Learning Guide
Wellness though lifespan stages

27461 Describe indicators of wellness, interventions, care and support for people at different lifespan stages

Name:

Workplace:
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Introduction

This learning guide is about learning about the indicators of wellness and describes interventions, care and support.

How to use your learning guide

This guide supports your learning and prepares you for the unit standard assessment. The activities and scenarios should be used as a general guide for learning.

This guide relates to the following unit standards:
• [27461 Describe indicators of wellness, interventions, care and support for people at different lifespan stages (level 3, version 2)].

This guide is yours to keep. Make it your own by writing notes that help you remember things, or where you need to find more information.

Follow the tips in the notes column.

You may use highlight pens to show important information and ideas, and think about how this information applies to your work.

You might find it helpful to talk to colleagues or your supervisor.

Finish this learning guide before you start on the assessment.

What you will learn

This topic will help you to:
• understand common indicators of wellness through the various life stages.
• identify and describe interventions, cares and supports

More info

If you have a trainer, they should give you all the forms that you need for this topic.
Wellness

Wellness can be thought of as a state, a continuum and a process. The ideal state of wellness is when a person is living a healthy, happy and balanced lifestyle. Looked at in this way, wellness is about more than the absence of disease or injury; it’s a holistic term that includes social, emotional and spiritual functioning.

In reality, everyone is usually on a continuum at some point between an ideal state and a state where aspects of life are less than perfect. Where, and for how long, we are on a continuum changes frequently. This is due to the different aspects that make up wellness for our lifespan stage and the continuous change in our individual personalities. Maintaining wellness is also a dynamic process where we become aware of and continually make choices that affect our state and ideally support us towards being as well as we can be. This process involves learning new life skills from time-to-time, which is where health professionals can provide important interventions, care and support.

Our state of wellness tends to vary at different points in our lives, that is, our wellness can be directly related to our current lifespan stage. There are particular features, capabilities and developmental changes that occur in our typical lifespans or stages of life. These spans are quite broad, and are defined as:

- Infant: from 0 to 23 months
- Child: from 2 to 18 years
- Adult: from 19 to 64 years
- Older person: 65 years and older

Wellness throughout the lifespan stages needs to be viewed as a holistic approach.
Your role as a health assistant

Understanding what is usual or “normal” for a person’s development in each stage will help you determine the wellness of the people you support. It will also help you to identify suitable interventions, care or support that may be required and helpful for a person at that particular age.

Although wellness is a holistic concept, it’s possible to break the topic down into categories that can provide indicators or signs of wellness. These indicators could paint a picture that is positive or negative, but all help piece together where a person is sitting on the wellness continuum.

For all four lifespans, physical, cognitive, emotional and social indicators are relevant. For infants, sensory indicators are also important. For adults and older people, spiritual and occupational indicators are also important. See the coloured areas of the chart below.

<table>
<thead>
<tr>
<th></th>
<th>Sensory</th>
<th>Physical</th>
<th>Cognitive</th>
<th>Emotional</th>
<th>Social</th>
<th>Spiritual</th>
<th>Occupational</th>
</tr>
</thead>
<tbody>
<tr>
<td>Infants</td>
<td></td>
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<tr>
<td>Children</td>
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<tr>
<td>Adults</td>
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<tr>
<td>Older people</td>
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</tr>
</tbody>
</table>
Infants

The following indicators of wellness are the ones most relevant for infants (from 0 to 23 months):

- Physical development
- Sensory development
- Cognitive development
- Emotional development
- Social development

Physical development

Physical development occurs very quickly through the first 23 months of life. An infant develops in:

- size
- weight
- bone strength
- gross motor skills
- fine motor skills

Gross motor skills control the large muscles in the legs, arms, back and shoulders. These skills are needed for sitting, crawling and walking.

Fine motor skills control the small muscles in the fingers and hands. These skills are needed for grasping and holding objects, scribbling and drawing. By three to four months, infants are still unable to grasp objects because they close their hands (reflexively) too early or too late, having no control over these movements. By nine months of age, infants improve their eye-hand coordination, which gives them the ability to grasp, hold and pick up objects.

In the second year, the physical growth rate slows while the motor skills, both gross and fine, continue to progress rapidly. Visual focus continues to mature, so that infants can follow objects with their eyes. They learn how to locate sounds in an area and can turn to see where the sounds are coming from.

Early recognition and treatment of health problems in infants contribute to children reaching their full potential and can prevent death or disability.
Physical milestones include developing motor skills such as, controlling body movements, learning to walk and talk, use tools such as forks and spoons, and controlling bodily functions such as toileting. Infants also get their first set of teeth.

<table>
<thead>
<tr>
<th>Motor skills</th>
<th>Average age of development</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lifts head to face forward when lying flat on stomach</td>
<td>3 months</td>
</tr>
<tr>
<td>Sits with support</td>
<td>4 months</td>
</tr>
<tr>
<td>Rolls over from stomach to back</td>
<td>6 months</td>
</tr>
<tr>
<td>Lifts head to face forward when lying flat on stomach</td>
<td>3 months</td>
</tr>
<tr>
<td>Sits with support</td>
<td>4 months</td>
</tr>
<tr>
<td>Rolls over from stomach to back</td>
<td>6 months</td>
</tr>
<tr>
<td>Sits without support</td>
<td>8 months</td>
</tr>
<tr>
<td>Pushes, pulls</td>
<td></td>
</tr>
<tr>
<td>Crawls</td>
<td></td>
</tr>
<tr>
<td>Walks holding on</td>
<td>9 months</td>
</tr>
<tr>
<td>Walks alone well</td>
<td>12.5 months</td>
</tr>
<tr>
<td>Likes to climb and to crawl up and down stairs</td>
<td></td>
</tr>
<tr>
<td>Walks backwards</td>
<td>18 months</td>
</tr>
<tr>
<td>Kicks a ball</td>
<td>20 months</td>
</tr>
<tr>
<td>Kicks and catches a large ball</td>
<td>24 months</td>
</tr>
<tr>
<td>Strings large beads</td>
<td></td>
</tr>
<tr>
<td>Turns a knob</td>
<td></td>
</tr>
</tbody>
</table>
Nutrition is essential for infants’ development, growth and resistance to disease and illness. Appropriate and adequate nutritional intake is an important contributor to infants’ physical condition.

Infants are initially breast-fed or bottle-fed, with exclusive breastfeeding being, by far, the healthiest option. Solids are slowly introduced at around 6 months of age, until the infant is fully weaned at 18 months to 2 years. Infants need a lot of protein and iron and other nutrients at this time as their bodies and brains are growing rapidly.

**Sensory development**

The senses of taste, touch, smell and sound are well developed at birth. However, accuracy of vision and the ability to focus and recognition of colour, are quite weak for the first months because visual structures in the eye and brain are not yet fully formed.

Infants learn about themselves and their bodies by interacting with the world around them. They suck on their hands and toes and like to explore things with their mouth. They are fascinated with their own hands during this stage of sensory learning. Infants reach for, hit at, and grasp objects that they can touch. They also enjoy toys that make sounds. They can be frightened by loud or unfamiliar noises.

As infants get better at crawling, they learn that they have more control over their world. They are no longer totally dependent on an adult to meet some of their needs. For example, if an infant sees a toy on the floor, or their bottle on a table within reach, they have the motor capacity to move towards it and reach for it.

**Cognitive development**

Infants develop their ability to think, develop language, gain knowledge, solve problems, identify colours, know the difference between such things as one and five, and know how things are similar. They learn through their senses and their interactions with other people and things in the world.

During cognitive development, infants will:

- take an interest in objects that move or can be moved.
• make simple block structures, use simple stacking toys and do simple puzzles.
• be very curious, constantly experimenting with objects.
• take an interest in hidden-object toys.
• group similar objects and sort objects.
• identify pictures in a book.
• enjoy water and sand play.
• scribble on paper.

Emotional development

Emotional development can be seen in the way that infants play, use language, interacts with others and use objects and materials. Infants will:

• explore their world with their eyes, hands and mouth.
• begin to recognise familiar people.
• develop preferences for and express affection for certain people and certain toys.
• imitate other people’s actions.
• play alone.
• like looking at pictures in books and being read to.
• start to learn what is right and wrong through interaction with others.

As infants grow older they are more interested in certain parts of the face. At one month, their gaze is on the hairline of the parent or caregiver. By two months, infants show more interest in the person’s eyes. At three months, infants are interested in the person’s facial expression.

Social development

Social development is about the ability to relate to and interact with others. Infants develop a special interest in people’s faces and voices and smile more at familiar faces than strange ones. They respond to people who they recognise by smiling, turning towards them and holding out their arms to be picked up. They may stop crying when they hear or see someone they recognise. They will seek attention from these people and want contact with them.

At around four months old, infants develop a special friendliness towards one or two chosen people in their world. However, there is little protest when that person leaves the room, especially if there is someone else who can provide comfort and attention. The development of attachment changes this dynamic as the infant develops.

Infants also learn through communication. Initial communication is through crying, which is a general cry to bring attention to their needs.
Later they develop other cries which have different meanings. Infants learn that by crying, cooing or smiling they can cause people to respond to them.

<table>
<thead>
<tr>
<th>Language milestones</th>
<th>Average age of development</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pleasurable gurgling sounds in the back of the throat — often to or with someone</td>
<td>1-2 months</td>
</tr>
<tr>
<td>Babbling: “ba ba ba”</td>
<td>6 months</td>
</tr>
<tr>
<td>Gestures: pointing, waving, holding out their hands</td>
<td>8-12 months</td>
</tr>
<tr>
<td>Speak their first word</td>
<td>13 months</td>
</tr>
<tr>
<td>Dramatic increase in the amount of words known and used</td>
<td>18 months</td>
</tr>
<tr>
<td>Uses two-word sentences: “more book”, “big car”</td>
<td>18-24 months</td>
</tr>
</tbody>
</table>

**General checklist for indicators (signs) of wellness for infants**

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Tick</th>
</tr>
</thead>
<tbody>
<tr>
<td>Are they developing physically at a rate that relates to their age?</td>
<td></td>
</tr>
<tr>
<td>Are they eating and drinking enough?</td>
<td></td>
</tr>
<tr>
<td>Is their weight and height within the limits expected for their age?</td>
<td></td>
</tr>
<tr>
<td>Are they developing emotional and social attachments as expected?</td>
<td></td>
</tr>
<tr>
<td>Are their fine motor and gross motor skills at the level expected for their age?</td>
<td></td>
</tr>
<tr>
<td>Do they react to their physical environment in ways expected for their age?</td>
<td></td>
</tr>
<tr>
<td>Do they sit, crawl, stand, and talk at around the expected times?</td>
<td></td>
</tr>
<tr>
<td>Do they hear sounds?</td>
<td></td>
</tr>
<tr>
<td>Do they reach out to touch objects?</td>
<td></td>
</tr>
</tbody>
</table>
Write

Think of an infant who you have had contact with either recently or in the past. Remember them at a particular point in time. How would you assess how well that infant is or was at that time? Write some notes beside each indicator below.

Age of the infant:

Physical development:

Sensory development:

Cognitive development:

Emotional development:

Social development:
Children

The following indicators of wellness are the ones most relevant for children (from 2 to 18 years):

- Physical development
- Cognitive development
- Emotional development
- Social development

**Physical development**

Physical development continues to happen in a child, but it slows down from the fast rate that occurred in infancy. The brain develops significantly through this period, and children begin to plan their actions and respond to events in their surroundings. The other major physical change is that children get their second set of teeth (permanent teeth).

**Gross motor skills** develop as the child grows. A three-year-old child can run, bounce and jump, and likes to show others their abilities. By the age of four, children can run, jump, skip and fall over, get up and start running again, all without effort. They have enough balance to climb up and down stairs with one foot on each step. Aged five, most children can climb anything and enjoy races with each other and with adults. Balance and coordination continue to develop throughout childhood into the teenage years.

**Fine motor skills** also improve. At three, children can pick up and hold things but might still appear clumsy. They can use blocks to build towers and place large jigsaw puzzle pieces. By four, children have well-developed fine motor skills and can place objects, cut with scissors, pour water into a glass, and draw shapes with a crayon or pencil. By five, they are no longer interested in just building simple towers with blocks but now want to add steeples and door openings. They have improved hand-eye coordination.
By the time a child is 18 years old, they should have excellent control over their fine motor skills. They should be able to pick up very small objects and complete intricate tasks such as threading a needle. Teenagers can also achieve very highly in complex and challenging sports.

**Puberty and adolescence**

At some point between 13 and 18, children go through puberty. They are then often referred to as adolescents or teenagers. The body changes and becomes capable of sexual reproduction. The brain develops the ability to process more information about emotion and thinking. Puberty occurs at different times for each child. It can be affected by weight, nutrition, hereditary factors and hormonal changes.
Physical development for boys includes skeletal growth, increases in height and weight, and sexual maturation. Sexual maturation for boys includes increases in testicular and penis size, appearance of pubic hair, underarm hair, voice changes and growth of facial hair.

Physical development for girls includes breast enlargement, appearance of pubic hair, underarm hair, increase in weight and height and the hips become wider than the shoulder span. Menstruation occurs later in the puberty cycle. Ovulation may not occur at this time or it may not occur with every menstrual cycle. No voice changes occur for girls.

**Nutritional intake** remains an essential component of a child/adolescent’s physical condition. A child needs regular food. Most will eat four to five times a day. It is important that they get a balanced diet and that they get the correct nutrients that they need. They should not eat too much fat or sugar.

Adolescents will go through growth spurts when they need to eat more, but they need to eat healthy food. They should ensure that they are eating the 5+ fruit and vegetables a day, as well as getting plenty of protein from a variety of sources.

**Cognitive development**

From two to five years of age, children understand desires (wanting something) and emotions (feeling happy or sad).

From seven to 11 years of age, children start thinking logically and working through problems. They begin to develop the ability to view things from another person’s perspective. They can begin to control and manage their emotions in different social situations.

**Adolescence**

After puberty, adolescents begin to think about the abstract world. They can think through problems and see consequences of actions. They become more able to talk about ideas and make decisions.

Actions become less impulsive and more controlled, and the basics of social interaction are learned. Adolescents begin to differentiate themselves from others and make choices based on what they perceive the consequences to be.

Five major changes occur to thinking processes:

- adolescents are able to consider what they observe against a backdrop of what is possible. That is, they can think hypothetically. They can understand “what if” situations.
- they become better able to think about abstract ideas. For example, adolescents find it easier than younger children to understand puns, proverbs, metaphors, and analogies. The adolescent can reason and
think logically. They become interested in abstract concepts such as friendship, fairness, democracy and honesty.

- adolescents begin thinking more often about the actual process of thinking. They become self-conscious and can become preoccupied with themselves.

- thinking moves beyond a single issue. They can see things in multiple ways. They are able to understand that people's personalities are not one-sided, or that issues and situations in society can have different interpretations. They can appreciate different points of view.

- adolescents may begin to challenge ideas and are less likely to accept a fact as being correct or the truth. They are continually questioning and challenging other people's ideas.

**Emotional development**

Children understand basic emotions well, from observing them in others and in themselves. Aggression generally appears in the second year, sparking the temper tantrums of the “terrible twos”, but by the age of four, children are usually self-aware enough to be able to manage their emotions more effectively, and to feel empathy.

From five to 10, children recognise and interpret complex emotions. They feel sensitive to the distress of others and can be deeply affected by shame.

**Adolescents**

Adolescents experience significant emotional changes, including highs and lows and feeling “moody”. This is as a result of:

- hormonal changes.
- environmental experiences such as stress, eating patterns, sexual activity and social relationships.

The young person is experiencing physical and emotional changes that they have little or no control over. They often develop a heightened self-consciousness. They can be overly sensitive about their appearance. They may worry about personal issues that are very important to them, but are hardly noticeable to others. For example, a bad haircut, a pimple or clothes that are different to the way others dress become large issues in their life.

Adolescent depression has a significant impact on their development and wellbeing. Depression can affect their school performance, work performance, friendships and family relationships. It can increase or make worse other health issues such as obesity and asthma. Depression can lead to drug and alcohol abuse, and suicide attempts.

Moods usually become less extreme over time as the adolescent moves into adulthood.
Social development

A child’s social development is influenced by multiple factors including the family/whānau, relationships with other children and television. An indicator of wellness is that a child socially interacts, plays and communicates with others.

Children should also develop their language skills. At around three, children can talk about things not physically present or about things that happened in the past. Children learn approximately five to eight new words and meanings a day between the ages of one and six. From about six, children learn approximately 22 new words and meanings a day.

Adolescents

Adolescents understand that they play different roles depending on who they are with. For example, they behave differently with teachers, friends or parents/care givers. An adolescent’s friends and peers become very important to them. They are usually people with similar interests and abilities and they will often behave in a way that mirrors those around them. They will try to “fit in” by wearing similar clothes and participating in similar activities to those in their close social groups.

General checklist for indicators (signs) of wellness for children

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Tick</th>
</tr>
</thead>
<tbody>
<tr>
<td>Are they physically developing as expected for their age?</td>
<td></td>
</tr>
<tr>
<td>Have they gone through puberty by the age of 18?</td>
<td></td>
</tr>
<tr>
<td>Do they appear to have any emotional or behavioural disorders?</td>
<td></td>
</tr>
<tr>
<td>Can they establish and maintain friendships?</td>
<td></td>
</tr>
<tr>
<td>Are they achieving academically at school?</td>
<td></td>
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<tr>
<td>Do they participate in activities?</td>
<td></td>
</tr>
<tr>
<td>Do they play with other children?</td>
<td></td>
</tr>
<tr>
<td>Do they have any disability that stops them from taking part in activities?</td>
<td></td>
</tr>
<tr>
<td>Are they overweight?</td>
<td></td>
</tr>
<tr>
<td>Question</td>
<td></td>
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<tr>
<td>-------------------------------------------------------------------------</td>
<td></td>
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<tr>
<td>Are they underweight?</td>
<td></td>
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<tr>
<td>Do they get anxious in certain situations?</td>
<td></td>
</tr>
<tr>
<td>Do they have trouble making friends?</td>
<td></td>
</tr>
<tr>
<td>Do they have trouble with fine motor skills or gross motor skills?</td>
<td></td>
</tr>
<tr>
<td>Are they susceptible to illness?</td>
<td></td>
</tr>
<tr>
<td>Are they getting the nutrition that they need?</td>
<td></td>
</tr>
<tr>
<td>Do they suffer from any allergies or illnesses that affect their quality of life?</td>
<td></td>
</tr>
<tr>
<td>Do they have lots of energy? No energy?</td>
<td></td>
</tr>
<tr>
<td>Are they getting enough sleep?</td>
<td></td>
</tr>
<tr>
<td>Do they get regular exercise?</td>
<td></td>
</tr>
<tr>
<td>Do they control their emotions such as anger and frustration?</td>
<td></td>
</tr>
<tr>
<td>Do they seem depressed or anxious?</td>
<td></td>
</tr>
</tbody>
</table>
Write

Think of a child who you have had contact with either recently or in the past. It could be you at an earlier age. Remember that child at a particular point in time. How would you assess how well that child is or was? Write some notes beside each indicator below.

Age of the child:

Physical development:

Cognitive development:

Emotional development:

Social development:
Adults

The following indicators of wellness are the ones most relevant for adults (from 19 to 64 years):

- Physical wellness
- Cognitive wellness
- Emotional wellness
- Social wellness
- Spiritual wellness
- Occupational wellness

Physical wellness

Adults’ physical wellness will depend on their weight, diet, exercise, mobility and the presence of any medical conditions, such as high blood pressure or high cholesterol. The lifestyle opportunities and choices available to an adult have an important role in their physical wellness and may affect them in later life. Examples here include choices around safe sex, smoking and use or overuse of alcohol or other drugs.

As adults age, muscle tone and strength are likely to decrease. Coordination may decrease and reaction time may slow. Therefore, it is important that adults remain physically active to retain their muscle tone and condition for as long as possible. Adults should also ensure they keep their nutrition and exercise at healthy levels. Getting sufficient sleep is also important to a person in this lifespan stage.

Adult guidelines for physical activity were developed by the Hillary Commission (now Sport New Zealand) in consultation with the Ministry of Health in 2001.
**Nutritional intake** is very important to an adult’s wellness. Adults need to make sure their diet provides them with adequate and appropriate nutrition. Adults should have enough energy to get through the day and to perform all the daily tasks as well as any extra activities. An adult with a good nutritional intake will:

- have a stronger immune system.
- be less susceptible to infection or disease.
- be better able to heal injuries or wounds.
- recover from infection.

Lack of nutrition can be an issue for some people in late adulthood. Their diet may have insufficient vitamins or minerals, or eating habits of previous years may catch up with them, for example, osteoporosis from a lack of calcium.

Examples of changes that can occur as adults age (mid-life onwards) that could affect their physical wellness are described in the table below.

Changes that can occur to the major systems of the body from mid-life onwards are:

<table>
<thead>
<tr>
<th>Body system</th>
<th>Changes noticed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Respiratory: breathing</td>
<td>Exercise becomes more difficult as oxygen uptake ability declines.</td>
</tr>
<tr>
<td>Integumentary: skin</td>
<td>Elasticity of cells gradually declines. (This happens more rapidly in areas that have been exposed to the sun.)</td>
</tr>
<tr>
<td>Circulatory: blood pressure</td>
<td>Decreased elasticity of arteries can lead to increased blood pressure.</td>
</tr>
<tr>
<td>Sensory: sight and smell</td>
<td>Lens of eye thickens and there is a loss of elasticity which reduces acuity for reading.</td>
</tr>
<tr>
<td></td>
<td>Smell ability diminishes.</td>
</tr>
<tr>
<td>Musculo-skeletal and nervous system: strength and coordination</td>
<td>Reduced strength due to loss of muscle mass.</td>
</tr>
<tr>
<td>Reproductive</td>
<td>Reduced secretion and fertility.</td>
</tr>
</tbody>
</table>
Cognitive wellness

Indicators of wellness in adults are: fully developed reasoning, problem solving, decision making and other cognitive skills. An adult should be able to think reflectively, have fast and accurate memory, thought processing and recall. Late adulthood may see the slowing down of some processing and recall, among other cognitive abilities.

Emotional wellness

Emotional status includes feelings of happiness and satisfaction. Indicators of wellness include a positive outlook on life. Depression can be an indicator that the person is not well physically.

Being able to cope with stress and anxiety is an indicator of wellness. If a person finds him or herself getting anxious and stressed regularly then this is an indicator that they are not well. Being able to maintain a sense of humour and control anger are indicators of wellness. Coping with financial obligations, meeting challenges, managing stress, enjoying life at home and work, making and keeping friends and feeling confident are all indicators of wellness.

Social wellness

Indicators of wellness are the presence of functional and fulfilling relationships. Adults that are well tend to take part in and enjoy social interactions, participate as part of family and engage in work or leisure events. Adults also perceive that they have an important role in their communities; they may feel needed by others and are more productive and useful.

Spiritual wellness

Spiritual wellness is about someone’s connection to a deity or the universe. Each person experiences spiritual wellness differently. Some adults find that a spiritual belief gives them comfort and a sense of belonging or connection to their environment. Experiencing an active spiritual life can help an adult to feel a part of a greater good or give them strength to cope with life’s challenges.

Occupational wellness

Occupational wellness is a significant indicator of wellness for adults. Having paid employment that allows an adult to provide for their family and maintain a comfortable lifestyle can all contribute to a person’s wellness. The income from paid employment can also allow the person to take advantage of leisure opportunities, good health care and good nutrition. A job, whether paid or unpaid, can also allow an adult to feel that they are contributing to society.
However, a job that is very busy, involves long hours or a lot of responsibility can contribute to a person feeling stressed and may even cause them to become unwell or be unhappy. A person who is not in paid employment, but is looking for a job, may also experience stress and/or negative self-esteem.
### General checklist for indicators (signs) of wellness for adults

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Tick</th>
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</thead>
<tbody>
<tr>
<td>Do they have enough energy to get through the day and perform all the daily tasks as well as extra activities?</td>
<td></td>
</tr>
<tr>
<td>Do they eat well, and get enough calories, vitamins, minerals and other nutrients from their food?</td>
<td></td>
</tr>
<tr>
<td>Do they experience feelings of happiness and satisfaction?</td>
<td></td>
</tr>
<tr>
<td>Can they cope with stress and anxiety?</td>
<td></td>
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<tr>
<td>Do they find themselves getting anxious and stressed regularly?</td>
<td></td>
</tr>
<tr>
<td>Do they have a sense of humour?</td>
<td></td>
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<tr>
<td>Can they control their behaviour and/or anger?</td>
<td></td>
</tr>
<tr>
<td>Can they cope with financial obligations?</td>
<td></td>
</tr>
<tr>
<td>Can they meet challenges?</td>
<td></td>
</tr>
<tr>
<td>Do they enjoy life at home and work?</td>
<td></td>
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<tr>
<td>Do they make and keep friends?</td>
<td></td>
</tr>
<tr>
<td>Do they feel confident?</td>
<td></td>
</tr>
<tr>
<td>Do they keep physically fit and active?</td>
<td></td>
</tr>
<tr>
<td>Do they get enough sleep?</td>
<td></td>
</tr>
<tr>
<td>Do they feel their spiritual needs are being met?</td>
<td></td>
</tr>
</tbody>
</table>
Think of an adult. It could be you. How would you assess how well that adult is? Write some notes beside each indicator below.

Age of the adult:

Physical wellness:

Cognitive wellness:

Emotional wellness:

Social wellness:

Spiritual wellness:

Occupational wellness:
Older people

The following indicators of wellness are the ones most relevant for older people (over 65 years):

- Physical wellness
- Cognitive wellness
- Emotional wellness
- Social wellness
- Spiritual wellness
- Occupational wellness

Physical wellness

Our physical condition declines as a natural consequence of ageing. For older people, indicators of physical wellness are the choices and adaptations made within that context. For example, the senses may no longer be as acute, so older people may need to be able to access appropriate supports such as hearing aids or glasses.

Other examples of positive choices that older people can make:

- maintaining regular physical activity.
- having an adequate and appropriate nutritional intake.
- reducing or stopping the use of tobacco, drugs and excessive alcohol.

Cognitive wellness

As a person ages, they need to remain cognitively challenged by having the opportunity to participate in creative or stimulating mental activities. They may wish to learn new skills or adapt the way they participate in familiar and pleasurable activities.

The onset of dementia is a major risk to people as they age. Dementia is a set of degenerative disorders where so many aspects of thought and behaviour are affected that the ability to manage daily life gradually becomes impossible.

Emotional wellness

A person’s emotional wellness is about having awareness and acceptance of their own feelings. Older people experience an increasing number of major life changes, so indicators of wellness include the ability to manage the emotions that come with these changing circumstances, such as:

- loved ones and peers dying.
- family members moving away.
- retirement or other loss of employment.
- changes in their physical condition.
• fear of being alone or dying.

Social wellness

For older people, maintaining social contacts and interactions are important indicators of wellness. Older adults need the opportunity to engage in activities that are relaxing, enjoyable or give companionship. For example, spending time with friends and family, engaging in hobbies or in other activities and outings with others.

Spiritual wellness

Spiritual wellness enhances people’s understanding about their purpose in life or the meaning of their life. Indicators of spiritual wellness might include a sense of contentment, peace or engaging in spiritual activities, such as:

• worshipping.
• practising meditation or relaxation techniques.
• performing community service.
• spending time in natural environments.

Occupational wellness

Occupational wellness is when people have a personal satisfaction in their life through paid or voluntary work. Indicators of wellness are:

• the ability to participate in activities that contribute in some way to the community or environment.
• the opportunity to be in paid employment that provides financial resources.
• the opportunity to be in unpaid work that provides interest and a sense of purpose.
• the opportunity to feel useful, valuable or needed.
### General checklist for indicators (signs) of wellness for older people

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Tick</th>
</tr>
</thead>
<tbody>
<tr>
<td>Do they have enough energy to get through the day and perform all the daily tasks as well as extra activities?</td>
<td></td>
</tr>
<tr>
<td>Do they eat well?</td>
<td></td>
</tr>
<tr>
<td>Are they physically strong, with good balance?</td>
<td></td>
</tr>
<tr>
<td>Are they happy, motivated and enjoying life?</td>
<td></td>
</tr>
<tr>
<td>Do they participate in physical activity?</td>
<td></td>
</tr>
<tr>
<td>Do they socialise?</td>
<td></td>
</tr>
<tr>
<td>Do they manage independently?</td>
<td></td>
</tr>
<tr>
<td>Are they managing any medications that they have been prescribed?</td>
<td></td>
</tr>
<tr>
<td>Are they meeting their spiritual needs?</td>
<td></td>
</tr>
<tr>
<td>Do they see friends or family regularly?</td>
<td></td>
</tr>
<tr>
<td>Are they able to get out in the community to attend social or religious events?</td>
<td></td>
</tr>
<tr>
<td>Are they cognitively alert?</td>
<td></td>
</tr>
</tbody>
</table>
Think of an older person. How would you assess how well that person is? Write some notes beside each indicator below.

Age of the older person:

Physical wellness:

Cognitive wellness:

Emotional wellness:

Social wellness:

Spiritual wellness:

Occupational wellness:
Interventions, care and support

Because wellness is a continuum, the lifestyle choices that people make have a major effect on their wellness, for better or for worse. This is an area where health professionals can have a major impact, by:

- offering people ideas, approaches and resources that are new to them.
- supporting people to implement positive changes that they have already chosen for themselves.

The assistance provided by health professionals can be described as interventions, care and support. An intervention is a planned approach that the person being supported needs to complete to achieve a specific outcome. Care is the general type of service that is being offered. Support describes sources of assistance that are readily available to the person being supported.

Sometimes these forms of assistance address a particular condition, and sometimes they are as simple as creating balance to the three key factors, which are essential to general health: nutrition, exercise and sleep. These physical factors support people’s general wellbeing by helping to keep moods stable, energy levels up and cognitive functioning working.

Wellness intervention programs are usually education and teaching resources, sometimes paired with supports, such as coaching, that will help the individual maintain or transform lifestyle behaviours. For example, weight management and stress management programs.

Cares are general services that focus on unique issues related to that person. For example, health-risk appraisals, alcoholism, loss and grief, depression and anxiety, etc.

It is the health professional’s responsibility to ensure that all these aspects are suited to the person’s lifespan and wellness, and linked in to their service plan.

Examples of interventions, care and supports include:

- referrals to appropriate services, for example, local Plunket groups, nutrition screening, smoking cessation, or home support.
- additional learning support, such as individual education plans or individual learning plans.
- referral to specialist services, for example palliative care.
- provision of appropriate services or supports, for example installing handrails, supplying taxi mobility vouchers, assistance with activities of daily living and providing adaptive tools.
- facilitation of social interaction, for example assisting a person to attend activities or events.
• provision of information and education to the person being supported, for example, on diet, exercise, and how to connect to community supports and local activities.
• provision of medications and access to medical care.

Example: Katherine

Lifespan: Katherine is 70 years old.

Indicators of wellness: Katherine recently fell and broke her leg. She is about to return home with her leg in plaster after a short stay in hospital. Other aspects of her physical wellness are fine, and she has never previously received home support help. She is cognitively and socially well, and usually attends weekly leisure groups in town, which she wants to return to as soon as possible. However, her emotional wellness is low since the fall as she has lost some confidence in her independence and is now starting to worry about her future.

Interventions offered to Katherine

• The hospital’s physiotherapist assigned Katherine an exercise programme.
• The healthcare assistant who will be supporting Katherine at home is delegated to encourage Katherine to talk each day about how she is feeling, and to report on this aspect.

Care offered to Katherine

Katherine’s care includes the transition from hospital care to home-based support. During her time in hospital, Katherine received care for her immediate needs from various members of the interdisciplinary team brought together to manage her situation. This team included those dealing with her physical needs as well as her psychological ones. For example, the therapy assistant worked with her on her exercises, supervising the practice of the skills.

This team has made the appropriate referrals and recommendations for Katherine to be able to receive home-based support that will meet her needs. For example, the therapy assistant visited Katherine’s home to report back on what practical resources might be required.

Support offered to Katherine

• Hospital-based volunteer visitors gave emotional support.
• Community-based volunteer drivers gave practical and social support, by driving Katherine to her leisure groups.
• Natural supports in the form of friends from the leisure groups gave emotional and social support by making a special effort to stay in contact with her during this time, and setting her up on Facebook as a way of staying in touch.