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“Making Oranges from Lemons”

Experiences of Support of South African Jewish Senior Citizens Following the Emigration of their Children

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Abstract

Family is widely expected to be the main source of support for Senior Citizens and, like many religions and cultures, the Jewish tradition has expectations of filial obligations of care. South Africa and its Jewish community have experienced increased emigration over the last decade resulting in many Senior Citizens remaining in South Africa after all their children have emigrated. A phenomenological methodology was used in this study, with the aim of gaining more understanding, firstly about what is experienced by Senior Citizens as beneficial and not beneficial in regards to support in general and secondly about the challenges of later stages of life from Senior Citizens' perspective, especially without expected support of offspring. In-depth interviews were conducted with eight Jewish women, aged over 75, who find themselves in such a position. Their experiences are described in terms of social, practical, emotional and spiritual support as well as in terms of the contextual experiences that necessitate support. The overall experience was found to be one of managing aloneness and dealing with the loss of family and its accompanying sense of belonging. It includes constantly missing one's family, trying to keep in satisfyingly regular contact and trying to comprehend, justify and accept their emigration in terms of expected intergenerational roles. It demands adjusting to constant changes in supports and in one's independence and identity and finding the motivation to strive to remain alive and discover meaning in the painful situation. In the face of all this, there is also a discovery of previously unsuspected new strengths in being able to cope with these difficulties and an exciting new sense of liberation in catering only for oneself. A model of perceived Ideal Support was uncovered comprising a hierarchy of needs within such support, including; Consistency, Reliability, Role Fulfilment, Desire to Support, Respect, Dignity, Enabled Independence, Affection, Like-Mindedness and Belonging.

Declaration

This research and mini-thesis is my own work. Significant contributions and quotations from the works of other people has been attributed, cited and referenced.



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Chapter1

1. Introduction

1.1. Introduction

“This romanticized past juxtaposed against the disappointing present and these old expectations incongruent with new circumstances are to some degree the contradictions that parents all over the world must deal with. Parents want their children to do as well or better than they did. They want their children to succeed and they want to be able to boast of their children's accomplishments to their peers. However, those accomplishments often have a price — migration away from home, less control over the lives of children, and sometimes painful adjustments in family relations and obligations.” (Coles, 2001, p. 400)

The movement of people around the world has always been a basic component of human history, one that continues to play a vital role in today's society. People generally migrate in search of, amongst other things, better material conditions and to avoid physical danger, reasons that can be applied to the thousands of South Africans emigrating from their country (Chambon, 1996; Crush, 2002; Horowitz & Kaplan, 2001; Joyce, 2002; van Rooyen, 2000).



In the last ten years there has been much concern over the increased emigration of skilled workers from South Africa. This ‘brain drain’ has caused consternation as it has vast economic, health-related, political and social implications for South Africa. The Human Sciences Research Council estimates that emigration appears to have trebled during the post-apartheid years in South Africa, particularly in the education, managerial and humanitarian occupations (Sunday Argus, 21 March 2004; Martineau, Decker & Bundred, 2004). Exact official figures are not available but estimated numbers attributed to the emigration phenomenon are substantial. Emigration statistics vary greatly for the period of 1994 – 2000 and are estimated to be between 65 000 to 500 000 people (Crush, 2002; van Rooyen, 2000). According to van Rooyen (2000) a realistic estimate is that at least 165 000 South Africans, many of them professionals, have left South Africa in the years 1994 – 2000. The number of skilled professionals leaving the country reportedly increased by 62% in the year 2002-2003 and this trend is hypothesised by some to continue in the near future (Sunday Argus, 21

March 2004; van Rooyen, 2000). While statistics from 2004 suggest that the numbers are dropping they continue to remain in the tens of thousands (Die Burger, 30 July 2004).

Demographics of emigrants tend to fall into certain categories. Van Rooyen (2000) claims 90% are white, aged around 30 – 40 years, accompanied by one or two children and possibly a dog. More than half of those emigrating tend to be professionals, predominantly health professionals, accountants, teachers, engineers, scientists and researchers (Chambon, 1996; Crush, 2002; Sunday Argus, 21 March 2004; van Rooyen, 2000). Those initially emigrating tended to be of a higher socio economic bracket and emigration often resulted from fears of change in safety and standard of living following the 1994 change in government. Now, after more than a decade of democracy there is some evidence of what is being titled a “homecoming revolution” where some of those who have emigrated are returning (Die Burger, 30 July 2004). Personal communication with some ‘returnees’ indicates some reasons for their return to be ageing parents and invalidated fears of South Africa’s predicted disastrous future.



The wave of professional and family emigration has had a noticeable effect on the size of the Jewish community in South Africa (Christianson, 1997; Horowitz & Kaplan, 2001; Kaplan, 1996). The long history of Jewish persecution means that Jews tend to migrate in times of political instability (Elazar & Weinfeld, 2000; Frankental, 1992; Saron, 1955). As such over the past few years the Jewish community of South Africa have been emigrating in proportionately greater numbers relative to the white population as a whole. Although the current wave of Jewish emigration from South Africa is historically unique in that it is not motivated by persecution in the home country, the South African Jewish population has declined from 120 000 at its peak in the early 1970’s to 75 000 currently, a decrease of almost 37% (Frankental, 1992; van Rooyen, 2000).

Literature on the phenomenon of the professional exodus from South Africa has focused predominantly on its economic effects and on the losses in the health and technology sectors

(Nevin, 2003; Chambon, 1996; Jenish, 1994; McDonald & Crush; 2002). Literature about the social and psychological effects of this migration, such that exists, focuses predominantly on the adjustment of immigrants to their new host country (Berry, 2001; van Rooyen, 2000). On exploring the literature it becomes apparent that studies of the social and psychological impact of emigration on those remaining behind are markedly missing.

Emigration is not an easy decision and entails a comprehensive disruption including a loss of identity, personal and financial sacrifices and, most relevant to this study, the emotional impact of separating families (van Rooyen, 2000). Personality characteristics of those wanting to emigrate tend to be higher in work centrality as well as achievement and power motivation, arguably described as 'youth' oriented characteristics. Characteristics of those not wanting to emigrate tend to be higher in family centrality and affiliation motivation, arguably more descriptive of characteristics of 'later life'. Skilled workers who are emigrating tend to be below 55 and they are emigrating with their children but often without their elderly parents (Berry, 2001).



There are many deterrents for Senior Citizens wanting to emigrate along with their children and grandchildren. To begin with, some countries, such as the USA, restrict the social welfare eligibility of elderly immigrants, thus requiring their sponsors to assure support of their immigrants (Angel, Angel, Lee & Markides, 1999). Immigration is highly stressful and has been found to have a negative impact on the health of Senior Citizens (Carmel, 2001) thereby making them more dependent on their sponsors (usually their family). The older a person is, the more difficult it is to adapt to a new environment, make new friends and find work (van Rooyen, 2000). Whereas senior immigrants have to leave behind their established social and institutional connections in which part of their self-esteem and social worth were grounded, younger adults and children are active in their new environment and can learn the language and skills of the new culture on entering school or the workplace. In addition, the location of new sources of expertise and influence may undermine the authority and status seniors may previously have had in the family. Losing their long-established

social connections along with their diminished relevance within the family endangers the elder's ability to achieve a new balance (Kennedy & Tropper, 2000). In addition, many Senior Citizens have experienced previous displacement and loss during World War II or other national conflicts and migration may evoke painful memories (Berry, 2001; Kennedy & Tropper, 2000). These and other deterrents result in many Senior Citizens remaining behind after their families have left for other countries. Essentially, it appears that when all circumstances are equivalent, the greater a person's age, the less likely he or she is to migrate. (Godfrey & Kalache, 1989).

In the Jewish community, the emigration of families has left many Senior Citizens without family support (Christianson, 1997). A small study found that most participants in a sample of Jewish Senior Citizens in Sea Point, an area of Cape Town with a high concentration of elderly Jews, reported living alone and three out of 25 Senior Citizens (13%) stated they had no family living in the same city (Aviram, 2003). The needs arising from this phenomenon are suggested by the existence of a support group for Jewish Senior Citizens whose families have emigrated (Jewish Chronicle, March 2004).



Family relationships have been found to be very important to the quality of life of Senior Citizens. In most societies, intergenerational relationships are considered most important for elder care. Children are expected to take care of their ageing parents and family is often reported to be the most important source of support for Senior Citizens in times of need (Adam, 2000; Aviram, 2003; Moller, 1994). Migration of the family without them can clearly impact negatively on family care for Senior Citizens (Keasberry, 2001).

Most of the existing literature on the effects of migration on Senior Citizens has focused on its effects on the care of elderly and its impact on society (Cole, 2001; Keasberry, 2001). Studies have tended to be 'about' Senior Citizens, what the impact of their being left behind will be on the economy, on the social support services etc. The UN even writes of the need for a "solution" to population decline because of fears that there will not be enough people of working age to support

the elderly (Grant, 2001). It becomes clear that there is a definite need to establish how Senior Citizens themselves view their families' migration and how it affects them both socially and psychologically. In light of the hypothesised continuing and increasing emigration from South Africa, it becomes necessary to explore the perspectives of those people who have remained behind on this emigration.

In answer to this need, this study uses an explicitly phenomenological approach. Phenomenology, as both a philosophy and a methodology, seeks to understand social phenomena from the actor's own perspectives and to describe the world as it is experienced by the participants (Giorgi, 1997). It provides an means to gain an in-depth qualitative perspective of what it is like for the Senior Citizens themselves to remain behind after their families have emigrated.

The phenomenon of Senior Citizens remaining behind after families emigrate is, of course, not limited to the Jewish community but while working with Senior Citizens in this community, I was struck by how extensively Jewish Senior Citizens are affected by this trend. In addition, the preference of the majority in this community to live alone suggests a greater need for networks of support. In Judaism, as in many religions, children's obligation to elderly parents and their care, including provision of material, practical and financial assistance, is a very important religious and moral commandment (Iecovich & Lankri, 2002). Since the Jewish religion emphasises the importance of family, the emigration of children without their elderly parents may be perceived as a new and disturbing phenomenon, heralding the collapse of the traditional Jewish family structure. However, this perception is not entirely accurate as Jewish history is replete with accounts of international mass migrations. In fact, many of the Jewish Senior Citizens are themselves immigrants or the children of immigrants. In previous migrations, young men would emigrate first to establish themselves and then send for their wives and children. Only those who were financially able would also bring their parents, so elderly parents remaining behind after children emigrate is

not a new occurrence in the Jewish experience (Elazar & Weinfeld, 2000; Frankental, 1992; Kraemer, 1989; Rosenthal, 1970; Saron, 1955).

Literature suggests that residential proximity is the strongest predictor of interaction between family members, both in general and in the context of elder care (Joseph, 1998). The increasing scale of migration results in a scarcity of nearby children available to provide assistance to aging parents. As Jewish Senior Citizens traditionally have expectations of family care in later years and mostly report turning to family in times of need (Aviram, 2003), the question arises on whom Senior Citizens will rely once their families have emigrated. This study offers a small window onto the experiences and subsequently the needs of a sample of Jewish Senior Citizens who find themselves in their late years requiring alternatives to family support. It focuses on how these experiences and needs are felt in the daily life of these Senior Citizens in terms of social, practical, emotional and spiritual support.



1.2. The Current Research as a Response to the Literature

A number of authors have commented on gaps in gerontological literature and this research attempts to respond to various calls in the literature and intends to contribute to a few overlapping research areas. For instance Coles (2001, p. 401) calls for more research on how migration affects the sending countries as well as giving more importance to the perspective and voices of those who remain rather than as “just the residue that the adventurous migrant leaves behind”. In the area of attitudes regarding filial obligations, studies have focused on the perspective of the younger generation while attitudes and beliefs from the perspective of the elderly themselves have rarely been examined (Iecovich & Lankri, 2002). Bury and Holme (1990) call for more subjective aspects of experience to be taken into account in assessing the quality of life of the very old (over 75 years). Zunzunegui, *et al.* (2004) highlight a lack of research on the impact of child and extended family support on the self-reported health and well-being of Senior Citizens. Joseph (1998) calls for more

active engagement with the spatiality of care-giving to Senior Citizens as he claims the spatiality of informal care for Senior Citizens has not been explored as thoroughly as that of formal service provision. Finally, Cruikshank (2003) suggests that future research should emphasise older women's individuality rather than focusing on family roles and dependency. She also suggests that future work needs to broaden the meaning of 'family'.

1.3. Overview of the Paper

This thesis is further divided into four chapters namely; Literature Review, Methodology, Results and Discussion and Conclusion. Chapter 2, the Literature Review, provides an overview of research that has been conducted on the experiences of elderly non-migrant kin and on issues surrounding support. Chapter 3, the Methodology chapter discusses Phenomenology, both the underlying philosophy and the practical uses and method of analysis. In addition it provides demographics of the participants and details the procedures and difficulties of finding participants and gathering the data. Chapter 4, the Results and Discussion Chapter, presents the essential structures of the phenomenon and the themes arising from the data in tabular form. Following this the chapter provides an examination of the emergent themes and relates these to results of other research. This chapter also discusses a model of the hierarchy of needs within perceived Ideal Support that emerged from the data. Finally the Chapter 6, the Conclusion, provides an overview of the study and its findings along with a brief discussion of the implications of these findings and suggestions for future research.

Chapter 2

2. Literature Review

Scant research appears to have been carried out on the effects of family emigration on Senior Citizens who remain behind. Consequently this literature review incorporates a range of topics that were initially assumed by the researcher to be related to experiences of support of elderly non-migrant kin. Literature around additional unexpected themes that arose from the analysis of the data is briefly included in Chapter 4's discussion of the results. Furthermore, as surrounding topics are so vast, this review is intended to give a brief essential overview of current literature in each area rather than to be exhaustive of each category.

2.1. Research on Elderly Non-Migrant Kin and Support

Just five studies directly relating to the research topic were found (Coles, 2001; Ching Ying Ng, Phillips, & Keng-mun Lee, 2002; Gomila Grau, 2002; Joseph, 1998; Keasberry, 2001). Each begins with the premise that most societies view intergenerational relationships as most important for elder care. They hypothesise that societal changes, such as industrialisation, urbanisation and migration, impact on filial¹ relationships and they therefore question or explore the effects of changes in these relationships on living and care arrangements of Senior Citizens.

Two quantitative explorations of such changes in a rural area in Indonesia (Keasberry, 2001) and in three Mediterranean countries (Gomila Grau, 2002) hypothesised that, especially in rural areas, the abovementioned social changes may have a negative effect on care for Senior Citizens. It was however found in both studies that the extent of the assistance which elderly received from their children was not diminished, rather the way in which this assistance was provided altered. Both studies also found that most Senior Citizens were still either living with family or had at least one child living nearby and therefore still had a potential care provider in their immediate vicinity. The

¹ Filial responsibility is defined as a societal attitude towards the duty of adult children to meet the needs of their aging parents

exception to this was the finding that the majority of women, especially if widowed and/or aged over 75 years, did not have this type of family support. Despite the unexpectedly maintained levels of support, the overall situation was concluded, in both studies, to be problematic.

A qualitative study conducted by Coles (2001) and set in a rural area of Turkey, explores narratives of older non-migrant kin affected by mass migration of their children to urban areas or overseas and focuses on how these Senior Citizens “manoeuvre through this minefield of changes” (Cole, 2001 p. 385). These Senior Citizens described finding themselves having to adapt their daily lives, values and expectations to the loss of essential emotional support, status, role certainty, and labour of younger family members. The participants expressed both pride in their children's achievements and simultaneous disappointment at their children's lack of fulfilment of their, sometimes idealised, filial duties. The participants indicated understanding of their children's needs to leave and expressed a lack of desire to join the children. However they articulated a resultant fear of the years that they had once looked forward to, especially with regards to their future economic and medical well-being. This rural study distressingly found that in the absence of children there appeared to be no alternative sources of care and support for these Senior Citizens. Such findings may differ from Senior Citizens living alone in urban areas who can avail of an extensive network of potential helpers including family, friends, neighbours, religious groups, social clubs, service agencies, visiting nurses and home aids.

A study by Ching Ying Ng, Phillips, & Keng-mun Lee (2002) explores changes in traditional roles of the family and especially children's duty of care for parents in a rapidly modernizing society in Hong Kong focussing on the differences in care related to geographical distance of children and parents. This study found that geographical proximity to adult children resulted in more informal support for older people, especially areas of daily care, psychological, financial, and informal support. The help-seeking behaviour of older persons was found to be strongly influenced by geographical distance as well as the closeness of relationship. Lack of emotional support, rather

than other types of support, was reported to be most keenly felt and there was a general expression of a wish for more psychological security and emotional support in the form of care and companionship. Financial assistance from children was found to emphasise a "reversed power relationship" that arises with changes in the dependency role. This support was found to be sometimes used by adult children as compensation for inadequate informal support and care and also found to be a show of respect and piety to their elderly parents. Ching Ying Ng, *et al.* (2002) suggest these findings be considered in informing social policy in order not to take this dubious source of support for granted nor place a potentially unendurable strain on family members, especially smaller families and those affected by family splits from migration and divorce.

A study conducted by Joseph (1998) exploring the role of proximity in determining the extent and nature of working adult children's involvement in elder parent care also found that distance has a distinct effect on the amount and frequency of assistance provided by them to their elderly relatives. It was found that proximate children of dependent parents were more aware of parent's vulnerability and more frequently called upon to assist in tasks involving extensive time and energy commitments than their distant siblings. Distance was found to limit both awareness of physical or mental deterioration and frequency and types of assistance. Distant siblings' involvement was found more likely to be crisis-driven, financial or offering emotional support to their siblings or elderly parents. Distant children, especially women, were found to question the sufficiency of their involvement and in some instances distant caregivers were willing to take on vast commitments, including extensive travel, to meet the care needs of their elderly relatives. On the whole women were found to be more apt to travel farther, more often, to provide assistance

Lastly, a closely-related study by Ferguson (2004) on the wants and needs of active Jewish Senior Citizens in Cape Town, focused on common challenges in this life stage and the resources Senior Citizens utilise in striving to meet these challenges. Ferguson found that her participants adapted to changes and challenges, such as; physical decline, mental decline, loss of support systems resulting

from deaths of spouses, relatives and friends, the limiting impact of lack of transport and fear of crime, by seeking opportunities to find new social, psychological and human resources. The participants in this study expressed desire for mutual rather than one-sided role fulfilment in family and service providers which would thereby give the experience of autonomy. Ferguson (2004) recommends that focus should shift from serving Senior Citizens to maintaining and encouraging their abilities and competence, by involving them in decision making and planning of activities affecting them, thereby acknowledging that Senior Citizens can design and manage their own well-being.

2.2. Support

The presence of social support² has long been acknowledged as being crucial to a person's physical and psychological health and well-being (Adams & Blieszner, 1995; Aviram, 2003; Ferguson, 2004; Hogan, Linden & Najarian, 2002; O'Connor, Cobb & O'Connor, 2003; Swickert, Rosentreter, Hittner, & Mushrush, 2002). Scales used by Curtis, Groarke, Coughlan and Gsel (2005) to measure social support define it as including aspects of emotional, affectionate, informational, tangible and structural support as well as positive social interaction. The Interpersonal Support Evaluation List (ISEL) used by Swickert, *et al.* (2002), also yields an overall support measure and includes an Appraisal subscale (the perceived availability of someone to talk to about one's problems), a Belonging subscale (the perceived availability of people to do things with), the Self-esteem subscale (the perceived availability of a positive comparison when comparing oneself to others) and the Tangible subscale (the perceived availability of someone to provide material aid). An exploration of the relationship between social networks and health of Senior Citizens by Zunzunegui, *et al.* (2004), considers factors such as environmental conditions, access to material resources and individual

² 'Social support' is frequently used as an all-inclusive term in the literature on support and ageing. It tends to include a wide variety of facets of support, for instance; informal supports such as family and friends as well as formal support structures such as senior's clubs and assistance programmes. While social support is acknowledged in this section as a general term, this study later differentiates this term from emotional, spiritual and practical support to more specifically mean people, places and activities that are experienced by Senior Citizens as expressly providing support to feel busy, active and useful.

health behavioural, psychological and physiological pathways. Other relevant concepts explored in literature on support are social engagement (community involvement), social networks (number of ties, closeness, roles of relationships, frequency of contact, reciprocity) and social support (Litwin, 1995). Networks were found to provide support depending on their structural characteristics and the nature of relationships. However, social interaction patterns have been found to vary according to culture, gender and context and may therefore influence health status differently, as has been found in the case of Senior Citizens.

The stress-reducing and health-protective potential of assistance by others has limitations as social network interactions are a potential source of both stress and support (Rappaport & Seidman, 2000). Revenson, Schiaffino, Majerovitz and Gibofsky's (1991) study on individuals coping with a chronic illness found that receiving positive or helpful support from close friends and family was related to lower depression whereas receiving problematic support was related to increased depression. While the costs of problematic support were not found to cancel out the benefits of positive support, those with little support as well as more problematic interactions experienced the highest level of symptoms. Other studies found that support is not always an effective coping resource and that, for some people, support beyond a certain level may actually intensify the harmful impact of stress (Krause, 1995; Swickert, *et al.*, 2002).

2.3. Perception of Support

Perception of social support has been defined by The Social Provision Scale, used by Couture, Larivière and Lefrançois (2005), as comprising six provisions gained from relationships with others; attachment, reliable alliance, guidance, social integration, reassurance of worth and opportunity for nurturance. Perceived support has been repeatedly found to lessen distress, influence shifts in personality, promote psychological well-being, increase effective coping skills and have a buffering effect on somatic complaints (Bal, *et al.*, 2003; Branje, van Lieshout & van

Aken, 2003; Couture, *et al*, 2005; Feldman, Downey & Schaffer-Neitz, 1999; Norris & Kaniasty, 1996; Wallenius, 1999; Yuh-Huey & Hiromi, 1997; Yuh-Huey & Hiromi, 2002). In organisational studies perceived support was found to be the best predictor of organizational commitment, job satisfaction and team performance (Howes, *et al.*, 2000). Perceived support, in particular 'belonging' support, in times of stress may be even more beneficial than enacted or structural support (Swickert, *et al.*, 2002). Consequently, a lack of perceived support has been found to be associated with psychological distress in Senior Citizens, manifesting in depression, anxiety, anger, cognitive problems and somatisation (Couture, *et al*, 2005).

2.4. Support and Family

What is striking in the literature on care and support in old age is the assumption that there is available family to care for the aged. Previously studies on all aspects of care for Senior Citizens appear to take it for granted that family is there to provide help (Barer, 2001; Frazier & Douyon, 1989; Holroyd, 2001; Hugman, 1994; Tennstedt, 1997). Until very recently the literature only occasionally and briefly acknowledged the possibility that families may be distant or may struggle to provide effective support. However the more recent trend is to acknowledge and explore the impact of global migration, split families, smaller families, population ageing, etc. on care for Senior Citizens. While many Senior Citizens do have family nearby these factors call into question families' willingness and availability to provide care and support for the elderly. In South Africa, as in other societies, the additional issue of emigration suggests that in future many more elders will be without children to care for them. Although faraway families often try to remain involved and provide care as best they can, the support they are able to provide is essentially limited (Ching Ying Ng, *et al*, 2002; Cruikshank, 2003; De Jong Gierveld, 2003; Gomila Grau, 2002; Joseph & Hallman, 1998).

Most of the abovementioned studies report that most Senior Citizens are entrenched in a longstanding network of people who are very important to them and who provide economic aid,

help with tasks, personal and health care, and companionship. It has been repeatedly found that the most frequent and important social bonds for Senior Citizens are those of children, partners, siblings and extended family. In addition, family is repeatedly reported to be the first line of help approached, then other types and finally friends (Aviram, 2003; Bubolz, 2001; De Jong Gierveld, 2003; Hugman, 1994; Tennstedt, 1997; Tomassini, Glaser & Askham, 2003).

While rural elderly tend to have higher expectations than urban-reared elderly in terms of intergenerational relations and filial responsibility (Coles, 2001), urban studies still report that contact with one's children has the strongest impact on the social well being of Senior Citizens and loneliness was found to be higher for Senior Citizens who have no weekly contacts with their children or contact with only one of their children (De Jong Gierveld, 2003). However research has also found that in different countries children's support has dissimilar effects on the morale and mental health of their Senior Citizen parents. While studies in North America and Western Europe indicate that support from children has no effect or a negative effect, studies with minority and poor white populations in the United States, found that support from children has a beneficial effect on the psychological well-being and self-reported health of older parents (see Zunzunegui, *et al.*, 2004 for review). A small cross-cultural study in South Africa replicates these discrepant findings (Aviram, 2003). It is hypothesised that a decline in self-esteem associated with loss of autonomy and physical and/or economic dependence may account for such reported negative effects (Zunzunegui, *et al.*, 2004). One study concludes that the psychological benefits of intergenerational social support are contingent on the vulnerability of the older parent, when expectations for assistance are at their greatest (Silverstein & Bengtson, 1994). Parents were found to adjust their global expectations about receiving care, including financial support, to reflect social norms and the specific realities of their children's lives (Iecovich & Lankri, 2002; Peek, Coward, Peek & Lee, 1998). A study with Israeli Jewish Senior Citizens found that, depending on the needs of the elderly parent and the ability of the adult child, there is an expectation that children provide financial

assistance. However, poor economic status of the child or quality of relationships mean parents may feel uncomfortable receiving financial assistance from their children (Iecovich & Lankri, 2002).

2.5. Support and Society

“...it could be assumed that the distance-sensitive behaviours so characteristic of the use of formal health care and social services would also be exhibited in the types and frequency of assistance provided by family members to their elderly relatives. In addition, the existence of distance barriers to the effective delivery of family assistance raises concerns about the welfare of elders needing assistance that are obviously similar to those stemming from limited or difficult access to formal services.” (Joseph, 1998 p. 246)

Literature on care and support of Senior Citizens focuses on informal versus formal support.

Informal care systems include any family, friends and neighbours that form a system of caring for the aged in times of need. Generally Senior Citizens first approach the informal care systems when needing assistance of any kind and the formal sector tends to be there to fill in the gaps (Aviram, 2003; Hugman, 1994; Tennstedt, 1997). Formal care includes community groups, organisations and professionals delivering care to the elderly. It is often criticised for being inadequate and inflexible and research of different countries, including Sub-Saharan Africa and South Africa, claim their formal care systems are not equipped to support well and leave much to be desired (Conradie, 1999; Darkwa & Mazibuko, 2002; du Toit, 1994; Estes, Swan & Associates, 1993; Hugman, 1994; Moller, 1994; Sagner, 2000). Senior Citizens living alone as well as those with small support networks and little affective support report using more formal services to remain independent but report less confidence in the availability of others to call in an emergency or to support them if they get sick (Auslander, Gail, Litwin & Howard, 1990; Coles, 2001; Magaziner & Cadigan, 1989; Tennstedt, 1997). Jewish Senior Citizens have been found to use formal services more than other subgroups (Markides & Mindel, 1987).

Although loss of family roles and support systems may impose some limitations on Senior Citizens' lives, many active seniors choose to seek out new and meaningful roles through new social interests and activities (Ferguson, 2004). Bubolz (2001) argues that the family is a critical source of support

but must be seen as a system in a network of mutually interdependent systems. With concerns over the ageing population, societies today are looking to the idea of informal care of Senior Citizens to create social policies that will be both effective and financially viable (Hugman, 1994; Tinker, 2001; Wallack, 1997). Most arguments suggesting increased informal care as a social policy however, again rest on the notion that there are people to care for the Senior Citizens at home, usually a female relative (Estes, Swan & Associates, 1993; Joseph, 1998). Community care must fulfil needs of socialisation, activities of daily living and personal assistance in times of crisis (Bubolz, 2001; Ferguson, 2004; Swickert, *et al.*, 2002). One survey of long-term care facilities also found that respect was a key determining factor for quality of life of elderly residents (Sung, 2004).

2.6. Friends

“Gratitude for old friends must be one of the deepest pleasures of old age” (Cruikshank, 2003, p. 80)

Families, even when present, cannot meet all needs. Other personal relationships are a source of pleasure and companionship and can buffer stress. Strong friendship relationships in old age are important and can provide significant social and emotional support due to shared experiences and have significant positive impact on well-being, even more so in the absence of family (Blieszner, 2001; Greenberg, Motenko, Roesch & Embleton, 1999; Kendig & Brook, 1997). The presence of a good friend has been found to alleviate loneliness (O’Leary, 1996). Findings on the importance of friends over family have been mixed. Several studies found relationships with friends to be more predictive of life satisfaction in elderly than relationships with kin (see Adams & Blieszner, 1995 for review). In addition, contact with neighbours and friends was also found to have more impact on the morale of the elderly than contact with children (O’Connor, 1995). Other studies found relationships with children reported as more fulfilling than those with friends and children were relied on more than friends for all types of support (eg. Adams & Blieszner, 1995). Friends may be better equipped than family and chosen first to provide quality support in certain circumstances, especially related specifically to life stage experiences, however in the event of chronic and

significant needs friends are not preferred to family (De Jong Gierveld, 2003). It appears therefore that, both friends and relatives are important sources of support and contribute greatly to older adults' psychological well-being.

To age well, Senior Citizens need to develop and actively shape relationships with people who help them in ways they need and want to be helped. It has been found that, at times, feeling dependent may be worse for one's subjective reaction to aging than receiving no help (Antonucci & Akiyama, 1997; Bubolz, 2001; Ferguson, 2004). Peer care seems to be an invaluable way that Senior Citizens have developed to both construct and manage care. Senior Citizens whose children live far away often develop mutual help relationships with their peers and in one study in Massachusetts at least 10% of elders reported receiving primary help from their friends and neighbours (Adams & Blieszner, 1995; Blieszner, 2001; Greenberg, Motenko, Roesch & Embleton, 1999; Tennstedt, 1997).



2.7. Coping

Coping is increasingly recognized as an important variable in understanding adjustment to chronic stressful situations (eg. illness). Risk factors for poor adjustment have been identified to be disease/disability restrictions, functional dependence and psychosocial stressors, while resistance factors included intrapersonal factors (e.g. temperament, problem solving ability), social-ecological factors (e.g. family environment, family members' adaptation, social support), and stress processing factors (cognitive appraisal and coping strategies) (Meijer, *et al.*, 2002; Schwartz & Daltroy, 1999). The use of avoidant strategies or depressive coping behaviours (such as escape/avoidance, denial, depression or behavioural disengagement) is associated with increased psychological distress and may be a risk factor for adverse responses to stressful events. Active coping strategies, such as problem solving when confronted with a stressful situation (eg. making decisions, seeking social support, and talking about problems with friends/family) predicts better adjustment (Brissette, Scheier & Carver, 2002; Couture, *et al.*, 2005; Curtis, Groarke, Coughlan & Gsel, 2005). Another

effective coping mechanism explored in the literature is religious belief, which can endow difficult events with value and regulate negative emotions when no active coping strategy seems possible (Carone & Barone, 2001). Bal, *et al.* (2003) found that in adolescents who experienced a stressful event, social support did not moderate the relation between a stressful event and coping but high support from the family was associated with less avoidance coping and more support-seeking behaviour. In addition to coping strategies, the appraisal of stress also impacts on adjustment. Research suggests that persons with an internal locus of control (expectations of control over one's environment) are better adjusted than persons with an external locus of control (Meijer, *et al.*, 2002). It is therefore unsurprising that Senior Citizens who are more functionally dependent, who perceive less social support and who use escape or avoidance to cope with their diminished level of functioning were found to be in more psychological distress (Couture, *et al.*, 2005).

2.8. Aloneness



Emigration of families shifts the roles and expectations of Senior Citizens and this may be seen in a positive or a negative light. One viewpoint is that of the 'nuclear hardship hypothesis' (in Neven, 2003), which claims that in nuclear family societies, people not living in standard domestic groups (parent or couple with or without children) are in a difficult and insecure position. If these "marginal" people become unable to take care of themselves, they become dependent on mutual aid societies or on charity. Senior Citizens are therefore especially susceptible, as the loss of a spouse can isolate them, if they do not live with a child. According to the 'nuclear hardship hypothesis' when children move far away, the connections with their parents are broken and parents are left to finish their lives in "empty nests" (Neven, 2003, p. 269).

In contrast, other viewpoints suggest that being left alone is not necessarily a negative thing (Cruikshanks, 2003; MacGregor, 2003). In fact it has even been suggested that family becomes so important in later life mostly by default due to losses of social opportunities following retirement and deaths of siblings and friends (Qureshi & Walker, 1989). The 'disengagement theory' (in

Schuurmans-Stekhoven, 1992) states that while Senior Citizens may withdraw from active social life, well-being in later age is often the result of passive adjustments, such as reducing aspirations and expectations rather than continuing at previous levels of attainment. This is supported in a number of other writings (eg. De Jong Gierveld, 2003; O’Leary, 1996). The integrated disengaged Senior Citizen shows a somewhat “low level of activity and withdrawal into a contented and self-contained life”. However ineffective disengaged Senior Citizens are described as being, "angry seniors who are not well adjusted, openly and often aggressively bitter, fearful of death, easily frustrated and who blame others for their failures" (Schuurmans-Stekhoven, 1992, p. 99).

Women have been found to have a larger social buffer protecting them from loneliness than men but the contribution of minimum weekly contacts with other close and less close network members is important for social well being and alleviation of loneliness when living alone (De Jong Gierveld, 2003; O’Leary, 1996). Senior Citizens have reported that quality of contact with family is more important to them than quantity therefore the type of family relationships (close, on good terms but not close or distant) makes a difference to the type of support expected and given (Ching Ying Ng, *et al*, 2002; Cole, 2001; Keasberry, 2001; MacGregor, 2003; O’Leary, 1996; Qureshi & Walker, 1989). These expectations of support may impact greatly on how a Senior Citizen responds to the emigration of their family.

Finally, silence may be lonely and depressing but it may also be welcome. Family can be demanding emotionally, financially and practically and many older people feel pressured into busyness in order to feel useful. However old age has often been described as a time of quietness and exploration of self, a time to reminisce and ponder. “In solitude we are intimate with ourselves in a way that enhances our intimacy with other people” (O’Leary. 1996, p. 71). It is possible, that the emigration of the family may herald not only a time of loss, pain and loneliness for a Senior

Citizen but also an opportunity for quiet, peace, personal development and spirituality as a part of successful ageing (Crowther *et al.*, 2002; Cruikshank, 2003; MacGregor, 2002).

2.9. Fortitudinous Perspective

Funding and research grants are awarded to problem-focused research, therefore gerontological studies tend to emphasise problem aspects of aging. This medical model focus on aging as losses in health and abilities has been strongly criticised for overlooking the notion that in order to evaluate and better design interventions, information is needed about both well-being and distress. Social and physical problems such as illness, poverty, loneliness, inadequate support services and institutionalisation are reported to increase with age but there are contrasting findings as to whether living alone intensifies the social and physical problems typically associated with ageing. The majority of Senior Citizens live in the community independently and happily and experience none of the abovementioned social problems assumed to be a part of ageing (Atchley, 1997; Cruikshank, 2003; Hooyman, 1997; MacGregor, 2002; Rappaport & Seidman, 2000; White & Groves, 1997).



Society often underrates the resources of Senior Citizens thereby positioning them as fragile or dependent, regardless of the resources they actually have. Gerontology tends to depict Senior Citizens as “cases” to be “managed” and the level of negativity of terminology used in discussion of Senior Citizens has been shown to have a clear influence on their physical and psychological functioning and well being (Atchley, 1997, p. 187; Hausdorff, 1999). However self reports of elderly, including disabled elderly, present a much more positive picture than one would expect on reading clinical literature. Senior Citizens are “faced with a challenging life stage that, contrary to common belief, can be a time of growth and adaptation rather than complacency and dependency.” (Ferguson, 2004, p. 13) While functions may decline with age, so do social expectations.

Consequently despite research linking inactivity with poorer physical and emotional health, one cannot assume that less active seniors are not experiencing their own sense of well-being. In

addition, facing difficult things, including loss, has some positive consequences such as gaining strength and learning new skills (Miller & Harvey, 2001). Recent research shows that people's basic motivations change across their life span so negative changes do not necessarily have negative consequences. Cognitive 'deterioration' experienced in advancing years is compensated for by an increasing tendency toward an emotionally fulfilling life through relationships with others. Such relationships also provide a basis for social and emotional support (MacGregor, 2003; O'Leary, 1996; Schuurmans-Stekhoven, 1992).

Many seniors are frustrated or threatened by dependency and work to find roles and activities to maintain equal and mutually fulfilling relationships (Ferguson, 2004). A growing body of literature on later life recognises the importance of Senior Citizens' continued growth and development for optimal ageing and places increasing significance on the fit between the individual and their social context (Ferguson, 2004; MacGregor, 2003). This fortitudinous approach recommends building people's resilience and protective factors. "...successful interdependent relationships (with family, friends, neighbours and the community) tend to respect and reinforce independence as a cherished component of an older person's self-image. The ideal image of the aged should be of healthy independence, supported by family, friends and community - in essence, interdependence" (White & Groves, 1997, p. 85). A downside to such celebrated independence is that success in aging is understood to mean imposing minimum demands on social resources or on the lives of younger people, such as family members (MacGregor, 2003). In reality, in the event of illness or disability, it is the availability of community and social supports along with the person's ability to mobilise them that appears to make the difference between independent living and institutionalisation (Atchley, 1997; Cruikshank, 2003; Hooyman, 1997; MacGregor, 2002; White & Groves, 1997).

Chapter 3.

3. Methodology

“Phenomenology does not yield new information in the way that science pushes back the frontiers of knowledge. Its task is less to give us new ideas than it is to make explicit those ideas, assumptions, implicit pre-suppositions upon which we already behave and experience life. Its task is to reveal to us exactly what we already know, and that we know it, so that man can be less puzzled about himself. Were it to tell us something we did not know, it would not be telling us anything about ourselves, and hence it would not be important” (Keen in Ashworth, 1976, p. 363)

The term Phenomenology refers to both an epistemology and a methodology. “...in its most comprehensive sense [phenomenology] ... refers to the totality of lived experiences that belong to a single person” (Giorgi, 1997, p.236). The point of departure in the phenomenological approach is the *Lebenswelt*, the Life World, “the world as it is encountered in everyday life, given in direct and immediate experience, independent of and prior to explanations” (Kvale, 1996, p. 54). Both as a philosophical approach to understanding the world and as a way of gathering information about it, its objective is to understand social phenomena from the actors’ own perspectives and to describe the world as experienced by the subjects. In other words, it is a study of consciousness (Cresswell, 1998; Giorgi, 1997; Giorgi & Giorgi, 2003; Huysamen, 2001; Kvale, 1996; Lemon & Taylor, 1997; Schwandt, 1998). As a qualitative research methodology it is especially valuable as a starting point for further exploration because, unlike some other methodologies that aim to prove hypotheses or test theories, phenomenology is discovery oriented. It aspires to gain a detailed understanding of people’s experiences and essential meaning-making without attempting to ascertain the empirical validity of these experiences or interpretations. For this reason it was used as the theoretical paradigm informing the data gathering and analysis methods of this study which aims to explore Senior Citizens experiences and their essential psychological understandings of these experiences.

3. 1. Phenomenology as Philosophy

Husserl, a philosopher, is the oft-cited father of the current phenomenology movement in psychology. Husserl was interested in finding true knowledge and was concerned with empirical

science's methods of researching consciousness. He highlighted mathematics, consciousness and other essences as being different to 'the natural' and felt that this distinction was ignored by naturalism (natural science) as well as by the empirical psychology of the time. He felt it was necessary to elucidate the essences of the 'universal' concepts psychologists were using and he criticised naturalism for overlooking the fact that theirs is only one perspective on reality. Consequently he created the new method of phenomenology intended to clarify our implicit understandings of the world and to study conscious phenomena in a scrupulously scientific way whilst avoiding the mistake of naturalising consciousness. For Husserl, the defining trait of consciousness is that it presents all objects to us. Consciousness is therefore impossible to sidestep because, whether recognised or not, it is the means of accessing everything that is brought to awareness. In developing phenomenology, Husserl was attempting to raise the psychology of consciousness to science suggesting that, when seeking knowledge, it is more rigorous to recognize and consider the role of consciousness than not doing so (Giorgi, 1997; Jennings, 1986).



The relational aspect between subject and object is highlighted in the phenomenological aspiration to understand subjects and objects holistically rather than as two autonomous entities that at some point connect. Within this concept is the notion of 'intentionality of consciousness', which is that an act of consciousness is always directed to an object that transcends it. In other words, consciousness is always *of* something. Hence the existence of an object implies the existence of a subject in relation to it. In Husserl's "paradox of human subjectivity" the individual is viewed as having no existence apart from the world and the world as having no existence apart from the individual; therefore each individual and his or her world are said to co-constitute each other (Jennings, 1986, p.1236). An example of this would be the way a person's life-world is impacted on by the findings of science and vice versa. From this perspective consciousness has "ontological priority" as all types of reality are composed by consciousness (Jennings, 1986, p.1236). This may suggest that using the individual's life-world as a source of certainty and 'true knowledge' is problematic.

However in phenomenology it is acknowledged that the objects or states of affairs described by individuals are presences, not realities. So, for instance, it is not said that something is a certain way but rather that something presented itself to the subject in a certain way. Objects or states of affairs are taken to be exactly as they present themselves to be, but no claim is made that they actually are the way they present themselves to be (Ashworth, 1996; Giorgi, 1997; Giorgi & Giorgi, 2003; Huysamen, 2001).

Phenomenology has at times been associated with existentialism as, like phenomenology, existentialism employs a descriptive starting point. However, the locus of interest to existentialism is the nature of existence, whereas phenomenology focuses on the detailed description of phenomena as they appear in consciousness, suspending concern over whether the phenomena of consciousness have any 'real' or 'objective' existence (Ashworth, 1976, p. 364). The assumption is that the important reality is what people perceive it to be.



Husserl's development of phenomenology was an attempt to approach consciousness in a way that offered a valid alternative to psychology's experimental approach. However in order to be able to truly approach another individual's phenomena, phenomenological reduction needs to take place (Ashworth, 1996; Giorgi, 1997; Giorgi & Giorgi, 2003; Huysamen, 2001; Jennings, 1986).

3. 1. 2. Phenomenological Reduction / Epoche

"The psychologist as such in his enquiry must...take and have no position: he must neither concur nor refuse, nor remain in problematic suspense, as if he had some say in the validities of the persons who are his subjects. So long as he has not acquired this posture as a serious and consciously established one, he has not arrived at his true subject matter; as soon as he violates it, he has lost his subject matter" (Husserl in Ashworth, 1996, p. 7)

Originally Husserl taught the suspension of presuppositions, known as bracketing, epoche or the phenomenological reduction, as part of the philosophical method of transcendental phenomenological reduction which led to the specific area of interest of phenomenological

research, that of pure consciousness. Bracketing followed from the Cartesian objective of rejecting all facets of knowledge which may be open to doubt. Merleau-Ponty interpreted Husserl's later work in an existentialist way and thereby connected Husserl's transcendental philosophy with modern psychology's phenomenological focus on the life-world. This created a shift from bracketing as a turning away from the world and a focus on consciousness alone, to the notion of temporarily putting aside theories, research presuppositions and predetermined interpretations so as to bring to light the actual lived experience of an individual (Ashworth, 1996). The idea is to raise 'personal constructs' to the level of 'scientific constructs' by scrutinising them and verifying them empirically and that this suspension or bracketing of one's preconceptions allows the phenomenon to come directly into view (Kelly, 1955 in Churchill, 1990, p. 51).

Phenomenological reduction and achieving careful descriptions is easier said than done. As Merleau-Ponty points out, perspectivity is an essential element of any act of consciousness and unanticipated prejudices lie in wait everywhere, particularly in everyday life or with a "common attitude" (Churchill, 1990, p. 52). For example, language, on which we have to draw in order to describe experiences, contains many implicit biases. Nevertheless, while the assumptions will always be present, we can "learn to recognise and use our assumptions with great care" (Giorgi & Giorgi, 2003 p31; Jennings, 1986).

3. 2. Using Phenomenology in Psychological Research

"Back to the things themselves" (Ashworth, 1976, p. 52)

It is easy, when reading eminent thinkers like Husserl, to become distracted by the attempt to grasp the concepts and thereby lose sight of the process of discovery which is the foundation of research (Churchill, 1990). Phenomenological research in psychology aims to explore the subject's perspectives on their world, attempting to describe in detail the content and structure of the subject's consciousness, to grasp the qualitative diversity of individuals' experiences and to

elucidate their essential meanings. Furthermore, phenomenology attempts to get beyond immediately experienced meanings in order to articulate the pre-reflective level of lived meanings, to make the invisible visible (Ashworth, 1976; Churchill, 1990; Cresswell, 1998; Giorgi, 1997; Giorgi & Giorgi, 2003; Huysamen, 2001; Jennings, 1986; Kvale, 1996; Lemon & Taylor, 1997; Schwandt, 1998).

Phenomenology is interested in clarifying both that which appears and the manner in which it appears. As mentioned above, the attitudinal modification of ‘phenomenological reduction’, a suspension of judgement and ‘bracketing’ of common sense and scientific foreknowledge, is called for on the part of the researcher. This is in order to obtain the most precise data and give true and unprejudiced descriptions of the essence of phenomena (Cresswell, 1998; Giorgi, 1997; Giorgi & Giorgi, 2003; Kvale, 1996; Lemon & Taylor, 1997).



Using phenomenological reduction also means recognising the objects or states of affairs described as presences, not realities. The aim of the researcher is to describe, rather than to explain or analyse, and thereby remain loyal to the subject’s experience of the investigated phenomenon. Conscious experience is seen as the object for examination, not as information to be acted upon, queried or used as raw material for interpretation. In line with this, whatever presents itself is understood “precisely as it presents itself to the consciousness of the person entertaining the awareness” (Ashworth, 1976; Churchill, 1990; Giorgi, 1997, p. 238).

Subsequent to describing the person’s life world, is a shift from describing separate phenomena to searching for their common essence. An essence is the most invariant meaning for a context. “Investigating essences” of the researched phenomenon is done through a method called free imaginative variation (Giorgi, 1997; Kvale, 1996, p. 55). One varies a given phenomenon freely in its possible forms and that which remains constant through the different variations is the essence of

the phenomenon. Thus one becomes aware of those features that cannot be removed and what is essential for the object to be given to consciousness. It is the articulation of a fundamental meaning without which a phenomenon could not present itself as it is (Giorgi, 1997). In this sense phenomenological research is pre-theoretical as it allows the space for the essence to surface unhampered by expectations. However, in this study the search was for ‘scientific essences’ with respect to the perspective of the discipline of psychology. Typically the ability to experience events or react to situations surpasses the ability to realise precisely what or why we do things. Accordingly an investigation from a psychological perspective of the meanings being lived by persons can be very informative (Giorgi & Giorgi, 2003). This type of bracketing, a phenomenological psychological reduction (or scientific phenomenological reduction), brackets the world but not the empirical subject – in this case that of Senior Citizens experiences of support (Giorgi & Giorgi, 2003) (See 3.6.).



Husserl's chief philosophic objective was to restore the quest for absolute knowledge, that is, knowledge unconnected to inconsistent factors such as culture, historical era, private belief or individual experience. He attempted to do this by searching for the essences of consciousness of lived experiences. Phenomenological psychology likewise searches for the ‘pure’ psychological essences of a phenomenon. Unlike empirical psychology which deals with psychic facts, phenomenological psychology is concerned with the essential natures governing these facts. So the exact details of, for example, each subject's response to experiencing support after their children have emigrated, is less of interest to the phenomenologist than the characteristic nature of consciousness in meaning making. The act of meaning-making is an essence that transcends specific contexts and persons. Consciousness has an essential way of bestowing significance to diverse classes of events. The directedness of consciousness to this class of objects in general, the intentionality, is the study subject of phenomenology. So, for instance, the same content is not relevant in all acts of thinking of a situation without support of one's children in old age; therefore

the phenomenologist aims to analyse, identify and clarify the essential characteristics of ‘understanding support without one’s children in old age’. There are implicit and explicit assumptions in any particular act of perception of the support situation and this study aims to ascertain and explicate the “basic essential ingredients constituting such an act of consciousness” (Jennings, 1986, p.1238).

3.3. Procedures

Finding participants for a phenomenological study involves ‘criterion’ sampling, in other words, finding individuals who have experienced the investigated phenomenon (Cresswell, 1998). In this case the phenomenon is experiencing aspects of support as a Senior Citizen living in South Africa following the emigration of all one’s children. The requirements for participants were therefore to be older than 75 years, not living with a spouse, living in South Africa, and having children who have all emigrated from South Africa more than two years ago (see 3.4. below).



Interestingly, while I expected to easily find enough participants meeting the criteria, it became clear, as found in other literature (Gomila Grau, 2002; Keasberry, 2001), that most Senior Citizens have at least one child still living nearby or at least within a distance of a short flight away in South Africa. It was also found that those without any children nearby tended to live in fully catered residential institutions. The focus of this study being experiences of support, it was more beneficial to speak to Senior Citizens who lived independently in order to see what their experiences of support were like. As such, although there was an abundance of younger Senior Citizens who had only one child left nearby or in the country, finding eight participants meeting all the criteria was more difficult than expected. Eventually the participants were randomly found through contacting and posting announcements in several Jewish institutions such as synagogues, support groups, clubs as well as in a community newspaper. The results of this call for participants were Senior Citizens offering to partake in the study and other parties offering names of people to contact.

Of all the respondents only one was a man and as he was still living with his spouse he did not fit the criterion of living without family; this semi-convenience sample therefore includes no men. In addition, all but one of the participants live in Sea Point, an area of Cape Town with a high Jewish population. The other lives in a Jewish Seniors residence. Qualitative methodology's strength lies in the in-depth quality of its material therefore this small qualitative study is not aiming for true representation. However, despite the abovementioned factors and the small sample size, this sample appears to be a close to accurate reflection of the demographics of single Senior Citizens over 75 years of age in the Cape Town Jewish community, which comprises mostly women, many of whom live alone in the stated areas (Ferguson, 2004).

3.4. Participants

Women are consistently reported to have larger, more multi-faceted social networks than men, they report more friends and provide and receive more support from members of their network than men (Tomassini, Glaser & Askham, 2003). However studies have repeatedly found Senior Citizens over the age of 75, particularly widowed women, to be more in need of all aspects of support and to be more vulnerable to a lack of available support (Coles, 2001; du Toit, 1994; Faulkner & Micchelli, 1989; Gomila Grau, 2002; Hooyman, 1997; Keasberry, 2001; Neven, 2003; Schuurmans-Stekhoven, 1992; Silverstein & Angelelli, 1998). The implications of these findings are that Senior Citizens over 75 years may be less able to maintain independence and will be more aware of issues of care and support. To this end the participants in this study were all older than 75 with the ages of the eight participants ranging from 76 to 93 years. The number of participants was decided according to Cresswell's (1998) recommendation that the sample size for a phenomenological study of this level be between six to ten people.

As mentioned above, appropriate respondents to the call for participants all happened to live in the Sea Point area of Cape Town where there is an established Jewish community. One small study found that many Jewish Senior Citizens residing in Sea Point live alone (Aviram, 2003). This was true in the case of five of the eight participants who live alone in apartments. The other three participants reside in residential facilities for Senior Citizens. One of those is a self catering apartment where practical facilities such as cleaning and transport are provided on request and payment. The other two places are fully catered with meals, cleaning, transport, activities and entertainment being provided.

Four of the participants had just one son and the rest ranged from having two to four children. One of the desired criteria of participants was that the last of their children had emigrated at least two years ago. The reason for this qualification is to allow for a period of adjustment to the loss of family and establishment of alternative sources of support. As it turned out, the period of time since the participants' last child emigrated ranged from more than 30 years to 12 years ago.

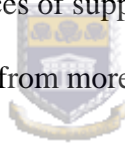


Table. 3.1 Demographics and Emigration Details

No.	Name	Age	No. Child	Time since emigr.	Country of emigr.	Reasons for emigr.	Reasons for staying in SA	Contact
1	Sheyna	77	4	1 st 22yrs 4 th 19yrs	Australia USA	Work, Politics	Insufficient finances, won't see them regularly anyway, fear of: loss of independence, lower standard of living, burdening children	Daughters phone every weekend, occasional visits to SA, sons rarely phone, Sheyna phones each monthly, financially unable to travel to visit children.
2	Vivienne	90	1	28 yrs	USA	Work	Does not like USA, lived in CT with husband until his recent death	Frequent contact via email with child and grandchild, weekly phone calls from them, twice yearly visits from child and grandchild separately, physically unable to travel to visit children
3	Chani	84	2	14yrs	UK	Work Studies Marriage	Returned to SA 14 yrs ago leaving her children in the UK where the family had emigrated 36 yrs previously.	Weekly polite phone contact with daughter, irregular contact and visits from son, infrequent visits to UK to visit children
4	Ruth	79	3	1 st 38yrs 3 rd 12yrs	UK USA	Work Lifestyle	Lived in CT with husb until his recent death, doesn't like UK, climate too cold	Reasonably regular contact when needing help or to discuss things, physically unable to travel to USA any longer, UK still able
5	Trudy	75	3	1 st 30yrs 2 nd 25yrs 1 based in CT but overseas 9mo of the yr	USA	Lifestyle Politics	Financial concerns, loves CT, doesn't like living in USA, not sure moving there would change much	Phone conversations about thrice weekly paid for by children, almost daily email contact, children send an air ticket annually for a 2 month stay with them
6	Masha	88	1	28yrs	UK	Studies Work	Financial concerns, prefers the climate in CT, feels adjusting would be hard	Annual visits or more if necessary, weekly much enjoyed phone contact, newly physically unable to travel to visit child
7	Merryl	86	1	42yrs	USA	Studies Work	Physically and financially unable	Annual visits from grandchildren and child. Weekly phone contact, physically unable to travel to visit child
8	Myk	78	1	30yrs	USA	Studies Work	Financially unable and not asked	No contact with child, painfully estranged.

Table 3.2 Supports

No.	Name	Residence	Relatives in CT and Contact	Friends	Other Social Supports	**Religion
1	Sheyna	Alone in Flat	Unsatisfying irregular contact with one distant aunt and children of distant cousins	2 reasonably close friends infrequent contact due to distance, numerous 'social' friends – doesn't talk intimately to anyone	Bridge and Kalooki, at Club and people's homes, activities at Club	Traditional, occasional shul attendance, not 'spiritual', not a source of comfort
2	Vivienne	Alone in Flat	No extended family nearby	2 very close friends – talks intimately to friend	Yoga and occasional activities at Club, daily swimming, computer lessons	Not traditional, shul member but no attendance, lifelong non-religious spirituality a strong source of support
3	Chani	Alone in Flat	Distant irregular contact with late husband's niece and third cousins	No close friends – yearns for someone to talk to intimately	Daily meditation and breathing, young woman living nearby, teaching lectures and workshops	Traditional, regular shul attendance, non-religious spiritual outlook on life a strong source of support
4	Ruth	Alone in Flat	No contact with 2 nearby cousins, occasional distant contact with 1 cousin, husband's distant family and children's in-laws	1 close friend – talk intimately infrequent contact due to distance, 1 reasonably close friend more frequent contact - less intimate, many lost due to illness and death	Daily meditation, playing and teaching bridge, University of Third Age, no longer involved in volunteering at Club	Traditional but not 'religious', regular attendance of shul, blessings and lessons for social and practical not spiritual support
5	Trudy	Alone in Flat	Daughter based in CT but travels extensively and contact 1 monthly at best, irregular contact w/ adult grandchildren, no one else in CT	Some 'social' friends – doesn't talk intimately to anyone	Walking, swimming daily, competitive bridge, bowls, talks at Club, adult education at university	Not traditional, no shul attendance, "sadly not religious", feels spirituality and religion not supports. Exercise is like spiritual support for her
6	Masha	*Fully Catered Residence	No relatives, occasional contact with godson's adult child.	1 close friend – talk intimately and laugh infrequent contact due to distance, 1 less intimate friend - frequent contact	Activities offered at Residence but chooses to spend most time alone.	Not traditional, not a support
7	Merryl	*Fully Catered Residence	Siblings, close, weekly contact. Nieces and nephews – no contact	Closest friends recently died, 1 less intimate friend who visits.	Bridge, TV, reading	Religion reminds of mom, regretfully no longer traditional, not support
8	Myk	*Fully Catered Residence	Nephew and wife visit occasionally. No other family nearby	Some 'social' friends – doesn't talk intimately to anyone	Attends some activities offered at Residence, helps others	Not traditional, no shul attendance, not a support

Table 3.3 Supports Continued.

No.	Name	Finances	Practical Maintenance	Transport
1	Sheyna	Struggled on pension, 2 children now pay rent, still difficult	Alone if possible, if not, building maintenance man	No car, public trans., walks. Requests lifts only if emergency.
2	Vivienne	“Not rich but can make do”	Building maintenance man	Sold car, mostly walk if able, uses driving service.
3	Chani	Secure	Building maintenance man	Drives in daytime, walks, lift from young friend if desperate
4	Ruth	Mostly secure but medical bills worrying	Building security man previously but he has left. Unsure who now	Drives in daytime, walks
5	Trudy	Secure but very aware	Building maintenance man	Drives in daytime, walks
6	Masha	Secure	Provided by Residence	Provided by Residence
7	Merryl	Struggling, std of living threatened	Provided by Residence	Provided by Residence
8	Myk	Dependent on siblings for survival	Provided by Residence	Provided by Residence

* Three different Residences: two are rooms in a main building with catered meals, one an independent flat with own kitchen and optional catered meals.

** ‘Traditional’ indicates an observance of Jewish holy days and at least some religious rituals. Most spoke of this experience as motivated by habit rather than internal need. ‘Religious’ seemed to indicate a more fulfilling internal spiritual experience of religion.

3.5. Data Collection

There needs to be harmony between the gathering of raw data, the method of analysis and the outcomes that are sought. The driving force behind the analysis of the descriptive data in the phenomenological method is the search for psychological meaning as lived by the participant, therefore Senior Citizens' detailed descriptions of their experiences are an obvious and good source of data (Giorgi & Giorgi, 2003).

Qualitative research interviews are uniquely able to obtain access to and describe the lived everyday world. The research method of phenomenological interviewing is a specific type of in-depth interviewing allowing privileged access to participants' basic experience of the lived world (Kvale, 1996; Marshall & Rossman, 1995). An in-depth interview lasting between an hour to one and a half hours was conducted with each participant in their residence using an interview guideline (see Appendix A).



Interviews tend to be more long-winded and disorganised than mere descriptions of experiences but they are more spontaneous. Senior Citizens' responses to the experiences of support, as well as their potentially differing interpretations of this experience is dependent on their own characteristics and context and can, according to the phenomenological theoretical framework, only be understood in these terms (Lemon & Taylor, 1997). Questions were therefore generally broad and open ended so that the participants could express their viewpoints comprehensively. In gathering the data the aim was to obtain a detailed, concrete and precise description of the subject's experience, with as few generalisations and abstractions as possible. Interviews were tape recorded and later transcribed (Coles 2001; Cresswell, 1998; Giorgi, 1997).

3.6. Bracketing My Presuppositions

“No work can be considered phenomenological if some sense of the reduction is not articulated and utilized” (Giorgi, 1997, p. 240).

Heidegger warns against confusing thoughtful reflection with the mechanical application of propositions stated by others (Churchill, 1990). In order to study Senior Citizens’ perspectives on their world, I used phenomenological psychological reduction, a deliberate suspension of my presuppositions to try “to adopt a ‘naïve’ approach” to the understanding of Senior Citizens’ experiences of support (Cresswell, 1998; Giorgi & Giorgi, 2003; Lemon & Taylor, 1997, p. 227). This process entailed my critically analysing my own presuppositions and suspending my “judgement as to the existence or non-existence of the content of an experience”, with the aim of arriving at “an unprejudiced description of the essence of the phenomenon” (Kvale, 1996, p. 54). Senior Citizens’ differing experiences of remaining in South Africa without their children and their potentially differing interpretations of this experience, are dependent on their own characteristics and context and can, according to the phenomenological theoretical framework, only be understood in these terms (Lemon & Taylor, 1997). Therefore, in the hope of gaining true descriptions of the participant’s experiences and allowing unexpected sources of supports or needs to emerge, I tried to approach each interview as though it was the first time the topic was being discussed.

Suspending one’s preconceptions to allow the phenomenon to come directly into view is much easier said than done. Having worked closely with Jewish Senior Citizens in the past and having studied psychology for many years I realised that I have many implicit presuppositions about the subjects in this research. Therefore it was extremely important for me to think of what these may be before beginning the interviews, so that I did not lead the subjects’ experiences in any way but rather let them emerge truthfully. It was also crucial that I used my assumptions with care (Ashworth, 1996) during my analysis of the data so that I did not unwittingly bias my analysis in a direction I preferred but rather made sure that I was at all times being loyal to the descriptions of the Senior Citizens. During interviews as well as during the analysis I had to put aside / bracket:

- My previous reading of theory on ageing - what happens to a person psychologically;
- My own opinions on how issues such as dependence, loneliness etc. can be viewed;
- My tendency to view things from a fortitudinous perspective and therefore my expectation that some people would be quite fine without their children;
- My previous knowledge of, and experiences with Jewish Senior Citizens;
- My own curiosity about spirituality as a support (I realised my bracketing of this was successful because I was genuinely surprised when it came up in the interviews);
- My own expectations of how people might react in these circumstances and to allow each story to come out and speak for itself;
- My own opinions and my psychological expectations about what would be effective or not in coping with difficult circumstances;
- My judgement on relationships in families - what makes children leave and what are children's obligations in terms of supporting their ageing parents;
- Finally I had to put aside my own hope of discovering support for the fortitudinous perspective in finding that Senior Citizens are able to find support in other sectors when it is not forthcoming from the traditionally expected sources, such as children.



In a further attempt to remain uninfluenced I chose not to read much literature before conducting interviews or analysis of the data. Many aspects of the literature were later reflected in the findings of the analysis of this data, suggesting substantial support for the findings of both sources.

I attempted to remain aware of my assumptions throughout this research and to be true to the subjects' described experiences. However, as one's assumptions are often implicit, I am also aware that it is possible I was nonetheless unknowingly influenced by my preconceptions.

3.7. Reflexivity

My interest in this research topic was initially triggered by working in a Club providing support for independent-living Jewish Senior Citizens and hearing frequent conversations about overseas children. While in that context I had many occasions to consider Senior Citizens' needs regarding children's obligations and fulfilment of support. In addition, having lived overseas myself, I related to the child's perspective of being involved in one's own life far away and therefore less aware of one's parent's possible support needs. While my parent was not a Senior Citizen at the time, hearing about the experience from the perspective of the Senior Citizens raised a variety of feelings for me, including regret at not realising quite what a challenge the experience must have been for my parent. I felt it would be beneficial to provide an arena for this experience to be expressed so that other overseas children may gain more understanding on what aspects of support are in fact beneficial to their distant parents.



Being Jewish myself and having worked in the Jewish community, my participants tended to relate to me very easily using Yiddish terms and names of holy days comfortably. I also found that I understood much of what they were telling me without needing to ask for clarification. The truth of this was confirmed when one of the women gave the feedback that reading the results made her feel heard and gave her comfort that she was not alone in her experience.

While I did find resilience and creative ways of coping in these women's stories, I was mostly left with sadness that they have lived long, full, sometimes difficult lives only to be faced with one of the most difficult challenges of their lives now. I was reminded of a quote the Senior Citizens I worked with often repeated, that "old age is not for sissies".

3.8. Data Analysis

“It is necessary to stay within the bounds of description and to resist the tendency to go from description to inference” (Ashworth, 1976, p. 366)

“Epoche clears the field for the seeing of essences which are arrived at by free variation in the imagination” (Churchill, 1990, p. 52).

Phenomenology deals with experiences and meanings so its scientific status is often suspected but it can follow the general dictates of science (Giorgi & Giorgi, 2003). In order to maintain standards meeting the requirements of both science and phenomenology certain steps were followed in analysing the data.

- 1) The data was read through entirely in order to get a holistic overall view before initiating any analysis.
- 2) Following the global reading, the data was reread and divided into parts based on meaning discrimination. These constituted parts are known as ‘meaning units’. These were discriminated by a careful reading of the data and a marking of places where there was a shift in meaning in what the subject had said (see Appendices B and C for examples of the analysis process). Rather than ‘objective’ meaning units in the text, these meanings are constituted by the activity and attitude of the researcher (Giorgi & Giorgi, 2003). This meaning discrimination presupposes the prior assumption of a disciplinary perspective and in this study it was a psychological perspective. This is to say that the data was divided based on psychological meanings expressed or implied in the participant’s descriptions of their experiences. However it is important at this point to clarify that, as the phenomenological method is “discovery-oriented”, the data is considered with an unspecified attitude in the phenomenological method. Rather than hypothesising possible outcomes, the intention is to let unforeseen meanings surface (Giorgi, 1997, p. 247).

3) The clarified meaning units were then explored and statements of the subjects were re-described in psychological language to establish each one's disciplinary value. One goal was to make the implicit meaning explicit, especially with regards to psychology, rendering visible the psychological meanings that play a role in the experience. In other words, the essence of the meaning units was established according to a psychological perspective by using the process of free imaginative variation described previously (Giorgi, 1997) (see Appendices B and C). A second goal was to generalise somewhat so that the analyses would not be so situation specific. This transformation in phenomenology is done after the data is gathered, as differentiated from the laboratory tradition in which the environment and stimuli are transformed initially in order to control the variables. By exploring the 'natural' descriptions given by participants from the perspective of their 'life world' one picks up contextual and referential issues as they appear to the participant in terms of their subjective importance. It then becomes easier to see how the different aspects of the experience relate to each other and the special relevance of these connections to psychology was made explicit (Giorgi & Giorgi, 2003).



4) Finally, in a stage termed 'structural synthesis', free imaginative variation was again used with the transformed meaning units in order to ascertain which are the 'bones' of the experience (Marshall & Rossman, 1995) describing "the essential structure[s] of the concrete, lived experience from the perspective of the discipline" (Giorgi, 1997, p. 247). It was very likely that more than one structure would be established from the data of the eight subjects so while I aimed for a single structure, I did not try to force the data into one structure. A structure is not an end in itself but can rather be seen as equivalent to "a measure of central tendency" whereas variations from the structures found in the data that need to be accounted for could be seen as "measures of dispersion" (Giorgi, 1997, p. 248). Structures show what is predictably essential in constituting the concrete experience described and how the essential components of the experience interrelate (Giorgi & Giorgi,

2003). The core themes making up the structure are understood as more significant than individuals' diverse descriptions of their experience of the phenomenon.

The final product of phenomenological scientific analysis is not just an 'essential structure' but also how this structure relates to the diverse expressions of an essential identity. In other words, the ultimate aim is to explain how the things people said fall within a structure, as well as how they vary within this structure (Giorgi, 1997; Giorgi & Giorgi, 2003). For example, while it was found that all the participants felt pain regarding their children's emigration, each had a different reason for this. Ultimately "the task is to language the phenomenal from the standpoint of the guiding principles of one's discipline" (Churchill, 1990, p. 55). The final step then was to take these universal horizons, these essential structures of the experience of support as encountered by Senior Citizens in South Africa after the emigration of children, as key to understanding other human behaviours.



3.9. Credibility of the Study

The use of quantitative methods probably connotes better intersubjective agreement among researchers however the psychological comprehensiveness of a phenomenon is usually sacrificed. Qualitative methods lean, at times excessively, to maintaining "fidelity to the phenomenon" and these methods may therefore suffer from a lack of intersubjective agreement (Giorgi & Giorgi, 2003, p. 49). There are however ways that this can be minimised. From the phenomenological perspective, psychological research needs to enter into the participant's subjective world as fully as possible but scientific knowledge needs to be systematic, methodical, general and critical (Giorgi, 1997). Therefore, while the world of the participant is subjective, the scientist's method of capturing that world is intersubjective or objective (Giorgi & Giorgi, 2003).

"Trustworthy work must be credible, transferable, dependable, and confirmable" (Bryant, Corbett & Kutner, 2001, p. 938). I aimed to meet the standard of credibility by encouraging participants to

elaborate on their responses in order to generate rich descriptions of their experiences during interviews. I also undertook a thorough review of the available literature. Transferability is extremely limited in a study of this small size, however purposive sampling and rich description will, as far as possible, provide as much information as possible so that other observers may judge the applicability of the results to other contexts, for example to other groups of Senior Citizens living without their children nearby. Dependability means that another person might reasonably draw the same conclusions from the data and essentially what is important is how the meaning units are transformed (Giorgi & Giorgi, 2003). I have left as complete a track record of the process as possible in order to provide for the critical other the meaning unit discriminations made, as well as the final transformations for each meaning unit that constitutes the foundation for explaining the structure of the experience. All interview transcripts, as well as the interviewer's notes, will remain accessible from the supervisor of this research, providing a dependability audit trail. Furthermore extracts from two interviews and the subsequent analysis into meaning units, transformations and themes are displayed for the reader in Appendices B and C. Confirmability relates to what extent the results of this research are products of the investigation and not of the researcher's bias. Again the best guarantee is a well-documented audit trail but in addition phenomenology requires that the transcripts be confirmed by the participants as accurate (Bryant, Corbett & Kutner, 2001). Once the data had been analysed the participants who were willing were asked to read transcripts of their interviews as well as the analysis of themes and essences and to provide feedback on the accuracy of the material. Some found this feedback process to be very rewarding. One participant stated, "I feel much less alone. I can see there are others who feel like I do. Now I can see I am not making this up". She planned to make a copy to send to her children. However for some, rereading the transcript of the revealing conversation about this painful topic was difficult. As this occurred six months to one and a half years after the initial interview, it is possible that this time lapse made it hard for some to acknowledge what they had said. However, even while it was apparently difficult for some participants to relate directly to the material, they did not refute the accuracy of the facts in the transcription nor of the analysis.

Finally, the researcher is constantly aware that the critical other will be appraising the perceptions being described. The perceptions, from a psychological perspective, are therefore more role-based than person-based. These guidelines are not guarantees of objectivity but rather offer standards to ensure credibility of the outcomes (Giorgi & Giorgi, 2003).

3.10. Ethics

All participants were informed in detail about the study and its aims, were given a document explaining the research and were asked to give their written informed consent (see Appendix D). Participants' anonymity was assured and participants chose their own pseudonyms that were used in all the transcripts and recordings of the data. Participants were given the option to maintain ownership of the transcripts of their interviews following the study, which option was taken by five of the participants. Participants were informed that they may withdraw at any stage of the process if they chose. This option was not used in any interview. In contrast a number of the participants expressed gratitude for the opportunity to discuss this topic. The researcher remained sensitive at all times to the possibility that the interview topic might raise painful emotions for some participants and furthermore tried to end the interview on a more positive note. The researcher had a support service available to refer participants if necessary but this was not used.

While phenomenology provides a specific and valuable perspective, when a topic is this painful participants who have allowed themselves to dwell on it in the first interview may be strongly affected by having to revisit the topic when feedback is requested. In addition for some, reading the transcript of their voluntary self-disclosure was deeply discomforting. As I had been very careful to provide the safety offered by the ethical guidelines, this reaction was unexpected. If indeed the time lapse was a factor in this difficulty, it may be advisable when using this methodology in researching painful topics to follow up and request feedback sooner, rather than later.

Furthermore, on initial contact with me as the interviewer, some participants seemed to immediately perceive me as a potential support and I felt the pressure of the projected perceived Ideal Support (discussed in section 4.10.). As someone who engaged with this intimate topic and then offered only sporadic subsequent contact, I may have become yet another disappointing support. This highlights a possible ethical dilemma of research such as this.

3.11. Value of the Study

Society is currently concerned about the possible burden of care for an ageing population (Grant, 2001). It therefore appears sensible to garner knowledge about the actual experiences and needs of Senior Citizens in order to ascertain whether such concerns are realistic. There is a tendency to see Senior Citizens as a dependent, needy population. Once people have been designated to the category 'old' it becomes easy to ignore their individual traits, desires and capabilities and they are seen as old, as though this describes them entirely (Cruikshank, 2003). In contrast Senior Citizens can be viewed as survivors and experts at living by mere virtue of living long. As such they have possibly found ways to survive this new experience of remaining in South Africa following children's emigration. This study aims to challenge preconceptions and unveil some real experiences of a group of people who also happen to be old. The aim is not to indicate that these Senior Citizens may not need support but rather to explore their experiences of the avenues they choose to follow in search of support and what they find beneficial.

The premise of this study is that when Jewish Senior Citizens remain in South Africa after their children have all emigrated, their experiences of support would be different from those commonly expected if family was nearby. It has been highlighted that very little psychological theory is based on the actual experiences of older people (Cruikshank, 2003). This phenomenological study therefore aspires to provide an arena for Senior Citizens' own experiences of such support to be expressed. The hope behind this is that more understanding is gained, firstly about the challenges of

this late stage of life, especially without expected support of offspring and secondly about what is experienced by Senior Citizens as beneficial and what is not in regards to support.

Furthermore, in light of the high rate of emigration as well as the HIV/AIDS pandemic, many South African Senior Citizens are being left without support from offspring. In order for support provision endeavours to be successful, it seems important to gain more understanding about this older group as a group in a life stage with an adventure of its own rather than as a population waiting to die at the end of life.



Chapter 4

4. Results and Discussion

The data from the interviews was finally reduced to 18 essential constituent themes which are presented below in Table 4.1. In addition free imaginative variation within these themes resulted in two essential structures which are presented below in their relevant sections (see Tables 4.2. and 4.3.). Not all of the constituent themes pertain to every case but the 18 in sum are representative of the composite constituents of the independent experiences of 8 Jewish Senior Citizen women.

While the themes have been identified, it is very much an artificial division as many are inextricably intertwined. When a meaning unit could apply to more than one category it was placed in the category which more fully embraced it (see Appendices B and C).

Table 4.1. - Support-Related Themes Arising from the Data

Support	Missing
- Practical	Aloneness
- Social	Family / Relationships
- Emotional	Emigration
- Spiritual	Contact
Identity	Comparison
Roles	Independence / New Freedom
Change	Coping / New Strengths
Belonging	Life / Death / Motivation

Within these themes two relevant general categories surfaced. One category comprises themes that relate to the subjects' perceived experiences within the phenomenon of being a Senior Citizen without children in South Africa. While these may not be directly related to support, it appears to be these perceived experiences that in fact create the conditions that necessitate support. In other words, these perceived experiences set the context from within which these Senior Citizens require and experience support. In the second category are themes that relate directly to participants' experiences of support. This chapter explores the themes arising from the data beginning with a

discussion of the contextual themes that arose from the data and following with an exploration of the themes directly related to support. Finally a model of Ideal Support that was found to emerge from the data is presented and discussed.

4.1 The Context: Themes in Subjects' Perceptions of the Phenomenon

Table 4.2. - Essential Structure of Experiences of the Phenomenon Necessitating Support

Essential Structure of Experiences of the Phenomenon Necessitating Support

- There is a deeply valued quality in close relationships which includes an aspect of ownership and *belonging* that provides a sense of purpose and identity. This sense of belonging is not dependent on proximity but a loss of this quality is profoundly mourned.
- A constant *missing* of certain qualities in daily relationships with children, unrelated to having practical needs fulfilled, is more prominent on special days or times of physical weakness.
- *Aloneness* is difficult to learn and painful to endure but once learned is at times desirable.
- Family is very important and while their leaving may not necessarily negatively affect quality of *relationships*, it is secretly feared to indicate their lack of caring. This fear extends to others perceiving being alone as being unwanted.
- Children are encouraged to *emigrate* but emigrating oneself is unappealing.
- Type and frequency of precious *contact* is substantially affected by changes in circumstances and plays a fundamental role in the quality of continuing relationship with family.
- *Comparing* one's situation to others' or to one's own memories or expectations allows a conscious choice of behaviour, including vital acceptance.
- *Independence* reflects on self and is therefore highly valued as positive and lacking it is shameful, painful and mortally threatening.
- There is no personally acceptable option but to *cope* with the situation using old or newly learned mechanisms which do not always work adequately.
- *Death* is the realistic, and sometimes appealing, future yet there is a unique and essential motivation to live, mostly consciously chosen, that provides strength to continue striving despite the hardships.

4.1.1 Belonging

“The hardest is not having someone of your very, very own that you love and care about. Friends are different because they’re not your own” (Masha, Age 88)

This study found that the most difficult part of being in South Africa without family is commonly experienced as not having the certain close quality in nearby relationships that includes an aspect of ownership and belonging. This deeply valued sense of belonging is experienced by these participants as providing a sense of purpose and identity and the loss of it results in a feeling of aimlessness and is profoundly mourned. This supports other findings that the need to belong is a powerful, fundamental, and extremely pervasive motivation and that a sense of belonging appears to have multiple and strong effects on emotional patterns and on cognitive processes (Baumeister & Leary, 1995; Swickert, *et al.*, 2002; Zunzunegui, *et al.*, 2004). In contrast to the Nuclear Hardship Hypothesis which suggests that ‘belonging’ is lost once children move far away (Neven, 2003), this study found that the sense of belonging is not experienced to be necessarily bound to proximity. It was found here that when a family maintains constant support and contact it is experienced as validating one’s identity as an important part of a family. Children’s effort and desire to include one gives a satisfying sense of continued belonging despite the distance. This is supported by the findings that some children are able to provide quality support for their parents despite being far away (Joseph, 1998). Nevertheless proximity and distance can play a big part in belonging such as when the people who ‘belong’ to one and to whom one ‘belongs’ are ruefully experienced as being too far away to significantly contribute to each other’s daily life. When this happens these participants report that it tends to impact negatively on perceptions of events that traditionally emphasise belonging such as birthdays and holy days.

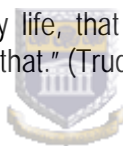
This study found that the type of belonging one has to close family, and sometimes close friends, allows rights and expectations of role fulfilment and support that is distinctly lacking in other relationships. The theme of Roles is explored more fully in section 4.3.2.

Subjects reported the experience of having extended family nearby to which one should ideally belong, or observing a group to whom one would like to belong, but not being included. When this belonging is not willingly or regularly acknowledged by such potential sources of belonging, it is hurtful and resentfully experienced as being uncared about and feeling an outsider. There is the sadly hopeful experience of attempting to initiate contact with this potential source in order to elicit the sense of belonging.

When the sense of belonging is missed, participants reported that alternative belonging relationships are sought in a variety of areas. Fulfilling involvement with other activities can assuage the loss of belonging to a large degree; however if there is not a good fit of interest and project or people, the pain of this loss remains untouched.

4.1.2 Missing

“But you know I’ve had so much in my life, that what can I say, you literally live in the memories. I’m sure people have told you that.” (Trudy, Age 75)



Analysis of the data indicated that a constant lack is felt, a missing of certain qualities in daily relationships that children bring, which is unrelated to having practical needs fulfilled. This lack is more prominent in times of physical weakness, special days or when somehow reminded of what is not available.

“My only problem with the whole thing is that I miss out on family, definitely you know. My friends are always going to grandchildren’s birthdays and there are Friday nights or school graduations. Something’s always busy in the family and I miss out on that, I really do.” (Ruth, Age 79)

This study found that writing to family, speaking on the phone or being around other people does not fully satisfy the constant missing. These Senior Citizens used memories and fantasies as an important way of keeping in closer contact and trying to ease the missing. If missing does not appear to be reciprocated by family, it can raise painful questions of self value and life purpose.

4.1.3 Aloneness

"You know, at the beginning, when my husband died and I was alone, I felt alone and my children all gone, I thought how am I going to stay alone in the house, you know, or be alone? Do you know that now I am only too pleased to be alone! I have made a life for myself, I really have made. I found out that I can cope on my own. Lots of people can't but I can."
(Sheyna, Age 77)

As in O'Leary's (1996) writing, this study found that the experience of aloneness is often not an unfamiliar one but these participants say there is a different quality to the aloneness at this stage of life that is related to losses of loved ones and there is a need to learn to be alone in this new way. Learning to be alone is difficult and painful and takes time. However, this study found that while aloneness has the potential to be painful and detrimental, it can also be enjoyable and beneficial. This finding is supported by other authors (Cruikshank, 2003; MacGregor, 2003; O'Leary, 1996). These Senior Citizens' experience after learning to be alone includes finding that one prefers one's own company to the company of people one does not enjoy or relate to, as succinctly expressed by these two participants:



"You know, I like being on my own. I prefer being on my own than to be with a lot of people that are getting on my nerves." (Sheyna, Age 77)

"If not, then on a Friday night I am home all by myself which I find quite painful on the one hand. On the other, if I go and it is very boring, which it is most of the time, it is meaningless. Then I think to myself I'd rather be at home because I still make [blessing], I light my candles, I go to [synagogue]. Then I read and listen to music, whatever I want." (Chani, Age 84)

This study, like O'Leary (1996), found that enjoying aloneness seems to be influenced by having choice, as painful aloneness is related more to feeling abandoned than being physically alone. Also as in O'Leary (1996), the quality of support is also found to be more important than quantity when it comes to alleviating such aloneness. However this study also found that painful aloneness can arise from not having "the same mind-set as those around you". In addition, it found that when aloneness is associated with vulnerability, such as in times of illness, it becomes frightening. At such times of feeling abandoned or painfully alone, appreciating the benefits of aloneness is more difficult and trying to acknowledge these benefits may be a compromise on what is truly desired.

In the data there seem to be two clear structures for loneliness with regards to children's absence or presence. For some there is the belief that having their children nearer would prevent them feeling as painfully alone as they currently do. For others the experience of loneliness is not necessarily caused by the absence of their children and subsequently this loneliness would not be alleviated by their children's presence.

4.1.4 Family / Relationships

"I wondered what is this thing called 'support'...and it raised, almost like a volcanic thing that came up for me, to say well where are you? What are you doing, I mean you're on your way, a third of your way to 85, yes, your children are here on a visit. What is the connection? What does it mean that they come to visit me? What does it mean if they don't come to visit me? Where am I in all this? It raises the question, which is one of those *yuch* questions, well who am I and what have I been doing with my life?" (Chani, Age 84)

Ching Ying Ng, *et al*, (2002) found the quality of intergenerational relationships to be important in that this influences Senior Citizens' help-seeking behaviour. This study found that the quality of relationships one has with one's children is experienced as reflecting on self and life success. As such, the experience of close and respectful relationships with children provides deep joy, fulfilment and pride in both self and children. Humour, for instance, is a highly valued quality in these relationships. It follows that poor relationships with children and a lack of attachment or even estrangement are experienced by these participants as deeply hurtful and rejecting. Such a situation tends to elicit anger at one's child and/or self accompanied by regret, painful reflection on lost potential, self blame for past mistakes seen from the perspective of current maturity and at times a hopeful desire to remedy such mistakes. It seems, for these participants, that while having poor relationships with a child is always experienced as painful, a close relationship with one child may be experienced as compensating for poorer relationships with other children. Sometimes however, despite the experience of good relationships with one's children, there remains a feeling of lack in quality, as if the relationship does not quite match an ideal image. This is experienced as a slightly

confusing need to accept the current adequate relationship while still holding (sometimes with guilt or sadness) a slight feeling of something missing.

For all the subjects, family is very important and being without nearby family is difficult. The loss is at times emphasised by seeing others not value their own nearby family. Joseph (1998) found proximity to positively affect care from children. Surprisingly the present study found that time and distance are not necessarily related to the quality of intergenerational relationships, affecting it in a variety of ways, ranging from not changing, to increasing the value of relationships, to loss of richness of daily contact and familiarity with family.

There is often the experience of feeling oneself a lower priority in children's lives due to distance and lack of consistent contact. For these participants there is a secret fear that the family's emigration indicates a lack of caring or desire to be nearby. Being alone while family remains grouped far away supports this fear. There is also the fear of being viewed by others as being unwanted by one's family due to being alone. There appears to be the experience of needing to justify and strongly support family's decision to leave, possibly to prevent this perception.

4.1.5 Emigration

"I really miss my family, really I do. But I know what's going to happen, if I went to Australia now. I would lose my independence and they would put me in an institution. I know what's going to happen. I don't say the children don't want you, its not that... they've got their lives also." (Sheyna, Age 77)

As in Coles' (2001) study on non-migrant elderly kin in Turkey, this study found there to be the experience of encouraging children to emigrate but not wanting to emigrate oneself. Emigration is experienced as unappealing due to poorer climates, lowering of standard of living, uprooting, difficulty adjusting at this age, loss of supports and fear of burdening children. Emigrating to be nearer children is unappealing as this would possibly burden the children and not necessarily alleviate aloneness. Thus remaining in South Africa in 'honest' aloneness is preferred to living near children in 'false' togetherness.

4.1.6 Contact

"My grandchild taught me to do email. It means everything to me now, I mean it is beautiful. I send an e-mail to my son twice a week, and he phones me every Saturday afternoon. Then he sends me an e-mail. He does not say much on the phone. First of all he didn't phone me, I said why aren't you phoning me any more? He said 'I send you email', I said that is not good enough, I want to hear your voice." (Vivienne, Age 90)

The data shows that the type and frequency of precious contact plays a fundamental role in the quality of continuing relationships with family. Participants spoke of regular unsolicited contact via telephone, writing or visiting, often at set times, as the most satisfying type of contact. Those who use email appreciate its frequency and casualness of communication. Telephone contact and hearing a child's voice is experienced as adding an important qualitative dimension to the contact and is experienced as closer than email or writing. Irregular contact was found here to be resentfully experienced as insufficient and painfully rejecting. Increasing physical and/or financial restrictions in visiting children overseas or telephoning them create greater dependence on children to visit or make contact. More control is experienced when using other common unconventional types of contact such as fantasising, reliving memories and spiritual contact with loved ones who have died.

4.1.7 Comparison

"[When my husband died I had to decide] what was I going to do with my life? Then those three widows came into my life and I thought 'I am not going to be dependent on my children [like the one],... I am not going to give myself into becoming an alcoholic [like the other], I am going to do what that American lady did, she was independent, she was strong and she was interesting'." (Chani, Age 84)

The participants spoke of comparing one's situation to others' or to one's own memories or expectations as giving a sense of relativity and thereby allowing some acceptance. Comparing the behaviour and coping options taken by others in similar situations seems to provide a space for a conscious choice of behaviour and thereby some control over life outcome.

4.1.8 Independence / New Freedom

“You’ve got to regulate yourself, you’ve got to regulate your mind and body, otherwise I think you just disappear in yourself and become a nothing. And how many people are like that? You know a lot of people are like that...When you go and see them, they are not dressed ...”
(Vivienne, Age 90)

Independence is experienced by participants as reflecting on self. Consequently its attainment is highly valued and is a source of pride and loss of independence can be experienced as a shameful loss of personhood. A person is seen by these participants as being in control of their response to uncontrollable life events and the type of response they choose is attributed to their temperament and attitude rather than to external circumstances. Due to this, maintaining control of self by keeping active and independent is experienced by some as being essentially a matter of life or death. There is a tendency to compare one’s level of independence to others’ in order to assess one’s status therefore the appearance of independence may be upheld even if this is untrue and impedes receiving needed support. This finding is consistent with research showing that Senior Citizens who need support more are more uncomfortable with receiving help (Noelker, *et al.*, 1998). This equation of independence with selfhood, especially in older age, is possibly more prevalent in, or even exclusive to, Western cultures (Aviram, 2003; Zunzunegui, *et al.*, 2004).

Lack of autonomous power is not experienced to be necessarily related to not being near family but rather to the type of relationship one has with supports (MacGregor, 2003; White & Groves, 1997) (see section 2.9. for further details). ‘Enabled independence’, when children accept and back independent decision-making, was experienced by these participants as especially influential in times of transitions and shifts in autonomy and, by leaving a safe space for self, this is felt to be deeply supportive and empowering. In contrast, having decisions made for one by family, at times without adequate consultation about needs or desires is experienced as deeply disempowering and frightening. As in Sheyna’s story, this is experienced as being related to family’s fear of not fulfilling their roles by providing adequate support (Roles are discussed in detail in section 4.3.2.).

"But what is happening now, because I have nobody here, my children, they think I am living alone, my poor mother, they want to put me in [a residence] I do not want to go there! Because I am happy, I am well now, I can look after myself. What must I go to an institution for? They got a very big fright [when I got ill], because they didn't know whom to contact. You see they're far away, they don't even know. They know I live here, but they have never seen [the residence]. I said, I wish they would come and see the place before they put me into it. Because I don't want to go into an institution, what for? I am not that kind of person. I like my home! It doesn't matter how small it is. 'Yes, but there they look after you'. They don't you know! ... I don't say I'm my own boss, but I want to stand on my own two feet, you see, so I don't want to go there!" (Sheyna, Age 77)

Studies have found a loss of functional autonomy to be strongly associated with psychological distress (Couture, *et al*, 2005). This study found that realising one needs more support than is available while living alone means having to weigh the possibility of no longer living independently. These participants describe a fear of compromising on one's standard of living and of losing precious autonomy in order to get the support needed. They experience maintaining independence in making this major life decision as crucial in effectively accepting and coping with the change. Some would rather suffer alone than do this, some are waiting until they are forced by need to decide, others have taken the step to move to a Residence and are either pleasantly surprised at their maintained independence or accepting of its loss.

This study discovered that if there is no feeling of reliable available support, independence is also experienced as a matter of necessity. For some the experience of learning independence due to this necessity is surprisingly painless as it also evokes pride in a newfound selfhood and this new skill of independence eases the pain of being without the desired support that family might have provided. Nevertheless, for others this painful enforced independence and responsibility for accepting and coping with what life has presented is resented and the pride it brings is paltry compensation.

For these participants there is the experience of gaining strength and new knowledge about self from surviving the difficult situation of being without nearby family. Catering only for one's own needs is liberating and the newfound freedom to direct every aspect of one's own life is experienced

with gratitude and deep enjoyment. The new positive perspective of not needing to comply with and please authority figures, along with being able to provide for one's own needs better than others can, appears to lead to greater selectivity in support. The ability to choose support and the ability to draw on resources easily are experienced by participants as crucial to independence. This is supported by other studies (eg. Miller & Harvey, 2001).

"I don't have to answer anybody, I don't have to ask anybody. I always had to ask somebody... Now I do what I want to do. That's the only good that's come out of it." (Sheyna, Age 77)

"I thought I'm much better off at home. At least I know my patch and I don't have to please and appease and placate. You know this has been the story all my life... I was always a good girl. I've never thought about it until this weekend. That this is *my* space." (Chani, Age 84)

4.1.9 Coping / New Strengths

"You can be a misery, you can have all your children around you and have everything and still be miserable if that is your temperament. Like my friend says, it's about making oranges from lemons. You can make lemons out of anything." (Masha, Age 88)

Participants found that their attitude to life is strongly tested by having to understand the consequences of choosing certain responses to difficult events. They reported viewing a person as having control over her reactions to uncontrollable external events. This type of internal locus of control has been found to indicate more successful adjustment to stress (Couture, *et al*, 2005). For example, being bitter and complaining is understood to exacerbate the pain of the unchangeable current situation and does not encourage sympathy from others. Acceptance is found to be an ability that is admired in others and although learning to accept both current and future difficulties is challenging, it is also experienced as necessary.

"I can cope! So when you have the flu, you have the flu. When I have to go the hospital, I drive. Thank God I drive, thank God you got a car, you know? Come on! It's hard to [count your blessings] but that's it!" (Trudy, Age 75)

This study found that being disappointed by others leads to a feeling of having no choice but to cope alone and accept being stoically independent as a defence against the pain of not feeling cared

for and supported by others. While there is the experience of the current painful situation being a situation that would not have been voluntarily chosen, there is also a widely felt experience of deep pride at having endured the hardships (ie. aloneness, loss), a realisation of strength previously unsuspected and an acknowledgment of gains from coping (such as true independence, new skills). However this is acknowledged to have come at a high cost and some feel they have gained nothing from their painful experience.

"I certainly think that I have gained strength, that I am really independent. And I am not suffering from being independent." (Myk, Age 78)

"Somehow I keep going. This has strengthened me, it must've done." (Ruth, Age 79)

"You see in a way it made ...yes, it made my character, let's put it that way." (Sheyna, Age 77)

It is found that there is a constant battle between using active and avoidant coping techniques (Brissette, Scheier & Carver, 2002; Curtis, *et al*, 2005). Participants reported that the use of active coping methods such as overcoming fear of certain events and activities results in the understanding that the fear of doing was greater than the difficulty of actually doing. Those who have not yet overcome such fears tend to adjust their lifestyle, including foregoing needed support, in order to avoid the feared situation. Focusing on the positive aspects of a situation, even by comparing it favourably to the worst possible scenario, and being grateful for what one does have is experienced as necessary in order to not decline into depression. In a sense this requires at least a subtle denial of the difficulty of the current situation.

"You know when I think of the Jews in Germany and I think what a hell of a life they went through with Hitler. That's what I think of. Anything is better than that." (Myk, Age 78)

In this study distraction from thoughts of self and difficulties is found to be widely used as another avoidant yet effective way of coping. Being limited in opportunities to be busy, forces one to face the threatening emptiness or depression previously avoided. As was found in other studies (eg.

Carone & Barone, 2001), for some, trusting that there is a higher unseen reason for the difficult situation helps in achieving acceptance and coping with the question of 'why'.

However, despite generally successful coping, participant mentioned that there are certain times (for instance on special days, or when; feeling unwell, seeing others with their children, worrying about finances, alone at night or on weekends) in which none of the regular coping techniques adequately manage the feelings of being without nearby children. At these times one can merely experience the intense pain, loneliness and desperation and wait for it to pass. These moments are experienced as overwhelming and elicit a serious questioning of the motivation for living.

4.1.10. Life / Death / Motivation

"Day by day you have new challenges, new obstacles, new opportunities but it depends on the level of mood that one carries within oneself, whether one can take the step forward or whether one takes the step backward. So the backward leads to senility and then ultimately the wish not to be. Whereas the challenges are almost as if you're on the edge of a cliff and you have to think fast and be very clear as to how, what your direction is if you want to stay in this situation, where it is almost a sort of life and death choice, because after all what does the future promise other than death? And I don't speak of death as anything that is negative or psychologically depressing or anything. For me, I feel that when my innings is over I will leave. You know I would be very happy to say thank you this is enough. Maybe sometimes I would like to say that before but I have no choice, I have to carry on. Of course we do finally have a choice but I don't mean it in that way. So the challenge is really the life force. Not anything else." (Chani, Age 84)

The data suggests that there are daily life or death challenges in older age that fundamentally test one's attitude towards life. Facing these is practically and emotionally difficult and demands commitment and motivation. Not facing these challenges means starting to lose mental competence and losing the will to live. Mood affects the level of motivation available to face these challenges and to live. There are times of hopelessness and depression and questioning of the point of life and one's motivations but somehow motivation always returns after such periods. Death is the realistic future and is at times appealing, a seductive, comforting relief from the challenge and pain of living. Participants describe the current situation as unexpected and unplanned for and while there is some pride in managing thus far, there is also anger at having to be in this situation and expend so much

energy and motivation to achieve and maintain a standard of life not chosen. Based on comparison to others' experiences, there is also fear of a worsening of the current circumstances and the potential strain of managing this. In spite of all of this, for each participant there exists a unique, deeply meaningful, essential motivation, mostly consciously chosen, that provides the strength to continue striving despite the hardships.

4.2. Themes of Support

Table 4.3 - Essential Structure of Experiences of Support

Essential Structure of Experiences of Support

- There is a wistful fantasy of ideal nearby family support and the loss of this idealised support is keenly felt and cannot easily be sufficiently compensated for by other supports.
- The quality of relationship and level of the supporter's genuine desire to provide support is crucial in determining the experience of the helpfulness of offered support and joy in receiving it.
- Highly valued qualities in supports are genuineness, willing availability, consistency, reliability, expressed affection, respectful honesty, humour, support by choice and expression of constructive encouragement (belief and pride).
- Level of presence and quality of support has a strong influence on emotional well-being.
- Perception of availability of quality support is in itself a support and lessens concern about possible need for future help, whereas disappointing support results in hurt, withdrawal and sad resignation to taking sole responsibility for one's own support.
- There is discomfort in receiving and fear of burdening others that limits perception of support and is overcome, with difficulty, only in times of dire need.
- Support from family is welcomed if unquestioned and for non-survival purposes but if needed for survival and/or not forthcoming, it is painful and shameful.
- Commonly accepted roles that people are ideologically expected to fulfil define types of expectations of support that may be placed on a person and a person's level of role fulfilment provides a measure of their worth or life success.
- There is the frightening challenge of needing to adjust to constant unplanned and undesired changes, losses of supports and newly limited physical abilities while simultaneously needing to perform overwhelming new practical tasks alone.

- Relationships with the surrounding context, including types of support, constructs identity and shifts or losses in context results in unsettling uncertainty about established identity, a questioning of worth and varied attempts to construct a revised positive identity.
- Benefits of acting on a need for further support are constantly measured against cost to quality of life.
- Nearby support structures set in place by well-meaning distant family are not necessarily reliable or appropriate.
- Comfortable access to reliable, paid non-family practical support is common.
- Formal and informal structures, including providing support for others, offer busyness and distraction to assuage loneliness and boredom but are unhappily limited.
- The strongest and most elemental source of support comes from a 'turning inward' or spiritual / non-human support.
- Profound self-support includes striving to remain independent, to cope and to choose life.

4.2.1. Support

During the interviews and later the analysis of the data it became apparent that support is experienced as a multifaceted concept. Therefore in this section I have broken 'support' down into four aspects, namely, Practical Support, Social Support, Emotional Support and Spiritual Support. The definitions of each facet arose from the data and are articulated in the respective sections below. While each of these facets of support has experiences that are unique, there are also common experiences in all areas of support. Some are explored in this section and others will be explored in more detail below in section 4.4.

Coles (2001) found that participants expressed disappointment at their children's lack of fulfilment of their, sometimes idealised, filial duties. Ching Ying Ng, *et al.* (2002) also found their participants spoke longingly of more emotional and psychological support. On analysis of the current data there began to emerge a concept of Ideal Support which, while not acknowledged consciously, seemed to inform the participants' expectations and experiences of existing support. This idealised support appears to have a hierarchy that clarifies support needs and determines the perception of the quality

of experiences of support. This hierarchy of needs within Ideal Support is discussed in detail further in section 5.4.

Ching Ying Ng, *et al.* (2002) found the help-seeking behaviour of older persons to be strongly influenced by the closeness of the relationship with the support. While these participants express gratitude for offered help, they also describe frequent discomfort in receiving or asking for support due to a clearly felt and stated fear of burdening the other. This fear may well be due to the vulnerability arising from a tendency to hopefully project the fantasy of Ideal Support onto an inappropriate source that will feel unable to fulfil this expectation and will therefore be rejecting. This real or feared rejection then echoes the original unexpressed painful feeling of rejection by the family who left. It appears a person must be close to trigger such a projection. The present study found there to be less discomfort in receiving support from people specifically paid to do so, such as a cleaner, maintenance person or doctor but even then there is a heightened sensitivity to burdening the other and a concern about asking too much.



These participants' fear of burdening others with their difficulties seems to result in a lessened perception of available support. This in turn appears to lead to not asking for or accepting offered support and subsequently to feelings of aloneness and a perceived lack of support. Perception of available support varies with context. This study found that when there are clear sources of support to turn to in times of need (distant children, friends, organisations) there is less concern about possibly needing help in future and there appears to be less of a need to use such supports. However, when sources are less well defined there is a frightening feeling of uncertainty and not knowing where to turn. For example, participants experience relief in knowing that there are ultimately Jewish organisations to provide support if there is a dire need, however they do not necessarily access these supports. It appears that the mere assurance of not being left totally alone in times of need is experienced as supportive. This is in line with repeated findings that perceived support, especially when associated with belonging to a group, may sometimes be even more

effective in reducing stress and assisting successful coping than enacted support (eg. Swickert, *et al.*, 2002). Ultimately the willingness to act on any need for further support is always measured against quality of life.

4.2.1.1. Practical Support

"My greatest fear, I told everybody, is that I am all alone so if I take ill, what do I do? Who do I phone?" (Ruth, Age 79)

"If anything desperate happens, it is important to live in a security building in my situation. I would just get the security on the phone. If I had a heart attack, and he will know, he will be able to call a doctor." (Trudy, Age 75)

"Yes, [practical support] is very convenient. But the rest is, one thing is that I would like my lamp done as there's something not quite right with it. But I don't know if the fellow who does that sort of thing here can do it. So I just don't use it. It's a reading lamp. I don't use it at night. I have a lamp upstairs in the ceiling, but that's not really enough." (Myk, Age 78)

Practical Support is defined here as including material support such as money as well as instrumental support such as transport, security services, building maintenance, medical care, etc. Comfortable access to reliable non-family practical support (eg. maintenance, cleaning, transport) is common for these participants but if it is not easily available, there is a need to unhappily compromise on one's standard of living to accommodate this lack. Some of their distant children are able to provide practical support that is experienced as reliable and consistent but in other cases the nearby support structures the children may set in place, at times on visits, are experienced as well-meaning but not necessarily appropriate or reliable. In experiences where non-family practical support is less reliable than expected or hoped for, the participants express a sad resignation and a conclusion that reliable practical support is solely one's own responsibility.

These participants value being able to mobilise practical assistance effectively when needed. For instance, unlike the rural participants in Coles' (2001) study, in times of medical emergency or illness, some Senior Citizens have the secure experience of being able to effectively approach professional support (security staff, organisation). However others, like Coles' (2001) participants,

have uncertainty, insecurity and fear about the sources of provision of practical support in a medical emergency and the difficult, frightening experience of having to cope with medical emergencies alone. Other studies have also found this to be true of Senior Citizens living alone (Auslander, *et al*, 1990; Magaziner & Cadigan, 1989; Tennstedt, 1997).

Financial assistance arising with changes in the dependency role has been found to be a complex interplay between independence, filial obligations and support (Ching Ying Ng, *et al.*, 2002; Iecovich & Lankri, 2002). This study found that when financial assistance is offered unquestioningly by overseas children for non-survival purposes (telephone calls, air tickets) it is often experienced as welcome. In contrast, if financial assistance is necessary (rent), the assistance, even if offered unquestioningly and received gratefully, is experienced as discomforting and disempowering. If such financial assistance is necessary but there is a lack of such assistance from children and other family members this is experienced as deeply hurtful and exceedingly discomforting. Similarly Couture, *et al*, (2005) found that when their participants received less support than they requested they tended to become less mentally and physically healthy.

These participants describe a dual experience of frustration at being unable to accomplish previously unproblematic practical tasks (driving, aeroplane flights) due to increasing physical limitations, while simultaneously being required to perform new practical tasks (financial and practical affairs, changing light bulbs) due to necessity. Managing alone is experienced as daunting but important and sometimes there is support from children or others in learning to do these new tasks. However, at times despite such support, there is also the experience of feeling ill-equipped, overwhelmed and distressed by having to do tasks previously taken care of by others.

"You know I will just tell you a joke what happened the other day. One of the globes went out so I thought oh, my God. So I went to look for a ladder and I went to look for [the maintenance man]. Then I thought, 'You know Sheyna, you are a bloody fool!' You know, I am tall, so I took out the globe! Without standing on a chair, I did it. You know your washer breaks or something happens, sometimes I can't do it, but most of the things I do myself." (Sheyna, Age 77)

This study found that when Senior Citizens are no longer able to manage alone physically, there is the experience of considering a move to a Residence. This is either suggested by children or doctors or independently planned for in advance. It is a daunting time of considering the costs and benefits of a major lifestyle change. For some participants this experience is one of relief, signifying being well supported practically and not having to be concerned for one's well-being alone any longer. For others the thought of living in a Residence is experienced as threatening to current independence and standard of living and, while remaining an option for emergency, this change is avoided if possible. Children of these participants are commonly felt to be centrally involved in making this decision. For those who experience their child unconditionally allowing an autonomous life decision this experience with their children is supportive and reassuring.

"Then my son came here, he comes once a year. We went to look at [a residence] and I needed frail care because I can't shower, I need help to dress and shower me. So we looked at frail care and then we walked out and we both looked so sad and he said, 'Mom lets go to [the other residence]. You don't have to go in there'. So we came here but it was full so he said, 'Put your name on the waiting list and if it comes up and you don't feel like going you don't have to'. But just at the time I was having this problem and I thought to myself, get out now. So a year and a half ago I came in. I sold my flat and a few things and set off very nicely. Look, there is a lot to be desired but I knew what I was coming to and I had no alternative." (Merryl, Age 88)

Those who experience their children as pressuring the decision for their own peace of mind find this a stressful, threatening and disempowering experience. Children may be resentfully experienced as not understanding the sacrifice such a change entails. This experience is illustrated by the quote from Sheyna's interview above in the section on Independence/New Freedom (4.1.8.).

4.2.1.2. Social Support

"I had a very close friend. There were 3 of us who joined university at the same time in 1935. The one died 9 months ago and the other about 6 months ago. She was like a sister to me." (Merryl, Age 86)

Social Support is defined in this section as meaning people, places and activities that are experienced by Senior Citizens as expressly providing opportunities to feel busy, active and useful. These may be friends, clubs for Senior Citizens, Bridge games, volunteering, etc. Trying to find

desired social support is often experienced by these participants as disappointing and painful and at times the effort required seems too great. If, however, it is experienced as essential to survival and emotional wellbeing the effort to find this support then feels worthwhile.

This study found that extended family is often regrettably experienced as an awkward, quite distant and only occasional social support even if geographically close, and there is often a desire for contact to be greater with them.

The Senior Citizens in this study reported that family acknowledgement of special days, such as phone calls and cards on birthdays, may be emotionally nourishing but also a painful reminder of what is missing. Special days may lose their joyful element and be pushed aside or stoically maintained alone. Invitations to meals, by friends, family or organisations on holy days and birthdays are experienced as valuable and can ease the loss.



In accordance with other literature (Blieszner, 2001; Greenberg, *et al*, 1999; Kendig & Brook, 1997), this study found that old friends, who share history and geography, can provide a sense of belonging and quality of support that almost equals that of family in terms of emotional and psychological satisfaction. Such friends are deeply valued and greatly mourned when lost to illness, death or emigration. In contrast, newer friends are not experienced as providing the same quality of support. Making new friends is difficult, especially as an outsider to the area without a shared history, and some of the participants choose not to make the effort required to try to find this type of support.

These women experience busyness as something that gains social approval and admiration and it is frequently sought to prevent loneliness and boredom. As found in other studies (eg. Conradie, 1999; Sagner, 2000), formal and informal structures are effectively used in this way by these Senior Citizens but are unhappily limited. Factors such as high crime rates, interpersonal politics in formal

support structures, failing health, travel difficulties and business hours curtail access to such supports. Weekends and evenings are often experienced as difficult times as such distractions are unavailable.

Some of these women describe experiencing satisfaction in providing social and/or practical support to others, either with or without expectation of reciprocal support.

4.2.1.3. Emotional Support

“Well I’ve got this friend down here. We’re kind of very good together. She tells me things and I tell her, we two confide a lot in each other. There’s nobody else. It’s good if you’ve got somebody just to talk to. I think you do need it. Otherwise you’re talking to yourself all day.” (Vivienne, Age 90)

The definition of Emotional Support arising from the data incorporates affection, a space to talk or cry, encouragement, a sharing of humour and understanding, etc. A range of people and activities such as: old and new friends, visiting and distant children, children’s friends, children-in-law, grandchildren, neighbours, meditation, spirituality and visiting family graves, are experienced as providing needed emotional support. Some participants do not feel the need to be involved in a mutually emotionally supportive network on a daily basis despite seeing that others do. Often the mere knowledge of the existence of strong, consistent desire by children or friends to provide support can in itself be experienced as a source of emotional support, whether or not it is ever used.

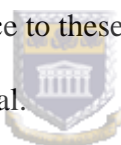
“My eldest granddaughter, she is very close to me...although she is very far away...she is so close to me. ‘Grandma I love you, I love you’. She came for just 6 days from New York...she says ‘Grandma it’s worth it’. What can you have better than that? If you’ve got someone who loves you that’s all you want.” (Vivienne, Age 90)

These Senior Citizens reported that feeling supported and understood by a child and treated as an independent person is experienced as assisting greatly in providing emotional strength and acceptance of difficult situations. A child’s respectful support and encouragement, especially in times of fear and self-doubt, is experienced as very emotionally strengthening. As also found in other studies (Coles, 2001; Ching Ying Ng, *et al*, 2002), the lack of this type of support is mourned.

This study found that having a close friend or family with whom emotional issues can be discussed may be valued and experienced as deeply emotionally supportive. When there is no-one to talk to about emotional issues, those who do not value this type of support accept this as matter-of-fact and experience no desire to talk to anyone in this way. Others who do value this type of support experience a lack of, and longing for, this type of emotional support.

"I am desperate to find someone who I could go to and say I need to talk." (Chani, Age 84)

This study found there to be the experience of needing emotional support but testing the sources of support by not disclosing support needs, then waiting to see whether these are ascertained despite the lack of communication. If support providers realise such needs without this communication it is experienced as deeply gratifying. If they do not, the existence of these unmet support needs may be experienced as indicating a lack of importance to these sources of support and the resulting hurt may be expressed as resentment or withdrawal.



4.2.1.4. Spiritual Support

"My strongest source of support is my spiritual strength, my inner strength." (Chani, Age 84)

Spiritual Support is defined as belief systems, not limited to traditional religion and rituals, which provide understanding of, and motivation for, life. Spiritual non-human support is experienced by these women as being the strongest and most elemental source of support in times of intense loneliness. This support is experienced as a 'turning inward' for strength when no other support feels available. This corroborates with other research findings that religious beliefs allow people to maintain hope and regulate negative emotions when no active coping strategy seems possible (Carone & Barone, 2002).

Classic religion is longingly acknowledged by these participants as an important ideal support yet there is a lack of personal fulfilment from it and a sometimes mournful inability to relate to it any longer. The loss of this support may be experienced as symbolic of lost potential and identity.

This study found that non-‘religious’³ spirituality is equated to classic religion as a support. Non-‘religious’ spiritual rituals, beliefs and activities, such as meditation, belief in ‘spirit guides’ or even physical exercise are not openly spoken of due to fear of judgement. However they provide fundamental unique understanding, meaning, guidance, security and strength to continue growing and facing the challenges of living. This is illustrated by the following excerpt from Trudy’s interview:

T: I do not possess any spirituality unfortunately. Strictly a practical woman, go for a swim, bowls, go for a walk, read a book.

I: *So that sense of something guiding your life...?*

T: None of that.

I: *I was asking you about the walking and swimming because it sounds to me as though you are able to have moments of richness and joy.*

T: Yes absolutely. The action of swimming and walking. The feeling good. Feeling healthy is important.

I: *So could I say that for you the physical IS the spiritual?*

T: Absolutely! There’s nothing I like better than wading up, swimming up and down in that pool slowly. You know the blue sky and blue water. Early in the morning there’s nobody there. There’s a vista there that would knock your socks off. It’s absolutely magnificent.

I: *Do you think that is something that is a support for you? It sounds like something that gives you nourishment.*

T: Absolutely.

I: *Because some people meditate and some people go to shul...*

T: That’s it exactly.

I: *And it sounds like your ritual ...*

T: No, I like to be in the open air. I mean I can take a chair and sit by the pool and go into a corner and dunk in and out of the water, I can spend a whole day there with a bunch of grapes. It’s gorgeous. I don’t need anybody for that. I take a book and some water and some fruit, got a chair, they’ve got a lovely lawn and some trees and even if it’s crowded you can find a corner. (Trudy, Age 75)

4.3. Further Themes Directly Related to the Experience of Support

4.3.1. Identity

“I am not religious, that’s actually a pity because there are lots of things going on in the Jewish community, but I don’t identify with them, I don’t know why?” (Trudy, Age 75)

“I went to the [club once] and it was very boring, you know it’s not my kind of thing...I never went to do anything else there.” (Vivienne, Age 90)

³ The term ‘religious’ here refers to classic Jewish traditions and beliefs of God.

Identity for these participants is experienced as being at least partly defined by surrounding people, relationships, roles fulfilled and sources of support. This study found that when identifying family and community to which one belongs fall away, there is confusion about one's current identity. The falling away of identifying relationships (often due to emigration, death and/or illness) may be experienced as leaving a feeling of undesirability and questioning of one's worth. When circumstances shift such as when children leave, a spouse dies or following retirement, there is an uncomfortable uncertainty about one's interests and purpose and a need to find new activities that fit in with current perception of identity. This phenomenon has been well documented in other sources (Fairhurst, 2003; Ferguson, 2004; MacGregor, 2003). Becker (2003) suggests that one of the challenges of late life is to integrate identity and memory but that this is often intensely challenged by gaps between memory and current reality. In this study a shifting need for support is experienced as leading to questioning previously taken-for-granted aspects of one's identity. For example religion, even if no longer a support, is experienced as defining a part of one's identity. Jewish rituals that were previously performed with family and community are now found to be less appealing when alone and this is experienced as a loss of identity. It is difficult and threatening to try to integrate the notion of shifts in identity from desired aspects such as independence, sociability and adventurousness, changing to qualities that are less admired or even experienced as shameful, for instance dependence, loneliness and physical limitations. Following such changes there is a desire to clarify current identity and find new ways to maintain the valued aspects of one's identity by seeking new interests, activities and belonging. However this trying out of new identities may in itself be uncomfortable and incongruous with previously familiar identities.

Other people's reactions are experienced by these Senior Citizens as reflecting on self and life and this can strongly influence one's perception of one's identity, either validating it, or creating dissonance and doubt about it. The latter can lead to the experience of feeling misunderstood and alone; however observing others in similar situations may assist in clarifying one's own identity and values.

4.3.2. Roles

"Do I get that thing from my siblings? No they're all busy. I don't expect it you know." (Merryl, Age 86)

Analysis of the data suggests that there are commonly accepted roles that people are ideologically expected to fulfil. These roles often include 'duties' and difficult sacrifices. Roles vary in different societies and life stages (Ching Ying Ng, *et al*, 2002). This study found that self-assigned roles provide a framework that assists in acceptance. The role of being a mother faced with a child's emigration is unanimously experienced as needing to place the child's happiness first despite personal hurt and consequent deprivation caused by the loss. Despite unsettling perceived changes in children's roles over time, what *is* expected of adult children by these participants is that they offer and provide practical and financial support when needed, be present and take over in emergencies, reciprocate past care, maintain regular family contact and be conduits to relationships with grandchildren. Emigration presents a very uncomfortable clash of mother versus child role fulfilment for these Senior Citizens. The role of mother is experienced by all as a difficult one to fulfil in these circumstances and the inevitable desire to change the situation may induce guilt as it threatens the quality of role fulfilment.

As in other studies of filial support for elderly parents (Iecovich & Lankri, 2002) roles are experienced to be a type of currency in that fulfilment of one's role ideologically entitles reciprocation of role fulfilment. This study found that personal evaluation of inadequate previous fulfilment of the role of mother leaves regret, pain and some anger at both self and child. Personal evaluation of having performed the role of mother admirably is experienced with great pride and motivation to stoically endure the pain of the current situation in this role of self-sacrifice. However it was also found that there is also subtle confusion about being alone now despite having performed the mother role so well and needing to continue painfully fulfilling it now instead of being looked after in return for past care.

Couture, *et al*, (2005) found that the level of reciprocity of support, on the receiving or providing end, appeared to directly influence emotional and psychological well-being. Children's motivation

to fulfil their roles is emotionally potent for these participants as it is experienced as directly reflecting on self and life success and quality of relationships. A lack of motivation from children to fulfil their roles seems to point at a lack of love or inadequate parental role fulfilment and this is experienced as extremely hurtful. Much importance is vested in children fulfilling their roles yet there is little control of whether they will or not.

This study found that roles appear to clarify the types of expectations of support that may be placed on a person. One's own and other people's role fulfilment is evaluated and failures in role fulfilment can be deeply disappointing or guilt-inducing. On the other hand, the perception that roles are, and will be, fulfilled is profoundly supportive. This was also found by Ferguson (2004) and is supported by the literature on perception of support (eg. Yuh-Huey & Hiromi, 2002.). This study found that other role players are also evaluated but expectations of support from them are necessarily less than of children, as everyone's first allegiance is expected to be to their own close family. There is the disappointing experience of acknowledging the fantasy that friends, extended family and paid persons would be able to fill the gap left by children but being unable to make the same demands of them as of children due to role differences.

4.3.3. Change

"If I am ill, you know there is nobody to help me. I've got to be careful. I know that I walk too fast... I've got to slow down because I don't want anything to happen to me. Oh, they were shouting at me my grand-children 'You cross against the light? What are you doing, you must wait for the light to change!'... So I waited and then someone asked if I want help to cross the road! I said oh, no I am waiting for the lights to change. I'm not used to people helping me. I've always done it, dash across the road. Soon I suppose I won't be able to." (Vivienne, Age 90)

These Senior Citizens describe the unsettling and challenging experience of needing to adjust to constant changes in supports that arise from emigration, illness, death, high crime rates and interpersonal politics in formal support structures. New physical frailty limits access to supports and newly inadequate supports need to be constantly adjusted to accommodate shifts in physical ability.

This study found that there is a growing awareness of needing to adjust behaviour to accommodate changing physical ability and of accepting others' increased concern and diminishing expectations. These changes inspire feelings of vulnerability and fear that coming changes will be negative. There is the uncertainty of preparing for the possibility of unpleasant changes that may still come. There is also the experience of not being able to plan far in advance due to a lack of knowing what changes will occur, including death.

"When I spoke to the middle [grandchild] he said, 'Gran I would like to come next year'. I said we can't plan so far ahead but come when you can." (Merryl, Age 86)

4.4. A Model of Perceived Ideal Support

This study found there to be a wistful fantasy of Ideal Support, that includes certain characteristics such as like-mindedness and belonging, which is fantasised to be able to lessen the feeling of aloneness. The keen loss of the idealised quality and level of emotionally and/or psychologically fulfilling support that is expected from a child or family cannot easily be replaced by other caring or entertaining supports. Nevertheless, the quality of the relationship with any source of support is experienced as being very important and in the absence of Ideal Support the fantasy may be projected onto sources other than distant family, whose role it is expected to be. This may lead at times to unrealistic expectations of Ideal Support from alternate sources, such as a Seniors' Club or a doctor. However this projected ideal may well be very important in terms of the experience of support and this idea is supported by Swickert, *et al.*'s (2002) finding that in certain contexts people's confidence in the availability of support may be more important in stress reduction than the reality of the support received. This study's participants' common experience of deep discomfort in burdening another is usually overcome with difficulty and only in times of real need. However the unease appears to lessen in proportion to what degree a source of support meets all the desired qualities of Ideal Support. In accordance with Ching Ying Ng, *et al.*'s (2000) finding that help-seeking behaviour is influenced by closeness of relationships, there seems to be a greater

perception of support for these participants and less discomfort in asking for and receiving support when the criteria for Ideal Support are fulfilled or almost met by a source of support.

The data analysis suggests that within the fantasy of Ideal Support are qualities that are valued and their presence in a support creates experiences of pride, gratification and satisfaction. When supposedly supportive relationships lack these qualities it is experienced with disappointment, bitterness, dejection, feelings of abandonment and pain. There appears to be a hierarchical quality to the desired qualities within this Ideal Support (see Figure 5.1. below) whose concept may be likened to the Hierarchy of Needs⁴ originated by Abraham Maslow in 1970. According to Maslow, humans have certain needs which are more basic and are therefore prepotent to, and nested within, higher needs. The lower needs must be fulfilled before a person can continue on to higher level needs. He proposed that as each need is increasingly fulfilled the next level slowly becomes the central focus of a person's conscious life and behaviour. Therefore the basic needs do not stop being motivating factors but rather, after they are mostly realised, they are replaced by higher needs as main motivating factors. In this way several needs actually motivate a person at any given point (Dawson-Squibb, 2002; Lester, 1990; Meyer, Moore & Viljoen, 1997; Williams & Page, 1989). Likewise, in Ideal Support it appears that some characteristics are perceived to be fundamentally required in order to provide adequate support. Other qualities are perceived to be less fundamental but their presence in addition to the basic qualities elevates the quality of support. The experience of any given support ranges from ideally fulfilling to adequate to disappointing depending on how many, and which of these qualities are fulfilled by that support.

4.4.1. Model of Hierarchy of Needs within Perceived Ideal Support

1) The most fundamental of these valued qualities appear to be *reliability and consistency* in all areas of support. Previous disappointment in, and painful losses of supports makes it difficult to

⁴ Maslow's proposed hierarchy of human needs is; physiological (food, water, air etc.), safety and security (routine and order, secure environment), belongingness and love needs (group affiliation, acceptance), esteem (for self and others), self-actualisation (beauty, peace, self-fulfillment) and transcendence (community of humankind rather than individual or national ascendance).

trust in reliability of sources of support and may result in sad resignation to taking sole responsibility for one's own support, in other words a feeling that support is non-existent. Examples provided of participants of consistent and reliable support provided by participants are regular phone contact from children at set times or a building maintenance man who is known to be available when needed.

2) The next level of need is knowledge that sources of support will *fulfil their expected role* as lacking such knowledge leads to uncertainty and a lowered perception of support. A source that is present and reliable may not necessarily provide the expected support. Role fulfilment described is extended family always inviting one for meals or holy days or the house cleaner performing her duties well.

3) The level of a source's *desire to provide the support* is crucial in determining the experience of the helpfulness of offered support. Offers of support which are consistently and clearly made with love are joyfully received. A high level of the support's desire to provide support creates a platform for the next level but does not presuppose it. Examples are children initiating contact, the Seniors' Club calling to check on one's well-being following one's absence or the doctor being available at night or for house calls if needed.

4) Sung (2004) found that *respect* was a key determining factor for quality of life of elderly residents. Participants in the present study appeared to include a need for respect from sources of support in their fantasy of Ideal Support. Such respect creates a space to retain one's *dignity* and this was experienced as highly valued. For instance a child foregoing their own need to feel at peace by placing their parent in a Residence in deference to their parent's choice or need to remain where they are.

5) A provision of a psychological space for self allows for independence, a quality that is very highly valued by the participants. Ideal Support includes *enabled independence* in that help is adjusted to one's specific requests and respectful of boundaries. This type of support is deeply gratifying and is unlikely to be possible without the former level of respect being satisfied. For instance a child providing encouragement to continue with an activity both telephonically and

financially, or the Seniors' Club organising transport at night to activities that would otherwise be inaccessible.

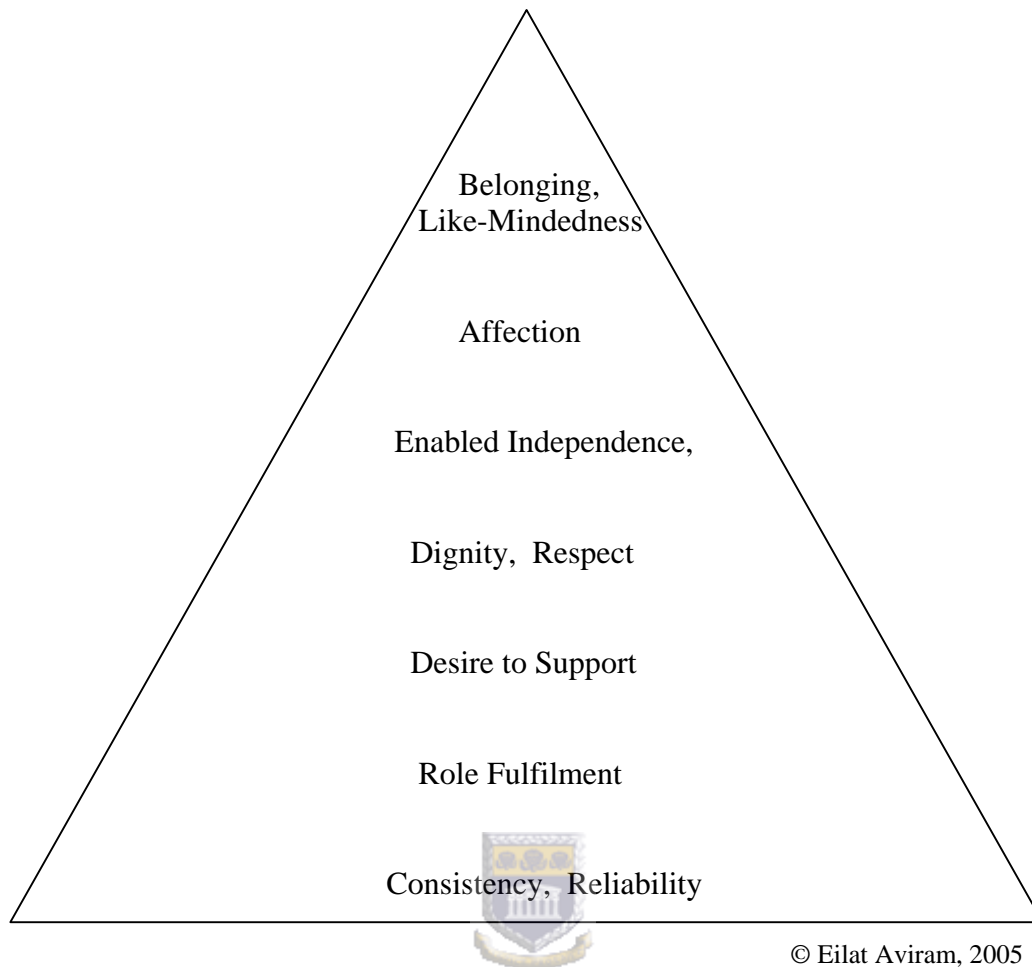
6) *Affection* appears to be a basic requirement of human beings. It does not appear to be perceived as essential for survival, but rather as a higher level need whose presence vitally elevates the quality and experience of satisfaction of the support. Examples described are grandchildren independently choosing to phone or an old friend dropping by to visit.

7) The highest level of the hierarchy of needs within Ideal Support is that of *like-mindedness* which leads to a sense of *belonging*. For example sharing jokes with one's child or being a regular active Bridge player.

To illustrate the functioning of this model, think of having a family who is consistent and reliable, they fulfil their roles by providing you with assistance if you need it. They want to help you and provide what you need, they respect your needs and your ways and encourage and support you in your independent life and, very importantly, you know they love you. However, despite all this you feel they really do not understand you and that you have little in common with them. The result is that while the support they provide is of a very high quality and may be greatly appreciated and helpful, it still leaves a feeling that something is lacking.



Figure 4.1. Model of Hierarchy of Needs within Perceived Ideal Support



To further illustrate the use of this model, certain values specifically reported by participants to be deeply satisfying such as mutual honesty about needs, loving support by choice, humour and expression of belief and pride in times of self doubt are respectively incorporated by the values of Respect, Desire to Support, Like-Mindedness and lastly Dignity and Enabled Independence. It is important to remember that this model relates to a person's perception of Ideal Support. As such, with each change of circumstance each level may be repeatedly tested in a person's mind. For example if a previously satisfying source of support overrides one's independence by making a decision without consultation, their Respect, Desire to Support, Role Fulfilment and Reliability come into question.

Maslow (1970 in Meyer, *et al*, 1997) has been criticised for the hierarchical aspect of his model in that the same priorities are not likely to be applicable to every person in every context (Dawson-Squibb, 2002). Some, such as Manfred Max-neef (1991) proposed circular models to attempt to overcome this difficulty, suggesting that the presented themes are most relevant and their level of importance can adjust to the given situation. It appears that this model suits the participants of this study. Perhaps other contexts would call for a circular version of this model but these are questions that require further research.



Chapter 5

5. Conclusion

5.1. Limitations of the study

The very small sample size, the specific cultural group and the fact that participants mostly live in the same area, clearly impacts on the generalisability of the results. It is unclear whether similar results would be found from Jewish Senior Citizens who experience the phenomenon in other contexts in South Africa. However the strength of this methodology is the in-depth qualitative information that it attains and this is the aim, rather than transferability. A quantitative study may be more appropriate if seeking to shed light on this topic on a larger scale.

The notion of phenomenological reduction can be tricky and some of my assumptions are likely to be implicit and, unbeknownst to me, may have influenced both the interviews and the analysis of the data.



Not all of the participants were interested in verifying their transcripts or the structures that emerged from the data. In addition some of those that engaged with the feedback process found revisiting the topic to be painful and therefore their feedback was brief. However the feedback that was received from participants did not change any of the findings so this is unlikely to have biased the results to the experiences of those who did verify.

It has been suggested in the literature that participants may not give true accounts of their experience. Although this is a possibility, phenomenology seeks to discover what the experiences are and imposes no specific hypothesis or theory. It would therefore be unlikely that participants would not speak honestly, unless they are trying to hide private failures or embarrassments (Giorgi & Giorgi, 2003). It is possible that some of the participants in this study refrained from mentioning certain feelings or thoughts due to feeling ashamed or believing they were too intimate to share.

However on the whole, participants were very forthcoming and honest and expressed appreciation

for the opportunity to talk about this topic. In fact, for some this voluntary self-disclosure later became a source of deep discomfort when asked to reread the transcripts for feedback. It is important to note that the use of phenomenology as a methodology to explore painful topics may create difficulties for participants later when they are asked to repeatedly engage with their interviews and give feedback. This is an important ethical consideration for future researchers thinking of using this methodology.

5.2. Conclusion

Literature suggests that family is extensively understood to be the main source of support for Senior Citizens (eg. Adam, 2000; Gomila Grau, 2002; Holroyd, 2001; Joseph & Hallman, 1998) and that, like many cultures and religions, filial obligations of care are expected by the Jewish tradition (Iecovich & Lankri, 2002). In the last decade South Africa has experienced increased emigration which has impacted substantially on the size of the Jewish community (van Rooyen, 2000). While emigration is not a new phenomenon for this community, Senior Citizens are less likely to emigrate (Godfrey & Kalache, 1989) and therefore these increased numbers suggest that the numbers of Senior Citizens remaining in South Africa without their children have also increased. The premise of this study was therefore that when Jewish Senior Citizens remain in South Africa after their children have all emigrated, their experiences of support would be different to those commonly expected if family was nearby. The phenomenological methodology was chosen in order to provide an arena for Senior Citizens' own experiences of such support to be expressed. The hope behind this was that more understanding would be gained, firstly about the challenges of this late stage of life, especially without expected support of offspring and secondly about what is experienced by Senior Citizens as beneficial and not beneficial in regards to support.

These participants' experience of being in South Africa after their children have all emigrated is one of managing aloneness, dealing with the loss of family and its accompanying sense of belonging. It includes constantly missing one's family, trying to keep in satisfyingly regular contact, trying to

comprehend, justify and accept their emigration in terms of expected intergenerational roles. It demands adjusting to constant changes in supports and in one's independence and identity and finding the motivation to strive to remain alive and find meaning in the painful situation. In the face of all this, there is also a finding of previously unsuspected new strengths in being able to cope with these difficulties and an exciting new liberation in catering only for oneself.

Emigration of children has had a strong impact on the Senior Citizens interviewed. All the participants expressed supporting their children's decisions to leave the country as part of fulfilling their parental roles and in the hope their children will have good lives. Therefore contrary to the common perception that these Senior Citizens are left behind, all actively enabled their children to leave the country and chose to remain in South Africa. However some of these participants find living far away from their children to challenge their identity as good parents or to punitively validate their 'bad' parenting. The majority secretly experience their children's distance as a negative comment on their relationships and on themselves, even if contact is frequent, and this can lead them to question their desirability. This feeling at times generalises into a dominant view that people do not really care for them or for each other.

Old age is known as a time when more satisfaction is gained from relationships than from activities (MacGregor, 2003) and it is therefore an especially difficult time for supports to fall away (Neven, 2003). Nevertheless, in line with the notion that old age is a time of turning inwards and of needing less busyness (Cruikshanks, 2003), a number of the participants experience satisfaction and pleasure in their own company and may choose it over unsatisfying company of others. However, experiencing pleasure in aloneness was found here to be influenced by having the choice to have company if desired. When that choice is unavailable aloneness can become painful. In the absence of Ideal Support that is fantasised to be fulfilled by family, the participants in this study turn frequently to avoidance coping in order to manage the loss. As the title "Making Oranges from Lemons" suggests, theirs is not an ideal situation and it is experienced as one that needs to be

accepted but then converted into something different and better. Therefore an aspect of denial of the actual situation appears to be experienced as necessary in order to cope. One participant's feedback was that using the metaphor of oranges and lemons for the title is not strong enough for this experience. She felt this experience fundamentally challenges the human capacity to turn obstacles into treasures and she likened her current experience more to breaking down a rock in order to make soil for growing grapes that will make wine.

Emotional support may not be experienced as needed in the form of talking and sharing of problems. While not talking to children about one's troubles may be distance-related or result from reluctance to burden them, not confiding in others may be also be a generational norm. One of the participants while discussing this said, "We never talked like in today's TV programmes. You young people talk about emotions."



In response to the premise of support experiences different to those that would be expected in the case of having nearby offspring, it appears that there is usually available support from a number of different sources but that this support, while at times satisfying, is experienced as not quite meeting an Ideal Support fantasized to be fulfilled by having nearby family. Nevertheless, although difficult, sources other than family can fulfil this Ideal Support. It appears that there is a hierarchy of criteria for such Ideal Support to be fulfilled, in other words a hierarchy of needs within perceived Ideal Support. This hierarchy consists of certain desirable qualities within supports and it seems a feeling of lack in support can arise in the absence of fulfilment of any of these criteria. These qualities can be summarized into order of their hierarchy to: Consistency, Reliability, Role Fulfilment, Desire to Support, Respect, Dignity, Enabled Independence, Affection, Like-Mindedness and Belonging. As in Maslow's Hierarchy of Needs model (Lester, 1990; Meyer, Moore & Viljoen, 1997; Williams & Page, 1989), these qualities begin from lower level needs that must be satisfied before the next level need is motivated for. According to this model, it is therefore possible to provide sufficient or efficient support without fulfilling the ultimately desired qualities of affection, belonging and like-

mindedness. However, while such support might fulfil basic requirements or even be very good, for example by meeting all criteria excepting like-mindedness, this unfulfilled need means it will still be wistfully experienced as lacking something.

Being without one's children in this late stage of life is difficult and in large part this appears to be due to a loss of the fantasised Ideal Support when children are absent. Whether or not they would have actually fulfilled this ideal if living nearby seems to be irrelevant. The pain experienced regarding support that feels less than what it could have been is essentially the pain of mourning the loss of the fantasised support. Interestingly it may be that the model of desired support is not only applicable to Senior Citizens living without nearby children. Other studies have found proximity and distance to impact on the frequency of intergenerational support (Joseph, 1998) but surprisingly, results of this study suggest that geographical proximity does not necessarily relate to quality of inter-generational relationships. The implication of this finding in relation to the notion of perceived Ideal Support is that there are possibly many Senior Citizens with family nearby that present with as great support needs as the participants of this study. Senior Citizens who have poor relationships with their children, or are given adequate support that is guiltily experienced as intrinsically unsatisfying, may also experience the loss of the perceived Ideal Support. While those who have adequate but unsatisfying support are not given a social forum to express this or see the fantasy clearly, participants in this study have lost the support society expects Senior Citizens to have. They are thereby socially justified in expressing the loss of what could have been and this group may therefore be more able to clearly perceive and express the fantasy. It is important at this time to highlight that the Ideal Support was not openly and deliberately expressed by the participants. Rather the qualities of Ideal Support and the wistful desire for its fulfilment shadowed much of each interview and became apparent only during analysis of the data. However when the results of this study were returned to the participants there was general agreement about their relevance and applicability.

Feelings of self-pride and emotional well-being are known to improve physical well-being, leading to improved health and independence (Frazier and Douyon, 1989; Rappaport & Seidman, 2000; Sung, 2004) and, one could therefore assume, a lessened burden on resources. It therefore appears to be in society's best interests to improve the qualities of supports for Senior Citizens by including as many of the qualities of Ideal Support as possible. Many of the abovementioned studies have also found that enabled independence, respect and affection are experienced as enhancing the general quality of life of Senior Citizens. In this case, these qualities specifically apply to enhancement of satisfaction with support provided.

It is important for sources of support to realise the impact their provision of support may have on the inner life and experiences of Senior Citizens in the position of being without their children nearby. As participants experience their identity to be at least partly constructed by their supports, it appears crucial that the qualities of such supports are carefully considered. For example the death of an old friend is experienced as the loss of a part of identity and belonging in the world. It appears that, as in findings of other studies (eg. Couture, *et al.*, 2005; Swickert, *et al.*, 2002), support perceived to be available can be more reassuring and supportive than actual support provided and the latter may subsequently be needed and used less. Knowing that there is somewhere to go when in need of assistance creates the security to try more things independently by choice, rather than necessity. This type of enabled independence leads to pride in self and greater autonomy whereas enforced independence leads to painful feelings of rejection and resentment. Managing to cope is experienced as providing self-pride and motivation to live and remain sane. In light of this the ability to cope needs to be supported. To provide gratifying support it is crucial for sources of support to leave psychological space for the self of Senior Citizens, something often overlooked in the eager attempt to provide 'better' support. Providing such a space for self implies respect for the individuality of Senior Citizens and means acknowledging that Senior Citizens can be the experts in knowing what will best support them. Therefore decisions regarding support provision are more likely to be experienced as positive and pertinent if made with their consultation.

5.3. Recommendations for Further Studies

It is not apparent from this research alone, what situations or characteristics in sources of support trigger the projection of the Ideal Support. Further research may be useful to understand the circumstances and consequences of such projections for both the supporter and those supported.

It is not clear whether the model and hierarchy apply equally to different contexts and age groups and this is something that may need further exploration. It may apply not only to people whose families live far away nor only to Senior Citizens. For instance one may try to apply this model to the support context of going to see a psychologist. The basic premise of such support is that there will be consistency and reliability (the therapist will be there for regular appointments), role fulfilment (the therapist will use his/her skills to help you), desire to provide support (she/he shows interest in your progress), she/he treats you with respect (maintains professional boundaries) and supports you in your independent life choices and actions (doesn't impose personal value judgements). If in addition to this you feel an affinity or like-mindedness with the therapist, the relationship has an added quality that assists in the therapeutic process. Without such affinity, the process may feel good and helpful but not deeply fulfilling. The factor of affection is more complicated in this uniquely professional intimate relationship and in fact its presence or absence is often questioned by the client, becoming an important theme in the therapeutic relationship. If the model applies within a supportive relationship such as this, which nears the level of Ideal Support, missing one criterion of the hierarchy may be confusing.

The application of this model in various support situations is something that calls for further research as it may give information on support provision that will be experienced as satisfying in different contexts. For example it would be interesting to establish the experiences of both formal and informal support of other population groups such as Senior Citizens who have lost their children to AIDS. In the interest of transferability more quantitative methods can be constructed

from the findings of the current research in order to access larger samples. Such research can assist in informing social policies in regards to how best to support this population group.

5.4. Note from the Author

In approaching people to discuss this research I found many to express interest but to be reluctant to engage with this threatening topic. It is frequently a frightening challenge for our society to face the notion of old age and its potential difficulties. However, although understandable, this fear and avoidance provides us with some insight into just how isolated Senior Citizens may feel within this society. Due to this it is imperative that we do engage with such topics. As ageing is a part of most of our futures, at some point we are likely to also require, and benefit from appropriate social supports set in place now for current Senior Citizens.



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Appendix A - Interview Protocol Guidelines

This interview schedule is a proposed guideline and questions may be phrased somewhat differently in accordance to the conversation with the participant.

Biographical Information

Name:

Age:

Living in: House, Flat, Other

Currently living with:

Children (names, ages, grandchildren, occupations before and after, country, reasons for and dates of emigration).

Reasons for remaining in South Africa.

Any other family in South Africa.

- a) Not all family relations are the same, some are close, some on good terms but not close and some are distant. How would you describe your relationship with your children before they moved overseas? Has it changed since they moved?
- b) Is family important to you? / What does it mean to you to be here without family?
- c) Where do you spend special days such as birthdays and religious holidays?
- d) To whom are you emotionally close? Has that changed since the family left?
- e) What would you say are your sources of support? / If you need help of any kind (fixing something at home, a lift somewhere, financial, sick, someone to talk with about a dilemma, a shoulder to cry on) to whom do you go?
- f) What sort of help do you find yourself needing?
- g) Do you help anyone yourself?
- h) What is hardest about being here without family?
- i) What gives you strength?
- j) Have there been any positive things that have come out of living here without family? / Have you learned anything from this experience?

Appendix B – Example of Data Analysis (Sheyna)

- P: "Look for instance now.... (21) Just to talk about the Friday nights. They know that I am alone and they've got their families. Why don't they phone me and say "Sheyna, we are coming to fetch you". You know. I mean these two?
- E: It's your friends that you are talking about?
- P: Yes. They don't.
- E: Have they ever? Did they sometimes and sometimes not?
- P: Once a year maybe. You see, so that's why I find these people have got their own families and they are worried with their families. I am not family of theirs. I don't know why but even my aunty, (22) I don't know why, I mean I am her niece. Whether it is by marriage, or what it is ...but she has Friday nights, and she has Sunday lunches or I go and visit her. She just stays up the road. She won't say Sheyna stay for lunch, where you going? Stay for lunch you're alone? She doesn't say She lets me go off for lunch and I come home alone and I eat on my own. (23) See, I don't like worrying people. I feel that I am a nuisance to them. I don't know why, there's a chip on my shoulder. But you do get that way. You feel that you are in the way of people. Maybe I've got a chip on my shoulder. I don't know, I am that sort of person maybe. Other people like being a nuisance I don't like being a nuisance.
- E: I am just wondering if
- P: It is a good thing or a bad thing? It is a bad thing!
- E: So you feel that it's a bad thing?
- P: (24) No, I want to tell you about Mary. She is married to a cousin of mine. Okay, maybe because she lives in Rondebosch, but it comes to Pesach, or it comes to Friday night... I meet her once in 3 months or 4 months for lunch because I want to keep that family contact. But otherwise I never see her.
- E: Do you initiate the contact?
- P: Yes. Most of the time I do. You see, that's what I say.... That family, I don't know what to say... I don't know how to put...you work it out! How do you get support? What must I do to get the support? Keep nagging and keep on contacting?
- E: Have you ever asked?
- P: No. I won't... I keep contact with everybody. I don't phone every week, you know. I'll phone them like once a month. If they're lucky I phone them once every two months.
- E: (25) Is family different to friends in that respect?
- P: I think ... you see .. the whole thing is Eilat, I feel, you know because I have 4 children and I lived in a community. I feel that I have always had a home. Friday nights we always had visitors at the table. Pesach we always had visitors, you know a Seder table, ... you can ask anybody.....people were always welcome at our place. Now I had my mother and father there too. So we were always a big family. And always Jewish orientated. (26) Now I am in Cape Town, why am I alone? Is it may fault? Or is it ... why am I alone? What...what is... When my brother was here...I had Purim, I had Pesach, I had, you know because he is not religious .. but he always had ...also he had a home and his wife... and they stayed here opposite me. They always included me. Now, I don't have Channukah, I don't have a Purim, I don't have anything. Why is that? Is it my fault? Even if I go to shul or I go to the things at the Club, I am still alone. I feel that I am still alone a lot ... that is why I am pleased that you asked me about this. I feel that it is a problem with me. It is a problem. (27) You know I get very heart-sore when it comes to holidays and that. Who is going to ask me? I don't even keep the two days (holiday) any more. I only keep one day because I don't want to know about the 2nd day. You wait for invitations. I don't want it, I always.... (28) I never waited for invitations. I always had people and we were always busy, busy, busy cooking in the kitchen."


Pg	Meaning Unit	Transformation 1 (Generalised)	Transformation 2 (Psychologised)
5	21	S states that her friends have Fri nights and she is hurt that they don't consider inviting her regularly. She states however that she cannot expect if of them as they have their own families to be concerned with and she is not part of their family.	S states that her friends rarely think to invite her to Fri nights and she finds this neglect hurtful. It makes her more aware that she is alone without family of her own and reminds her of what she is missing. She rationalises that her friends' duty is to think of their own families and that she is not owed that consideration from them as her role as friend does not afford her the same rights that their families have.
	22	S states that even if she is visiting at mealtime her relative does not consider that she is alone and invite her for Fri nights or Sun lunch. S states she goes home and eats alone.	S states her relative does not fulfil her role as family by considering her needs and inviting her for meals. She does not include S as her own.

23	S states she does not like to worry people and feels as though she is in people's way. She states she has become this way and feels it is possibly her own problem (chip on my shoulder). She is not happy with the way she feels and feels it is a bad thing.	S states she has learned through her experience of feeling a burden to people to be careful not to do so. She is unhappy to be in this position.
24	S states she has other distant relatives with whom she maintains occasional contact with effort and states if she did not keep the contact she would not see them. She states she makes the effort to contact everyone by phone regularly. She states she does not know what else to do to get the support of family without nagging.	S states she initiates regular phone contact with her distant relatives and makes an effort to see them occasionally. She states without her effort she would not see them at all. S states she is doing everything she feels comfortable with in an attempt to ask her family to fulfill their supportive role of her and own her as theirs but she receives no effort on their part that provides her with the feeling of support or belonging. She knows she belongs to them as family but they do not fulfill their roles as she does hers.
25	S states in her life she was always surrounded by family and a community that celebrated a Jewish lifestyle together. Since her family left she finds herself in CT without this experience.	S states she was always surrounded by a family and community and Jewishness to which she belonged and gave her an identity and clear role to play. Currently that has all fallen away and she is alone without clear role or identity that comes from belonging.
26	S states she feels very alone and she wonders if this is her fault. She is grateful that someone (interviewer) has asked her about this experience as she states it is a problem for her.	S states she wonders if to blame herself for her aloneness and is grateful that someone (interviewer) cares enough to ask her about this problem she has. All the people who validate her identity have fallen away and she is left wondering if something is wrong with/undesirable about her that makes everyone leave her. (am I who I thought I was? Have I changed so much? Once I was desirable now am I not any longer)
27	S states she becomes heart-sore when the holidays come around as she knows no-one will ask her and she will be alone. She has stopped acknowledging the full holiday in order to protect herself from the pain of not being invited.	S states holidays are a very painful time for her as she is reminded of what she is missing. Holidays were previously a time of family togetherness and many people. She feels rejected that she is not wanted/invited by anyone to join them for the holidays. She tries to deny the full holiday, which once meant so much to her, in order to protect herself from the pain of this rejection and aloneness.
28	S states she previously never had to wait for invitations but was in the position of inviting others. Previously this was a very busy time for her. Now it is very quiet.	S states that previously she was in the position of the one who invited and prepared but now she is alone. S states that she always had people around her table implying that she fulfilled her role in the past while others are not currently doing the same.

Meaning Unit	Themes	Meaning Unit	Themes
21	aloneness, missing, roles	25	family, identity
22	roles	26	aloneness, identity, change
23	burden, depression	27	aloneness, missing, coping
24	contact, belonging, roles	28	identity shift, power

Appendix C - Example of Data Analysis (Masha)

- A: Well lots of people have been living in flats and they can't live alone anymore and come to a place like this or whatever or you live in the suburbs, there are lots of places. There comes a time in your life when you can't live alone or you should not live alone. (42)
- I: So in terms of the practical services and things like that, what sort of things do you find yourself needing, I realise that you have to pay for everything
- A: It doesn't matter, that's the way it is
- I: So what sort of things do you find yourself needing?
- A: Well I don't want to do any house work for example I don't want to work anymore. I did it for 17 years on my feet and I never was a cook. I hate cooking. I know that I could cook but I don't want to cook. I make breakfast and I make my supper. I make my bed but I don't do my washing and I have someone who comes in and irons. She comes every Tuesday and does all the washing and ironing for me. I can take it down myself but I won't because I don't want to work, I had enough. Every six weeks she comes and chars properly and turns out the flat, what they don't do. (43) All I miss is having a good laugh. There's no friend here who has a sense of humour. I have a very good friend on this floor but she is totally humourless. Totally, and that I miss. So when my friend and I from Milnerton get together we have a lovely time (44) and every Sunday morning I have a marvellous time. Sometimes we speak for an hour on the phone.
- I: Do you speak to her on Sunday as well?
- A: No, no we don't have definite times we phone each other but I speak to (my son). He phones me Sundays mornings and sometimes we speak an hour, sometimes we speak, yesterday we spoke three quarters of an hour. We have a lovely time speaking. (45)
- I: You were saying that laughter is the best medicine
- A: Laughter for sure, if you can't laugh I think it's very sad
- I: It makes life harder?
- A: Of course it does! (46)
- I: So if I can ask you, what is the hardest for you being here without the family?
- A: What is the hardest? The hardest is not having somebody of your very, very own that you love and care about being close to you, not on top of you, not to live with you. Let's say (my son) came back, I don't want him to live with me, he wouldn't want to live with me either and I wouldn't like him to live in (my suburb) either. It's to close I think it's wrong.
- I: So distance is healthy?
- A: Distance is healthy yes, I think so.
- I: There's a difference between having family and friends here
- A: Of course, there's a big difference. They're not your own (47) but you get used to it. Anything is difficult if you make it difficult.
- I: The fear of it makes it harder like you said earlier?
- A: I don't like it, I wasn't well sometime ago I really felt it, (48) I tell (my son) if I'm not well, we promised each other that if we are not well to tell each other, otherwise you worry about things that you don't have to worry about. And I know if I am not well he will get on the next plane to be here, I know that, maybe it helps me, I don't know.
- I: So you are not completely alone in that?
- A: (49) No, I consider myself to be a very lucky mother.
- I: Sounds like you have a wonderful relationship.
- A: We have, we really have got a wonderful relationship. There are people who don't see their children from one week to another they don't see them. I am talking about those living here in Cape Town or wherever they live, they don't see their children. They don't even talk to each other once a week so I consider myself lucky. I am very fortunate considering there are six thousand miles between us and we haven't grown apart. For me that is a very great thing, it helps tremendously. (50) He is a great source of strength to me because you get the feeling its enough, I am old, I've had enough and then I think to myself but he is alone, he hasn't got anybody. Maybe that's what keeps us together so much I don't know.
- I: You are each other's only family.
- A: That's right. Maybe its that that keeps us so much together but that doesn't matter, the fact remains that we are together. I know that if I need him for anything he will be there to do it.

Pg Meaning Unit		Transformation 1 (Generalised)	Transformation 2 (Psychologised)
10	42	M states that she finds herself needing practical support with cleaning and cooking. This need for practical support is more choice than necessity as M states she is tired of doing these chores now.	M states she chooses to have practical support in the form of a cleaner as despite being physically able to do these activities she no longer feels obliged to do them and is grateful to pass them on to someone else to do.
	43	M states that what she misses most in the Home is laughing. She does not have a friend nearby she can laugh with, such as her friend who lives a distance away. She does get to laugh when she sees this friend.	M states that while she has what she needs practically she misses a certain quality of humour in her daily relationships. She misses the quality of humour that her distant friend brings to her life.
	44	M states she has a marvellous time talking to her child who phones her for up to an hour at a weekly set time.	M states she deeply enjoys the time she spends talking to her child who phones her weekly at a set time. They can speak for up to an hour and these conversations include much humour.
	45	M states laughter is very important and that not being able to laugh is sad as it makes life more difficult.	M states she finds humour an important coping mechanism and not having that makes life more difficult. She states she is sad for people who are unable to use humour to ease their difficulties.
	46	M states that the hardest part of being without family is not having someone of her very own to love and to care with and to be very close to. M states she feels family should not live too close and distance is healthy but she feels there is a big difference between the quality of the relationships with friends and family as friends are not "your very, very own". 	M states that the most difficult part of being here without family is not having the certain close quality in her nearby relationships that include an aspect of ownership. While she feels it is not healthy for families to live too geographically near, lacking this quality in her relationships with friends is the most painful aspect of being here alone. (<i>Thought - This aspect of ownership in a relationship also indicates an aspect of belonging. M does not 'belong' to anyone nearby and no-one 'belongs' to her and this perhaps makes her feel lost in her world, she has no clear role to fulfil if the people who 'belong' to her and to whom she 'belongs' are too far away for her to contribute significantly in their lives.</i>)
	47	M states that she has become used to this difficulty and states that anything is difficult if one makes it so. She states she does not like feeling this way and at times, such as when she is unwell, the feeling is stronger.	M states she has adjusted herself to her difficulty (not having someone of her own) and believes she is responsible for lessening or increasing the hardship for herself. She states that feeling the difficulty is unpleasant and that there are times she feels it more strongly such as when she is feeling physically unwell. At these times of physical weakness it is more difficult not to have someone of her own there to really care for her and makes her more aware of needing what is not available, the care of her child.
	48	M states she and her child have agreed to inform the other when they are physically unwell to spare the other worrying unnecessarily. M states she knows if she is unwell her child will immediately come to her aid and this may be something that helps her.	M states she and her child will be honest about when they need support from each other regarding physical illness. M states she is secure in the knowledge that her child will be there to support her if she needed it and she is aware that this knowledge may be a source of strength for her. She knows that her child cares enough for her to make a great effort to support her were she to need it. In this way M still very much still has someone of her very own who puts her wellbeing as primary. (<i>However this person lives far away. It would take him a long time to get here in an emergency no matter how fast he came so she is still alone in the short term.</i>)

11	49	M states she considers herself a lucky mother as she has a good relationship with her child and maintains more regular contact despite the large distance than many other parents who live near their children. M states she feels her relationship with her child has not become more distant after his emigration and this relationship is a great source of strength for her.	M states that despite her child emigrating her relationship with her child is closer than many others whose children still live nearby. She feels very lucky as a mother and values this relationship greatly. She finds it a great source of strength.
	50	M states that her relationship with her child gives her strength to continue living as she is also her child's only family.	M states that when she feels tired of living, her relationship with her child and not wanting him to be alone is what gives her will to live. Her child is her motivation. She states that her child and her common status of being each other's only family may be a factor in their close relationship but states that what is important is that they are together. M feels 'together' with her child despite the physical distance.

Meaning Unit	Themes	Meaning Unit	Themes
42	practical support, independence	46	belonging, changing roles
43	new freedom, missing, quality	47	coping, physical, family, missing
44	emotional support	48	support, belonging, practical support
45	coping	49	roles of mother and child, relationships
		50	living/dying, motivation, belonging

Appendix D - Form of Consent for Participants

EXPERIENCES OF SUPPORT OF SOUTH AFRICAN JEWISH SENIOR CITIZENS FOLLOWING THE EMIGRATION OF THEIR CHILDREN

Emigration from South Africa has greatly increased over the last few years and families tend to emigrate with their children but without their older parents. Emigration is not an easy decision, entailing a comprehensive life disruption including a loss of identity, personal and financial sacrifices and, most relevant to this study, the emotional impact of separating families. Many deterrents exist for Senior Citizens wanting to emigrate along with their children and grandchildren and these result in many Senior Citizens remaining in South Africa after their children have left for other countries.

The Jewish community is one that has been extensively affected by this trend and the emigration of offspring has left many Senior Citizens without family support. The Jewish religion emphasises the importance of family and the emigration of children without their elderly parents may be perceived as a new and disturbing phenomenon, heralding the collapse of the traditional Jewish family structure. This perception is not entirely accurate. Although the current wave of Jewish migration is historically unique in that it is not motivated by persecution in the home country, Jewish history is replete with accounts of international mass migrations. In fact, many of the Jewish Senior Citizens are themselves immigrants or the children of immigrants. In previous migrations, young men would emigrate first to establish themselves and then send for their wives and children. Only those who were financially able would also bring their parents, so elderly parents remaining behind after children emigrate is not a new occurrence. However, considering that Senior Citizens traditionally have expectations of children's care in later years and that most report turning to family in times of need, the current question arises, "On whom do Senior Citizens rely once their children have emigrated?"

The aim of this proposed study is to explore the Senior Citizens' perspectives and experiences of daily social (practical) and emotional (psychological) support. A phenomenological approach will be used to fulfil the aim of this study, which is to obtain a qualitative perspective of how Senior Citizens themselves view their current circumstances after their children's migration and where they now find social and emotional support. Phenomenology is discovery-oriented and aims to understand social phenomena from the actors' own perspectives and to describe the world as experienced by the subjects.

Significance of the Study

This proposed study aims to add to our limited knowledge base of human experience in late stages of life from the perspective of Senior Citizens. Furthermore, in the face of the widespread concern over population ageing and the hypothesised resultant burden on society, the voices of Senior Citizens themselves need to be heard regarding their needs for support. In South Africa the phenomenon of emigration as well as consequences of the AIDS pandemic is leaving many Senior Citizens without the support of family care. Knowing what Senior

Citizens themselves find most beneficial in providing care and support may help to inform future policy aiming to provide for Senior Citizens in this position.

Ethics

All participants will be informed in detail about the study and its aims and will be asked to give their written informed consent. Participants' anonymity will be assured and they will choose their own pseudonyms to be used in all the transcripts and recordings of the data. Participants will be given the option to maintain ownership of the recordings of their interviews following the study. Participants will be informed that they may withdraw at any stage of the process if they choose. Although the researcher will try to end the interview on a more positive note, the interview topic may raise painful emotions for some participants. The researcher will have a support service available to refer participants if necessary.

Informed Consent

I have read the above letter and feel I am well informed as to the nature and intentions of this study. I agree to be a participant in this study with the full understanding that my name will remain anonymous and that I retain the right to withdraw from the study at any stage of the process.

Signed: _____



Date: _____

Pseudonym chosen: _____