DESIGN OF INTERACTIVE COMPUTATIONAL MEDIA

THE CHALLENGES OF CREATING SOLUTIONS FOR THE AGING POPULATION

Guest Lecture by Anne Remmel, B. Sc., M. Ed., January 12, 1998

INTRODUCTION

- Why the aging population is important
- Aging baby-boomers (born 1947-1966)
- In 1996, there were 9.8 million 35 year olds, almost 33% of the total population.
- Canada's baby boom was the loudest of Western nations-not only did Canadian women average 4 children each, but significant immigration
- when 1/3 of the population talks about a product-we notice
- Planning and products powerfully driven by demographics
- During the 1990s, the front end of the baby boom will cause the 45-54 age category to explode by 50% while the back end, aged 35 to 44 will increase by 20 %. (David Foot Boom Echo and Bust)

- The boomers will be the largest cohort of seniors
- in Canada-powerful shifts-look at low-fat foods, golf vs. tennis, Martini clubs vs. cheap-wines, safety features in cars, downtown condos, cruises, oldies radio stations, etc.

WHAT DO WE KNOW ABOUT AGING?

- popular myths, stereotypes and Ageism
- images from own families
- beliefs and values drawn from different cultures, e.g. Chinese and monster homes
- first-hand experience

MY EXPERIENCE/ BACKGROUND

- Baycrest Centre for Geriatric Care -
- 4 years/Director Education and Organizational Development
- Developed Seniors Computer Club
- worked with introducing technology to seniors
- developed self study center
- graduate degree in Adult Education
- undergraduate in occupational therapy

- doctoral studies in innovation and technology
- interest in how you introduce technology-the people side of the equation, technology adoption,
- creativity, innovation and leadership

FIELDS OF RESEARCH IN AGING

(reference list)

1.Psychology

- -focus on memory and neurological changes
- -Rotman Research Institute
- -normal memory research
- -depression and aging

2. Sociology of aging (Gerontology)

- -group behaviors
- -cultural differences
- -aging workforce
- -families with aging members

3. Geriatric Medicine -study of diseases in aging -complexities and multiplier effects -medical, social and psychological factors combined -disease processes -impact on function e.g. Altzheimers, Parkinson's Osteoarthritis, heart disease, -consider impact on daily functioning

4. Family Therapy
-impact of aging on families
-multi-generational therapy issues
-acceptance of elderly within
families
-children who have moved awaylonliness
-conflicts, isolation

5. Adult Education -adult learners and life-long

learning

-self-directed learning

-maturation processes and learning

-how adults learn different from children-bring own experience, relate to past knowledge

-environment of learning NB

-Kolb and Fry, Learning Stylessome like to start with experimentation, some like concepts first, some like reflection first, some like action first-

6. Biological/physiological

-the process of cell-level aging

-chemical changes e.g. estrogen production

-changes in brain function

Adoption of Technology

- 1. What do we know about how people adopt new technology?
- 2. How do we know what will be useful for the user?
- 3. How does aging impact adoption of software/hardware?
- 4. How do we have to anticipate/accommodate the aging population's special needs and requirements?

NEEDS ASSESSMENT

- 1. Do not assume that "aging population" is a homogeneous group
- 2. Conduct your own needs assessment-ask the client directly
- 3. On-line computer clubs e.g.
 Seniors Computer Information
 Project
 http:www.mbnet.mb.ca/crm/
 -Older Adults and Learning
 Technologies in partnership with
 University of Regina
- 4. Interview directly e.g. Baycrest Seniors Club-conducted minineeds analysis found "social needs" most important

SOME CONSIDERATIONS FOR DESIGN PROBLEM DEVELOPMENT

- 1. Physical challenges of the elderly: dexterity, vision, hearing, tremors, reach, strength, reaction time, etc.
- e.g. seniors club-mouse moves too fast, icons too small, sounds distorted, multiple stimuli confusing
- 2. <u>Psychological challenges</u>: do not want to appear foolish; how to relate to past experience, how to make meaningful
- 3. <u>Learning styles</u> how to accommodate different learning styles, how to reach all types of

learners, how to build in memory supports etc.

- 4. Social factors: many seniors are isolated, housebound, e.g. email a natural tool for keeping in touch, use the social leverage to learn new tasks-family contact a strong motivation
- 5. Motivations: many seniors limited by mobility computers become important ways to stay connected to the world, learning motivation e.g.hobbies, collections, keeping the brain stimulated key to healthy aging
- 6. Memory challenge: loss of memory, greater need for cues and reminders, repetitive learning patterns, hooks to past experiences

EXAMPLES FROM THE LITERATURE

- 1. Robotic technologies: systems that can sense ,think and act (Englehardt, Gougler)
- 2. Care for care-givers-support for decision-making in Alzheimer care (Brennan, Moore, Smythe)
- 3. Movement disorders, with advanced age mouse use becomes difficult-assistive computer interfacing techniques become critical (Riviere, Thankor)
- 4. Memory prosthesis-significant increase in compliance in taking medications(Milch, Evans, Hillebrand)

- 5. Use of mouse to strengthen grasp
- 6. Computer games to assess attitudes, responses, motivation of chronic schizophrenics

CONCLUSION

1.ask the user, test with the user, include the user in design