacy in their abilities. This development aild begins to feel inadequate. How the child progresses affect his confidence as an adult.
24. They need lots of	ping a nt in this area can lead to as an
SAFETY	
closely. They continue to be regul	ing to develop problem solving skills, they need to be watched arly active and can get into trouble with their independence. In orld can help them cope with unpleasant situations, it may impair
26. Safety problems with this a	age group come from experimenting with
COPING	
answered and encouragement. The nail biting, dependence, humor, and	problem solving skills. Consequently, they need lots of questions ney have a variety of coping skills, including denial, regression, and fantasy. Kindergarteners and preschoolers are involved in a coping skill as well as somatization such as saying they have a
27. These children need lots o	ıf

List 4 coping skills for this age group:
29
TEACHING/COOPERATION
To instruct these children, use play, simple instructions, repetition, books, and examples. It remains extremely important to be truthful. A lie may make it difficult for all health care providers. These children are black and white thinkers. Therefore, it is important to choose words carefully. For example, "I am going to <i>take</i> your temperature" may scare them because they think you are taking something from them. Showing them equipment and allowing them to play with it can be helpful.
To teach these children, use:
33
ADOLESCENT (13-15 YEARS OLD)
DEVELOPMENT
Rapid growth spurts occur with the onset of puberty. These rapid growth spurts can lead to an awkward stage. In addition, this time is full of great emotional swings. Cognitive skills approach those of an adult. At this age, a person is developing a sense of individuality but as he works to define his role, he is influenced by others. Peer pressure is intense.
37 is intense during adolescence.
SAFETY
Peer pressure can turn a good angel into a troubled teen, leading to experimentation in a variety of things like drugs, alcohol, and sexual behaviors. Consequently, these teens need information on smoking, drugs, alcohol, birth control, and sexually transmitted diseases. With the teen's emotional swings, suicide becomes a big threat. Eating disorders can be common, especially among girls. Getting the teen help with dealing with these issues can be essential in providing care.
Teens need information on:
38

43 is a big threat at this age.	
COPING	
Coping skills can include drugs and experimenting with various sexual behaviors. In addition, the age group will use defenses, humor, and socialization to cope with problems.	ıis
List 3 coping skills for this age group:	
44 45 46	
TEACHING/COOPERATION	
Good teaching tools are explanations, books, examples, and peers. It is important to discuss sensitive issues in private. For example, a teen may not be honest about sexual activity or drug use depending on who is present. Privacy is of the utmost importance and all should be done to protect it. This age group is beginning to be able to see the ambiguity in a situation. They need information and support as they make decisions. They still may not be able to perceive things beyond the present.	
47. A teen may not be honest about sexual activity and/or drug use if are present.	-
49 is of the utmost importance.	
LATE ADOLESCENT (16-18 YEARS OLD)	
DEVELOPMENT	
During this time, the teen reaches sexual maturity and the physical development of an adult. He extremely aware of physical appearance and is genuinely concerned with body image. Privacy remains important.	e is
50. A teen is genuinely concerned with his	
SAFETY (See Adolescent)	
As the late adolescent begins to drive, they gain even more freedom, which may intensify the problems from early adolescence. In addition, they need education on safety in motor vehicles.	
COPING (See Adolescent)	
TEACHING/COOPERATION	
This age group begins to be able to use abstract thinking but remains oriented to the present. T continue to experience intense peer pressure, as they struggle to increase their independence.	-

They begin to experiment with career choices and adult behavior. It is important to interact with a

teenager as the adult he or she is becoming.

51. It is important to	·
EARLY ADULTHOOD (19-29 YEARS OLD)	
DEVELOPMENT	
As a person becomes an adult, he begins to accept image. His is developing a personal identity and ach this time, a person establishes a career, home, intim family of origin. Developmental crises are related to	ieving independence from his parents. During ate relationships, and a family, outside his
52. During early adulthood, a person is developing	ng a
53. And	·
SAFETY	
Major health problems remain related to accidents. In depression related to pressures of independence, copeers. Safety is typically related to education on lifest and substance abuse.	empetition in the workplace, and acceptance by
List 3 things safety is typically related to:	
54	
55	
56	
COPING	
Adults may use a variety of coping skills, including demeditation, TV, and social contacts.	enial, humor, anger, drugs, alcohol, music,
List 4 coping strategies used by adults:	
57	
58	
59	
60.	
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TEACHING/COOPERATION

Adults learn and cooperate when they see that information is available to them. They are self-directed and not motivated by threats. Adults may have major time constraints and will consider everything within the framework of what is practical for them. They learn in a friendly, informal environment. Repetition is useful and so are a variety of methods. Explaining the reasons behind

various actions will also help them to cooperate, although some people want only limited details. It is essential to evaluate the learning needs of each adult learner.

List 4 techniques useful in teaching and gaining cooperation from adults:
61
62
63
64
YOUNG ADULTHOOD (30-44 YEARS OLD)
DEVELOPMENT
This age group continues to develop their own homes and careers.
SAFETY
Health concerns begin to reflect unhealthy lifestyles. Health care needs are related to the prevention of chronic diseases and health promotion. Causes of death vary related to sex and race. Safety continues to be related to education on lifestyle, family planning, and substance abuse.
65. Health concerns begin to reflect
COPING and TEACHING/COOPERATION
(see Early Adulthood)
MIDDLE ADULTHOOD (45-59 YEARS OLD)
DEVELOPMENT
This age group continues to balance the various roles of home and work. The nuclear family is a large part of this person's satisfaction and stress. As children grow and parents age, the middle adult can become caught in the middle. During this time, a person begins to prepare for retirement and must deal with the physical changes that occur as part of the aging process.
66. During middle adulthood, a person begins to prepare for
SAFETY
This person can use support to maintain a healthful way of living and the issues listed under the young adult. In addition, cardiovascular disease is the major threat to this age group. Heart attacks and strokes are the major cause of death among this age group for both sexes. Additional health care needs may be related to sexual dysfunction and, for women, adjustments to menopause.
67is a major threat to this age group.

COPING and TEACHING/COOPERATION

(See Early Adulthood)

LATE ADULTHOOD (60 YEARS AND BEYOND)

DEVELOPMENT

During this time, a person begins to experience significant effects of the normal aging process. These changes are related to loss of some body cells and a reduction of metabolism. These changes make this person more susceptible to fatigue and disease. Some of these changes are:

- A gradual loss of subcutaneous fat and elastin
- A 1% decrease in brain cells per year after the age of 50
- A 30% decrease in the heart's efficiency between the ages of 30 and 75
- A 40% decrease in the lung's efficiency between the ages of 30 and 75
- A 50% decrease in the renal function between the ages of 40 and 90
- A 50% decrease in bladder size
- A 10% decrease in liver efficiency with age

List 3 changes related to the normal aging process:

68.	
69.	
70.	

SAFETY

The normal aging process does place this population at a higher risk for illness and injury, for example:

- Increased risk of stroke related to decreased cerebral flow
- Increased risk of injury with falls, related to changes in the spinal column, brittle bones, and osteoporosis (in women)
- Increased risk of CHF, HTN, and arterial occlusion related to diminished cardiac rate and stroke volume
- Increased risk of respiratory diseases related to the weakening of chest muscles which affects the ability to clear secretions
- Urinary retention in men related to prostatic hypertrophy

Increased risk of infection related to the weakening of the immune system

TEACHING/COOPERATION

Although there are significant changes related to the aging process, less than 20% of this age group has measurable memory impairment. Many will still enjoy jobs and volunteer work, and will do so with better consistency, fewer accidents, and less absenteeism than their younger counterparts.

Adapted from Home Care Providers/Alamance Regional Medical Center Age-appropriate Care Quiz 2010