# geing M Ageing Mind Initiative Issue 50, March 2022 Newsletter https://ami.group.uq.edu.au/

Our 50<sup>th</sup> edition of the Newsletter has coincided with the "rain bomb" that lead to mass flooding across South East Queensland. Approximately 1,450 gigalites of water entered Wivenhoe Dam over three days, taking its storage levels from under 60% to 183%. The Brisbane River peaked at 3.85m (2011 floods reached 4.56m) and caused devastation to as many as 15000 houses. Our thoughts are with all those impacted by the floods. Please view some information that may be of use on page 2 of the Newsletter.

Fortunately, the Ageing Mind Initiative is a virtual hub and as such, not vulnerable to flood waters. Our researchers are hard at work, getting themselves and their projects back into the swing of things. As for the rest of UQ, Professor Terry stated that "while

there is significant damage to facilities and infrastructure, I am very pleased to say that our staff, students and animals at UQ locations are safe". Over the past week, there has again been an extraordinary amount of work done by staff and volunteers to clean up areas around the University of Queensland and make sure they are safe to access.

While it is not the celebratory edition we were hoping for, we hope you still enjoy the 50<sup>th</sup> Newsletter of the Ageing Mind Initiative.



**ISSUE QUOTE:** "I don't believe in aging. I believe in forever altering one's aspect to the sun." ~ Virginia Woolf

#### FEATURE STORIES

Flood Relief Information	2
Feature Article - New Director	3
Research Update	2
Generation transformation	e
Favourite Staff Books	7

Page

#### **CURRENT RESEARCH PROJECTS**

Does age influence how we interact with objects in our environment? 8

Drive safely at any age	9
TRIP Study	10
Psychotherapy via telehealth	11
Vibrant Trial	12
The PEAK Study	13
Sterling's Dream Study	14
Living longer working well	15
Physiotherapy exercise program people with mild-moderate	in
Parkinson's disease?	16

Parkinson's disease?



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### **Flood Relief Information**

#### Kerbside Collection and Waste Services

Kerbside Collection is underway. Please stack damaged household items on the kerb when safe to do so. Do not put items on the road.

#### **Bin Collections**

Bin collection services are now operating as normal where streets are accessible.

#### **Resource Recovery Centres**

All Resource Recovery Centres are open and accessible to the public. Brisbane Landfill is open and accessible.

#### Register for the Mud Army 2.0

You can now register as a volunteer for or for assistance from the Mud Army 2.0. Mud Army 2.0 will start work tomorrow. <u>Register online here</u>.

#### Energex

As at 1030, Wednesday 2 March 2022, there are 30,525 customers in Brisbane LGA without power.. <u>Full details and updates on Energex site here.</u>

#### Donate to GIVIT

If you are in a position to donate, there is a <u>flood</u> appeal running via the website GIVIT. The appeal is seeking donations of gift vouchers and household items.

#### **Evacuation Centres**

<u>List of evacuation centres</u> around South East Queensland.

#### **Emergency Hardship Assistance Grants**

If you have been affected by the flooding, there are now Emergency Hardship Assistance Grants available. Apply online <u>here</u> or phone 1800 173 349.

Services Australia disaster payment of up to \$1,000 per adult who had major damage to their homes

Queensland Government have a range of grants for emergency items and services, replacement of essential household items, repair of homes and transport assistance.

Local government <u>Disaster Recovery Funding</u> <u>Arrangements (DRFA)</u> assistance.

<u>Telstra disaster relief</u> provides support to get you connected.

<u>Micah Projects</u> assisting with temporary accommodation and cooked meals.

Bupa customers can apply for flood relief package (134 135 or <a href="mailto:bupafloodrelief@bupa.com.au">bupafloodrelief@bupa.com.au</a>).

#### EMERGENCY CONTACTS

Police 000 (emergencies)

SES 132 500, QUU 132 364

Energex 13 19 62 (emergency) 13 62 62 (loss of supply)

#### Translink 131 230

Severe weather has affected bus and rail services. Check the website <u>here</u> for updates.



### **Feature Article**

### Breaking the bias: Healthy Ageing initiative appoints new Director

Professor Nancy Pachana, newly appointed Director of UQ's Faculty of Health and Behavioural Sciences' Healthy Ageing initiative <u>is passionate</u> <u>about building age inclusive environments.</u>

The University Of Queensland

Professor Pachana brings a wealth of knowledge and experience to the role including her work as UQ's Age Friendly University Initiative lead and setting up the first postgraduate clinical ageing course in New Zealand.

"I have always been passionate about ageing; it's a topic that never ceases to amaze me in its breadth and increasing relevance," Professor Pachana said.

"The demographics are clear in that we're living longer, with all the opportunities it affords, is something to be valued by individuals, communities, institutions and society.

"Yet ageism, which more people are becoming aware of, involves judging people by their chronological age rather than their capabilities, and robs us all of the "longevity dividend".

"That's why resources like the Faculty's Healthy Ageing Initiative and UQ's Age Friendly University Initiative are so important, because we encourage people to challenge these stereotypical perceptions."

Faculty Executive Dean Professor Bruce Abernethy welcomed Professor Pachana to the role.

"Professor Pachana is ideally positioned to strengthen our healthy ageing initiatives and develop an integrated approach across our Schools and Centres," Professor Abernethy said.

One of Professor Pachana's key objectives is working with researchers to enhance research initiatives on ageing, exploring new partnerships and funding opportunities. "I'm really looking forward to building on Age Friendly Initiative work we've been developing through projects like <u>People Like You at UQ,"</u> Professor Pachana said.

"These projects help attract more non-school leavers as undergraduate, postgraduate and research higher by degree students to UQ," Professor Pachana said.

"UQ has been tremendously supportive of my ambitions to grow knowledge, capabilities, and clinical research capacity around ageing; from my interview for a lecturing position in 2000, right through to this most recent appointment.

"I look forward to working closely with staff and students in the Faculty to place UQ in the forefront of transformative work on fulfilling health opportunities for all people later in life."

Media: UQ Communications Bridget Druery <u>b.druery@uq.edu.au</u> (+61) 435 221 246 @UQHealth



Professor Nancy Pachana

### **Research Update**

### Summary of the findings of the transport technology study.

#### Investigator team: Jacki Liddle, Peter Worthy, Cynthia Forlini, Dennis Frost, Eileen Taylor, Dubghlas Taylor, Nancy Pachana

In 2020 and 2021 we conducted a consensus building project where we sought to understand the nature of issues related to transport technologies for people living with dementia and those supporting them. Importantly we aimed to set priorities for action.

We have a lot of rich data about transport experiences, hopes and concerns for the future, the complexities faced and what an ideal future might look like. We also have some lessons about what works and what doesn't work in exploring issues and reaching consensus with people with a range of perspectives.

Primarily though, we want to share the agreed upon priorities for next steps. We had 31 people involved in our 3-round consensus process, and 28 people completed the final vote (13 living experience experts – people living with dementia and care partners; 15 other stakeholders – with various expertise including technology, transport, health, design, law).

The top 5 agreed areas for action are:

### *Start Now*: Don't leave sorting out until things are made and deployed.

This category included actions to try out and test ideas, processes and technologies with people living with dementia from the beginning. This included interfaces, ways of personalising technologies, in trip communication, vehicle accessibility, and amplifying systems that work now: specifically door to door travel and support.

#### Learning more

This category including documenting, exploring and sharing broadly about transport technology.

Specifically this includes needs, what works, user experiences, the impact of inadequate transport, and policy principles.

#### Working groups

This category focused on the need to bring people with diverse and useful experiences together to work on transport technologies over time – including lived experience, technology, transportation, disability, politics and business. People emphasised making some noise in the tech community about dementia, attracting funders, and developing ways of pooling wisdom and evidence as we work on this.

#### Collaborate with designers

Active ways of solving the technical problems while still holding the needs of people living with dementia in the forefront and engaging users were suggested. This includes working on difficult issues like truly simple design, flexibility and customisation in systems, closed road testing with users, find ways of getting help and support, manage risks and difficult scenarios during travel.

#### Keep people in the system

Rather than removing human support through automation and removal of drivers etc from transportation systems, this category focused on ways that people could continue to be involved. This included models of human support (including tech mediated), consideration of education and monitoring to help with transitions and learning, ways of building trust and training transport and technology staff about disability including dementia, communication.

Continued next page...





### **Research Update continued...** Summary of the findings of the transport technology study.

Interestingly – when votes from lived experience experts and other stakeholders were looked at separately, the top 5 were largely the same as in the combination. Besides minor differences in order, other stakeholders included *accountability* (considering law, rights, ethics, funding processes, townhalls, infrastructure) in their top 5 rather than *keeping people in the system*. As well as points, we looked at what percentage of participants supported each of the categories, 100% of participants supported the *start now* item, and more than half of all participants supported all of the items in the top 5, showing fairly consistent priorities across the diverse group. These findings suggest agreement that action through collaboratively and practically working on transport challenges now is the top priority. Ways of bringing together the different groups to work on these complex issues, and the importance of working on identified challenges were clear priorities. The need to promote the needs and preferences of people living with dementia, and measuring the impact of transport changes were highlighted. Overall, the strong measure is that action should be taken now to address the current and future transport needs of people living with dementia, with particular consideration of the role of technology.





### **Generation Transformation** BY <u>ELIZA MCEWEN</u>, <u>Western Independent</u> STORIES FROM CURTIN UNIVERSITY'S JOURNALISM STUDENTS

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In a time of unprecedented change, generations across the world are being forced to transform their lifestyles, worldviews, and expectations. The COVID-19 pandemic is evoking change as everyone adapts to these new circumstances and we are beginning to see what this might mean for the future. In this podcast series Eliza McEwen explores what this looks like for Generation Alpha, Generation Z, and the Baby Boomers.

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### Episode 1 – Generation Alpha: taught through technology

Prior to the pandemic, technology was <u>already</u> <u>establishing itself</u> within the classroom but imminent school lockdowns and closed borders have rapidly accelerated this. In this episode, a range of experts and teachers discuss what this integration looks like and what it means for the future of Generation Alpha's education experience.

#### Episode 2 – Generation Z: stress or strength?

Having never before experienced an event of this magnitude, many members of generation Z are dealing with <u>mental health struggles</u>. But is there a silver lining? Eliza McEwen speaks to a range of experts and young people to learn whether the pandemic is providing an opportunity for this generation to build resilience.

**Episode 3 – Baby Boomers: rethinking retirement** Although most baby boomers feel <u>minimally</u> <u>impacted by the pandemic</u> they are still having to transform the way they live out their retirement. This episode covers the way COVID-19 is making baby boomers rethink the way they travel, socially connect and age. Experts and retirees share their perspectives and offer us a glimpse into the postpandemic future.



Sue Bennett-Ng (left) and Bianca Dullens (right) both say COVID-19 has prevented them from living their lives as normal. Graphic: Eliza McEwen.





### **Favourite AMI Staff Books**

A reader recently asked us for book recommendations and here are some of our favourite AMI staff Ageingrelated books.

#### Ageing: A Very Short Introduction

Picked and written by Nancy A. Pachana *Ageing: A Very Short Introduction* discusses the lifelong dynamic changes in biological, psychological, and social functioning involved in ageing. Increased lifespans have created an urgent need to find ways to enhance our functioning and well-being in the later decades of life. This is reflected in relevant policies and action plans from the WHO and the UN. Looking to the future, this VSI considers advancements in provision for our ageing populations, including revolutionary models of nursing-home care. Understanding the process of ageing is not only important for individuals but also for societies and nations if the full potential of those entering later life is to be realized.

#### Being Mortal: Medicine and What Matters in the End by <u>Atul Gawande</u>

A favourite choice of Prof Pachana Being Mortal, author Atul Gawande tackles the hardest challenge of his profession: how medicine can not only improve life but also the process of its ending. In the inevitable condition of aging and death, the goals of medicine seem too frequently to run counter to the interest of the human spirit. Doctors,

committed to extending life, continue to carry out devastating procedures that in the end extend suffering. Gawande, a practicing surgeon, addresses his profession's ultimate limitation, arguing that quality of life is the desired goal for patients and families. Gawande offers examples of freer, more socially fulfilling models for assisting the infirm and dependent elderly, and he explores the varieties of hospice care to demonstrate that a person's last weeks or months may be rich and dignified.

#### Aging with Grace: What the Nun Study Teaches Us about Leading Longer, Healthier, and More Meaningful Lives by David Snowdon Ph.D.

A favourite pick of AMI Coordinator Dr Poulsen In 1986 Dr. David Snowdon embarked on a scientific study that would forever change the way we view aging--and ultimately living. Dubbed the "Nun Study" because it involves a unique population of 678 Catholic sisters, this remarkable long-term research project has made headlines worldwide with its provocative discoveries It is more than a groundbreaking health and science book. It is the inspiring human story of these remarkable women-ranging in age from 74 to 106--whose dedication to serving others may help all of us live longer and healthier lives.











## **Current Ageing Research**

The following projects are looking for participants. Make a difference in Ageing Research today. Sign up now!

## How does age influence how we interact with objects in our environment?

#### What is the study about?

Researchers at the UQ perception and action lab are investigating how age influences how people interact with and cognitively value different types of objects in their environment.

#### What will you need to do?

You will play a computer-based object interaction game on your home computer. Followed by watching an interactive video clip. Finally, you will answer some questions based on individual assessment and your experience of the task. The study will take approximately 60 minutes to complete.

#### **Eligibility criteria:**

- 65 + years of age
- No history of neurological illness (e.g., Dementia or Alzheimer's)
- Have normal or corrected to normal vision (e.g., glasses if necessary)
- Access to a computer with internet connection

#### **Compensation:**

For voluntary participating in this study, you will receive a \$20 Coles/Myer gift card upon completion of the experiment. Delivery of the gift card will be organised by project staff.

#### Do you want to participate?

If you would like to participate, please click here to start the experiment.

#### More information?

If you have any questions or concerns, please contact Harrison Paff at <u>h.paff@uq.edu.au</u> or on 0406 907 611. Email communication is preferred.







### **RESEARCH PROJECTS**





### ELIGIBILITY

Be at least 65 years old.

Drive at least once a week.

Hold a QUEENSLAND open driver's licence.

Have access to a mobile phone and an email account, and computer.

Able to participate in 9 supervised sessions with at least one week between sessions.

Not have participated in any other hazard perception study previously

You can choose: Have a UQ researcher meet you at your residence or visit us at the University in St Lucia.

You will complete a series of interactive, videobased training tasks on a touch-screen monitor, that have been shown to improve on road hazard perception.

Sound like fun? To sign up or hear more:

SMS "DRIVER TRAINING PROJECT" to Darcy on **0466 909 920** and the team will call you back from that number. Alternatively: email <u>darcy.andrews@uqconnect.edu.au</u>.

Our research team abide by strict COVID-19 regulations and are required to provide evidence of full vaccination.



### **RESEARCH PROJECTS**

## Uncovering a novel therapeutic target to reduce dementia risk in Parkinson's disease (TRIP)

The TRIP study aims to:

 use neuroimaging of the brain to develop a marker for future dementia risk in Parkinson's disease and

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2. test whether a drug (levetiracetam) can improve memory problems and reduce dementia risk in people living with Parkinson's disease.

#### **Potential impact**

We hope to produce evidence for a new therapy to reduce dementia risk in Parkinson's disease. The TRIP study will help us understand more about cognitive impairment in Parkinson's disease. In particular, we will learn about the brain mechanisms behind the memory problems experienced by many people living with Parkinson's disease.

#### **Eligibility Criteria**

- People living with Parkinson's disease
- No Deep Brain Stimulation (DBS), pacemaker, or other metal in the body (if unsure, feel free to ask the study coordinator)
- Fluent in English

We are also recruiting older adults without Parkinson's disease or memory problems as a comparison group.

#### Study duration

All older adults without memory problems without memory problems will be required to make three (3) study visits over two (2) weeks. People with memory problems will be required to make six (6) study visits over twelve (12) weeks.

#### **Study procedures**

People without memory problems will complete cognitive, which is located on the RBWH Campus' after UQCCR psychological, and motor symptom tests, and then complete a memory test during an MRI scan.

People living with Parkinson's disease and memory problems will complete cognitive, psychological and motor symptom tests, as well as a medical assessment and blood test. Once enrolled in the clinical trial, people with memory problems will have two rounds of treatment – one where they take the drug (levetiracetam) and one where they take a placebo (an inactive ingredient, like sugar). At the end of each treatment, they will complete a memory test during an MRI scan.

#### Participant resources

All study assessments are provided at no cost, and a \$50 travel reimbursement is available for each visit to UQCCR. Participants will also receive education and support from the study team throughout the study period.

#### Contact: Dana Pourzinal E: pd.research@uq.edu.au W: bit.ly/TRIPStudy T: 07 3346 5028





### **RESEARCH PROJECTS**

### Psychotherapy via telehealth videoconferencing to ease anxiety

#### Introduction

Anxiety represents one of the most common mental health problems in the population and can be experienced by people of any age. Anxiety influences a person's overall wellbeing and quality of life.

#### Research objectives

Our study aims to test a new psychotherapeutic intervention delivered via videoconferencing to help combat anxiety in people living with cognitive impairment, irrespective of their location. Our 6-week program combines education about anxiety to help people understand their symptoms, relaxation techniques to help cope with anxiety.

#### Study design

The psychotherapy program will be tested in a randomised control trial. This means that if you are eligible to participate in the study, you will be randomly assigned to an intervention group or a control group. If you are selected to the intervention group, you will be asked to attend 6 weekly sessions of psychotherapy. If you are in the control group, you will continue your usual care as prior to entering the study.

#### How can I participate?

If you have been diagnosed with mild cognitive impairment or dementia and if you are currently experiencing any anxiety symptoms like what has been described above ,we invite you to participate. We will do an initial screen to check your eligibility for our study. Participation in our study is voluntary, and you may withdraw at any point.

### What help is available if I have never used videoconferencing?

We will provide you with a manual with clear instructions, a video link with step-by-step instructions, and support over the phone to help you setup your equipment for videoconferencing.

#### What's required from participants?

- Filling out questionnaires before, and after the therapy.
- Participating in weekly therapy sessions for 6 weeks delivered via videoconferencing.
- Practise techniques learnt in therapy sessions.
- Give us feedback on the ease of use of technology as well as the content of the therapeutic sessions.

## Your participation and feedback will help us improve this program

Participants to receive a gift voucher You will be given a \$50 electronic gift card at completion of baseline assessments and another \$50 electronic gift card at completion of the entirety of the trial, regardless of whether you have been allocated to the intervention group or control group.

Please do not hesitate to contact me should you require any additional information.

#### Important links:

More information about the study Expression of Interest to participate

#### For more information contact:

T: 07 3346 5036 or 07 3346 5577 E: anxietyresearch@uq.edu.au W: https://clinicalresearch.centre.uq.edu.au/psychotherapytelehealth-video-conferencing-treat-anxiety





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A University of Queensland study designed to improve balance in older adults with a hearing impairment has been made possible thanks to a generous donation from Sonova.

"Three in five adults aged over 60 have a hearing impairment and recent research shows that hearing impairment is a risk factor for falling, with every 10-dB increase in hearing loss putting an individual at greater risk of falling [1].

This study will test if a device that gives feedback on body position can improve and maintain balance and stability.

Participants will be required to wear a device which is battery powered and worn on a belt around the waist for 20-minute training sessions over 10 days.

The device records body sway, compares it to normative data and provides vibrotactile feedback to the wearer for retraining of balance.

The original version of the device has been used in research trials in Europe, Germany and Switzerland, however this will be the first time it will be used with older adults who have a hearing impairment.



The study is an international collaboration between Professor Sandy Brauer, Professor Louise Hickson, PhD students Jacinta Foster and Marina Mahafza from UQ's School of Health and Rehabilitation Sciences; Department of Otolaryngology at Unfallkrankenhaus Berlin, Charite University Hospital Berlin; Center for Hearing and Balance, Department of Otolaryngology, Columbia University Medical Center and Sonova.

 Lin, F.R. and L. Ferrucci, *Hearing Loss and Falls Among* Older Adults in the United States. Archives of Internal Medicine, 2012. **172**(4): p. 369-371.

#### Volunteers needed for research

### **VIBRANT TRIAL**

Three in five older adults aged over 60 have a hearing loss and the risk of falling for older adults is higher if they have a hearing loss. Researchers at The University of Queensland are conducting a study that will test if a device that gives feedback on body position can improve balance and stability.

- Are you over 60?
- Do you have mild to severe hearing loss?
- Do you have vertigo, feel dizzy, or unsteady?

If you would like more information or would like to volunteer please contact Katrina Kemp on 07 3365 4564 or k.kemp@uq.edu.au





### **RESEARCH PROJECTS**

### The PEAK Study

#### Physiotherapy, Exercise and Physical Activity for Knee Osteoarthritis – The PEAK Study

People with knee osteoarthritis (OA) often consult a physiotherapist for management of their knee problems. Physiotherapy management typically involves the delivery of a structured strengthening exercise program, and advice about how to manage and increase physical activity levels. Physiotherapy may be delivered in any number of ways:

- Face-to-face consultations
- Consultations in public/private hospital settings
- Consultations at private practices
- Consultations at rehabilitation centres
- Video consultations over the internet
- Group-based classes
- Telephone consultations
- Consultations in community health centres
- Home-based visits from a physiotherapist
- Shared consultations with other health professionals
- Consultations in the workplace

We wish to evaluate the effectiveness of how physiotherapy is delivered to people with knee OA.

#### What will the study involve?

This study is comparing two different methods of delivery of physiotherapy for people with knee OA. Participants will be allocated to one of two groups. Both groups will receive the same quality care by a physiotherapist based on the best current research evidence. This will involve 5 consultations with a physiotherapist over a 3month period, including an individualised strengthening exercise program and physical activity plan. Participants in both groups will receive detailed educational information about osteoarthritis and its management, resistance bands for exercising and a wearable activity tracker to help with increasing physical activity. Participants will also be asked to complete a questionnaire at four different time-points throughout the duration of the study (9 months).

#### Who can participate?

We are looking for participants who are aged over 45 years with knee pain on most days who can commit approximately 9 months to the study and are not currently receiving physiotherapy treatment for their knee pain. You cannot participate in this study if you: have had a knee replacement in your most painful knee, have had any knee surgery within the last 6 months or are on the waiting list for surgery, have a diagnosis of rheumatoid arthritis or other inflammatory arthritis, have participated in any strength training exercises for your leg muscles in the last 6 months, or have any neurological or cardiovascular conditions.

We are looking for volunteers who are residing in/around the following locations:

- Greater Brisbane
- Mackay/Cannonvale
- Mooloolaba



To register your interest for this study, please visit: <u>www.peakstudy.com.au</u> OR email the trial coordinator **Penny Campbell**: <u>penelope.campbell@unim</u> <u>elb.edu.au</u>





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Sterling is a boy with a dream. His dream is to find a cure for Dementia. When Sterling was 3 years old his Grandmother was admitted into a nursing home with Dementia and since then he has always wanted to find a cure. Sterling is now an Ambassador for The Common Good at The Prince Charles Hospital. He highlights that dementia has an impact on everyone, even someone so young.

There is no cure for dementia. Right now, there are more than 44 million sufferers worldwide, and that number is expected to treble by 2050. The impact this will have on individuals, their families and our health system will be devastating.

Alzheimer's Disease is the most common form of dementia, accounting for up to 70% of all dementias. In health, the brain relies on neurochemicals to send messages between nerves. One of the typical features of Alzheimer's Disease is a decline in function of these chemical signals. The nerves and chemicals most vulnerable to these changes are in the memory forming parts of the brain.

#### The "Sterling's Dream" Study

This study is led by Dr Eamonn Eeles, Geriatrician/Physician and Head of Research of Internal Medicine Services at TPCH. His team includes researchers from the Australian E-Health Research Centre, CSIRO and the Queensland Brain Institute.



By using innovative imaging the team will measure the chemical signals in the memory-forming part of the brain. They hope this study will help us better understand if there are certain brain characteristics in people who don't have Alzheimer's Disease which differ in people who have early stages of the disease.

This information may also assist us in understanding which patients may respond better to treatments that are used in Alzheimer's Disease and therefore help target management of this disease more effectively.

We are inviting people over 55 years of age who have Alzheimer's Disease who can have an MRI to participate.

We are also inviting people over 55 years of age who don't have Alzheimer's Disease and can have an MRI. These people will be part of our control group.

#### Read more about our study

#### What will the participants be asked to do?

We will ask people who would like to participate to come to The Prince Charles Hospital for a clinical assessment, neuropsychology assessment and memory tests.

Participants will then be asked to undergo brain imaging using state of the art technology at the Herston Imaging Research Facility.

Travel costs will be met by the study. Refreshments will be provided.

#### How can you be invited to participate?

Phone the study Research Assistant, Anne Bucetti, on: (07) 3139-7208.





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www.ami.group.uq.edu.au

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### **RESEARCH PROJECTS**

### LIVING LONGER – WORKING WELL Volunteers needed

Our workforce is ageing with many of us having or wanting to remain working beyond traditional retirement age. We want to understand how to better support older workers to remain well at work.

#### What do you need to do?

We are conducting an **online survey (~15-20min)** to identify common factors that influence older workers' ability to work at their current or last workplace.

#### Who is eligible?

Volunteers who are:

 >45 years old currently in paid work/self-employed OR retired within the last 12 months

#### Why should I participate?

Win one of ten **\$25 gift vouchers** by completing the survey and help us design better interventions to support older people at work.

More information:

Click <u>here</u> OR scan the **QR code** below:









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### Can a physiotherapy exercise program with a self-management approach improve physical activity in people with mild-moderate Parkinson's disease?

In people with Parkinson's disease (PD), physical activity contributes to preserving functions such as gait, balance in standing, and muscle strength, and to ensuring efficient performance of activities of daily living and maintenance of independence.

International guidelines recommend that people with neurological diseases should perform at least 150 minutes of moderate intensity physical activity each week. At the time of diagnosis, physical activity is however on average 1/3 lower in people with PD than people of the same age, without PD.

Researchers at the University of Queensland are inviting people with mildmoderate PD to participate in a research project aiming to improve and maintain physical activity levels. The intervention involves group exercise sessions run by a physiotherapist and advice to help monitor and continue physical activity including using commercially available activity monitors.

To find out more, or to volunteer for this research please complete the survey by clicking on this link, <u>https://www.surveymonkey.com/r/KC</u> <u>GXQZK</u>

Alternatively, you can contact Robyn Lamont on <u>nabresearch@uq.edu.au</u>, or by phoning 07 3365 2779.



For additional information or to be added to the AMI mailing list and Listserve, please contact us via email at ami@uq.edu.au.

Alternatively you may contact Dr Nancy Pachana Tel. 07-3365-6832