

dementia and their carers, who are volunteers, not patients, need special consideration. While this marks the start of TFD engagement with EDI issues, we hope by sharing our experiences will offer inspiration and confidence to other educators in psychogeriatrics to engage with these issues.

P148: Montessori as a tool to engage the elderly with dementia – literature review

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Objective: The aim of this review was to describe the usage and efficacy of Montessori senior methods of engaging the elderly with dementia reported in the existing literature.

Methods: Three databases were searched (PubMed, EMBASE, Scopus) using the key words “Montessori” “senior”. No date restrictions were placed. Inclusion criteria specified: language of the article (English), type of article (research) and the necessity of the Montessori intervention being directed at seniors.

Results: The search initially identified 15 articles. After eliminating duplicates and evaluating titles and abstracts three studies were included in the review. One focused on staff-led Montessori interventions, and two analyzed the effectiveness and benefits of elderly-led interventions – residents of facilities who were screened using MMS and trained to provide activities for their less lower cognitive functioning peers were selected. The total number of participants from all studies was: 55 people (10 leaders and 45 participants). All three studies reported positive, statistically significant improvements in participants’ functioning. All studies used the MPES to assess psychological variables (constructive engagement (CE), passive engagement (PE), other engagement (OE), pleasure (P).

In first study (Skrajner&Camp, 2007) (CE: $p<0.01$ and $p<0.001$); OE: $p<0.001$, $p<0.01$; NE: $p<0.05$, $p<0.01$; P: $p<0.01$, $p<0.05$) classes conducted using the Montessori method were significantly more effective than those conducted using the traditional method among the same group of seniors.

Other two studies reported improvement among observations during Montessori classes scores vs scores during regular activities – Camp and Skrajner, 2004 - CE: $p<0.01$; OE: $p<0.001$; P: $p<0.06$); Orsulic-Jeras, Judge, Camp, 200 - CE: $p<0.01$, Affect Rating Scale: Pleasure: $p<0.001$ (treatment), $p<0.03$ (time), Anxiety/Fear: $p<0.003$ (treatment), $p<0.003$ (time)).

Conclusion: The research identified indicates the positive impact that Montessori-based programmes can have on elderly people with dementia. More studies need to be conducted, because the number of participants in the current study is relatively small. Further research with larger number of participants is needed to fully prove the effectiveness of Montessori programs implemented delivered to or by older people.

P156: The Development of the PET@home Toolkit using the refined Experience-Based Co- Design Method (EBCD+)

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Objective: The relevance of pets in long-term home care is increasingly recognized due to their positive effects on health outcomes in clients, and the growing numbers of pet-owning clients receiving long-term care at home (LTCH). In the Netherlands, there is a lack of supportive materials concerning pet-related issues in LTCH. The aim of this project was to develop materials to support care for LTCH-clients with pets. Using a participatory research approach, LTCH-clients with pets, family caregivers, and professional caregivers collaborated using the Experience-Based Co-Design (EBCD) method that we fine-tuned for frail clients (EBCD+) to create the PET@Home Toolkit.

Methods: The project started with a literature review on the roles of pets for older adults. To determine if similar roles were also relevant in LTCH, individual interviews were conducted with LTCH-clients, family caregivers, and professional caregivers. Thereafter, the original EBCD-method was used including group interviews with (1) LTCH-clients and family, (2) professional caregivers (3) mixed groups of (1) and (2). Participants could participate in multiple phases. Professional caregivers preferred online and weekday meetings and LTCH-clients and family caregivers preferred in person and weekend meetings. Therefore, we organized additional interviews, and separate online and in-person groups. Hence, the EBCD+ method included a review, complementary interviews, the original EBCD-method and continuous refinement and testing of instruments.

Results: The review and complementary interviews revealed similar roles related to pets in LTCH (e.g. Relational Aspects, Physical Health, and Social Aspects) to those as in the review on older adults. Based on the results, preliminary tools were developed, e.g., an information brochure. Furthermore, we conducted 14 semi-structured interviews, 6 focus groups, a psychology students workshop, and 4 online meetings with experts in human-animal interaction, education, and animal interest organizations (e.g., a veterinarian). It resulted in the Toolkit with different instruments, e.g., information brochure, e-learning module, and infographic.

Conclusion: We successfully used the EBCD+ method to develop an extensive and practically applicable Toolkit to support caregivers and their pet-owning LTCH-clients. The PET@home Toolkit will be available via the University Knowledge network for Older adult care Nijmegen (www.ukonnetwerk.nl).

P162: Ageism among Lebanese Healthcare Workers and Students

Authors: Rita Khoury, Sabine Allam, Alondra Barakat, Sara Moussa

Objective: Ageism, defined as stereotyping, prejudice, or discrimination against older people, is an emerging public health concern [1]. Ageist attitudes and behaviors in health care are found to negatively affect the physical and mental well-being of older individuals [2]. This study is the first to investigate ageism and its determinants in Lebanese healthcare settings.

Methods: We diffused an online survey including the Fraboni Scale for Ageism (FSA) [3] and other variables to nurses, physicians, nursing, and medical students at an urban university hospital in Lebanon. We obtained online consent from participants prior to filling the survey. The study was approved by the Institutional Review Board of St. Georges Hospital University Medical Center (IRB-REC/O/066-21/3321).

Results: We recruited 233 participants (47.2% medical students, 21.5% nurses, 20.6% physicians and 10.7% nursing students). Mean age was 29.2 (Standard Deviation—SD = 12) years. Almost two-thirds were female. Half the sample came from rural areas. Almost 60% currently live or have lived with an adult aged ≥ 60 years. The FSA total score ranged between 33 and 87 (mean 58.9; SD 10.2). The mean/SD scores were 22.6 (4.5), 17.2 (3.2) and 19.1 (4.3) for the antilocution, discrimination and avoidance subscales of the FSA respectively. There was a positive correlation between age and FSA total score ($p=0.041$), in addition to discrimination and avoidance