Nurses' Perception of Factors that Affect Social Engagement among Older Person in the Community

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Abstract: Nurses who are working with elderly play an important role in promoting social participation among the senior resident in the community, their perception towards elderly isolation is crucial in order to guide them in shaping their role. The nurses' perception of social isolation among elderly in the community was explored through a descriptive qualitative research approach. A focus group interview were used to collect data from 10(into two group) register nurses who work with older person in the community setting. Non probability, purposive sampling were used to recruit participants. The data were collated and thematically code, analyse and then present. Data were categorised into themes as they emerged. Six main themes derived from this focus group interview, These were: socio-environmental, health status, interpersonal relationship, Personality and cultural and Financial status. Social engagement among older person is affected by socialisation among the older community. Sharing same cultural and religious practice may enhance social connection among the older person. Health care provider should plan short term strategies to enhance participation in communities and should consider long term plan to empower them.

1 BACKGROUND

Social engagement has been associated with successful aging (Depp & Jeste, 2006). Rowe and Kahn's (1998) described social engagement as 'remaining involved in activities that are meaningful and purposeful' and 'maintaining close relationships. Emphasis should be made in establishing friendship in senior housing, and encourage the older adults to remain closely connected to more established groups of friends and family who live in the community. It is imperative to establish adequate policies that could support the full inclusion and participation of older adults in society to enhance high quality of life for our aging population (Robert, 2014).

The prevalence of social disengagement in Malaysia is rampant among older people. There are many factors influence the social engagement most of the previous studies has explore on the older people perception on social disengagement, but very limited study has explore the nurses' perception on social disengagement among older people which is consider crucial as nurses perception is important in order to plan the actual care for the older people especially in community setting. Hence the aim of this paper is to present the finding from a focus group with nurses from community based setting.

2 METHODS

The design for this study is qualitative design using focus group discussion. Purposive sampling was used to recruit 10 nurses who were working in the community setting in an urban area of Malaysia. All participants were female. The mean age was 36 years old. They were all master students at the time of undertaking this project. All the participants were able to speak English and Bahasa Melayu well.

Briefing was given to the entire participant prior to FGD session. Consent for participation was obtained from all participant and they were allowed to withdraw at any time and confidentiality maintain and they were told their name will be kept anonymous. Conducive room was identified to

conduct the FGD. An interview guide was prepared to guide the FGD session.

The data of focus group was transcribed into verbatim. Open coding began during data collection and transcription. The process of data analysis included coding, categorization and compression (Miles, et al.,2014). It was conducted by experienced researchers, namely the primary investigator and co-investigator. The data was presented to the participants, the primary investigator for cross checking. The data was organized using NVivo computer software.

The themes surfaced from data analysis were cross checked with WHO's *Global aged-friendly cities: A guide*. Meanwhile, to understand older people, who were born in different generations and cultural backgrounds, required understanding the cultural development which shaped their belief and perception of life.

3   RESULTS

Six main themes derived from this focus group interview, these were: 1) socio-environmental, 2) health status, 3) interpersonal relationship, 4) Personality and 5) cultural/religion and 6) Financial status. Each main theme is presented with subthemes.

1. Socio environmental
   - amenities and facilities
   - transportation
   - social safety
   - social activities (park dancing, qi gong)
2. Health status
   - immobility
   - Eye and muscle wastage.
3. Iinterpersonal relationship
   - family structure
   - mutual support from family member, spouse
   - friendship
   - Motivation from community figure head.
   - support from community health care worker
   - social media. whatapp, face book)
4. Personality
   - positive thinker
   - passive
   - Keep going
   - permissive
   - happy go lucky
   - autonomy
5. Cultural/religion
   - religious (close to god)
   - socialisation culture (melepak)

- window shopping
- chatting among neighbourhood.
- "gotong –royong (group activities)

4   DISCUSSION

The factors affecting social engagement among older people in an urban area of Malaysia as perceived by the nurses were consistent with the WHO's *Global Aged-friendly Cities Guide*, namely the availability of facilities, transportation, activities (which the seniors can gain information easily), close proximity, affordable activities, variety of choices for activities, having companies, health and interaction with neighbours. Nurses felt family support, such as spouse and family member support, would affect social engagement.

The nurses place social environment as key determinant for older persons' engagement with society, such as amenities and facilities, transportation, social safety and social activities (park dancing, qi gong). Unfortunately impede social; environment may indirectly hinder social participation among older folks, for example inconvenient transportation services where older people are relying on others to move about. Another issue is vandalism. There is a lack of care for public facilities. the environment are not friendly to older people According to National Older Persons Policy (2011), Malaysian government is committed to creating friendly service and conducive living environments for older persons (Department of Social Welfare Malaysia ,2011).

Interpersonally relationship may affect the social engagement of older person as highlighted by the nurses. According to Lim (2005) the older persons and immediate family may have ambivalent feelings between generations as a result of social changes, prevalent of nuclear families and work nature of younger generations. However the nurses form this study reported that the older person from their community was well supported by their family member and most of them were staying with their children. Most of them have positive thinking and paly active role in helping their children who are working. According to the nurses the family support have enable them to participate actively. They are few comments on the negative side of family support which refrain older people from engaging to society, for example who had lower socio economic status and depending on their children. Especially female older were preferred to remain quiet and tolerate with their children to maintain harmony with family relationship. Thus family support does

play key role in motivate the social engagement among older persons

One of the example is figure head (community leader) from the community to certain extend may have influence in encouraging social engagement by initiation of community activities. Support from support from community health care worker was viewed by nurses as important measure to the older community as most of them had deterioration in health status with immobility due to vision and muscle wasting.

The nurses also found social media such as whatsApp and face book has created opportunity to promote social engagement among the older community, the keep connecting via chat group and with family members.

The nurses' understanding on patterns of social engagement among older people from different social economic status would shape the influence of cultural values that would guide the behaviours. There were few unique culture and religion influence surface from the focus group. As family structure reforms as most of the children are working away from their parents' home, older people may need to migrate to a difference town to stay with their children or remain at home town. Migration may cause isolation to older people, as the social connectivity may be less when compare to rural area.

Two Malaysian studies had revealed that social changes may have negative impact on cultural values and the need for social engagement(Ong, et al., 2009 and Tey, at al., 2015). The nurses from this study felt religious would allow the older people to socialise with the community when they are engaging with religious activities. In some community the older people socialisation cultures were having fun time *melepak* (meeting and chatting with friends at the restaurant or coffee shop). Female older persons like to have "window shopping" or have fun doing marketing with their neighbourhood friends. The community folks were fond of doing activities together (*gotong –royong*), the older people were willing to help each other for activities like organising event or celebration.

Many studies has highlighted that sense of autonomy is essential older person to having cope with changes in later life stages(Wahl, et al., 2012, Greenfield, 2015 and Powell, 1985). In this study, the nurses explained that some female older people with low education seemed to be less autonomous to take charge and to initiate activities or engaging with society. The low level of autonomy in them has make them more acceptance top down instruction Lacking of autonomy to take charge could be a cue of colonial influence (Hirschman, 1986, Shamsul, 2001)

The implication of lacking of autonomy has far more implication than just older person's care. It imply for more caring society to nurture generation with more autonomy and prepare a more autonomous older persons in future. Autonomy comes with empowerment and acquisition of knowledge. Perhaps the health care provider will be able to foster empowerment to the older people in particularly in motivation social engagement and maintaining health.

Personality of older people may influence the their willingness to engage with society and more tolerance, for example older people who are more positive thinker, who are keep going and happy go lucky were those older people who are active in community. Unlike older people especially older female were passive and permissive had better tolerance as described by the nurses that remaining silent or avoiding conflict were coping mechanism for older people to live harmony within the multi generation differences .

5   CONCLUSIONS

The nurses from this study had identified many factors affecting the level of engagement among older people. The implication of this study has enlightened the community as whole the macro and micro systems of a society are interrelated. [16,23] Promoting a considerate cultures in all levels of society is fundamental to create friendly and conducive environments for all people especially for older people. It is also crucial to inculcate sense of responsibility among community members to safe guard the amities and facilities. Appropriate and relevant intervention and monitoring shall be implemented to ensure the older people are able to cope with their later life and maintain a good quality of life and engaging with society.

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