RE-AUTHORING THE LOSSES AND CHALLENGES OF AGING: OLDER INDIVIDUALS' EXPERIENCES OF LONG-TERM GROUP WORK

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ABSTRACT

The increase in life expectancy has highlighted the value of group work interventions as a cost-effective way of helping older persons to deal with life transitions. This article describes a group for senior citizens that continued for 18 years. The aim of the study was to undertake a documentary analysis of the facilitator's process notes and participans' reflections to ascertain possible reasons for the group's longevity. These were attributed to the skill of the facilitator and her creative use of programme material and narrative therapy. Recurring themes included loneliness, the fear of dying, and dilemmas about relinquishing control and independence. Findings have implications for the practice of social group work with older persons.

INTRODUCTION

In July 1996 a Jewish faith-based organisation in Johannesburg, South Africa identified a need for a psycho-social support group for older persons. In line with the social development model, the envisaged purpose of the group was to provide opportunities for people to share some of the joys and sorrows of getting older and facing life on one's own, and to empower them to deal with loss and changing relationships with spouses and children in a confidential and supportive environment.

The first author, who is a retired social worker, was invited to facilitate the group. She was approached because of her extensive experience in facilitating groups, her understanding of the power and beauty of groups, and her ability to blend "the art, science, heart, and ethics of group work practice" (Steinberg, 2006:34). This skill was not acquired through training as there had been no exposure to group work when she had attended a South African university in the 1940s.

Subsequently, as a social worker employed at Johannesburg-based Non-Governmental Organisation (NGO) tasked with providing child protection services, she had become increasingly frustrated with having to rely on home visits using the casework method in working with foster parents and those whose children had been removed from their care. However, during the 1960s she had visited the States and come into contact with social workers who were practising group work and had also found literature describing the theory underpinning this method. She was, therefore, eager to try out this approach. It proved to be highly beneficial and by the time she retired in 1989 group work was being used in all departments of the organisation.

Consequently, in 1996 when she was asked by the second author to form a group for older persons, she eagerly grasped at the idea of giving back something to a community of older people who were experiencing loneliness in their personal lives. The group was advertised on 2 August 1996 in the newsletter of the faith-based organisation and started in January 1997.

Although the group was initially only intended to run for a few weeks, at the request of the members it was extended to a year. However, with every subsequent year, the group continued, with the group journey spanning 18 years. The group started off with 12 people with the number fluctuating as members departed due to illness, death or emigration and new people joined. At the time of writing this article, the facilitator and all the group members were in their late 80s.

As an academic, the third author was invited to document this unique experience so that it could be shared with other professionals involved in group work with older persons. For this purpose she was given a wealth of process notes that had been compiled by the facilitator, the second author (a social worker and general manager of the organisation), as well as reflections of individual group members. Records in hard copies had been kept in several files based on notes written or typed immediately after each group session. The brief was to disentangle the memories and unravel the narrative of this unique long-term group with a view to discovering the reasons for its longevity. It was envisaged that this analysis would contribute to the body of knowledge regarding social group work with older persons.

THEORETICAL FRAMEWORK AND LITERATURE REVIEW

Although the study of aging is extremely complex and includes biological, psychological and sociological approaches, the two main theories that framed the current study were the life course and social constructionist perspectives. Probably the most significant life course theorist was Erik Erikson who took into account the major social, psychological and cultural factors that occurred throughout the life course when trying to understand the circumstances of older persons. He conceptualised eight stages of the life cycle, each with its own set of tasks that need to be mastered before one could transition into the next stage. The eighth and final stage of maturity revolved around achieving integrity versus despair which usually occurs during old age (Bengston, Putney and Johnson, 2005). During this stage individuals tend to "look back on their lives with a sense of satisfaction that they have lived it well or with despair, regret, and loss for loved ones who have died" (Westen, 1999:666).

The social constructionist perspective places emphasis on everyday inter-actions between people and how they use language to construct their reality (Andrews, 2012). While chronological age refers to the length of time that a person has lived, this biological phenomenon has been socially and culturally constructed by society which in turn has created myths and stereotypes around old age such as ageist notions of elders as unproductive, dependent, inflexible and not open to new ideas (Bengston et al., 2005). In this way, older persons are constructed as social 'others'. Hence, Crampton (2011) emphasises the need for social workers to challenge ageist constructions of older persons. Aging is also perceived differently around the world, demonstrating its social and cultural construction. For example, Eastern societies tend to associate age with wisdom and value old age more than their western counterparts who tend to value youth above old age.

Against this theoretical backdrop, the United Nations report on World Population Ageing (UN, 2013) highlights the unprecedented increase in the world's aging population, although developed and developing countries are differentially affected. Parker (2009) points out that in view of the fact that human beings are naturally gregarious and tend to live and organise themselves in groups, group work has a critical role to play in addressing the issues and concerns confronting older persons. Issues common to the late-life stage include "problems of loneliness, health, care needs and burdens, depression, and grief issues associated with loss of loved ones, concern for physical appearance, sexuality, lack of satisfaction with one's life, and fear of death" (Pandya, 2010:324). Group work is particularly well suited for older persons as it provides cost-effective opportunities for treatment, social interaction and support (Toseland, 1990); hence social workers need to be skilled in group work if they are to meet the growing needs of the older population. While Macgowan (2008) has highlighted the need for evidence-based research on group work with older adults, the present study represents a retrospective analysis of a group that was not initially intended for research purposes.

METHOD

Aims

The aims were (1) to describe the development of the group over the 18 years of its existence; (2) to highlight recurring themes/issues that emerged; and (3) to identify possible reasons for the longevity of the group.

Research design

The study took the form of a documentary analysis of group work records and reflections of group members and involved "the study of existing documents, either to understand their substantive content or to illuminate deeper meanings which may be revealed by their style and coverage" (Ritchie and Lewis, 2003, cited in Strydom and Delport, 2011:377). This documentary analysis was located within an interpretive qualitative paradigm "which states that reality is defined by the research participants' interpretations of their own realities" (Williams, Unrau, Grinnell and Epstein, 2011:53).

Participants and materials

In terms of the composition of the group, both the facilitator and the members were in the old-age phase of the life cycle. The majority i.e. 11 out of the 12

members were female, which is consistent with the longer life expectancy of females globally (Parker, 2009) and in South Africa (Makiwane, Ndinda and Botsis, 2012). All participants were from the same religion as the group was held under the auspices of a faith-based organisation. Members could be characterised as middle-class with two persons being medical doctors. Records of the group extended from 1997 to 2014 and included process notes written by the facilitator, personal reflections of the individual members, and literature used to stimulate discussion of various themes.

The setting

From 1997 to 2004 monthly group meetings were held at the local bowling club. However, in 2004 the venue was moved to a quiet room in the organisation.

Data analysis

Documents were analysed in terms of themes and group processes that occurred over the life of the group with a view to identifying reasons for its longevity. The five steps recommended by Terre Blanche, Durrheim and Kelly (2006) were followed, namely (1) Familiarisation and immersion where the researcher read and re-read the process notes and participants' reflections; (2) Inducing themes which involved inferring general rules or classes from specific instances in a bottom-up approach; (3) Coding which entailed marking different sections of the data as being instances of, or relevant to, one or more themes; (4) Elaboration where existing themes were combined in different ways; and (5) Interpretation and checking whereby the analysis was checked with the first two authors.

Ethical considerations

In accordance with recommendations by Babbie (2013), the members remaining in the group in 2014 all gave their informed consent for the third author to access the written material and write up the experience in the form of an article. Anonymity and confidentiality were respected and no identifying details were included. In order to uphold the principle of non-maleficence (Ivanoff and Blythe, 2011), highly sensitive information that might have identified individual members was excluded.

RESULTS AND DISCUSSION

Results are presented and discussed in relation to the three aims of the study, namely, (1) the development of the group; (2) recurring theme/issues and (3) reasons for the longevity of the group.

Aim 1: Development of the group

In analysing the key issues that emerged over the life-cycle of the group, it was possible to discern various phases, namely the beginning, the early years, the intermediate years, the later years, and the ending.

The beginning

The group started with the facilitator contracting with the initial 12 members regarding certain ground rules or group norms such as conveying respect by allowing others the space to express themselves without being interrupted, attending regularly, paying the nominal fee to cover the costs of refreshments, and taking an oath of confidentiality which enabled them to talk openly of matters which they would normally never discuss, even with close friends. Effective use was made of ice-breakers to relieve tension, for example, an anonymous poem describing humorous aspects of aging: "It's harder to tell navy from black; your kids are becoming you and you don't like them – but your grandchildren are perfect; you forget names…but it's OK because other people forget they even knew you; the five pounds you wanted to lose is now 15 and you have a better chance of losing your keys than the 15 pounds; your husband is counting on you to remember things you don't remember;… your lipstick bleeds and your eyebrows are disappearing".

After the first meeting the facilitator reflected:

"I realised that I had not lost the talent for communication and for conducting a group. I was in familiar territory. This had been my world for 20 years. I felt the possibilities were enormous". One participant wrote: *"The first few meetings were devoted to 'getting to know each other'. We each in turn related the story of our lives thus far, bringing along (sometimes ancient) photographs, describing our childhood, adolescence, parents, siblings, marriages, children and grand-children"*.

Pan, Hunag, Liu and Chen (2012) in their group for older Taiwanese persons, also encouraged storytelling through using members' old pictures. Once members felt that they had become thoroughly acquainted and had

established a group bond, they chose a different topic at each monthly meeting, guided by the facilitator.

The early years 1997-2001

Because of the similarity of age, interests and life experiences of the members and facilitator, they were able to talk about their concerns and anxieties, often enjoying empathy, support, understanding and advice from their compatriots which they did not receive from their immediate families. Group cohesion gradually developed and as the group unfolded participants learned to trust one another and share their experiences. Issues discussed included: disliking the changes in one's body; palliative medicine and the living will; dealing with loss and personal traumas; needing to accept guidance without feeling diminished; not wanting to live in a granny cottage and losing one's independence; loneliness; depression and missing one's relationship with one's husband who had passed on; and the difficulty associated with discussing the topic of dying.

Members shared recollections of their childhood, Jewish religious festivals, the Holocaust and having to safeguard their children by sending them away. A recurring topic was old age in South Africa and whether to stay or to emigrate. Disadvantages of growing old in South Africa included members who experienced feelings of loneliness, depression and abandonment when children and relatives emigrated and they were left behind; concerns about what would happen when the annual visits became too expensive and they were too old to travel; and endemic violence in South Africa which makes older people soft targets. Advantages included the wonderful lifestyle, availability of domestic help and the exceptional climate. They also discussed myths and stereotypes of old age; assets of old-age and forgetfulness.

As the discussions deepened, a significant development was the group wanting the facilitator to share her experiences with them. The facilitator reflected:

"I had always believed that it was necessary to keep a distance as regards my personal experiences – or did I need to reveal myself and gain support for me and approval of fellow members? I was not sure. But sharing certainly did not inhibit the process or provide a different dynamic. If anything it seemed to strengthen the trust in me".

During this time the group lost one member and it felt like "a limb amputated". However, they were reluctant to admit new members and increase the size of the group.

Salient issues included petty disputes with family members, why it is so difficult to tie up untied endings and why we reveal ourselves to strangers more than to our own families. They articulated the tiredness and insecurity of old age, the effort it takes to keep going and the need to have the will to live; the need to keep occupied and avoid taking too much medication; worrying about being overweight; and fear of becoming ill, and not being able to care for one's spouse. With the gradual decline in health, they discussed the experience of back pain, osteoporosis, mastectomy, hip replacement and trouble with one's teeth. One member was diagnosed with terminal cancer and the group expressed their sadness, affection and support for her.

The intermediate years 2002-2007

During this period, the facilitator wrote *"We all look visibly older"*. Topics that emerged included getting on with in-laws and daughters-in-law; living wills and the practicalities of dividing possessions among one's children; religion, afterlife, spirituality and euthanasia; and reactions to losing one's spouse and life partner such as anger at one's husband for leaving one to cope alone.

Key events included the attack on one member's husband; two group members turning 80; and another person breaking her femur and others becoming increasingly frail and suffering ill health. Issues discussed included memory loss; our domestic workers and what they meant to us; adapting to living alone; loving and accepting ourselves; losing our friends; realisation of our own mortality and the mortality of the group; and the fear of death and how we would react if we had a terminal illness. One member wrote:

"Yes death is always on my mind these days and besides the fear of leaving all my family who need me and expect me to live to a ripe old age, it is that I may become sick and become a burden". The facilitator observed that *"this was the first time that the group had stayed with the topic of death for longer than two minutes"*.

At this juncture the group looked back on their experience and one person wrote:

"It is true that without a dedicated leader there would be no group. BUT without enthusiastic members willing to share their anxieties, sorrows and joys there would not have been a seven-year history". Another participant wrote: *"I think it is safe to say that each one of us looks forward to our monthly meeting and we sometimes totter on feeling under the weather and in rain or shine"*.

At this point the idea of a book on the group experience was born.

Initially members were enthusiastic about writing the book. Another member turned 80. Someone had her car stolen. Issues included fear of the unknown; forgetfulness; caring for a spouse with Alzheimer's and the terror of losing him in a busy shopping mall; feelings about old age; not being needed as much as previously; and feelings about old friends dying or becoming disabled. At this stage it was felt that there was a need to extend the duration of the meetings to one and a half hours. However, by the end of the year it was apparent that the group did not want to be involved in doing the writing for the book.

As the room where the group was held was no longer accessible for members who had difficulty negotiating stairs, an alternate venue had to be found. Some members were no longer able to drive. One participant related how she had been robbed at the local hypermarket. One member shared her ambivalence about putting her husband into an old-aged home. The others supported her and shared their own feelings of going into a home, underscoring the reciprocal helping relationships among members. Issues included "the end" and "who of us will turn out the light?" In addition, they reminisced about childhood festivals with their grandmothers and how they had baked traditional Jewish dishes.

The group struggled with the question: "What will we do when there are only three of us left?" They did not want to think of this because they did not want to think of death. The health of members continued to decline with several persons using wheelchairs or walkers. Others had sustained falls and broken bones. The group voted to continue but not to add any new members. Issues raised included the fear of tomorrow and what was to come; losing one's status and standing in the family; worries about money; depression; adapting to life in an old age home; the trauma of losing a son who drowned; and having one's spouse become bed-ridden. A particularly traumatic experience for one member was finding an intruder hiding in her bedroom. Positive aspects focussed on the group being part of their lives; the benefit of sharing the trauma in their lives; enjoying life in an old-aged home; and deriving joy

from music. The commitment and motivation of group members was apparent from the notes of the facilitator:

"I never remind members of the date of the next meeting. They are always there waiting. We talk for over an hour and have tea and chat again...I leave them chatting with each other".

The later years 2008-2013

During this period a new member joined while another person entered an old aged home. One person's husband had retired and showed signs of dementia. Issues discussed included the changes we see in ourselves and what we do with our fears; getting lost; and forgetting a name and then later recalling it. One participant reflected:

"We all shared the misery of short term memory loss, weeing (urinating) at night and no sex!" At this point the facilitator wrote: *"It is sad to see the deterioration in every one. And they all seem more self-centred".*

The stage was reached when there were only five members left in the group. Participants discussed the pleasures of reading, pot plants, music, bridge, lectures, people and animals. Other topics included becoming senile and having one's car keys removed; the distraught reaction of one member's son when she refused to move into frail care; the changes they saw in the attitudes of their children; people not wanting to be around a person who used a walker; feelings of guilt at the relief one felt when a sick husband died; and sexuality and members' reluctance to discuss the topic.

A significant theme revolved around metaphors of ourselves. For example, one person compared herself with a plant whose leaves protect her family. Other persons mentioned a duck that loves water and swimming; a fish that goes with or against the tide; an octopus doing too many things at the same time; a girl guide with her honour; an oak tree in autumn; and a pink flamingo that loves music, poetry and ballet. There was also mention of magic moments passed on to grandchildren. They reminisced over "golden moments" e.g. when one's son was born; and what things they wanted their grandchildren to learn from their life experience.

The group mourned the death of one member. One person had fallen, one was on oxygen and another was in hospital. The group talked about forgiveness; photos of the mind; life as a casting off materially and emotionally (the need to cast off one's former lifestyle and let go, for example, of one's mobility); the wish to die without prolonged suffering;

and loss of confidence, interests and energy. They also expressed feelings of being old, forgetful, sad and full of aches and pains, but determined to remain independent.

As their health continued to decline, participants learned how to recognise the symptoms of a stroke. However, possibly the most memorable discussion centred around Itzhak Perlman, the physically disabled violinist who had prepared all his life to make music on a violin of four strings. Suddenly in the middle of a concert in 1995 at Lincoln Centre, New York he found himself with only three strings. So he made music with only three strings and that music was more beautiful, more sacred and more memorable than any he had ever made before when he had four strings. The group used this metaphor to discuss how it is possible to make do with what we have left.

The ending 2014

The termination of the group was not planned. The facilitator suffered unexpected ill health and was unable to continue in her role as facilitator, which evoked intense feelings of sadness among the participants. As the majority of members were reluctant to start afresh with a new facilitator it was decided to end the group. As one person put it:

"When C told us she was unable to continue running the group due to ill health but there was a possibility of someone else taking over, I felt without C steering it in her inimitable style I would regretfully no longer be part of it".

Findings from the analysis of the development of the group were consistent with life course theory and Erikson's eighth stage of the life cycle. The process notes revealed that as the group evolved participants struggled to overcome feelings of despair and achieve integrity through acceptance of physical losses as well as the loss of meaningful relationships, and the need to cope with the challenges of old-age. Results also supported the social constructionist theory of aging. For example, participants' seeming reluctance to discuss sexual issues, which only surfaced at one point in the process notes, may have been related to the ageist stereotype of older persons as asexual beings. At the same time, findings challenged the ageist construction of older adults as unproductive and dependent. In fact the process notes from the group demonstrate that none of the participants fell within these stereotypes and through the group process they were all able to engage actively and participate constructively in discussions of various themes, poems, books and so forth. One can also speculate that active

involvement in the group helped these individuals to remain mentally active. As one member put it:

"One left the meeting with some food for thought, a glow of satisfaction at having slightly extended your thinking process".

Aim 2: Recurring themes

Recurring themes included universal issues of loss (including physical decline; mental deterioration; status changes; financial difficulties; the death of significant others; and the awareness of limited time left); illness and dementia of a spouse, loneliness and depression, and the fear of dying countered by the joy of grandchildren, the mutual support of the group, and the pleasure derived from sharing humorous anecdotes and meaningful memories, reading, caring for animals and pot plants. A further recurring theme was the dilemma around relinquishing control to one's children while needing to retain one's independence and not become a burden.

Aim 3: Reasons for the longevity of the group

A critical factor contributing to the success and longevity of the group was the quality of the facilitator. She was in the same stage of the life cycle as the group members and could empathise and relate to their concerns. Although she was willing to share some aspects of her life with them, she set clear boundaries and had no contact with members between sessions. Her professionalism was evident when she wrote *"They were not my friends either in the group or outside".* In this way she was committed to the ethical imperative of avoiding "dual relationships with group members that might impair her objectivity and professional judgment" (Toseland and Rivas, 2005:473). In addition, she was skilled in group dynamics, emphasised confidentiality and adopted a democratic, non-judgemental leadership style. Although the group facilitator was involved in screening prospective group members, in accordance with Kurland and Salmon's notion of ethical group work, decisions regarding admissions of new members were always group decisions (cited in Steinberg, 2008). The facilitator also repeatedly emphasised that members had a choice in terms of what they shared and how much. In addition, the group leader clarified what people were trying to say in order to encourage discussion and resolve conflicts. She also skilfully refocused participants who tended to dominate discussions. She created a highly interactive group climate characterised by warmth, safety, confidentiality and trust.

A further factor that contributed to the unique experience of this group was the facilitator's creative use of programme activities in the form of art, music, literature, poetry, metaphors and everyday objects to stimulate discussion. For example, members were asked to talk for half an hour on the topic "Down memory lane" and to bring photos to illustrate their memories. Members chose 3 or 4 pieces of music and explained why they related to them either in sadness or happiness. Discussions on the meaning and purpose of life centred round the work of holocaust survivor Viktor Frankl and his seminal work Man's Search for Meaning. Other educational and informative books included The Reader, a holocaust narrative by Schlink, writings by Elisabeth Kubler-Ross and Arthur Miller's play Death of a Salesman, in which he wrote: "Life is a casting off and we all have had to come to terms with this casting off". The metaphor of the violinist with only three strings set the scene for discussions on loss and making do with what one has left. The books Growing Old Disgracefully and Betty Freiden's Fountain of Age stimulated discussion of these issues. The book, 'Breaking the Rules of Aging' by David Lipshitz, served as a springboard for discussions on spirituality. The group discussed the lives of Jung, Eartha Kitt, Bill Kaufman and Billie Jean King and their attitudes to life and old age. Other activities involved each member bringing a meaningful object to the group and talking about the memories that it evoked, or talking about a room from the past. Although the facilitator was always well prepared in terms of topics for discussion, she was flexible in deviating from planned activities and allowing members to speak spontaneously about issues affecting them.

The use of story-telling around members' lives embodied the principles of narrative therapy. Michael White (2000) conveys the essence of narrative therapy by explaining that in trying to make sense of life, individuals are confronted with the task of arranging their experiences of events in sequences across time in such a manner as to achieve a coherent account of themselves and the world around them. In other words, people review and make stories of their lives in order to find meaning and purpose in them. Narrative therapy is similar to group reminiscence which provides "a forum in which older people are encouraged to talk with each other about the events and experiences of their lives" (Middleton and Buchanan, 1993:321-322). These same authors argue that reminiscence groups afford older persons opportunities for "the maintenance and re-establishment of identities and membership ('re-membering'); and account for potential and actual frailties associated with 'aging'" (p.322). In a similar vein, Housden (2009) highlights the social aspects of reminiscence, opportunities for self-expression, sharing of emotions, and developing trusting relationships. Shik, Yue and Tang (2009) found that their reminiscence group for Chinese older persons created

a feeling of family among group members while enabling them to retain memories of their loved ones.

The value of the group is reflected in the verbatim comments of members who responded to a questionnaire on their subjective evaluations of the group and why they continued to attend over such a long period. For example:

"C skilfully melded us into a group where trust, confidentiality and empathy have allowed us to reveal our most intimate thoughts and feelings". One participant reflected: *"…in this busy, modern world one seldom finds someone who will have the time to really listen and here we have a whole group prepared to hear one out, and give thoughtful advice from their many years of overcoming similar problems"*. One person commented: *"I enjoyed the meetings where I found the stimulus and encouragement to extend my knowledge and, generally, broaden my outlook"*. Another member reflected: *"Four years ago I was diagnosed with a rare form of cancer. My children were panic-stricken and I could not express my fears to anyone. It was through the group that I discovered the real meaning of moral support"*.

The group represented a sacred space which instilled hope, lessened fears and allowed members to share ways of dealing with life's problems. It also alleviated loneliness and allowed members to feel valued and supported. As one participant reflected, *"I have found and made new friends"*.

The benefits of the group work process articulated by the participants were consistent with those reported by Heathcote and Hong (2009). They maintain that "by providing companionship, engagement, support and activity, groupwork can bring structure to the lives of older people and their carers who may be feeling 'lonely' and 'isolated' and consequently can impact upon their quality of life" (Heathcote and Hong, 2009:121).

CONCLUSION

Various phases were discernible in the development of this group over the period of 18 years including the beginning stage, the early years, the intermediate years, the later years and the ending. Key themes that emerged were issues of loss; illness and dementia of a spouse; loneliness and depression; and the fear of dying countered by the joy of grandchildren, the mutual support of the group, and the pleasure derived from sharing meaningful memories; and the dilemma around relinquishing control to one's children while needing to retain one's independence.

It would seem that the longevity of this group was attributable in no small measure to the skill and sensitivity of the facilitator who employed innovative approaches and established a democratic, caring, supportive and empowering group climate in which members could share their joys and sorrows and where reciprocity and mutual aid could flourish. Her knowledge and skills as well as the material that she used, hold important lessons for the practice of social group work with older persons. The analysis also highlighted the value of working with people's life stories and recognising the impact of difficult life events and circumstances. In climates of scarce resources it is particularly important to utilise the practice wisdom of retired social workers who are willing to volunteer their services and who believe in Kurland and Salmon's (2006) notion of the "power and promise of group work".

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