



MODULE 1

OLDER MEN'S ISSUES

TRAINING MANUAL

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Introduction to the Training Program

Welcome to The Older Men's Network Inc Training Program. This Training Program focuses on information which has been specifically developed in order to raise awareness of the specific challenges which face men as they move through the ageing process. For the purposes of all the Training Programs, the term 'older men' is used to refer to men aged 50 and above.

The Training Program has been separated into five Modules. Modules 1, 2 and 5 address issues facing older men such as ageing, retirement, grief and loss and suicide. Modules 3 and 4 focus on developing communication skills and team building appropriate to the facilitation of older men's groups.

Each Module includes a number of topics which would take approximately one hour if presented to a group. Some optional additional information and activities are suggested in places to enable the presenter to expand the presentation where appropriate. All of the ice-breakers, activities and discussion questions are suggestions only. Presenters are encouraged to tailor presentations to the specific needs of the group where possible.

Overview of Modules

Modules 1, 2 and 5 provide relevant information about issues which are very important but often overlooked in relation to older men. Staff in community organisations may find these modules useful for their own professional development or for delivery to older men's groups. The primary aim of using these modules with older men's groups is to encourage discussion and questions and support men to share their own personal experiences by finding a place of acceptance and understanding.

The first Module focuses on issues specific to older men, including approaches to ageing, myths and realities of ageing, the six phases of retirement, how to age successfully, recognising and combating social isolation and how to provide social support to older men. Module 2 focuses on grief and loss, in particular the stages and phases of grief, managing grief and how to support grieving men. Module 5 discusses the sensitive issue of suicide in older people and how to identify and respond to those at risk of suicide.

Modules 3 and 4 focus on developing effective communication and team building skills appropriate for the facilitation of older men's groups in the community. These modules can be used in situations where a men's group desires to become a more cohesive and supportive group for their members, or where there may be older men working as a team of volunteers who meet and interact regularly. The information in these modules aims to cover some of the areas most likely to enhance the functioning of group dynamics by addressing basic skills in communication and team building.

How to use this training material

This training material is provided to assist with the presentation of information sessions or facilitation of discussion groups around issues facing older men. The scenarios and activities provided are only suggestions and may be changed as needed by the presenter to suit the group or location of the training.

Every group should be informed that they are welcome to ask questions as the material is being presented and that they should feel free to discuss, agree or disagree with the information being presented.

Each Training Package provides training notes for the presenter, a session plan for a one hour presentation, handouts for photocopying and a PowerPoint slide presentation on a CD which can be used with a laptop and data projector to make the presentation more interesting and to help participants retain the information as it is presented.

This training material is not competency based and does not align with any Nationally Accredited Training Package.

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MODULE ONE: OLDER MEN'S ISSUES

Module One: Older Men's Issues covers six key topics:

1. Approaches to Ageing
2. Ageing: Myth and Reality
3. Phases of Retirement
4. Successful Ageing
5. Social Isolation of Older People
6. Supporting Older Men

Note to the Presenter

Before the presentation commences it is important to go through some simple introductory remarks to clarify any concerns that the participants might have which may reduce their ability to enjoy the session.

Start with welcoming the group to the presentation and introduce yourself to them. You may want to give a bit of personal background to help them feel that you have relevant experience in their issues and to help them get to know you.

Be sure to cover general housekeeping issues such as the location of the toilets; the expected finishing time of the training and the timing of any breaks if taken; the evacuation procedure in case of fire; the location of the exits and where participants can smoke safely.

It can also be useful to ask participants to set some ground rules prior to starting – things like showing respect to everyone even if their opinion differs from yours, no verbal or physical expressions of anger, respecting people's privacy and their decision not to share and maintaining the confidentiality of people in the group by not discussing what you have heard with anyone else. You may write these up on a whiteboard as they are suggested so that they act as a visual reminder to the group during the session.

Icebreakers

Many training programs commence with an icebreaker to help people feel more comfortable with each other, particularly if they haven't met each other before. Knowing other people's names is very important during group discussions to prevent embarrassment when referring to others and to help everyone feel part of the group and acknowledged.

The following icebreakers are optional activities which take anywhere from 2 minutes up to ten minutes to complete. The willingness of the group to participate can determine how long an activity takes but if they are enjoying themselves, it usually makes the rest of the discussion much more rewarding.

Even if some reluctance to participate is noted it is best to present an icebreaker as an enjoyable activity and proceed regardless, as hesitation on your part can make the group feel more uncertain about joining in. Usually reluctance is only due to people feeling shy and not wanting to stand out in the crowd. The icebreakers, refer page 8, were selected because they are fairly 'low-key' and non-threatening and should be presented as such.

A major benefit of using an ice-breaker to start is that some topic material is highly sensitive and may arouse feelings of grief, sadness and loss in the participants. Starting the session by 'warming' people up to each other will help the discussion flow more easily, start to build trust in the group and reduce the feeling that the participants are disclosing personal information to total strangers.

Feel free to select from the icebreakers included or to introduce your own. The Ice-breakers plus other excellent activities can be found in the book '*100 Training Games*' and '*103 Additional Training Games*' by Gary Kroenhert (1991, McGraw-Hill Australia, Sydney).

Suggested Icebreakers

Introduction Sheet

Time required: 10 – 15 minutes

1. Give each person a copy of the handout 'Introduction Sheet' (see below).
2. Tell each person to write their name at the top and then fill in the next 6 pieces of information.
3. When everyone has completed their sheet, the sheets should be pinned or stuck onto the front of their shirt.
4. Then everyone pairs up with someone else and they read each other's Introduction Sheet. They talk for 2 minutes and then change partners. Do this until everyone has met everyone else.

Ref. Kroehnert, G. 1991, *100 Training Games*, McGraw-Hill Australia, Sydney p. 30

Characters

Time required: 5-10 minutes depending on size of group

1. Begin by introducing yourself and the topic
2. Tell the group that you are going to go around the room and ask each person to introduce themselves. Then you will ask each one 'If there was a movie made about your life, who would you pick to play your role and why would you pick that person?'
3. Start with yourself and tell the group who you would pick and why.

Ref: Kroehnert, G. 2001, *103 Additional Training Games*, McGraw-Hill Australia, Macquarie Park p. 28.

Nametags

Time required: 5-10 minutes depending on size of group

1. Prepare nametags for each person and put them in a box.
2. As people walk into the room, each person picks a nametag - not their own.
3. When everyone is present, participants are told to find the person whose nametag they drew, introduce themselves and say a few interesting things about themselves.
4. When everyone has their own nametag, each person in the group will introduce the person whose nametag they were initially given and mention something of interest about that person. This helps participants get to know and remember each other.

Ref: <http://www.deskdemon.com/pages/uk/venues/icebreakers?cl=wn-jan-icebreakers>

INTRODUCTION SHEET

Name:

My favourite sport is:
animal is:
country is:
person is:
food is:
hobby is:

Name:

My favourite sport is:
animal is:
country is:
person is:
food is:
hobby is:

Name:

My favourite sport is:
animal is:
country is:
person is:
food is:
hobby is:

Name:

My favourite sport is:
animal is:
country is:
person is:
food is:
hobby is:

MODULE 1 – TOPIC 1 – APPROACHES TO AGEING

<p>Intro:</p> <p>5 Minutes PPT 1</p>	<p>Introduction: Approaches to Ageing</p> <p>With far more interest and focus on Australia's generation of ageing men and women than ever before, largely due to the significant numbers of Baby Boomers (people born between 1946 and 1964) retiring, there has never been a better time to talk about issues related to ageing.</p> <p>Governments, health care providers, retirement homes, insurance companies, employment agencies and a wealth of other businesses and services are racing to address the issues that will arrive along with our ageing population. Yet amongst this urgency to get things done, the unique aspects of what the ageing person himself is going through, is often overlooked.</p> <p>We understand that getting older brings with it changes in health, in occupation and often in lifestyle. We know that we can expect certain effects from ageing which we attempt to manage by various medications and therapeutic services. However the psychological changes, those elements related to ageing that we may struggle to come to terms with, are not usually discussed openly, if at all.</p>
<p>2 minutes PPT 2</p>	<p>The Focus of This Topic</p> <p>This topic aims to give us a broad understanding of some of the different approaches that researchers believe apply to the ageing process and the issues that may result from a person experiencing this process.</p> <p>The topic also provides an opportunity to discuss how these approaches can influence the way that the community, business, individuals and even our own families, may relate to older people and whether we have had any of these experiences ourselves.</p>
<p>5 minutes PPT 3</p>	<p>Adjusting to changed life circumstances</p> <p>Adjusting and learning to survive under changed life circumstances as an older man can sometimes be a challenge; one that many social services are now responding to. One of the major challenges for support agencies is that problems for older men do not appear in isolation. Instead they are linked to many other changes in the person's life. For example, losing a spouse commonly triggers a wide range of emotional, social and financial issues for the older man. Loneliness, loss of key social contacts, perhaps loss of mobility and access to caring support to help with medical problems, may all disappear</p>

in the blink of an eye with the person's spouse gone. Depression is a common signal for many older men that life will never be the same again and a new series of adjustments must take place. All these and many other issues including suicide and ideation behaviours are part of the challenge of growing older.

However, as the saying goes "*Growing older is mandatory, growing up is optional!*" Ageing also provides us with a unique opportunity to reflect on where we have been, by accepting who we are and what we have learnt along the way.

Topic 1: "Approaches to Ageing" provides some of the context with which we can look at the broader issues of ageing. You may not agree with all of them; even the best researchers in the world do not all agree on these approaches! What the various approaches do however is allow us to step back from our own immediate experience and see what ageing can be like through the eyes of society. You may have experienced some of the very challenges that we will be talking about – challenges which have seen a shift in the status of an older person as a once valued and essential contributor in society, to a person whom society now seems to view as a problem waiting to be fixed.

5 minutes
PPT 4

Disengagement Approach

The first approach that we will be discussing today is Disengagement. Simply put, this approach suggests that ageing involves an inevitable withdrawal or disengagement from other people and social networks, resulting in the older person spending more time alone.

The older person may start to disengage from friends and networks or the networks themselves may disengage first. For example, how many of you kept in regular contact with your work colleagues once you retired? Sometimes you may try to keep up the contact and the social networks you had for many years, but gradually those still at work assume that you have better things to do and you stop being invited to the social gatherings. In this way, your social network has started to disengage from you, often whether you like it or not.

Most commonly, it is when the person gives up their major role in life, like their occupation for most men, or when the children leave home for women, that results in the quality and quantity of their interactions with other people being reduced. For women, this can happen over time, but with men it is often very sudden and abrupt.

The disengagement theory also suggests the person looks forward to this time of withdrawing, by being released from the pressures of work and not having to keep up the level of productivity associated with being at work. Similarly there is a suggestion that by withdrawing from work and other people, older people allow younger, more energetic and more recently trained people to step into their old jobs.

People who are disengaging from different areas of their life, whether gradually as ageing makes it more difficult to do the things you used to do (like play a sport) or abruptly such as when retirement occurs; will manage the withdrawal differently depending on their previous experiences of coping with change. Redundancy may impact differently on those who experience it.

Different personality factors may make a person more or less likely to disengage from others. People, who have tended to turn inward and protect themselves from the world when they experience stress, will probably continue to do this. However people who have generally remained engaged with others may change some of their activities but will generally continue to seek out relationships allowing them to resist disengagement fully.

10 minutes
PPT 5

Questions for Participants

What are some of the benefits from disengaging from other people? What are some of the disadvantages?

What has been your disengagement experience in later life?



5 minutes
PPT 6

Activity Approach

The opposite of disengagement is activity and this approach suggests that normal ageing involves maintaining as long as possible, the same activities and attitudes that you held in middle age. This approach suggests that older people will find substitutes for those activities and roles that they might have had to give up at retirement.

Being 'engaged' in life in Australia generally means to be active and productive. A successful life is one that has been filled with work, volunteer

activities, family responsibilities, hobbies, sport and many other things that occupy our time. We can see evidence of this in our children and grandchildren who are busier now than ever before by attending weekend sport, music classes, social events with friends as well as numerous school activities.

The activity approach is build on the old saying "I'd rather wear out than rust out!"

The activity approach also assumes that the relationship between the social system and the individual remains fairly stable as the person moves from middle to older life. There is a tendency for people in older age to still view things in middle age as desirable for themselves, even though they are much older now. An example is that many retired women still refer to themselves as 'middle aged', despite being past what is typically understood to be middle age.

One real problem with the activity approach is that it doesn't seriously consider what happens to the person who cannot maintain the standards of middle age in the later years. For example, if an older man accepts the belief that he must remain as active as he was in his 40's, but at the same time experiences the usual signs of ageing such as physically slowing down and an inability to maintain the same level of physical fitness he had when younger, ageing can end up being a very frustrating, anxious and guilt producing time.

10 minutes
PPT 7

Questions for Participants

What do you think might be some of the concerns that people have when they can't remain as active as they were at middle age?

How might an older man replace earlier activities with more age-appropriate activities?



5 minutes
PPT 8

Modernisation Approach

The modernisation approach suggests that as cities have become more industrialised and modernised, the power and influence of older people has

been gradually lowered. Older people are no longer receiving the respect and status that they used to in relation to their leadership, power and influence in the community and in the family. For example, John Howard was seen by many voters to be too old for the Prime Minister's job at 68. Mature aged people are struggling to find work yet the skills crisis is so great that there should be plenty of jobs. The Australian Government has recently introduced advertisements 'selling' employers on the benefits of considering older people for unfilled positions by highlighting their skills and knowledge in many areas.

Modernisation has also resulted in older people being increasingly excluded from community life. Social activities in communities are largely targeted at the young and many family events are not designed with older people in mind. Large outside venues do not have suitable accessibility for older people; wheelchair access is severely limited; public transport does not go to many locations making it too far for older people to walk if they no longer drive.

Another way that modernisation has resulted in a loss of power and status for the older person is the massive increase in the use of technology to do work previously done by people, and the requirement to keep up with the constant changes in technology in order to maintain a job.

With young people currently growing up with computers, their knowledge and skill and the degree of ease with which they pick up the new technology, easily surpasses anything that older people can do. Young people are commonly teaching their grandparents how to use the internet and email and parents of teenagers are relying more and more on the young to learn how to use various programs. With young people now becoming more educated than their parents, the older person may be seen as less useful. Their knowledge and skills are often outdated and irrelevant to the new modern approach to work.

As cities have filled up and more people are moving from place to place, families have been segregated from each other, many choosing to leave older people in their original community or a residential setting, visiting only occasionally. The distance created between families enforces a loss of contact between parents and grandparents, reducing the ability of the older person to pass on stories of family history and wisdom. Having lost this function, the older person may be viewed as more of a burden than an asset.

5 minutes
PPT 9

Questions to Participants

Where has modernisation affected your status as an older person?

As an older person, how have you responded to the challenges of the modern world?



5 minutes
PPT 10

Ageing in Our Society

There are essentially 2 stages of looking at how society has viewed ageing and how it has treated older people as a consequence of these views.

Stage 1 covers the period from the end of World War II (1945) to the 1980's. At this stage, the life cycle of socialisation (ie connecting with others, making friends and sustaining relationships) was work-driven. But the negative consequences of this narrow work-driven social context for older people was that when they retired, the roles and leisure time of older people were not valued or recognised as legitimate pursuits the way work was.

In **Stage 2** which covers from 1980 onwards, there has been a focus on creating changes in attitudes to older people in particular and an awareness of new leisure possibilities. These new attitudes have means that society today places more emphasis on leisure with greater opportunities for older people as a consequence, mostly in the community. Education is the key to this process.

Gradually we are seeing new information being presented about the nature and significance of leisure by encouraging older people to be involved in productive community activities. The messages increasingly are that older people have a great deal of worth and value and their leisure needs are important and valuable. This is resulting in changing patterns of behaviour among older people who are finding it more acceptable to be involved in leisure activities and are therefore participating more actively in a range of community interests.

Ultimately it is possible that social isolation experienced by many older people will be gradually reduced, resulting in less disengagement from society due to getting older. Stronger social support networks will be formed; much like the networks formed at TOMnet and greater options will be available for how

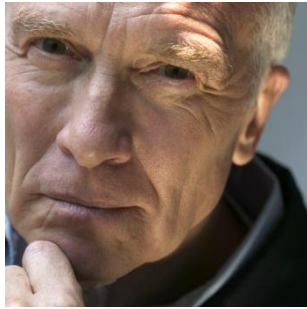
older people can remain engaged with family, friends and their community. Older people are increasingly being recognised as a significant resource contributing to community.

5 minutes
PPT 11

Questions for Participants

What could your community do more of to include older men?

What more can older men do to contribute to their community?



5 minutes
PPT 12

Closing the Topic

Recap on topic covered by asking the question “Did we cover everything?”

- If there is time ask for any last minute questions.
- Hand out an evaluation form if required.
- Thank participants for their attendance and provide them with your contact telephone number or brochure if they should need to follow up with you.

OPTIONAL ADDITIONAL DISCUSSION MATERIAL

There are many other different approaches, or theories, about ageing in addition to the ones discussed above. Whilst it is not our intent to try to cover them all, the ones below may be of further interest to a specific group or may be ones that participants have used or heard of previously and wish to discuss.

Human Development Approach

The Human Development approach commences from the perspective that it is the sum of experiences of an entire life that shape an individual's perception about growing older and therefore will also shape their attitudes and how they adjust to their later years.

Erik Erikson in 1964 identified eight stages of human development, the last

two being middle adulthood (35 - 60 years) and later adulthood (60 years – death).

Middle Adulthood at ages 35-60 typically involves work, the community and family. This stage is about us having a sense of contributing meaningful work within the context of the community and as a sustaining and centralizing force in the family. By doing this we may discover generativity, which is being concerned about establishing and guiding the next generation. If however, we are self-absorbed and not productively involved in meaningful work at home or in the community, we become stagnant and therefore will not add to the welfare of future society.

Middle Adulthood is critical to a person achieving a sense of fulfilment in life. Not coping with this stage is likely to result in bitterness, stagnation and physiological and emotional decline.

The final eighth stage of development involves late adulthood or old age. As we mature and head into retirement, we face the fact that we are physically ageing and that mortality is no longer an abstract thought at the back of our minds, but a prospect we all must accept. We retire from our work, our children leave, and we find ourselves confronting our past, our victories and our mistakes. Here we hope to be able to recognise that our children provide the continuity of life between our self and the newborn generation.

If we can accept death without fear and look back upon our lives with shared wisdom, we achieve a feeling of integrity. If we cannot, we experience despair, and we face death with bitterness and anger. The fundamental question is “What kind of life have I lived?”

Continuity Approach

The Continuity approach is based on the belief that individuals will try to maintain his or her preferred lifestyle as long as possible, based on the patterns of behaviour that they have adopted throughout life. These patterns include continuing to use the same habits, preferences, behaviours, relationships and lifestyle that the individual has developed over the years.

Continuing to hold these same behaviour patterns into later life helps a person adapt to the changes they face by providing a sense of stability. This approach does not insist that a person must disengage from life or remain actively involved in order to be well adjusted in later life. Rather, it is the stability of the habits and preferences we form over a lifetime which is simply

continued – even if this means that to do nothing is the preference to continue.

Age Stratification Approach

The Age Stratification Approach essentially suggests that society is divided on any number of bases and one of these is age. People of different ages are given different roles, status and respect in different societies. In our Western society we generally give older people less status as opposed to traditional Asian societies where older people are given higher status and the more important roles.

This theory is often applied to particular age groups rather than individuals within the group. For example, the Baby Boomer group (people born between 1945 and 1964) are currently treated very differently by governments, employers and social researchers as they find that the group as a whole have shared similar experiences and are looking for similar new adventures in their older age. When researchers look at a whole group, larger advantages and disadvantages for the group can be seen.

Ageing as an Exchange Approach

Ageing as an exchange theory suggests that as people age, their relationship with society changes from one of mutual exchange (where the individual can reap desired goals and assume the necessary costs) to one where the older person has less to exchange. With less to exchange the power of the older person over their social environment is gradually diminished until all that remains is the humble capacity to comply.

Instead of the person being able to exchange skill, knowledge or expertise for needed wages, the final exchange becomes one of compliance with mandatory retirement in return for social security, retirement pensions and Medicare. As the worker's own skill or expertise becomes outmoded or its value reduced, the worker increasingly has less to exchange of value.

The danger for the older person is that this unbalanced exchange relationship becomes institutionalised and thereby the process becomes the norm for future unbalanced exchanges.

References

Cox, H. 1993 *Later Life: The Realities of Ageing*, Prentice-Hal, Inc. New Jersey, USA.

Earle, L. 1996, *Successful Ageing in Australian Society – A Community Development Challenge*, Recreation for Older Adults (ROA) Inc., Adelaide.

MODULE 1 – TOPIC 2 – AGEING: MYTH AND REALITY**5 Minutes
PPT 1****Introduction: Ageing: Myth and Reality**

Ageing begins at the moment of birth and continues over a lifetime. Every person experiences the ageing process in a different way, depending on their gender, culture, education, geographical location, environment and the many different life experiences they have had.

Older people are now enjoying many improvements in health care and general living conditions with breakthrough technologies occurring daily in relation to disease prevention and cure and the control of infectious diseases as well as the message that 'living well' should be applied continuously as we age and not just at the earlier stages of life.

As Australia moves into being a society with a record number of older people in the near future, it is also struggling to deal with the results of many myths which continually perpetuate the media and the thinking of the larger general population about older people. Most people are very conscious of the types of behaviour expected at a certain age. This would not be a problem if these beliefs did not result in a range of stereotypes about older people and the things that older people supposedly can and cannot do.

Due to these stereotypes, many older people find themselves the unwilling participants in decisions which are made for them on the basis that, being older, they are no longer as 'useful' to society. Decisions such as when is an acceptable age to retire; when is it too late to be retrained in a job; what types of activities are acceptable for older people to do and how much can you expect them to do are all questions which relate to myths that downgrade a person's capacity based on their age.

The myths of ageing include broader general perceptions of being old such as older people being in poor health or disabled; losing their memory or being senile; having little to contribute to others and being boring and cross; having no interest or desire in sexual activity; and being unable to keep up with activities that require some of the stamina of previous years such as sport and mental challenges.

**2 minutes
PPT 2****The Focus of this Topic**

The presentation today aims to provide you with information which will help you gain an understanding of some of the myths and the realities about ageing.

We will be discussing how these myths can influence the way older people are perceived by others and what we all should be doing to help dispel them.

2 minutes
PPT 3

Facts About Ageing

Ageing is a natural process and should be welcomed because the alternative would be premature death.

Health is vital to maintain well-being and quality of life in older age, and is essential if older citizens are to continue making active contributions to society.

The vast majority of older people enjoy sound health, lead very active and fulfilling lives, and can muster intellectual, emotional and social reserves often unavailable to younger people.

5 minutes
PPT 4

Definition of Ageism

Ageism is the stereotyping and prejudice against individuals or groups because of their age. Ageism influences the community's perception of ageing and older people by suggesting that the older people get, the more inferior they become.

"Ageism, like racism and sexism, creates its own self-prophecies and promotes lifestyles that damage individual potential. It is a cumulative process: the older people get, the more inferior they are assumed to become, and the more difficult it is for them to swim against the social tide that can easily swamp them" Job, E (1984).

Q. Can you recall any ageist jokes or comments made about you or someone you know which made you feel less worthy as a person because of your age?

10 minutes
PPT 5

Myth or Reality?

Presenter Notes: *The following section can be introduced in different ways. The PowerPoint slides enable you to use this section as a straight question and answer discussion, where you ask the question and the group is asked for their collective responses, which you can add to from the slides and your own knowledge and examples.*

Alternatively, the myths could be written up on cards and divided between several smaller groups or pairs of participants. Each group discusses one or more of the myths, writing down some key points. When each group has had time to gather their responses, they are asked in turn to tell the others what

the myth was and share their responses to confirm it as a myth or a reality.

Myth- Older people are all the same.

Reality -People age in unique ways, depending on a large variety of factors. They are as diverse as any other category of people and in many cases become even more diverse as they age. The ageing experience means that they have come from a broad spectrum of backgrounds, achievements, personal resources and insight which makes them far more interesting to speak with than younger people with far less experience in the world.

M - Men and women age the same way

R – Men and women experience ageing differently as a result of the different roles they have undertaken throughout their lives. Women generally live longer than men and experience different health outcomes.

Q. Why do you think women generally out live men?

As death during childbirth has decreased and industrialisation meant that more men worked in unsafe and risky environments, the rate of women surviving men has increased gradually. However women experience more chronic disease because of their longevity.

10 minutes
PPT 6

M - Older people are frail

R - Most older people remain physically fit and well into later life. Growing old does not equate to being sick or disabled. In 2003, only five percent of people aged 60 and older were in a nursing home or hospital. For most this didn't become a necessity until they were past 85. With many health preventative programs now encouraging older people to remain active and avoid falls, the image of the frail older person is gradually diminishing.

Q. Who do you know who is leading an active healthy life at an older age?

M - Older people are an economic burden to society.

R – This myth stems from the belief that as older people retire they stop paying tax and therefore are 'taking' from the tax system rather than 'contributing'.

Q. Can you think of some ways that older people continue to contribute to the economy?

Some of the ways that older people contribute to the economy includes the retention of mature aged workers in employment and the continuing taxation paid by retired people through the Goods and Services Tax (GST), income, investments and the many leisure and travel options now experienced by

older people.

Older people also contribute in innumerable ways to the economic development of their societies through volunteering and caring. It is estimated that older people aged 65 and over provide an unpaid contribution of almost \$39 billion per year to Australian society. Older Australians are also generous givers and make many charitable donations. Unlike the new myth, they are not 'spending the children's inheritance' and are primarily finding themselves a balance between their previous form of contribution and their new one.

10 minutes
PPT 7

M - Older people don't participate in many activities

R - A national survey of people aged 55-77 years found only 2% of people had to little or nothing to do. Older people are the one group with more organisation social outings and community activities than any other.

Q. How many activities do you attend in a week?

M - Growing old inevitably leads to loneliness and withdrawal from society

R – This myth encourages the belief that older people simply sit at home with nothing to do once they leave paid employment. It suggests that older people chose to disengage from their friends, family and general society and cease to participate in their previous interests.

This is definitely not the reality for the vast majority of older people who stay in touch with friends, family and have more organised outings and community activities than any other group of people in society. Loneliness is not associated with getting older. Solitary activity still provide mental stimulation and voluntary activity gives people a sense of worth and value by giving something back to society.

Research that tracked people over many years, some until there were 80, found that those who were goal directed in midlife tended to continue this trait will into their later years, highlighting the important relationship between their self concept and continuing rewarding interests.

Q. How do you respond to men who are lonely?

10 minutes
PPT 8

M - It's common for older people to live in poverty

R - Like people across society, older people exhibit considerable diversity in their economic circumstances. People aged over 50 are more likely to have lower incomes but they also have high rates of home ownership with 70 percent of those aged 65 and over owning their home. Home ownership is an

important factor that contributes to wellbeing. Financial stress generally declines as people age and those that experience greater financial stress are those that are aged over 65 and living alone.

M: Older workers are slower and less productive than younger workers and older workers prefer to retire early

R – Recent government policy changes to encourage older workers to stay in employment are a positive sign of reinforcing the usefulness of older people. It is unfortunately common that mature aged workers are the ones most likely to be retrenched or encouraged to take redundancies due to organisational discrimination. Research has shown that many would have preferred to remain in the workforce rather than experience redundancy or forced retirement.

The myths about older workers range from being old to keep working; not caring about their employer; taking lots of time off; wasting training on them when they are about to retire and being 'technophobes' who are unable to use new technologies.

However mature age workers have been shown to have much needed experience, a commitment to quality and lower rates of job turnover, absenteeism and accidents than younger workers. In the U.S.A. studies have shown that the greatest growth in internet usage is in the older population which has grown from 19 percent to 38 percent of the total internet audience.

10 minutes
PPT 9

M- Older people are asexual

R: Whilst the myth is that older people have no capacity for or interest in sexual activity, the reality is that many older people want, and are able to lead an active, satisfying sex life. Many older people agree that while needs change over time, a sexual relationship can still be physically and psychologically beneficial.

The capacity for and interest in sexual activity at any age can be influenced by disease, medications, psychological, social and cultural conditions as well as religious beliefs, but does not necessarily disappear with age. The saying 'Use it or lose it' still applied as less sexual activity will contribute to decreased interest and a diminished response and possibly to a decline in the person's overall sense of wellbeing.

Q. Has a relationship been important to your health and wellbeing?

M - Older people are more likely to be victims of crime than other age groups

R - There is a strong belief, even amongst older people themselves, that they are more likely to be victims of criminal assault and robbery than any other group. However the reality is quite different. Compared to the whole population, people over 65 have the lowest rate of personal offence victimisation. The 55 to 64 age group accounts for only 3 percent of victims of common assault, sexual assault and robbery whilst those over 65 account for only 2 percent.

Q. Why do so many people think it is higher?

Older people do have a disproportionate anxiety about crime and becoming a victim, possibly due to the exposure and influence of the media in their lives. However it is interesting to note that older people who are most active and involved in their community are the least likely to be anxious about crime.

Generally older people are more likely to be victims of consumer fraud and sometimes fraud from within their own family in asset management. Those who must rely on the trust of their families when handing over responsibility for money and other assets are at risk when family members do not handle these affairs in the manner in which it was intended.

2 minutes
PPT 10

Closing the Topic

Recap on topic covered by asking the question "Did we cover everything?"

- If there is time ask for any last minute questions.
- Hand out an evaluation form if required.
- Thank participants for their attendance and provide them with your contact telephone number or brochure if they should need to follow up with you.

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MODULE 1 – TOPIC 3 – PHASES OF RETIREMENT

5 minutes
PPT 1

Introduction: Phases of Retirement

Retirement is a time of change. From adjusting to the change of pace of your day and changes to your social contacts and new responsibilities, retirement puts many men in the challenging position of rethinking all that they once knew and took for granted about their day. As the author Jack Zinn says in his book *Older Men's Business*:

"Most of us...just quietly disappear from public view. We may enjoy the feeling of anonymity and the release from major responsibilities that age sometimes brings, but nevertheless look back over the years with a degree of nostalgia and wonder what it has all been about."

This is just one way to describe the effects of growing older and moving out of the world of work into the new world of retirement. Many research studies and anecdotal evidence suggests that men do not start preparing themselves for retirement early enough. The unexpected suddenness of change for those that do not adequately prepare, can often push men into depression and anxiety as they find that their routines have disappeared and new ones need to be discovered.

Research also suggests that there are a multitude of problems confronting the individual at retirement. Lowered income; loss of status, privilege and power associated with the previous work position; a major reorganization of life activities without the normal 9 to 5 routine; a changing definition of oneself as all that was typical has been replaced; considerable social isolation if new activities are not found to replace work related activities and a search for new identify, new meaning and new values in life.

Adjusting through the transition of work to retirement is influenced by the degree to which someone felt their identity and personality was tied to their previous work role. Where a man's identity at work was central to their concept of who they were as a person and the satisfaction they derived from life because of their work, retirement may well be a crisis. For others, retirement may be more welcomed.

2 minutes
PPT 2

The Focus of this Topic

The presentation today will examine six phases of retirement and discuss

issues affecting men who move into the retirement role. The word 'role' is significant. It implies a dynamic experience of life after work, the opposite to a terminal static state of inaction, futility and frustration.

5 minutes
PPT 3

The 6 Phases of Retirement

Robert C. Atchley (1976) is credited with identifying six phases of retirement that people may pass through as they progress along the work-retirement continuum. The six phases are:

- Pre-retirement
- Honeymoon
- Disenchantment
- Reorientation
- Stability
- Termination

5 minutes
PPT 4

Phase 1: Pre-retirement

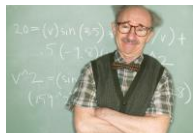
The first phase is pre-retirement where a person becomes aware that retirement is approaching and may begin to save money, daydream about what he will do and vaguely prepares for the event. People often progress through two stages of pre-retirement. The first is the 'remote' stage where retirement is vaguely seen as something positive that will happen someday. The second stage or the 'near' stage is where the individual starts to move towards a specific retirement date.

Two things may happen in the near stage. First, the individual may prepare for separation from their job and the social situation of the work place. They may adopt a "short times attitude" with their job appearing to be more burdensome or alternatively they may step up efforts to achieve objectives and tie up loose ends before retiring.

Second, the individual may develop detailed fantasies of what they think retirement is like. These fantasies may be realistic or unrealistic. Realistic fantasies can smooth the way to retirement whereas unrealistic ones can lead to rough and tough transitional processes.

10 minutes
PPT 5

Discussion



Question for Participants:

*At your pre-retirement phase, what did you imagine retirement to be like?
How did you cope with the wind down period in the near phase?*

Discussion Points:

You may wish to draw out the men's feelings of uncertainty or expectation; their preconceived ideas and fantasies about what they might do with 'all their spare time' and any worries they may have had in regard to stopping work.

Try to find out what tactics they used to either hurry work along once they had a retirement date or what they may have done to slow the time down to avoid retirement. What did they feel as the date was nearing? In hindsight, how did these feelings match up to the reality of what retirement was like?

5 minutes
PPT 6

Phase 2: Honeymoon

The honeymoon phase starts immediately after retirement and may last 6 months to a year. It is marked by the person wallowing in their new found freedom. During this euphoric period the individual tries to "do all the things I never had time for before". A retired person going through this honeymoon phase typically says "What do I do with my time? Why, I've never been so busy!" Extended travel is common in the honeymoon phase.

Some people do not go through a honeymoon phase. For one thing, a honeymoon requires a positive orientation. It also requires money, a scarce commodity for some older people. Most people cannot keep up the hectic pace of the honeymoon indefinitely, and they soon settle into a retirement routine.

If the individual is able to settle into a routine that provides a satisfying life, then that routine will probably stabilise. People whose off-the-job hours were full prior to retirement can often settle into a retirement routine fairly easily. In contrast are those whose honeymoon experience is one of rest and recreation – R & R. This is a period of taking it easy for a time. However, after sufficient R & R and reflection on their situation they begin to try other retirement activities.

5 minutes
PPT 7

Discussion

Questions for Participants

How did you feel straight after you retired? What value did you find in the honeymoon phase?

If you skipped the honeymoon phase, what would you have liked to do if you had the resources to do it?

Discussion Points

This phase may be filled with wonderful memories or be a bitter disappointment for those that missed out due to a lack of money, time or due to other circumstances such as ill health or disability. The loss of significant others greatly impacts upon this phase. Therefore it is important not to assume that everyone has had a great time and travelled the world. For those that missed out, try to elicit the feelings of the person at the time by asking about how they coped with moving straight from work into their retirement life without having the experiences that others had.

5 minutes
PPT 8

Phase 3: Disenchantment

For some people – fewer rather than more – once the honeymoon is over and life begins to slow down, or retirement has not turned out as expected, there is a period of letdown, disenchantment, even depression. Unrealistic fantasies can result in feelings of emptiness and disillusionment. Sometimes there is the feeling there is just not enough meaningful things to do. He may get bored and tired once the trips are over, the house has been painted and the list of things to be accomplished has been whittled down.

Disenchantment in retirement can also result from disruptions; e.g. the death of a spouse. Studies have shown that those who became less positive towards their life in retirement did so as a result of disability, not difficulty in eventually adjusting to retirement. How one chooses to deal with contributing factors to disenchantment is crucial in moving on to the next phase. The individual's motivation to move on to the next phase will also determine how long this phase lasts. The disenchantment phase represents a major period of challenge of many.

10 minutes
PPT 9

Discussion

Questions for Participants

What impact can this phase have on a man trying to adjust to retirement?

What helped you to move out of the disenchantment phase when you were in it?

Discussion Points

As not every man goes through the disenchantment phase, the questions will need to be asked broadly in order to encourage participants to offer some information about other men they might know, if it hasn't directly affected them. It is important to focus on the strategies that brought people out of their disenchantment as well as their feelings whilst they were in it, as this type of information may be valuable to those men who may still be experiencing this phase in the group.

Re-stating their feelings in a respectful manner can result in a sense of relief for some men to realise that they aren't alone in this situation and that it is a normal phase for many people to go through. More importantly though, it is up to them to decide how and when to move out of it and readjust to their new life. By working through this phase many men can find it leads to a highly realistic reorientation to life as it goes on.

5 minutes
PPT 10

Phase 4: Reorientation

It is in this phase that most people re-orientate themselves to retirement. They "take stock" and "get their life together". This process involves using their life experiences to develop a realistic view of alternatives with their particular set of resources. Reorientation also induces exploring new avenues of interest and involvement. Very few elect to become hermits. Most want to remain involved in the world around them to some extent. Although this world has shrunk to some extent there remain abundant opportunities to select options which will enhance one's quality of life.

While communities can help in reorientation options, for the most part people are on their own during this phase, seeking help most often from family and friends. The goal of this reorientation process is creating a set of realistic choices that establishes a structure and a routine for living retirement with at least a modicum of satisfaction.

In this phase, life may be busy, have its exciting moments, but for the most part it is stable and satisfying. Some get to this phase direct from retirement after work, others through R & R, or reassessment (sometimes painful) of

personal goals. Others never reach it. People in this phase know their capabilities and limitations. They are self-sufficient adults, going their own way, keeping usefully busy, and managing their own affairs. They work on their situation and circumstances and have to achieve their personal best fit within them.

5 minutes
PPT 11

Discussion



Questions for Participants

What advice would you give a man who is taking stock of his life?

What helped you or hindered you to reorientate yourself to your new retirement life?

Discussion Points

This section may produce a range of responses, particularly if there are men who have not yet moved into this phase. A study in 1962 by Reichard, Livson and Peterson in their book *Ageing and Personalities* showed that some personalities are more likely to adjust well to retirement in this phase. Those that adjusted well were the 'mature', the 'rocking-chair men' and the 'activity-oriented'. The mature were able to accept themselves realistically and find satisfaction in activities and personal relationships. The rocking-chair men were generally passive and happy to be free of responsibility and the activity-oriented were unable to face being passive or helpless in old age, so kept active to ward off their fears of physical decline.

During the discussion try to identify those men who may illustrate the mature, rocking-chair or active personality types. Highlight the positive traits of these types of personalities and how they can be used to make retirement more positive. Within the group may be men whose reorientation may have involved considerable exploration of new activities, trial and error and the principle of psycho-cybernetics which focuses on how people can achieve their goals. (For more information on Psycho-cybernetics, see Maxwell Maltz's book by the same name).

5 minutes
PPT 12

Phase 5: Stability

The Stability Phase is an extension of the reorientation phase. Here the

retirement routing is consolidated and confirmed. While variations and trial and error may feature in the reorientation phase, less of these activities are necessary. Settling into the contented and comfort zone is more or less realised. There is in some a sense of having 'arrived'.

This is not to say that unforeseen or inevitable events may upset the phase of stability – such as death of a spouse, poor health, etc. – but it is a phase where satisfying baselines for living have been drawn, and the stability represents where a safe place, or as safe as possible, can be experienced.

5 minutes
PPT 13

Discussion



Questions for Participants

How has stability in your life improved your view of retirement?

Discussion Points

A number of the men may be at this phase and be happy to share how their life has improved now that things have settled into a satisfying routine. It is a phase of hope that suggests to other men that happiness and good self esteem is possible after a period of turmoil. It may be useful to ask those men who are in this phase, what types of support made this phase easier in order to draw out suggestions that sometimes outside assistance may be of benefit to get through the difficulties of the earlier phase. There is some level of similarity between this phase and the previous one, so there may not be much that the participants can add to if the previous discussion was involved. Some discussion may revolve around the question "How stable is stable?"

5 minutes
PPT 14

Phase 6: Termination

More often than not this phase is overshadowed by illness and disability, but not always. When an individual is no longer capable of engaging in major activities such as going out, housework, self-care and the like, the retirement role is displaced by the disabled role as the primary organising factor in the individual's life. If not disablement then a reduction in social activity.

The increasing dependence of old age usually comes so gradually that the retirement role can be given up in stages. Only with severe disability does

independent choice become so limited that the dignity of the retirement role is diminished.

Having acknowledged this, it is often the case that in dealing with people at later life stages, they still have much to offer others. Their life experience, philosophy, wisdom and spirituality – not necessarily religious – shared with others, can enrich the lives of their recipients. Integrity and respect are important at all phases and not just in the Terminal Phase.

10 minutes
PPT 15

Discussion



Questions for Participants

If you have found that your ability has gradually diminished, what made the transition into older age easier or more difficult?

Discussion Points

This issue is one that may need to be addressed sensitively, but should be addressed nonetheless. It is important that participants are provided with the information that most people don't want to talk about, and the onset of older age and associated ill health and disability may be a reality for some. Be aware of not suggesting that everyone will go down the path of ill health and disability; this is a myth that this training package has previously addressed.

Many men are likely to know someone who is older than they are and still living at home, still being active even in their 90's. However at some point, the retirement experience as a whole comes to an end and the termination phase is when the focus becomes less on activities outside the home and more on providing for essential health care and maintaining basic living standards.

It may be useful if some men are willing to share the experiences of their fathers whom they may have seen go through this stage and then talk about their views on this phase now that they have experienced it through a family member. Some are likely to believe that the same termination path awaits them whilst others may be determined that their older age will be different and are actively seeking other ways of meeting their needs as they move into this phase.

It may even be appropriate with great sensitivity to discuss the positives of death and dying if you feel confident and competent to do so. Reminiscing and reflecting on life both past and present and the sharing of these with others may be an important part of this phase. You may wish to provide opportunities for this to happen.

2 minutes
PPT 16

Closing the Topic

Recap on topic covered by asking the question "Did we cover everything?"

- If there is time ask for any last minute questions.
- Hand out an evaluation form if required.
- Thank participants for their attendance and provide them with your contact telephone number or brochure if they should need to follow up with you.

References

Atchley, R. 1976 *The Sociology of Retirement*, Cambridge, Mass., Schenkman.

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Cox, H. 1993 *Later Life: The Realities of Ageing*, Prentice-Hal, Inc. New Jersey, USA.

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MODULE 1 – TOPIC 4 – SUCCESSFUL AGEING**5 MINUTES
PPT 1****INTRODUCTION: Successful Ageing**

The idea that one can age 'successfully' is likely to be met with both relief and scorn. What is successful ageing? How does a person do it? How is success measured and is it the same for everyone? What happens when ageing is not 'successful'? All of these questions are very relevant to this discussion and we hope to spend some time today talking about successful ageing and getting your thoughts on these matters.

**2 minutes
PPT 2****The Focus of This Topic**

The aim of today's discussion is to investigate the key needs that older people have in order to age 'successfully'.

**Pair
discussion
for 5
minutes.**

Presenter's Notes: Before we start into the discussion together, I'd like you to turn to the person next to you and for 2 minutes, have a discussion about what you think successful ageing means. I'm looking for some ideas that we can share with everyone and I'll write them up on the board. What comes to your mind when I say 'successful ageing'?

**Write up
responses**

(Allow 5 minutes for discussion and then ask the group to share some ideas which you will write up on the board or on paper at the front of the room.)

Discussion

The term 'successful ageing' has been used by Robert Earle to describe the key factors that help people continue their involvement in activities and personal relationships and therefore feel good about themselves and the things that they can still do and offer.

Security is a big part of being able to age successfully. If people don't feel secure in their basic needs, then they won't be able to focus on the other elements of successful ageing, such as being involved in activities and building relationships. It is this productive involvement that gives a person personal satisfaction, independence and creativity. If a person does not have his needs met for basic living, access to health and community services or money, then he won't be able to participate sufficiently in these aspects of successful ageing.

In some societies it is easier to pursue successful ageing because the culture already promotes the needs, rights and responsibilities of older people. This sort of active promotion means that there are resources available for ongoing

community involvement, for example work, community service, recreation, education and the capacity for the person to make their own personal choices from those options.

5 minutes
PPT 3



Abraham Maslow developed a theory that described 5 basic human needs. Under this theory, a person progresses through each level one at a time, until each level is fully met. For example, they do not feel the second need until the demands of the first have been met.

Physiological needs:

These are biological needs such as the need for oxygen, food, water and warmth. These needs are the strongest because if a person were deprived of all other needs, the physiological ones would come first in the person's needs for satisfaction.

Safety needs:

Once physiological needs have been met, the need for security can become active. We see this need mostly in children who display signs of insecurity and the need to be kept safe.

Need to belong:

The next level is the need to be loved, to feel affection and belonging. This need is about overcoming feelings of loneliness and alienation.

Need for esteem:

The fourth level, when all other previous needs have been met, is the need for both self-esteem and for the esteem a person gets from others. Humans have a need for a stable, firmly based, high level of self-respect and respect from others. When these needs are satisfied, the person feels self-confident and valuable as a person in the world. When these needs are frustrated, the person feels inferior, weak, helpless and worthless.

Need for self-actualisation:

Maslow describes this need as the need to be and do that which we were 'born to do'. This need is felt by the person being restless, on edge and

lacking something. We feel self-actualised when we engage in challenging projects, opportunities for creativity and innovation and learn at a higher level.

5 minutes
PPT 4 and
5

5 means of security

Security in contemporary society has emerged as a major foundation necessary for any additional factors to be achieved. Security covers five main areas.

1. *Physical* security through personal safety, sensible health management and access to medical services;
2. *Social* security through the establishment of accessible social support networks and participation in individual and social activities inside and outside the home;
3. *Emotional* security through the recognition that expressive behaviours such as companionship and affection are a more important basis for partner and family relationships than stratified and restrictive social role behaviour driven by former work roles;
4. *Psychological* security through the establishment of a successful leisure identity (preferably prior to retirement) and a positive outlook with respect to personal destiny; and
5. *Financial* security to meet present and future needs, which required informed planning and commitment.

2 minutes
PPT 6

Indicators of successful ageing: Universal needs

The research conducted by Earle found that, in addition to the basic need for security, older people wanted five major elements in their lives.

These five elements were **involvement, satisfaction, autonomy, integration and creativity** – which collectively contribute to successful ageing.

At this point divide the group into small groups of 3 or 4. Ideally you will have 5 groups of 3 or 4 participants – one group for each Element (Involvement, Satisfaction, Autonomy, Integration and Creativity).

10 minutes
PPT 7

Element 1: Involvement



Involvement which requires ongoing activities (a basis for identity) and social

interactions, or people with whom to share those activities (i.e. social support networks, which means an accessible personal community of kin and friends).

5 minutes
PPT 8

Element 2: Satisfaction



Satisfaction from involvement in quality interests and quality activities.

5 minutes
PPT 9

Element 3: Autonomy



Autonomy implies the potential for an individual to make choices from options (this should not be regarded as only pursuing interests in isolation).

5 minutes
PPT 10

Element 4: Integration



Integration is about older people being satisfied by sharing activities and social interactions with a range of people and doing so across several social institutions regarded as important, such as family, leisure, religion, health and education. Economic means and personal health care are important functional considerations in this process as is access to community support services

5 minutes
PPT 11

Element 5: Creativity



5 minutes
PPT 12

Creativity is about personal challenges for older people.

Self-determination and the older person

Self-determination underlies positive ageing. It is the opportunity for older people to make informed choices for themselves in relation to their health and wellbeing and to develop the confidence to do so. If an older person has a disability that restricts their ability to participate in decision making, those who are closest to them should have the opportunity to share information to help determine the person's preferences.

2 minutes
PPT 13

Supporting positive and healthy ageing can include:

Increasing the awareness of older people of health issues – many older people are not aware of the impact of social isolation on health and wellbeing;

The social marketing of active ageing to older people and the promotion of positive images of older people – ageism may limit an older person's expectations of their health and their level of engagement in health promoting activities;

Building community infrastructure to support physical activity and developing opportunities for older people to improve their health.

2 minutes
PPT 14

Closing the Topic

Recap on topic covered by asking the question "Did we cover everything?"

- If there is time ask for any last minute questions.
- Hand out an evaluation form if required.
- Thank participants for their attendance and provide them with your contact telephone number or brochure if they should need to follow up with you.

References

Earle R. 1996 *Successful Ageing in Australian Society: A Community Development Challenge*, Adelaide ROA (Australasia).

Earle, L. & Fopp R. 1999 *Introduction to Australian Society: A Sociological Overview*, Third Ed. Harcourt Brace, Sydney.

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MODULE 1 – TOPIC 5 – SOCIAL ISOLATION OF OLDER PEOPLE

<p>5 MINUTES PPT 1</p>	<p>INTRODUCTION: Social Isolation of Older People</p> <p>Whilst social isolation affects both men and women alike, older men are one of the most vulnerable target groups for social isolation for a number of reasons.</p> <p>They are more likely to be dependent on work networks for their social connections, which retirement can put an end to if they do not make new friendships after retirement. They also have a higher level of self reliance which makes it difficult for them to ask for support when they feel lonely. To ask for help may appear a weakness and many men would prefer to remain alone than to seek out that help or appear dependent on others.</p> <p>Older men are also generally less able emotionally to live alone. Most have relied on their spouse as their sole support, primary companion and the one person to whom they share their thoughts and feelings. When this person is no longer available, either through divorce, disability or death, men generally may find it is very difficult to begin this relationship again with someone else. Many will wish for the companionship and the emotional support that they had in their primary relationship and be unhappy without it.</p>
<p>2 minutes PPT 2</p>	<p>The Focus of this Topic</p> <p>Today's presentation will look at</p> <ul style="list-style-type: none"> • What social isolation is and how it affects older men. • Critical life events linked to social isolation. • Factors that influence social isolation of older people. • Some ways of addressing social isolation
<p>Pair Discussion</p>	<p>What is Social Isolation?</p> <p><i>Presenter's Notes: Ask the participants to turn to the person next to them and discuss for 2 minutes what each person thinks social isolation is. After 2 minutes, ask the group for some of their responses. You might like to write these up on a whiteboard or butcher's paper. Then lead into the following discussion points using the PowerPoint slides.</i></p>
<p>5 minutes PPT 3</p>	<p>Social isolation can be described as having two components: a low level of</p>

interaction with others combined with the experience of loneliness.

However as everyone is different, social isolation cannot be measured simply by the number and frequency of social interactions a person has. Some older people prefer a lot of social contact with many different people, whilst others are content with limited but meaningful contact with only a few. There are those who are surrounded by large social networks but do not have any close and confiding relationships in them, nor do these networks ease a sense of loneliness merely by having them around. While loneliness, living alone and social isolation are separate experiences they often cluster together.

An example may be having an active social club in a retirement complex where people are invited to attend lunches and excursions, but do so more as an obligation and for something to do, than because it eases their loneliness. Social isolation is therefore quite multi-faceted and incorporates both social and emotional isolation.

Ask the Group: *What other examples can you think of?*

**5 minutes
PPT 4**

The Impact of Being Socially Isolated

Being socially isolated can impact on a person's mental and physical health. People who maintain healthy interactions with others are more likely to have good self esteem, a healthier self concept and in general, better mental wellbeing than those who do not. People who lack social support may also be at risk of other health related behaviours, for example not engaging in sufficient regular activity, not eating as regularly or as healthily and are less likely to access appropriate and timely health care.

Being socially isolated is also a risk factor for suicide, in particular for older men aged 75 years and over who live alone and are experiencing a recent physical illness and receiving recent psychiatric treatment. The issues come full circle when you consider that men who are suffering from a mental illness and are also physically ill in some way are less able to get out and about. Therefore they are more likely to find they are socially isolated and lonely than if they did not have these health issues.

How great is the problem of social isolation? Studies can only estimate that approximately 10 percent of people aged 65 and over are socially isolated and a further 12 percent are at risk of being socially isolated. We also have a steadily increasing older population, many of whom are living alone either due to the death or divorce of their spouse or partner. Over the next two decades the number of Queenslanders aged 65 years and older is expected to more than double from 422,000 to 887,000 people (Qld Gov 2003), therefore

the issue is likely to grow.

When living alone and social isolation is a positive experience it is solitude – perhaps time out or enjoyment of personal time and space alone.

5 minutes
PPT 5

Critical Life Events And Transitions Linked To Social Isolation

As a person ages they face increasing numbers of changes in their life. The way that a person copes with these changes from mid-life onwards will affect their level of social participation. Studies have shown that people who have someone intervene in their life soon after a critical life event or during early transition stages can help to prevent social isolation. If left alone, many older and more vulnerable people will find that any of these critical life events are more likely to reduce their level of social interaction.

- Retirement which can bring broad lifestyle changes including changes to social networks. Currently the focus of retirement preparation is on financial planning, but this needs to be broadened to address social issues.
- Loss of one's partner which can result in a loss of confidence and a decrease in social networks, especially if there has been a high dependence on the partner for activities such as financial management, driving or social connections.
- Population displacement which is common with older people relocating or their relatives and friends relocating to new communities.
- Sudden disability caused by incidents such as stroke or major heart attack that impact on the ability of older people to participate in the community.
- Being a victim of crime resulting in a loss of confidence and a fear of going out into the community.
- Suffering a series of falls resulting in a loss of confidence regarding mobility and safety.
- Loss of a driver's licence which can result in decreased options for accessing the community, particularly in areas where there is limited public transport.

10 minutes
PPT 6

Risk and Protective Factors

When looking at how to respond to the needs of socially isolated people, a range of prevention strategies need to be implemented. It is clear that there are several risk and protective factors linked to social isolation and these factors can occur at the individual, social, cultural, community and environmental level.

Risk factors include traits, situations or circumstances that *increase* the likelihood of social isolation or make the impact of existing problems worse. These factors may include poor health, mental illness, being a carer of someone else, geographic location, communication difficulties, being male and single and a lack of transport.

Protective factors include traits, situations or circumstances that *moderate* the impact of risk factors and help a person to remain socially connected.

Sometimes both risk and protective factors work together to create a situation that is more complex. For example, an older person with a mental illness may live in a community where there are support services for him to address this risk factor. However the same community may not have the social infrastructure to enable this person to attend social gatherings with transport provided. So whilst his community is addressing one risk, it is creating another.

In these complex situations every risk and protective factor must be identified and managed in relationship with each other so as not to increase the person's isolation in any way.

The key factors identified as risk or protective factors can broadly be split into three categories: individual; social; community and environmental.

10 minutes
PPT 7

DISCUSSION

Trainer's Notes: you may wish to have a lengthy discussion at each of the following questions so that the participants can more fully explore their own personal experiences of social isolation.



5 minutes
PPT 8

Question for Participants:

What are some individual factors which may cause you to become socially isolated?

Individual Factors Affecting Social Isolation:

- Living alone
- Health status – mental or physical
- Disability, e.g. hearing impairment
- Ability to use existing public and private transport
- Being in the workforce
- Engagement in meaningful activity
- Resilience – the ability to recover and move on in the face of difficulty
- Socio-economic advantage/disadvantage
- Gender
- Speaking English
- Literacy
- Attitude to and/or knowledge of technology
- Perception of level of crime/violence in community
- Willingness to accept help
- Attitude to life – positive/negative

10 minutes
PPT 9

Discussion



Question for Participants

What are some social factors which may cause you to become socially isolated?

5 minutes
PPT 10

Social Factors Influencing Social Isolation Of Older People

- Loss of relationships through death or divorce
- Family support
- Loss of children when they leave home
- Network of friends
- Grandparenting
- Relocation to new community
- Loss of grandchildren if family moves away or following divorce
- Being a carer
- Availability of wide range of opportunities for meaningful social participation activities
- Access to learning and development opportunities – social recreational/health promoting/activities

- transport assistance to and from activities

10 minutes
PPT 11

Discussion



Question for Participants

How does the community and the environment impact on social isolation?

5 minutes
PPT 12

Community And Environmental Factors Influencing Social Isolation Of Older People

- Physical isolation
 - location of residence
 - availability of public transport
- Local infrastructure for healthy living/healthy ageing
 - safe and accessible walkways & bikeways
- Public space available for community members to use
- Accessibility of buildings for those with a disability/frailty
- Range of social and health services needed to meet need of the community
- Access to information on services
- Ageism, racism, sexism
- Norms and myths that stereotype older people
- Social Capital – cooperative networks and trust in a community

2 minutes
PPT 13

Types of individual social support

There are a number of different ways that social support can be provided to older people who are socially isolated. The ones listed here are some of the more common ones, but many communities have their own unique blend of support programs.

- In-home visiting
- Telephone friendships
- Community services information
- Group outings
- Positive image of active ageing
- Volunteer support programs
- Awareness of links between isolation and health
- Coordinated user-friendly services

2 minutes
PPT 14

Closing the Topic

Recap on topic covered by asking the question "Did we cover everything?"

- Overview of social isolation
- Critical life events and trauma linked to social isolation
- Individual, social, community and environmental factors affecting social isolation

- If there is time ask for any last minute questions.
- Hand out an evaluation form if required.
- Thank participants for their attendance and provide them with your contact telephone number or brochure if they should need to follow up with you.

References

Qld Government, Department of Communities 2006, *Cross Government Project to Reduce Social Isolation of Older People; Interim Report: Project Phases One to Three.*

MODULE 1 – TOPIC 6 – SUPPORTING OLDER MEN

2 minutes
PPT 1 and
2

INTRODUCTION: Supporting Older Men**The Focus of this Topic**

This topic looks at what social support is and how to support older men.

2 minutes
PPT 3

What is Social Support?

The Latin root of the word “support” implies “to carry from below.” The meaning is clear when we refer to physical support as in “the desk supports my weight,” or “the roof is supported by the beams in the ceiling.” However, the idea of being carried from below is a useful analogy for psycho-social support. For most of our lives we are carried by others, individually or by the community or culture as a whole. “Care is a synonym for social support.”

Social support can be viewed as providing an experience which validates the worth of the person and offers them a caring presence when they are troubled.

Social support must be consciously given and consciously received, where support means being there with/for the person in need.

5 minutes
PPT 4

The Importance of Social Support

The importance of social support to the health of older people has been established, although an understanding of how this association occurs is still evolving.

A number of studies have shown that people with low social support are at greater risk of being institutionalised, dying prematurely, physical and psychological illnesses and an increased use of community and hospital services. Recent studies of heart and stroke patients suggest there is a link between low social support and premature death.

Gone are the days when it was safe to make assumptions about how to treat others. The old ‘Golden Rule’ was ‘do unto others as you would have them do unto you’. These days, to be of support to anyone you need to know what that particular individual would find helpful and not assume that their needs will be the same as yours.

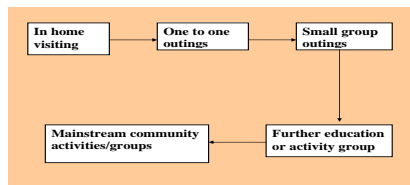
2 minutes
PPT 5

Continuum of Social Interaction

Sometimes it is necessary to gradually introduce a socially isolated older person into social participation so that they slowly become more connected and confident in a range of situations.

The following diagram is an example of how activities can be gradually introduced to promote social connections.

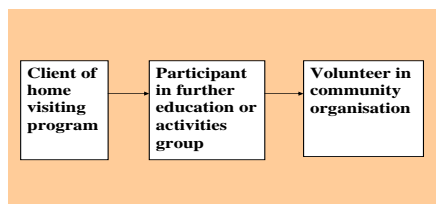
The first step may be simply in-home visiting which eventually extends to one-on-one outings. This may progress to small group outings and then further education or activity group. Finally the older person may wish to participate in mainstream community activities or groups.



2 minutes
PPT 6

Expanding the Role of the Socially Isolated Older Person

The role of the socially isolated older person can also be expanded slowly. It is not uncommon for socially isolated older people to start as clients of a home visiting program, then progress to a participant in further education or other activities and finally become a volunteer in a community organisation providing the same or different types of support.



Types Of Individual Social Support Available In Queensland Include:

- In-home visiting;
- Telephone friendship support or reassurance
- Telephone or in-person provision of information on social activities and services in a community;
- One-to-one outings, such as shopping trips and visits for medical appointments; and

2 minutes
PPT 7

- Assignment of a volunteer or staff member to an older person who is attending a group activity for the first time.

Key points when providing support

- Someone can hear you – active listening is the most effective form of listening.
- Support can be formal or informal
- Providing support is not about doing things for other people.
- Sometimes specialist support people are needed to handle the support required.
- More than one supporter may be needed
- Support required may range from simple to complex
- Supporter trust may take time
- Support may be accepted or refused by the individual.

5 minutes
to arrange
and set up
groups.
PPT 8

Discussion: Aspects of Support

Presenter's Notes: It might be useful to break the participants up into several groups of 3 to 5 people and sit them around a table or move chairs so they are in a small circle and talk to each other. This topic 'Aspects of Support' is a valuable opportunity for the group to explore what support really means to them; making it more 'real' rather than just a concept. By using a small group discussion, those people less comfortable with speaking in front of others may feel more at ease.

I suggest that you provide each group with a blank sheet of large butcher's paper or flip chart paper and several coloured thick markers. Ask each group to write on the top: 'What is important to know and do when supporting someone' or a similar question. Give each group about 10 minutes to talk about their ideas with each other and write down some points on the paper. Then ask one person from each group to stand up with their paper and tell the others what they had come up with.

There will be some commonalities between groups and each point can be briefly added to if necessary from the notes below. Any key points below which are not mentioned by any group can be raised by you at the end as further thoughts.

15 minutes**Discussion Points:**

1. Everyone needs support at different times of their lives.
2. Support means someone who hears you, is available to be with you, can talk with you when you need time to off-load what has happened or how you are feeling.
3. Support can be formal or informal. Formal support is when you pay for support from a counsellor who is employed to support you. Informal support may be from a Support Group which has been set up just for this purpose. Within these groups you may gradually get to know women and men and they become part of your support system.
4. Support does not mean having things done for you or mean being advised what to do. It means having someone who helps us to help ourselves. There is no room for someone to give criticism, pass judgement, analyse your feelings or find solutions for you.
5. Sometimes, we talk to our families, partners, lovers, friends, etc. because they are available. Often they get overloaded if we talk to them too often. In fact they may switch off and appear disinterested, or they may be interested but in an area they themselves can't handle talking about. It will become obvious to you that this is happening if you begin to feel you are not being supported.
6. The role of a support person is one of listening and helping us clarify how we are feeling. Remember you may need more than one person for support as one person may not be available at all times.
7. Support may range from someone making you a cup of tea, to a hug or a chat over the phone. It does not have to be heavy.
8. Having someone alongside us on a painful or joyful journey of experience lightens the load and helps us to keep our feet on the ground. It is like having a lifejacket.
9. It may take time to trust that person; we all need to trust someone – to enable us to tell them what's going on inside us.
10. Sometimes other issues from our past come up when we are talking to our support person, e.g. abuse, incest. It is a good idea to check out if she/he feels okay talking about that area. If the person doesn't feel comfortable he/she has the right to say so. You may need to find an organisation or another person for support on that issue.

2 minutes
PPT 9**Focusing on Men**

We all understand that men and women are 'wired' differently. The male brain and the female brain process information in different ways. This leads men to see the world in a different way to women, with a focus on different

areas. Acknowledging these differences is important when providing support to men as the focus needs to be on the way that men view the world.

For example:

- The masculine tends to be interested in goals, products, efficiency, and outcomes while the feminine tends to find greater interest in relationships and intimacy.
- Men tend towards a hierarchical nature, viewing the world in terms of who is governing whom. Women tend to view the world through the lens of who is relating to whom.
- Men tend to bond by being shoulder-to-shoulder and working toward a common goal, being on the same team whereas facing someone often means conflict. Facing some is like facing the enemy, "this means battle". Conversely, women tend to view facing someone as a means to deepen intimacy.

5 minutes
PPT 10

Focusing on Men cont.

People who see the world through a primary lens of independence will find safety in different ways than those who see the world through a primary lens of intimacy.

- Men prefer to focus on the future rather than the past. The pull toward the future is because you can do something about it.
- If you are a person who values independence and also has a hierarchical view of the world you will be unlikely to want to share your problems.
- Sharing your problems with those above you on the hierarchy would make you look considerably less independent, yet you don't want to share with those below you on the hierarchy since you don't feel that your problems are their responsibility.

5 minutes
PPT 11

How does this help us support older men?

When healing, men may be less likely to put feelings into words, are more likely to prefer a quiet path to heal and are less likely to cry openly. This needs to be taken into account when supporting someone with a strong masculine character.

- Most men don't appreciate a great outward show of emotion but appreciate the presence and attention of someone they trust and whom

they feel safe.

- Men tend not to heal in foxholes under enemy fire but in places where they feel safe and comfortable. Knowing a person's place of comfort and safety is a good first step in knowing how they will feel supported.
- Remember, males tend to be sensitive to situations where their independence is called into question.

2 minutes
PPT 12

Effective strategies to use with older men.

Presenter's Notes: The following section can be used as general discussion points with each key question on the slide being asked of the group. The following points can be used to draw out the key messages under each support strategy.

5 minutes
PPT 13

Communication



- Rather than ask "How are you feeling?" ask instead "What is the toughest thing about this?" (Be careful not to make it sound cynical as in "What's so tough about this?") The first question may make it difficult for feelings to be put into words. The second is more hierarchically friendly but honours the person by implying that his situation is difficult.
- Use the hi-low mode – what is the worst thing that happened to you today, and what was the best thing that happened.
- Note: men tend to prefer to talk about their situation after they feel they have some dominion over it. It is also important to allow men to choose the time when they are ready to talk about their experience.

Question for Participants:

What are some communication tips you can give when talking to older men?

5 minutes
PPT 14

Shared Activities



- Both men and women do benefit from the help they receive from support groups. However, those with a strong masculine side often respond

better to shared goals and activities that help them to connect with their experiences.

- Activity becomes the foreground, and giving and getting support becomes the background. Men feel more at home sharing an activity that has some goal or outcome that has a beginning and an end.

5 minutes
PPT 15

Question for Participants:

What are some shared activities that you could suggest to other older men?

Humour



- The masculine side tends to use humour as a means of support. Men may use humour as a way to touch difficult experiences (e.g. grief & loss) without being overwhelmed by it. It is a way to detach a bit – to detach and acknowledge.
- Humour is a way to engage a small piece of the pain at a time and to be able to detach from it through the healing power of laughter.

5 minutes
PPT 16

Question for Participants:

When did you use humour to get you through a difficult situation?

Giving through Doing



- For those with strong masculine traits, think about doing something for them or doing something in honour of the reason for their experience (e.g. their loss) is often appropriate.
- For these men this may be a means of connecting with their pain or loss.

Question for Participants:

Have you done something to help another man as a way of support?

5 minutes
PPT 17

Consultation vs Consolation



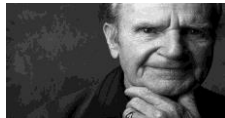
- Those with a significant amount of the masculine energy usually come in to therapy (and other sources of support) seeking consultation – rather than consolation. This approach is consistent with working together on an issue and not using it as a therapy session.

Question for Participants:

When is consultation more appropriate than consolation?

5 minutes
PPT 18

Respect



- Respect is the currency of the masculine. When you live in a world based on hierarchy and who is governing whom, you are sensitive to issues of respect. In a climate of respect the man can more easily relax and open up a bit.
- We can show respect in being supportive to men by:
 - Respecting a man's emotional space, his need to be emotional or not.
 - Offer your attention and support but allow him to refuse it and to avoid topics if he wishes.
 - Approach him with the idea in mind, "How can I be of service to him?" By serving others we are usually treating them as if they are one-up on the "hierarchy". This can be contrasted with the concept of "helping" which implies treating them as one-down on the hierarchy.

Question for Participants:

How do you show respect to the men you relate to?

5 minutes
PPT 19

Closing the Topic

Recap on topic covered by asking the question "Did we cover everything?"

- If there is time ask for any last minute questions.
- Hand out an evaluation form if required.
- Thank participants for their attendance and provide them with your contact telephone number or brochure if they should need to follow up with you.

References

Hornby, G., Murray, R. & Davies, L. 1998, *Basic Helping/Supporting Skills – Facilitator's Manual*, Auckland College of Education, p27

Mishra G., *Social Support Among Older People*, Australian & New Zealand Journal of Public Health, 1999 vol 23, No. 3 pp 260 – 265.

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