SUMMER 2021 ISSUE 33

## CENTRE ON AGING AND HEALTH

## at the UNIVERSITY OF REGINA

#### **The Newsletter**

## The Alzheimer Society of Saskatchewan's First Link Program Awarded the Centre on Aging and Health's 2020/2021 Innovation in Healthcare Delivery Award

People living with dementia and their caregivers often face barriers to care and to getting the information and supports they need. To address this problem, the Alzheimer Society of Saskatchewan's First Link program aims to connect people living with dementia and their caregivers to the information, supports and services they need as early as possible and throughout the progression of the disease. The program's positive impact on the lives of older adults is the reason they were selected as the winner of the 2020/2021 Centre on Aging and Health's (CAH) Innovation in Health Care Delivery Award. This award is given out to a Regina-based individual, group, or organization that improves the lives of older adults either Continued on pg. 2

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#### **Newsletter Editor:**

Janine Beahm, MA CAH Administrator janine.beahm@uregina.ca

through innovations in health care research. The delivery or award winner is selected by a committee of older adults from the community. The adiudication committee 2020/2021 included Dr. Joan Roy, Ms. Mari and Ms. Kathv Thiessen. Lve. Employees of the University of Regina are not eligible for the award. The committee was pleased to recognize Alzheimer Society the of Saskatchewan's First Link Program for their innovative work.

First Link the is а program of Alzheimer Society that takes а person-centered and proactive approach to support individuals and families - when they need it. When people living with dementia or their



Joanne Bracken, CEO and Joanne Michael, Director of Programs and Services Accept the Award Picture printed with permissions from the Alzheimer Society of Saskatchewan caregivers are initially contacted by the Alzheimer Society, First Link staff help them to identify and access information and support that meet their unique needs. First Link also facilitates connections to education, programs and services offered by their local Alzheimer Society, as well as referrals to other health care and community services in their community.

In a letter of support, a family caregiver emphasizes the supportive nature of First Link Coordinators:

"When I phoned the Alzheimer Society to register, I was greeted by a very friendly First Link Coordinator. She immediately put me at ease and made me feel that we had come to the right place... I am particularly impressed that the First Link Coordinators at the Alzheimer Society are always available to us. I have stopped in at the office when I need some advice and they are always open for a talk and support."

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First Link bridges the gap between service providers within the circle of care. By creating robust partnerships across primary care, community care and the community support services First Link ensures sector. that individuals and families have access coordinated care as earlv to as possible after a diagnosis is made. Given the increasing prevalence of dementia, First Link plays a critical role in supporting people with dementia to live as fully as possible at every stage of the disease.

The information received through First Link is considered invaluable to clients seeking support. In a Client Satisfaction survey, one client commented:

"I can't begin to tell you how much I appreciate the help I received. My contact even called me back to make sure things were going ok."

Another client wrote,

"I started by calling the Alzheimer Society, had many questions answered and received more information in the email. It helped me to move forward, in the right direction."

By taking a proactive approach, First Link helps overcome barriers to care. Many families are aware of the Alzheimer Society and dementia care services but will not make the call until a crisis occurs. Still, many others are unaware of these services. First Link removes these barriers by enabling health care and community service providers to refer individuals and families at the time of diagnosis or as soon as possible after a diagnosis is made. According to Alzheimer Society research, people who were referred directly to First Link by health care professionals (direct referrals) received services and supports 11 clients months sooner than who accessed the services themselves (self-directed referrals). Continued on pg. 4



First Link Coordinators Picture printed with permissions from the Alzheimer Society of Saskatchewan

By overcoming these barriers to care, First Link gives people with dementia a greater voice in their current and future care. It opens the door to support programs and social and recreational activities that help enhance their quality of life and/or enable them to live at home or in the community for longer. also benefit from the Caregivers by understanding program and preparing for the challenges associated with the progression of the disease through practical knowledge and strategies.

Having access to the appropriate supports early in the diagnosis can make a huge difference in the quality of life for people living with dementia and their caregivers.

In a letter of support for the program, a caregiver emphasized how the program has helped her.



"My husband attended the Support Group for those with early stage dementia for about two years. I could see that it helped him with his outlook on the disease. I continue to attend the Caregiver Support Group. It is most helpful as we share our situations and give one another a sense of camaraderie."

The awards adjudication committee and CAH director, Thomas Hadjistavropoulos, Ph.D.,

announced the award virtually in a video which can be found on the CAH YouTube Channel.

### (Click here to watch: https://www.youtube.com/watc h?v=HTk4GfAG1G0)

Watch the complete award announcement video to hear comments from the committee and Dr. Hadjistavropoulos and to watch Joanne Bracken, CEO of the Alzheimer Society, comment on receiving the award. Alzheimer Congratulations to the Society of Saskatchewan's First Link Program on receiving this well-deserved award!

#### JOIN THE CENTRE ON AGING AND HEALTH

Applying is quick and easy.

Apply on our website: http://www2.uregina.ca/cah/ and click on "Become a Member."

# Meet CAH Member Dr. Josef Buttigieg

Associate Professor, Biology

Dr. Josef Buttigieg is a member of the Centre on Aging and Health and a leader of the Biological Basis of Age-Related Brain Disorders research cluster. He is an active researcher in the field of aging with work focusing on the biological aspects of Alzheimer Disease. We are pleased to feature him and his contributions to agingrelated research.

hired Dr. Buttigieg was bv the University of Regina in 2011, as an assistant professor to help further teaching in anatomy and physiology. He is responsible for teaching several classes at the undergraduate level in the science and nursing programs at the U of R. He also supervises medical students who are interested in research and are part of the University of Saskatchewan program. Finally, he is an active researcher in the Faculty of Science.

When it pertains to research, Dr. Buttigieg would be labeled as а neurophysiologist, conducting research both stem cell biology on and autoimmunity, as it pertains to the nervous system. He has over 30 publications in this field as well as research from the awards Saskatchewan Health Research Foundation (SHRF), Natural Sciences and Engineering Research Council of Canada (NSERC) and the Canadian Association for Neuroscience (CAN) for research excellence. Continued on pg. 6



Dr. Josef Buttigieg, Ph.D. Associate Professor, Biology, University of Regina

According to Dr. Buttigieg, when we think of nervous system disorders there are, generally, two approaches to research. The first approach is to better understand the disease and find ways to mitigate the severity of disease. The second approach is to repair tissue, once the damage has occurred and has been stabilized.

Α neurophysiologist's research expertise is on understanding how (e.g. those of the nervous cells system) communicate with each other. This would include how neurons relay information to move an arm, but also how cells in the nervous system tell each other their health status and needs. When this starts to breakdown, this results in the inability to relay important information. Dr. Buttigieg states that we find this to be the case in diseases such as Multiple Sclerosis (MS) and Alzheimer's disease.

In MS, the body has started to form an immune response against the nervous This results in system. impaired function and significant disease. Dr. Buttigieg's lab has developed а therapeutic potential technique to treat this disease and further

information can be found through the following link:

#### https://www.frontiersin.org/articles/ 10.3389/fmedt.2021.640569/full.

They are hoping to start some human studies in the near future.

When it comes to Alzheimer's disease, Dr. Buttigieg says that we do know that certain misfolded proteins cause neurons to misfire and die. These are called beta amyloid proteins. An interesting finding from Dr. Buttigieg's lab is that they are able to block some protein's of the function. This significantly improves neuronal signaling. He states that while his lab is in the early stages of this study, they are planning to further identify the mechanism of this blocking effect and whether this can be used in people to either slow down or stop the progression of disease.

In addition to all of the above work, Dr. Buttigieg enjoys music and farming. He plays the piano and clarinet and has an active farm of 120 acres north of Regina, where he raises cash crops, grains and animals.

# CAH Director Awarded 2021 M. Powell Lawton Award for Distinguished Contributions in Clinical Geropsychology

Throughout his career. the CAH director, Thomas Hadjistavropoulos, Ph.D., has created and contributed to numerous research projects most of which had one common goal: to improve the quality of lives of older adults. More specifically, Hadjistavropoulos' work addresses a central concern which is the problem of under recognition and under treatment of pain among older adults with dementia. His motivation to address these problems has led to his significant contributions to research in gerontology, community engagement, mentorship of future clinicians and researchers, knowledge translation and mobilization, and in improving practices that lead to better patient

and pain treatment. care Hadjistavropoulos' contributions to the field of geropsychology were recently recognized by the Society for Clinical Geropsychology of the American Psychological Association; he was selected as the 2021 Winner of the M. Powell Lawton Award for **Distinguished Contributions in Clinical** Geropsychology. This award recognizes researchers who have distinguished life time made contributions to the psychology of older age.

Hadjisatvopoulos' research has had a direct impact on practices that have led to better recognition and *Continued on pg. 8* 



treatment of pain in people living with dementia. He is now one of the world's leading scholars on pain assessment in dementia. and has led the publication of the most widely cited pain assessment guideline focusing on older adults (Hadjistavropoulos et al., 2007). This auideline has been formally recognized by the Clinical Journal of Pain as its one its top cited papers. He has also pioneered the development of innovative behavioural methods (used worldwide) for evaluating pain in older adults whose dementia imposes severe limitations in their ability to communicate. As an example. the behavioural Pain Assessment Checklist for Seniors with Limited Ability to Communicate (PACSLAC and PACSLAC-II), developed in Hadjistavropoulos' laboratory. has been embraced by clinical and research experts around the world and has been translated from English into French, Portuguese, Swedish, Turkish, Japanese, Farsi, German, Dutch and other languages. Currently, Hadjistavropoulos is working with a team of biomedical engineers and computer vision experts the development of toward an automated vision system designed to monitor pain behaviours in older adults

with severe dementia as they go about their normal routines in long-term care facilities.

Hadjistavropoulos has also furthered the field of geropsychology bv and training mentoring new researchers and leaders in the area. He has supervised the research of over 40 highly gualified trainees. He has also provided opportunities for training graduate students interested gerontology and aging studies in through developing the Master of Arts/Science Gerontology program (the only graduate gerontology degree program in the Canadian Provinces).

The award also recognizes Hadjistavropoulos' commitment to sharing his work with a wide variety of audiences so that research findings can make their way into clinical practice and policy, or so that they can be used by older adults to live better lives. Hadjistavropoulos has published over 250 peer-reviewed articles and book chapters as well as seven books/monographs. He also shares research findings in accessible ways. For example, he and his team have launched a highly successful social media campaign to spread awareness Continued on pg. 9

about pain in dementia. This campaign seeks to share accessible information auidelines and to caregivers. researchers, clinicians, policy makers, and the general public about the underreporting and under management of pain in people living with dementia. To read more about this project and the recognition it received by the Canadian Pain Society which awarded it the Pain Awareness Award, see the Winter 2021 edition (Issue #32) of our newsletter on our website. Through the CAH. Hadjistavropoulos also shares engaging gerontology research with larger community, with the most attendees beina older adults. bv organizing free public events such as the CAH Annual Distinguished Lecture and Brain Awareness Week events. He has also engaged with policy

officials and has published work with a focus on public policy aimed to better the lives of older adults. Through sharing research with a wide variety of audiences, Hadjistavropoulos has helped turn clinical geropsychology research into action.

Hadjistavropoulos was nominated for the M. Powell Lawton Award by a previous winner, Victor Molinari, Ph.D., University of South Florida. who acknowledged all of the aforementioned achievements as well as numerous other contributions Hadjistavpoulos has the field made to of clinical geropsychology throughout his prolific career. Due to COVID-19 precautions, Hadjistavropoulos will receive the award virtually on August 12, 2021. He will also be delivering the 2022 M. Powell Lawton Address during next year's American Psychological Association Convention in Minneapolis.

## NOMINATIONS ARE OPEN FOR 2021/2022 INNOVATION IN HEALTH CARE DELIVERY AWARD

The Centre on Aging and Health Award for Innovation in Health Care Delivery recognizes Regina-based individuals, groups, or organizations, offering health care to older adults. Award recipients must have introduced an innovative approach to service provision or must have conducted field research to evaluate services or programs for older persons. If you know of someone that would be deserving of this award, nominations (of no more than 8 pages) are to be submitted at any time up until October 15, 2021 for the 2021-2022 Award.

For more information on eligibility, adjudication, or about how to apply, please visit http://www2.uregina.ca/cah/about-cah/innovation-in-health-care-delivery-award or contact Janine Beahm, CAH Administrator, at janine.beahm@uregina.ca

# It's Never Too Late to Learn New Things

## By Kerrie Strathy, Division Head, Lifelong Learning Centre

The Lifelong Learning Centre (LLC), like the rest of the University of Regina, was suddenly unable to continue having inperson courses due to the declaration of the COVID-19 Pandemic in mid-March 2020. This occurred as most LLC winter courses were about to have their final week of class and we were preparing to host members of the Regina Police Service for the annual Fraud and Scam Presentation held to observe Fraud Prevention Month in Canada.

The closure came as LLC and many other agencies were working together to address social isolation of older adults across Canada and just as LLC students were receiving their Spring 2020 program guides in the mail. This meant it was no longer possible to have in-person events like the Spring Open House and Health Fair that was to be held on World Health Day – April 7. This was most unfortunate since LLC students and others were anxious to get reliable information about the new virus that was responsible for so many programs and places being shut down.

The rest of the University of Regina quickly

transitioned to remote learning so students could complete their winter term courses. Since most LLC courses had only one week left we decided to end the term early and rethink what might be possible for the spring term because face-to-face courses were no longer an option. We had no idea how our older learners might react to learning via video conferencing platforms so decided to pilot some one off presentations for delivery via Zoom over the summer while people were being advised to stay home as much as possible.

Fortunately we had some instructors who were already familiar with videoconferencing and others who were prepared to learn how to use it. We also had students who were willing to participate in the new delivery mode in order to continue learning – and to be socially engaged with others. We were pleased with the number of people who preregistered for these presentations which normally had lots of people dropping in without being registered in advance. We were also pleased to see that most of those who preregistered attended these sessions unlike others who had high no-show rates.

The question was then would students come to multi-week courses offered via Zoom? In order to learn the answer to this question the Lifelong Learning Centre recruited some volunteers to assist with a phone survey to determine whether or not students had the necessary technology to participate – namely a computer, tablet or other electronic device with a highspeed internet connection. While the answer to that question was yes *Continued on pg. 11* 

for approximately 97% of those who responded to the survey, only 66% expressed interest in taking future courses via videoconferencing. Many others said they would wait until it was possible to get together for in-person courses.

In order to assist instructors and learners to become comfortable using Zoom we decided to prepare training materials and programs for both groups. This included having a UR student develop short videos to introduce instructors to Zoom features they would need to know to teach their courses. She facilitated also а series of training workshops to introduce the videos and answer questions about using Zoom, and to have one-on-one Zoom sessions to practice. materials were Likewise produced to introduce students to the basics of Zoom and a series of Orientation to Zoom sessions were held as part of the Open House which was delivered via Zoom. Subsequently many former students - and some new ones from outside Regina – participated in fall courses.

Registration numbers for fall courses were lower than they were when courses were held in person. There was, however, a significant increase in pre-registrations for Wellness Wednesday and Thursday Noon well as other one-off Forums as presentations. The fact that learners had to get the Zoom link to participate in learning opportunities meant that they had to preregister. For the winter term we noticed many who participated in short presentations in the fall subsequently registered for multiweek courses. Overall feedback on these

courses and presentations was pretty positive with many asking for courses to continue being delivered via Zoom – especially during the winter term.

The ongoing pandemic resulted in many people wanting to continue learning remotely, but we were also hearing that some learners were keen to return to the face-to-face courses that provided more social interaction than Zoom did. So the new question was how to deliver courses for older adults when the pandemic comes to an end? LLC staff worked with the Marketing Unit at the Centre for Continuing Education to survey students again using an online survey format. Staff are in the process of finalising arrangements and promotion for most Fall 2021 courses to be delivered via Zoom and a few to be delivered in person.



As LLC staff we learned a lot this past year since we needed to be prepared to assist instructors and students who were new to Zoom. Students provided valuable feedback at events like our Open Houses and on Course Feedback Forms. We learned that some instructors who were initially resistant *Continued on pg. 12* 

to delivering courses via Zoom now actually prefer delivering them remotely while others are anxious to return to face-to-face teaching as soon as they can. In the case of our Yoga instructor she can continue to teach for LLC even though she has returned to Newfoundland to be close to family.

Students who were reluctant to take evening courses in the past were now taking them because they did not have to drive at night. Students who were away for a week or two during the term could attend their courses from wherever they were as long as they had a device and an internet connection. Another advantage of remote courses was that those in Wine Appreciation courses no longer had to arrange a designated driver since they were sampling wines from the comfort of their own homes, not a classroom, Remote delivery also meant learners from outside Regina could attend, like the one who took an LLC course from Germany because the program he used to go to in person was shut down and opted not to deliver courses via Zoom.

Like other older adult learning programs across Canada staff continue to engage in discussions with instructors and learners to see what new and exciting kinds of learning opportunities we can have Beyond the Mask.

This could be things like hybrid or blended learning where some students will attend in person and others remotely. Or where instructors can reside outside Regina. It might be some days where courses are offered remotely and others where they are held face-to-face. All of these possibilities mean that older adults will have more opportunities to continue to learn new things even if they experience mobility challenges from a broken vehicle to a broken limb that would make it impossible – or at least very difficult – to continue learning Beyond the Mask.

The Lifelong Learning Centre is currently busy preparing for the Fall Open House and courses. See our website www.uregina.ca/cce/lifelong to learn more about our courses and events.

## APPLY NOW FOR THE 2021/2022 CAH SMALL GRANTS RESEARCH AWARD!

Amount Available: \$1,500 Application Deadline: December 15, 2021

This award is intended to fund pilot projects or other work aimed to lead to the preparation of a major national application in the area of health and aging.

To apply, or for more information: http://www2.uregina.ca/cah/ or cah@uregina.ca or 306.337.8477

## **CAH Member Announcements**



CAH Professional Associate, Mary Brachaniec, was appointed to the Health Standards Organization (HSO) Long-Term Care Services Technical Committee. The goal of the committee is to help set national standards for long-term care.

Mary Brachaniec applied for the role as a caregiver partner on the #SeePainMoreClearly team.



CAH Associate Member, Kerrie Strathy, was selected to serve on the Canadian Institutes of Health Research Older Adult Advisory Committee.

Kerrie Strathy, is Division Head at the University of Regina Lifelong Learning Centre.

## STAY CONNECTED WITH THE CAH



# APPLY FOR THE M.A./M.SC. GERONTOLOGY PROGRAM

## "Seniors make up the fastest growing age group... By 2051, about one in four Canadians is expected to be 65 or over." – Statistics Canada

- Exciting inter-disciplinary, research-oriented graduate degree program.
- Provides research training and specialized gerontology knowledge to health professionals and students.
- Emphasizes both the physiological and psychosocial aspects of aging.
- The collaboration of the Faculty of Arts, the Faculty of Kinesiology and Health Studies and the Faculty of Social Work and coordinated by the University of Regina's Centre on Aging and Health.

### Admission Requirements:

4-year undergraduate degree in areas such as, nursing, kinesiology, psychology, social work, health studies, sociology, biology, or a health professional degree .

## Applications Due: March 31st, 2022

(for Fall 2022 Admissions)

#### For More Information:

Dr. Abigail Wickson-Griffiths Program Coordinator 306-337-2132 Abigial.Wickson-Grifiths@uregina.ca

Janine Beahm CAH Administrator 306-337-8477 cah@uregina.ca