Facilitator’s Manual

Flourishing in Later Life: A Positive Psychology Training for Careworkers

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University of Lethbridge

Master of Education Project
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Preamble

Statistics Canada (Turcotte & Schellenberg, 2007) reported that by the year 2036, more than 30% of Canada’s population will be over the age of 65. As Canada’s population ages, there is likely to be an increase in people living in long-term care. Some view living in care and aging itself as an unwanted but perhaps necessary outcome that must be endured. Whether living in long-term care or not, it is the opinion of the author that older adults are capable of flourishing. The definition of flourishing for the purposes of this project has been adapted from Seligman (2011). To flourish in later life is to have **positive emotions**, **engagement**, **positive relationships**, **meaning and purpose**, and **accomplishment** (PERMA). The Flourishing in Later Life workshop contained in this manual aims at training long-term careworkers in positive psychology-based interventions with the purpose of helping residents flourish in care.
All material found in the manual are subject to copyright and may not be used outright without the permission of the author. Please email: zachary.rhodenizer@uleth.ca The reader may use ideas from this manual providing they are referenced as:

In-text: (Rhodenizer, Z., 2013)

Limitations

This program is limited in that the approach has not been empirically evaluated. Although the interventions presented in this program have been shown to increase subjective well-being, there is no guarantee that by training careworkers in the area of positive psychology, an improvement in quality of life will occur for residents specifically. This program does not encompass every theory, principle, or intervention from the positive psychology movement.
Introduction

This manual contains training material that introduces positive psychology theory and interventions to those who give care to older adults. Although careworkers labour diligently at attending to the medical and physical needs of residents, often it becomes difficult to motivate residents to pursue goals that would meet higher psychological needs. The basic care of older adults is of utmost importance; however, this training focuses on helping residents flourish while in care as opposed to merely surviving comfortably.

Positive psychology is the science of optimal human experience (Seligman & Csikszentmihalyi, 2000). Essentially, it involves a concerted effort at empirically validating and accurately describing the best experiences life has to offer. Since roughly the turn of the millennium, positive psychology has succeeded in using sound scientific research to describe such subjective and abstract concepts as gratitude, love, and happiness. Not only has this movement better described optimal living, it has provided evidence as to how to best achieve it.

The positive psychology movement has identified certain activities and interventions that correlate strongly with increases in well-being over time. Many of these activities are presented in the workshop contained in this manual. The Flourishing in Later Life workshop consists of four themes: self-awareness and aging, gratitude and forgiveness, engagement, and meaning.
Rationale for the Workshop

Older adults in care are likely to deal with losses both physical and emotional. Many careworkers will attest, however, that a large portion of residents will pass their time in care relatively without incident. Nevertheless, we must not confuse the absence of illness with well-being. Neutral is certainly preferred over “bad,” but what about “excellent,” “amazing,” or “meaningful”?

Working towards various tasks provides meaning and purpose throughout our lives (Super, 1990). In the later stages of life, people tend to be very apt at understanding what is meaningful to them and what is not (Erikson, Erikson, & Kivnick, 1989). If an older adult is to engage in an activity, it will likely need to be meaningful (Baltes & Baltes, 1990). Long-term careworkers will plan events, activities, and encourage goal setting in order to provide purpose to a resident’s life and to make them happier. Often these plans miss the mark and participation wanes.

The research put forth by the positive psychology movement provides insight as to which activities are more likely to be meaningful to older adults. Often, the motivation for setting certain goals at any age involves the possibility of a payoff such as food, money, or sex. These pursuits provide hedonic pleasure and are very effective motivators if instant results are desired. The drawback is that the positive effects of hedonic pleasure are very temporary and short-lived (Lyubomirsky, 2011). These activities can be very pleasing in the short-term but do not provide a deep, intrinsic sense of satisfaction. Eudaimonia is the opposite of hedonism. Eudaimonic well-being refers to the intrinsic sense of fulfillment and meaning (Waterman, Schwartz, & Conti, 2008). This type of well-being lasts much longer and can benefit older people in many aspects of their lives (Webster, 2008).

Although the research provides strong evidence that these interventions can increase an individual’s well-being, there is not a study yet that evaluates a program for older adults in care like the one proposed in this manual. The Flourishing in Later Life Workshop is the first to attempt to bring positive psychology to the long-term care of older adults.

As this program is delivered and implemented, staff and volunteers are expected to feel more confident in their approach to helping residents pick and pursue meaningful goals. It is anticipated that staff will have a greater ability to assist in the planning and executing of resident-centred goals. Expected outcomes among the residents include an increase in participation in meaningful activities while in care, setting of more meaningful goals, and a greater sense of satisfaction and subjective well-being.

Depending on the interventions carried out, there are various potential outcomes that could be experienced by resident participants. Residents may be more motivated to participate in health promoting behaviours (Ebner & Freund, 2007; Holahan, Holahan, & Suzuki, 2008). Physical and mental health could be increased (Worthington, Sandage, & Berry, 2000). Residents may be able to better manage their stress (Lawler et al., 2003).
Residents may also experience increased resilience, subjective well-being, and improved sleep patterns (Emmons & McCullough, 2003; Martin-Joy & Vaillant, 2010). In essence, by participating in the positive interventions outlined in this manual, a resident could age more successfully by building resilience (Baltes & Baltes, 1990) and flourishing in old age (Hill, 2011; Seligman, 2006).
Theme #1: Self-Awareness and Aging

Session length: 50 minutes
Theme #1: Self-Awareness and Aging

Synopsis

The first session has the participants reflect on their own preconceived ideas about aging and the aged. There will be an open discussion on how society views older adults and what the concerns are when working with this population. Positive psychology and Seligman’s (2011) model of flourishing will be introduced. There will be discussion on the strengths of older adults and then the facilitator will close with examples of meaningful goals and activities that have come out of the Second Wind Dreams Program.

Session objectives

1) Participants will give their informed consent (Appendices B and C).
2) Participants will evaluate their views on aging and the aged.
3) Positive psychology theory will be presented.
4) Participants will assess the current state of activity planning in their setting.

Materials checklist

- white board, projector, computer, pens
- blank name tags
- informed consent (Appendices B and C)
- PERMA handout (Appendix D)

Advance preparations

- Have a consent form and pen on the table in front of each chair.
- Have TedX Video cued and loaded on the screen.
- Have tables set up so that all participants can see the speaker and the screen.
- Have participants make name tags.
# Theme #1: Self-Awareness and Aging

## Session Plan

<table>
<thead>
<tr>
<th>Activity</th>
<th>Time</th>
<th>Objective</th>
<th>Supplies</th>
<th>Instructions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Review informed consent</td>
<td>5 minutes</td>
<td>1</td>
<td>- Informed consent (Appendices B and C), pens, name tags</td>
<td>Read informed consent with participants and have them sign.</td>
</tr>
<tr>
<td>Introduction</td>
<td>5 minutes</td>
<td></td>
<td></td>
<td>Introduce yourself and acknowledge the hard work and abilities of the participants</td>
</tr>
<tr>
<td>Discussion</td>
<td>10 minutes</td>
<td>2</td>
<td></td>
<td>Ask questions (found below in facilitator suggestions) to have participants reflect on their perspectives of aging.</td>
</tr>
<tr>
<td>Video</td>
<td>5 minutes</td>
<td>2</td>
<td>- TedX Jane Fonda Talk</td>
<td>Show video</td>
</tr>
<tr>
<td>Successful aging lecture</td>
<td>5 minutes</td>
<td>2</td>
<td></td>
<td>See facilitator suggestions</td>
</tr>
<tr>
<td>Positive Psychology lecture</td>
<td>10 minutes</td>
<td>3</td>
<td>- PERMA handout (Appendix D)</td>
<td>See facilitator suggestions</td>
</tr>
<tr>
<td>Program outline</td>
<td>5 minutes</td>
<td></td>
<td></td>
<td>See facilitator suggestions</td>
</tr>
<tr>
<td>Conclusion</td>
<td>5 minutes</td>
<td>4</td>
<td></td>
<td>See facilitator suggestions</td>
</tr>
</tbody>
</table>
Facilitator suggestions

1) Introduction:

As a facilitator, it is important to gain the trust and attention of the participants. Introduce yourself briefly, mentioning any relevant experience, education, or personal interests that relate to the topic of caring for older persons. Acknowledge the participants’ experience and expertise. This workshop is not aimed at changing the way they practice but merely to introduce a new perspective on activity planning in long-term care facilities.

2) Open discussion of perceptions of aging and older persons:

Engage the participants in evaluating and discussing their perceptions of the aging process and older people. Use questions such as:

✓ What are your greatest worries about growing old?
✓ Is there a specific age that you dread reaching? Why?
✓ How do most people view older people?
✓ What are the limitations of being old?
✓ What strengths do older people have?
✓ How might your perspectives as careworkers differ from most? How is it the same?

Explain how perceptions of aging can become a self-fulfilling prophecy. If we dread turning 80 our whole lives then our 80th birthday is likely going to be a difficult day. How might our biases toward aging and older people affect the service we give? How does it affect the way we plan activities? How are the planned activities received in general?

*Show: Jane Fonda – Life’s Third Act

Debrief the video: What are reactions to the staircase metaphor? Does this conflict with how we, or society, tend to think?
3) Developmental theory/Successful aging:

**Theme #1: Self-Awareness and Aging**

What does it mean to age successfully? Research describes successful aging as compensating for losses and selectively optimizing resources (Baltes & Baltes, 1990). Our first reaction to this model might be to think of the physical resources that we use in care facilities to help keep residents as healthy, safe, and comfortable as possible (i.e., wheelchairs, etc.). This is important work. (Stress that they are doing well in this regard). But outside of keeping them warm and fed, what are the higher, emotional, psychological, and developmental needs of residents?

Erikson’s (1964) model of developmental stages tells us that in our later years, we attempt to make sense out of our lives and reach ego-integrity. Aging will inevitably bring losses in various aspects of one’s life but not to the human spirit. Older people gain a wisdom that helps them understand what is most important and meaningful in their lives.

4) Flourishing/Positive Psychology/ Self-determination Theory:

Positive psychology is the study of optimal experience. Human beings of all ages and kinds want to do well and flourish. We want to be content with our past, experience flow and happiness in the present, and have hope and optimism for the future. Flourishing means having positive experiences, engagement in activities, positive relationships, meaning and purpose, and accomplishments (PERMA).

Society paints a picture of how happiness is achieved, and they have it all wrong. Fancy cars, diamond rings, and expensive trips are examples of hedonic pleasure. The research shows that hedonic pleasure will increase our happiness for a very limited amount of time, and we will return to our default setting. Because of our insatiable need for bigger, better, and more, pursuing hedonic pleasures is not only ineffective but can be lead to addiction and other personal problems. Eudaimonic pleasure comes from activities that help us feel connected to something bigger than ourselves. It comes when we apply our signature strengths to a meaningful cause. This is the key to flourishing in old age. Self-determination theory tells us that free of coercion, people tend to be innately motivated to do well and flourish. There are three factors that motivate us to flourish and if those areas are lacking we tend to experience apathy and depression or anxiety. Those factors are: 1) competence; 2) autonomy; and 3) connection. All of these factors can and should be pursued in old age.
5) Outline of the following sessions:

| Theme #1: Self-Awareness and Aging |

Flourishing involves having positive emotions, engagement in our activities, positive relationships, meaning and purpose, and achievement. Each of the following sessions will explain activities that can be planned to target these five areas. There will activity ideas that should intrinsically motivate residents to participate. These activities tend to be very meaningful and emotionally beneficial, and they are also relatively inexpensive to implement.

**Conclusion**

Given the theory on positive psychology and how it relates to activity planning in a long-term care facility, what are you currently doing that promotes flourishing? What could be done better?

Why is this important? Some of the interventions we will learn in the coming sessions have benefited older adults by

- increasing subjective well-being,
- increasing motivation to participate in health promoting behaviours,
- promoting better management of stress, and
- increasing resilience.

Points to remember from this session:

1) Our perspectives on aging effect the service we give and the activities we plan. It will also affect how we cope with our own aging.
2) Despite losses associated with aging, the human spirit continues to develop and grow.
3) Positive psychology is the study of optimal human experience. Not just living comfortably but flourishing.
Theme #2: Gratitude and Forgiveness
Session length: 50 minutes

Synopsis

The second session focuses on the using elements of one’s life story to increase positive emotion and meaning, while also potentially improving relationships. This session introduces Erikson et al.’s (1989) developmental theory and the concept of life review as a developmentally appropriate and necessary task. There will be a discussion of potential barriers or difficulties that might cause one to avoid life review or dislike it. Interventions on gratitude and forgiveness will be introduced and modelled. These interventions are to help people have more positive and meaningful recollections of their life story.

Session objectives

1) Participants will connect the concepts of life review with gratitude and forgiveness.
2) Participants will know how to facilitate a gratitude visit.

Material checklist

- paper and writing utensils for all participants
- computer, projector, screen
- gratitude and forgiveness handouts (Appendix E)

Advance preparations

Prepare someone to share a gratitude letter (preferably with the recipient there as well).
Theme #2: Gratitude and Forgiven

Facilitator suggestions

1) Review:

Positive interventions are about helping people to flourish. Our definition of flourishing in old age is having positive experiences, engagement in activities, positive relationships, meaning and purpose, and accomplishments (PERMA). When people are doing well they have a sense of contentment in the past, happiness and flow in the present, and hope and optimism in the future. Today we focus on a way to take meaningful experiences from a resident’s past and use it to promote flourishing.

2) Erikson’s theory of life review:
To understand life, people tell stories. Erik Erikson’s theory suggests that each stage of life has a developmental task. In the last developmental stage of life older adults seek ego-integrity or a sense that their life had meaning. They achieve this ego-integrity by engaging in a life review that helps them integrate their past, present, and future into a meaningful whole.

Everybody has a story to tell and some say our stories are our most valuable assets. Our meaningful past experiences provide context for our lives. This could explain why Life-Review Therapy is one of the most effective therapies for older adults. Life-review therapy is not just reminiscence.

How difficult is it to get a resident to tell his/her story? If they are telling their stories, who is listening?

For the most part, they tend to do well in finding meaning out of their past experiences and in framing past events positively. Some may not be willing or able to engage in a life-review. What could be a barrier to engaging in life review? (regrets, negative experiences, etc.)

3) Gratitude and forgiveness:

Practicing gratitude can help people find the positive in past events, even if they involved a loss (Hill, 2011). Gratitude is the feeling and expression of appreciation of positive events while forgiveness is a positive psychological response to interpersonal harm (Bono & McCullough, 2006). By eliciting the events and people for which residents are grateful, the life-review process is initiated.

Gratitude in itself can benefit anyone who practices it. Gratitude can lessen death anxiety, promote healthier behaviours, and even improve sleep. In term of the PERMA model of flourishing, studies show that gratitude increases positive emotions over long periods of time and promotes prosocial behaviour.

Forgiveness can lead to positive behaviours and thought patterns such as optimism, self-efficacy, higher perceived social and emotional supports and, for some, a greater communion with God. All have been shown to correlate with better health (McCullough, Pargament, & Thoresen, 2000).

Forgiveness has been shown to be associated with a greater sense of purpose and self-acceptance (Aschleman, 1996).

4) Interventions based on these concepts can help older persons find more meaning and contentment in their past experiences as they conduct a life review.
Theme #2: Gratitude and Forgiveness

Gratitude journals – Write down three things for which you are grateful each night. The key is to revisualize and re-experience these events.

Gratitude letters – Reflect on someone in your life who really helped you out. Maybe they are not aware of the impact their actions have had on you. Write a letter expressing your gratitude to them in detail. If possible, arrange for that person to attend a meeting in which gratitude letters are read aloud to the whole group. For the purposes of the training, only one guest should be invited but further gratitude visits could be planned in the future.

Forgiveness letters – Forgiveness is for you not the other person. It is about letting go of the pain caused by resentment. Write a letter to someone who has wronged you and let go of the pain. Accept that what is done is done. This does not mean you have to be happy with what happened or resolve any accountability. Maybe you can put yourself in that person’s shoes to understand why he or she did it.

If previously arranged, have a participant model a gratitude visit by reading out a letter of gratitude. Debrief with participants by asking what it was like to both read and hear the letter. What emotions could you hear expressed in the letter? What values (i.e., courage, faith, vulnerability, etc.) did the reader express in the letter?

Conclusion

Gratitude and forgiveness interventions are inexpensive, easy to plan, and can be meaningfully beneficial experiences for residents in long-term care. There are therapists trained in life-review therapy as well as personal historians that can help facilitate the telling of one’s story, which the final developmental task of one’s life.

Advance Preparation for next session

Arrange for someone to take the Signature Strength Inventory before next session.
Theme #3: Signature Strengths

Session length: 50 minutes
Theme #3: Signature Strengths

Synopsis

The focus of the third session is on experiencing engagement or flow in the present. Self-determination theory, and how it relates to older adults, will be introduced. Signature strengths will be discussed and assessed. The benefits of altruism will also be discussed. Participants will brainstorm ideas on how these theories can be implemented in their setting.

Session objectives

1) Participants will be introduced to the concept of flow.
2) Participants will understand the difference between hedonic and eudaimonic well-being.
3) Participants will assess their signature strengths.
4) Participants will consider how to apply their signature strengths in their daily activities.
5) Participants will brainstorm activities based on altruism and flow.

Material checklist

✓ computer, projector, screen
✓ VIA Signature Strengths Inventory (http://tinyurl.com/lrp5gy5)
✓ Brief Signature Strengths Assessment (Appendix F)

Advance preparation

Have signature strength inventory and positive psychology website prepared, perhaps with a participant who has previously signed on and taken the strengths inventory.
### Theme #3: Signature Strengths

#### Session Plans

<table>
<thead>
<tr>
<th>Activity</th>
<th>Time</th>
<th>Objective</th>
<th>Supplies</th>
<th>Instructions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Review/Discussion of engagement</td>
<td>10 minutes</td>
<td>1, 2</td>
<td>•</td>
<td>See facilitator suggestions.</td>
</tr>
<tr>
<td>Discussion of motivation (Self-Determination Theory)</td>
<td>10 minutes</td>
<td>1</td>
<td>• Motivation Handout (Appendix G)</td>
<td>See facilitator suggestions.</td>
</tr>
<tr>
<td>Signature Strengths Assessment</td>
<td>15 minutes</td>
<td>3</td>
<td>• VIA Strength Assessment (Appendix F)</td>
<td>See facilitator suggestions.</td>
</tr>
<tr>
<td>Application of Signature Strengths</td>
<td>10 minutes</td>
<td>4</td>
<td>• Paper, pens, whiteboard, markers, erasers</td>
<td>Have participants brainstorm in groups and then share ideas. Record ideas on whiteboard.</td>
</tr>
<tr>
<td>Conclusion</td>
<td>5 minutes</td>
<td>•</td>
<td></td>
<td>See facilitator suggestions.</td>
</tr>
</tbody>
</table>
Facilitator suggestions

1) Review/discussion on engagement:

Gratitude, forgiveness, and life-review are effective ways to make sense out of one’s life story and to find contentment in the past, even when one has experienced trauma and tragedy. Human adaptation allows us to bounce back from the worst of tragedies, but it also tends to make positive events feel regular or neutral in time (i.e., the excitement of a new iPhone only lasts so long). As discussed last session, gratitude interventions can increase our subjective well-being over longer periods of time. This is because gratitude elicits a more internal, eudaimonic well-being.

Another practice that can help elicit and sustain well-being is flow. Flow is a concept that describes the feeling of intense engagement in a task. People have described flow as having time “fly-by.” Flow happens when an activity is meaningful and when one’s skill is matched with the difficulty of the task. If the task is too difficult, the individual is likely to experience anxiety and give up. In contrast, if the task is too easy then the individual is likely to feel apathy and lose interest. Older adults can and still experience flow on a regular basis. Playing games, knitting, gardening, and art are just some of the examples of activities that often provide a sense of flow to older adults.

2) Motivation:

So, how do you motivate someone to have more flow in their life? Left to our own devices, free of the influences of society, illness, or age, human beings have a natural propensity to do well. This is because of the innate desire to have autonomy, competence, and connection which drives peoples to flourish (Ryan & Deci, 2008).

Autonomy is feeling that you are in control of your life and that your input matters.

How can residents in long-term care retain a sense of autonomy?

As older adults engage in life review and reflect on what is most important to them, their values tend to emerge and, with a little guidance, they can set meaningful goals for themselves rather than have goals prescribed by a careworker.
Connection is feeling like you are a part of something greater than you are (i.e., family, community, club, team, country, universe, etc.).

We are hard wired for human connection. Regardless of age, humans need to feel like they are a part of a greater whole. In long-term care, some residents may not be as connected to their families as they once were. Interventions involving altruism can provide a sense of belonging, purpose, and competence as residents work alongside others to benefit the lives of another person or group.

Competence is feeling like you are good at something and that what you are doing matters, practicing your signature skills, being in the state of flow.

3) Signature Strengths:

Things we are good at and we like doing. Things that give us a sense of ownership (”This is the real me”), a feeling of excitement while displaying it, a rapid learning curve as the strength is first practiced. Signature strengths provide a sense of yearning to find new ways to use it, a feeling of inevitability in using the strengths (“try to stop me”), and invigoration rather than exhaustion while using them. They involve the creation and pursuit of personal projects that revolve around them and incite feelings of joy, zest, enthusiasm, and perhaps even ecstasy.

Martin Seligman (2002) identified some common signature skills that people tend to have. By taking the pen and paper Brief Strengths Test (Appendix F) or the online version (http://tinyurl.com/lrp5gy5), which can be dictated, residents could identify their own signature skills and think of ways that they could use those skills in their daily activities.

4) Signature Strengths Assessment:

Have participants complete the brief signature strengths assessment. Explain how activities will be more meaningful and pleasing when based on signature strengths.

5) Application of signature strengths:
Theme #3: Signature Strengths

Discuss potential activities that could be done for each signature strength:

1. Curiosity/Interest in the World
2. Love of Learning
3. Judgment/Critical Thinking/Open-Mindedness
4. Ingenuity/Originality/Practical Intelligence
5. Social Intelligence/Emotional Intelligence
6. Perspective
7. Valor and Bravery
8. Perseverance
9. Integrity
10. Kindness and Generosity
11. Loving and Allowing Oneself to be Loved
12. Citizenship
13. Fairness
14. Leadership
15. Self-Control
16. Prudence
17. Humility
18. Appreciation of Beauty and Excellence
19. Gratitude
20. Hope/Optimism
21. Spirituality/Sense of Purpose
22. Forgiveness
23. Playfulness and Humour
24. Zest/Passion

Conclusion

✓ Not all goals, activities, or pursuits are equal when it comes to increasing well-being

✓ Activities involving one’s signature strengths will have longer lasting effects

✓ Residents (like everyone) need a sense of autonomy, competence, and connection

✓ Flow happens when skill matches difficulty of a task
Theme #4: Meaning
Theme #4: Meaning

**Session length:** 50 minutes

**Synopsis**

The final session focuses on meaning and brings together the theories learned in the previous sessions. There will be a review of concepts learned and then a lecture on possible selves. The idea of leaving a legacy will also be discussed. There will be a final discussion on how these principles can be implemented and time for an evaluation.

**Session objectives**

1) Participants will be introduced to the concept of possible selves.
2) Participants will be introduced to and discuss the Legacy Exercise.
3) Participants will brainstorm ways to implement what they have learned in the workshops.
4) Participants will evaluate the Flourishing in Later Life Workshop.

**Material checklist**

- ✔ computer, projector, screen
- ✔ Legacy Exercise (Appendix H)
- ✔ workshop evaluation questionnaire (Appendix I)
- ✔ Action Plan handout (Appendix J)

**Advance preparation**

Perhaps ask careworkers in advance for an example of a resident who has learned helplessness living in long-term care.
## Theme #4: Meaning

### Session Plans

<table>
<thead>
<tr>
<th>Activity</th>
<th>Time</th>
<th>Objective</th>
<th>Supplies</th>
<th>Instructions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Review previous session</td>
<td>5 minutes</td>
<td></td>
<td></td>
<td>See facilitator suggestions.</td>
</tr>
<tr>
<td>Discussion of legacies and possible selves</td>
<td>10 minutes</td>
<td>1</td>
<td></td>
<td>See facilitator suggestions.</td>
</tr>
<tr>
<td>Legacy Exercise</td>
<td>15 minutes</td>
<td>2</td>
<td>Legacy Exercise (Appendix J)</td>
<td>See facilitator suggestions</td>
</tr>
<tr>
<td>Action Plan</td>
<td>15 minutes</td>
<td>3</td>
<td>Action Plan (Appendix K)</td>
<td></td>
</tr>
<tr>
<td>Conclusion</td>
<td>5 minutes</td>
<td></td>
<td></td>
<td>See facilitator suggestions.</td>
</tr>
<tr>
<td>Evaluations</td>
<td>5 minutes</td>
<td>4</td>
<td>Works hop questionnaires (Appendix C)</td>
<td>Collect evaluations before participants leave</td>
</tr>
</tbody>
</table>

**Theme #4: Meaning**
Facilitator suggestions

1) Review of concepts learned: ego-integrity, life review, flourishing, gratitude, forgiveness, flow, altruism, eudaimonia, etc.

2) Legacies and Possible Selves: Older people tend to think less and less about the future. This is understandable and normal. One meaningful motivator that often influences behaviours is one’s possible self, or the future-oriented self-concept. For older individuals, their possible selves might include the prospect of establishing, building, or refining one’s legacy. On the other hand, it may include a more pessimistic narrative like being stuck, helpless, or dependent. Someone’s possible self that includes being healthy and active will guide them to act differently than someone whose possible self-concept is that he or she is frail, sick, and waiting to die. To help residents have a more optimistic possible self, they can consider the legacy they could leave behind.

It is true that there may not be as much time left in this life for these individuals, but people will often dream about how they would like to be remembered. Thinking back to previous sessions, the telling of one’s life story is one of the most developmentally appropriate and beneficial behaviours in which an older person can be engaged. By telling their story, their legacy can be established and passed on. Life stories can be recorded through various media including written narratives, scrapbooks, audio or video interviews, online blogs, or a creative combination.

3) Legacy Exercise: Have participants engage in the legacy exercise. Explain that when implementing this intervention it is best to have already established a relationship of trust and comfort with the resident. It is also important to remind residents that their ideas will be respected and honoured, that they are in a safe place, and that being “realistic” is not the goal. This is an exercise in idealism, dreaming, and hope.

Introduce the intervention by saying, “Imagine that your great-great grandchildren are doing family history and are searching for interesting and meaningful information that will connect them to their past. Imagine that they are now searching for information about you. What would you hope that they find? Without any barriers, what would be the absolute best and most favourable information they could find out about your life? What do you want to be remembered for?”
What is the importance of______?

a) Save time for reflection. Ask questions like:

b) How might they react to learning this about you?

c) How would they find this information?

d) What can you be doing now to support the evidence?

e) What can you be doing to make it even better?

Very meaningful goals can be set to help residents leave their desired legacy to their peers, their family, and to the world. Some residents may have goals to tell or record their stories while others may wish to live their legacy and add to it by accomplishing new objectives. These will be highly personal and unique, but activities such as scrapbooking, blogging, doing family history, or writing an auto/biography also have the potential to be very rewarding in themselves. Other ideas might be having residents telling one another an abbreviated life story and then writing a hypothetical obituary for each other.

4) Action Plan: Remember that older adults are most benefited by meaningful, intrinsically motivating goals. They are inclined to have a deep desire to make sense of their lives and tell their life stories. Expressing gratitude and forgiveness can increase positive emotions while initiating the life-review process. Being engaged in life-review process is beneficial in itself.

Given what we have learned and discussed throughout our sessions, how can you now implement this in your work?

Have participants brainstorm ideas in their tables for 3 minutes and then have each table present one idea to the whole group.

Conclusion

✓ Even if someone is in the later stages of life, establishing a legacy can be a powerful motivator to engage in activities

✓ Regardless of the activity, it is the process of or the engagement (flow) in the activity that really benefits residents.
Are there any questions, concerns, or comments?

Distribute the workshop evaluation questionnaires (Appendix D).
References


Appendices

Appendix A: Program Evaluation

This section describes a potential model for evaluation of the Flourishing in Later Life Workshop if it were ever requested. The purpose of evaluation is to provide information for actions such as decision making, strategic planning, reporting, or program modification. A program is evaluated in order to be proved viable and to improve. The Nonprofit Development Institution (2004) stated, “Effective program evaluation is a systematic way to improve and account for public health and social service actions by involving procedures that are useful, feasible, ethical, and accurate” (p. 3). Program evaluation includes systems of feedback from all program stakeholders so that outcomes can be measured (Nonprofit Development Institution, 2004). Outcome measurement is “a systematic way to assess the extent to which a program has achieved its intended results” (Bolan, Francis, & Reisman, 2000, p. 9). Multiple data gathering methods may be used in order to reach the goals of gaining insight, changing practice, assessing effects, and affecting those who participate (Nonprofit Development Institution, 2004). As outcomes of the FLLW manual have yet to be measured and as the workshop involves various stakeholders, a mixed method program evaluation approach should be used to evaluate the outcomes of the FLLW manual. The model for program evaluation of social services published by the Nonprofit Development Institution (2004) is recommended as a framework for this evaluation.

This framework was developed as a guide to public health professionals and is applicable to this research given the nature of the setting. The framework comprises six steps: (a) engage stakeholders; (b) describe the program; (c) focus the evaluation design; (d) gather credible evidence; (e) justify conclusions; and (f) ensure use and share lessons learned. These steps, as seen in Table 1, provide a guide for planning an effective program evaluation.

Table 1

Framework for Program Evaluation

<table>
<thead>
<tr>
<th>Steps</th>
<th>Description</th>
<th>Activities</th>
<th>Participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Step 1: Engage stakeholders</td>
<td>Ensure that perspectives of those who are invested in the program are heard</td>
<td>Focus groups, ask for input in workshop, questionnaires</td>
<td>Staff, volunteers, residents</td>
</tr>
<tr>
<td>Step 2: Describe the program and evaluation.</td>
<td>Describe needs, activities, expected effects, logic model</td>
<td>Program should be described in details to management and key stakeholders</td>
<td>Management, key stakeholders</td>
</tr>
<tr>
<td>Step 3: Focus evaluation design.</td>
<td>Assess the issues of greatest concern.</td>
<td>Define users, questions, methods</td>
<td>Program Facilitator (continued)</td>
</tr>
</tbody>
</table>
Table 1

Continued

<table>
<thead>
<tr>
<th>Step 4: Gather credible evidence.</th>
<th>Collect well-rounded data.</th>
<th>Define indicators and sources. Collect qualitative and quantitative data. Plan logistics.</th>
<th>Program facilitator, workshop participants, focus group participants, key stakeholders</th>
</tr>
</thead>
<tbody>
<tr>
<td>Step 5: Justify conclusions.</td>
<td>Link conclusions with data gathered.</td>
<td>Analysis, synthesis, judgment, recommendations Follow-up, dissemination</td>
<td>Program facilitator, key stakeholder</td>
</tr>
<tr>
<td>Step 6: Ensure use and share lessons learned.</td>
<td>Informed decision making</td>
<td>Program facilitator, key stakeholders</td>
<td></td>
</tr>
</tbody>
</table>


Each evaluation method has its benefits and limitations; therefore, a mixed methods approach should be implemented. The program evaluation should implore observation methods, which will be used to evaluate changes among the staff and volunteer population over time. Methods to use include resident focus groups (Appendix E) and staff participant questionnaires (Appendix D) and then supporting that information with observations of activity participation in the given facility.

The post-workshop evaluation consists of observing residents who have participated in the intervention for six months following the workshop and conducting focus groups with these same residents. As more residents decide to participate in interventions after the FLLW, they will be interviewed for a post-workshop evaluation (Appendix I). The interview answers will provide data about the extent of change experienced as a result of the FLLW. Ideally, enough residents will go through the program to form a focus group so that individuals are more likely to self-disclose. When a comfortable group of participants have something in common, they are more likely to disclose the information desired in the evaluation (Krueger & Casey, 2000). If the focus group does not have enough resident participants, participants should be interviewed individually.

The focus group should be used to help participants feel more comfortable in disclosing their perspectives (Krueger & Casey, 2000). The facility itself could assist in recruiting participants from their pool of residents who have been affected directly from the implementation of the FLLW manual’s interventions. If there are more than 10 potential participants, randomly selecting participants for a focus group is an option so the group is not too large, or two groups could be held. Participation in the focus group will be limited by potential participants (i.e., only those residents who have participated in the interventions learned and implemented by staff after the FLLW) and by those who are willing and able to participate (e.g., over time some may not be well enough to participate due to health, mobility, or death). The focus group should be organized at a time most convenient to the participants.
If not enough participants fit the criteria for the focus group, individual interviews will be necessary. Regardless of whether interviews are conducted individually or in group it is recommended that the focus of the interview be on understanding the lived experience of each participant as well as the manner in which they make sense of that experience. The interviews should not be just information retrieval but rather should be interpretively active, meaning-making endeavours (Holstein & Gubrium, 1995).

Questions that guide the focus group discussion should be open ended and easy to understand, with the intention of eliciting responses that describe the participants’ perception of their lived experiences (Munhall, 1994). Questions at the beginning should be more general and then work towards focussing the discussion on more specific and useful information (Krueger & Casey, 2000). All participants should be involved in constructing meaning from the discussion through questions such as “What was this like for you?” (Holstein & Gubrium, 1995) and “How do you make sense of that experience” (Holstein & Gubrium, 1995; Munhall, 1994).

**Ethical Considerations**

For the implementation of this manual, the ethical considerations include an informed consent (Appendix B) that details the risks and benefits of participating in the workshop, the plan to maintain confidentiality, and the plan for a potential program evaluation. When implementing a workshop like the one presented in the FLLW manual, it is ethically imperative that the interventions within the workshop be based not only on theory but on measurable evidence. Evidence needs to support that the probable benefits of an intervention are proportionately greater than its risks (Sinclair & Pettifor, 2001). Given that this approach is new, empirical evidence is lacking. A mixed methods program evaluation, as outlined by the Nonprofit Development Institute (2004), is recommended to assess the value of this workshop. By taking these points into consideration the workshop and the follow up evaluation of its effects can be implemented in an ethical manner.

**Informed consent.** To ensure that all participants understand the risks and benefits of participating in the workshop, an informed consent (Appendix B) with details of the workshop should be presented to the staff of the LTCF in advance. If a program evaluation is to be undertaken, it is likely that residents will be asked to participate in a focus group. Residents should be given an informed consent form prior to the interview (Appendix C). According to Sinclair and Pettifor (2001), “Full and active participation as possible from others in decisions that affect them [and] respecting and integrating as much as possible their opinions and wishes” (p. 49) are all ethical obligations. If conducting a program evaluation, informed consents should be collected at the end of the first workshop or interview. After that, a participant’s attendance will be considered continual consent to participate.

**Participant evaluations.** If one intends to conduct an evaluation of the program, a mixed-methods program evaluation is recommended for this workshop. Part of this evaluation includes a questionnaire (Appendix I) that careworkers receive after participating in the fourth session so that the evaluator can measure outcomes. This will
provide breadth in representing the overall reaction to the material (Fitzpatrick, Sanders, & Worthen, 2003; Krueger & Casey, 2000). The questionnaire intends to inform the evaluation as to the extent to which staff members: (a) understand the theory, (b) believe the material to be useful, (c) plan to implement the theories, and (d) change their perceptions towards older persons and activity planning. Through the analysis of the questionnaire, inferences will be able to be made about the attitudes of the sample population (Creswell, 2009). Purposive sampling is a nonprobability sampling method in which specific individuals are chosen to participate (Plowright, 2011). In the case of this evaluation, the value will be in surveying only those individuals who participate in the workshop. For example, there are over 500 staff members currently between the St. Therese Villa and St. Michael’s centres in Lethbridge, AB. If 50 staff participate in the workshop, only those 50 will be asked to participate in the evaluation.

Economically, the use of a questionnaire has advantages, such as a rapid turnaround in data collection (Creswell, 2009). The questionnaires can be collected and interpreted by calculating the mean scores, which will provide a general representation of staff’s reactions to the workshop. The questionnaire is cross-sectional in that it will be collected at one point in time for each group that participates in the FLLW. An open-ended question for respondents to report how they foresee themselves implementing the theories into their work will also be on the questionnaire.

The questionnaire is comprised of seven questions with the responses being on a 5-point Likert scale (Appendix I). Responses range from completely disagree, somewhat disagree, not sure/no opinion, somewhat agree, to completely agree. Questions are brief and succinct (e.g., I participated in the workshop, I think participation in daily activities will increase due to this approach, etc.). The questionnaire instructs participants to circle the statement with which they most agree. Questionnaires will be preplaced at each seat and will be collected immediately after the workshop is completed.

**Risks and benefits of participating.** The workshop facilitator has an ethical obligation to ensure that participants understand the purposes, procedures, risks, and benefits of participating in the workshop and its evaluation. This information will be given and explained to participants through the informed consent form (Appendix B).

Benefits to staff participants in this workshop and evaluation include professional development regarding a new perspective on activity planning. Residents may benefit from the staff’s new approach in that they will have a chance to have meaningful discussions about their goals and perhaps think of new goals or activities they would like to set. The organization itself may benefit from this new approach to goal setting and to facilitating daily activities. Risks to the participants include the dedication of time to the workshop. Another potential risk is that participants may not fully agree with the theories presented and, consequently, feel discouraged or hopeless.

Participants should be ensured that their confidentiality will be kept. In order to provide anonymity and confidentiality, all data should be collected anonymously and stored securely. Names should not be recorded on the questionnaire (Appendix I). All questionnaires should be stored in a locked cabinet. Residents and staff should be able to
express their opinions on either the workshop or the evaluation—or both—candidly and without fear of reproach from the facilitator or the hosting organization.
You have been invited to participate in the Flourishing in Later Life Workshop. This workshop is a professional development opportunity for those who give care to older adults living in long-term care facilities. The workshop comprises four sessions that last an hour each. Below is a description of the goals of the workshop as well as the risks and benefits of participating in it. You are at liberty to discontinue your participation at any time. If you decide not to participate in this session or subsequent sessions, your information will not be stored. By attending subsequent sessions and by signing the informed consent below, you are giving consent for every session of this workshop.

What are the goals for the *Flourishing in Later Life Workshops*?

This set of workshops is to present an alternative approach to activity planning in long-term care facilities. The goals include:

- To present how Positive Psychology theory can be implemented in long-term care facilities for older adults
- To promote meaningful and beneficial activity planning and goal setting in long-term care facilities for older adults

What are the benefits and risks of participating in the workshops?

These workshops provide an alternative perspective to care giving and activity planning in long-term care facilities which should improve the lives of residents by helping them find more meaningful pursuits. By implementing the theory from these workshops residents may: report an increase in subjective well-being; increase pro-social behaviours; engage in more health promoting behaviours; and be more engaged in activities.

Although this perspective can provide new ideas it does not answer every issue faced in a long-term care facility. Possible risks of participating in these workshops include not agreeing with the material and subsequently feeling frustrated, or hopeless.
Will my personal information be kept private?
Yes. All consent forms will be stored securely in a locked cabinet. All evaluations will be anonymous and stored securely.

What are the expectations for participants?
You are invited to participate by attending the four workshops. Your attendance at all four sessions is asked, however there are no requirements or obligations to do so.

What are the expectations for the group facilitators?
The group facilitator will present the material as a suggestion based on positive psychology research. The facilitator will be open to participant suggestions and criticisms.

What are the qualifications of the group facilitator?
(Add facilitator’s qualifications here. It is recommended that the group facilitator have a background in counselling and a knowledge of both positive psychology and issues of aging).

I am aware of the contents of this form. I would like to participate in these workshops.

Participant’s signature: __________________________ Date: ___________________

Witness’ signature: _____________________________ Date: ___________________
Appendix C: Informed Consent Form for Resident Participants

Flourishing in Later Life Workshop: A Positive Psychology Training for Careworkers

| Name: _______________________________________________________________ |
| Place of Residence: ________________________________________________ |
| Date: ____________________________________ |

You have been invited to participate in the evaluation of the Flourishing in Later Life Workshop. This workshop is a professional development opportunity for those who give care to older adults living in long-term care facilities. You are invited to join a focus group to discuss the activities offered at your place of residence. Below is a description of the risks and benefits of participating in this focus group. You are at liberty to discontinue your participation at any time.

**What are the goals for the evaluation of the *Flourishing in Later Life Workshops*?**

This focus group intends to describe the experience of residents who have participated in activities and interactions planned by care staff after receiving the Flourishing in Later Life training.

**What are the benefits and risks of participating in the focus group?**

Being involved in a focus group can provide an enriching conversation where people with similar experiences can connect and enjoy each other’s company. This is also an opportunity to give feedback to improve the activity planning in your place of residence.

One of the risks of participating in a focus group is that the facilitator cannot control what others say. It is possible for participants to disagree or offend one another. The facilitator is willing to discuss any concerns about the focus group before and after the session.

**Will my personal information be kept private?**

Yes. All consent forms will be stored securely in a locked cabinet. The focus group interview will be recorded and stored securely with the facilitator. Only the facilitator and other collaborators will see the recordings. All participants are asked to maintain the confidentiality of other participants. The facilitator is not responsible for any break in confidentiality by other participants.

**What are the expectations for participants?**

You are invited to participate by attending the focus group for approximately one hour. You are asked to be open, honest, and respectful to the other participants.
What are the expectations for the group facilitators?

The group facilitator will ask the questions and guide the discussion. He will also be available for discussion prior and after the session.

What are the qualifications of the group facilitator?

(Add facilitator’s qualifications here. It is recommended that the group facilitator have a background in counselling and a knowledge of both positive psychology and issues of aging).

I am aware of the contents of this form. I would like to participate in these workshops.

Participant’s signature: __________________________ Date: __________________

Witness’ signature: __________________________ Date: __________________
Appendix D: PERMA Handout

What does it mean to flourish in old age? By encouraging the following five elements of well-being, residents of long-term care facilities can flourish.

<table>
<thead>
<tr>
<th>Positive Emotions</th>
<th>happiness and life satisfaction; subjectively reported (from resident’s perspective)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Engagement</td>
<td>being absorbed by a task; subjectively reported in retrospection (after the task)</td>
</tr>
<tr>
<td>Relationships</td>
<td>connecting with other people</td>
</tr>
<tr>
<td>Meaning</td>
<td>belonging to and serving something that you believe is bigger than the self</td>
</tr>
<tr>
<td>Achievement</td>
<td>the pursuit of accomplishments and victories</td>
</tr>
</tbody>
</table>

The following list gives a few examples of activities for helping increase or improve the elements of flourishing. The letters in bold next to the description of the activity indicate the element/s that it best targets (P = positive emotion; E = engagement; R = relationships; M = meaning; and A = achievement).

**Kindness Exercise** – Do something nice for someone else completely unexpectedly (P, R, M)

**Gratitude Exercises (Appendix G)** – Express gratitude to someone who helped you. (P, R)

**Starting a Hobby or Project** – Find a project with a difficulty level that matches your skill level. Work on it daily. (E, A)

**Practice Religion or Spirituality** – Make an extra effort to consider life, the universe, and/or God and the role you play in it all. Read spiritual affirmations or scriptures. Share this with others in a respectful manner. (M, R)

**Break Tasks into Smaller Pieces** – Find a task that is overwhelming and divide it into smaller more achievable tasks. Plan a schedule to tackle each smaller task and then stick to it. (A, E)

**The Legacy Exercise (Appendix J)** - Dream about how you would like to be remembered by your posterity. (M)
Appendix E: Gratitude and Forgiveness Handout

Gratitude Visit


Procedure:

Have residents think of someone who is still alive, who lives close enough to be able to visit the centre, and who has done something to or for the resident which changed the resident’s life for the better. Organize a night when the invited guests can come. Have residents write a letter of gratitude using the script found below. Make sure the letters are finished by the date of the Gratitude Visit.

Decide on an order of presentation and have each resident and his/her guest come to the front of the room so that everyone can hear and see (arrangements for a microphone may be necessary). Have the resident read the letter out loud to the guest and then have them talk about what they are feeling for each other in the moment. Have all residents complete this process.

Note: It is fine if people want to come and witness the gratitude night even if they have not written a letter. You may want to limit the number of letters read to 5–10. Too many letters might result in a saturation of gratitude and a diminishing return of positive emotions. If the resident would prefer to write a letter to someone who has passed or cannot attend then honour that request. Perhaps the resident can first explain to the group who that person was so that the group can feel that person’s presence with them.

Script:

Close your eyes. Call up the face of someone who years ago did something or said something that changed your life for the better. Someone who you never properly thanked; someone you could meet face-to-face next week. Got a face?

Your task is to write a letter of gratitude to this individual and deliver it in person. The letter should be concrete and about 300 words: Be specific about what he/she did for you and how it affected your life. Let him/her know what you are doing now, and mention how you often remember what he/she did. Make it sing!

Once you have written the testimonial and, if it is possible, call the person and tell him/her you’d like to visit him/her, but be vague about the purpose of the meeting; this exercise is much more fun when it is a surprise. When you meet him/her, take your time reading your letter. Notice his/her reactions as well as yours. If she interrupts you as you read, say that you really want her to listen until you are done. After you have read the letter (every word), discuss the content and your feelings for each other.
“What Went Well” Journal

Keep a journal in which you record three things that went well that day and why they went well. The entries do not have to be monumental life changing effects. Examples might include, “the nurse spent extra time with me today,” or, “I received a call from my granddaughter.” Next to each entry, write down why this happened. For example, if you wrote that the nurse spent more time with you, the reason could be “because she cares about me.” Write about how God or your higher power plays a role in the blessings you receive each day. Entries should be made often enough to make you think and foster awareness but not too often to avoid saturation of the effects. Three entries per week might be a great place to start.

Forgiveness Letter

Write a hypothetical letter to someone who has trespassed you in your life. Acknowledge your emotional reaction to the wrongdoing. Focus on the specific behaviours that hurt you as opposed to the person. Make the choice to forgive and explain your reasons why (i.e., I need to be free of this weight, I want peace, etc.). Consider the perspective and vulnerabilities of the other person. Make a commitment to pass forward mercy and empathy to others rather than pain and resentment. Reflect on how it feels to let go of the grudge. What is the meaning of the suffering you experienced and overcame? Reflect on how forgiving others brings peace to yourself. You may want to share the letter and reconcile with that person if possible.
Appendix F: Signature Strengths Assessment

Adapted from Seligman (2011)

Have residents answer each item and tally their scores. If needed, a staff-member or volunteer may need to dictate and act as scribe for the resident. This is a brief version of the Values in Action Signature Strengths test. A more in depth assessment can be found at www.authentichappines.org. The virtues are organized in six clusters.

Wisdom and Knowledge

1. Curiosity/Interest in the World
   a) The statement “I am always curious about the world” is _____________
      Very much like me  5
      Like me            4
      Neutral           3
      Unlike me         2
      Very much unlike me 1
   b) “I am easily bored” is ______________
      Very much like me  1
      Like me            2
      Neutral           3
      Unlike me         4
      Very much unlike me 5

   Total your score for these two items and write it here. ______________

   This is your curiosity score.

2. Love of Learning
   a) The statement “I am thrilled when I learn something new” is ______________
      Very much like me  5
      Like me            4
      Neutral           3
      Unlike me         2
      Very much unlike me 1
b) “I never go out of my way to research a new topic” is ______________________

<table>
<thead>
<tr>
<th>Option</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very much like me</td>
<td>1</td>
</tr>
<tr>
<td>Like me</td>
<td>2</td>
</tr>
<tr>
<td>Neutral</td>
<td>3</td>
</tr>
<tr>
<td>Unlike me</td>
<td>4</td>
</tr>
<tr>
<td>Very much unlike me</td>
<td>5</td>
</tr>
</tbody>
</table>

Total your score for these two items and write it here. _____________

This is your love of learning score.

3. Judgment/Critical Thinking/ Open-mindedness

a) The statement “When the topic calls for it, I can be a highly rational thinker” is ______________

<table>
<thead>
<tr>
<th>Option</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very much like me</td>
<td>5</td>
</tr>
<tr>
<td>Like me</td>
<td>4</td>
</tr>
<tr>
<td>Neutral</td>
<td>3</td>
</tr>
<tr>
<td>Unlike me</td>
<td>2</td>
</tr>
<tr>
<td>Very much unlike me</td>
<td>1</td>
</tr>
</tbody>
</table>

b) “I tend to make snap judgments” is ______________________

<table>
<thead>
<tr>
<th>Option</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very much like me</td>
<td>1</td>
</tr>
<tr>
<td>Like me</td>
<td>2</td>
</tr>
<tr>
<td>Neutral</td>
<td>3</td>
</tr>
<tr>
<td>Unlike me</td>
<td>4</td>
</tr>
<tr>
<td>Very much unlike me</td>
<td>5</td>
</tr>
</tbody>
</table>

Total your score for these two items and write it here. _____________

This is your judgment score.

4. Ingenuity/Originality/Practical Intelligence/Street Smarts

a) “I like to think of new ways to do things” is

<table>
<thead>
<tr>
<th>Option</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very much like me</td>
<td>5</td>
</tr>
<tr>
<td>Like me</td>
<td>4</td>
</tr>
<tr>
<td>Neutral</td>
<td>3</td>
</tr>
<tr>
<td>Unlike me</td>
<td>2</td>
</tr>
</tbody>
</table>
b) “Most of my friends are more imaginative than I am” is

   Very much like me  1
   Like me           2
   Neutral          3
   Unlike me        4
   Very much unlike me  5

Total your score for these two items and write it here. __________

This is your ingenuity score.

5. Social Intelligence/ Personal Intelligence/ Emotional Intelligence

a) “No matter what the social situation, I am able to fit in” is

   Very much like me  5
   Like me           4
   Neutral          3
   Unlike me        2
   Very much unlike me  1

b) “I am not very good at sensing what other people are feeling” is

   Very much like me  1
   Like me           2
   Neutral          3
   Unlike me        4
   Very much unlike me  5

Total your score for these two items and write it here. __________

This is your social intelligence score.

6. Perspective

a) “I am always able to look at things and see the big picture” is

   Very much like me  5
   Like me           4
   Neutral          3
   Unlike me        2
Very much unlike me 1
b) “Others rarely come to me for advice” is
   Very much like me  1
   Like me           3
   Neutral          3
   Unlike me        4
   Very much unlike me 5

Total your scores for these two items and write it here. _________
This is your perspective score.

Courage

7. Valor and Bravery
a) “I have taken frequent stands in the face of strong opposition” is
   Very much like me  5
   Like me           4
   Neutral          3
   Unlike me        2
   Very much unlike me 1
b) “Pain and disappointment often get the better of me” is
   Very much like me  1
   Like me           3
   Neutral          3
   Unlike me        4
   Very much unlike me 5

Total your score for these two items and write it here. ______
This is your valor score.

8. Perseverance/Industry/Diligence
a) “I always finish what I start” is
   Very much like me  5
   Like me           4
b) “I get sidetracked when I work” is
   Very much like me 1
   Like me 2
   Neutral 3
   Unlike me 4
   Very much unlike me 5

Total your score for these two items and write it here. ____________

This is your perseverance score.

9. **Integrity/Genuineness/Honesty**

a) “I always keep my promises” is
   Very much like me 5
   Like me 4
   Neutral 3
   Unlike me 2
   Very much unlike me 1

b) “My friends never tell me I’m down to earth” is
   Very much like me 1
   Like me 2
   Neutral 3
   Unlike me 4
   Very much unlike me 5

Total your score for these two items and write here. ______

This is your integrity score.
Humanity and Love

10. **Kindness and Generosity**

a) “I have voluntarily helped a neighbour in the last month” is

- Very much like me 5
- Like me 4
- Neutral 3
- Unlike me 2
- Very much unlike me 1

b) “I am rarely as excited about the good fortune of others as I am about my own” is

- Very much like me 1
- Like me 2
- Neutral 3
- Unlike me 4
- Very much unlike me 5

Total your score for these items and write here. ______________

This is your kindness score.

11. **Loving and Allowing Oneself to Be Loved**

a) “There are people in my life who care as much about my feelings and well-being as they do about their own” is

- Very much like me 5
- Like me 4
- Neutral 3
- Unlike me 2
- Very much unlike me 1

b) “I have trouble accepting love from others” is

- Very much like me 1
- Like me 2
- Neutral 3
- Unlike me 4
- Very much unlike me 5
Total your score for these two items and write it here. ______
This is your loving and being loved score.

**Justice**

12. **Citizenship/Duty/Teamwork/Loyalty**

a) “I work at my best when I am part of a group” is
   - Very much like me 5
   - Like me 4
   - Neutral 3
   - Unlike me 2
   - Very much unlike me 1

b) “I hesitate to sacrifice my self-interest for the benefit of groups I am in” is
   - Very much like me 1
   - Like me 2
   - Neutral 3
   - Unlike me 4
   - Very much unlike me 5

Total your score for these two items and write it here. ______
This is your citizenship score.

13. **Fairness and Equity**

a) “I treat all people equally, regardless of who they might be” is
   - Very much like me 5
   - Like me 4
   - Neutral 3
   - Unlike me 2
   - Very much unlike me 1

b) “If I do not like someone, it is difficult for me to treat him or her fairly” is
   - Very much like me 1
   - Like me 2
   - Neutral 3
Unlike me 4
Very much unlike me 5
Total you score for these two items and write it here. _____
This is your fairness score.

14. Leadership

a) “I can always get people to do things together without nagging them” is
   Very much like me 5
   Like me 4
   Neutral 3
   Unlike me 2
   Very much unlike me 1

b) “I am not very good at planning group activities” is
   Very much like me 1
   Like me 2
   Neutral 3
   Unlike me 4
   Very much unlike me 5

Total your score for these two items and write it here. ______
This is your leadership score.

Temperance

15. Self-control

a) “I control my emotions” is
   Very much like me 5
   Like me 4
   Neutral 3
   Unlike me 2
   Very much unlike me 1

b) “I can rarely stay on a diet” is
   Very much like me 1
Like me 2
Neutral 3
Unlike me 4
Very much unlike me 5

Total your score for these items and write it here. ________
This is your self-control score.

16. Prudence/Discretion/Caution

a) “I avoid activities that are physically dangerous” is
   Very much like me 5
   Like me 4
   Neutral 3
   Unlike me 2
   Very much unlike me 1

b) “I sometimes make poor choices in friendships and relationships” is
   Very much like me 1
   Like me 2
   Neutral 3
   Unlike me 4
   Very much unlike me 5

Total your score for these two items and write it here. ________
This is your prudence score.

17. Humility and Modesty

a) “I change the subject when people pay me compliments” is
   Very much like me 5
   Like me 4
   Neutral 3
   Unlike me 2
   Very much unlike me 1

b) “I often brag about my accomplishments” is
   Very much like me 1
Like me 3
Neutral 3
Unlike me 4
Very much unlike me 5

Total your score for these two items and write it here. ______
This is your humility score.

Transcendence

18. Appreciation of Beauty and Excellence

a) “In the last month, I have been thrilled by excellence in music, art, drama, film, sport, science, or mathematics” is
   Very much like me 5
   Like me 4
   Neutral 3
   Unlike me 2
   Very much unlike me 1

b) “I have not created anything of beauty in the last year” is
   Very much like me 1
   Like me 3
   Neutral 3
   Unlike me 4
   Very much unlike me 5

Total your score for these two items and write it here. ______
This is your appreciation of beauty score.

19. Gratitude.

a) “I always say thank you, even for the little things” is
   Very much like me 5
   Like me 4
   Neutral 3
   Unlike me 2
   Very much unlike me 1
b) “I rarely stop and count my blessings” is

- Very much like me 1
- Like me 2
- Neutral 3
- Unlike me 4
- Very much unlike me 5

Total your score for these two items and write it here._____
This is your gratitude score.

20. **Hope/Optimism/Future-mindedness**

a) “I always look on the bright side” is

- Very much like me 5
- Like me 4
- Neutral 3
- Unlike me 2
- Very much unlike me 1

b) “I rarely have a well-thought-out plan for what I want to do” is

- Very much like me 1
- Like me 2
- Neutral 3
- Unlike me 4
- Very much unlike me 5

Total your score for these two items and write it here._____
This is your optimism score.

21. **Spirituality/Sense of Purpose/Faith/Religiousness**

a) “My life has a strong purpose” is

- Very much like me 5
- Like me 4
- Neutral 3
- Unlike me 2
- Very much unlike me 1
b) “I do not have a calling in life” is

Very much like me 1
Like me 2
Neutral 3
Unlike me 4
Very much unlike me 5

Total your score for these two items and write it here. _________

This is your spirituality score.

22. Forgiveness and Mercy

a) “I always let bygones be bygones” is

Very much like me 5
Like me 4
Neutral 3
Unlike me 2
Very much unlike me 1

b) “I always try to get even” is

Very much like me 1
Like me 2
Neutral 3
Unlike me 4
Very much unlike me 5

Total your score for these two items and write it here. _____

This is your forgiveness score.

23. Playfulness and Humour

a) “I always mix work and play as much as possible” is

Very much like me 5
Like me 4
Neutral 3
Unlike me 2
Very much unlike me 1
b) “I rarely say funny things” is

   Very much like me  1
   Like me           2
   Neutral          3
   Unlike me        4
   Very much unlike me  5

Total your score for these two items and write it here.  __________

This is your humour score.

24. Zest/Passion/Enthusiasm

a) “I throw myself into everything I do” is

   Very much like me  5
   Like me           4
   Neutral          3
   Unlike me        2
   Very much unlike me  1

b) “I mope a lot” is

   Very much like me  1
   Like me           2
   Neutral          3
   Unlike me        4
   Very much unlike me  5

Total your score for these two items and write it here.  ______

This is your zest score.
**Summary**

Rank your scores from highest to lowest.

<table>
<thead>
<tr>
<th>Wisdom and Knowledge</th>
<th>Justice</th>
</tr>
</thead>
<tbody>
<tr>
<td>2. Love of Learning</td>
<td>13. Fairness</td>
</tr>
<tr>
<td>4. Ingenuity</td>
<td><strong>Temperance</strong></td>
</tr>
<tr>
<td>5. Social Intelligence</td>
<td>15. Self-Control</td>
</tr>
<tr>
<td>6. Perspective</td>
<td>16. Prudence</td>
</tr>
<tr>
<td><strong>Courage</strong></td>
<td>17. Humility</td>
</tr>
<tr>
<td>7. Valour</td>
<td><strong>Transcendence</strong></td>
</tr>
<tr>
<td>8. Perseverance</td>
<td>18. Appreciation of Beauty</td>
</tr>
<tr>
<td>9. Integrity</td>
<td>19. Gratitude</td>
</tr>
<tr>
<td><strong>Humanity and Love</strong></td>
<td>20. Hope</td>
</tr>
<tr>
<td>11. Loving</td>
<td>22. Forgiveness</td>
</tr>
<tr>
<td></td>
<td>23. Humour</td>
</tr>
<tr>
<td></td>
<td>24. Zest</td>
</tr>
</tbody>
</table>

Typically you will have five or fewer scores of 9 or 10, and these are your highest strengths—at least as you self-reported on them. Circle them. Your low scores (4–6 or lower) are your weaknesses.
Appendix G: Motivation Handout

Self-Determination Theory (SDT) tells us that we have natural or intrinsic tendencies to behave in effective and healthy ways. Everyone wants to flourish and if given the chance they will naturally gravitate to behaviours that will encourage well-being.

There are 3 conditions that most effectively and intrinsically motivate people:

**Autonomy** – Everyone wants to feel like they have at least some control in their lives. We want to feel like our input matters. If we feel like we have no autonomy we tend to be hopeless and pessimistic.

How can I help residents regain a stronger sense of autonomy? ____________________  
________________________________________________________________________  
________________________________________________________________________  

**Connection** – Human beings are wired for connection. From cradle to grave we need attachment, especially in our principle relationships. If we feel isolated we tend to be depressed and unmotivated.

How can I help residents connect more with each other, their loved ones, and myself? __  
________________________________________________________________________  
________________________________________________________________________  

**Competence** – We all want to feel like we are good at something. That we can be depended on and that we are capable. If we feel incompetent then we feel overwhelmed by new or difficult tasks.

How can I help residents gain or maintain a sense of competence? ____________________  
________________________________________________________________________  
________________________________________________________________________
Appendix H: Legacy Exercise Handout

**Preparation:** Invite 1–5 residents to participate in the Legacy Exercise. Tell them that it is a chance to tell their stories and hear the stories of others. Remind residents that while doing this exercise their ideas and feelings will be honoured and that the goal of the exercise is not to be realistic; rather it is to dream big. Try and establish a relationship of trust among the participants (if in a group setting). You may also want to provide paper and pens for participants or have someone record participants’ responses (if you do plan on recording the conversation make sure to follow your organization’s and/or your professional policies on informed consent and confidentiality).

**Script:** “Imagine that your great-great grandchildren are doing family history, searching for interesting and meaningful information that will connect them to their ancestors. Imagine that they are now searching for information about you. What would you hope that they find? If there weren’t any barriers, what would be the absolute best and most favourable information they could find out about your life. What do you want to be remembered for? Don’t get caught up in logistics of how they would find the information, assume they have a crystal ball.”

**Reflection:** Have participant/s reflect on each person’s legacy. Look for the values expressed in their stories (e.g., “I can see family is very important to you”). Ask questions like:

- What is the importance of ______?
- How might your descendants react upon learning these things about you?
- How might they find this information? (This could motivate them to record their life story if they haven’t already)
- What can you be doing now to live your own legacy?
- What can you be doing to make it even better?

Wrap-up by asking participants what the experience was like to share their stories and dreams. Thank them for the privilege of hearing their stories.
## Appendix I: Workshop Evaluation Questionnaire

Circle the statement that you agree with most.

<p>| | | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1. I participated in the workshop.</td>
<td>I attended one session</td>
<td>I attended two sessions</td>
<td>I attended three sessions</td>
<td>I attended all four sessions</td>
</tr>
<tr>
<td>2. The ideas in the workshop were useful.</td>
<td>Completely disagree</td>
<td>Somewhat disagree</td>
<td>Not sure/no opinion</td>
<td>Somewhat agree</td>
</tr>
<tr>
<td>3. By applying the theories learned in these workshops the lives of residents here will improve.</td>
<td>Completely disagree</td>
<td>Somewhat disagree</td>
<td>Not sure/no opinion</td>
<td>Somewhat agree</td>
</tr>
<tr>
<td>4. Applying these theories will help the residents find more purpose.</td>
<td>Completely disagree</td>
<td>Somewhat disagree</td>
<td>Not sure/no opinion</td>
<td>Somewhat agree</td>
</tr>
<tr>
<td>5. Participation in activities will increase due to this approach</td>
<td>Completely disagree</td>
<td>Somewhat disagree</td>
<td>Not sure/no opinion</td>
<td>Somewhat agree</td>
</tr>
<tr>
<td>6. Goals of residents will increase in meaning due to this approach</td>
<td>Completely disagree</td>
<td>Somewhat disagree</td>
<td>Not sure/no opinion</td>
<td>Somewhat agree</td>
</tr>
<tr>
<td>7. I understood the theories presented</td>
<td>Completely disagree</td>
<td>Somewhat disagree</td>
<td>Not sure/no opinion</td>
<td>Somewhat agree</td>
</tr>
</tbody>
</table>

How could you see yourself using this approach to help residents flourish?

________________________________________________________________________

________________________________________________________________________
Appendix J: Interview and Focus Group Questions

(For residents)

Have staff at your home helped you set a new goal or start a new activity?

What was your experience?

What was the goal that you set?

What made you want to set that as a goal?

How has your life at [name of centre], if at all, changed since working towards your goal?

How so?

When you are working towards your goal what are your days like? How does that differ from your days before you were working towards your goal?

What are you looking forward to?

What are some meaningful past experiences in [name of centre] that you would like to share?

Flow is a name for the state of “losing track of time” because you are so engaged in an activity. When, if at all, do you experience flow? What are you doing to achieve flow? Have you experienced more or less flow since you started working towards your goal?