

# What is Positive Ageing?

## An exploration of the views of the participants of the Westgate Foundation

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**CARL Research Project**  
in collaboration with  
**The Westgate Foundation**



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## **What is Community-Academic Research Links?**

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CARL seeks to:

- provide civil society with knowledge and skills through research and education;
- provide their services on an affordable basis;
- promote and support public access to and influence on science and technology;
- create equitable and supportive partnerships with civil society organisations;
- enhance understanding among policymakers and education and research institutions of the research and education needs of civil society, and
- enhance the transferrable skills and knowledge of students, community representatives and researchers ([www.livingknowledge.org](http://www.livingknowledge.org)).

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## **How do I reference this report?**

Author (year) *Dissertation/Project Title*, [online], Community-Academic Research Links/University College Cork, Ireland, Available from:

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## **Abstract**

Population ageing has become a global phenomenon in recent decades. Fertility rates are decreasing and people are living for longer than ever before. In response to this, there has been a shift in thinking to promote healthier outcomes for those in later life. As a result, ideologies around healthy ageing have evolved. Terms such as ‘successful ageing’, ‘active ageing’ and ‘positive ageing’ are now part of the discourse with regards to growing older. Although these terms were conceived as early as the 1980s, they may still be considered as relatively new in Ireland with the first Irish National Positive Ageing Strategy published in 2013.

The Westgate Foundation is a community based organisation working with people aged over 60 years. Through collaboration with the CARL team and UCC, a group of participants from the Westgate foundation formed the idea of asking the question ‘What is Positive Ageing?’. As a fourth year Bachelor of Social Work student I found the question interesting and decided to join the collaboration as part of my final year action research study.

This action research study explores the concept of positive ageing. It does this largely as a participatory study, taking into account the views of participants of the Westgate Foundation. I also examine existing and relevant literature and policies on healthy ageing.

The research findings depict positive outcomes for those who are actively involved socially and have positive attitudes to life in general. The correlation between the academic research and the participatory research showed similar findings on what it is to age positively while identifying the challenges faced relating to positive ageing.

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Above all, I would like to thank the wonderful participants of the Westgate Foundation. Without your voice, this research would never have materialised. Your attitudes, vision and positivity are an inspiration. After meeting you all, I look forward to ageing positively.

## **Chapter One: Introduction**

*“It is not the years in your life  
but the life in your years that counts”*

- (Adlai E. Stevenson)

### **1.1 Introduction to the Study**

This chapter provides an introduction and background to the study including details of the title of the study, the rationale, the research aims and objectives and the theoretical perspective used.

### **1.2 Title of the Study**

The title of this study is: ‘What is Positive Ageing? Exploring the views of participants of the Westgate Foundation, Ballincollig, Co, Cork’.

### **1.3 Background to the Study**

Recent decades have shown a significant increase in research in gerontology and changes in population ageing. Population ageing implies a significant increase in the amount of people living longer. Sarah Donnelly and Anne O’Loughlin tell us “a global transformation is taking place as the world’s population is rapidly ageing” (Donnelly and O’Loughlin, cited in Christie et al., 2015, p.212). In turn, concepts such as ‘healthy ageing’, ‘successful ageing’, ‘productive ageing’ and ‘positive ageing’ have come to the fore. Reflecting the global phenomena of population ageing and mirroring the concepts of healthy ageing, a number of governmental strategies have been introduced to promote healthy and active living in later life. In Ireland, one such strategy is the National Positive Ageing Strategy, published in 2013. According to its vision statement the strategy suggests that,

*“Ireland will be a society for all ages that celebrates and prepares properly  
for individual and population ageing. It will enable and support all ages and*



*older people to enjoy physical and mental health and wellbeing to their full potential. It will promote and respect older people's engagement in economic, social, cultural, community and family life, and foster better solidarity between generations. It will be a society in which the equality, independence, participation, care, self-fulfilment and dignity of older people are pursued at all times."* (Department of Health. 2013, p. 3)

Using this vision statement of the National Positive Ageing Strategy (2013) as a guideline, I examine the concept of the positive participation and inclusion of our ageing population in the services provided through agencies such as the Westgate Foundation. In exploring this concept, I work collaboratively with a number of voluntary participants of the Westgate Foundation. The reason for this, as explained further in the rationale to the study, is to explore and examine participant's views in order to gain insight into their personal perceptions of positive ageing.

#### **1.4 Rationale**

As a final year student, a requirement of the Bachelor of Social Work in University College Cork (UCC) is to conduct an action research study. My action research study was undertaken in collaboration with the Westgate Foundation and the Community Action Research Links (CARL) Project. Established in 1985, the Westgate Foundation is situated in Ballincollig, Co Cork. The Westgate Foundation works in providing services to senior citizens (over 60 years) within the community of Ballincollig. Offering a wide range of services, including but not limited to independent living houses, a day-care centre, social activities and counselling services, the Westgate Foundation aims to empower older people in their daily lives. It does this while promoting awareness of the needs and potential of older people to policy makers and the general public.

The Westgate Foundation social worker met with the CARL team from UCC following a decision to undertake a new postgraduate module for PhD students in UCC on Community Based Participatory Research (CBPR). The module aimed to facilitate engagement between UCC and community groups to identify issues of importance to them. Eight PhD students

from various disciplines within the college signed up for this module, and during 2016 the students, along with the CARL team from UCC, visited the Westgate Foundation and worked alongside a group of approximately thirty interested Westgate Foundation research participants. The process involved working alongside the group as a whole. The group then broke into sub-groups according to their interests and discussed topics important to them. Seven themes emerged from this process, one of which was positive ageing.

The rationale to this research is based on the Westgate Foundation's question 'What is Positive Ageing? Exploring the views of participants of the Westgate Foundation.

## **1.5 Research Aims and Objectives**

### **1.5.1 Aims:**

The aim of this research study is to explore the concept of positive ageing. In doing this, I ask the question: what is positive ageing while taking into consideration, the views of voluntary participants of the Westgate Foundation?

### **1.5.2 Objectives:**

- To explore and determine the factors that contribute to positive ageing for older people.
- To promote attitudes of respect and dignity towards older people.
- To recognise and identify the need of participants voices to be heard
- To include participants views in the structuring and provision of services.
- To recognise and embrace diversity among the older population – to support the fact that older people are a heterogeneous rather than homogenous group as they are often treated.

## **1.6 Theoretical perspective**

For this study, I use a sociological lens, through a range of sociological approaches to view positive ageing. I examine the concept of positive ageing through existing positive and negative stereotypes associated with ageing. Using a sociological approach I endeavour to

research and identify gaps in the state and community services provided to the ageing population of the Westgate Foundation. In conducting this research, I interview participants who are involved in existing services for senior citizens to determine services that are working well and are viewed positively by participants and what is not.

## **1.7 Chapter overview**

Chapter Two of this dissertation provides account of the research design and methodology used in this action research study. Chapter Three introduces secondary research in the form of a literature review. Topics such as perceptions of ageing, sociological approaches to ageing, positive ageing in a policy context and positive ageing with social exclusion are discussed. Chapter Four examines the findings and resulting themes that emerged from the primary research conducted through a number of interviews. The findings are presented and interrogated in the context of the literature reviewed in Chapter Three. In Chapter Five, I conclude with a brief summary and discussion of implications for further study on this topic in the field of social work, both in its applied and theoretical forms.

## **1.8 Conclusion**

This chapter introduces the action research study to the reader. I have provided a brief background to the research topic of positive ageing. Furthermore, I offer a rationale to the study while introducing the aim and objectives. I have provided an overview of the theoretical perspective used in considering the concept of positive ageing. The following chapter on methodology provides structure to the research design used in conducting this study.

## **Chapter Two: Methodology**

### **2.1 Introduction**

As detailed in Chapter One, the aim of this research is to examine concepts of positive ageing while exploring the views of participants of the Westgate Foundation. In this chapter I will discuss the research methods used to conduct the research study. Given the collaborative and participatory nature of this study, I felt that qualitative research was the most appropriate method of research for this particular study. I will discuss both the primary and secondary methods of research used, the theoretical framework, the ethical considerations taken and the limitations encountered.

### **2.2 Qualitative Research**

I chose qualitative research as my research method for this study rather than quantitative research. Qualitative research is typically used in social work research as it allows for an interpretive understanding of people and their social experiences (Carey, 2009; Carey, 2012; Shaw and Gould; 2001, Teater, 2010). Qualitative research can further be described as an attempt “to explore in great detail themes such as the attitudes, behaviour and experiences of specific social groups. It may also seek to investigate a social problem or set of ethical dilemmas relating to social work practice” (Cary, 2009, p.36). With this in mind, I chose to use a qualitative research methods in order to gain a deeper understanding and meaning of both positive ageing and what it means to the participants through their own experiences. The qualitative research was broken down into two forms; primary and secondary research. Using qualitative research allows meaningful investigation into the thoughts and ideas of people. Malcolm Carey tells us that “qualitative research also involves purposeful investigation, searches or processes that collect and evaluate information in order to gain knowledge and understanding” (Carey, 2012, p.5).

#### **2.21 Primary Research**

At the beginning of this collaborative study, I met with the participants of the Westgate Foundation in an informal discussion group. This was deemed the most appropriate means of informing my research questions and introducing the aims of the

study to the participants. I decided in conjunction with the necessary parties at the Westgate Foundation and UCC that the primary research for this study would comprise of a written survey one-on-one interviews and a focus group. A survey was issued to the thirty six residential homes of the Westgate Foundation. I conducted one-on-one interviews with four members of staff and three participants of the Westgate Foundation. I also co-facilitated a focus group with the Westgate Foundation social worker, interviewing ten voluntary participants. I chose a narrative style interview technique for both the one-on-one and focus group interviews in order to allow for flexibility and the formation of new questions depending on the response from interviewees. This technique also ensured that interviewees had the opportunity to speak freely and with openness. Using this method, I feel that I gained a rich understanding of the personal perceptions of what positive ageing means to the participants of this study. King and Horrocks tell us that “narrative interviewing privileges subjectivity and the position of the narrator, while at the same time offering an appreciation of the social world from which narrations are drawn” (2010, p.232). I also prepared structured questions in advance to allow for situations resulting in the potential need for more focus and guidance.

### **2.2.2 Secondary Research**

A broad overview of literature on ageing and positive ageing was conducted using secondary sources of academic books, journals and Positive Ageing Strategy documents. This literature review examined preceding research and information relevant to the concept of positive ageing. This provided the basis of discovery and an understanding of the various dichotomies and different opinions in the field of social work and older people. I conducted a critical analysis of writings on age-friendly ageing strategies and literature on ageing and age-friendly concepts such as successful and active ageing. My literature review focussed upon research through the sociological lens.

## **2.3 Theoretical Approach**

This research was conducted in collaboration with the Westgate Foundation and the CARL

project. The overarching question asked in this research required exploration with the participants of the Westgate Foundation and so I determined that a participatory approach and an interpretivist ontological approach were the most relevant theoretical frameworks to use. Shaw et al. tell us that “by ensuring that participants have control over the research process, participatory approaches aim to foreground the experiences and interpretations of marginalized groups and to bring about change that reflects their interests in terms of empowerment and liberation” (Shaw and Gould, 2001, p. 7). Using an interpretivist approach, allowed me to consider many perspectives and opinions on the topic. As a social work student, I am interested in understanding people's experiences from all perspectives. An interpretivist approach, linked with a narrative approach to interviewing allowed for the participants views and life stories to take centre stage of the research. Carey tells us that,

*“interpretivism embodies and supports the core principles of both the life history approach, and qualitative research in general - emphasizing and allowing participants’ vocal accounts to take precedence while also contextualizing and framing these perspectives within a theory”* (Carey, 2009, p. 152).

With this in mind, I used an interpretive approach to allow for a broader focus on the individual participants experiences and ideas on positive ageing. Through this approach, themes were identified and discussed in relation to the literature review.

## **2.4 Ethical Considerations**

On embarking on this research study, I followed the research ethics approval procedures of both my university and of the Westgate Foundation regarding permissions and confidentiality. As social workers, we refer to the Code of Professional Conduct and Ethics for Social Workers (CORU) in all that we do. Throughout the research study I used the CORU guidelines as a framework for working with the participants of the Westgate Foundation. CORU (p.5) states that the values informing us in social work are:

- Respect for the inherent dignity and worth of persons

- Pursuit of social justice
- Integrity of professional practice
- Confidentiality in professional practice
- Competence in professional practice

I used these values as a framework for practice throughout my research study. Respecting the dignity and rights of others is a major aspect of all social work. The CORU social work guidelines underline the importance of respecting service users in all matters of interaction and therefore they were at the core of all my research. Further discussion and collaboration with the Westgate Foundation around their own ethical policies ensured that both UCC and the Westgate Foundation were in agreement regarding my research methods.

To ensure that ethical considerations were adhered to, all participants were provided with a participant's information sheet which outlined the purpose of the study. At the time of interviews, all interviewees were asked for their permission to record the interviews and were then provided with a consent form. The consent form stated that all personal information gathered would remain confidential and anonymity of participants retained. It was also made clear that participation in this study was provided strictly on a voluntary basis. I confirmed that the information gathered would be stored securely and privately. To ensure full transparency, all participants were advised that they could withdraw their participation in the research at any time.

## **2.5 Limitations**

Certain limitations arose through the process of this research study. I believe it is fair to say that positive ageing is a relatively new concept with limited documented academic research to date. However, there is sufficient research around age-friendly concepts such as successful ageing, productive ageing and active ageing. I distributed thirty six surveys to the independent living houses on the Westgate Foundation grounds. However, only five were returned completed. The one-on-one and focus group interviews conducted were all attendees of the Westgate Foundation. In my role as researcher, I had an interest in gaining an understanding of the perspective of someone who was not in receipt of services for older

people in order to establish a contrasting view to those who were actively involved in the Westgate Foundation. However, this was not possible due to the restricted nature of this study. All of those interviewed were active participants within the Westgate Foundation. As a Social Worker myself, I feel it would be fair to consider a wider group for potentially more broad representation of the demographic at the centre of this study for future research efforts in positive ageing.

## **2.6 Conclusion**

In this chapter, I have discussed the research methods used to conduct this research study. Primary research provided a deeper understanding of participant views on positive ageing. The literature review provided the academic basis for interrogation of topics discussed in the existing and relevant information available today. Ethical considerations guided all aspects of this study. To conclude, in conducting this research, I have identified limitations that arose through the research methodology. The following chapter will discuss the secondary research conducted in the form of a literature review.



## **Chapter Three: Literature Review**

### **3.1 Introduction**

This chapter delivers an introduction to the concept of positive ageing while discussing the reasons why this concept has emerged. I provide an overview of some of the existing academic literature on ageing. In order to conceptualise ageing, a sociological approach is used. I then provide a brief overview of some of the existing strategies and policies on positive ageing.

There are three main theoretical approaches to ageing; the biological, psychological and social aspects of life that affect ageing. Each of these areas cast an interesting light on the concept of positive ageing. For the purpose of this study, I engage with a sociological perspective looking at the interactions between the individual and society in order to gain a deeper understanding of what positive ageing means. In order to better understand the concept of positive ageing, this literature review first looks at the concept of ageing itself. Following this, I consider existing literature in order to look at the themes and theories that conceptualise ageing. Furthermore, I compare and contrast existing ‘Positive Ageing’ strategies and policies while forming a critical analysis in order to fully understand what positive ageing means.

### **3.2 Ageing and Positive Ageing**

In recent decades, perceptions and attitudes to ageing have evolved dramatically. “Recent years have seen a growth of interest in ageing, increased research opportunities and the development of ageing studies as part of the mainstream disciplines within the social sciences” (Estes, Biggs & Phillipson, 2003, p.2). There has been increasing attention paid to the area of gerontology in order to gain a better understanding of ageing (Hepworth, in Bunton et al, 1995). Gerontology, the study of the sociological, psychological, and biological phenomena associated with old age and ageing (Jamieson and Victor, 2000), has allowed professionals to consider the concept of positive ageing, a thought similar to that of ‘successful’, ‘productive’ and ‘active’ ageing. Gerontology goes further than studying ageing alone, in that it “attempts to establish connections between lifestyle and health” which has

“resulted in increasing attention being paid to the adult ageing process and techniques for combatting the more deleterious consequences of biological ageing in later life” (Hepworth, 2005, p.175). More and more professionals, academics and researchers are recognising that ageing is a heterogeneous concept rather than a homogeneous one. It is recognised that ageing is an individual, universal, and continuous process faced by all living people (Vaillant, 2003).

In 2013, Kathleen Lynch, Ireland’s Minister for Disability, Equality, Mental Health and Older People, advised us through the National Positive Ageing Strategy that “the ageing of our population from this point onwards will represent one of the most significant demographic and social developments that Irish society has encountered” (Department of Health, 2013, p.4). The publication of the National Positive Ageing Strategy may be considered a response to our ever changing understanding and responses to ageing. Current research and literature around the concept of ageing tells us that people are living longer. That there is a significant demographic shift, showing an ageing population living longer than ever before. Rebecca Taylor tells us that “countries are experiencing unprecedented demographic change resulting in increased longevity, an older population that is growing in size and a falling birth rate” (Taylor, 2011, p.4). This shift alone may have contributed to the production of a number of national and international policy documents that have been developed in order to promote positive and healthy attitudes towards ageing. Alan Walker highlights the importance of policy making on the topic of ageing stating that “demographic ageing is of critical importance in both personal and policy terms as its salience is emphasized by the parallel transformation taking place in the experience and meaning of old age” (2005, p.6).

The publication of documents such as the of the National Positive Ageing Strategy (2013) and The Irish Longitude Study of Ageing (TILDA), indicate a strong governmental tendency towards promoting increasingly positive attitudes to growing older in Ireland. Such policies have a vision of an Ireland that “provides the supports, where necessary, to enable older people to maintain their health, well-being, as well as to live active and full lives, in an independent way, in their own homes and communities for as long as possible” (Government of Ireland, 2008, p. 60). With such publications, policy makers and governmental bodies

appear to be recognising that growing older is an inevitable, yet, diverse and heterogeneous life experience. The perceptions of ageing in Ireland appear to be moving towards a more positive trope than in times gone by, encouraging the participation, inclusion and recognition of older people in society supported with a governmental commitment to ensure that “older people are recognised, supported and enabled to live independent full lives” (Department of Health, 2013 p. 56).

### **3.3 Perceptions of Ageing**

In discussing the concept of positive ageing, we must first understand what ageing is. Considered a global phenomenon (Minichiello and Coulson, 2005), ageing is a dynamic and shifting concept that has evolved dramatically over centuries. In its simplest form, ageing is the process of growing older. In Western society, we have moved from a positive outlook on ageing to a more negative one. Wherein the past, older people were considered wise and treated with respect, today, a more negative perception exists, with many believing our older population to be frail, vulnerable, a burden on society and a drain on our resources (Lyons 2009, Timonen 2015, Caro 2010, Gergen & Gergen 2001).

Ageing is often considered in chronological terms in that our age determines our stage of life. However, a chronological definition of age does not take into account the differences and diversity of individuals. According to Ian Stuart-Hamilton old age can be defined as “the final segment of the lifespan” (2011, p.15). Stuart-Hamilton goes further in suggesting that for those who require a number to define age, 60 years is a fair and agreeable figure (2011). However, much of the research suggests that 60-65 years is the perceived as the beginning of old age in some societies (HaPAI 2015, Lyons 2009, Lui et al 2009, McDonald 2009). To solely consider the chronological manner of calculating age could be considered somewhat subjective, particularly within the social sciences. It does not take into account the uniqueness of the individual and tells us nothing about the individual themselves. Perhaps it is better then to consider ageing as a part of the life course rather than just a number,

*“It is ageing which gives the individual’s life its rhythm, and links the duration, timing and sequence of stages in life. It is the social sequencing of*

*the stages that creates the category 'old age' and gives the life course its meaning" (Vincent, 2003, p. 7).*

Rather than focusing on old age and placing an emphasis on growing old, we need to look at "ageing as part of a continuum" (Stuart-Hamilton, 2011, p.3). In doing so, we can acknowledge that ageing is part of a process of change experienced differently by each individual. Growing old is not something that just happens, rather it is a progression in life that leads to a different stage of the life cycle. "This experience of old age is a social one because it is society that defines what it is to be old and what meaning, expectations and status are attached" (Cole, cited in McDonald, p.150). This allows us to consider ageing as an inevitable stage of life while acknowledging that old age is a social identity which has been constructed over time.

### **3.4 Sociological Approaches to Ageing.**

Although growing older is a biological inevitability, how Western society at large perceives growing old is socially constructed and differs throughout the world. Estes tells us that,

*"The experience of old age is dependent in large part upon how others react to the aged; that is social context and cultural meanings are important. Meanings are crucial in influencing how growing old is experienced by the aging in any given society; these meanings are shaped through interaction of the aged with the individuals, organizations, and institutions that comprise the social context" (Estes et al, 2003, p.18).*

Over the past few decades, the study of ageing has evolved, shifting from a previous image of frailty and vulnerability to a more modern, positive image of older people having a more to offer society. "While older people may have been characterised formerly in terms of their frailty and deteriorations there is an increasing awareness of the need to re-evaluate the role and function of older people in a modern society" (Lynch, 2014, p.132). In social work and many other disciplines, we look at theories in order to gain a deeper understanding of a concept or phenomenon. Pierce and Timonen (2010) advise us "that theories should be seen

as lenses for viewing ageing and policy in new ways” (CARDI, 2010, p.41). Social theories allow us to consider ageing in a social content. If we use social construction as an approach to studying ageing, “it allows us give rise to socially-defined expectations of age-related behaviours with which older people are expected to confirm” (Fealy and McNamara, 2009, p.8). With social theories we study age in the context of the individual and their interactions with their environment (Jamieson & Victor, 2002 and Scheidt & Schwarz, 2013). Growing old is an inevitability faced by every individual who is born into this world. The only other alternative is death. So how do we look at ageing? The idea that age is a socially constructed concept allows us to look at ageing as if it has been formulated by the society in which we live in. We know that age is socially constructed as it is perceived differently all over the world. “This experience of old age is a social one because it is society that defines what it is to be old and what meaning, expectations and status are attached” (Cole, cited in McDonald, p.150). How we grow old is in fact perceived by the society that we live in and this can affect growing old both positively and negatively depending on how old age is seen.

Retirement is a social construct that some academics deem to be the most significant with regard ageing. Vincent tells us that “the single most important transition that is seen to mark entry into old age is retirement” (Vincent, 2003, p.9). For some, retirement is a welcome end to a life of work and the beginning of a slower pace of life. However, for others, there comes with it, a loss of identity and a loss of purpose which can lead to marginalisation and social exclusion. Retirement broadly “brings about the end of a person's economic activity and often, with it, social disengagement, marginalization and a diminished status in many productivity-orientated Western cultures” (Andrew, 2012, p. 108). Let us now examine some of the sociological theories that allow us to consider the effects of retirement on people as they grow older.

One such sociological theory is the disengagement theory. Cummings and Henry proposed disengagement theory (1961) as a means of illustrating how people age. Disengagement theory tells us that individuals may withdraw and isolate themselves from social relationships and their prior life due to the ageing process. According to Cummings and Henry,

*“aging is an inevitable mutual withdrawal or disengagement resulting in decreased interaction between the aging person and others in the social system he belongs to. The process may be initiated by the individual or by others in the situation. The aged person may withdraw more markedly from some classes of people while remaining relatively close to others. His withdrawal may be accompanied from the outset by an increased preoccupation with himself; certain institutions in society may make the withdrawal easy for him. When the aging process is complete the equilibrium which existed in middle life between the individual and his society has given way to a new equilibrium characterized by a greater distance and an altered type of relationship” (1931, p.14).*

Disengagement theory speculates that ageing requires a slow yet inescapable departure from society in order to prepare for death (Stuart-Hamilton, 2011). This is achieved through a withdrawal from work and social interactions (Estes, Biggs & Phillipson, 2003). However, there is very little evidence to prove this theory is correct. Critics suggest that although the process of withdrawal from certain levels of society may exist, it does not mean the quality of remaining relationships do not have a deeper meaning and context (Timonen, 2008; Hepworth, 2005; Walker, 2015). It also points out that withdrawal from society is often unintentional and may occur due to uncontrollable circumstances such as “disability, poverty, retirement or widowhood” (Ray and Phillips, 2012). If anything, this particular theory creates a negative assumption of people in later life. Disengagement theory allows for older people to be viewed and constructed as vulnerable, frail and a burden on society, creating a discourse that leads to discrimination and marginalisation on both a societal and service provisions level. “Older people may become marginalised with in practice if the assumption is that this withdrawal is a logical and inevitable consequence of ageing itself (Lynch, 2014, p.31). As Davis points out, “this gradual withdrawal process results in a marginalisation of older people in society” (Davis, 1994, p.10). The disengagement theory may even be considered ageist as it assumes that all people are ready to remove themselves from their social roles once they reach a certain age. It does not take into consideration the differences and diversity of people and their abilities or wishes to remain working. It also fails to recognise minority groups who

were either not in the workforce or had to leave because of illness or disability (Davidson in Stuart-Hamilton, 2011). Perhaps it is more a case of society letting older people down than older people disengaging from society (Lynch, 2014 and Timonen, 2015).

As a rebuttal to the disengagement theory, Havighurst established the activity theory in 1961. The activity theory was derived from the idea that ageing successfully is achieved through a positive approach earlier on in adulthood. Activity theory argues that “psychological and social well-being could be enhanced by involvement in social roles and activities” (Estes, Biggs and Phillipson, 2003, p.13). It goes further in suggesting that a positive attitude and regular activity contributes to a more fruitful existence in later life. Jessica Diggs tells us that,

*“According to the activity theory of aging (also referred to as the implicit theory of aging, normal theory of aging, and lay theory of aging), there is a positive relationship between a person's level of activity and life satisfaction, which in turn increases how positively a person views himself or herself (self- concept) and improves adjustment in later life” (Diggs, J. 2008, p. 80).*

Although considered a counteraction to the disengagement theory, the activity theory can also be seen as limiting in that it does not take into consideration those who may be marginalised. The activity theory puts emphasis on the individual to remain active and engaged in society, arguing that inactivity impacts negatively on the psychosocial wellbeing of a person. However, it fails to take into account the wider, macro influences that can lead to inactivity for an individual (Lynch, 2014, Timonen, 2015). Similar to the disengagement theory, it does not recognise minority groups, people with disabilities or ethnic minorities.

In 1972, Robert Atchley conceptualised the continuity theory in order to contend the disengagement theory and build upon the activity theory. Atchley argued that in order to age successfully, people must start in the midlife stage and carry through their “values, lifestyles and relationships” (Bowling, 2008, p.1) into the later life stage in order to age successfully. Continuity theory counteracts the disengagement theory in that it,

*“relates that personality, values, morals, preferences, role activity, and basic patterns of behavior are consistent throughout the lifespan, regardless of the life changes one encounters. This theory builds upon and modifies the Activity Theory. Unlike the other two sociological theories, the Continuity Theory offers the backdrop of life perspective to describe normal aging. The latter part of life is simply a continuation of the earlier part of life, a component of the entire life cycle” (Moody and Sasser, 2014, p.173).*

Continuity theory “argues that although people seek change, they also seek a certain amount of continuity, both psychologically and socially” (Jamieson and Victor, 2002, p. 13). It allows us to take into consideration the uniqueness and personality traits of the individual which the activity and disengagement theories fail to recognise. It illustrates the differences between people. For example, someone who is socially involved in earlier life is more likely to be so in their older age, whereas someone who is reclusive and insular is more likely to remain so.

Although these sociological theories help us to consider ageing, they fail to fully take into consideration the diversity and heterogeneous nature of the individual. These theories do not reflect people's race, socioeconomic status, gender or lifestyles, making it difficult to prove that these theories are relevant. Such theories can actually result in pressure being put on the individual to conform to such ideas, images and constructs that society has created relating to the ageing process. Haim Hazan articulates that if we consider the theory of the ‘looking glass self’ it allows us to contemplate the impact that such images can have on the older individual:

*“we see each other as we imagine others see us, and therefore the behaviour of older people and their attitudes towards themselves are shaped and reinforced, by society's providing images of them. By adopting these images, the elderly in turn confirm and strengthen them”.*

(Hazan cited in Gubrium and Holstein, 2000, p.19)



Timonen goes further in telling us that such theories place an expectation on people. She refers to “society's expectations of old people. Regardless of how older people view their bodies, minds and capabilities, society can place extensive limits on their ability to act in accordance with their views” (2008, p.8). The three theories mentioned above, particularly continuity theory, contextualise the rationale behind ideas of healthy ageing. Positive ageing is one such concept.

### **3.5 Positive Ageing in the context of Policy**

The United Nations Principles of Ageing (1991) was one of the founding documents that highlighted the fundamental human rights of the ageing population. It demands recognition of the diversity of ageing and encourages the participation, inclusion and equal rights of the older generations. It goes further describing the need for such cooperation stating that the UN is,

*“convinced that in a world characterized by an increasing number and proportion of older persons, opportunities must be provided for willing and capable older persons to participate in and contribute to the ongoing activities of society.”* (United Nations 1991)

The United Nations Principles of Ageing made the following recommendations relating to what they define as the key factors of ageing:

#### **Independence**

Recognising that older people should have access to basic needs such as food, shelter, clothing and healthcare. It goes further in suggesting that people should have the right to generate income and continue working as a means of independence. On reaching 65, people should not be forced to retire, rather, the individual should be entitled to choose when and how they exit the workforce. If they do chose to retire, then access to further education and training should be widely available. People should feel safe and secure in their environments, while being supported to live in their own homes for as long as possible.

### **Participation**

Older people need to continue to be integrated into society. This could be achieved through positive support services that encourage inclusion and cooperation from participants. The voice of these participants should be acknowledged, validated and respected. Collaboration with all age groups, particularly younger should be encouraged.

### **Care**

There is a need and demand for access to a wide range of support services that fully respect the diversity, beliefs, needs and privacy of the individual. Older people should have the right to make decisions around the quality and standard of their lives.

### **Self-fulfilment**

A significant aspect of wellbeing is self-fulfilment. The pursuit of opportunities and continuous development in order to reach one's full potential gives purpose and sense to our lives.

### **Dignity**

Referring to equal rights, everyone has the right to live with dignity, without exploitation or being at the risk of abuse. Older people are no exception and should be looked upon with value and respect regardless of their age. (United Nations 1991).

Evolving from these earlier factors to ageing, positive ageing, similar to other terms such as 'active' and 'successful' ageing has been introduced as a way of promoting healthy ageing. This may be considered a response to the demographic changes in ageing. People are living longer today than ever before. Professor Rose Anne Kenny tells us that the number of adults in Ireland is increasing significantly,

*“by 2036 one in five Irish people will be over 65 years of age; with the greatest increase being in those over 80 years of age. Ageing on this scale is unparalleled in Irish history and will have significant consequences for*

*Ireland's economy and society.*” (Trinity College Dublin, 2010, p.2).

Population ageing is a global phenomenon and is now considered a “major global trend that is transforming economies and societies around the world. It is one of the most important demographic megatrends with implications for all aspects of our societies” (UN 2012). Put simply, population ageing accounts for the decrease in the amount of births occurring and the increase in the length of time people are living (United Nations 2012, WHO 2002, Lynch, 2013). These significant shifts and changes in ageing have led to the publication of a number of Irish policies and strategies which aim to promote positive ageing in Ireland (TILDA 2012; NPAS, 2013). Throughout preceding decades, emerging policies on healthy ageing have opened up a discourse of promoting a positive attitude towards ageing, encouraging attitudes of acceptance, recognition and respect to the dynamic and changing phase of life (WHO, 2002). These policies go further in encouraging a conversation on positive ageing, recognising that the ageing population are not a homogenous group, rather they are a heterogeneous group and should be respected as such. Such policies lead the way in promoting interest in improving older people's wellbeing and encouraging active participation in society through health, independence and social interaction. “Governments and international organisations now agree that supporting older people to continue living in the community for as long as possible makes both economic and social sense.” (Chi-Wai et al, 2009, p.116). The World Health Organization argues that “countries can afford to get old if governments, international organizations and civil society enact “active ageing” policies and programmes that enhance the health, participation and security of older citizens” (WHO, 2002). Similar to concepts of health ageing and active ageing, positive ageing strives to promote the wellbeing of older people.

In 2013, the National Positive Ageing Strategy (NPAS) was published in Ireland. This document was introduced as a means of promoting a more positive perception on ageing in Ireland. Its mission, as illustrated in the document is to encourage the creation of:

*“a society for all ages that celebrates and prepares properly for*

*individual and population ageing. It will enable and support all ages and older people to enjoy physical and mental health and wellbeing to their full potential. It will promote and respect older people's engagement in economic, social, cultural, community and family life, and foster better solidarity between generations. It will be a society in which the equality, independence, participation, care, self-fulfilment and dignity of older people are pursued at all times."*

(The National Strategy of Positive Ageing, 2013, p.3)

Using a holistic approach, the National Positive Ageing Strategy aligns with similar international policy documents focused on active and positive ageing. This suggests that economic, social and environmental factors all have a significant impact on the health and wellbeing of our ageing population (WHO, 2002, UN, 2013, NSPA, 2013). Although this document was published in Ireland in 2013, the topic has been discussed at an international level since at least the 1980s. The World Health Organisation (WHO) introduced the concept of 'active ageing' through publications which have been updated as the concept has evolved. The WHO describes active ageing as,

*"the process of optimizing opportunities for health, participation and security in order to enhance quality of life as people age. It applies to both individuals and population groups. Active ageing allows people to realize their potential for physical, social, and mental well-being throughout the life course and to participate in society, while providing them with adequate protection, security and care when they need".*

(WHO 2002, p.12)

### **3.6 Positive Ageing and Social Exclusion**

Such healthy ageing strategies not only promote awareness around the wellbeing of older people, but also address the barriers and challenges faced by the ageing populations with regard their economic, physical and psychosocial wellbeing (WHO 2002; Department of

Health 2013). Such barriers and challenges may result in social exclusion for some older people in society. Social exclusion, can be described as,

*“a complex and multidimensional process. It involves the lack of denial of resources, rights, goods and services, and the inability to participate in the normal relationships and activities available to the majority of people in a society, whether in economic, social, cultural or political arenas. It affects both the quality of life of individuals and the equality and cohesion of society as a whole”* (Levitas et al, 2007, p.25)

In alignment with the rejection of social theories such as the aforementioned disengagement theory, “positive ageing discourse challenges assumptions about older age as a period of inevitable decline and focuses on the modifiable effects of lifestyle, attitude, skills and technology” (Davey and Glasgow, 2006, p.22). However regardless of the steps towards promoting positive images of growing older in society, there still remains negative attitudes towards ageing which can have an adverse effect on how people grow older. “Attitudes are a very powerful determinant of older people’s quality of life and also have a deep impact on policy making” (Timonen, 2008, p.133). Through these positive ageing strategies, growing older is somewhat problematized. Some perceive the older generation as a burden on our society. The phrase “silver tsunami” as coined by Fried and Hall (2008, p. 1793), is often used as a means of illustrating this perceived burden on our health and social services. Some policy makers identify older age as a problem, a burden on resources and perceiving older people in a dependent nature (Lynch, 2013). Such negative perceptions go further in problematizing growing old, when in fact, problems faced by older people are:

*“ones that are socially constructed as a result of our conceptions of aging and the aged. What is done for and about the elderly, as well as what we know about them, including knowledge gained from research are products of our conceptions of ageing. In an important sense, the major problems faced by the elderly are the ones we create for them”* (Estes et al, 2001, p.6).

These negative images fuel stereotypes that in turn lead to further issues of ageism and marginalisation. “Ageism promotes the idea that older people are a burden and this can lead to neglect and social exclusion. It can also reduce older people's self-esteem, reduce their participation in society and restrict the types and quality of services available to them” (McGlone and Fitzgerald, 2005, p.10). Furthermore, ageism can be seen as “a process of systematic stereotyping of and discrimination against people because they are old, just as racism and sexism accomplish this for skin colour and gender” (Butler and Lewis, 1973, p.30).

Although healthy ageing strategies and policies mention barriers to positive ageing, it is not clear if these healthy ageing ideologies fully understand the impact that they have on those who are unable to participate fully. Davey and Glasgow tell us that such healthy ageing strategies are “problematic for those who are not, or who can no longer be, self-reliant and independent” (2006, p.26). In all aspects of life, it is important to have choice. Advocating for positive ageing to people who are challenged through health, capacity, socioeconomic poverty and isolation could be viewed by some as being patronising and illogical (Timonen, 2015). Assuming that all people have the ability to age healthily and positively presumes that all older people are a homogenous group with individuals all having the same needs. Furthermore, placing such emphasis on the individual to age healthily and positively may take away from the responsibility of society and governmental bodies to provide better services that might provide a wider range of people with the chance to age positively. “Positive views of ageing may ironically detract from the availability of resources” (Phillips cited in Parton, 2012, p.150).

Nonetheless, the National Positive Ageing Strategy attempts to counteract these negative stereotypes in asserting that, “what Ireland needs now is a strong vehicle to challenge assumptions about older age as a period of ill-health and decline and population ageing as a burden and a cost” (NPAS, 2013, p.12). The strategy highlights the need to move away from the negative attitudes and connotations of old age while work towards creating and implementing positive attitudes towards old age. However, although the launch of the National Positive Ageing Strategy in 2013 is a compelling and welcomed move towards

recognising older people in Ireland, it is important to note that there has, as yet, been no publication detailing how this strategy is to be implemented (Age Action, 2016).

### **3.7 Conclusion**

Recent significant demographic shifts have opened up a discourse on ageing that has led to the need to examine how society views the process of growing older. Rather than problematizing ageing or viewing older people as a burden on society, policies and strategies aim to promote the concept of positive ageing. The promotion of changes in attitude, and encouraging activity, participation, inclusion and health and overall wellbeing for older people can be viewed as playing an integral role in positive ageing. This review of secondary literature around positive ageing concepts illustrates the emphasis on the centrality of the individual. It also highlights the importance of creating and sustaining an active and successful life throughout all stages of life. For those who are able to remain active and in good health in later life, positive ageing may open up opportunities that will improve their quality of life in their latter years. Although mention of minorities and marginalised groups is made, there is not a significant amount of evidence to show that the needs of such groups are fully taken into consideration in discourse to date on the topic of positive ageing. Empowerment, inclusion, participation and social interactions are major factors of positive ageing. However, what about those who cannot access services and do not have the relationships or networks to encourage and enable them to do so? Moreover, what about those who choose not to partake in what policy tells them is positive ageing? Does this mean they are not ageing positively and therefore are not successful in this phase of life? In order to explore this further, the next chapter looks at the findings that emerged from the primary research of this study. Through a survey, one-on-one interviews and a focus group interview, participants were asked their opinions on positive ageing and what it means to them. The following chapter will explore the findings of this applied research.

## **Chapter 4: Findings & Results of Primary Research**

### **4.1 Introduction**

As discussed in Chapter One, the aim of this research is to understand what positive ageing means while exploring the views of the participants of the Westgate Foundation. In order to gather data, a survey was distributed to the independent living residents of the Westgate Foundation campus. I conducted interviews with members of staff within the organisation as well as with participants of the Westgate Foundation. This chapter outlines the findings from this primary research. I transcribed the recorded interviews and interpreted the surveys received. Through analysis of the data in this primary research, the following six themes were identified:

- Participation and Activity
- Access to Services
- Meaningful connections
- Autonomous Living
- Altruism
- Attitude

These themes will be discussed in detail in this chapter.

### **4.2 Participation and Activity**

The majority of interviewees agreed that both participation and remaining active play a critical role in ageing positively. These findings support the discourse in both existing literature and governmental strategies around positive ageing (NPAS, 2013; WHO, 2002; Lynch, 2013; Estes et al, 2003). Victor and Scharf tells us that “a key dimension in current thinking concerning the promotion of the quality of life in old age relates to notions of social engagement and social inclusion” (cited in Walker, 2005, p.100).

In discussing participation and activity, health plays a major role in being able to participate



and remain active. One participant stated that “being healthy allows us to do lots of things at this stage and hopefully into the future as well hopefully”. With this in mind, participants discussed the benefits of having good health in order to age positively. One interviewee claimed that,

*“I think that health is a very important factor, because, if you're not healthy, there are lots of things that you won't be able to do. It is so important that if your health allows you to get involved in hobbies or groups, to be part of whatever comes your way, that if you can't avail of those things because of bad health”.*

This point was reinforced by other participants. “If you have your health, then you have to motivate yourself to go from A to B”.

It was voiced that having a purpose, feeling needed and being valued in turn leads to participation and being active. It was acknowledged by interviewees that being valued is a fundamental contributor to positive ageing. Engagement and involvement has a ripple effect; it keeps the mind active and fosters stimulation. One participant noted that “it gives you a sense of ownership and value; you are part of something”. Another participant made the correlation between staying active and combating depression. “I try, as far as I can to remain active, and therefore alive without letting things to get me down.” Another participant went further again in stating that,

*“We can all sit at home all day and all night, but you have to stay involved. You have to keep yourself, keep your mind active. Absolutely keep your mind active. That, for me, is so important. Staying interested. If you're not interested, what happens? You get depressed. Being involved is a huge thing I think. In whatever it is. And you know, nobody can do that for you, you have to do that yourself. Nobody can make you get up and go to a meeting or whatever, some people need a push. Others don't”.*

Others discussed the need for planning and setting goals while others focused upon staying involved and engaged.

*“You have to have a plan or a focus. They might seem little but they are very important. You have to make a conscious decision to plan small things. They are small steps that will give you a focus. That you are not sitting at home wondering what will I do now?”*

*“Getting up and getting out and doing things is so important. I can see people who can get very disgruntled with life if you have no outlet outside of your own four walls”.*

One interviewee acknowledged the need for continued education in healthy living at all stages of life, not only in reaching old age.

*“Ageing really, we need to start much earlier than when we reach seventy or so. It is so important to be aware at an earlier stage in your life, while you are still working and still active to be doing the right things in relation to health and so on”.*

Throughout the interview process, the importance of participation and activity was noted as a critical factor to positive ageing. It was however stated multiple times that not everyone has the opportunity nor the inclination to do so. In the literature, Timonen tells us that “many commentators are aware of the potential of active ageing to adversely affect population groups that are not able to live up to the expectations of active ageing scripts” (Timonen, 2015, p.57). This acknowledges the exclusion that may occur for those who are not able to or inclined to actively participate. However, is this necessarily a bad thing? Does a lack of participation and inclusion fuel negative views of older people? Hank and Erlinghagen argue that “unproductive behaviours among older adults are not necessarily bad and can actively create stigmas dangerous for social cohesion” (2010, p.175). We must ensure that we do not criticise those who do not actively participate, otherwise we run the risk of further excluding vulnerable older people from society.

### **4.3 Accessing Services**

Walsh et al tell us that “access to a range of services both in the community and within the home, becomes extremely important as people age” (Walsh et al, 2015, p.124). Interesting,

there was unanimous agreement in both the surveys and the interviews that accessing and engaging in services plays another significant role in ageing positively. This was discussed mostly in terms of accessing services as a means for social interaction. One participant expressed that “when services are provided, like transport, meals where necessary and a staff that are friendly and helpful, it is a big plus to us”.

Participants were asked how they thought not having access to services would impact on their lives. One participant felt that “some people would find it devastating because they couldn't go out”. Another participant, when asked if being involved in services is a necessity in ageing positively, said “yes, because I live on my own and ageing may be a lonelier process if I wasn't part of the Westgate community”.

During a discussion around loneliness and ageing, one interviewee stated,

*“There's a big difference between being alone and being lonely. There are people who like being solitary, who don't want a whole load of people being around them and, as people grow old, it should be possible for people to be able to choose that while at the same time having the necessary supports and service. You know, having access to them”.*

Further discussions with the focus group considered the geographical aspect of accessing services. It was noted that those living in rural areas have very different experiences in accessing services compared to those living in urban areas. One participant said,

*“One thing that would hit you at times when you'd see older people trying to access places well say, particular now if there's no lift, and you'd see older people trying to get up and down. Facilities are important. Transport is extremely important for older people.”*

Another said

*“I think it is so different for people here in (place name) ageing compared to those living in the country. You can walk down from one end of the street to the other with street lights. You can drive for miles in the country in complete darkness. There's not a light in the heart of the*

*country.”*

This highlights the issue of loneliness and isolation for some older people that live in rural areas. As noted in the literature review, isolation is a significant barrier to those wanting to participate or access services. Lynch highlights this when he writes that “older people in rural communities may be doubly disadvantaged by a lack of services, amenities and that sense of loneliness and isolation that is more likely within these areas” (Lynch, 2013, p,29).

Discussion around services and lack thereof in rural areas in turn led to the topic of political responsibility and the discontinuation of services in certain areas, such as transport services and access to sufficient health services. Discontent was expressed explicitly regarding a lack of political representation for older people in Ireland. One participant expressed frustration on this topic,

*“We have no representative. We need a minister with some portfolio to look after the older people in this country because we don't have a voice at the moment. We have a voice here now and maybe dozens of other places like this, but as a collective, we don't have a voice. And we need a voice and that's what we should push for”.*

Participants asserted the need for significant changes in legislation to preserve the rights of older people in Ireland. A significant finding of this research is that, when asked, not a single participant was able to identify any positive changes in governmental policies in the last decade that has improved the quality of life of older people. One participant expressed this frustration stating that,

*“There's no sense of outrage. We should have a sense of outrage. We as an older group have more fire in our bellies than we think we have. We have more influence than we think”.*

This statement illustrates the importance of attitudes, in that it shows that older people still want to be heard and that their voice and input can affect change on a political level. The theme of attitudes will be discussed later in this chapter.

#### 4.4 Meaningful Connections

“Togetherness is everything”. This sentiment from a participant illustrates the importance of relationships in not just our later years, but in everything that we do. Participants affirmed the significance of relationships and social connections in positive ageing. As with the aforementioned importance of participation, relationships may be considered key to ageing well. Anne Bowling found that relationships contribute to “one's self-esteem, feeling valued and loved, pleasure and enjoyment in life, and feeling secure” (Bowling and Gabriel, 2007, p. 836). Linking relationships to the importance of active participation, one participant asserted that, “... participation is very important when you are ageing I think, and it is very difficult to do it on your own.”

Another expressed the importance of learning from others experiences,

*“... we are influenced by the people we meet. We are influenced by their experiences in life. And em, the one thing I have learnt coming through life (cough) always listen to what somebody else has to say about anything because em, they may be on a different life course or they would have come up with different situations from what I would have come up with”*

In discussing the critical role of relationships in positive ageing, it was acknowledged that not all people have supportive relationships. There was recognition that not everyone has family or friends that they can interact with regularly and it is easy for social isolation to occur. In this regard, social isolation was considered to be a highly negative experience and a barrier to positive ageing. Participants noted that social isolation can result in a negative mind-set and indeed can lead to depression. For this reason, meaningful, positive relationships and active participation were both named as key methods to avoiding and combating depression.

It was suggested that older people may feel lonelier or more isolated because of a lack of relationships and connectedness. Phillips and Ray allow us to consider this further when they write “as people age, grief and loss of friends and family are an inevitable part of life”. (Phillips and Ray 2012, p.44). However, it should be noted that although a certain amount of

loneliness in older people can be attributed to loss through bereavement, according to one interviewee, “loneliness is not age specific. Perhaps there is a greater concentration of loneliness as people get older because they may have gone through more bereavement, and I suppose that’s a natural part of life, but there are also lots of lonely younger people.” The importance of relationships is echoed by numerous participants in this research, and through further conversation, the onus is put onto the community to ensure that older people are included and connected. “If neighbours don't see each other and have a chat it can be a very lonely situation I would say. I think to age positively, you need to be involved in some way or another in something”. Another participant stated that “saying good morning, are you walking my way? I'll walk with you...the difference it makes in connecting with people”.

When discussing the Westgate Foundation, one employee noted how social interactions within the service positively benefited participants,

*“The mix of people is really positive and good for people. People make friends with each other. People make friends across health differences. Their connection is not about that, their connection is that they met here and became friends. In some ways, broader society, it is hard for people to find places for that. Just to have the kind of space where people can meet and form that connection, I think is a positive thing”.*

This illustrates the importance of recognising diversity and uniqueness within the older population while highlighting the importance of community organisations that can provide the space for people to interact. I will now discuss autonomy as a theme that emerged in participant interviews.

#### **4.5 Autonomous Living**

One participant pointed out that “positive ageing should mean autonomous living. It should be living from within yourself and having control over the choices you want to make around your life. Not all people want to be active”. This statement highlights the need to recognise that older people are a heterogeneous group with individual and unique needs. Daatland and Biggs clarify older people as a heterogeneous group in writing,

*“People may change on many dimensions simultaneously, that there may be multiple forms of functional change observed within a person, that dimensions and their associated change trajectories may or may not be interrelate, and that different people may show different patterns of change across domains (Daatland and Biggs, 2005, p.14).*

In order to fully recognise people's individuality we must recognise that not everybody chooses to partake in activities and services. Some prefer a more secluded and detached lifestyle. With this in mind, the theme of autonomous living was identified. People must be allowed to self-determine the way in which they grow old. If we conclude that all older people want to engage with people and services in order to age positively, then we marginalise the people who do not and we create an assumption of negative ageing. One interviewee expressed their thoughts on autonomous living in posing the following question,

*“Is it positive in terms of people themselves deciding what is positive for them, or is it positive in terms of an external benchmark that's been set down and then everybody has to kind of either reach it or they fall outside it? And that does marginalise people. It's very (pause), there are all kinds of hidden prejudices in stuff like that because it doesn't take into account different circumstances”.*

In order to examine this topic further, I asked interviewees to consider people with different personalities and life choices, people who choose to lead a more secluded lifestyle. The overwhelming response to this was that it was important to respect people's choices. Participants acknowledged that it is important to distinguish between someone who chooses to live a more isolated life and someone who is socially isolated due to a lack of support and human connection. Participants clearly voiced that while it is important to offer support it is equally important that if refused, the individual's choice to say no must be respected.

*“I think it is a very individual thing. I would have a strong belief as well whereby somebody can live positively by doing nothing, if that's what they want to do. If they want to stay at*

*home and not engage in services, that's fine, you know. I would have a strong sense of that too. Once somebody is happy, they are ageing in their individual positive way."*

Another participant said,

*"There are people who don't want you invading their privacy, there are boundaries that you can cross with some people and that's the way they want to be. You have to respect that. You try and do your best for them, you keep an eye you for them, but those people, you must respect their choice."*

Yet another highlighted that,

*"You can ram things down people's throats if you like. It's like invading their privacy. If they're lifestyle suits them, you might not think so, but if it is the way they want to live their lives that's it and you have to respect it. It might not look positive to you but it looks positive to them."*

#### **4.6 Altruism**

Giving back to the community is another theme that was noted as contributing to positive ageing. The altruistic act of giving back is seen as being a result of inclusion and contribution to the community as well as society. Participants said:

*"An ounce of encouragement to a person is better than a ton of criticism. Some bit of kindness to somebody every day. Think about other people and what might be good for them."*

*Positive ageing for me is being grateful for that I can do things, drive my car and so on. Being helpful to others not as fortunate as myself. It's a time for giving back".*

*"Everybody has something to offer. You give people a certain amount of latitude and you would be amazed at what you get."*



Many participants expressed that giving back to the community was a major aspect of positive ageing. This sentiment was beautifully articulated by participants through the lyrics of a song sung by Irish tenor Joseph Locke,

*“If I can help somebody, as I pass along,  
If I can cheer somebody with a word or a song,  
If I can show somebody, that he’s travelling wrong,  
Then my living shall not be in vain”.*

Other participants discussed how giving back to others and the community made them feel that they were ageing positively.

*“At this stage of your life, it can be used as an opportunity to give back and that there is a feel good factor with the giving that contributes to ageing more positively.”*

*“I love giving, we should all give something. There's so much grounding in that you know.”*

There is a feel good factor that comes from giving that contributes to positive ageing. This sense of altruism, a happiness gained from giving back highlights how perceptions and positive attitudes can determine positive outcomes.

#### **4.7 Attitude**

When participants were asked what does positive ageing mean to them, the most compelling and unified response was that of having a positive attitude. The National Positive Ageing Strategy also notes this, articulating the importance of both governmental approaches and individual approaches to positive ageing,

*“It is important to remember that the attitudes and actions of individuals are just as important as the attitudes and actions of Government and other agencies in enabling people as they age to do so in a positive way. At an*

*individual level, many of the choices made when young and middle aged, will determine how healthy people will be in later life” (Department of Health, 2013, p. 13).*

Participants illustrated their views on this stating,

*“Having a positive attitude. Look forward to getting up the following morning because you know there's something to do that you enjoy doing. That's positive ageing for me”.*

*“I think it depends on your own makeup too. It's an individual thing. Positive aging is about attitude and how you see it.”*

*“I suppose being positive about it is a great help. I can see people that wouldn't be quite as positive about problems they have. I feel we were.”*

This illustrates the point that having a positive attitude forms a common thread, linking the other themes previously mentioned together to develop positive ageing. Positive ageing starts from within and attitude was discussed as being a significant aspect in creating positive lifestyles. One major finding was that the interviewees felt that the chronological age did not matter, rather the attitude and mindset of the individual provides the basis for either positive or negative outcomes. This interviewee reaffirms the impact of an individual's attitude to ageing stating that,

*“Chronological age should never be a barrier for anyone to doing anything. If someone is say, sixty five, that actual age is not a reason why they can't participate in work or go to a social function or live whatever life it is they want to live. It is a fact of life that as people get older, that our bodies can wear and tear and there is a higher possibility of becoming ill the older you get, but that to me is a different thing. If someone is unable to go to the cinema on their own because physically they are unable to, well that's one thing. But if someone is unable to go to the cinema because they feel that at sixty five it's not the thing to do, then that to me is negative ageing.”*

This statement led to further discussion on how older people are portrayed in society and how it can fuel negative stereotypes which can lead in turn to prejudice and discrimination. The theme of ageism underpinned by stereotypes, is significantly supported in the literature review of this research.

It was recognised that through negative stereotyping, the diversity of older people is disregarded. One interviewee articulated,

*“If we could all get to a place where it was not a put down on ourselves to say our age. We are not there as a society. That is a put down on getting older. I think as a society overall, we are not anywhere near a positive, an overall positive culture around ageing. I think it is still very negative, even though different things have got better.”*

Another stated that;

*“Stereotyping is probably one of the things that most needs to change. If you take sixty to a hundred, which is the broad span of age group that we are working with here, that's the same spectrum as ages twenty to sixty. Even within the sheer diversity of that and I know there probably wouldn't be as wide a difference in later life but people in here, there is just so much difference”.*

To put it simply, one participant suggested, *“it is not an ideal world, but the more positive you are, the happier you will be, leading to a fuller life and possibly living longer.”*

## **4.8 Conclusion**

The aim of this chapter was to explore the six themes that emerged through the interview process. The established findings thought to encompass positive ageing were: participation and activity, accessing services, meaningful connections, autonomous living, altruism and attitudes. Interestingly there are many similarities between what the literature says about positive ageing and that which was echoed through the voices of the participants. Primarily, the importance of participation, activity, relationships and accessing services. The unified

thought that attitude had everything to do with positive ageing really threads all of the other findings together. In having a positive attitude it was felt that all the other aspects of positive ageing could be achieved. As set out by the objectives, the findings went far in proving that older people certainly are a unique and heterogeneous group, all with very individual and unique ideas of what positive ageing means to them. In order to complete this research project, the recommendations and conclusions will be discussed in the following chapter.

## **Chapter Five: Recommendations and Conclusion**

### **5.1 Introduction**

Throughout this action research study, I have sought to understand the concept of positive ageing and what it means to the participants of the Westgate Foundation. Previous chapters introduced the concept of positive ageing, detailed the methodology used in this research, analysed the literature available and explored some of the findings that emerged through this research study. The aim of this chapter is to summarise the key findings of this research while considering positive ageing from a social work perspective. I will then make recommendations while concluding this research with final personal reflections.

### **5.2 Key Findings**

A key learning for me in conducting this research is that positive ageing is not merely an age related concept, rather it is a unique concept that is experienced differently by each individual person. However, the findings of this research show that there are similarities in what existing literature on positive ageing tells us and what the participants believe to be factors that contribute to ageing positively. In both the literature and through the voices of the participants, there appears to be general agreement that participation, relationships and attitude are all integral factors of positive ageing. Participants articulated that these factors, interlinked with giving back to the community and respecting the dignity of individuals paved the way for positive ageing. It was highlighted through the literature and through the views of the participants that social exclusion is a significant barrier to ageing positively. There needs to be a shared governmental, societal and individual commitment to ensuring that everybody in the community has the ability to age positively, regardless of their circumstances. Rather than focusing on older people ageing positively, perhaps each and every one of us, regardless of age, should begin a discourse on positive living.

### **5.3 Positive Ageing and Social Work**

As social workers, we strive to enable and indeed empower people to live to the best of their abilities. Treating people with dignity and respect is at the core of all social work practice. As social workers, we need to understand what ageing really means to people in order to provide

the best support possible. As a means of best practise, we must tackle ageism head on, as with all forms of discrimination, in our day-to-day social work practices. Concepts such as positive ageing work towards addressing the issues faced by older people in society. However, as social workers, it is our responsibility to advocate on behalf of those who may not be able to age as positive ageing policy suggests. Tom Wilks articulates that “advocates can be involved in the process of persuading others to change and also give voice to the perspectives of service users and ensure their views are heard” (2012, p.3). It is my belief that social workers must challenge negative assumptions and stereotypes around older people while continuing to adopt a person-centred approach. Using a person-centred approach allows us to work with older people in a genuine way with positive regard when forming therapeutic relationships (Teater, 2014). Barbara Hall goes further in stating that,

*“Person-centred practice is a values-based perspective about what each of us would wish to experience with regard to choice, independence and dignified treatment if we were cast in the role of the service user. Person-centred planning is designed specifically to ‘empower’ people, to directly support their social inclusion, and to directly challenge their devaluation”* (Hall, 2012, p11).

As social workers we need to address the myth of older people being a burden on society. I believe that as social workers, we are in a unique position to lead the way in questioning the image of frailty and vulnerability associated with older people in our society. It is within our grasp to encourage the creation of a new perspective - one of opportunity, contribution and self-fulfilment in later life. Implementing evidence based practice and taking into account the older person's narrative and life experience allows us to contribute greatly to the promotion of positive ageing.

#### **5.4 Key Recommendations**

- I suggest the promotion of positive ageing and growing older through the education of younger people. In doing so, there will be great progress made in dispelling the myths of old age. Also, implementing and facilitating group work where young and old

engage with each other, learn about each other's worlds can only bring benefits to our communities. I would encourage the Westgate Foundation to invite classes from local schools to visit the organisation, encouraging members of the community of all ages to interact together.

- As part of the Bachelor of Social Work in UCC, there are not currently any modules that deal specifically with the topic of ageing and working with older people. I would suggest introducing a module dedicated solely to gerontological social work as a means of preparing and encouraging future social workers to work with this heterogeneous group in society.
- Given the short duration of this research, this study could certainly be extended. I reiterate though my belief that this work has implications for further research and practice. There is clearly a significant gap in taking the heterogeneous nature of older people into consideration. Equally, research and practices relating to positive ageing can be adapted to apply in settings outside of services such as the Westgate Foundation. As the participants of this study are all actively engaged in services, I feel that further research with a more diverse group would be appropriate. I call for further research to incorporate the views of a broader group of older people, perhaps including those who do not engage in services, in order to consider different perspectives on experiences of positive ageing.
- The research shows that the majority of literature available is on the topic of ageing, there is limited literature and research in positive ageing in general. I call upon my fellow social workers and indeed others in the social sciences to address the deficit in literature and research on positive ageing in general.

## **5.5 Reflection**

In both my student and professional life, I have worked with people of all ages. However, it was not until I undertook this study and had the privilege of working with all those part of the Westgate Foundation that I truly began to understand the importance of working with older

people in the community. Through this research study I sought to understand what positive ageing means. This led to considering ageism and the negative attitudes that affect older people today. In doing this, I discovered the challenges of identifying the 'invisible' discrimination that occurs. Stereotypes of frailty in older people in society were diminished for me through meeting the people of the Westgate Foundation. In collaborating with them, I found that older people contribute hugely to our communities and they should be respected for doing so. I will carry these learnings with me into all of my future social work practices. I also aim to incorporate principles that enable positive ageing into my personal life.



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## **Chapter 7: Appendix**

### **7.1 Participants Information Sheet**

#### **Introduction:**

Following our last meeting, I would like to welcome you all back to this focus group in collaboration with the Westgate Foundation, The CARL Project and University College Cork. I would like to officially invite you all to participate in interviews to discuss further your interpretation of Positive Ageing and how it is working for you! I am also interested in your opinions on how it cultivates a positive view on ageing within Irish society and if positive ageing recognises the voice of our older population in providing services for you.

#### **Why am I doing this project?**

This project is part of my final year for my degree in Social Work in University College Cork. Working in collaboration with the Community Academic Research Links (CARL), The Westgate Foundation was interested pursuing a research project on the Positive Ageing and listening to the voices of its service users.

The aim of this research are to ask the question: What is Positive Ageing? I will do this while exploring the views of you service users of the Westgate Foundation. In order to gain your insight, I will conduct interviews with willing participants which will involve either a focus group interview or a one-on-one interview with semi-structured questions.

#### **What will you have to do if you agree to take part?**

As this is our second meeting, we have already started the participation process. However, moving on from here will entail:

- Deciding on the interview process and how you would like to partake in the interview – in a group setting or an a one-to-one basis
- Arranging to meet at a time that is convenient for you and accessible to the Westgate Foundation.

**How much of your time will participation involve?**

- The one-on-one interviews should take half an hour.
- The focus group interview process should take about one hour. However, please plan a little extra time in case it runs over.
- If you would like to meet more often as a focus group to discuss ideas and input than I would be delighted to discuss this further during today’s group.

**Will your participation in the project remain confidential?**

Should you decide to participate fully in the interview process, no record of your name will be on the research. No personal information will be disclosed to other parties. Any of your responses to the questions will be used for the purpose of this research study only. I can assure you that anonymity will be kept at all times throughout the research. Also bear in mind that if at any time you wish to withdraw from the study, you are free to do so.

**What happens now?**

If you are interested in continuing to take part in the study you are asked to confirm this in today’s meeting. We will then decide on the preferred interview formations. Following this, I will construct confidentiality and consent forms. Once agreed, we will confirm a suitable date to distribute this and have them signed. Once received back, we can finalise dates and times for the interviews.

*I am really looking forward to continuing to work with you ☺*





## 7.2 Consent Form



I have been invited to participate in research about my views on Positive Ageing. I have read the information and I have had the opportunity to ask questions about it. Any questions I have asked have been answered to my satisfaction. I have been furnished with a copy of the information for my own record. I consent voluntarily to be a participant in this study. I have agreed to this interview being recorded and I understand that all information given is confidential.

Print Name of Participant \_\_\_\_\_

Signature of Participant \_\_\_\_\_

Date \_\_\_\_\_

Print Name of Researcher \_\_\_\_\_

Signature of Researcher \_\_\_\_\_

Date \_\_\_\_\_

### 7.3 Letter to Westgate Foundation Staff



To whom it may concern,

My name is ..... and I am a current final year Bachelor of Social Work student with University College Cork. Working in collaboration with The Westgate Foundation and Community Activity Research Links (CARL), I am conducting a research study on the concept of Positive Ageing.

The aim of this research is to ask the question: What is Positive Ageing? I will do this while exploring the views of participants of the Westgate Foundation. In order to gain even more insight, I am interested in getting a professional perspective. Given your first-hand experience with participants of the Westgate Foundation, I am interested to hear your views on what positive ageing means to you.

With that in mind, I am inviting you to take part in a short, informal discussion on that will focus on the concept of Positive Ageing and issues around this that you may identify with older people through your work. I suggest **Thursday, 23<sup>rd</sup> March 2017**, however, I am open to arranging another day and time if this does not suit you.

Please feel free to contact me on ..... or ..... if you have any questions.

With kind regards,



## 7.4 Survey



My name is ..... and I am UCC student, in my final year of a Bachelor of Social Work. As part of my final year, I am required to do an action research study. In collaboration with The Westgate Foundation, The Community Academic Research Links (CARL) and University College Cork, I am researching the area of Positive Ageing. I will be asking the question “What is Positive Ageing?” While exploring the views and opinions of participants of the Westgate Foundation. I would really appreciate your input, view and understanding of the concept of Positive Ageing.

Please find the enclosed survey for your attention. If you chose to partake in answering this survey focused on Positive Ageing, please note that if you are not comfortable answering any questions, you may skip them and move on to the next question. The information recorded is confidential and your name is not being included on the forms. No one else will have access to the information you have personally provided.

Please note, that although your input is important to me, you are in now way that you are in no way obliged to to take part in the survey if it makes you feel uncomfortable. The research findings will be shared broadly through UCC and the CARL project.

### **Certificate of Consent:**

I have been invited to participate in research about Positive Ageing in collaboration with the Westgate Foundation, CARL and UCC. I have read the information above and I consent voluntarily to be a participant in this study.

**Signature of Participant** \_\_\_\_\_

**Please tick the appropriate answer:**

1. **What is your age**    50 - 60     60-70     70 - 80     over 80

2. **Your Gender:**    Male     Female

3. **Marital Status**    Married     Divorced     Widowed

4. **Do you feel that living in accommodation which offers services for older people, such as the Westgate Foundation, promote and contribute to Positive Ageing? If yes, why?**

<b>Agree</b> <input type="checkbox"/>	<b>Strongly Agree</b> <input type="checkbox"/>	<b>Disagree</b> <input type="checkbox"/>	<b>Strongly Disagree</b> <input type="checkbox"/>
<b>Other: (Please Specify)</b>			

5. **I feel part of my local community**

<b>Agree</b> <input type="checkbox"/>	<b>Strongly Agree</b> <input type="checkbox"/>	<b>Disagree</b> <input type="checkbox"/>	<b>Strongly Disagree</b> <input type="checkbox"/>
<b>Other: (Please Specify)</b>			

6. **I have a sense of meaning in what I am doing / have done**

<b>Agree</b> <input type="checkbox"/>	<b>Strongly Agree</b> <input type="checkbox"/>	<b>Disagree</b> <input type="checkbox"/>	<b>Strongly Disagree</b> <input type="checkbox"/>
<b>Other: (Please Specify)</b>			

**7. I feel that I can access services that relate to my needs**

<b>Agree</b> <input type="checkbox"/>	<b>Strongly Agree</b> <input type="checkbox"/>	<b>Disagree</b> <input type="checkbox"/>	<b>Strongly Disagree</b> <input type="checkbox"/>
<b>Other: (Please Specify)</b>			

**8. I feel that my attitude affects my outlook on life**

<b>Agree</b> <input type="checkbox"/>	<b>Strongly Agree</b> <input type="checkbox"/>	<b>Disagree</b> <input type="checkbox"/>	<b>Strongly Disagree</b> <input type="checkbox"/>
<b>Other: (Please Specify)</b>			

**9. Do you have any difficulties accessing support and health services?**

<b>Agree</b> <input type="checkbox"/>	<b>Strongly Agree</b> <input type="checkbox"/>	<b>Disagree</b> <input type="checkbox"/>	<b>Strongly Disagree</b> <input type="checkbox"/>
<b>Other: (Please Specify)</b>			

**10. Do you feel that there are sufficient organisations that represent the needs of older people in Irish Society?**

<b>Agree</b> <input type="checkbox"/>	<b>Strongly Agree</b> <input type="checkbox"/>	<b>Disagree</b> <input type="checkbox"/>	<b>Strongly Disagree</b> <input type="checkbox"/>
<b>Other: (Please Specify)</b>			

**11. When you think about 'Positive Ageing' what matters most to you?**

1.
2.
3.

**12. To be considered Ageing Positively, you must .....**

1.
2.
3.

**13. In the last ten years, can you identify three changes in Government Policy that have affected your quality of life?**

1.
2.
3.

**14. What, if any changes would you like to see made to improve support services for you and your peers?**

1.
2.
3.

**Your opinion is important to me. If you have any other comments, please feel free to elaborate on them here.**

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***Many thanks for your contribution to this project!***