

**THE MEANING AND TYPES OF FRIENDSHIPS AMONG OLDER FEMALES
IN RESIDENTIAL CARE FACILITIES**

Carmen Nel

M.A. Research Psychology

Dissertation (article format) submitted in partial fulfilment of the requirements for the
degree Magister Artium in Research Psychology at the North-West University,
Potchefstroom Campus

Supervisor:

Prof V. Roos

Potchefstroom Campus

March 2007

TABLE OF CONTENTS

Acknowledgements	iv
Summary	v
Opsomming	vii
Preface	ix
Consent	x
Intended journal and guidelines for authors	xi
Title of manuscript, authors and contact address	xiii
Manuscript for examination	xv
Abstract	1
Introduction	2
Methodology	3
Context of research	3
Participants	4
Ethical considerations	5

Data gathering	5
Data analysis	6
Trustworthinesss	6
Findings	7
Preferred types of friendships	9
How meaning is sustained through friendships	12
Barriers to friendship relationships	17
The maintenance of quality friendships	19
Discussion	23
Critique and recommendations	26
Conclusion	27
References	29

ACKNOWLEDGEMENTS

I would like to thank the following persons for their support during the completion of my dissertation:

- Prof Roos for all support, guidance and patience.
- The residents at the residential care facility for their willingness to let me be a part of their lives for a month.
- My parents, family and friends for their understanding and support.
- Dr Amanda van der Merwe and Prof Lesley Greyvenstein for language editing.
- Munro for all his encouragement and love.

I hope this research will contribute to the knowledge of support systems for the older community, and that through God's grace a difference will be made to empower this community!

SUMMARY

THE MEANING AND TYPES OF FRIENDSHIPS AMONG OLDER FEMALES IN RESIDENTIAL CARE FACILITIES

KEY WORDS: Qualitative; friendships; meaning; older person; loneliness; support systems.

This research explores the meaning that older persons ascribe to the friendships in which they engage. Previous research mostly focuses on the strain that the older population places on the self-reliant community. The older person is faced by many challenges, such as sickness, loss of social and emotional support and death. Friendships serve as a support for physical and emotional needs which could not always be addressed by the family. The aim of this research is to explore the type of friendships in which older persons prefer to engage and the meanings they assign to it. A qualitative study was identified as the most appropriate method and focus groups and personal interviews were used as methods of data collection. Data was analysed by means of thematic content analysis. Findings indicated that different types of friendships exist and that different meanings were attached to friendships. Meaning in friendships is promoted by trustworthy friends who are able to form a deepened level of connection through the support and the compassion they are able to give each other. The experience of connection in friendships is furthermore enhanced through mobility, proximity and technology that facilitate better emotional as well as physical support for the older individual. Informal friendships with younger people ensure that older people are more mobile and are able to maintain their friendships. It is also a great source of support in cases where family members are not able to provide support, due to whatever reason. Further exploration of the value of friendships is recommended, so as to plan more specific intervention strategies. Some insights have already been gathered in this study concerning the way in which mobility, proximity and modern technology can make it possible to sustain a friendship. Further studies could explore ways to empower older people through providing better mobility, proximity and the use of modern technology. Such studies may also explore the needs which an old age home fulfils, such as

improving the residents' access to one another, for mutual support. Proximity might be a solution for the immobility experienced in the older community, and when older people are taught to use modern technology they will be enabled to maintain their friendships better.

OPSOMMING

DIE BETEKENIS VAN EN Tipes VRIENDSKAPPE VAN OUER VROUE IN RESIDENSIËLE VERSORINGSFASILITEITE

Sleutelwoorde: Kwalitatief; vriendskappe; betekenis; ouer persoon; eensaamheid; ondersteuningsisteme.

Hierdie navorsing ondersoek die betekenis wat ouer persone heg aan die vriendskappe waarin hulle betrokke is. Vorige navorsing fokus meestal op die las wat die ouer bevolking plaas op die selfversorgende gemeenskap. Die ouer persoon word deur baie uitdagings in die gesig gestaar, soos siekte, verlies aan sosiale en emosionele ondersteuning en die dood. Vriendskappe dien as 'n ondersteuning vir fisiese en emosionele behoeftes waaraan die familie nie altyd kan voldoen nie. Die doel van hierdie navorsing is om die tipe vriendskappe te ondersoek waarin ouer persone verkies om betrokke te raak, en die betekenis wat hulle daaraan heg. 'n Kwalitatiewe studie is geïdentifiseer as die mees geskikte metode hiervoor en fokusgroepe en persoonlike onderhoude is gebruik as metodes om data in te samel. Data is ontleed deur middel van tematiese inhoudsanalise. Die bevindinge het aangetoon dat daar verskillende tipe vriendskappe bestaan en dat verskillende betekenis aan vriendskappe geheg word. Betekenis in vriendskappe word bevorder deur vriende wat vertrou kan word en wat 'n dieper vlak van konneksie kan vorm met mekaar deur wedersydse ondersteuning en deernis. Hegter vriendskappe word verder bevorder deur mobiliteit, proksimiteit en tegnologie, wat emosionele en fisiese ondersteuning fasiliteer vir ouer persone. Informele vriendskappe met jonger persone stel ouer mense in staat om mobiel te wees en vriendskappe te behou. Dit is ook 'n goeie bron van ondersteuning in gevalle waar die familie nie in staat is om ondersteuning te gee nie, om watter rede ook al. Daar word voorgestel dat navorsing moet plaasvind ten opsigte van die waarde van vriendskappe vir die ouer mens, met die oog daarop om meer spesifieke intervensiestrategieë te beplan. Hierdie studie bied insigte rakende die potensiaal van mobiliteit, proksimiteit en moderne

tegnologie om vriendskappe te laat voortbestaan. Verdere navorsing kan maniere ondersoek om ouer mense te bemagtig deur die voorsiening van mobiliteit, proksimiteit en die gebruik van moderne tegnologie. Hierdie studies kan onder andere die behoeftes ondersoek wat 'n tehuis vir bejaardes vervul. Dit sluit onder andere in die verbetering van die toeganklikheid van inwoners tot mekaar, sodat hulle ondersteuning aan mekaar kan bied. Proksimiteit kan voorts 'n oplossing wees vir die immobiliteit wat ervaar word in die ouer gemeenskap, en wanneer ouer mense opgelei word in moderne tegnologie sal dit hulle bemagtig om hulle vriendskappe beter in stand te hou.

PREFACE

The candidate opted to propose an article, with the support of her supervisor.

Prof V. Roos

PERMISSION TO SUBMIT THIS ARTICLE FOR EXAMINATION PURPOSES

I, the supervisor, hereby declare that the input and effort of C Nel, in writing this article, reflects research done by her on this topic. I hereby grant permission that she may submit this article for examination purposes in partial fulfilment of the requirements for the degree Magister Artium in Research Psychology.

Signed on this day at the North-West University.

.....

Prof V Roos

Supervisor

INTENDED JOURNAL AND GUIDELINES FOR AUTHORS

This dissertation will be submitted to the *South African Journal of Psychology* to be considered for publication. Attached please find a copy of the guidelines for prospective authors as set out by the Journal

Submitting a manuscript

SAJP is a peer-reviewed journal publishing empirical, theoretical and review articles on all aspects of psychology. Articles may focus on South African, African or international issues. Manuscripts to be considered for publication should be e-mailed to sajp@unisa.ac.za. Include a covering letter with your postal address, e-mail address, and phone number. The covering letter should indicate that the manuscript has not been published elsewhere and is not under consideration for publication in another journal. An acknowledgement of receipt will be e-mailed to the author within a few days and the manuscript will be sent for review by three independent reviewers. Incorrectly structured manuscripts will not be accepted into the review process.

Manuscript structure

- The manuscript should be no longer than 30 pages and no shorter than 10 pages.
- **First page:** The full title of the manuscript, the name(s) of the author(s) together with their affiliations, and the name, address, and e-mail address of the author to whom correspondence should be sent.
- **Second page:** The abstract, formatted as a single paragraph, and no longer than 300 words. A list of at least six key words should be provided below the abstract, with semi-colons between words.
- **Subsequent pages:** The text of the article. The introduction to the article does not require a heading.
- **Concluding pages:** A reference list, followed by tables and figures (if any). Each table or figure should be on a separate page. Tables and figures should be

numbered consecutively and their appropriate positions in the text indicated. Each table or figure should be provided with a title (e.g., Figure 1. Frequency distribution of critical incidents). The title should be placed at the top for tables and at the bottom for figures.

Manuscript format

- The manuscript should be an MS Word document in 12-point Times Roman font with 1.5 line spacing. There should be no font changes, margin changes, hanging indents, or other unnecessarily complex formatting codes.
- American Psychological Association (APA) style guidelines and referencing format should be adhered to.
- Headings should start at the left margin, and should not be numbered. All headings should be in **bold**. Main headings should be in **CAPITAL LETTERS**.
- A line should be left open between paragraphs. The first line of a paragraph should not be indented.
- Use indents only for block quotes.
- In the reference list, a line should be left open above each reference. Do not use indents or hanging indents in the reference list.

Language and punctuation

Manuscripts should be written in English. As the SAJP does not employ a full-time or dedicated language editor, authors are requested to send their manuscripts to an external language specialist for language before submission.

**THE MEANING AND TYPES OF FRIENDSHIPS AMONG OLDER FEMALES
IN RESIDENTIAL CARE FACILITIES**

C. Nel
3 Amatole Street
Sasolburg
1947
E-mail: 12595888@student.nwu.ac.za

Prof V Roos*
School for Psycho-social Behavioural Sciences
Psychology
North-West University
Potchefstroom
E-mail: Vera.Roos@nwu.ac.za

*To whom correspondence should be addressed

**THE MEANING AND TYPES OF FRIENDSHIPS AMONG OLDER FEMALES
IN RESIDENTIAL CARE FACILITIES**

C Nel and V Roos
North-West University
Potchefstroom
South Africa

MANUSCRIPT FOR EXAMINATION

THE MEANING AND TYPES OF FRIENDSHIPS AMONG OLDER FEMALES IN RESIDENTIAL CARE FACILITIES

ABSTRACT

This research explores the meaning that older persons attach to the friendships in which they engage. Previous research on older persons mainly focuses on the strain that the older population places on the self-reliant community. The older person faces many challenges, such as illness, loss of social and emotional support and death. Friendships serve as support for physical and emotional needs which cannot always be addressed by the family. The aim of this research is to explore the type of friendships in which older persons prefer to engage and the meanings they attach to it. A qualitative study, focus groups and personal interviews were used as methods of data collection. Data were analysed by means of thematic content analysis. Findings indicate that different types of friendships exist and that different meanings are attached to friendships. Meaning in friendships is promoted by trustworthy friends who are able to form a deepened level of connection through the support and the compassion they are able to offer. Informal friendships with younger people ensure that older people are more mobile and are able to maintain their friendships. Friendships are also a great source of support when family members are not able to provide support, due to whatever reason. Some insights have been gathered in the study concerning mobility, proximity and modern technology to enable friendship. Further studies could explore ways to enable older people through providing better mobility, proximity and the use of modern technology. Proximity may be a solution for the immobility experienced by the older community, and when older people are taught to use modern technology they will be enabled to maintain their friendships better.

KEY WORDS: Qualitative; friendships; meaning; older person; loneliness; support systems

INTRODUCTION

World-wide, older persons are more prone to experiencing loneliness. For the purpose of this research, older persons are regarded as people who are sixty years or older (WHO). Loneliness is strongly related to the prevalence of depression and related symptoms and lack of support to deal with many stressors, including illness, pain, loss of loved ones, decreased physical mobility and limited finances (Field, Walker, & Orell, 2002; Karinkanta, Heinonen, Sievänen, Uusi-Rasi & Kannus, 2005; Hellström & Hallberg, 2004; Lin & Langen, 2001; Sugisawa, Shibata, Hougham, Sugihara & Liang, 2002; Wynchank, 2004).

The lack of emotional and social support occurs when family members and spouses are no longer involved. Families lead their own lives and do not have enough time or energy to attend to the needs of older people and the family members and/or spouses are deceased. Older people may also struggle to maintain friendships, despite the fact that family members are available for support, due to their decreased physical mobility and the death of their friends (Holmen & Furukawa, 2002; Routasalo & Pitkala, 2003; Sin, LoGerfo, Belza & Cunningham, 2004; Yeh, 2004).

Friendships are regarded as important relationships, because they offer social and emotional support, which again contribute to the promotion of well-being. Sometimes the friendship relationship is the only supportive relationship available to the older person (Berglund & Ericsson, 2003; Kahn, Hessling & Russell, 2003; Wynchank, 2004). Emotional support is regarded as a close and intimate relationship with someone else. Friendships offer emotional support because older persons have someone with whom they can share their concerns (Yeh, 2004). Emotional support includes friends sharing in different activities or who are engaged in competitive activities. They share the same life perspectives and religion, but most of all, they are companions (Adams & Torr, 1998).

Friendships can take on different patterns. According to Johnson (2003), friendship patterns can include enduring, rotating and chronically friendless friendships. Enduring friendships are relationships that last for a longer period of time. Typically, older persons

honesty and equality (Baron and Byrne, 2000; Johnson, 2003; Louw, Van Ede & Louw, 1999). Rotating friendships mean that older persons can move regularly from one friend to another. The movement between friends can imply that the initial positive experiences are replaced with mistrust and aggression based on the perception that friends can not be trusted. Chronically friendless friendship patterns are characterised by individuals who may discourage social interaction by being socially inhibited (shy), emotionally unstable (easily angered) or self-centred (less caring and honest). Rotating and chronically friendless friendship patterns will leave the older person feeling isolated and depressed (Johnson, 2003; Wynchank, 2004).

The meaning that older persons attach to their friendships has not been comprehensively addressed in literature. Most of the previous research focuses on the challenges with which communities have to deal regarding older persons (Ferreira, 2005; Makiwane, Schneider & Gopane, 2004). The aim of this research is to explore the types of friendships in which older persons prefer to engage and the meanings that they attach to them. A deeper insight into this phenomenon, however, could assist policy in exploring strategies to support and promote older persons' development and maintenance of different kinds of friendships.

METHODOLOGY

A qualitative method is the most suitable method to explore the meaning and value which older people attach to friendships. According to Silverman (2001), qualitative research is used in an exploration in which little is known about the phenomenon and where the phenomenon requires a detailed understanding. Qualitative research is concerned with the meaning people attach to their social world. This method studies people in their natural setting instead of artificial settings (Pope & Mays, 2000).

CONTEXT OF RESEARCH

The residential care facility is an establishment that is maintained by family of the residents, churches and the community. The churches involved regularly hold services at the retirement home, since mobility is a problem for the older person. Family regularly

arrange entertainment for the residents, for instance by inviting speakers and people who demonstrate or teach arts and crafts, or by presenting singing competitions for the residents.

The retirement home which was involved in this research is set in a resourceful environment, where facilities are continuously improved. Living units were being added at the time of the study to enable more residents to live in residential care, and living arrangements are organised to ensure as much convenience for residents as possible. The very sick residents are cared for in the hospital and the very immobile residents live in units in the main building, where care is provided throughout the day. The more mobile residents live in the single units on the grounds of the retirement home, near each other. Bigger units are given to married couples.

PARTICIPANTS

A purposeful sampling method was used, where researchers intentionally select individuals and sites to understand the central phenomenon (Creswell, 2005). Participants were mobile and not bed-ridden, and were able to participate in the focus group interviews and in the personal interviews. Good communication skills were required to ensure that valuable data were obtained and participants had to be able to speak English and/or Afrikaans fluently.

The participants were female older persons in Sasolburg in the Free State Province of South Africa. Thirteen women between the ages of 76 and 90 years participated in the focus group and seven women volunteered for personal interviews after the focus group interviews were conducted. Most of the participants' friends were in the same age intervals as the participants, but there were a few exceptions of younger friendships. On average, the participants had been living in the retirement home for ten years.

There were very few males in the retirement home, and most of them were not available for the research. The few that were available indicated that they would not be interested

to participate in any research activities. The residential care facility helped the researcher to select candidates from different backgrounds.

ETHICAL CONSIDERATIONS

This research was part of the project *An exploration of enabling communities*, for which ethical permission was obtained from the Ethics Committee of the North-West University (05K14). An informed consent letter was obtained from the appropriate authority at the retirement home to conduct research with the residents on their premises. The letter was obtained from the North-West University confirming the purpose of the study. Informed consent was obtained from the participants in accordance with the guidelines of the Health Professions Council of South Africa, including an assurance that participants' information would be considered strictly confidential throughout the research. A computer with a safety code was used to store collected data. Participants in the research were asked to participate voluntarily. They could participate in all research activities without their identities being disclosed and they could withdraw at any time if they wanted to.

DATA GATHERING

The design of the research entailed that observation, personal reflection, interviews, focus groups and field notes were the instruments used in this study (Leedy & Ormond, 2005). An inductive exploratory study was used to ensure that rich descriptive data was obtained (Rogers, 2003). To accomplish this, unstructured interviews and focus groups were used with participants living in residential care. The advantage of an unstructured interview is that if researchers are unfamiliar with the participants' lifestyle, religious orientation, culture or other such attributes, they will not introduce any preconceived assumptions in the interview (Berg, 2001; Heppner & Heppner, 2004). According to Creswell (2005) and Pope and Mays (2000), focus groups can be used to collect shared ideas about a subject, but also to obtain views from specific people.

The central question asked was: "What does friendship mean?" Two topics were discussed within the focus group over a period of two weeks, which included 4 sessions

of 1 hour each. The first topic was the different kinds of friendships that exist in the participants' lives. The opening question probed the group's perception about what friendships entail. The second topic was the value and meaning of these different friendships, and participants were asked to describe what friendships mean to them. Individual interviews were conducted after the focus group sessions were completed.

DATA ANALYSIS

Data collected through focus groups and individual interviews were recorded on tape with the participant's consent. These recordings were transcribed verbatim. A thematic content analysis was then performed to determine the psychological meaning. These meanings were then organised into themes and sub-themes (Berg, 2001 & Creswell, 2005).

Data analysis was conducted with the use of the ATLAS.ti 5.0 computer programme. Meaning units were determined and grouped in themes and sub-themes. Rich descriptive meaning of the data was depicted in accordance with the themes which were outlined in the findings section (Pope & Mays, 2000; Silverman, 2001).

TRUSTWORTHINESS

To ensure trustworthiness of the data obtained, the results were verified through triangulation. Triangulation shows how multiple but different qualitative data might simultaneously be true, by the process of separate pieces of information leading to the same conclusion. In this research data triangulation was applied by using a focus group and personal interviews. The combination of the two types of interviews ensures that data is obtained from an individual as well as a group perspective.

A rich description of data contributes to scientific knowledge and gives an in-depth understanding of the data. The description of data is supported with quotations and relevant literature is used in the discussion. The prolonged engagement in the field of study also contributes towards a rich description of data through the gathering of a broad variation of data. A register of all data obtained is kept in a computerised system as proof

of the results to ensure authenticity of raw data. The process of conducting research is thoroughly described in this article (Berg, 2001; Leedy & Ormond, 2005).

FINDINGS

The following table illustrates the process undertaken to interpret the data through an explanation of the psychological meaning of verbatim responses:

NO	VERBATIM	PSYCHOLOGICAL MEANING
1	With some friends you play board games, others you go to church with and some talk about daily things. While others share their deepest thoughts.	Older people's social support system is characterised by variations in friendships that seemingly fulfil different needs at different times.
2	I can't have discussions with everybody about books, religion or my problems; I don't want to talk to people that I can't share my views and worries with.	It seems that intimacy and shared views on books, religion and personal dilemmas, for example, are important for older people to share more personal information.
3	The bit of news I have I will share with anybody I want, they are not intimate friends.	Friendships are identified as people to whom participants can relate, based on their availability.
4	I love to do embroidery and all of our friends belong to a needle and stitch group.	The group identity is enhanced through shared interests like embroidery and needlework.
5	We pray together and Bible study is important in our friendship.	Participants identify friends as people with whom they can share

religious practices.

The following table is a summary in no particular order of the main and sub-themes which were identified after the psychological meaning of the responses had been clarified:

MAIN THEMES	SUB-THEMES
Preferred types of friendships	A variety of friendships
	Friends that are accessible
	Shared-interest friendships
	<i>Friends who have a variation of shared interests</i>
	<i>Friends with shared religious interests</i>
	<i>Similar life experiences</i>
How meaning is sustained through friendship	<i>Friends with whom you share personal information</i>
	They value friendship
	Through support and moulding one another
	Maintain friendships through trustworthiness
	A deepened level of intimacy
Barriers to friendship relationships	Friendships and compassion
	The potential loss of friendships
The maintenance of quality friendships	Resentment in friendships
	Mobility
	Proximity
	Technology

Table 1: Identified themes and sub-themes

In the next section the identified themes will be discussed and illustrated with supportive verbatim quotes.

PREFERRED TYPES OF FRIENDSHIPS

These are the different types of friendships that each individual prefers to have, to fulfil their perception of what a quality friendship entails.

In the research which was conducted it was found that different types of friendships have different meanings for participants.

Variety of friendships

Some individuals prefer to have a variety of friendships. Their social support system is characterised by these variations in friendships that seemingly fulfil different needs at different times. These include activities in which they participate and topics of conversation:

With some friends you play board games with and with other friends you go to church. With others you talk about daily things and with others you share your deepest thoughts.

I like to talk to my friend that lives in town about things that bother me, but with my neighbour I will only talk about baking cakes. Sometimes I go to the services on a Sunday, but I don't like to go to the Bible study group. I would rather do my needlework with some other friends.

Friends that are accessible

Participants also identified friends as people with whom they could relate, based on their availability and the content of the news or the level of interaction. This kind of engagement is based on the accessibility of people with whom to share impersonal information and is mainly done for the purposes of companionship. Participants did not regard these persons as intimate friends:

I will go and just chat with anybody when I see them in the hallway.

The bit of news I have I will share with anybody I want, they are not intimate friends.

When I go for a walk on the premises, I will talk to some people for companionship. We will talk about everyday life, but I will not share intimate detail with them at all.

Shared interest friendships

Some friendships consist of the following shared interests:

Friends who have a variation of shared interests

The shared love for activities contributes to a group identity and a familiarity with one another. The shared life history may contain examples such as memories of familiar old folk songs. The group identity is further enhanced through shared interests that stimulate creativity and include a variation of interests like needlework, playing board games and arts and crafts:

I love to sing; the other day we had a singing competition. It's nice when a few of us are able to sing all of the old folk songs together that we grew up with. It makes me happy when we can sing together.

I love to do embroidery and all of our friends belong to a needle and stitch group.

It's nice to have friends that like to do the same things as you do. We like to play cards and board games when we can, other times we will watch the news together. I like it the most when the arts and crafts lady comes and teaches us to do some creative things.

Activities that include religious interests also occupy other residents.

Friends with shared religious interests

Participants identified friends as people with whom they could share religious practices, but who also have the same kind of view of God. When there are shared views and a common involvement, the participants are more inclined to delve deeper into God's word and a more meaningful exploration of their common views is experienced:

We pray together and Bible study is important in our friendship.

I like to talk about my religion with my friends and it's really nice when they feel the same as I do about God. We watch religious videos together and other times we listen to a service on the radio. With my friends I'm able to explore and delve deeper into God's word.

The value of religious friendships and the necessity to maintain them are expressed in the words of the following participant. She perceives these types of friendships to be essential in coping with her current circumstances:

If I didn't have my religious friends I would have been a wreck. They give me strength that I would not have had otherwise.

Similar life experiences

Participants felt more comfortable with people with whom they could relate with regard to life experiences. Associating with the other person's experiences promotes intimacy and a longer lasting friendship. Shared life experiences facilitate an understanding of the person's history, which in turn creates a comfortable atmosphere when the friends are together and sharing memories of a life well lived:

The same life experience and religion is the easiest way to get along with a friend. The other person understands me better and is more empathetic with my circumstances.

If we share the same life experience, I will share more intimate things with the person. I feel more able to relax in the person's company knowing that the person will not judge me.

I have long lasting friends, even coming from childhood. We talk about the old days and share new information about our lives. The shared history enables me to remember who I was years ago when I was young. It comforts me to be able to remember my life, especially the good things.

Friends with whom one shares personal information

Sharing views on books, religion and personal dilemmas, for example, seems to be important for older people to develop more intimacy and to engage in sharing on a deeper, “soul” level. A certain degree of trust and appropriate reciprocation by the other person is a prerequisite for the disclosure of personal information. A deeper understanding is thus created between them, their connection reaches a higher level because of these shared experiences and supportive friendships are thus maintained:

I have one friend that I really click with, there is intimacy. I call it a soul friend.

I can't have discussions with everybody about books, religion or my problems; I don't want to talk to people that I can't share my views and worries with.

I like it when I'm able to share my concerns about my children with my neighbour, because she truly understands me and also gives me valuable information that inspires me. I will not share any information with the other neighbour, because we had a confrontation after she told everybody about my secrets.

HOW MEANING IS SUSTAINED THROUGH FRIENDSHIP

The perception which a person has of a valuable friendship relationship involves the contribution a friendship makes towards the feeling of their definition of friendship fulfilment.

Older people promote meaning in friendships in the following ways:

They value friendship

Throughout this study it seemed that people gave meaning to their friendships when they recognised the value of their friendships and certain relational qualities that make friendships possible. These include, for example, having strengths like adaptability, accepting life circumstances, knowing the value of life, seeing friendship and religion as anchors in their lives and emotionally mature friendships. These qualities promote a degree of thankfulness for valuable friendships and a realisation that friendships are precious:

My friendships seem to adapt immediately to new circumstances, because we have learned to accept our circumstance as we get older.

As you age, you appreciate life better. Each morning when I wake up, I thank God that I'm alive because you never know which night is your last. For this reason we appreciate one another in our friendships better, knowing that we might never see one another again.

You don't have to be afraid, because if God is with you there is nothing to be frightened of; God and my friends are the anchors in my life that helps me when I'm in need.

I think that the older a person gets, the more he is able to control his emotions. For this reason I think we have more emotionally mature friendships. We know and understand each other better.

Through support and moulding one another

The current circumstances and logical sequence of events assist participants to deal with their own concerns and fears of old age and death. As people get older, their needs in terms of friendships change. Feelings surrounding old age and the inevitability of death need to be expressed. Sharing these thoughts, feelings and fears with people who are similar to themselves make their concerns more manageable and it combats loneliness.

The following is a participant's sentiments about the value friendships have for living a fulfilled life.

I know that I have to die some day, but for now I'm living and I want to live to the fullest, especially with my friendships. I hope you realise that residential care is just a place where you are waiting to die, but I share this experience with my friends and this helps me to overcome my fear of dying and I feel less lonesome. I have this need to tell my friends how I feel about getting older and dying some day. Yes, sometimes the shock comes over me when I realise that I can be next in line and have to go to the sick booth here. All of my friends around me die and I also have to go, but at least I have lived a fulfilling life and when I have to go, I will have peace in my heart knowing that I have had great friendships.

People also develop empathy in friendships. They realise the valuable contributions that people make to maintain the friendship and allow themselves to be shaped and developed:

When I'm able to learn lessons from people, I regard the friendship as valuable. I learn something from them and they learn things from me. I learned from my best friend how to raise children, because we had our children about the same time.

Friendship shaped me and gave me insight into others' pain.

One of the participants realised the importance of living in the present and of appreciating the value of friends while she was are alive. By making an effort while the person is alive, instead of only going to trouble to show one's respect once that person has died, one will be able to maintain friendships for longer:

People go through a lot to go to funerals. Why not try just as hard to visit somebody while he's alive?

Receiving support from others and accepting the uniqueness of every person are regarded as important components of friendships. They create opportunities to learn from one

another and to live in peace with those around you. It is this appreciation of support that makes friendships worthwhile.

My friends are the anchor in my life and I learn a lot from them.

I have learned to live in peace with everybody.

I have learned to accept others the way they are.

Maintain friendships through trustworthiness

It is not always easy to maintain quality friendships. Without a perception of transparency and honesty, the other person's intentions may be distrusted:

It counts a lot when people are honest. It is difficult to maintain friendships when people don't reveal their true selves to me. [Then] I can't trust them when they tell me that they truly care about me.

In this residential care facility, trustworthiness is a big concern. The decline of memory in old age might cause forgetfulness of private information and people might expose sensitive information to others. Older people want to know that there is somebody who will not reveal sensitive information to others and will not leave them vulnerable and open to judgment:

Older people like to talk about each other in this home. I think they are lonesome and then they begin to tell other people's worries and they may forget that it is a secret. That is why it is difficult to be emotionally intimate with one another, because you can't trust the person and it leaves me open for others' scrutiny.

For most of the residents, friendships meant that people should be able to confide in each other (even about religious views) in order for a quality friendship to prosper. Fear of rejection because of one's religious views can make a person hesitant to reveal such views. Someone else's friendship may not even be regarded as important if trust is not a part of the friendship experience:

I only have certain people that I will confide in about my religious views, because I know that they will not judge me. I would like to tell people more about my religion, but I had this incident where I told one of the ladies about my religious beliefs when she asked me about it. She went and told her preacher about what I said: he came and confronted me and told me to never again tell that lady such rubbish. From then on I dare not tell my religious views to just anybody again, because everybody will know your business. I don't even want to be friends with somebody I cannot trust.

A deepened level of intimacy

A deeper level of intimacy between friends is expressed in the following example:

Last Sunday we went to church and the sun shone through the leaves. I told the others that [it] looks like we are riding through paths of gold. One of them said that the leaves are a nuisance and messy. It was so beautiful for me, but one of them told me that it represented death in autumn. I then told her that if there wasn't death there wouldn't be life. The trees are almost naked and then you see the new blossoms come to life. This is the same with human life. There has to be death in order for new life to come about. It is beautiful when a new baby is born and sad when somebody dies. We have to rather celebrate the life the person has led instead of grieving about it. I hope people throw a party when I die, because I like the life I'm living. When we as friends have conversations like these, I feel closer to them than ever before.

These friends share their perspective of life in the here and now, but also of life after death. This shared interaction helps to form richer friendships and give meaning to their friendship. Their conversations give new insight into life lessons learned: this woman realised that even the trees have to die in order for new life to spring forth. People are a part of the whole process of life and death.

Friendships and compassion

Some people show compassion for their lonely friends whose family do not visit them. They provide companionship for the individual and a new connection is formed with other people who were avoided after the loss of a close friend.

There is a lady in the sick booth that I go and visit everyday. She was my neighbour and she is all alone, because she doesn't have any family that visit her and I keep her company. It makes me feel that I still mean something to somebody and that we are connected in some way. Other friends' deaths caused me to avoid people, but since I visit this lady I feel different.

When people are actively involved in the lives of others and when they are dealing with the emotional pain of losing a beloved friend, their fear of getting too involved with others and getting hurt might dissolve and valuable support might be given to their friends. A feeling of usefulness may arise and former barriers may dissolve when a renewed connection with other people is made.

I did a lot for one of the ladies living here, everyday I went and visited and helped where I could. Although I still love people, I decided never to get that involved in somebody's life again, it's a painful thing. But I know the people need me to help them when they can't help themselves and that is the reason I decided to get involved again and some of my fears for getting too close to other people got better. I'm one of the few healthy people and I know that I should help them, because I know it was their time to die and I have worked through the pain [that] I feel.

I feel useful for being able to provide companionship to the people who look lonesome, because they can't wait to talk to me when I pass them in the television room. It feels as if I have known some of them for years now.

BARRIERS TO FRIENDSHIP RELATIONSHIPS

Barriers to friendships are those circumstances and emotions that create the perception of distance between friends.

The following are examples of circumstances that can create barriers to friendship relationships.

The potential loss of friendships

Repeated incidents of losing friends through death creates an atmosphere of distrust that serves as a barrier for creating emotional connections with other people, because the potential of losing another friend is too great. This may cause people to avoid the physical space that reminds them of losses. The intensity of this avoidance is illustrated as this woman expresses that she would rather die than spend any time in the sick booth and be reminded of death:

All of my good friends died when I was younger. Since then I don't want to be intimate with anybody, it's too painful. I think the loss may prevent me from forming other friendship relationships. It will get better when I work through my thoughts, but for now it is difficult for me.

I never go to the hospital part of this place because it reminds me of death. When I went the first time there I felt sick, there is just suffering. I want to be dead before I have to go that place because every month somebody dies.

Resentment in friendships

Some individuals prefer not to have close friendships. Some are resentful toward others, since they do not attach the same meaning to the friendship. People may also be scared to engage in new friendships due the loss of a loved one, and these individuals will isolate themselves from other people through their own reasoning. This could manifest as an unwillingness to increase their personal contributions to their friendships or a negative mindset with regard to the rationale for entering into a friendship:

There are people here that don't talk to anybody.

Here is a man that is so bitter; I don't think people would like to be his friend.

The other day the man who is living on the other side came to me to confide in me and he was so negative about everything. He told me that he is never going to visit his friends again, because they are not good friends. He doesn't want to see them again, because if he does go to visit them, they will not visit him of their own accord. I don't know what happened to him that he is like that. All I know is that after his wife died he became like this.

THE MAINTENANCE OF QUALITY FRIENDSHIPS

To maintain a quality friendship means to have the necessary means to be able to keep in contact with friends through the course of time. This research identified three aspects that made it possible for older people to maintain quality friendships, namely mobility, proximity and technology.

Mobility

The importance of friendships with younger people is emphasised in the following responses. There is a realisation that younger people not only provide mobility for older people (for example by taking them to other friends), but are also friends themselves in whom older people can confide or upon whom they can depend to buy groceries. The long-term involvement of younger friends results in valuable friendships with people who understand their needs and preferences for certain grocery products:

At times when we can't do anything anymore for each other, young people are there to help us. They take us to friends that live in the town and if it wasn't for them, I wouldn't have been able to maintain my friendships the way I have.

There is a young lady that comes here every Thursday. I like to share my troubles with her sometimes. Most of the time she takes me to the doctor or she buys my groceries for me. She knows what kind of products I prefer, she has been coming here the last five years or so.

The fact that the older people acknowledge that they depend on friends to provide nursing care emphasises the necessity for supportive friendships. As their physical capabilities

decrease, the free movement of these individuals become restricted. Because they are dependent on friends, they highly value their friendships and they feel cared for when a person supports them physically:

You get dependent on your friends. I know I'm dependent.

After my legs gave in I can't walk to the others' living [quarters] on the grounds, it's too difficult. Maybe I will visit in the summer, but in the winter it's too cold.

I was sick last week and my neighbour took well care of me and brought me all kinds of things to make me feel better, even helped me make my bed.

It is important to feel that somebody cares for me and helps me when I need them.

Proximity

Residential care provides the means for older people to maintain meaningful relationships, even if people from outside the premises do not have the energy to do what is necessary for the elderly person. Residential care has facilities to cater for immobile residents and to provide for their specific needs:

We don't see the town's people here; I think they don't have any energy for our old people.

When I struggled with my leg, my family told me that I will have to come and live here, because I might fall off the stairs where I first lived. They told me the facilities are better in residential care.

The living arrangements of the participants in residential care provide the means to engage in meaningful friendships: residents live close to one another and different kinds of opportunities are provided for interaction with one another:

I like the comfort in residential care and the sociability of the place. The units are next to each other and this contributes to the care we can give each other.

Sometimes my neighbour needs me to put batteries in her hearing piece. Then she can just call me and I can come and help her.

Participants expressed the isolation they felt as they aged and lived outside of residential care without the companionship of other older people. A spark of hope is regained when one older person reveals the increased opportunities to initiate friendships that residential care now provides:

When you are older, you are [house-bound] and maybe you have contact with your family if they are near. It is difficult to make friends when you are old. But it is going better now that I'm in residential care.

I felt very lonesome when I was living alone in some units outside of residential care; there were only young people living there and no one wanted to socialise with me. When my children brought me here I felt as if I'm at home and everybody was really nice to me.

Residential care is a solution for participants who do not want to be a burden to their family. The participants realise the personal space that they and their family need in order to live their own lives. The expression of individuality is felt when residents have a choice to either interact with their friends or not to interact with them when privacy is needed:

I don't want to live with my children, because I know that I will be a burden to them and what will they do with me when they want to go somewhere? I like living here, because you can love each other if you want to or you can do your own thing.

The routine that residential care provides makes these residents feel safe. Regardless of the routine, the residents can still express themselves, concentrate on their own interests and make decisions according to their own preferences:

On a Sunday after church you come home and read your church pamphlet and at half past twelve you go to eat your Sunday lunch. Then I come back and read a

bit. I like this routine, because it's comfortable and I feel good when I have some freedom to do as I like. I can't wait to come and read after lunch on a Sunday, it feels so peaceful.

They are building better residential rooms for us, but I'm going to stay here. I feel safe here and all of my things comfort me. I've been in this room for ten years now. I suppose the new rooms are bigger, but I just like being here.

However, there are certain restrictions as well. Residential care is scarce, expensive and not everybody gets the opportunity to be in this kind of environment:

I'm the first resident that got a place in this institution in the last three years. This is because of the scarcity and these places really cost too much for the average person.

Technology

Modern technology, like the short message system (SMS), also helps older people to maintain friendships that they would not otherwise have been able to maintain. This enhances their emotional connection with other people from different places. The financial burden of staying connected with friends is removed by these technological aids. Modern technology also helps to enhance fast communication, to keep up with relevant information around the globe and even to become acquainted with other cultures when the person's immobility prevents him or her from visiting the friend or family in a remote destination:

I like to SMS my friends. The other month I sent 172 SMSs.

Throughout my life I have visited many places, even America. There I met wonderful people that I still e-mail and keep in contact with through SMS. It is a wonderful and cheap way to keep in contact and I tell them everything that is happening in South Africa and they tell me very interesting things that I didn't even know about in America. I'm really blessed to know so many nice people. I'm

not able to visit them and am glad that I get to experience more about their culture.

An internal communication telephonic system is currently being used in this home. People can phone one another without any cost. This is valuable if someone is physically or psychologically in need:

We have an internal communication system. You can talk to anybody on the premises by typing in a number and all costs are free. It is nice when you need to talk to somebody about problems or if there is a medical emergency.

DISCUSSION

This study reports the experience of friendship relationships among older females in residential care. The literature confirms that women's friendships are based on intimacy and on personal and emotional sharing. When socialising, the sharing of emotions serves the purpose of emotional support. Some new insights were gathered in this study concerning shared activities, interests and religion as part of the experience of friendship for the older female. Literature indicates that friendships of the older male, rather than those of the older female, are characterised by shared interests and activities (Ham, Hayes & Hope, 2005).

Older people have diverse views of the different types of friendships and the meaning they hold. Some individuals prefer to have fewer friends, while others prefer a variety of friendships. Older people create and attach different meanings to friendships as they seemingly have different perspectives on the particular needs that have to be fulfilled in their relationships. These needs include the sharing of non-personal or personal information for companionship; this may entail daily topics of conversation or more personal information concerning uncertainties (Adams & Torr, 1998). The need to experience shared interest may be fulfilled through daily activities, or a deeper level of understanding may be shared. The latter may involve religious activities, such as reading the Bible together or praying together. Other individuals find communion through the sharing of similar life experiences, thus creating a shared identity through these previous

experiences. Companionship is experienced through different types of friendship that fulfil different needs of individuals. The companionship enables a deepened level of quality friendships and broadens the possibilities of support systems. If different resources are recognised as possible support systems, they will unlock the endless possibilities of resources that might serve as support systems for the older person (Miura, Kriyasu; Yamasaki & Sumi, 2004; Sin, LoGerfo, Belza & Cunningham, 2004).

Meaningful friendship relationships are created by certain relational qualities described in the discussion of the findings that include, for example, adaptability, accepting life circumstances, knowing the value of life, seeing friendship and religion as anchors in their lives and friendships that are emotionally more mature. Similar qualities are described in the literature as contributing to relational qualities (Louw, Van Ede & Louw, 1999; Roos, 2004). Relational qualities promote meaning in friendships, and friendships are regarded as a valuable resource where support can be provided: Through their mutual support, friends help to mould one another. Furthermore, a trusting bond and a deepened level of intimacy between individuals enhance the different meanings given to the type of friendship relationship in which a person engages. The trusting bond and the knowledge that support is available promote the maintenance of quality friendships. This might prove to be valuable resources for the older individual. In instances where the family, for whatever reason, cannot provide the necessary support for the older person, the support from friends can serve as a substitute for the support which the family cannot provide (Bergin & Walsh, 2005).

Blieszner (2001) found that friends rather than family become older peoples' confidants and they assist individuals in experiencing a deeper level of companionship. However, trustworthiness is seemingly a significant concern to the participants in residential care as they feel they cannot trust some of the residents. When trust is not present in a friendship, older people might not be able to form deeper emotional connections through disclosing personal information. This may be because they fear that the confidant will betray their trust (Adams & Torr, 1998). When trust is experienced in the friendship relationship, the individual might experience transparency and honesty in the individual. The feeling of

loneliness will then decrease through the companionship which trusting friendships provide. It is, therefore, important that the support systems created for older people comprise trust, as this influences the quality of the friendship relationship which is experienced (Aspinwall & Staudinger, 2003; Bergin & Walsh, 2005; Magai & Mcfadden, 1996; Seligman & Csikszentmihalyi, 2000; Wynchank, 2004).

Repeated incidents of losing a friendship or a loved one can leave a person feeling lonely, unable to create emotional connections with other people and temporarily with unfulfilled needs. However, when older people focus on positives aspects, like providing companionship to other sick people, they feel useful again. New friendships are formed that provide the necessary support and care for others. Reciprocal support systems are created for both the giver and the recipient of support. The barrier of not being able to provide support dissolves and simultaneously the recipient obtains the necessary support (Burger, 2004; Hughes, 1995).

Friendship relationships are not limited by age. Certain friendships are created with younger people when they fulfil the older generation's needs of mobility (Belsky, 1999). Companionship is created and living necessities are provided (for instance, buying groceries). Younger friends are valuable when they help to maintain older people's friendships by providing transportation to visit friends. Roos (2004) describes this as informal support given by people with no significant relationship between them. This type of friendship can take on many forms from giving advice, affection and companionship to assistance with transportation and nursing care. Informal support can prove to be valuable in providing physical support for the immobile person or in eliminating difficult technicalities, such as the inability to care physically for oneself. Informal support is a valuable resource that assists the older community when supportive resources from family are not available (Ferreira, 2005; Fourie, Meyer & Wilders, 2004; Loeb, 2006).

Proximity proves to sustain the maintenance of supportive friendships. Meaningful friendships are maintained and technical problems such as safety and accessibility to care

are resolved. Friends are available to provide in physical as well as emotional needs. According to Duner and Nordstrom (2005), older people have strategies to care for each other physically and assist each other in coping with everyday life. This was illustrated in their study where participants acknowledged the usefulness of their friends and engaged in different strategies to take care of each other physically. These strategies included gestures like giving excess food, making beds for people who cannot do it for themselves or to assist people when they are sick. Friendships that enable better functionality enhance the older community's quality of life (Bouwens, 2004). It is, therefore, important that support systems are created through the use of friendships that can assist in everyday tasks and emotional needs (Allen & Brock, 2000; Stokes, 1995).

The maintenance of friendships is further enhanced through modern technology (Gergen, 2000). In today's society more friendships can be maintained than in the past. Technology provides the means to enable people to keep in contact over longer distances and over longer periods of time than before (Baron & Byrne, 2000; Gergen, 2000). New relationship patterns are established that do not necessarily require face to face relationships, but can take the form of relationships where people only communicate using the telephone or internet. This enables older people to maintain emotional attachments. Technology is, therefore, an integral part of maintaining quality friendships and a medium through which emotional connection is promoted (Gergen, 2000; Weiten & Lloyd, 2000).

CRITIQUE AND RECOMMENDATIONS

Critique may be given with regard to the time and the scope of the study. The time in the field of study was only two months, which is not long enough to engage in an in-depth qualitative study with participants. A prolonged engagement is recommended for future studies. The scope of the study can be broadened by including other areas in the South African context. It may be that the findings of this study are only applicable in the region that the study was conducted.

Further studies should explore the different meanings associated with different friendship patterns and also include older male persons in the research. An evaluation should also be done of possible intervention strategies to improve mobility, the accessibility of residential care and the provision of modern technology to enhance friendships as supportive relationships among older persons.

The different perspectives and the meaning attached to different friendship patterns can be explored through different data gathering methods, for example diaries or collages. These techniques are important for reflexivity, which enables the participants to better understand the different kinds of friendships in which they engage and to form new insights about what these friendships mean to them (Roos & Lombard, 2003).

Some insights have already been gathered in this study concerning mobility, proximity and modern technology to enable friendships. Further studies can explore the needs which residential care fulfil through making accessibility between residents easier, thus enabling residents to support one another. Proximity may be a solution for immobility experienced in the older community.

Intervention studies should also explore the possibility of training older people in modern technology, such as e-mail and the short message system (SMS). The distribution of cellular phones to older people will make it possible for them people to access and maintain valuable communication systems as well. This will assist older people to keep in contact with friends outside residential care units through SMS and e-mail.

An internal communication system provides residents with a free connection with other residents. When an emergency arises, this system is very valuable. This technology is affordable and can easily be explained to the average older person.

CONCLUSION

It is important to recognise the value of friendships in promoting the well-being of the older individual. A variation of resources is recognised when exploring the friendship

relationships of the older person. Friendships are associated with different meanings for each older individual, but the emotional as well as physical support friendships provide cannot be denied. At an emotional level it provides companionship, decreases loneliness and assists in any difficulty an older person experiences. It also creates physical support such as assistance for immobile or sick people.

Invariably, older people's support systems mostly consist of friendship relationships and this helps to lessen the burden on the family to provide support. The support that friendships provide to the older community helps to decrease loneliness and to improve quality of life.

REFERENCES

- Adams, R.G. & Torr, R. (1998). Factors underlying the structure of older adult friendship networks. *Social Networks*, 20, 51-61.
- Allen, J. & Brock, S.A. (2000). *Health care communication using personality type*. London: Routledge.
- Aspinwall, G. & Staudinger, M. (2003). (Eds.). *A psychology of human strengths: Fundamental questions and future directions for a positive psychology*. Washington: American Psychological Association.
- Baron, R.A. & Byrne, D. (2000). *Social psychology*. (10th ed.). Massachusetts: Pearson Educational Inc.
- Belsky, J. (1999). *The psychology of aging: Theory, research and interventions*. (3rd ed.). Pacific Grove: Brooks/Cole.
- Berg, B.L. (2001). *Qualitative research methods for the social sciences*. (4th ed.). Boston: Allyn and Bacon.
- Bergin, L. & Walsh, S. (2005). The role of hope in psychotherapy with older adults. *Aging and Mental Health*, 9(1), 7-15.
- Berglund, A.L. & Ericsson, K. (2003). Different meanings of quality of life: a comparison between what elderly persons and geriatric staff believe is of importance. *International Journal of Nursing Practice*, 9, 112-119.
- Blieszner, R. (2001). "She'll be on my heart": intimacy among friends. *Generations*, 25(2), 48-54.
- Bouwens, C. (2004). Geriatric assessment. *CME*, 22(11), 614-618.
- Burger, J.M. (2004). *Personality*. (6th ed.). Australia: Thomson.
- Creswell, J.W. (2005). *Educational research: Planning, conducting and evaluating quantitative and qualitative research*. New Jersey: Pearson Educational Inc.
- Duner, A. & Nordstrom, M. (2005). Intentions and strategies among elderly people: Coping in everyday life. *Journal of Aging Studies*, 19, 437-451.
- Ferreira, M. (2005). Research on ageing in Africa: What do we have, not have and should we have? *Generations Review*, 15(2), 32-35.
- Field, E.M., Walker, M.H. & Orrell, M.W. (2002). Social networks and health of older people living in sheltered housing. *Aging and Mental Health*, 6(4), 372-386.

- Ferreira, M. (2005). Research on ageing in Africa: What do we have, not have and should we have? *Generations Review*, 15(2), 32-35.
- Field, E.M., Walker, M.H. & Orrell, M.W. (2002). Social networks and health of older people living in sheltered housing. *Aging and Mental Health*, 6(4), 372-386.
- Fourie, E., Du P. Meyer, C & Wilders, C.J. (2004). The relationship of joy of life and quality of life with maturation and leisure time activity participation. *South African Journal for Research in Sport, Physical Education and Recreation*, 26(2), 51-65.
- Gergen, K.J. (2000). *The saturated self: Dilemmas of identity in contemporary life*. New York: Basic Books.
- Ham, L., Hayes, S.A. & Hope, D.A. (2005). Gender differences in social support for socially anxious individuals. *Cognitive Behaviour Therapy*, 34(4), 201-206.
- Hellström, Y. & Hallberg, I.R. (2004). Determinants and characteristics of help provision for elderly people living at home and in relation to quality of life. *Scandinavian Journal of Caring Sciences*, 18, 387-395.
- Heppner, P.P & Heppner, M.J. (2004). *Writing and publishing your thesis, dissertation and research: A guide for students in the helping professions*. Belmont, CA: Thomson.
- Holmen, K. & Furukawa, H. (2002). Loneliness, health and social network among elderly people: A follow-up study. *Archives of Gerontology and Geriatrics*, 35, 261-274.
- Hughes, B. (1995). *Older people and community care*. Philadelphia: Open University Press.
- Johnson, D.W. (2003). *Reaching out: Effectiveness and self-actualization*. Boston: Pearson Education Inc.
- Kahn, J.H., Hessling, R.M. & Russell, D.W. (2003). Social support, health, and well-being among the elderly: what is the role of negative affectivity? *Personality and individual differences*, 35, 5-17.
- Karinkanta, S., Heinonen, A., Sievänen, H., Uusi-Rasi, K. & Kannus, P. (2005). Factors predicting dynamic balance and quality of life in home-dwelling elderly women. *Gerontology*, 51, 116-121.
- Leedy, P.D. & Ormond, J.E. (2005). *Practical research: Planning and design*. (8th ed.). Columbus, Ohio: Pearson Education Inc.

- Loeb, S.J. (2006). African American older adults coping with chronic health conditions. *Journal of Transcultural Nursing*, 17(2), 139-147.
- Louw, D.A, Van Ede, D.M. & Louw, A.E. (1999). *Human development*. (3rd ed.). Cape Town: Kagiso Tersiër.
- Lin, G. & Langen, S. (2001). Making the transition from family support for the elderly to social support for the elderly. *Chinese Sociology and Anthropology*, 34(1), 35- 48.
- Magai, C. & Mcfadden, S.H. (Eds.). (1996). *Handbook of emotion, adult development and aging*. California: Academic Press.
- Makiwane, D., Schneider, M. & Gopane, M. (2004). *Experiences and needs of older persons in Mpumalanga*. Nelspruit: Department of Health and Social Services.
- Miura, H., Kriyasu, M., Yamasaki, K. & Sumi, Y. (2004). Physical, mental, and social factors affecting self-rated verbal communication among elderly individuals. *Geriatrics and Gerontology International*, 4, 100-104.
- Pope, C. & Mays, N. (Eds.). (2000). *Qualitative research in health care*. (2nd ed.). London: BMJ Books.
- Rogers, S.W. (2003). *Social psychology: Experimental and critical approaches*. Philidelphia: Open University Press.
- Roos, V. (2004). Intergenerational interaction between institutionalised older persons and biologically unrelated university students. *Journal of intergenerational relationships: Programs, policy and research*, 1(2), 79-94.
- Roos, V. & Lombard, A. (2003). Interdisciplinary collaboration: An ongoing community narrative. *Journal of Community Psychology*, 31(5), 543-552.
- Routasalo, P. & Pitkala, K.H. (2003). Loneliness among older people. *Reviews in Clinical Gerontology*, 13, 303-311.
- Seligman, M.E.P. & Csikszentmihalyi, M. (2000). Positive psychology: An introduction. *American Psychological Association*, 55, 5-14.
- Silverman, D. (2001). *Interpreting qualitative data: Methods for analysing talk, text and interaction*. (2nd ed.). London: Sage.
- Sin, M.K., LoGerfo, J., Belza, A. & Cunningham, S. (2004). Factors influencing exercise participation and quality of life among elderly Korean Americans. *Journal of Cultural Diversity*, 11(4), 139-145.

- Stokes, G. (1995). *On being old: The psychology of later life*. London: The Falmer Press.
- Sugisawa, H., Shibata, H., Hougham, G.W., Sugihara, Y. & Liang, J. (2002). The impact of social ties on depressive symptoms in U.S. and Japanese elderly. *Journal of Social Issues*, 58(4), 785-804.
- Weiten, W. & Lloyd, M.A. (2000). *Psychology applied to modern life: Adjustment at the turn of the century*. (6th ed.). Australia: Wadsworth.
- World Health Organization. The rates of violent death. [Web:] <http://www.euro.who.int/document/mediacentre/fs1002e.pdf/> [Date of access: 8 June 2007].
- Wynchank, D. (2004). Old and sad-depression in later life. *CME*, 22(11), 619-622.
- Yeh, S.C. J. (2004). Living alone, social support, and feeling lonely among the elderly. *Social Behavior and Personality*, 32(2), 129-138.