Social Support at Community Centers: Its Meaning in the Lives of Senior Citizens

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Abstract

Research surrounding older adults, social support, and emotional well-being are richly researched topics. However, literature is devoid of qualitative studies and research focusing specifically on community centers and older adults’ social networks, which are integral for understanding the growing needs of older adults in today’s society. Guided by the theoretical frameworks of phenomenology, activity theory, and ecological theory, four in-depth interviews were conducted and then coded for themes. The central themes highlighted family connection, connection with others, resiliency, helping others, type of activity, restoring self, community connection, exploration, convenience, and life stages. Suggestions for future research and possible impacts for clinical practice are discussed.
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CHAPTER I: INTRODUCTION

The Problem and its Setting

According to the U.S. Census Bureau’s 2005 statistics, there are approximately 78.2 million Baby Boomers. By 2025, those 65 and older are expected to comprise roughly one fifth of the U.S. population (AAGP, 2006). The Centers for Disease Control and Prevention (CDC) describes it as being on the “brink of a longevity revolution.” It is hard to predict what demands our nation must carry, but many surmise that there will be unprecedented needs placed on the health care system and on aging services (CDC, 2008). As the Baby Boomers continue to age, social services, such as community centers, will play an even bigger role in providing important resources for older adults.

The journey to identify factors that help individuals preserve or enhance their cognitive and emotional health as old age begins to set in is now a major public health goal (Hendrie et al., 2006). Social networks may play a potential role in the objective to find some of these solutions.

In today’s society, older adults are finding that age often times highlights the need for the support from others. Research shows that the impact of social contacts has positive effects on the lives of older adults for a variety of reasons, ranging from satisfaction with life to an enhanced well-being (Gow, Pattie, Whiteman, Whalley, & Deary, 2007). This is especially important for the Baby Boomers who may be susceptible to rising rates of mental disorders due partly to shrinking social networks (Koenigh, George, & Schneider, 1994).
The American Association for Geriatric Psychiatry (2006) states that many adults who are 55 and older experience mental disorders that are not part of normal aging. Consequently, there are still many critical informational gaps needed to better understand the associated risk factors and measures that are essential in preventing or delaying the onset for conditions such as depression and psychiatric disorders (CDC, 2008).

As social networks diminish with age, relationships with family members become extremely important (Arling, 1976; Larson, Mannell, & Zuzanek, 1986; Lee & Ishii-Kuntz, 1988; Spakes, 1979; Thompson & Heller, 1990). Research for those living in community-dwellings suggests that the support of family members is extremely vital after the death of a spouse or during times of illness (Williams, Baker, & Allman, 2005). In the event of a death, such individuals may be more prone to health problems and depression-related somatization. Overall, the literature associates positive health and wellbeing scores with older adults and their supportive relationships.

However, as Saxton (1986) argued, contact with family members, which was once common, is in a steady decline. Loneliness, which is “expressive of the individual’s relationship to the community” (Rokach, Orzeck, & Neto, 2004, p. 124) is a significant factor that can harm one’s mental capacity and life satisfaction and contributes to an older adult’s ability to remain living at home. Russell, Cutrona, de la Mora, and Wallace’s (1997) research demonstrated that lonely older adults living in community dwellings had a higher risk of institutionalization than non-lonely older adults living in community dwellings. One factor contributing to loneliness is the emergence of residential mobility, a significant part of the North American culture since the 60’s (Packard, 1972). Along
with increased geographic mobility, there is also a current trend of family networks scattered in different places and an increase of elders who live alone (Adams & Blieszner, 1995). In addition, Finch and Mason (1993) stated that life in today’s family does not consist of “fixed obligations,” and therefore, caring for an older relative requires repeated negotiations among family members.

As residential mobility continues to put greater distance between family members, friendships can play a major role in the lives of older adults. Bengston, Cutler, Mangen, and Marshall (1985) found that friendships often result in higher quality relationships than those with family members. Friendships are described as “voluntary,” and researchers believe that their structural nature may have a greater impact on loneliness than do family relationships (Rook, 1987). Older adults may even qualify high quality family relationships as obligatory rather than deliberate (Bengston, Cutler, Mangen, & Marshall, 1985). Lee and Shehan (1989) asserted that interactions with friends are positively connected to self-esteem; relationships with family members, on the other hand, are not.

With the fear of reestablishing personal relationships and the difficulty of creating friendships, senior adults may struggle to find an increased sense of meaning in life, and oftentimes experience a variety of emotions ranging from depression to anger (Weiss, 1995). However, places like community centers allow for senior adults to build bonds with others in their age bracket in a comfortable and inviting atmosphere, and in turn heighten one’s sense of resiliency.

Significance
The United States federal government understands the significance of helping older adults in our society. In 1965, President Lyndon B. Johnson signed the Older Americans Act into law, helping bring to light the importance of rights and resources for the aging population. The act promotes the goal of working towards helping older adults preserve their independence not only in their homes, but also in their communities through the delivery of social services. Title III of the Older Americans Act specifically designates funds for supportive services such as senior centers (NHPF, 2008). Josefina Cabonell, Assistant Secretary for Aging (2005) stated, “The Older Americans Act brought consistency and quality to senior center programs across the country, providing declining seniors an opportunity to socialize with each other (p. 1).

Places such as local community centers provide an easy way for senior adults to connect with others in their community. Senior citizens who participate in community centers oftentimes form friendships that are meaningful and significant. In particular, they provide a sense of freedom to those in isolation and tools to recapture mental health and social ties (Weiss, 1995). Being able to identify with a peer group gives older adults a sense of belonging and an opportunity to share their feelings and thoughts. According to Weiss, senior citizen centers serve as “universities for the second phase of life” because they provide older adults the chance to rejuvenate in an environment that offers support, empowerment, and knowledge. An atmosphere such as this normalizes the aging process and allows seniors to create a stronger sense of identity. While we know that community centers are beneficial to older adults, the research does not indicate what
meaning senior citizens place on the social support found at these establishments and what role they play in emotional well-being.

While the federal government stands behind providing quality support to senior citizens, most of the legislation surrounding the needs of older adults focuses on family relationships, rather than friendship (Adams & Blieszner, 1995). Litwin (2001) reported that the study of network types and their impact among senior adults is important to the field of gerontology, as there is little research that exists on this topic. He also stressed the need for formal support services in order to further the growth of informal support networks.

Research should focus on interventions that maintain or improve the quality of social contacts (Pinquart & Sorenson, 2001). The need for researchers to better understand an older adult’s experience within senior citizen centers and what impact it has on their lives is of great importance. Pinquart and Sorenson indicated that friendship plays an important role in reducing loneliness. They recommended that interventions to reduce loneliness might center on preserving and enriching the quality of contacts within one’s social network. After researching factors that prolong life, Lee and Markides (1990) recommended that social support and social networks be studied, especially in community settings. Blieszner (1995) suggested that one way to influence friendships was on a network and community level. Overall, more research is needed to better understand what types of services to deliver to older adults for future social policy planning (Litwin, 2001), so that older adults “make effective relationship choices in their pursuit of aging well (Adams & Blieszner, 1995, p. 221).
The way we view aging is constantly changing in today’s society, along with the identities and outlooks of older adults (Phillipson, 1997). Because of these factors, studying the lives of older individuals should be an essential concern for those involved in research. By studying the personal experiences of older adults and learning how to better enhance the social network created among senior citizen centers, we may foster more positive interactions within senior citizen centers, decrease the presence of loneliness, and heighten the sense of well-being.

Rationale

A qualitative study that centers on interviewing a small group of patrons who participate in senior adult activities at a Northern Virginia community center will enrich the current data through highlighting and understanding the meaning older adults place on social support in terms of their emotional well-being.

This particular community center implements programs for individuals of all ages, and one of the most popular departments is the Senior Adult Department. An assortment of classes are offered, from exploring digital cameras to learning how to navigate the Internet. In addition, senior adults have the opportunity to participate in book and current issue discussions, fitness and exercise programs, dances, health and wellness information sessions, socials, games, and trips. Believing that diversity is an integral part of the community, the community center attracts people from all walks of life, cultures, and beliefs.

Theoretical Framework

*Phenomenology*
Phenomenology guides this research, as it centers on the meaning human beings place on their experiences (SEP, 2008). It narrows in on an individual’s conscious experience and tells a story from the first person point of view. The focus of phenomenology stems from the desire to compare the public’s viewpoint versus an individual’s private perception or subjective experience (White & Klein, 2002). By understanding a person’s thoughts and feelings, it is possible to gain great insight into the core essence of human beings.

Assessments of an individual’s subjective belief about their social support network are generally better predictors than objective assessments (Sarason, Sarason, & Pierce, 1994). Phenomenology will expand and enrich the studies of social support, emotional well-being, and older adults by exploring the personal experiences of four senior citizens who participate in community center activities.

Activity Theory

The framework of activity theory, which emphasizes the importance of ongoing social activity for a positive psychological outlook, furthers the research (Moody, 2006). The roles that we take on and the activities in which we participate in relates fully to how we think about ourselves. According to activity theory, individuals give up many roles as they age due to life events such as retirement or death of a spouse. These changes challenge one’s sense of identity and may lessen the “self’s” inner strength. Engaging in activities helps individuals to develop substitute roles, thus restoring one’s “self” and increasing well-being. Activities must have meaning to the participant, as activities carried on solely for the sake of being active may cause negative effects.
By utilizing activity theory, the research may find possible connections of an individual’s activities to the meaning they place on social support found in informal and formal networks and emotional well-being.

**Ecological Theory**

The research will also employ the framework of ecological theory, which encompasses the idea that interactions with others and the environment are integral to development (White & Klein, 2002). One concept of this theory examines four different systems: the microsystem, the mesosystem, the exosystem, and the macrosystem (White & Klein, 2002). This research will specifically concentrate on an individual’s microsystem. The microsystem, one’s significant interactions with others, will focus on the connections created at the community center.

One particular focus of the ecological theory stems from the belief that “human beings are social and thus are dependent on other human beings” (White & Klein, 2002, p. 207). The research will examine the social aspects that community centers provide, through studying the role of a local community center in the lives of older adults.

Overall, the research will study the most basic concept of the ecological theory, the idea of adaptation and how it relates to senior citizens who utilize community centers (White & Klein, 2002). As older adults reach a certain stage in their life, many must grapple with retirement, deaths of loved ones, and changes within the family structure, which can cause changes in social roles and affect an individual’s physical and emotional well-being.

**Purpose**
The main purpose of this phenomenological study is to discover what meaning older adults place on the social support found at their local community center and its role in their overall reported well-being. By understanding the qualities senior citizens attribute to the community center, the research will begin to explore potential connections between emotional well-being, social needs, and community centers.
CHAPTER II: LITERATURE REVIEW

To find out more about the connection between social support networks in community centers, the meaning older adults attribute to them in their lives, and their role in emotional well-being, the research focuses on reviewing literature that examines social support, informal and formal networks, the importance of maintaining a social network, outside of the relationships individuals have with family members, and resiliency.

**Social Support Networks**

Social support may be described as “responsiveness to another’s needs and more specifically as acts that communicate caring; that validate the other’s worth, feelings or actions; or that facilitate adaptive coping with problems through the provision of information, assistance or tangible resources” (Cutrona, 1996, p. 10). Therefore, social support is an important component to an individual’s every day life. Blieszner (1994) specifically recommended that middle-old individuals need to know the significance of preserving their contact with friends, so that friendships will be maintained and social needs will continue to be fulfilled later in life.

While the Baby Boomers continue to age and navigate life’s transitions, maintaining a social support network may be more important than older adults recognize in today’s society. Over the life course, social networks are negotiated repeatedly (Duner & Nordstrom, 2006) and can transform in size, composition, and interaction frequency (Tilburg, 1998). Life events such as retirement can cause drastic changes in an older adult’s life. It is important for older adult service providers to understand that friendships are vital throughout all stages of life (Finchum & Weber, 2000).
One extremely stressful life event that many older adults will eventually face is widowhood. Guiaux, Tilburg, and Van Groenou (2007) studied both married and widowed adults over age 55 to explore possible connections between personal relationships and social support. They discovered that before impending widowhood, older adults often turn to their personal relationship networks for support. After widowhood, widowed adults seek contact and support from all different members of their network more often then married older adults. This confirmed the hypothesis that changes in personal relationships are associated with changes in roles, thus leading to changes in social support needs. As social support needs evolved, widowed older adults received more emotional and instrumental support. While the study indicated that social support needs of older adults change over time, it did not answer the question of whether or not increases in social support affects one’s mental health by protecting senior citizens from the hardships of widowhood.

Social support is a key component of successful aging, which is defined as one’s ability to live and function independently. Gow, Pattie, Whiteman, Whalley, and Deary (2007) conducted a study consisting of 550 men and women (mean age of 79.1) and reported that an insufficient or absent social support network was associated with poorer cognitive abilities, lower life satisfaction, and higher loneliness or feeling alone. By controlling for the effects of childhood mental ability, sex, education, and social class, loneliness emerged as the only social support feature that predicted successful aging. Consequently, the researchers were not able to determine causal relationships. It cannot be determined if loneliness is a consequence or cause of cognitive decline, or if loneliness
is a consequence or cause of reduced life satisfaction. They also did not look at the structure of an individual’s social network or the level of social support received; therefore, we do not know if loneliness is the result of an insufficient network or a lack of support.

There are important factors that lead to satisfaction with one’s social support network. Research shows that “[w]hat really matters is having a close circle of people who can be called upon for emotional support” (Drentea, Clay, Roth, & Mittelman, 2006, p. 965). This longitudinal study of 200 individuals caring for a spouse with Alzheimer’s found the two most useful factors for maintaining a successful support network: the number of people whom an individual feels close to and the amount of emotional support. Visits from one’s support network helped break the isolation and offered a chance for the caregivers to socialize; these interactions also provided much needed emotional support.

Research indicates that social support networks repeatedly change over the years and that they play an important role throughout an individual’s lifetime. However, there are still questions surrounding the impact on one’s mental health and associations with loneliness, life satisfaction, and cognitive functioning.

**Formal and Informal Networks**

According to Gottlieb (1985), there are three levels to social support networks. Macro, the first level, encompasses an individual’s participation in formal networks (i.e. community centers) and informal networks (i.e. family and friends). Mancini, Bowen, and Martin (2005) stated that “There is untapped potential capacity in individuals’
informal networks, associations, and communities. However, formal networks and institutions should not be ignored. These institutions are an important piece of any community fabric” (p. 580).

Bowen, Mancini, Martin, Ware, and Nelson (2003) studied data from over 20,000 Air Force members and their families to explore the relationship between formal (the military unit) and informal (family, friends, etc.) community-based social networks. While most of the direct effects were either modest or lacked statistical support, their findings suggested a significant pattern of how formal and informal support influences families. The results suggested that the participants attached a meaning to their perceived sense of community, which was affected by their formal and informal networks. Overall, the meaning connected to the formal and informal networks was significantly associated with positive family adaptation.

Through a qualitative study, Duner and Nordstrom (2006) found that older adults identified informal networks as “vital to their lives” (p. 82). Their study sample, consisting of 22 men and women aged 67-98 years, felt that their informal networks contributed to a sense of belonging and security and to their overall well-being. Many of the research participants reported having daily contact with either family members or friends. They also stated feeling a sense of community within their neighborhood, often meeting at regularly arranged activities. Individuals who reported having weak informal support networks had the most unmet needs (i.e. contact with others and lack of instrumental and emotional support) and were the most vulnerable to becoming solely dependent on others. Because all research participants received formal care, the research
also suggested that both well-functioning formal and informal networks allow older adults to preserve their sense of independence, even as they depend on help from others.

Individuals with poor informal support networks are susceptible to making negative life choices. For example, Johnson (2008) studied information from women over the age of 77 concerning the impact of informal social support on the decision to stop driving due to safety reasons. At the conclusion of the study, 52% of the participants upheld their resolution not to drive while 48% did not. Overall, the two groups of women reported very different thoughts about feeling valued and supported. The first group expressed feeling loved and supported by family and friends whereas the second group reported feelings of loneliness and fear of survival. The central theme emphasized the importance of informal support networks.

A study conducted by Honda and Kagawa-Singer (2006) shows that the importance of informal networks also extends to choosing when to adhere to colorectal cancer screening. Using a sample of over 300 randomly chosen Japanese individuals aged 50 and older, they found that friends’ emotional support had a direct effect on the screening adherence, such that research participants were more apt to visit their healthcare provider. The research suggested that limited emotional support from social networks negatively affected older Japanese Americans’ likelihood for pursuing colorectal cancer screening. A strong informal network appeared to be a significant indicator in cancer prevention behavior. While there appears to be a connection between informal networks and an individual’s adherence to cancer screening, the researchers did not study a variety of variables that may affect an individual’s decision not to pursue
cancer screening: physical and cognitive impairments, cancer-specific beliefs, trust in healthcare professionals, and patient-provider communication.

The research suggested that both informal and formal networks can positively affect a family’s adaptation to their community, and healthy networks contribute to one’s well-being and sense of independence. Those with poor informal support networks reported a lack of support and infrequent contact with others, thus affecting an older adult’s decision making and ultimately their health and safety. However, the research does not account for many variables that might contribute to understanding the impact of formal and informal networks.

*Family Members*

As older adults begin to face aging and the possibility of emotional loss and disability, they may also grapple with the knowledge that family members will not be available for support. This leaves many seniors feeling isolated and alone. Shanas et al. (1968) reported that neighbors and friends are especially integral in the daily lives of seniors and are more important than children and relatives because most older adults do not live with family members or have family members who live too far away and cannot be counted on for short term needs (Pinquart & Sorenson, 2001). In other words, “[I]t may be necessary to rethink the influence of adult children on psychological well-being in old age” (Pinquart & Sorenson, 2001, p. 261).

Research indicates that family relationships do not offer many of the positive factors found in friendships. Participants in Pinquart and Sorenson’s (2001) study, men and women aged 65 to 96 years old, reported heightened loneliness when they perceived
their quality of contacts to be lacking when compared to the quantity of contacts. The researchers explained this finding by exploring aspects of reported lower relationship quality, such as not feeling understood and emotional support. They found a strong association between these two factors and the experience of loneliness. Specifically, there was a weaker association between quality of contact with family members and loneliness as opposed to quality of contact with friends and loneliness. They concluded that family relationships, which oftentimes are viewed as obligations or burdens, have a lower quality than friendships. The research also indicated that contact with neighbors lowered the rates of loneliness more than contact with family members. A study of 60 older women conducted by Siu and Phillips (2002) revealed that older adults view the role of family members in terms of accomplishing fundamental tasks and concrete support. Friendships were the main outlets for affective and emotional support. They concluded that family support is not as important to the preservation of an older adult’s well-being as friendship is.

Older adults at some point must prepare for the future in terms of their health and who they will turn to when they can no longer take care of themselves. Roberto, Allen, and Blieszner’s (2001) study made up of 45 men and women between the ages of 56 to 88 showed that close family members are not always the first consideration older adults turn to in time of need. In fact, they found that over half of their respondents indicated that they plan to rely on formal care services. A 5-year longitudinal study of over 800 men and women aged 58 to 64 years old by Siebert, Mutran, and Reitzes (1999) concluded that increased dependence on family members can alter an older adult’s self-
perception of their competency, such that their identities take on the role of needy dependents. As a result, they suggested that family members do not contribute to the well-being of older adults.

Family relationships may not contribute to the well-being of older adults in the same way as friendships, but other research indicates that in the presence of friendships they make a significant mark on a senior citizen’s overall happiness. A study by Litwin (2001), which examined interpersonal relations and measures of well-being among a sample of people aged 60 and older, identified five different networks: diverse, friends, neighbors, family, and restricted. The most common network, the diverse network, included a variety of support systems made up of spouses, children, neighbors, and friends. The second most prevalent network, the friends network, was quite similar except for minimal contact with neighbors. While the neighbors network still maintained a variety of support systems, many of its members did not have spouses and little contact with friends. The family network, a less frequent network reported, upheld minimal interaction with friends and neighbors. Finally, the restricted network demonstrated the fewest social ties and almost no contact with friends or neighbors. By identifying five different networks, the researcher discovered that participants in the diverse and friends network reported the highest morale scores. Respondents in the neighbors network indicated a middle-range morale score, while individuals in the family and restricted networks demonstrated the lowest morale scores. Litwin proposed that friendships are based on choice, and while neighbors are based less on choice, they require less of an obligation than relationships with families.
Research also suggests that strong connections with both family and friends create the greatest positive impact on older adults. A study conducted by Dupertius, Aldwin, and Bosse (2001) took data from a survey used to gather information with one focus looking at social support. The sample, made up of 1,029 men with a median age of 62.7, was used to further the belief that family support would be associated with physical health, whereas friend support would be related to mental health. They discovered that individuals who interacted with both family and friends showed fewer symptoms of depression versus individuals who interacted mainly with members of their family. Overall, the study indicated that individuals who report high complementary support from both family and friends have the highest levels of well-being.

The research offers different perspectives on the effects that family members have on the lives of older adults. Some studies indicated that family members do not contribute to the well-being of senior citizens. Others offered the conclusion that having a social support network made up of both family and friends made the greatest positive impact in an older adult’s assessment of their overall happiness in life.

Friendships enrich the lives of aging individuals in different and extremely important ways. Barrett (1999) reported that an individual’s social network can affect one’s morale, self-worth, and overall life satisfaction.

With a sample of men and women aged 58 to 64, Siebert, Mutran, and Reitzes (1999) used role identity theory to further understand their finding that friends play such a major role in an older adult’s well-being. Through friendships, aging adults can build
upon their own positive identity. This helps to reduce any negative perceptions of themselves or perceptions received from family members. By taking on the role of a friend, an older adult can exchange meaningful interactions and increase positive self-perceptions. This discovery also extended to individuals who reported being in touch less with friends than with family. The researchers attributed the finding again to the idea of identity. Friends continue to contribute to an individual’s identity or the fact that the individual was chosen as a friend, which leads to positive beliefs. In other words, the role as friend endures for a lifetime.

Holmen and Furukawa (2002) further explored the power of friendships, as senior citizens continue to transition through the aging process. Their longitudinal study, which spanned over a period of 10 years, initially looked at responses from over 1,500 male and female participants aged 75 years and older. Over time, their sample decreased to almost 400 respondents due to failing health, residential mobility, and advanced age. In the beginning, most respondents (90.0%) indicated that they had a good friend to talk to, but by the second follow-up only 62.1% reported having a good friend. However, by the end of the study, although the number of friends declined, 92.4% stated that they were satisfied with their friend contacts, indicating an increase in their happiness. Overall, the researchers found that most of their elderly participants reported that they did not often experience loneliness, while believing that satisfaction with friend contacts is an ultimate part of an individual’s well-being. Holmen and Furukawa proposed that an acceptance of aging and satisfaction of life among the elderly are reasons for their results.
In general, older adults report that the emotional and action aspects of friendship are the most important. Blieszner’s (1994) study made up of 53 men and women aged 55 to 84 looked at different processes of friendships: cognitive processes (one’s internal thoughts about themselves, their friend, and the friendship), affective processes (emotional reactions), and behavioral processes (the action parts such as social support). For cognitive processes, respondents were asked how important it was to have friends with similar attitudes, beliefs, and values. While individuals stated that similarity was not as vital as other friendship factors, the study indicated that the majority of participants had friends quite similar to themselves. In fact, 94% emphasized the importance of shared activities in friendship. 72% indicated that all individuals in their network frequently displayed affection. Although affective processes were significant, they were less likely to be described. The most prevalent feelings mentioned centered on respect, liking, and feelings of dependability. In terms of behavioral processes, Blieszner found that over 79% of respondents indicated the importance of displays of support.

Friendships can also play a part in one’s mental and physical health. Fratiglioni, Paillard-Borg, and Winblad (2004) noted an increased risk of dementia in individuals who either lived alone or had no close social relationships. Individuals with an unsatisfactory or limited social network had a 60% increased chance of developing dementia. The more satisfying one’s social network, the less individuals report symptoms of illness. Rennemark’s and Hagberg’s (1998) study made up of 71 year old men and women indicated that social satisfaction diminished women’s reports of suffering from symptoms related to the head, heart, stomach, lungs, bones and joints,
muscles, and tension. Melchoir, Berkman, Niedhammer, Chea, and Goldberg (2003) suggested that the consequences of poor social contacts may have a greater impact on an older adult’s health and mental performance based on what we know about today. This connection may even extend towards furthering the understanding of disease development and ultimately premature death (Gow, Pattie, Whiteman, Whalley, & Deary, 2007).

Research strongly supports the positive impacts of friendships in the lives of older adults. Satisfying friendships demonstrate that both emotional and behavioral aspects have a lasting impact on an individual’s identity, well-being, and overall health.

Resiliency

According to Esche and Tanner (2005), resilience in older adults is “the maintenance, recovery, or improvement in mental or physical health following a challenge” (p. 219). Through a case study of a 76-year-old woman, widowed for four years and living alone, they discovered that the amount of resiliency that an older adult displays depends on a number of factors. Some factors that inhibit resiliency after a stressful event are increased age, living alone, and low social support. Individuals who exhibit enhanced resiliency after a stressful event typically have some mechanisms that protect themselves from the pressures of life. They may include living with others, high levels of mobility, intact cognitive functioning, and social support.

Nakashima and Canda’s (2005) conducted a qualitative study to understand the experiences that contribute to a positive quality of life. The study consisted of 16 men and women, ranging in age from 65 to 103, who lived with a terminal illness. Through
their study, they found that despite major losses and challenges, their participants demonstrated astounding resiliency. Overall, they discovered numerous factors that support resiliency such as: supportive relationships of care from family and friends, utilization of their social environment resources, spirituality, focusing on strengths that buffer barriers to well-being, being able to confront their mortality, creating a life narrative through their own stories, and personal growth, which allowed them to try new things in life. The researchers concluded that older adults, even those nearing the end of their life, can overcome negative outcomes and demonstrate great resiliency while still experiencing a high quality of life.

While most research on resiliency tends to focus on children, adolescents, and young adults, the research on older adults strongly indicates that they exhibit strong signs of resiliency, even in the most stressful of times.

In conclusion, as technology and medicine continue to transform, individuals are living longer and altering the definition of growing old. As aging changes, research fails to keep up with the needs of older adults. The literature defines the importance of social support for older adults in both formal and informal networks. Both networks contribute to an older adult’s well-being, physical health, and mental health throughout many stressful life events and the aging process. Family members who are part of an individual’s informal network provide necessary social support; however, older adults indicate that support from friends is not only significant, but also different from family support.
While the research helps us to understand the importance of friends in the lives of older adults, it fails to explore it on a deeper and meaningful level. Through examining personal experiences surrounding the meaning older adults place on social support found at a community center and its impact on their emotional well-being the research can begin to forge a connection between informal and formal networks. By addressing this gap, the research can discover what kinds of services best enhance the well-being of older adults.
CHAPTER III: Methods

Design of the Study

Qualitative research, which “aims to make sense of, or interpret, phenomena in terms of the meanings people bring to them” (Greenhalgh & Taylor, 1997, p. 1) was used to fulfill the purpose of the study, guided by the theories of phenomenology, activity theory, and ecological theory. Through a structured qualitative interview, the study sought to answer what meaning older adults place on the social support found community centers and its role in their overall reported well-being.

Study Participants

Participants in this study were four older individuals who attended a community center in Northern Virginia. Participants were recruited by phone. Two of the subjects were male and two were female. All participants were required to be fifty-five and older and a patron in the Senior Adult Department who participated in an activity, such as physical fitness classes, classes designed to utilize one’s mind, or trips meant to encourage an older adult’s sociability.

Procedures

After potential subjects were identified, participants were contacted by phone to schedule a date and time for the interview. Over the phone, I explained the key elements of my study including the purpose and the requirements, specifically that the interview would be audiotaped. Once I received verbal consent, face-to-face interviews were scheduled.
All interviews were conducted at the community center in a reserved and private room. Interviews lasted between fifteen and forty minutes. Before the start of each interview, participants were handed a consent form, which outlined the purpose of the research, potential risks (i.e. aspects of emotional well-being such as sadness, depression, etc.), benefits of the study, and possible uses of the information in the future. Participants were assured of their confidentiality and their right to withdraw from the study at any time. At the end of each interview, participants were given a list of mental health resources. No monetary compensation, nor incentives of any kind, were offered to the subjects for their participation. To ensure the confidentiality of the participants’, all information pertaining to their personal information, was safeguarded through the use of a locked file cabinet.

**Instruments**

With the permission of each participant, as indicated on the consent form, individual interviews were conducted using an audio recorder to document the in-depth interview. Interviews were structured, and questions centered on understanding each individual’s unique experiences at the community center and the meaning they attribute to social support. The interview questions were as follows:

1. How would you define your social support network (i.e. the connection you have with individuals in your life such as family members, friends, neighbors, etc.) before you started coming to the center?
2. How often do you spend time with your family? How close do you live to members of your family? How would you define social support in terms of your family? How does social support from your family differ from that of friendships?

3. How would you describe your overall emotional well-being before coming and participating in activities here at the community center?

4. Tell me about any periods of sadness you experienced before coming to the center. How were your periods of sadness related, if at all, to the lack of social support from friends?

5. Tell me about any periods of loneliness you experienced before coming to the center. How were your periods of loneliness related, if at all, to the lack of social support from friends?

6. How would you describe your life satisfaction before coming to the center? How was your life satisfaction related, if at all, to the lack of social support from friends?

7. How long have you been coming to the community center and participating in the Senior Adult Department? How did you find out about the community center? What motivated you to seek out the community center?

8. Do you participate at other centers or in other activities for older adults?

9. What different activities such as classes, workshops, and trips have you taken part in here at the community center?

10. For patrons who participate in physical activity classes: How did you decide to participate in physical activities here at the community center? Tell me about your relationships with other patrons in the class(es). For those who interact with other
patrons: How did you end up interacting with the patron(s)? How does the
relationship(s) influence your participation or satisfaction? What does it mean for
you to be able to connect with others in this environment? For those who do not
interact with other patrons: What stops you from interacting with other patrons?

11. For patrons who participate in enrichment classes: How did you decide to
participate in enrichment activities here at the community center? Tell me about your
relationships with other patrons in the class(es). For those who interact with other
patrons: How did you end up interacting with the patron(s)? How does the
relationship(s) influence your participation or satisfaction? What does it mean for
you to be able to connect with others in this environment? For those who do not
interact with other patrons: What stops you from interacting with other patrons?

12. For patrons who participate in trips: How did you decide to participate in trips
here at the community center? Tell me about your relationships with other patrons in
the class(es). For those who interact with other patrons: How did you end up
interacting with the patron(s)? How does the relationship(s) influence your
participation or satisfaction? What does it mean for you to be able to connect with
others in this environment? For those who do not interact with other patrons: What
stops you from interacting with other patrons?

13. How has your social support network changed since coming to the community
center?

14. How would you define the social support that you receive here at the community
center?
15. What aspects of the social support received here at the community center keep you participating in activities?

16. What would your social support look like if the community center did not exist?

17. What does it mean for you to be able to participate in activities at the community center?

18. How would you describe your overall emotional well-being since participating in activities here at the community center? What changes have you seen in your overall happiness? What do you believe contributed to these changes?

Analysis

Each interview was audio-taped, and the tapes were transcribed. All transcripts were read multiple times to ensure accuracy before the transcript-based analysis. To fully understand the participants’ experiences as a whole, the technique of open coding was employed to determine the meaning of the statements and to see commonalities and differences among all of the individuals’ responses. Through the entire research process, the researcher continually reflected on the meaning that emerged and kept memos for each interview. The notes were used to further examine the connections with the three theories that made up the theoretical framework. Finally, I utilized Strauss and Corbin’s (1990) method and conducted a constant comparison of the themes to ensure I am identifying the patterns within the interview. It was further confirmed through cross-coding the data by an advisor who proposed a different viewpoint on any codes that were overlooked and confirmed the accuracy of codes discovered by the researcher.
CHAPTER IV: RESULTS

Introduction

In this study, I explored the experiences of older adults who participate in a community center’s senior adult department. I conducted four qualitative interviews. Two participants were female, and two participants were male. All subjects were aged sixty-five and older. The four experiences varied in interesting ways and presented an assortment of themes, which seem significant to the understanding of how older adults view social support. Throughout the coding process, I examined the data through the lens of three theoretical frameworks (Phenomenology, Activity Theory, and Ecological Theory). In this chapter, I will present a brief background of each participant followed by an analysis of my data under the guide of the three theories.

Interview One: Background

Frank is a Caucasian man in his early eighties. He is married, has one daughter, and two grandchildren. Both Frank and his wife have been coming to the community center since the day it opened 30 years ago. They participate in a variety of activities, and they are always together. Frank’s daughter lives close by, and he sees her and his two grandchildren every few weeks. Besides his immediate family, he sees his brother a few times a year. Frank and his wife have a busy life outside of the community center, spending time traveling and attending various area events. Over the last few years, Frank’s wife has had many serious physical ailments and at one point, he thought he was going to lose his wife. This, of course, causes great concern and worry for Frank. Of all four interviews, Frank’s is the shortest and the least detailed.
Interview Two: Background

Roger is a Caucasian man in his late sixties. He is divorced and has two sons and an unspecified number of grandchildren. Like Frank, Roger has been coming to the community center since it opened. He also participates in a variety of activities and especially finds joy in swimming on a daily basis. Both of Roger’s children live far away, and he sees them only a few times a year. Roger did not mention any other relatives in the interview. Although he describes himself as a loner and an introvert, it is very common to see Roger at the community center almost every day.

Interview Three: Background

Lucy is a Caucasian woman in her late sixties. She is divorced and has one daughter, one son, and one grandchild. Lucy has been coming to the center for the last ten years. Before coming to the center, Lucy went through a divorce, which came to her as a complete surprise. The initial news was shocking and upsetting, and she found it quite difficult to move on in the beginning. It took Lucy about seven years to get her life back on track and begin to carve a new identity as a single woman. Around this time, Lucy sought out the senior adult department at the community center. Similar to Roger, both of Lucy’s children live far away, but with the recent arrival of her first grandchild, she and her daughter see each other more often. Three years ago, Lucy met a man named Bill outside of the center. During that time, they have created a loving relationship and often times participate in activities together at the community center.

Interview Four: Background
Doris is an African-American woman in her late seventies. She is widowed and has one daughter, one son, and two grandchildren. Both of her children live close by, allowing Doris to see her daughter every day and her son weekly. Doris has been coming to the center since she and her husband moved to be closer to their children, which was about five years ago. While Doris’ husband was still alive, they often came to the community center to participate in trips. However, her husband’s heart problems did not allow them to participate as freely as they would have liked. Two years ago, Doris’ husband died, leaving her feeling alone for the first time in her life. Through the support of her two children, Doris slowly began to reach out to others and used the community center as a source of friendship and support.

Connection with Family

The relationship to one’s family members appears to play a role in the participants’ overall meaning of the social support network at the community center. All four participants seemed to have close relationships with at least one member of their family, and in particular, Doris, Lucy, and Roger referred to their children as individuals who provided the most important and meaningful social support in their lives, while Frank seemed to focus on the relationship with his wife. Having a strong connection to a family member seems to give the participants the ability to reach out to others, but reasons why the participants felt that their family relationships were the most important differed in every interview.

Letting Go
Doris’ story demonstrates this sense of family connection in the richest detail. She described how the death of her husband left her feeling alone and at times lost as to what to do with her life. However, with the support of her children, she was encouraged to create a new life for herself, filled with friends and a new sense of self.

My family knows me so well. They have, they have been part of the tragedy that occurred in my life, which is that I lost my husband two years ago, just basically two years. And they, both of them, son and daughter, looked me in the eye and said, you had daddy for fifty-five years, but we need you. And with tears in their eyes, they said, both of them, at different times, they said, we need you. Be happy. So, that’s what kind of support I’ve had. Go ahead and live your life, and that’s what daddy would have wanted you to do.

In a sense, it also seemed like Doris’ children were giving her permission to live her life without her husband, and she needed this knowledge in order to let go, move forward, and seek happiness. For Doris, her children appeared to give her the connection that propelled her to create relationships with others in her community. In the interview, Doris mentioned that her children look at her in a way that makes her proud because they seem to be proud of her. They also see courage within their mother that even Doris did not know she had inside. Doris’ statement about her children’s reaction towards her venturing out into the community seemed similar to the way a proud mother would be towards their own child. In loving their mother, Doris’ children allowed her to begin a new life and a new journey without her husband by her side.

Protection
Lucy’s interview also indicated that the relationship with her children is the most significant, and a lot of this seemed to stem from the feeling that they would be more protective with her than other people in her life. She said, “If they thought there was a problem, they would let me know. I think faster than my friends would. I think they would be more truthful with me…Because they are more protective of their mother.” In the interview, Lucy noted her son lived in Sweden, and only sees him twice a year, and before her granddaughter was born, she only saw her daughter about three times a year, which is quite different than Doris who sees her children every week. For Lucy, it appears that social support is more than just the amount of time you see your family members, rather it is more about a sense a safety. Even though both her son and daughter do not live close by, Lucy appears to be feel protected by the belief that her children will look out for her and give her their honest opinions. Lucy’s thoughts about her children seemed very similar to the way a child would talk about their own parents. There seemed to be a sense of security that Lucy felt in her every day life, and it appeared to resonate from the protective and safe relationship that she felt with her two children. Lucy created a happy and fulfilling life away from her children and yet she knows she can seek comfort from them in times of distress. In addition, she readily accepts contact from her children and prefers their support over support from others. At one point, Lucy stated that their support is comfort in the absence of a husband.

Time

Frank’s interview was quite different from the other four interviews. There was not the same sense of connection with the way he described his family. While he
mentioned that he had a daughter, she was not included in the description of what social support looked like in his family. His only mention of family social support stated, “Well, my wife gives me terrific support.” Unlike the other three participants, Frank was the only one that was married, and he and his wife have an extremely close and loving relationship. Overall, it seemed that Frank agreed with the others and felt that family support far outweighs that of friends, but his understanding of that appeared to have to do with the amount of time one spent with their family. When asked how social support from family differs from friends, he talked about how friends are individuals you see occasionally out for dinner or a party, while you are constantly with your family members. This suggested that the factor of time seemed to have the greatest effect on how Frank described his connection to his family.

Connection with Others

An individual’s connection to their family seems to be linked to the connections to others outside of their family. Thus, how the participants view these relationships appeared to play a role in the view of social support. Participants with perceived close relationships to their children seemed to reach out more to others at the community center and attribute a greater meaning to the community center’s social support.

Friendship

Doris appeared to have the strongest relationship with her children, and her relationships with others at the community center seemed to be the most intimate. She talked about friendships that are very special and life changing for her:
Some of them are very, now, very close friends. We do things outside of the class with at least three or four of them. We look out for each other about things that are happening around the community and try to get together in other ways…I really don’t think I would have made close friends, except for maybe through a church group that I do belong to. But as for the kind of, as for the fragment of people that are important to me now, I have found them at the community center.

Although she had already been coming to the center when her husband was alive, it appears that she needed something more to be able to start over as a single woman. Through the encouragement and support of her family, she came back to the community center, and connected with others in a way that has given her a new take on life.

*Life Education*

For Lucy, the connecting with others also serves as a form of lifelong education. She discussed how the relationships with other older adults at the community center opened up her eyes to the fact that life is “no dress rehearsal.” This realization has prompted her to not only take better care of herself, but to also get out and take advantage of what life has to offer in her daily life. During the interview, Lucy spoke about the wisdom she receives from the senior patrons at the center:

I’m more aware of the fragility of life than I used to be. It’s, seniors are very wise, and so you learn a lot from them if you just stop and listen, which I didn’t do before. And so, I would say in the overall complexion of your life, it’s a very important part for me, to be around seniors.
Seeing individuals in her age group helped Lucy to create a different perspective on life, which allowed her to look at life from a wider lens. In turn, it has helped Lucy to be more resilient in life and to take advantage of the many opportunities around her.

Connection with others was not as evident in the interviews with the male participants. While Roger many times throughout the interview emphasized the importance of at least knowing people that he could say hi to at the community center, he stated that he had little interest in meeting other men in his age group. However, he did talk about his efforts to engage women in conversations and his desire to find someone to date.

For most of Frank’s interview, it did not seem that he was very interested in forming deeper relationships with other individuals at the community center. His outlook on social support is described best when he said, “I think I went once to a bridge session, and all the gals talked about was family life, and their illnesses, and their grocery shopping, and practically no bridge, so I dropped out after the first session.” This highlights his connection to his family, specifically his wife and his belief about social support. It appeared that one of his main intents for being part of the community center was to be able to partake in events with his wife.

Resiliency

Resiliency, or the ability to recover readily from life’s adversities, is a key concept that emerged from the data. The theme of resiliency appears to be linked to not only the individual’s connection to their family, but also to where they are in life, and it is
then enhanced by the connection with others. As a result, it seemed to set the tone for the meaning interviewees’ gave to social support at the community center.

**Moving On**

Resilience was extremely significant in Lucy’s interview. For thirty years, Lucy lived the American dream with her husband and her two children. However, she said that the news that her husband was leaving her for another woman left her reeling and closed off to those around her. She described how she started going to church when she first found out, and she would sit in the back row of the congregation, weeping at the fact that she was no longer part of a couple. Lucy described these times as very lonely. However, she finally decided that she needed to go out, and for the first time in her life, she did certain things by herself:

And finally, I decided, well, I can either stay at home and commiserate and you know weep tears at home or I can go to the movies and I go out to dinner…I am an extrovert so that was…I needed to get out, and so finally I did…And another huge milestone…is my pastor asked me to do a three minute, a three to five minute sermon in front of the entire congregation about my license plate, which says, “Thankful” because it was over Thanksgiving, and he was doing a series on thankfulness…My license plate says that because I am thankful for all the support I received during the period. So, that was a big leap because I publicly told two hundred people of my situation.

In addition to moving on by venturing out on her own, Lucy also started attending the community center and reaching out to others. She described it as a way to meet new
people who did not know anything about her, which allowed her to get out and not feel sorry for herself. The community center offered her a chance to start over and meet people who did not know the history of her divorce. Lucy comes from a family that she feels support her in everything that she does, and she was at a point in her life where she had to reinvent herself as a single woman. Her strong family connection and the divorce appears to play a central role in the resiliency that Lucy displayed in her life.

*Do Not Worry*

Similar to Lucy, Doris’ life brought forth a sudden change when her husband died. She found herself alone for the most part, but it appears that the support of her children and the desire to keep them from worrying about her gave her the motivation to move forward in her life:

Other than television, reading, and the things that I could enjoy by myself, there were lots of lonely times…so I was really dependent on my daughter and so forth. So that when I sought to do other things, such as coming to the center, such as all the classes that I’ve taken here, such as the, the trips that I’ve gone on. I didn’t want to be particularly, after my husband died, I did not want to have my children worried that I wasn’t trying to live a happy life.

Doris’ resiliency appears to be greatly tied to the passing away of her spouse and the desire to keep two children, who seem to have great concern with their mother now being alone, from worrying. Her vision of the future is bright, and she already has many plans to try new and different activities at the center.
Resiliency was not as predominant in Roger and Frank’s interviews. Roger divorced over thirty years ago and started coming to the center soon after he and his wife parted ways. He makes great efforts to participate in activities, but throughout the interview, he continually talked about his failed efforts to overcome his introverted nature. He discussed the fact that he has few friends and that he does not know how to stop being a “loner.” Resiliency definitely plays a role in his repeated efforts to find women to speak to, but during the interview he made it clear that the best benefit of the center was the swimming pool and the exercise benefits. Whether or not Roger’s relationship with his children has anything to do with his sense of security to step out and meet others, remains a question. His connection to his children appears to be the main social support in his life, but he describes it very differently than both Lucy and Doris. For instance, when he talked about an example of emotional support that his children give him he talked about their recommendation for him to take courses in computers. The emotional support that Lucy and Doris describe is much richer. For Frank, there were not any moments in the interview that seemed to indicate that he needed to be resilient. This may be due to the fact that there did not seem to be any challenges in the recent past or present other than the worry over his wife’s health.

It seems that out of the four interviewees, Doris had the closest relationship to her children, Lucy and Roger came second and third, and Frank had the least close relationship with his daughter. It would be interesting to explore the impact of an individual’s relationship with their children on the ability to adjust to challenges that life brings older adults.
Helping Others

The concept of one’s role in their community or their ability to be helpful stood out in some of the interviews. Being able to help others in one’s community seems to be connected to the feeling of importance and a feeling of heightened well-being.

Doris described the immense satisfaction she feels when tutoring others in the library:

Yes, I am a, and have been, at least for two years or more, a English conversation partner for people from other countries at the library. I do not miss a Monday. I am there every Monday, and I have seen at least twenty people from twenty different countries. My kids will say I am so proud of you, but I said that they give me more than I give them.

Frank’s role as a helper was not as clear in his interview. In fact, it was fairly absent except for his description of the Wii class that he attends. When talking about how he ended up interacting with the patrons, he stated, “Well, talking, giving them hints of what to do, and they give you hints of what to do.” This statement may not sound significant, but it seems fairly important because of conversations I had with Frank’s wife during the Wii class. During the interview, Frank portrayed a rather blasé attitude about his participation at the community center, but on more than one occasion, his wife told me that he cannot wait to come to the Wii class every Friday. Does this have to do with the fact that he now has another role in his life that allows him to be helpful?

I feel that it is important to point out that Lucy, Doris, and Frank at one point or another mentioned their past professions, except for Roger who was the only interviewee who did not talk about helping others. Does ending your role as a professional have an
effect on the need to feel helpful? What does being helpful to others mean to an older adult?

*Type of Activity*

Each interviewee participated in a variety of activities, demonstrating the importance of offering different activities at the community center. Some activities, like the computer or physical fitness classes, do not cultivate environments that foster informal support. Rather, they are activities that the participants chose for learning or health purposes. While such activities do not provide great opportunities for social networking, they do serve the important purpose of helping older adults create a healthy lifestyle and a chance to further their education. For some, this opportunity brought great meaning to their thoughts about the community center.

*Independent Activities*

For Roger, swimming, which is mainly an activity one does alone, appeared to be the main attraction at the community center, and he placed great emphasis on this:

The main thing that I like about the community center is the swimming pool where I can exercise. And I think of the community center as I place where I exercise my heart, which I am not physically fit enough to jog, so swimming is important to my heart…The existence of the pool is really more important than the people because as I’ve said it’s a place to exercise.

*Social Activities*

Doris placed great meaning on one particular activity that promotes informal support. This was a Memoirs class that she has been a part over the past year. She came
to the community center with little social support other than her family members and was able to build her own network of friends. For Doris especially, her experience with the class highlights the concept of informal support in a formal support setting:

Well, I read the description of what was available, and I’ve always been a writer in my professional life, and I thought it would be good for me to have the impetus to do it all the time, which is really what the Memoirs class does. It makes us write, and it makes us share. And as I say, after many, many weeks of being together, being together with the same group of people you feel very much at home with what you’re telling because in Memoirs class you’re revealing a lot of personal information…It’s added a new dimension to my life that I had in my other life in Detroit and in Canada where there were friends that I could go out with. So, I now have that, and it really did come from this class.

In the Memoirs class, Doris was able to continue with her passion for writing. In pursuing this very meaningful activity, she met others with the same enthusiasm, some of whom she considers to be very close and dear friends. If Doris had not been successful at meeting other patrons with whom she socializes outside of the community center, would she attribute so much significance to this activity?

Frank’s interview was vastly different when it came to the way he described the activities he participated in. His answers were very general, and it did not seem that they played a meaningful role in his life. When I asked him what it meant to connect with others at different times throughout interview, two of his responses were, “I don’t know. I just…it’s fine to be with people” and “Well, you can’t be isolated in this environment.
It’s just a natural thing to be, to get along with people, to interact with.” Unlike the rest of the interviewees, activities for Frank did not seem to hold the same meaning or role in his life.

Restoring Self

The theme of restoring one’s self surfaced in two out of the four interviews. It seems that engaging in activities for both Lucy and Doris allowed them to transition from being in a couple, to learning how to live as a single woman, and finally allowing each woman to cherish times that they have by themselves.

Comfortable With Myself

After Lucy’s divorce, she found it quite difficult to not be part of a couple, but over time, she adapted to life as a single woman and began enjoying being by herself, in ways that she had never experienced in her entire life. She highlighted this by saying:

When I would see couples holding hands or when they would offer up prayers of blessing for their fifth anniversary, I can remember vividly being rather distraught that I was not a part of a couple, and so I could not be like them…Now, sometimes I just want to be by myself. And so, that is actually a big leap for me, to want to stay home and be by myself and not have friends come over. I want to go out to dinner sometimes alone. I want to go to the movies by myself.

In a sense, it seems like Lucy learned new things about herself and developed a sense of comfort that she did not have even when she had the security of a being part of a couple.

Freedom
Doris also seemed to restore her self after the death of her husband. Like Lucy, she described how she enjoys being by herself at times when she said, “But, usually, in some of the cases, I am a loner once I’ve arrived at the destination of the trip… Sometimes I prefer just to do the browsing on my own and by myself.” Her children’s support, her resiliency, and the connections to others at the community center helped her to create a new life for herself. This is clearly stated in the following quote:

It’s certainly an improvement over the way things were after this whole funeral and after all of that tragedy, I mean after the bereavement, which was very, very hard on me. And it makes my children look at me with pleasure because they did want me to move out of myself. It’s helped me move out of myself and to find pleasure in life that I wasn’t sure I was going to be able to find.

Doris talks about moving out of herself, which in some ways sounds like her resiliency allowed her the freedom to find other ways of living life.

*Exercise for the Soul*

Roger’s ability to restore himself appears to be somewhat different compared to the female interviewees. Although he did not have a recent challenge in his life that he spoke about, he did highlight the great importance of having a place to swim:

Because it has an indoor pool, and I like to swim. And as I said, it’s good for my heart…Oh and I also like, the, there is a hot tub as part of the swimming pool where I go to, and I recently had a pain in my hip, which the hot tub seems to help.
Roger’s dedication to his swimming was evident when he spoke about the temporary closing of the community center and how he visited a YMCA, so that he could continue to swim. It seems in some ways that being able to engage in his daily swimming allows Roger to develop a sense of purpose and heightened well-being.

Both Lucy and Doris have significant connections with other patrons at the center and seem to have gone through a transformation of their self whereas Roger continually restores himself through his exercise. Do activities with meaning which involve deep connections to others create a different kind of self restoration?

Community Connection

This study highlighted the importance of older adults feeling connected to one’s community through the community center. Being connected to one’s community seems to have three different meanings: just merely being part of the community center as a patron, recognizing people and having people recognize you, and finally knowing people who keep you connected to what is going on in your community.

Feeling Part of the Community

Frank, who throughout the interview did not have much to say and did not appear to attribute much meaning to the social support at the community center summed up his thoughts about the community center by saying, “Well, it’s part of the community and it’s part of life and our activities.” The overall impression seems to point to the idea that for Frank, the community center has been around for thirty years, and it has become part of his life. It is almost as if he found it hard to separate the community center into a meaningful category when one cannot begin to imagine life when it was not around. If
Frank had not been attending the community center for so long, would he have attributed more meaning to the center?

Recognizing Others

Roger’s connection to the community was pretty evident throughout the interview, as he continually talked about how much he enjoyed recognizing people and exchanging hellos with people he knew from the community center:

And I feel more comfortable knowing people in the community and recognizing people, and occasionally, I’ll meet people…I’m just thrilled that I can at least know people and meet them and say hello and feel a part of the community rather than being, as I’ve said many times, too much of an introvert.

Feeling connected to the community, even if it meant something as simple as recognizing people and saying hi, was extremely significant to Roger throughout the interview.

Interacting With Others

For Doris, feeling connected to the community was more than just participating in activities and saying hello to people, it was about interacting with others who could share their knowledge of what was going on in the community. She explained this by stating, “It’s very positive. It gives you an opportunity to know someone…It, it helps you know what is going on in the community because people share ideas, and it’s a totally, a very positive thing.”

It seems that there are three different levels of feeling connected to the community center, and it would be interesting to explore if the meaning of social support is more significant for individuals who have been going to the center for shorter periods
of time. Both Frank and Roger have been part of the community for at least thirty years, if not longer, whereas Doris is relatively new. Do older adults place more significance on their need to feel connected to the community if they have not been living there for a long period of time?

Exploration

Along with feeling connected to the community, many of the interviewees described the theme of exploration relating to the trips that they go on. All four participants participated in trips at the community center, which is one of the most popular aspects of the senior adult department. Doris explained:

Well, I’ve been very, very interested in this entire area of the country, and I, that’s one of the first things I look at when I get the catalog is what trips are available because they are pleasurable, and they are opportunities to learn about Virginia, Maryland, and Washington.

Does exploring the area make one feel more connected to their community? In what ways?

Convenience

For a few of the participants, one of the best aspects about the community center was the convenience of the location and the convenience of having transportation provided during trips. Lucy stated, “I don’t like to drive, so having somebody else drive a bus, and I just get on, is wonderful.” Frank also commented that the main reason he went on trips was the luxury of not having to find parking places. How important is convenience in an individual’s connection to their community?
Life Stages

All four interviewees were at a very different life stages at the time of the interview, which seems to be connected with many of the themes and play a big part in the participants’ feelings about the community center. Life stages deemed as more transitional life stages such as Lucy who came to the center after her divorce or Doris who dealt with the death of her husband appear to be more closely connected to the themes of resiliency and the need for connections with others.

Divorce

Lucy came to the center after she found out her husband initiated a divorce. In the interview, she described how difficult this period was:

Well, anybody who has been through a divorce will know that there is a great deal of sadness in it…And then that was a very difficult seven year period. So, that’s about the time I came to the center. So, I would say I was pretty lonely.

Death of a Spouse

Doris initially came to the community center after she and her husband left their home in Canada and came to Virginia to be closer to their children. The trips were an easy way for them to explore the area and allowed them convenience that was necessary due to her husband’s health. Her reliance on the community center changed over time once her husband passed away. She described what that time period was like:

Well, I was a grieving widow. I wasn’t really ready to move on from that grief without the encouragement of some friends and my family. So, I was not in a good, healthy state because of this unexpected and very emotional and trying
loss of this partner of mine. So, I wasn’t really as good with my emotional
well-being as I am now.

That was just three years ago, and Doris is now a confident, happy, and gregarious older
adult who is full of life and energy. In many ways, the community center allowed Doris
to move on from her previous life stage by providing her with a set of friends and new
outlook on life.

For Frank and Roger, it appears that there have not been any recent transitions in
their life, thus they have not been forced to move into their next life stage. Unlike Lucy
and Doris who made it clear that they came to the center for support, Frank’s and Roger’s
reasons for coming to the center are very different. In talking about the Wii class Frank
attends every week, his statement makes it clear that he does not consciously view the
community center as a central place of social support. He stated, “Well, we bought a Wii
software system for our grandkids, and we thought well, it should be fun for them and it
would be fun for us, and it’s, it gives you a little workout.”

**Conclusion**

The goal of this study was to understand the meaning that older adults place on
social support networks found at a community center and their effects on an individual’s
well-being. The four individuals that were chosen all participated in activities in a
community center’s senior adult department.

The first theme to emerge was the importance of having a strong connection to
one’s family, as this factor appeared to propel some of the interviewees to seek out social
support. It seems, however, that the type of family member matters as relationships with
children appeared to play the biggest role in one’s decision to seek out connections with others. The kind of connection the participants made with others and an individual’s resiliency all seem to be important factors that lead to the individual’s meaning that individuals place on social support at a community center. All of the participants partook in a variety of activities and while some activities did not involve a social aspect, they appear to play a vital part in the lives of older adults. For many, the concept of restoring one’s self seemed to indicate the importance of feeling that activities have purpose. Feeling connected to one’s community stood out as a possible indicator of heightened well-being, and this sense of connection appeared to mean something different to each participant. Finally, the various life stages that participants described seemed to play a significant role in what led the individuals to seek out the community center and ultimately what led them to participate in activities.
CHAPTER V: DISCUSSION

Introduction

The original intent of this study was to explore the experiences of older adults who participate in activities at a community center, the meaning they place upon the social support, and the overall effect on individual’s well-being. The results reveal an area of research that continues to need further study about the every-changing lives of older adults. This chapter summarizes the essential findings and compares them to existing literature surrounding older adults, their relationships with family and friends, informal and formal support networks, and resiliency. It will also investigate the clinical implications and limitations of the study, and propose suggestions for future research.

Summary of Findings

The main goal of this study was to explore older adults’ experiences at community centers and their ties to social support networks and emotional well-being, an under-researched topic that is of great importance. The surprising finding of the present study is related to the discovery that attachment to one’s children, more specifically a secure attachment, appears to play a large role in an older adult’s propensity to seek out support from community centers and ultimately in their emotional well-being. This finding led to the discovery of multiple themes such as connection to others, resiliency, and restoring of one’s self. Other themes that seem to have roles in a senior citizen’s decision to take part in activities at a community center are: helping others, types of activities, community connection, exploration, and convenience.

Links to Previous Research
The secondary objective of this study was to compare the results of this study to the current literature related to older adults and their social support networks. In comparing and contrasting the results of this study with the research referenced earlier, some interesting similarities and differences became apparent.

Social Support Networks

The findings of this study lend credibility to Guiuaux, Tilburg, and Van Groenou’s (2007) research that indicated married older adults often turn to their personal relationship networks for support, while widowed adults often seek support from all different members of their network. Frank is the only one that has a spouse, and he was the least involved. Like Roger, he did not pursue male friendships at the community center, but Lucy and Doris did initiate friendships with other patrons. Lucy does not have a spouse, but she has been in a serious relationship for the past three years. Her experience with other patrons are all based on meeting other couples to socialize with, whereas Doris’ experience centered on making deep and long-lasting friendships with other women. This further verified the belief that when personal relationships change (as in the case of widowhood or divorce), so do the roles of the individual, and thus so do their needs for social support.

This study also supports the idea that an insufficient or absent social support network was associated with greater feelings of loneliness (Gow, Pattie, Whalley, & Deary, 2007). Previous research indicates that both men and women associate the lack of social support with a variety of negative factors, such as loneliness. Roger indicated many times throughout the interview that he was an introverted person and his lack of
friends contributes to his loneliness. The previous research, however, did not explore the structure of an individual’s social network or the level of social support received. Therefore, it did not indicate if it was an insufficient or lack of support that resulted in loneliness. This study found that it was an insufficient network that contributed to the individual’s loneliness rather than the lack of support, as all participants had social support from either family, friends, or both. The literature also indicates many older adults do not recognize the importance of creating and maintaining friendships (Finchum & Weber, 2000), something that appears to apply to Roger. He often noted that he wished he were not so introverted and that he did not have enough friends, yet he stated that he had little interest in meeting men and thus cultivating such support. If Frank did not have the ability to see his family members as often as he does, would he view the social support from friends in a different way? This area of social support networks warrants the need to further understand what stops older adults from pursuing friendships.

**Formal and Informal Networks**

This study supports Bowen et al.’s (2003) finding that the meaning that individuals’ attached to their perceived sense of community is affected by their formal and informal networks, which leads to positive family adaptation. There was a definite indication for many of the interviewees that feeling connected to one’s community was extremely important. For Lucy and Doris, it seems that the meaning they place on the community center and the social support networks appeared to help them adapt and in turn created stronger connections to their community. The finding that having informal
networks is vital to one’s life (Duner & Nordstrom, 2006) is not clearly supported by this study, however, as indicated by Frank’s and Roger’s interviews. Although Frank indicated that he had friends that he socialized with, he made it clear that his wife was essential to his life. He did not mention any other members in his informal network that were significant. Although Roger stated that he did not have enough friends, in the end he stated that he was more interested in meeting and dating women than in forming such friendships with men. For him, it did not appear that having an informal network outside of his children was important. Both Frank and Roger highlighted the role or desire of having personal relationships with women in their informal network. The differences between men and women’s informal networks merit further research.

**Family Members**

Responses from all four participants in this study seemed consistent with some of the pre-existing literature outlining the importance of having family members in one’s life (Dupertius, Aldwin, & Bosse, 2001), as all four indicated that having family support in their life was the most significant. Some of the interviewees provided support for the notion that both family members and friendships make the most significant contribution to a senior citizen’s emotional well-being. Lucy and Doris, both of whom had strong attachments to their children, seemed to have heightened well-being after connecting with others at the community center. With the support of their children, they both ventured out and expanded their social support network with individuals from the community center. However, the idea that older adults who do not live with family members or who have family members that live far away do not have an effect on one’s well-being
(Pinquart & Sorenson, 2001) is not supported by this study. Instead, the present study raises the question of whether or not the effect on their well-being is a result of their family member’s expressive support, one’s ability to show love, caring, and empathy, rather than instrumental support or the dissemination of tangible support (Wisocki, 1991). In this study, expressive support appears to be a crucial factor in the older adults’ efforts to seek support from others. For example, although Lucy’s two children do not live nearby, the sense of security and protection that they provide appears to give her stability, which ultimately seems to be a factor in her ability to seek out social support from others. Lucy stated, “I guess I would define [social support at the community center] as an important part of my well-being.” I do not believe Lucy’s view of the social support would be any different if her children lived closer, but their closer proximity might have prompted her to reach out to others faster, like Doris did with the encouragement of her children.

The different examples of family connections raise some questions on how the effect of an older adult’s relationship with their family members affects their views on social support. Is social support from children considered more important for older adults who do not have a spouse in their life? Does being married play a part in whether or not individuals feel their children play a significant role in their social support? Do older adults feel more security when their children live close by or is it just purely their perceived belief that their children will be there to protect them and support them when others will not? Defining how family members affect an older adult’s well-being merits further study, not only in terms of single older adults, but also married older adults.
Friendships

Siebert, Mutran, and Reitzes (1999) highlighted the impact of friendships on an older adult’s well-being in their research. By taking on the role of a friend and having meaningful interactions, older adults can increase their own positive identities knowing that someone chose them as a friend. This study supports this discovery, as noted in both Lucy’s and Doris’ interviews. Through connecting with others, both women were able to restore themselves and learn to live their lives as single and independent women.

Perhaps it can be said that Frank’s experience mirrors Holmen and Furukawa’s (2002) study, which found that with age comes a heightened acceptance and satisfaction with age, thus increasing one’s positive perception of their friendships. Almost all of the participants in their research, aged 75 and older, indicated that they had a good friend to talk to when the study began, but this number dropped by almost 30% by the end of the longitudinal study. However, almost all the participants stated that they were satisfied with their friend contacts when the study completed. The participants in this study also reported that they did not often experience loneliness, similar to Frank who said he had never felt lonely. It is possible that Frank, who is 83 years old and the oldest participant in this study, may have reached the state of acceptance and satisfaction that Holmen and Furukawa found in their research. However, if something were to happen to Frank’s wife, would he reach out to the community center? What would stop him from connecting with others? Roger’s main reason for coming to the community center is to exercise. If Roger had not been in this life stage for so long, would his answer be different?
This raises some questions. What can community centers do to reach out to those who have lost their spouse? What can community centers do to reach out more effectively to older adults who may need the support of others in their age group? Future studies might focus on better understanding how older adults with spouses or partners view their connections with others and how the community can best reach out to older adults who have recently lost their significant other or do not have a partner.

**Resiliency**

Esche and Tanner (2005) discovered that social support enhances older adults’ resiliency, a finding that this study supports. Resiliency, which emerged as a central theme in the findings, strongly highlights the connection to the importance of social support as evidenced by Lucy and Doris who used the community center as a way to adapt to life as a single woman. Through the community center and the support of others, they thrived in this environment. This study also strongly supports Nakashima and Canda’s (2005) research indicating that confronting mortality and death and psychological processes, specifically the act of telling personal stories, may increase an older adult’s resiliency. For Lucy, one of the most important aspects of the social support at the community center was the knowledge that life is fragile and her day “is coming.” Although Lucy does not have a terminal illness like the participants in the previous study, it seems that seeing and talking with others who have challenges in their life propels her to live life to the fullest. Thus, confronting her own mortality has allowed Lucy to enhance her resiliency in her day-to-day life.
The researchers’ study found that the “narrative method uncovered and revitalized older adults’ strengths from their past and assisted them to use these and new resources both inside themselves and in connection with their environment” (p. 117). For Doris, creating a life narrative through her Memoirs class, seems to have a powerful effect on her resiliency, as it is the class that she spoke most passionately about and one that she continues to sign up for every season. Through the Memoirs class, Doris is able to explore her past and integrate it into her present life. In addition, it appears she is able to take her resiliency a step further, as this class allows Doris and others to share their stories with each other. Through all of this sharing, Doris found a group of friends that she considers as her closest confidants in the community. When asked about her emotional well-being since participating in activities at the community center, Doris clearly stated, “It’s helped me to move out of myself.” This area of resiliency warrants the need for further study, specifically focusing on the benefits of creating a personal narrative and sharing it with others.

Attachment

Researchers most often study older adults and social support with the lens that friendships provide increased well-being, whereas family relationships do not (Pinquart & Sorenson, 2001; Roberto, Allen, & Blieszner, 2001; Siu & Phillips, 2002). Their goal, it seems, is to highlight the important aspects of friendships for older adults, a factor that cannot be denied. However, it must be noted that this study suggests a different and surprising way of looking at family relationships, specifically relationships with adult children, who provide a safe and secure place from which to venture out and seek the
friendships of others. According to attachment theory (Holmes, 1993), a child uses their secure attachment figures as a secure base from which to explore and then eventually return to in stressful situations. Infants become attached to adults who respond to their needs in a way that is sensitive and consistent. This then creates an internal working model, which helps to guide the individual in later relationships. This type of attachment was most evident in the interviews with Lucy and Doris who described the relationships with their children as not only dependable, but also as places to turn to in time of need, protection, and comfort. It seems the secure attachment that Lucy and Doris felt with their children gives them the comfort to explore other areas for social support, but also provides them the secure base to come back to during times of stress. Rather than presenting a comprehensive review of the attachment literature, this finding is intended to suggest a new approach to understanding older adults and social support.

*Gender*

Past studies also seem to group male and female senior citizens together when generalizing about social support, but this research indicates that there might be significant differences in how informal networks for men and women operate and thus need to be studied. How much does gender play into one’s viewpoint about social support? It cannot be disregarded that there are inherent differences in the experiences of Frank and Roger’s experiences compared to Lucy and Doris’. Both men do not care to meet others for friendships; rather Frank is there to spend time with his wife while one of Roger’s missions is to meet women to date. If Roger met a woman and they began to date seriously, how would that change his outlook on the social support found at the
community center? Would he consider himself less of an introvert since he has little interest to create friendships with men in the first place? Since Frank always participates in activities with his wife, would he have continued on with the bridge class if his wife had been part of the group? Is Frank unaware of the meaning of the activities because he and his wife always participate together? Why does he not talk about how the community center allows him and his wife to participate in new and different activities together? This raises the big question: Is there just an inherent difference between male and females when it comes to how they view the activities at the center?

Perhaps it can be said that male and female older adults view informal networks differently because of generational dynamics. A study conducted by Barker, Morrow, and Mitteness (1998) consisting of 45 senior citizens found that men’s networks were much smaller than the women’s networks. They proposed that informal social support behavior could be understood as an “economic and social reality that has been shaped over generations (p. 219). Women have generally been expected to fulfill the roles of being providers of care and support, thus creating intimate relationships made up of instrumental and affective care. Men oftentimes took on the job of providing materially for their families, and many times were not emotionally involved in their relationships with others. Today’s older woman often have much larger social support networks than men, suggesting that the differences in genders started many generations ago. It is recommended that future research into older adults’ social support should be examined in a way that takes into consideration possible differences between the two sexes.

Study Limitations
It is important to point out some of the limitations of this study. The first limitation centers on the difficulty that some of the interviewees, specifically the men, seemed to have with understanding what was meant by “social support.” While the women did not appear to have problems comprehending the concept of social support, it seems that both of the male interviewees struggled to conceptualize the idea. Although attempts were made to define the concept, it could be possible that the men’s seeming lack of understanding contributed to the way they responded to the interview questions. On the other hand, the men’s lack of response could be an indicator of their lack of value on social support. As a result, this could greatly skew the research and perhaps be a contributor to the differences of the genders that was discovered in this study.

The second limitation is that the main researcher of this study is an employee of the senior adult department at the community center where the participants were recruited. Participants may not have felt as comfortable answering the questions honestly; on the other hand, this certainly allowed an easier recruiting process and perhaps could have increased comfort and perception of true interest.

The third limitation is one of diversity. 75% of the participants were single, and Frank’s interview clearly stood out among the other three. All four participants were in their late 60’s to early 80’s and three of them were Caucasian, so this study does not include perspectives from a diverse group of senior citizens. The differences between the men and the women’s responses are evident, which speaks to the need to interview a larger group of participants in order to fully understand if there is a difference between the two sexes. In addition, all of the participants had at least one significant relationship
with a family member. It would have been useful to interview a participant that did not have any significant relationships with a family member.

Clinical Relevance

This study lends itself to the field of marriage and family therapy because issues surrounding older adults are becoming much more of a prominent issue, as our life spans continue to increase due to the advancement in technology and our understanding of the human body. Learning how to better our lives is a constant issue our society tackles every day, and how an older adult handles their mental and physical health can impact the rest of the family. Therapists need to better understand how best to support both family members and older adults through expansive knowledge of what lends to increased well-being. Questions surrounding an older adult’s relationships with their children, the presence or lack of social support, connection to their community, and the different roles they take on (i.e. do they fulfill the role of helping others) are just a few topics that therapists can utilize to begin to help families as their loved ones age.

Research such as this can also encourage new and better programs geared towards older adults that can focus on how to enhance one’s connection to their community, what opportunities to offer that allow an individual to feel helpful, and how to encourage older adults to form and maintain friendships.

Suggested Future Research

Because this was a research study, which focused on understanding how an older adult’s emotional well-being was impacted by social support networks, future longitudinal studies could add vital information about understanding the role of
community centers. Such a study could gather information from older adults when they first start coming to the community center and at different intervals over the years. Because this was a qualitative study, further studies might consider using quantitative methods to assess an individual’s well-being throughout the research. This could help to further the knowledge of how formal networks provide settings for informal networks and the importance of them as older adults age.

Finally, subsequent studies should also focus on more in-depth understanding of what roles children play in the lives of their older adult parents. Using the premise of Attachment Theory, it would be useful to study and compare older adults who have close relationships with their children to those who do not have children.
References


