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**Ageing and Vision Impairment:
Activity, Independence and Life Satisfaction**

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Gretchen Ann Good

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Abstract

Vision impairment profoundly affects older people, yet we do not know specifically which areas of daily living are most affected by vision impairment. Nor do we know how daily levels of activity and independence differ for this population compared to others their age. Understanding these differences can enhance goal-setting practices and improve rehabilitation services for older individuals with impaired vision. This study examined activity, independence and life satisfaction of older adults living in the Manawatu region of the North Island of New Zealand, using an adapted model of the World Health Organization's International Classification of Functioning, Disability and Health. The adapted model introduced subjective dimensions of functioning including satisfaction with activity, independence and life. This study was conducted with registered members of the Royal New Zealand Foundation of the Blind and with a random selection of registered voters in the region. Results indicated that both age and vision impairment had significant main effects on activity and independence. An interaction of age and vision had effect on the number of recently relinquished activities participants reported, social comparisons of activity and independence, and on satisfaction with independence and with life. An examination of age cohorts assisted in an improved understanding of daily functioning for this population. Unique findings were that social comparison of activity and satisfaction with social support contributed more to overall life satisfaction than did activity and independence levels. Unexpectedly, the oldest age cohort of those with impaired vision reported a higher level of overall life satisfaction than did their sighted peers in the oldest age cohort or younger cohorts with impaired vision. Results of this study will enable a better

understanding of daily life for older people, and the differences which can be attributed to vision impairment. Older people and those that provide rehabilitation services to them can use this information to set more realistic and appropriate goals for rehabilitation. The results of this study will also allow those involved in personnel preparation programmes to develop curricula to improve new practitioners' understanding of typical daily life of older people with and without impaired vision.

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Dedication

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Notes on the Text

- The choice of language used in this thesis has been explained in Appendix A, an extended glossary of terms.
- Some of the analyses have been presented in text form for easier access to those using electronic formats for speech access. Tables have been presented in appendices.
- Any deviations from the American Psychological Association (APA) style are purposeful and for ease of visual access.

Abbreviations

ABC	Association of Blind Citizens of New Zealand, Inc.
ACVREP	Academy for Certification of Vision Rehabilitation and Education Professionals
ADA	Americans with Disabilities Act
ADL	Activities of daily living
AER	Association for Education and Rehabilitation of the Blind and Visually Impaired
ANOVA	Analysis of variance
APA	American Psychological Association
AQOL	Australian Quality of Life Measure
ARMD	Age-related macular degeneration
BADL	Basic activities of daily living
COPD	Chronic obstructive pulmonary disease
COPM	Canadian Occupational Performance Measure
CVRT	Certified vision rehabilitation therapist
DPA	DPA-NZ, The National Assembly of People with Disabilities
FAI	Frenchay Activities Index
FIMBA	Functional Independence Measure for Blind Adults
HFA	Health Funding Authority
IADL	Instrumental activities of daily living
ICF	International Classification of Functioning, Disability and Health
ICIDH	International Classification of Impairments, Disabilities and Handicaps
IWRP	Individual Written Rehabilitation Plan
<i>M</i>	Mean (arithmetic average)

MCBTC	Michigan Commission for the Blind Training Center
MUHEC	Massey University Human Ethics Committee
MSD	Ministry of Social Development
NCHS	National Center for Health Statistics
O&M	Orientation and mobility
PANAS	Positive and Negative Affect Scale
QOL	Quality of life
RNZFB	Royal New Zealand Foundation of the Blind Formerly known as the Royal New Zealand Foundation <i>for</i> the Blind
RT	Rehabilitation teacher or rehabilitation teaching
SD	Standard deviation
SPSS	Statistical Package for the Social Sciences
SSQ	Social Support Questionnaire
SWLS	Satisfaction with Life Scale
V.I.	Vision impairment, vision impaired
VFQ	Visual Function Questionnaire
WHO	World Health Organization

Outline of Thesis

This thesis is presented in five chapters. Chapter One provides a broad overview of the topic under research, ageing and vision impairment. Also presented in the first chapter are the research problem and an introduction to the classification framework to be adapted for use in this study, the International Classification of Functioning, Disability and Health (ICF).

Chapter Two provides an in-depth review of literature related to ageing, activity, independence, life satisfaction and vision impairment, resulting in a revised model for investigating the research questions, and the hypotheses to be tested. In the revised model of the ICF developed for this study, subjective dimensions of functioning are identified as important factors to consider when exploring the effect of impaired vision on older people.

Chapter Three is an explanation of the methods used to test the hypotheses and explore the research questions. The design of the study, the measures used and the statistical methods used in this study are described.

Chapter Four is a presentation of the results of the statistical analyses of the survey data. Descriptive details about the participants and comparisons of demographic details of those with impaired vision and those with sight are provided as well as descriptions of demographic characteristics within the three age cohorts. Analyses are presented to explore each of the research questions and their associated hypotheses.

Chapter Five is a discussion of the findings in relation to the literature, previous studies and the adapted ICF model used in this study. Conclusions are drawn about how this information can inform research and assist educators and practitioners as they deliver rehabilitation services to older people with impaired vision.