BOOK REVIEW

O&M for Independent Living: Strategies for Teaching Orientation and Mobility to Older Adults

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O&M for Independent Living: Strategies for Teaching Orientation and Mobility to Older Adults addresses multiple issues that impact the mobility of elders during the process of aging. This is an important topic as people are living longer, and low vision and a corresponding reduction in mobility are commonly part of aging. The chapters deal with sensory changes and functional assessment; O&M tools, techniques, and modifications; environmental adaptations and modifications; the benefits of exercise, particularly in relation to preventing falls; supporting daily living skills; and fostering collaboration among professionals. The book concludes with a summary of challenges for policymakers, future research, and O&M practice in relation to elders. The volume is well formatted and visually interesting with good use of headings. Academic prose is interspersed with client stories, lists, tables, text boxes, and diagrams. There are clear black-and-white photographs depicting aids, equipment, environments and their use.

O&M for Independent Living addresses a broad audience. It is intended for O&M instructors, rehabilitation specialists, occupational therapists, and other professionals who may be new to vision loss. Thus, there is general information about aging that might seem obvious to some, as well as more specific details about working with elders that are particular to different professions.

Professionals seem likely to find different areas of content familiar or novel, depending on their discipline. For example, the chapter on daily living skills includes an excellent discussion regarding the significance of driving, and the tensions involved in the decision
to cease driving. Eye specialists, or occupational therapists who specialise in driving assessments would be familiar with having to balance “individual freedom, patient confidentiality and the public good” (p. 193) in making their recommendations around driving. The O&M specialist is more likely to be involved after this decision to quit driving is already made and might not appreciate the degree to which the loss of driving can impact motivation, quality of life, and mobility choices. Nevertheless, the O&M specialist is quite familiar with the processes of functional vision assessment and equipping the elder to access alternative modes of transport as a non-driver.

The chapters on O&M tools and techniques include modifications that can be made to independent travel skills and guiding skills to accommodate the physical limitations that can occur with aging. There are also detailed explanations and photos of how to combine different mobility aids during travel, including long cane, support cane, walker, wheelchair, and human guide. The details about managing steps, turns and tight spaces with these aids are particularly important in relation to falls prevention. Manual wheelchairs, power chairs, and scooters are evaluated against nine characteristics, including how the long cane might be used with each of these aids. Universally relevant rules for wheelchair safety are also included, however comments about procurement of these aids are US-specific.

The chapter discussing environmental modifications mixes general principles of good environmental design with US-specific legislation. The vision-related resources listed at the end of the volume are primarily located in the United States and Canada. This geographical bias is countered to a degree by an exploration in the chapter about daily living skills, of the emergency response to the New Zealand earthquake in 2010, as it affected people with low vision or blindness. The suggestion from the New Zealand experience is that elders cope better with emergency situations if they have an action plan. Such a plan can be factored into an O&M program. Venturing further around the globe, the chapter on exercise recommends the Chinese practice of tai chi for the benefits it brings to the balance, strength, endurance, and flexibility of elders.

There are surprising gems in this book, including vignettes from rural Alaska that emphasise the importance of understanding the local population, working effectively and patiently with the gatekeepers in the community, and appreciating the impact that geography and weather can have on navigation. One man chose to live in isolation despite persistent suggestions that he move into town, while another was embraced and supported by the community in a way that diminished, even eradicated his sense of disability. These examples illustrate the degree of sensitivity and time needed to work effectively with people from different cultures in a way that honours clients’ choices about where and how they live.
There is an assumption that the elders under consideration in this book have experienced vision loss as part of the aging process. The grief associated with vision loss, and resulting lifestyle changes are acknowledged with sensitivity. However, it is not clear whether the experience of elders who have congenital low vision or blindness is the same as those who have known full vision as they transition into aging. Here, the importance of individual functional assessment, outlined in Chapter Two, becomes apparent. It is good to see Charles Bonnet Syndrome included in the shortlist of visual conditions, prompting consideration of the amazing ways the human brain tries to fill the gaps made by low vision.

This book contains an abundance of summary statements about aging, and further repetition as different professionals involved with elders are listed and described in several chapters. Nevertheless, there are interesting learning activities at the end of each chapter that could be incorporated into O&M personnel preparation programs, as well as prompting continuing education for those who already have some experience working with elders.

O&M for Independent Living deals with salient aspects of aging in relation to vision and mobility, making a strong contribution to the O&M literature. This volume is a user-friendly size, ideal for trainee O&M specialists and other allied health professionals who anticipate working with elders in the community.

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