**Gerontological Society of America, 2018 Annual Conference**

<https://www.geron.org/meetings-events/gsa-2018-annual-scientific-meeting/call-for-abstracts-2018>

**Title** (12 words): Investigating barriers to family visitation with nursing home residents: A systematic review

**Overview** (50 words): Social support by family visitation of nursing home residents is necessary for resident well-being, however barriers to visitation persist. Collaborative efforts between social work, health care, and transportation planners may decrease such barriers. This poster presents findings from a systematic review and argues for increased collaborations across professions.

**Objectives** (50 words each max):

1. Participants will demonstrate an understanding that the impact family visitation has on social connection and social support of residents in nursing home, which mitigates social isolation and exclusion.
2. Participants will distinguish new ideas about interprofessional learning opportunities (e.g., social work, allied health care professions, and transportation planners) to address identified barriers to visitation of residents in nursing homes.

**Abstract** (751 words)

**Background**: The purpose of this presentation is designed to address: (1) the importance of social support by family visitation of residents in nursing homes (NHs), (2) the barriers most reported to family visitation, and (3) the need for interprofessional research (IPR) through collaborative efforts between social work, allied health care professionals, and transportation planners to decrease barriers to benefit residents of NHs and family members. The role of relationships between resident and family member is an identified domain of importance in the culture-change movement in NHs, aimed at improving resident’s well-being and quality of life (Shier et al., 2013; Burack, Weiner, & Reinhardt, 2012; Jablonski, Reed, & Maas, 2005). Families are integral in helping nursing home (NH) residents maintain social inclusivity and an overall sense of belonging, maintain social connection through visitation, and the provision of personalized care (Gaugler, 2005; Yamamoto-Mitani et al., 2002). Such positive social interactions between resident and family members have been found to reduce loneliness (DeWall, 2013) and counteract the consequences of social exclusion (DeWall, 2013). Many family members take on the role as resident advocate by monitoring the quality of care provided and help staff in detecting changes in resident health status (Gaugler, 2005; Powell et al., 2017). While many family members aim to remain socially connected with their loved one in a NH, this research shows there are many challenges and barriers to doing so.

**Methods**: The author used the Preferred Reporting Items for Systematic Reviews and Meta-Analyses guidelines to conduct a systematic review of the literature that describes barriers to family member involvement through face-to-face visitation of older adult residents in NHs in the United States. Academic Search Complete, AgeLine, AltHealthWatch, CINAHL Complete, Health Source – Consumer Edition, Health Source: Nursing/Academic Edition, MEDLINE, PsycARTICLES, Psychology and Behavioral Sciences Collection, PsycINFO, and Social Work Abstracts databases were searched for peer-reviewed articles published in English between January 1, 1997 and November 9, 2017. The key phrases for the search were: “long-term care or nursing home,” “barriers or obstacles or challenges,” “social exclusion or socially excluded or social isolation,” “isolation,” “visit\*,” “contact,” and “family or families or relatives or parents or siblings.” There was an asterisk placed at the end of the stem search term “visit” to capture articles that used variations of this term, for instance “visitation”. A similar search was done using Google Scholar, though no additional articles were found.

**Results**: The initial searches identified 1,928 articles, some of which were duplicates yielding a total of 1,109 separate articles. Nine hundred and eight articles were excluded because inclusion criteria were not met in title and abstract, and 111 of those remaining were excluded because inclusion criteria were not met in the full-text of the article. Four additional articles were identified after a hand-checked review of references in the original eleven articles. The final sample yielded fifteen articles (*n=*15) describing seven barriers to the visitation by family members of residents in NHs. These barriers are: (1) psychological, (2) health, (3) employment/finances, (4) travel time, (5) transportation access, (6) staff-to-family-member relationship, and (7) other. Psychological barriers, such as guilt and feelings of being emotionally overwhelmed are a barrier to family members’ visitation of residents. Moreover, the health of caregivers, commitments to work, and financial constraints (Strain & Maxwell, 2015; Yamamoto-Mitani et al., 2002) are reported to prevent family members from visiting residents. Staff to family member relationships were found to influence family involvement across articles (Gwyther, 2001; Janzen, 2001). Lastly, travel time and transportation access are significant barriers to family members’ visitation (Parmenter, Cruickshank, & Hussain, 2012; Port, 2004).

**Conclusion**: The role of relationships between resident and family member is complex and warrants attention across professions, including social work, allied health care professionals, and transportation planners. NH social workers may be best suited to ensure delivery of adequate and consistent mental health and psychosocial care in NHs (Social Work Policy Institute, 2010). Moreover, social workers are tasked with educating facility staff and may provide nursing assistants and nurses with an understanding of the importance of family member involvement in care. Allied health care professionals and staff members may encourage family members to increase the frequency, duration, and quality of their visits as well as encourage additional friends and family members to be involved with care and visitation. Finally, transportation planners have a unique understanding of the ongoing difficulties associated with transportation access. Together, IPR is necessary to address this pressing concern experienced by family members and residents in nursing homes, particularly as it relates to transportation as a barrier to familial involvement.

References

Burack, O.R., Weiner, A.S. & Reinhardt, J.P. (2012). The impact of culture change on elders’ behavioral symptoms: a longitudinal study. *Journal of the American Medical Directors Association, 13*(6), 522-528.

DeWall, C.N. (2013). *The oxford handbook of social exclusion.* New York, NY: Oxford University Press.

Gaugler, J.E. (2005). Family involvement in residential long-term care: A synthesis and critical review. *Ageing and Mental Health*, *9*(2), 105-118.

Gwyther, L.P. (2001). Family caregivers and long-term care: Caring together. *Alzheimer’s Care Quarterly, 2*(1), 64-72.

Jablonski, R.A., Reed, D., & Maas, M.L. (2005). Care intervention for older adults with Alzheimer’s disease and related dementias: effect of family involvement on cognitive and functional outcomes in nursing homes. *Journal of Gerontological Nursing, 31*(6), 38-48.

Janzen, W. (2001). Long-term care for older adults. The role of the family. *Journal of Gerontological Nursing, 27*(2), 36-43.

Parmenter, G., Cruickshank, M., & Hussain, R. (2012). The social lives of Australian nursing home residents. *Aging & Society, 32*, 329-353.

Port, C.L. (2004). Identifying changeable barriers to family involvement in the nursing home for cognitively impaired residents. *The Gerontologist, 44*(6), 770-778.

Powell, C., Blighe, A., Froggatt, K., McCormack, B., Woodward-Carlton, B., Young, J., Robinson, L., & Downs, M. (2017). Family involvement in timely detection of changes in health of nursing home residents: a qualitative exploratory study. *Journal of Clinical Nursing.* doi: 10.1111/jocn.13906

Shier, G., Ginsburg, M., Howell, J., Volland, P., & Golden, R. (2013). Strong social support services, such as transportation and help for caregivers, can lead to lower health care use and costs. *Health Affairs, 32*(3), 544-551.

Social Work Policy Institute. (2010). *Social work services in nursing homes: toward quality psychosocial care.* Retrieved from http://www.socialworkpolicy.org/research/social-work-services-in-nursing-homes-toward-quality-psychosocial-care.html

Strain, L., & Maxwell, C. (2015). Family caregivers of nursing home residents: Changes in visiting and caregiver well-being. *The Gerontologist, 55*(supplemental 2), 667.

Yamamoto-Mitani, N., Aneshensel, C.S., & Levy-Storms, L. (2002). Patterns of family visiting with institutionalized elders: The case of dementia. *The Journals of Gerontology: Series B, 57*(4), S234-S246.