

Frailty management to age in place. Constructing Inclusive Care.

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In this presentation, the management strategies older people use in order to cope with their frailty is presented. As older people prefer to stay at, the way they handle their current future frailty. In literature, coping with frailty focusses on a decline in health and functioning, a disempowering approach where being a care dependent is exclusionary. However, even people experiencing frailty can achieve a state of wellbeing and be resilient. Based on Dunér and Nordströms multidimensional model of managing in everyday life and the multidimensional frailty approach of the CFAI, in-depth semi-structured focus group interviews were organized with 137 community dwelling older people in Brussels, Belgium. The study results confirm that older people manage changes in their everyday life in three different ways using active, adaptive, and passive managing styles. Moreover, an additional managing style emerges; rejective. As rejective older people are independent and do not act, the degree of independence and activeness are not necessarily correlated. Further, managing styles and multidimensional frailty become dynamic when the relationship is studied. Managing one dimension of frailty leads to changes in the other dimensions, whereas active managing enables even more activeness.

The process of managing frailty highlights that all four managing styles are equally important in terms of detection, yet each type requires another approach in terms of intervention and prevention. For instance, prevention programs should keep older people from turning non-active, while intervention programs should guide rejective older people towards more active managing styles. As a consequence, specific identification of frail community dwelling older people and their managing styles are crucial for evidence based policy and person-centred practice.

With this research we respond the long lasting perception of frail people as passive consumers that do not have mastery over their life. Moreover, as this research is positioned at the core of the Inclusive Care Framework, we aim to achieve the implementation of an empowering and inclusive approach in integrated care, which is perceived as a fundamentally new paradigm for the provision of services to older people in particular and frail people in general.