

Social Support Makes all the Difference in Small, Rural, and Aging Communities

Elizabeth Russell, Ph.D., Department of Psychology, Trent University



Method

Participants and Procedure

- 5 focus groups and 12 interviews with 35 age-friendly committee members in 11 communities
- Focus groups and interviews with 43 seniors who participated in age-friendly programming in 4 communities

Materials

- Both seniors and program facilitators were interviewed about age-friendly in the community, social capital, sense of community, and outmigration.



Age-friendly: More accessible to and inclusive of aging populations (WHO, 2007).



“Oh my goodness, just to get them out of the house, just to give them that much more confidence and feel that they belong and that they got the sense of community and they can offer and even just their experience, like when it comes to doing things with the kids and stuff, they can offer so much. Only if given that opportunity.” (Community participant)

Results

- Beyond an increase in physical fitness and healthy eating, participants spoke of the social support that group involvement provided for seniors.
- Many seniors were widows or were slowly losing their siblings and friends, and their children and grandchildren lived in other geographic locations.
- Involvement in age-friendly organizations or events provided a new social network of support for seniors.
- Seniors and committee members alike spoke of seniors who ordinarily never left their homes, or “shut-ins” as they were commonly referred to, who were gradually drawn out of their homes, becoming regular participants in community activities and members of peer social networks.



“The social aspect is critical. Very important. Getting people out of their houses who never would have left.” (Senior participant)



Discussion

- Social benefits to seniors who participated in programming was the most recurring theme in the data.
- Qualitative results clearly demonstrate the tangible social support value, for many seniors, of simply leaving their houses and interacting with peers, and the role of age-friendly communities programming in supplementing more traditional networks of interaction.

“This gets anywhere from a dozen or so people out that wouldn’t ordinarily get out. And there are people that get out now that never did before. You get people out of their house. Once you get out of your house, you know what is on the go, and it spreads more and more each time.” (Senior participant)

Conclusion

- The benefits of social support provided to seniors who engaged in this programming cannot be minimized, given that enabling seniors’ social environments can be as important as medical health in contributing to wellness (Lui et al., 2009; Thomas, 2012).
- This is in line with a large body of research suggesting that meaningful community involvement and social connections plays an important role in seniors’ longevity (e.g., Kawachi, Kennedy, & Glass, 1999).
- It is critical for age-friendly policies and programming to, above all, provide environments in which the development of social networks of support among seniors may flourish.

Research Question

Does the presence of social support influence the effects of age-friendly communities programming on seniors’ health and well being?

Project Background

Age-Friendly in Newfoundland and Labrador

- NL is home to the second highest proportion of seniors in Canada (Statistics Canada, 2014): This is viewed as an opportunity.
- NL is geographically spread out, and consists of primarily rural and remote communities.
- Province-wide outmigration: Exacerbated in 1992 following the collapse of the cod fishery. Strong in rural and remote communities, many of which scatter the coastline and whose economies were almost exclusively based in the fishery.

Social Capital and Support

- Social capital: How distinct, interactive characters of communities influence its population’s health and wellness, and includes availability of peer social support.
- Seniors lacking social support are less likely to age in place, may require institutional living, and may have more severe levels of impairment or mobility challenges (Andrews, 2005).
- Seniors’ social involvement – group membership, volunteering, or everyday social networks – is positively related to longevity (Maier & Klumb, 2005), and can protect or create new role identities (Greenfield & Marks, 2004).
- Seniors who experience neighbourhood social cohesion, trust, who volunteer, and who experience a sense of community tend to have higher self-rated health, lower levels of depression, or have lower levels of functional impairment (e.g., Almedom & Glandon, 2008; Andrews, 2005; Buffel, Verte, et al., 2012; Kim, 2008; Kitchen, Williams, & Simone, 2012; Lum & Lightfoot, 2005; Parkinson, Warburton, Sibbritt, & Byles, 2010).
- Ultimately, rural communities’ informal practices in many ways strengthen their ability to tackle the social exclusion of senior residents (Walsh, O’Shea, Scharf, & Shucksmith, 2014).

Dr. Elizabeth Russell

Assistant Professor
Department of Psychology, Trent University
Peterborough, ON
705-748-1011 ext. 7867
elizabethrussell@trentu.ca

