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Poster

Engaging older adults in health care research and policy: Guidelines from the CHOICE project

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Abstract

Introduction: Engaging the community in health care research and planning has been recognized as an important component of system improvement (1). The input and involvement of older persons is particularly critical, given that older adults are high users of the health care system, but are often excluded from health research studies. Unfortunately, guidelines for how to engage older adults in these initiatives are not readily available in the literature.

Aim: Guidelines for engaging older adults and their families in health care research and policy will be presented, based on the CHOICE (Choosing Healthcare Options by Involving Canada's Elderly) knowledge synthesis project.

Methods: In the CHOICE project, we conducted a realist synthesis (2-3) of available knowledge on strategies for engagement of older adults and their families (including other informal caregivers) in health care. The search methodology was informed by a framework for realist syntheses (4) as well as Arksey and O'Malley's (5) design considerations for scoping reviews. Our synthesis encompassed theoretical frameworks and peer-reviewed and grey literature. Expert consultation included interviews with academics (n=5), two focus group interviews with seniors and families, and two half-day workshops organized with our partner Patients Canada.

Results: The initial search generated over 15,000 articles; of these, 1,624 identified as relevant to health care research and planning were retained for further review. Theoretical and empirical work identifies a range of strategies and levels of engagement of older adults and their families in health care research and policy. This project reveals that level of involvement should be authentic; appropriate for both the desired level of engagement of older adults and matched by the ability of the system to realize this involvement.

Conclusions: Guidelines and recommendations for the engagement of older adults, their families and caregivers in health care research and policy have been developed.

Limitations: Due to the limited available information specifically focused on engagement of older adults (65+), our search strategy included papers focusing on engagement of all adults over 18 years of age, which may have limited the applicability of some of the findings. To overcome this, we held focus group interviews with older adults to review and interpret the study findings and develop recommendations specific to this population.

Suggestions for future research: We plan to test the guidelines and recommendations from the CHOICE project, in collaboration with members of our SHARP (Seniors Helping as Research Partners) network.

Keywords

older adults; engagement; realist synthesis; health care research; health care policy

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