

Social Fitness

This article first appeared on Positive Psychology News and has been adapted. Diana Boufford BSW, RSW is a psychogeriatric social worker employed in private practice and through a local hospital in Windsor Ontario Canada. She is presently working toward the completion of her BA in Psychology, with a special interest in the intersection of positive psychology and geriatrics.

When I think of social fitness I think of charismatic, outgoing, exciting people who are able to entertain at parties and make others laugh, people who feel completely at ease anywhere. This is certainly not me, and it is not what this article is about. Instead, I'm focusing on older adults, their families, and their caregivers and how they can build their social fitness to navigate the challenges that arise as someone grows older. It is about applying inner resources and strengths to cope with this challenging period of life.

Older people may find their worlds shrinking as their ability to get around diminishes. That often means their social worlds shrink as well, unless they keep finding ways to strengthen their social connections.

Me and Mom - A Social Trajectory

To illustrate this I will tell you about my mother. She was a very active young senior who spent her days volunteering to help others who lived in her building, serving as an informal friendly visitor. Before that, she worked as a house-mother for a home for pregnant teens, and at another time, she cared for mentally disabled adults. She belonged to a weekly bowling league for decades. She also visited and supported her children and grandchildren in all the ways that loving grandmas do.

However the effects of illness and aging crept up on her at a relatively young age. A medical condition affected her mobility so that she found herself frequently falling. A severe tremor made it difficult to feed herself. She also suffered great pain due to the disorder itself as well as migraines and osteoarthritis. Disabilities often come in clusters. She found herself confined to her apartment, unable to go out alone, and dependent on nurses, personal support workers, and family to come in three to five times per day for meals, personal care, and medical attention.

In the five years that she lived with these debilitating conditions, she became more and more unhappy. She felt like a prisoner in her own home. We encouraged her to move into a nursing home to get much needed care, but she refused over and over again. Finally the pain, the frustration of having to wait for help or pain relief, the loneliness, and the isolation got to her. She agreed at the age of 65 to go into a nursing home. It took a bit of adjusting, but after three months, she admitted that she was actually quite comfortable. It was a relief to know that she did not suffer in isolation and that there was a team of people to help her when she was not well.

Involved in all activities

Today my mom would not live anywhere else. “Even if I became independently wealthy so that I could hire round-the-clock-care, I would not give this up. I would not move.”

You see, today, my mom attends nearly every event and activity in the home. She has a routine that allows her to provide care to others once again. She brings the residents who are unable to make their own way down to the dining room for meals. She gathers all the aprons (Mom thinks it is quite demeaning to call them bibs since they are for adults – I for one do not disagree). She greets each resident in the dining room before each meal and assists with putting on the aprons. She helps plan teas and other activities, and she serves on the Residence Counsel for her unit, bringing up the concerns of her neighbors to the administration and staff. Moving into care not only restored my mom’s dignity, it has also given her purpose and meaning. She is able to be the social, outgoing woman of service that she once was. She did this through her own resourcefulness, courage, fortitude and yes, stubbornness. These skills reflect some of her social fitness abilities.

For the caregivers as well

Caregivers need to develop social fitness as well. The task of caring for an elder along with the demands of one’s own family, work, home, and marriage are often overwhelming. The well-being of the caregiver is easily pushed to the bottom of the to-do list. Over time, this can result in burnout or grow into anger and resentment toward the elder and others. Social fitness is an inner resource that can prevent or lessen these problems. It can actually make the elder years quite fulfilling.

In order to maintain their own social fitness, caregivers need to be willing to reach out to others. This can be difficult. Most people don’t want to be a burden and feel that they are imposing if they ask for help. However sometimes this is one of the greatest opportunities for the development of humility, resilience, building a network, and growing social muscles. Relationships can be meaningful and engaging not only for the asker, but also for the other person, leading to shared attachment, appreciation, and nurturing.

Social Resilience

John Cacioppo’s work on social resilience, defined as “the capacity to foster, engage in, and sustain positive relationships and to endure and recover from life stressors and social isolation.” According to Cacioppo and colleagues, the following features characterize an individual with social resilience.

1. Characteristic ways of relating: agreeableness, trustworthiness, fairness, compassion, humility, generosity, openness

2. Interpersonal resources and capacities: sharing, attentive listening, perceiving others accurately and empathically, communicating care and respect for others, responsiveness to the needs of others, compassion for and forgiveness of others
3. Collective resources and capacities: group identity, centrality, cohesiveness, tolerance, openness, rules for governance

Researchers working for the US Army developed a survey to help soldiers identify both strengths and areas that needed additional attention for social fitness. They also provided training tools to help military personnel to enhance existing strengths and develop new strengths.

I contend that we could improve the quality of life of ourselves as caregivers and for our loved ones if we were able to assess social fitness and provide suggestions for enhancing strengths and addressing areas needing improvement.

Let's Look at Mom's Experience Again

My mom was able to build on her social fitness. She knew that her life was most fulfilling when she was serving others (helping peers with dinner), when she played with friends (bowling), and when she advocated on behalf of others (the Residence Council). She demonstrated the social resilience through her agreeableness, openness, trustworthiness, fairness, compassion, humility, and generosity of time, energy, and spirit. She is always looking for ways to help. Her interpersonal resources include attentive listening, responsiveness to the needs of others, and compassion for and forgiveness of others. Finally she enjoys belonging as a resident of the nursing home, having a group identity, and practicing tolerance for rules for governance.

My mom's experience is not shared by all, although, many do follow a similar path. What is important is the development of some sort of social resilience skills in order to be well prepared to cope with whatever changes occur. For caregivers, walking this road with their loved one is just as challenging. They have a similar need for preparation. These changes can be just as difficult for the caregiver as they are for the care recipient.

Do not walk this journey alone.

*You viewed this article on the Caregivers Nova Scotia website www.CaregiversNS.org. For more information, contact us toll-free at 1.877.488.7338.